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Using Empowering Processes to Create Empowered Outcomes through the Family Development Credential Program: An Empirical Study of Change in Human Service Workers

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Indiana University of Pennsylvania

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USING EMPOWERING PROCESSES TO CREATE EMPOWERED OUTCOMES

THROUGH THE FAMILY DEVELOPMENT CREDENTIAL PROGRAM:

AN EMPIRICAL STUDY OF CHANGE IN HUMAN SERVICE WORKERS

A Dissertation

Submitted to the School of Graduate Studies and Research in Partial Fulfillment of the

Requirements for the

Degree of Doctor of Philosophy

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August 2010

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Title: Using Empowering Processes to Create Empowered Outcomes through the
         Family Development Credential Program: An Empirical Study of Change in
         Human Service Workers

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This study employed a quasi-experimental non-equivalent control group design with

pretest and posttest. Two waves of data were collected from a non-random sample of 180

human service professionals in Western and Central Pennsylvania using two research

instruments: the Social Work Empowerment Scale and the Conditions of Work

Effectiveness – II Scale. Descriptive and inferential statistical procedures were used to

analyze data. The purpose of the study was two-fold. First, this study sought to

understand how psychological empowerment is related to environmental conditions in

human service agencies as well as individual-level characteristics of workers. Results

showed that higher levels of psychological empowerment in human service workers to be

associated with: 1) more favorable conditions of empowerment in agencies (structural

empowerment); and 2) higher levels of education. Second, this research evaluated the

degree to which participation in a program called Family Development Credentialing

(FDC) affected change in perception of psychological empowerment. FDC is a unique

professional development experience that uses education as a tool by which human

service professionals can be *empowered* themselves while simultaneously learning

knowledge, skills and values associated with key tenets of strengths-based, empowerment

practice on multiple levels (being *empowering* and working to create *empowered conditions*). It was hypothesized that participation in the FDC program would be related to positive changes in levels of perceived psychological empowerment in workers. This hypothesis was strongly supported. Key findings showed that for persons who participated in the FDC program, change in psychological empowerment was higher at *all* levels of change in structural empowerment when compared to persons in the Non-FDC group. For the FDC group, when negative change in perception of structural empowerment occurred (apparent decline in agency conditions), *positive* change in perception of psychological empowerment still occurred. This suggested FDC acted as a buffer, or counteracted the negative effects of changing conditions in agencies for workers. A model-of-change framework using empowerment constructs is proposed for the FDC program. Promising implications for use of the model to understand the multi-level programmatic outcomes of FDC for workers, families, agencies and communities are discussed. Recommendations for future research are made.

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Father God, You tell me in Your Word, that Jesus is the vine, and I am the branch…that if I abide in Him and He abides in me, I can bear much fruit, but apart from Him, I can do nothing. For me, this work is a testimony of that - thank You for abiding in me through this journey, for helping me, for upholding me, for giving me the courage to go beyond what I ever believed might be possible. May the life-work that flows from this honor You.

Bob, for 18 years you have been my deepest love, closest friend, constant encourager and supporter. You saw this degree somewhere deep inside of me long before I ever did. Thank you for being who you are and for undergirding me every step of the way. Forever it is my joy to be married to you: "To love another person is to see the face of God." (*Les Miserable*).

Betsy and Barbara, you are two marvelous women who first introduced me to FDC and ignited the flame of passion for it inside of me. Thank you for "building knowledge" with me and for the many hours you gave in making this project come to fruition. Betsy: thanks for taking a chance on me as the 21st member of what was only supposed to be a 20-member Ph.D. cohort! John Anderson, I can't thank you enough for being the kind of educator you are and the personal hours you invested in this project – thank you for going "beyond." Robert Heasley, thank you for allowing me great latitude in developing this research and for offering constructive and critical feedback when needed.

Finally, I dedicate this dissertation to my parents: Dad, as you look down, may you always see that the "good work" that you and Mom began, continues to bear fruit. Mom: thanks for valuing education and teaching me to value it - and for being an encourager.

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CHAPTER I

INTRODUCTION

Perhaps propelled most outwardly by Barbara Solomon's work on empowerment

of the Black community in the 1970s, social movements (e.g. feminism and civil rights),

social action and community-based practice have solidified an empowerment tradition in

the broadest and most diverse aspects of the human service arena (Adams, 2003). For

example, drawing upon tenets of the National Association of Social Workers' (NASW)

Code of Ethics the sanction and mandate for empowerment practice by human service

professionals and organizations is confirmed in the Preamble and Article 6 of the NASW

Code of Ethics which challenges practitioners to promote social justice and social change

with and on behalf of clients (NASW, 1996). According to the Dictionary of Social

Work, empowerment is:

> Theory concerned with how people may gain collective control over their lives, so
> as to achieve their interests as a group, and a method by which social workers
> seek to enhance the power of people who lack it (Thomas & Pierson, 1995, p.
> 134).

Empowerment as an individual-level construct is referred to as "psychological

empowerment." As a multi-dimensional concept, it is concerned with: (a) how people

think about themselves, (e.g. self-esteem, competence, locus of control, motivation); (b)

how people think about and relate to their environment (e.g. critical awareness, ability to

mobilize resources, decision-making, problem-solving); and (c) the actions people take to

influence their environment or help others to influence their environment (Akey, Marquis

& Ross, 2000; Bolton & Brookings, 1998; Peterson et al., 2006; Speer, 2000;

Zimmerman, 1995; Zimmerman & Warschausky, 1998). Of importance to note in the

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above summarization is that while psychological empowerment is most often viewed at an individual-level of analysis, such a view is embedded in an ecological framework that includes an environmental or sociopolitical context (Wallerstein, 1992).

As an organizational-level construct, empowerment is dually focused. First, it is concerned with organizational efforts that facilitate psychological empowerment among members and organizational effectiveness needed to achieve goals (Zimmerman, 2000). Emanating from research in the field of organizational studies, it is concerned with how organizations create structural conditions in the workplace that reduce powerlessness (empowering organizations) (Kanter, 1979, 1988; Spreitzer, 1995). Second, emanating from the fields of community psychology, religious studies and sociology, a broader dimension to the construct is defined. This dimension focuses on efforts by organizations to impact the sociopolitical structure and create social change in the community e.g. organizational coalitions aimed at improving quality of life in a community; facilitating citizen participation in change efforts; avoiding community threats (Kane-Urrabazo, 2006; Peterson & Zimmerman, 2004; Zimmerman, 2000).

As a practice orientation in applied fields such as social work and community organizing, empowerment-oriented practice seeks to address the role powerlessness plays in creating and perpetuating personal and social problems (Adams, 2003; Breton, 1994; Gutierrez, GlenMaye & DeLois, 1995A; Itzhaky & Gerber, 1999). It is a goal that seeks to address powerlessness of oppressed or disenfranchised populations on an individual level as well as group, environmental and socio-political levels. In the context of practice, framework, empowerment strives to develop within individuals, families, groups, or communities the ability to gain power, recognizing that the effects of powerlessness can

occur on many levels, requiring efforts toward change to be directed at multiple levels including: (a) enhancing self-efficacy and skills; (b) increasing critical awareness of the links between personal struggles and larger public issues; (c) forging alliances with others in the social service delivery system; and (d) taking action to create personal, interpersonal or social change (Adams, 2003; Breton, 1994; Gutierrez et al., 1995A; Miley & Dubois, 1999; Gutierrez, Parsons & Cox, 1998).

Problem Statement

In spite of strong historical roots of empowerment in human services, professional mandates supporting the intended outcomes of such practice, as well as highly developed conceptual foundations for practice methods found in the academic literature, findings from studies that have examined the multi-dimensional goal of empowerment reveal a gap between theory and outcomes. The literature suggests three separate but related factors that contribute to outcomes of empowerment that are far less substantive or transformative than those envisioned in practice principles, mandates and conceptual frameworks.

First, while small in number and scale, findings from studies that have examined how practitioners conceptualize empowerment suggest that empowerment is generally viewed in terms of a psychological change process, and not as a process that includes challenging social structures or pressing for political action in order to create empowered outcomes (Ackerson & Harrison, 2000; Gutierrez, DeLois & GlenMaye, 1995). Thus, practitioners' conceptualizations of what empowerment is and the intended outcomes of an empowerment approach are less encompassing and transformative than empowerment frameworks described in the academic literature.

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Second, studies that have examined the effectiveness of workers in using empowerment practice methods, while also limited in number, reveal perceived limitations in workers' knowledge and skill base regarding the specific skills and tenets of such practice (see Everett, Homstead & Drisko, 2007). Both suggest the possibility that empowerment-based practice requires a unique and complex knowledge and skill set that human service professionals may not be adequately exposed to in formal or informal educational settings. Pinderhughes (1983) pointedly describes the challenge this presents in achieving empowerment outcomes:

> Assisting clients to exert their own power and to obtain needed resources should be the ultimate goal. In helping them reach these goals, we should attempt, or support others' attempts, to teach and model skills in creating alliances, building coalitions, overcoming organizational barriers, and engaging in political action. This means social workers must first of all develop these skills (p. 334).

> Workers who would empower clients and teach them about power dynamics must themselves understand the complexities involved. (p. 335)

Third, research points toward structural elements in human service agencies and the overall helping system that contributes to what is referred to as "a state of worker powerlessness." The ability of workers to be empowering in the context of their own state of powerlessness is a paradox that has been well articulated in the literature. On an individual level, a myriad of issues workers face in the context of their work have been identified as forces that create an overall lack of professional identity that contributes to a perception of powerlessness. This concept has most heavily been studied in the context of human service workers who identify themselves as "social workers." Causes of a lack of professional identity include the following: a lack of a discipline-specific scientific knowledge base, inability to differentiate Social Work from related disciplines, and a lack of dominance of Social Work professionals in any one practice setting (Frans, 1993).

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Additionally, workplace conditions e.g. limited decision-making power, high caseloads, little opportunity for professional development and overall system conditions such as constantly changing federal and state mandates and the requirements of funding bodies; fragmentation of services, increased pressure for accountability etc. have been identified as forces that contribute to individual and professional powerlessness in the broader field of human services (Breton, 1994; Frans, 1993; Gutierrez et al., 1995a; Itzhaky & Gerber, 1999; Kondrat, 1995; Leslie, Holzhalb & Holland, 1998; Pinderhughes, 1983; Cox & Joseph, 1998; Shera & Page, 1995; Turner & Shera, 2005).

Thus, while historically empowerment has been a goal focused on addressing powerlessness of clients on an individual level as well as environmental and socio-political levels research findings suggest various barriers that act as impediments to those goals coming to fruition.

The use of professional development educational efforts as a two-fold tool by which human service professionals can be *empowered* themselves while simultaneously learning knowledge, skills and values associated with key tenets of empowerment practice on multiple levels (being *empowering* and working to create *empowered conditions*) is one strategy that may hold promise towards overcoming such barriers. Only a limited number of such efforts can be found in the current literature, with research efforts aimed at evaluating the outcomes of such efforts being equally limited. This represents a fertile area of research and is the impetus for this study, which seeks to examine how empowerment of front-line human service workers is facilitated through participation in the Family Development Credential Program (FDC).

Phenomena under Study: The Family Development Credential Program

In the mid 1990's the Family Development Credential Program (FDC) was created through a research-policy collaborative between: Cornell University's Department of Human Development; New York State Department of State and its Community Action Agency network; and the New York State Council on Children and Families, composed of state family-serving agencies. At its core, FDC is a *bottom-up* approach that seeks to transform how workers and agencies work with individuals and families by employing a community-based, multi-faceted credentialing system for front-line workers of many disciplines e.g. drug and alcohol, Head Start, child welfare, community outreach etc.. FDC is a worker development program that uses classroom-based education and supported practice of skills as a two-fold tool by which human service workers can be *empowered* themselves while simultaneously learning knowledge, skills and values associated with key tenets of empowerment practice on multiple levels. As a program, FDC positions the worker as the initial *focus* of change as well as the *vehicle* for creating change in order to meet the transformative outcomes the program is designed to achieve. As of 2010, the credentialing program is offered in 20 states across the country.

In describing what is meant by empowerment, FDC employs the following definition:

> Empowerment is an intentional, dynamic, ongoing process centered in the local community, involving mutual respect, critical reflection, caring and group participation, through which people lacking an equal share of valued resources gain greater access to and control over those resources (Cornell Empowerment Group, 1989, p. 2).

Through an empowerment-based model that uses a critical reflection-action approach grounded in adult learning principals, I believe FDC aims to increase workers' sense of psychological empowerment through developing and/or affirming the following: sense of personal and professional mission; professional networks, alliances and support systems; self-care practices; sense of efficacy and professional competence in using strengths-based, empowerment-oriented skills and practice methods; and enhanced critical awareness relevant to issues of power in multiple contexts. These elements are highly consistent with dimensions of psychological empowerment proposed for human service workers in the literature that suggests psychological empowerment to be an important facilitator for system change, innovation, entrepreneurship, upward influence and increased effectiveness in employees (Spreitzer, 1997; Kanter, 1993). Specific to the transformative nature of the goals of FDC, psychological empowerment is believed to be a critical antecedent in facilitating conditions through which workers can: 1) realize empowered outcomes on a personal or individual level; 2) become empowering in their work with individuals and families; and 3) support and/or become agents of change for creating organizational and system level changes needed to support a paradigm shift to strengths-based, empowerment-oriented models of practice that facilitate lasting outcomes for families and individuals and the communities in which they live.

Study Context: The Pennsylvania Family Development Credential Program

The Family Credential Development program was initiated in Pennsylvania in January 2005 by the Community Action Association of PA. The Community Action Association of Pennsylvania (CAAP) serves as the coordinating body for the Program in

the State and is affiliated with Temple University[1] who provides national coordination for the FDC program. CAAP is the statewide association of Community Action Agencies, whose mission is to assist in moving people from poverty to self-sufficiency and improving community conditions. The role of CAAP in administering the PA FDC is to provide logistical and technical support to local communities implementing FDC, including such responsibilities as: (a) selecting, training and certifying course instructors; (b) training and certifying portfolio advisors; (c) reviewing and approving portfolios developed by workers; (d) developing and maintaining overall quality assurance measures for the program; (e) overseeing the examination process; and (f) overall programmatic management.

Through support of local advisory groups at the county level, CAAP maintains a strong commitment to a grassroots FDC model through which local communities determine how to best implement FDC. Local communities interested in establishing the FDC program are strongly encouraged to form an advisory group and must identify an agency willing to serve as a local sponsoring agency to CAAP for purposes of program management. The purpose of the local advisory group is to assist in building ongoing support for the FDC program in the local community and to support the efforts of the classes being held. Each local program also establishes an implementation team for every class that is held, consisting of instructors and portfolio advisors.

Since its inception in January 2005, Pennsylvania has graduated over 400 FDC credentialed workers, with more than 600 workers working towards their credential in the

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[1] Cornell University was the original University that hosted the Family Development Credential Program when it was conceived in 1996. In 2010, Temple University assumed that role on a national level, providing technical support and expertise to many Family Development Credential programs throughout the country.

current year of 2010. The PA FDC Credentials are issued by the continuing education program of Temple University which maintains a permanent database of credential recipients.

A Summary of Existing Research on the FDC Program

Eleven studies conducted on various aspects of the FDC program are known to date. In performing a literature synthesis of existing FDC research, Hewitt, Crane & Mooney (2010) grouped findings into four main areas: (a) effects of FDC training on workers professionally and personally; (b) effects of FDC training on knowledge, skills, and attitudes of workers based on self-report instruments that workers complete and/or document analysis; (c) effects of FDC training on agencies and systems, as perceived by workers, supervisors, trainers, and/or administrators; and (d) effects of FDC on families, based on family members' (clients) perception of how strengths-based practices have made a difference in their ability to accomplish desired changes in their lives.

In FDC research focused on changes in workers, several studies produced findings indicating that workers/trainees develop *personally.* Drawn from qualitative data collected via focus groups or individual interviews as well as document analysis, several studies (see Crane, 2000; Salandy, 2000, Hewitt, 2007 and Smith, McCarthy, Hill, & Mosley, 2007) found evidence of personal development related to: increased self-esteem, confidence, assertiveness, reframing of beliefs and values, personal growth and change, and feeling more flexible and open to change.

Studies pertaining to *professional* changes in workers also indicate that frontline workers increase their skills and competencies in family development practice, based on qualitative interviews, focus groups, surveys and document analysis. Data from workers

were the primary source of findings, although limited data from supervisors were also reported (see Bell & Hollingsworth, 2006; Crane, 2000; Hewitt, 2007, Palmer-House, 2006; Rolison & Watrous, 2003; Salandy, 2000; Smith et al., 2007; Svihula & Austin, 2004; Watson-Smith, 2003).

Quantitative measurement of the effect of FDC on workers is far more limited however, with research limitations of those studies making conclusions more tentative. For example, research by Alpert & Britner (2005) compared change in attitudes between FDC-trained and non-FDC trained child protective service workers, finding that FDC did not appear to be specifically responsible for the family-focused attitudes that *all* participants in the study evidenced. A limitation may be related to the way researchers measured family-focused attitudes and whether it was sufficiently discriminating to assess the effects of FDC training. Watson-Smith (2003) measured change over time in knowledge and skills of FDC-trained and non-FDC trained Head Start workers. Her study showed that the knowledge, skills and attitudes of FDC-trained workers were rated more highly over time as compared to non-FDC trained workers. However, her small sample size of 14 was a limiting factor in the strength of these comparative findings. Finally, Smith et al. (2007) compared changes in FDC-trained and non-FDC trained workers over time on several variables including self-esteem, mastery, job satisfaction, burnout, sense of professional mission and several topics specific to the FDC curriculum. Findings suggest that FDC-trained workers had higher overall scores in self-esteem, mastery, and professional self -esteem than their comparison group. Statistically significant differences between groups on burnout were not found. A limitation of this research is that

differences between experimental and control groups were not statistically controlled for during data analysis.

Gaps in Current Knowledge about FDC Outcomes

Critical outcomes of the FDC program are predicated on workers changing as well as workers becoming a tool or vehicle of change on multiple levels (personal level, practice with families and individuals, in their agencies, and beyond their agencies). While personal and professional changes in workers have been documented through previous FDC research, there are several gaps in knowledge that still exist.

First, in considering the conceptual/theoretical foundations that have grounded previous studies, a variety of theories have been used; however studies to date have not employed an empowerment theoretical framework to understand and measure change outcomes for workers. Because the FDC program was inherently conceived upon empowerment principles and research, use of empowerment constructs to empirically measure how workers change after participating in the FDC program, as well as use of or identifying variables that may influence such change, intrinsically made sense. Such research represents a first step in understanding patterns of relationship between the process and outcomes of empowerment in the context of an educational program designed to impact both.

Second, quantitative efforts at measuring change in workers who have been credentialed through the FDC program are far more limited in scope than qualitative efforts. FDC studies using quantitative methods have faced various measurement and sampling constraints that render the strength of findings to be somewhat tentative and inconclusive. Since workers are the focus and impetus of change in the FDC program,

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documenting program effects is critical in order to ensure the effectiveness of the program at multiple levels, facilitating answers to such questions as: 1) Is the theory behind the program correct?; 2) Is the program design effective?; and 3) Is the program being implemented effectively?

Purpose and Rationale of this Research

Personal and professional empowerment of workers is believed to be a critical ingredient in their ability to use empowered and empowering practices that facilitate lasting outcomes for the families and individuals that human service workers and agencies serve. The first purpose of this research was to empirically measure perceptions of psychological empowerment in front-line human service workers. The aim was to more clearly understand how psychological empowerment is related to both environmental conditions in the workplace as well as individual level characteristics of workers. Second, this research proposed an empowerment-based model-of-change framework that, among other things, suggested that participation in the Family Development Credential (FDC) program would increase workers' sense of psychological empowerment. This study sought to evaluate the degree to which participation in the FDC program affected change in perception of psychological empowerment. It took into account individual characteristics of workers and environmental conditions in the agency.

Research Questions

The following questions guided this inquiry:

1. What individual-level factors relate to perception of psychological empowerment in front-line human service workers?

2. How are perceptions of psychological empowerment related to perceptions of structural empowerment in the context of the workplace environment?

3. How does participation in the FDC program affect change in perception of psychological empowerment for workers?

Significance of this Research

This research represents three areas of significance. First, while there is increasing research suggesting a lack of empowerment of human service professionals and the impediment this condition presents in workers being able to effectively address powerlessness of clients on an individual level as well as environmental and socio-political levels, there is little research that documents efforts to remedy this situation. Researchers in the field of empowerment such as Perkins (2005) call for research approaches that would yield knowledge about real-world empowerment processes as well as more specific attention to what models of empowerment work with what populations in what settings and why. This research contributes to the scholarly literature base regarding how empowerment-based education may be a tool by which powerlessness of human service professionals can be addressed in order to facilitate professionals' ability to effectively use empowering behaviors in their practice on multiple levels.

Second, conceptual frameworks that describe how behavioral outcomes of empowerment are affected not only by psychological empowerment, but also structural conditions of empowerment in the organizational context in which persons seek to create change, have been primarily developed in management and health fields. Building a conceptual framework through which this relationship can be better understood in the

context of the unique and broader ethical mandates that empowerment represents in human services is a contribution this research makes.

Finally, the FDC program is inherently conceived upon empowerment principles and research; however no known empirical studies on the program have sought to use an empowerment theoretical framework to evaluate change and outcomes. This study is designed to show how empowerment constructs can be used to measure program effects, further contributing to the research base of what is known about FDC.

The next chapter provides a review of the current literature on the tradition and goal of empowerment in human services is presented. The focus of the chapter is to provide a comprehensive overview of the assumptions and tenets of empowerment-based practice in human services. While historically empowerment has been a goal focused on addressing powerlessness of clients on multiple levels, the literature suggests various barriers that may act as impediments to those goals coming to fruition. The limiting and diminishing effect such barriers have on the transformative outcomes of empowerment-based practice envisioned in the principles as proposed in the literature base is explored. To respond to such barriers, it is suggested that human service organizations must draw on their own human resources and consider staff empowerment as a strategy that can improve service delivery. The use of professional development programs as a vehicle of empowerment for workers in human services is discussed. The tenets of the Family Development Credential Program as an empowerment-based educational program are described in depth.

CHAPTER II

REVIEW OF THE LITERATURE

Tradition and Goal of Empowerment in Human Services

From a historical perspective, an empowerment-based helping orientation in human services represents only one of several traditions that have competed with other *rival* traditions that are often characterized as paternalistic (Simon, 1994). Understanding the nature of these traditions permits a clearer discussion of how an empowerment orientation is drastically different in its assumptions, approach and focus.

First, the *benefactor* tradition, discussed by Simon (1994), refers to workers who treat those they work with as victims who are a part of a group of unfortunate people that simply have been unable to manage their lives as well as those who are offering help. This perspective emanates from a medical model perspective that seeks to address clients' deficits. In essence, client needs are seen as indicators and results of pathology in clients' past and present. Two unconscious elements permeate such work: 1) workers' unacknowledged sense of being superior to clients in managing life; and 2) unacknowledged sense of powerlessness in the face of the complexities and seeming intractability of client's troubles (Simon, 1994). The latter causes workers to project the feeling of powerlessness upon clients, and as a result, perceive them to be inadequate and incompetent.

A second tradition that can be considered a competitor to an empowerment tradition is that of *liberator*. Like benefactors, according to Simon (1994), liberators view clients as victims of their life circumstances. However, in contrast to benefactors,

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personal deficits or pathologies of clients is not viewed as the problem, but rather the

environment in which persons live. Thus, liberators focus on restoring and transforming

the surroundings of the oppressed. In this tradition, workers' are considered to possess

the vision for a better world, as well as the ones who can *best* lead others down that path.

According to Simon, both traditions are considered paternalistic because practice is

conducted on behalf of people without their consent. In contrasting both of the

aforementioned practice orientations against an empowerment-based practice orientation,

Simon reflects the following:

> …the social worker functioning within the empowerment tradition seeks neither to
> lift a client "up" to a professional's level nor to lead clients out to a promised land
> mapped out previously or independently by the professional. Instead, the social
> worker who is intent upon client empowerment attempts to initiate and sustain
> interactions with clients and client groups that will inspire them to define a promised
> land for themselves, to believe themselves worthy of it, and to envision intermediate
> approximations of that designation that they can reach, in a step-by-step fashion,
> while remaining in reciprocal connection with each other and with a professional
> guide who offers technical and emotional help (1994, p. 7).

Assumptions and Tenets of Empowerment-based Practice in Human Services

Underlying assumptions of an empowerment-based framework focus on the

process of empowerment as a means by which the *outcomes* of empowerment can be

realized. These assumptions are well summarized in Table 1 by Miley & Dubois, 1999

(p. 4-5). The assumptions lay the foundation for what empowerment-based practice

frameworks might look like. Parsons, Gutierrez & Cox (1998), in synthesizing research

and practice on empowerment practice, identify four key components as particularly

significant to an empowerment practice framework that facilitates an empowerment

process for others. Table 2 summarizes the key tenets proposed (p. 4-5). As described,

Table 1: *Assumptions about Empowerment*

Assumptions about Empowerment
1. Empowerment is a collaborative process, with clients and practitioners working together as partners.
2. The empowering process views client systems as competent and capable, given access to resources and opportunities.
3. Clients must perceive themselves as causal agents able to effect change.
4. Competence is acquired or refined through life experiences, particularly experiences affirming efficacy, rather than from circumstances in which one is told what to do.
5. Multiple factors contribute to any given situation, and therefore effective solutions are necessarily diverse in their approach.
6. Informal social networks are a significant source of support for mediating stress and increasing one's competence and sense of control.
7. People must participate in their own empowerment: goals, means and outcomes must be self-defined.
8. Level of awareness is a key issue in empowerment; information is necessary for change to occur.
9. Empowerment involves access to resources and the capacity to use those resources effectively.
10. The empowering process is dynamic, synergistic, ever-changing and evolutionary.
11. Empowerment is achieved through the parallel structures of personal and socio-economic development.

empowerment is not something that practitioners "give to" or "do" *to* or *for* another, but rather an intentional, partnership-based process in which the traditional roles played by the "helping professional" and "client" are dramatically altered. Empowerment-oriented workers, supervisors and agencies understand that lasting outcomes for families and individuals are best achieved by recognizing the strengths of help receivers, focusing on

how they have successfully used such strengths in past and current situations. Strengths

then become part of the roles and tasks within the relationship and tools for change

(Cearley, 2004). The intended outcome of the helping process is equally altered, focusing

on facilitating the acquisition of power on one or more levels (individual, group and

community levels) where once it was lacking.

Table 2: *Key Tenets of an Empowerment Process*

Attitudes, Values and Beliefs	Developing a sense of control, efficacy, self-worth that promotes action on one's behalf as well as on behalf of others
Validation through Collective Experience	Recognizing and identifying collective or shared experiences as a means to reduce self-blame for problems and raise consciousness about larger forces in play in order to get at root causes of problems. Through collective experience, individuals can be motivated to seek change beyond themselves and direct efforts towards other systems such as the family or community.
Knowledge and Skills for Critical Thinking and Action	Through mutual sharing and support, learning to: 1) think critically about internal and external aspects of problems; 2) identify macro-level structures and their impact; 2) explore how one acquires values, beliefs and attitudes and how those affect the problem at hand; 3) access needed information in order to take action; 4) take action; and 5) assess the outcome of actions.
Action	Referred to as "reflective action" or praxis, individuals create strategies and develop resources, knowledge and skills needed to influence internal and external structures.

Efforts that strive to develop within individuals, families, groups, or communities the ability to gain power inherently require efforts toward change, both with clients and on behalf of clients, as well as on the part of the worker and the agency and system of which both the client and worker are a part. This type of change is pursued through the use of multi-level techniques and methods including: 1) enhancing self-efficacy and skills; 2) increasing critical awareness of the links between personal struggles and larger public issues; 3) forging alliances with others in the social service delivery system; and 4) taking action to create personal, interpersonal or social change (Adams, 2003; Breton, 1994; Gutierrez et al., 1995A; Miley & Dubois, 1999). In considering the scope and breadth of such efforts, Wallerstein (1992, p. 199) states the following:

> Taken as a whole, empowerment therefore reflects an understanding of the perceived and actual components of powerlessness and encompasses the linkages and interactions between change processes on an individual, organizational and community system-wide level. Empowerment becomes the avenue for people to challenge their internalized powerlessness while also developing real opportunities to gain control in their lives and transform their various settings.

Goals of Empowerment in Human Service: Are they being Achieved?

General findings from studies that have examined the multi-dimensional goals of empowerment in human services reveal outcomes of empowerment that are far less substantive or transformative than those envisioned in principles, practice mandates and conceptual frameworks. The literature points to three separate but related factors that may contribute to this difference: 1) worker conceptualizations of empowerment that are more limited and narrow in scope than those proposed in the literature; 2) lack of specific knowledge and skills of empowerment practice on the part of practitioners; and 3)

powerlessness of human service professionals as a result of agency and overall system conditions which in and of themselves are disempowering.

First, while small in number and scale, findings from studies that have examined how practitioners conceptualize empowerment suggest that empowerment is generally viewed in terms of a psychological change process, and not readily as a process that includes challenging social structures or pressing for political action in order to create empowered outcomes. For example, in an effort to integrate the theory and practice behind empowerment, as well as to more accurately delineate the process and interventions that empower, Gutierrez et al., (1995) used a case study model to identify ways in which human service workers conceptualize the concept of empowerment and to investigate ways in which they carry out empowerment practice.

Through transcription and analysis of personal interviews of 27 human service workers in varied fields of practice, the following themes emerged regarding key elements of empowerment: 1) control - both feelings of control and having the concrete means to control outcomes; 2) confidence - believing in one's strength and ability; 3) power - most readily couched in personal terms of recognizing one's own power, developing power to influence one's situation, and enabling and creating structures for change for individuals vs. political dimensions of power; 4) choices - working with individuals, groups or communities to develop means to make their own choices; and 5) autonomy - helping people to become self-directed and self-motivated. Three common elements of empowerment practice methods or techniques also emerged: 1) educational - developing critical awareness, skills to operate more effectively in the world; 2) participatory - collaborative helping models, client representation in the organizations;

approaching clients as equals); and 3) strengths based - focusing on strengths rather than problems or difficulties; viewing clients as a resource and contributor to the agency and fellow clients).

Of interest to note in their findings is that practitioners generally think of empowerment in terms of a psychological process of change. Practitioners (whether working with individuals, groups, or communities) considered the process of increasing individual's awareness of strengths, efficacy, and connection with others to be critical in the empowerment process. However, findings did not suggest that practitioners generally implement methods or goals that challenge social structures or press for political action. Therefore, its potential as a means towards a goal of positive social change that the literature on empowerment suggests to be critical is perhaps jeopardized.

Additionally, Ackerson & Harrison (2000) examined the mental health and social work literature in order to synthesize how the term empowerment is used and then conducted a small qualitative study with social workers and mental health clinicians to compare literature-based conceptualizations with those at the practice level. Findings from their study suggest little consensus regarding the precise definition and meaning of the term empowerment, as well as a tendency to focus on psychological aspects of empowerment at an individual level rather than aspects of empowerment that seek to change conditions or forces at organizational and social levels. In essence, findings suggest that practitioners employ empowerment concepts that focus on the development of personal competencies in clients in order to help them better function within larger constraints (e.g. adverse social conditions). However, social workers did not readily focus

on addressing larger organizational or environmental changes that would address clients'
problems at other levels.

While such studies suggest there are differences between worker
conceptualization of empowerment and the conceptualization of empowerment in the
literature, these studies do not examine the source of practitioners' conceptualizations of
empowerment. Specifically, these studies do not attempt to explore whether limited
conceptualizations of empowerment are due in part to a lack of specific knowledge and
skills of empowerment-based practice. A lack of specific knowledge and skills of
empowerment practice on the part of practitioners represents another factor potentially
affecting the outcomes of empowerment. However, there is a noticeable gap of studies
that explicitly examine the knowledge and skills practitioners employ in such work, and
subsequently, their overall *effectiveness* in achieving empowerment outcomes.

The need for education and training to support workers' use of empowerment-
based practice tenets was one of several findings by Gutierrez et al., (1995a) in their
exploratory study of organizational forces that support or constrain empowerment
practice. Six human service programs were included in the study, representing both direct
service and community practice with different age groups, racial and ethnic groups as
well as fields of service. Interviews were conducted with administrators and workers to
elucidate supports and barriers in maintaining and implementing an empowerment-based
practice approach in organizations. The supports identified for maintaining and
facilitating an empowerment-based approach were grouped into three primary themes: 1)
staff development (access to training and education; opportunities and encouragement for
developing programs and professional skills that match the personal interests of staff; a

reward system including promotions and salary increases for pursuing goals; and flexible work schedules and encouragement of "self care"); 2) enhanced collaborative approach (team like approach to work that includes sharing of power and information among all levels of staff; use of peer supervision and review; encouraging risk taking in confronting each other and developing ideas; building a shared philosophy); and 3) administrative leadership and support (encouragement and advocacy of an empowerment orientation by agency leadership).

Only one other empirical study related to workers' knowledge and skills associated with empowerment practice was uncovered in the literature. As a part of a larger implementation study of Casey Family Services Family Resource Center Initiatives, Everett et al., (2007) sought to explore the experiences of empowerment-oriented practice in community-based settings from the perception of front-line workers through in depth interviews. Casey Family Services Family Resource Center Initiatives use empowerment interventions to provide mental health services, child and creational activities, parent services, educational programs and other skill training. Data were derived from 28 interviews conducted with team leaders, social workers and family support specialists from four sites in order to determine how empowerment was being defined, enacted, and experienced in each of the settings. Researchers particularly focused on the challenges for empowerment practice and how they were overcome. Six stages of an empowerment process emerged (recruitment, engagement, involvement, retention, partnership, and leadership), as well as specific challenges faced at each stage and strategies used to address them. Among six key findings, one of the implications for organizations and staff engaged in empowerment practice was that frontline workers need

training and supervision to engage in effective empowerment practice, particularly

related to the process of empowerment. Of particular interest is that workers themselves

perceived limitations in their knowledge and skill base regarding empowerment-based

practice. The need for more research in this area is warranted; however in considering

these findings in conjunction with findings of previously discussed studies regarding

limitations in how empowerment is conceptualized by practitioners (Ackerson &

Harrison, 2000; Gutierrez et al., 1995), it is reasonable to suggest that that empowerment-

based practice represents a unique and complex knowledge and skill set that human

service professionals may not be adequately exposed to in formal or informal educational

settings. Pinderhughes pointedly describes the challenge this could present towards the

achievement of empowerment outcomes (1983):

> Assisting clients to exert their own power and to obtain needed resources should
> be the ultimate goal. In helping them reach these goals, we should attempt, or
> support others' attempts, to teach and model skills in creating alliances, building
> coalitions, overcoming organizational barriers, and engaging in political action.
> This means social workers must first of all develop these skills (p. 334).

> Workers who would empower clients and teach them about power dynamics must
> themselves understand the complexities involved (p. 335).

The third and final factor believed to contribute to outcomes of empowerment that

are far less substantive or transformative than those envisioned in practice mandates and

conceptual frameworks are structural elements in human service agencies and the overall

helping system that contributes to what is referred to as "a state of worker

powerlessness." The ability of workers to be empowering in the context of their own state

of powerlessness is a paradox that has been explored in the literature most heavily from a

conceptual standpoint.

On an individual level, a myriad of issues workers face in the context of their work have been identified as forces that create an overall lack of professional identity that contributes to a perception of powerlessness. This concept has most heavily been studied in the context of human service workers who identify themselves as "social workers." Causes of a lack of professional identity include the following: a lack of a discipline-specific scientific knowledge base, inability to differentiate social work from related disciplines, and a lack of dominance of social work professionals in any one practice setting (Frans, 1993). Additionally, workplace conditions (e.g. limited decision-making power, high caseloads, little opportunity for professional development) and overall system conditions (constantly changing federal and state mandates and the requirements of funding bodies; fragmentation of services, increased pressure for accountability etc.) have been identified as forces that contribute to individual and professional powerlessness in the broader field of human services (Breton, 1994; Frans, 1993; Gutierrez et al., 1995a; Itzhaky & Gerber, 1999; Kondrat, 1995; Leslie et al., 1998; Pinderhughes, 1983; Cox & Joseph, 1998; Shera & Page, 1995; Turner & Shera, 2005). Conditions that foster worker powerlessness are well summarized below (Shera & Page, 1995, p. 3):

> Because of bureaucratic, top-down nature of most organizations, employees have a greater tendency to become vulnerable due to lack of communication, lose control amidst a patriarchal organizational culture, and become helpless (a situation in which employees subscribe to the bureaucratic norms in order to survive. Vulnerability, loss of control, and a sense of helplessness, similar to conditions faced by clients, then, can be viewed as those which foster powerlessness.

Thus, while historically empowerment has been a goal focused on addressing powerlessness of clients (on an individual level as well as environmental and socio-political levels); the literature suggests various barriers that may act as impediments to

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those goals coming to fruition. To respond to such barriers, theorists advocate that human service organizations draw on their own human resources and consider staff empowerment as a strategy that can improve service delivery (Gutierrez et al., 1995; Foster-Fishman & Salem, 1998).

Education as a Vehicle of Empowerment for Workers in Human Services

The use of education as a tool by which human service professionals can be *empowered* themselves while simultaneously learning knowledge, skills and values associated with key tenets of empowerment practice on multiple levels (being *empowering* and working to create *empowered conditions*) is one strategy that may hold promise towards addressing some of the barriers identified by theorists in achieving empowerment outcomes in the human service arena. Historically, educational efforts aimed at developing and sustaining empowerment in disenfranchised groups of people involved changing attitudes that can act as barriers to effectiveness, including: practical knowledge, information, real competencies, concrete skills, material resources and genuine opportunities for application (Staples, 1990). In the social science literature, the roots and base of educational efforts aimed at reducing powerlessness, or, stated alternatively, increasing power, are consistently drawn to the work of Paulo Freire, a Brazilian educator who dedicated himself to abolishing cultural invasion, manipulation, conquest, and domination of oppressed groups of people. The core of his commitment was the use of conscientization to abolish illiteracy. Through educational efforts aimed at developing conscientization, people were encouraged to learn to perceive and understand social, political and economic conditions and to take action against oppressive elements as a result of that realization (Freire, 1970). The process involved raising the awareness

of people so they were able to take personal responsibility and control for their own destiny, including finding a "voice" with which to question reality and engage in intentional efforts and actions to change the status quo (Freire, 1970).

Critical to understand about the Freireian approach in empowerment-based educational efforts however, is one's view of knowledge: how it is created, who defines it, what validates it, and how it is perpetuated. Freire explicitly rejects knowledge as a fixed entity, seeing that as a tool for those in power to protect the status quo and their power. In such a system, the content of education is defined and controlled by those in power, thus, the world view of the powerful becomes the world view of the oppressed. This diminishes the likelihood that the oppressed will question the unfairness of their life circumstances (Cranston, 1992). Of critical importance is the development of a "community of conscience," referring to a group's development of a critical awareness about their oppressed status and the forces that conspire to preserve that status. The "collective knowledge" that emerges from a group sharing experiences and understanding the social influences that affects individual lives is at the heart of participatory empowerment-based education. It involves trusting the knowledge of others and engaging in listening and dialogue that honors the expertise of all (Kiser, Boario, & Hilton, 1995).

Today, Freire's approach is readily used as a core approach in empowerment models, representing a bridge between individual and collective empowerment, linking the circumstances of the individual with those of the social context (Adams, 2003). Such models most often include dimensions of improved self-concept, critical analysis of the world, identification with others as a member of a community, participation with others

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in organizing for community change, and actual environmental/political change

(Wallerstein, 1992, p. 198). In *Training for Transformation: A Handbook for Community Health Workers*, five key principles of Freire that are believed to be critical foundations for empowerment-based educational efforts are as follows (Hope, Timmel & Hodzi, 1984, as cited by Kiser et al., p. 363):

1. No education is ever neutral; it is either domesticating or liberating. Education is either designed to maintain the existing situation, imposing on the people the values and culture of the dominant class or education is designed to liberate people, helping them to become critical, creative, free, active and responsible members of society.

2. People will act on issues around which they have strong feelings. Listening to identify the issues which community members speak about with excitement, hope, fear, anxiety or anger is key to the participatory process.

3. The whole of education and development are seen as a common search for solutions to problems (problem posing). Each participant is recognized as a thinking, creative person with the capacity for action. The facilitator's aim is to help them identify the aspects of their lives which they wish to change, to identify the problem, find the root causes of these problems, and work out practical ways in which they can set about change in the situation.

4. Genuine dialogue is important. A real learning community is where each shares their experience, listens to, and learns from the others.

5. Reflection and action are essential. A facilitator can provide an opportunity for the community to stop, reflect critically upon what they are doing, identify any new information or skills that they need, get this information and training, and then plan action.

6. Radical transformation of life is for each person, the environment, the community and the whole society. This type of education aims to involve whole communities actively in transforming the quality of life.

Examples of empowerment-based programs focused on the professionals who work in the field of human services are limited. Only two such efforts could be found in the literature search conducted for this study, one of which is the focus of this dissertation study - the Family Development Credential Program. The other program is the Family

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Wellbeing Program. Both programs will be discussed below to further elucidate how empowerment-based educational efforts with this type of focus have been designed, implemented and evaluated.

The Family Wellbeing Program

The Family Wellbeing Empowerment program was created in Australia in 1997 by a coalition of organizations, both aboriginal and non-aboriginal, in response to increased numbers of suicides and attempted suicides by young Aboriginal people. The impetus behind the program was that government policies that promoted the removal of children and communal living on reserves had resulted in the denial of basic human needs to generations of Aboriginal people, resulting in high levels of suicide, alcohol, substance abuse and domestic violence by many families and communities. Family Wellbeing was premised on idea that all humans have basic physical, emotional, mental and spiritual needs and that failure to satisfy those needs results in behavioral problems (Tsey & Every, 2000).

Family Wellbeing was designed as a 10-week course aimed at empowering aboriginal workers and their families to assume greater control over the conditions influencing their lives. Specifically the program aims to build communication, problem solving, conflict resolution and other qualities and skills necessary for people to take greater control and responsibility for family, work and community life (Whiteside, Tsey, McCalman, Cadet-James, & Wilson, 2006). As a nationally accredited course, participants earn a formal qualification in counseling after completing the program.

Informed by systems-theory, the program addresses individual change within a broader context, including family, community and/or the organizations and wider social

systems that impact people's lives. The program uses a two-step approach to empowerment, with the following key therapeutic and learning traditions underpinning the course: 1) psycho synthesis: emphasizing balance and harmony in the physical, emotional, mental and spiritual domains of life; 2) empowerment-style education and adult learning principles; and 3) use of Aboriginal survival experiences of course facilitators and students as main learning resource (Tsey & Every, 2000).

Emphasis is first given to enhancing individual empowerment as a basis for people coming together to tackle broader structural and organizational issues. Personal development workshops form the basis of the first step in the overall approach, focusing on providing opportunities for participants to: 1) build trusting relationships; 2) think about their individual needs and aspirations; and 3) develop life skills, strategies and support mechanisms to help one another meet needs. Group interaction is highlighted as a critical component of the first step, using group processes to enhance discussion between people with different life experience and knowledge, thereby presenting opportunities for broadening understanding, reinforcing potential connections, minimizing division and building confidence to plan and work together (Shields, 2000, as cited by Whiteside et al., 2006).

The second step of the program involves follow-up processes aimed at supporting participating groups to collectively address the most pressing structural issues identified from the personal development training. The role of program facilitators is emphasized in this part of the program, extending beyond training delivery to actively supporting program participants in organizing and advocating for system-level change.

In efforts aimed at evaluating outcomes of the program, evaluations have focused on documenting multiple-level effects. For example, Tsey & Every (2000) developed an evaluation framework based on the work of Nina Wallerstein (1992), which was also used in a later evaluation by Whiteside et al. (2006). Building upon Wallerstein's work in empowerment-based health education and prevention, Tsey & Every (2000) created an evaluation framework for Family Wellbeing that includes personal or psychological empowerment, organizational empowerment and community empowerment. Table 3: Wallerstein's Framework for Empowerment Evaluation (1992) describes how these components are conceptualized.

Tsey & Every (2000) used participant observation and analysis of course participants' personal narratives to analyze outcomes against key evaluation criteria identified in the above framework. Findings indicated that the program enhanced participants' perception of personal empowerment, including an enhanced sense of self-worth, resilience, ability to reflect on root causes of problems and problem-solving ability, as well as belief in the mutability of the social environment. Narrative analysis also suggested that participants had started using their enhanced empowerment to constructively engage structural challenges, both at the workplace and in the wider community in ways that was previously impossible. There was no evidence however of empowerment on the organizational and community levels such as stronger social networks and system-level changes. Three major conclusions were drawn from the results of the evaluation: (a) the need to use an ecological approach that simultaneously addresses empowerment at multiple settings or levels in order to address structural barriers; (b) the need to ensure such programs reach a critical mass of the target group;

and (c) the need for policy-makers and practitioners to take a longer-term approach to empowerment interventions, including funding longitudinal studies to document and enhance such efforts.

Table 3: *Wallerstein's Framework for Empowerment Evaluation*

Wallerstein's levels of empowerment	Corresponding settings applied in evaluation	Related empowerment attributes/variables (evaluation criteria)
Personal or psychological empowerment	The family	Improved perceptions of self-worth and mutability of social environment as evidenced by: empathy and perceived ability to help others; emotional responses to change; critical thinking abilities of root causes of problems, belief in one's ability to exert control; and a sense of coherence about one's place in the world.
Organizational empowerment	The workplace	Stronger social networks and community/organization competence to collaborate and solve problems as evidenced by: perceptions of support, satisfaction and community connectedness; and changes in network function and utilization.
Wallerstein's levels of empowerment	Corresponding settings applied in evaluation	Related empowerment attributes/variables (evaluation criteria)
Community empowerment	The wider community	Actual improvements in environmental or health conditions as evidenced by: changes in public policy; systems level changes; and the community's ability to bring in resources to create healthier environments.

Whiteside et al. (2006) also used qualitative methods in their evaluation of the program, collecting three key sources of data: 1) participant questionnaire before beginning the program and at the end of the program; 2) in depth follow-up interviews undertaken with eleven participants 9-12 months after the workshops were completed; and 3) information from facilitators' observations and interactions in focus groups with both workers and management during the course of the workshops. Consistent with Tsey and Every's findings, data suggested the program to be an effective tool for worker empowerment on an individual level. Findings also suggested organizational change was also being realized, however to a lesser degree. Specific to the evaluation framework used, structural/organizational empowerment is considered to include giving voice to people whose voices are often not heard, more equitable distribution of power and resources and concrete improvements in working conditions. The role of workers and management in making such things come to fruition was highlighted. For management, this includes transparent and participatory decision-making processes within the organization and a willingness to hear the opinions of workers; accept criticism, debate issues and, where necessary, change practices. For workers, this means being prepared to participate assertively to effect change not only within the organization, but also through reflection of their own practice and learning needs. Findings demonstrated initial evidence of such changes, despite articulation of some ongoing frustrations by both the workers and management. Structural constraints to changing practice were also highlighted, including job insecurity, inadequate role descriptions, lack of common theory or frameworks for practice, and inflexible bureaucratic processes that put needs of the system before the needs of the client.

The Family Development Credential Program[2]

In the mid 1990's the Family Development Credential Program (FDC) was created through a research-policy collaborative between: Cornell University's Department of Human Development; New York State Department of State and its Community Action Agency network; and the New York State Council on Children and Families, composed of state family-serving agencies. At its core, FDC is a *bottom-up* approach that seeks to transform how workers and agencies work with individuals and families by employing a community-based, multi-faceted credentialing system for front-line workers of many disciplines e.g. drug and alcohol, Head Start, child welfare, community outreach etc.. As of 2010, the training and credentialing program is offered in 20 states across the country.

Theoretical Base

Conceptually the FDC curriculum is based on foundational research carried out at Cornell University by Urie Bronfenbrenner and others, referred to as Family Matters (Cochran, 1988). They examined the intersections between families and communities, demonstrating "how children and parents develop in relation with families, neighbors, relatives, schools, workplaces, and influences of society" (Forest, 2008). Through the course of this research, Bronfenbrenner refined his theory of the social ecology of human

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2 The overview of the FDC program provided in this section, including the program's theoretical base, how the program was originally conceived, and the development of the FDC curricula materials and training process was adapted from an article jointly authored by Nicole Hewitt, MSW, Betsy Crane, Ph.D., Barbara Mooney, Ed.D., entitled: "The Family Development Credential Program: A Synthesis of Research on an Empowerment-based Human Service Training Program." Please refer to the reference section of this document for citation information on obtaining the full text of the article published in the journal *Families in Society* (Hewitt, Crane & Mooney, 2010).

development, referring to the "settings where people live, work, study, play, and interact with other people, as well as the indirect influences of society like public policy that make it hard for families to afford good child care or health care" (Forest, 2008). The following definition of empowerment emerged from this research:

> Empowerment is an intentional, dynamic, ongoing process centered in the local community, involving mutual respect, critical reflection, caring and group participation, through which people lacking an equal share of valued resources gain greater access to and control over those resources (Cornell Empowerment Group, 1989, p. 2).

Insights from this work were fundamental to the development of the FDC program, which is built around 11 core principles (Forest, 2003):

1. All people and all families have strengths.

2. All families need and deserve support. How much and what kind of support varies throughout life.

3. Most successful families are not dependent on long-term public support. They maintain a healthy interdependence with extended family, friends, other people, spiritual organizations, cultural and community groups, schools and agencies, and the natural environment.

4. Diversity (race, ethnicity, gender, class, family form, religion, physical and mental ability, age, sexual orientation) is an important reality in our society, and is valuable. Family workers need to understand oppression in order to learn to work skillfully with families from all cultures.

5. The deficit approach, which requires families to show what is wrong in order to receive services, is counterproductive to helping families move toward self-reliance.

6. Changing from the deficit model to the family development approach requires a whole new way of thinking, not simply more new programs. Individual workers cannot make this shift without corresponding policy changes at agency, state, and federal levels.

7. Families need coordinated services in which all the agencies they work with use a similar approach. Collaboration at the local, state, and federal levels is

crucial to effective family development.

8. Families and family development workers are equally important partners in this process with each contributing important knowledge. Workers learn as much as the families from the process.

9. Families must choose their own goals and methods of achieving them. Family development workers' roles include helping families set reachable goals for their own self-reliance, providing access to services needed to reach these goals, and offering encouragement.

10. Services are provided so families can reach their goals, and are not themselves a measure of success. New methods of evaluating agency effectiveness are needed to measure family and community outcomes, not just the number of services provided.

11. For families to move out of dependency, helping systems must shift from a *power over* to a *shared power* paradigm. Human service workers have power (which they may not recognize) because they decide who gets valued resources. Workers can use that power to work with families rather than use power over them.

Program Conceptualization

Historical narratives by Crane (2000) and Forest (2003), co-developers of the FDC program at Cornell, indicate how the unique collaboration that created the FDC program drew from two major movements in the United States in the early 1990s. Community Action agencies across the nation were using a more holistic, outcome-oriented approach to frontline worker interaction with low-income families and communities called *family development*, a form of practice developed by the University of Iowa, in association with Mid-Iowa Community Action, in the mid-1980s. At the same time the *family support movement*, with its belief in parent engagement and prevention, was a driving force nationally and within the New York State Council on Children and Families, a council of 15 state agencies that had convened a Commissioners Workgroup

on Family Support and Empowerment, in an effort to change the way helping systems engaged with families. The involvement of these governmental agencies, combined with the family support research and curriculum expertise at Cornell, were critical ingredients in the creation of the FDC program (Crane, 2000).

Among Community Action leaders nationally who promoted use of family development was Evelyn Harris, director of Community Services at the New York State Department of State, who used federal Community Service Block Grant monies to fund the creation of the FDC program. Considered the godmother of FDC (Crane, 2000), Harris held a strong belief in parents and families being able to set and achieve their own goals. A Jamaican immigrant, Harris credited the support she received as a Head Start parent as making it possible for her to go back to college and become a Head Start teacher. She eventually became a Community Action agency director, and when she subsequently moved into the statewide directorship, she made the provision of competency-based training for frontline workers a priority. After initially funding workshops on family development for Community Action staff by trainers from the University of Iowa, Harris became committed to institutionalizing these practices by creating a credentialing system that would provide validation for workers of their skills and a step toward a college degree.[3] Her commitment to making this training available not only to Community Action agencies but also to frontline workers in other public and nonprofit organizations was driven by her understanding that families would benefit if all workers with whom they interacted used the same strengths-based practices. The plan by

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[3] Those receiving the FDC credential can receive a transcript showing they have earned seven college credits, three for the coursework and four for the skills practice or portfolio development. Reviews by the Program on Non-Collegiate Sponsored Instruction (PONSI) of each state's FDC program serve as the basis for this recommendation for credits.

Harris to fund the creation of a family development training and credentialing system coincided with efforts by the state Council on Children and Families, which had solicited Cornell's expertise to help move family services to a strengths-based partnership approach. Cornell won the contract to create the FDC program, and Harris became a member of the Commissioners Workgroup on Family Support and Empowerment that ultimately provided guidance for implementation of the statewide interagency FDC program (Crane, 2000).

Development of the FDC curriculum occurred in a highly participatory manner (Forest, 2003). Focus groups held in communities across the state provided an opportunity for clients, workers, and agency supervisors to contribute ideas about the knowledge, skills, and attitudes that are needed to practice family development, as well as how the training program should be offered. These findings, along with those from a review of existing New York State and national family support training programs, contributed to a set of key competencies that were incorporated into the *Worker Handbook* (Dean, 1996) and the *Trainers Manual* (Crane & Dean, 1996) for the FDC curriculum, *Empowerment Skills for Family Workers*.[4] Focus group participants, along with members of a statewide Community Action Family Development Peer Support group, and the Commissioners Workgroup with its affiliated state agencies, further participated by providing feedback on drafts of the curriculum (Crane, 2000). Central to the form of recommended frontline worker practice across agencies and systems that emerged from this collaborative planning process were the Seven Steps to Family Development (Forest, 2003):

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[4] Claire Forest, director of Cornell's FDC Program, was previously known as Christiann Dean; hence that name appears on early FDC documents.

1. The family develops *a partnership* with a family development worker.
2. A family development worker *helps the family assess* its needs and strengths-an ongoing process.
3. *The family sets its own major goal* (such as getting off welfare or providing health care for a disabled family member) and smaller goals working toward the major goal, and identifies ideas for reaching them.
4. The family development worker *helps the family make a written plan* for pursuing goals with some tasks being the responsibility of the family members, and some of the worker's. Accomplishments are celebrated and the plan is continually updated.
5. The family *learns and practices skills* needed to become self-reliant.
6. *The family uses services as stepping stones* to reach their goals.
7. The family's sense of responsibility is restored. *The family (and each individual within the family) is strengthened by the family development process* so they are better able to handle future challenges.

Community-based instructors, using the FDC Trainers Manual (Crane & Dean, 1996) and having been prepared by a weeklong training-the-trainer institute at Cornell, led the first FDC classes in 1996.

Until 2009, Cornell coordinated the FDC program in New York State, provided training for coordinators for other states, and updated the FDC curriculum as new research emerged at Cornell and elsewhere. Effective in 2009, the Center for Transformative Action (Ithaca, New York) and Temple University Harrisburg (Harrisburg, PA) emerged as two entities serving as pivotal resources for states that have implemented the FDC program. Claire Forest, one of the original creators of FDC and authors of the text used in the FDC course, is based at the Center for Transformative Action (CTA) and continues to update the curriculum as well as support the work of select states in implementing FDC. Temple University Harrisburg agreed to provide national coordination for the FDC program, including maintaining a national database of credentialed workers and monitoring fidelity to the FDC training model. The program continues to be managed at the state level through a State Coordinator who works for a

lead agency within each respective state. The lead agency partners with the national

office at Temple University Harrisburg or CTA in New York. In 2010 the Temple

University National FDC Board, consisting of State Coordinators, was established as a

governing body responsible for making decisions and establishing policy for the program

on a national level. The Committee provides policy and implementation guidance to

Temple University Harrisburg.

Credentialing Process

The FDC program is a multi-faceted interagency training experience designed

with a goal of infusing strengths-based, empowerment-oriented principles into work of

helpers across public, private and nonprofit service systems. Any particular FDC class

offered in a local community may include home visitors, case managers, family resource

center workers, community health workers, and home-school liaison workers. The

credentialing process has three major components: classes, portfolio and examination.

Over several months workers participate in an 80-hour course, engaging in highly

interactive learning experiences led by locally-based FDC instructors. The ten

chapters/modules of the curriculum, as revised in Forest (2003) and Palmer-House &

Forest (2003) are:

1. Family development: A sustainable route to healthy self reliance
2. Communicating with skill and heart
3. Taking good care of yourself
4. Diversity
5. Strengths-based assessment
6. Helping families set and reach goals
7. Helping families access specialized services
8. Home visiting

9. Facilitation skills: Family conferences, support groups and community meetings

10. Collaboration

In this list and throughout the FDC program, the term *family* is used in place of the term *client*; however, FDC-trained workers use their knowledge and skills with individuals of all ages, as well as with couples and families with children.

The second element of the credentialing process is preparation of a portfolio, supported by 10 hours of portfolio advisement. The purpose of portfolio advisement is two-fold. For workers, it is to demonstrate: (a) their understanding of family development skills; (b) their ability to apply the skills; and (c) their ability to reflect on their practice and learn from their reflections. For the FDC Program it is to: (a) document the growth of participants; (b) facilitate transfer of learning from classroom to workplace; and (c) identify barriers and supports for implementation of FDC concepts in the workplace.

The portfolio document includes various written assignments that encourage workers to critically reflect on their assumptions about the helping process and to try out new skills, tools and practices being taught in the classroom. The learning extension activities also challenge workers to consider what changes in organizational practices might be needed to support a strengths-based approach to work with families, and encourage them to pursue efforts at initiating such changes. Table 4: *FDC Portfolio Development Process* describes the key components of the portfolio, along with the purpose and what is done to complete each component. This summarization was derived from the *Guide for Implementation of FDC in Pennsylvania* (Mooney, 2009).

Table 4: *FDC Portfolio Development Process*

Portfolio Component	Purpose	What is Done
Activities to Extend Learning	Reflect on information learned in the chapter Demonstrate knowledge and understanding of key concepts Clarify workers' thinking as they being to practice the concepts	At the end of each Chapter, participants choose three Activities to Extend Learning questions to answer. Written reflections are submitted to their Portfolio Advisor for feedback and discussion during advisement sessions.
Skills Practices	To provide an opportunity to apply concepts and principles being learned in the classroom. Have workers try something new, or put a new twist on something that they already do (related to the topic of the chapter) and to reflect on their experience.	For each Chapter, one skills practice activity is chosen to complete. This choice is made in collaboration with the Portfolio Advisor. Participants complete the activity, write a reflection on their experience and submit it to their Portfolio Advisor. Participants meet with their Portfolio Advisor to discuss and reflect upon their learning.
Family Development Plans	Demonstrate ability to use a strengths-based assessment tool that allows workers and families to share responsibility for identifying family strengths and needs, using them to set goals and take action towards those goals.	An initial family development plan is created with a family or an individual. A copy of the plan is submitted as a part of the final portfolio document. Two follow-up progress plans are created and also submitted as a part of the final portfolio document. At the end, a one-page reflection on using the family development tool as a part of the helping process with families is submitted as part of the final portfolio document.

Locally based portfolio advisors serve as mentors to workers as they complete course work as well as undertake their portfolio development. Overall, portfolio advisors are an integral part of the local implementation team, and as such help to assure the integrity of the FDC model and the quality of the local FDC program. Through reflection and discussion portfolio advisors help workers transfer information from the *Empowerment Skills for Family Workers Handbook* (Forest, 2003) and interactive learning that occurs in class sessions, into their practice. Portfolio advisors help workers in the development of a portfolio document that must be submitted at the end of the FDC course. This involves assisting workers in selecting activities to include in their portfolio from those suggested in the Worker Handbook that will deepen their understanding of the principles being presented. Portfolio advisors document the interactions between themselves and their workers, and make observations in writing that help workers better reflect on their growth and learning. Portfolio advisors also attend some class sessions in order to observe and interact with workers in the classroom setting. This provides additional insight into workers' experiences during the FDC training process. Finally, portfolio advisors help workers consider the organizational and community supports (and barriers) for strengths-based/empowerment practice in their agencies and community at large.

The third and final component of the credentialing process is a standardized examination based on the FDC curriculum. The examination is given after the coursework is completed and workers' portfolios are submitted to and reviewed by the state FDC Coordinator. Passing the examination is required to achieve the FDC credential, which is generally awarded in a graduation ceremony.

Summary of Existing FDC Research

Eleven studies conducted on various aspects of the FDC program are known to date. In performing a literature synthesis of existing FDC research, Hewitt et al., (2010) grouped findings into four main areas: (a) effects of FDC training on workers professionally and personally; (b) effects of FDC training on knowledge, skills, and attitudes of workers based on self-report instruments that workers complete and/or document analysis; (c) effects of FDC training on agencies and systems, as perceived by workers, supervisors, trainers, and/or administrators; and (d) effects of FDC on families, based on family members' (clients) perception of how strengths-based practices have made a difference in their ability to accomplish desired changes in their lives.

In FDC research focused on changes in workers, several studies produced findings indicating that workers/trainees develop *personally.* Drawn from qualitative data collected via focus groups or individual interviews as well as document analysis, several studies (see Crane, 2000; Salandy, 2000, Hewitt, 2007 and Smith et al., 2007) found evidence of personal development related to: increased self-esteem, confidence, assertiveness, reframing of beliefs and values, personal growth and change, and feeling more flexible and open to change.

Studies pertaining to *professional* changes in workers also indicate that frontline workers increase their skills and competencies in family development practice, based on qualitative interviews, focus groups, surveys and document analysis. Data from workers were the primary source of findings, although limited data from supervisors were also reported (see Bell & Hollingsworth, 2006; Crane, 2000; Hewitt, 2007, Palmer-House,

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2006; Rolison & Watrous, 2003; Salandy, 2000; Smith et al., 2007; Svihula & Austin, 2004; Watson-Smith, 2003).

Quantitative measurement of the effect of FDC on workers is far more limited however, with research limitations of those studies making conclusions more tentative. For example, research by Alpert & Britner (2005) compared change in attitudes between FDC-trained and non-FDC trained child protective service workers, finding that FDC did not appear to be specifically responsible for the family-focused attitudes that *all* participants in the study evidenced. A limitation may be related to the way researchers measured family-focused attitudes and whether it was sufficiently discriminating to assess the effects of FDC training. Watson-Smith (2003) measured change over time in knowledge and skills of FDC-trained and non-FDC trained Head Start workers. Her study showed that the knowledge, skills and attitudes of FDC-trained workers were rated more highly over time as compared to non-FDC trained workers. However, her small sample size of 14 is a limiting factor in the strength of these comparative findings. Finally, Smith et al. (2007) compared changes in FDC-trained and non-FDC trained workers over time on several variables including self-esteem, mastery, job satisfaction, burnout, sense of professional mission and several topics specific to the FDC curriculum. Findings suggest that FDC-trained workers had higher overall scores in self-esteem, mastery, and professional self -esteem than their comparison group. Statistically significant differences between groups on burnout were not found. A limitation of this research is that differences between experimental and control groups were not statistically controlled for during data analysis.

Gaps in Current Knowledge about FDC Outcomes

Critical outcomes of the FDC program are predicated on workers changing as well as workers becoming a tool or vehicle of change on multiple levels (personal level, practice with families and individuals, in their agencies, and beyond their agencies). While personal and professional changes in workers have been documented through previous FDC research, there are several gaps in knowledge that still exist.

First, in considering the conceptual/theoretical foundations that have grounded previous studies, a variety of theories have been used. Several studies (Crane, 2000; Palmer-House, 2006; Watson-Smith, 2000) situated such research within adult educational theories, e.g. Kolb's experiential learning theory; Knowles self-directed learning model; Bandura's theory of self-efficacy; Adkins structured inquiry learning model; Mezirow's transformative learning theory; and Freire's critical reflection praxis model. Additionally, Palmer-House (2006) and Watson-Smith (2003) drew upon evaluation theory including Kirkpatrick's four-level approach for evaluation. Theory of change frameworks were used in two studies (Crane, 2000; Palmer-House, 2006). Interestingly however, known studies to date have not employed an empowerment theoretical framework to understand and measure change outcomes for workers. Because the FDC program was inherently conceived upon empowerment principles and research, use of empowerment constructs to empirically measure how workers chang*e* after participating in the FDC program, as well as variables that may influence such change, intrinsically makes sense. Such research would represent a first step in understanding patterns of relationship between the process and outcomes of empowerment in the context of an educational program designed to impact both.

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Second, quantitative efforts at measuring change in workers who have been credentialed through the FDC program are far more limited in scope than qualitative efforts. FDC studies using quantitative methods have faced various measurement and sampling constraints that render the strength of findings to be somewhat tentative and inconclusive. Since workers are the focus and impetus of change in the FDC program, documenting program effects is critical in order to ensure the effectiveness of the program at multiple levels, facilitating answers to such questions as: (a) Is the theory behind the program correct?; (b) Is the program design effective?; and (c) Is the program being implemented effectively?

The next chapter presents the theoretical framework for the research. The theory of empowerment is fully explored including the scope and breadth of how it has been defined in the literature and how it has been conceptualized and measured as a construct by multiple disciplines. An empowerment-based Model-of-Change Framework for the FDC program is presented, describing how empowerment constructs can be used to elucidate how multi-dimensional programmatic outcomes for FDC can be understood.

CHAPTER III

THEORETICAL FRAMEWORK

Defining Empowerment

In recent years, the term empowerment has permeated the language of many different scientific disciplines, including community psychology, sociology, religion and organizational studies. It is also a term that has been adopted in various fields of applied study, including business management (e.g. human resource management), healthcare (e.g. nursing, mental health organizations) and social work (e.g. human service organizations). Despite the widespread use of the term "empowerment" in academic and professional discourse, it remains an elusive and abstract concept that is defined and conceptualized in a myriad of ways.

Given the vast breadth of disciplines in which the term empowerment has been used, researchers and practitioners alike are challenged in being able to present a unified definition of the term. The following definitions provide a glimpse of the scope of definitions that abound:

> Empowerment is the process of releasing the full potential of employees in order for them to take on greater responsibility and authority in the decision-making process and providing the resources for this process to occur (Cartwright, 2002, p. 6).

> Empowerment is a construct that links individual strengths and competencies, natural helping systems, and proactive behaviors to matters of social policy and change. It is thought to be a process by which individuals gain mastery or control over their own lives and have democratic participation in the life of their own community (Rappaport & Zimmerman, 1988, p. 726).

> Empowerment is the combined result or outcome of getting involved in a conscientization or consciousness-raising process, acquiring skills, and attaining

the goal of a just allocation or distribution of power, especially the power to access resources or services to which one is entitled (Breton, 1994, p. 29).

Empowerment is an intentional, ongoing process centered in the local community, involving mutual respect, critical reflection, caring, and group participation, through which people lacking an equal share of valued resources gain greater access to and control over those resources (Cornell Empowerment Project, 1989).

In synthesizing the many definitions that abound across and within disciplines and fields of study, several common elements begin to emerge: empowerment as a *value orientation*, empowerment as a *perception*, empowerment as a *process* and empowerment as an *outcome* - all of which occur on various levels or in multiple domains (individual, organizational and community/societal). As a *value orientation*, empowerment is considered to be a distinct approach for developing interventions and creating social change, particularly directing attention toward health, adaption, competence and natural helping systems (Zimmerman, 2000). As a *perception,* empowerment is described as a psychological phenomena characterized by efficacy (the skill and ability to act effectively), control, and the opportunity and authority to act (Chiles & Zorn, 1995; Spreitzer, 1995). As a *process*, empowerment is considered to be interactional, referring to situations in which people create or are given opportunities to control their own destiny and influence the decisions that affect their lives, including the ability to influence the organizational and/or societal structure within which they live (Gutierrez & Ortega, 1991; Perkins, 1995; Rappaport & Zimmerman, 1988; Zimmerman, 1995, 2000). Reallocation of power in organizational or societal domains depicts empowerment as an *outcome* (Miley & DuBois, 1999; Peterson & Zimmerman, 2004; Segal, Silverman & Temkin, 1995; Swift & Levin, 1987; Zimmerman, 1995, 2000).

In reviewing the literature relevant to empowerment from a multi-disciplinary perspective it is clear that various researchers have worked to develop the theory of empowerment, focusing on providing principles and a framework for organizing knowledge. This work has done much to explicate and extend the scope and breadth of the construct in numerous ways. Development of an ecological perspective in the conceptualization of empowerment, recognition of the occurrence of empowerment on multiple levels, as well as the *process* and *outcome* elements critical to an empowerment conceptualization are significant elements included in an empowerment construct.

Ecological Nature of an Empowerment Construct

In the social science disciplines, e.g. community psychology, applied health, social work, the concept of empowerment is ecologically embedded. As such, empowerment in relation to the "individual" is situated in a person-in-environment, or ecological framework. An ecological perspective of empowerment is inherently grounded in systems theory of human development, which proposes that individuals develop in the context of three primary systems: (a) micro system (one's family, local neighborhood, community institutions, peer groups); (b) meso system (social institutions such as transportation, entertainment, human service organizations etc.); and (c) macro system (national, international, global influences or changes) (Huitt, 2003). Ecological theory refers to the transactional processes that occur between a person and environmental systems, rather than individual components of any one system (Ungar, 2002). Imbedding an ecological perspective into an empowerment construct links psychological aspects of empowerment (cognitive, personality and motivational components) to an individual's connection and participation in larger societal structures (Bronfenbrenner, 2005; Perkins,

1995; Segal et al., 1995). Such a linkage recognizes the complexity of interactions

between individual characteristics and the context-specific nature of community

processes and settings (Peterson, Lowe, Aquilino, Schneider, 2005). It also recognizes

that the process and outcomes of empowerment may take on different forms among

people (context specific), as well as change over time (Zimmerman, 1995).

Empowerment as a Multi-level Construct

Many scholars have developed frameworks for considering the multiple levels or

domains in which empowerment occurs as a means to further define and understand the

scope and breadth of the concept. While most readily conceptualized on an individual-

level, various authors describe how empowerment can be explored and described on

multiple levels, including individual, organizational and societal. For example, in the

field of social work empowerment is most commonly conceptualized on three levels: (a)

the personal level (focusing on feelings of personal power and self efficacy); (b) the

interpersonal level (stressing development of skills in influencing people or processes;

and (c) the political level (emphasizing goals of social action and change) (Adams, 2003;

Gutierrez & Ortega, 1991; Gutierrez et al., 1995). Similarly, Zimmerman (2000) depicts

empowerment as a multi-level construct that occurs on three levels. Empowerment as an

individual-level construct focuses on intrapersonal, interactional and behavioral variables.

As an organizational-level construct, empowerment is concerned with organizational

efforts that generate psychological empowerment among members and organizational

effectiveness needed for goal achievement. It includes such things as resource

mobilization and participatory opportunities. As a community-level construct, attention is

given to the sociopolitical structure and social change, including efforts to avoid

community threats, improve quality of life and facilitate citizen participation (Zimmerman, 2000).

In using levels to delineate the complexity of the term, many authors (Adams, 2003; Gutierrez et al., 1995; Spreitzer, 1995; Zimmerman, 2000) caution against viewing the levels or domains of empowerment too simplistically or in a hierarchical or even sequential manner, emphasizing the multi-faceted, person-in-environment phenomena it encompasses, and the possibility of moving from one domain or level to another or occupying more than one simultaneously. Zimmerman proposes multiple levels of analysis that, while described separately, are inherently connected to, mutually interdependent upon and both a cause and consequence of each other. Table 4 distinguishes the unique aspects of empowerment processes and outcomes across these levels of analysis (Zimmerman, 2000, p. 46-47).

Of particular interest to note in Zimmerman's conceptualization is that at each level, one aspect of empowerment is concerned with helping individuals, organizations or communities grow toward a state of empowerment (being *empowering*), while another aspect is concerned with creating power for oneself, organizations or communities (being *empowered*). While perhaps initially interpreted as a subtle language manipulation, such distinction provides the basis for understanding how the concept of empowerment has grown to be understood as a multi-dimensional, highly complex, dynamic and integrated phenomenon.

Table 5: *Empowering Processes and Empowered Outcomes Across Levels of Analysis*

Levels of Analysis	Process ("empowering")	Outcome ("empowered")
Individual	▪ Learning decision-making skills ▪ Managing resources ▪ Working with others	▪ Sense of control ▪ Critical awareness ▪ Participatory behaviors
Organizational	▪ Opportunities to participate in decision-making ▪ Shared Responsibilities ▪ Shared leadership	▪ Effectively compete for resources ▪ Networking with other organizations ▪ Policy influence
Community	▪ Access to resources ▪ Open government structure ▪ Tolerance for diversity	▪ Organizational coalitions ▪ Pluralistic leadership ▪ Residents' participatory skills

Empowerment: A Process and an Outcome

While awareness and exercising the right to access resources is a necessary condition for empowerment, Breton (1994) adds that the right and responsibility to participate in *creating* resources, *influencing* the nature and character of existing resources, and *eliminating* inappropriate or ineffective resources are also critical elements to an empowerment conceptualization. Breton (1994) argues that when empowerment is conceptualized as both a process and an outcome, achieving one without the other does not empower:

> The process of conscientization, (developing an awareness of personal and structural dimensions of situations or problems) becomes part of an empowering strategy only if the cognitive restructuring it entails leads to seizing or creating opportunities in the environment to either change the structural dimensions which constitute obstacles or take advantages of the structural dimensions which

constitute resources, and only if there exist the capacities and the will or motivation to seize those opportunities. A strategy which addresses exclusively the component of personal capacities and skills, whether they are cognitive (as in consciousness-raising) or behavioral (as in skills-training) may lead to personal competence and strength, but not empowerment. Similarly, focusing on abilities and skills without taking into account motivational systems cannot lead to empowerment because abilities and skills will be used only when individuals expect that their use will make a difference, whether in the short run or in the long run (p. 32-33).

Thus, relating back to Zimmerman's proposal of a multi-level analysis framework for empowerment, it becomes apparent that empowering processes at one level of analysis contribute to empowered outcomes at other levels of analysis. Empowered individuals are the basis for developing empowered organizations and communities, thus lending credence to the need to study and integrate multiple levels of analysis when trying to understand empowering processes and outcomes.

Individual-level Construct of Psychological Empowerment

In more specifically understanding how the construct of psychological empowerment at an individual-level of analysis has been conceptualized and measured, researchers in the social sciences (e.g. psychology) as well as organizational studies pursued separate, yet related paths, one often informing the other over the course of time. Conceptualizations that emanate from both discipline areas, as well as empirical efforts aimed at further developing such conceptualizations inform the theoretical and measurement considerations this dissertation research is based upon.

Conceptualizations Emanating from Social Sciences

Particularly over the past two decades, three underlying assumptions about the nature of psychological empowerment have evolved in the social science disciplines,

forming critical underpinnings of our understanding of the construct. Originally proposed by Zimmerman (1995), these assumptions have been supported in various empirical studies as well (Foster-Fishman & Salem, 1998). As summarized by Speer (2000), the three assumptions revolve around the form, context and variation of psychological empowerment. First, psychological empowerment takes on different forms for different people, suggesting that the process and meaning of empowerment is influenced by the characteristics of individuals. Second, psychological empowerment is context-specific, meaning that settings and environment in which people live shape the form of empowerment that takes place. Third, psychological empowerment is a dynamic phenomenon that varies over time.

Three main components of psychological empowerment are proposed at the individual level, with each component being multi-dimensional: 1) *intrapersonal*: concerned with how people think about themselves, including such things as perceived control to influence outcomes (personally, interpersonally and socio-politically) and self-efficacy; 2) *interactional*: concerned with how one thinks about and relates to their environment (critical awareness, ability to mobilize resources, decision-making, problem-solving, leadership skills); and 3) *behavioral*: concerned with specific actions one takes to influence their social and political environment as evidenced through participation in community organizations as well as engaging in activities aimed at helping others to exercise influence (Zimmerman, 1995; Zimmerman & Warschausky, 1998).

Of importance to note is that psychological empowerment is not merely self-perceptions of competence, but also includes active engagement in other systems (organizations and the community); understanding the socio-political environment; and

learning about power and acting to influence those with power. It is considered to be a critical foundation for empowering processes and outcomes at other levels (Zimmerman, 1995; Zimmerman & Warschausky, 1998).

Measurement Efforts in Social Sciences

In conceptualizing measurement efforts for individual-level empowerment, studies most commonly draw upon Zimmerman's three components of psychological empowerment (intrapersonal, interactional and behavioral) as the basis of measurement efforts (Zimmerman, 1995). Many studies have sought to develop measures for one or more aspects of Zimmerman's conceptual framework for psychological empowerment. For example, the intrapersonal component of Zimmerman's conceptualization contains several dimensions, including perceived control, self-efficacy, sense of community and perceived competence. The most common measurement instrument that has been used in varying contexts and situations to empirically measure this component of empowerment is the Sociopolitical Control Scale (SPSC). Sociopolitical control refers to an individual's beliefs about his or her ability in social and political systems, including an assessment of ability to organize a group of people (leadership) as well as influence policy decisions in the community. Originally conceived by Zimmerman and Zahniser (1991), the SPSC draws on items from ten instruments designed to assess political efficacy, perceived competence, locus of control and sense of mastery (Peterson et al., 2006). The scale has been tested in a variety of formats and contexts, and been found to be reliable (see Itzhaky & York, 2000; Zimmerman & Zahniser, 1991; Peterson et al., 2006)

Empirical efforts that aim to measure the interactional component of psychological empowerment also have been undertaken. Speer (2000) developed the

Collective Action and Interpersonal Relationship Scale (CAIRS) based on literatures in

community organizing and sociology. Using a six-item scale with two dimensions as the

independent variables (collective action and interpersonal relationships) the scale

assessed individual understandings of the mechanism (collective organization) and

methods (interpersonal relationships) that develop power to create social change. The

larger aim of the study was to assess whether intellectual understandings of power and

social change (interactional empowerment) differ from personal sense of control and

efficacy in creating social change (intrapersonal empowerment) relevant to a variety of

participatory behaviors and sense of community. The Socio-political Control Scale was

used to measure the interpersonal component of empowerment. Principle components

factor analysis, bivariate correlations and multivariate analysis offer tentative support that

the CAIRS and SPSC scales differ in ways consistent with empowerment theory.

According to the authors, the major finding from the study was that individuals'

intellectual understanding of power and social change (interactional empowerment)

differed from individuals' personal sense of control and efficacy. Findings suggest that

people may feel empowered without knowing how to make changes in those conditions

in their communities. Likewise, individuals may understand how to create social change

(methods) but may lack the sense of personal efficacy needed to act on the understanding.

Empirical efforts that seek to explain the inter-relationship between elements of

psychological empowerment, particularly focusing on how participation in community

organizations (behavioral dimension) acts as a mediating force in the intrapersonal

dimension of empowerment, can also be found. For example, Peterson and Reid (2003),

in the context of substance abuse prevention, sought to test a path model that included

personal, situational and environmental predictors of empowerment. The intrapersonal measure of psychological empowerment served as a criterion variable (measured by the Sociopolitical Control Scale), with four predictor variables (participation in substance abuse prevention activities, neighborhood sense of community, alienation, and awareness of neighborhood substance abuse problems), all of which were measured using several different scales designed for the study. As a part of a larger community survey designed to evaluate the effects of a Center for Substance Abuse Prevention Community Partnership in a northeastern United States urban setting, telephone interview data were collected from 661 community residents using a simple random sample. Awareness of neighborhood substance abuse problems was found to predict psychological empowerment directly, as well as indirectly through its relationships with participation in substance abuse prevention activities and neighborhood sense of community. Persons with greater awareness of substance abuse problems tended to participate more in substance abuse prevention activities and to have higher levels of psychological empowerment. Of significance as well though, was that greater awareness of neighborhood substance abuse problems also tended to lower neighborhood sense of community, which then lowered direct effects of awareness on both participation and empowerment. Sense of community also predicted psychological empowerment directly and indirectly through its positive effect on participation in substance abuse prevention activities. Thus, a key finding of this study was that greater awareness of neighborhood substance abuse problems served as a catalyst for citizen participation and empowerment, although the effect was reduced by the negative influence such awareness had on neighborhood sense of community. According to the authors, one implication of the study

is the need for empowerment-based substance abuse prevention initiatives to incorporate strategies that are designed to increase the sense of community.

A limited number of empirical studies have sought to develop a comprehensive measure of psychological empowerment that includes the broad range of hypothesized dimensions from the social science literature. One example of this type of effort was the development of the Psychological Empowerment Scale (PES). The PES is a 32-item scale based specifically on Zimmerman's theory of psychological empowerment. The instrument sought to assess the three dimensions of psychological empowerment for parents of children with disabilities: (a) attitudes of control and competence; (b) knowledge and skills; and (c) participatory behaviors (Akey et al., 2000). In investigating the measurement structure of the PES, including the internal factor structure of the scale and the reliability of the scores, construct, convergent and divergent validity associated with the instrument were shown to be reliable. Assessment efforts however have not included measures that are theoretically unrelated (e.g. intelligence) or negatively related (e.g. isolation) to psychological empowerment (Akey et al., 2000). I was unable to locate any additional studies that used the PES in similar or different contexts than the authors' original study.

A second example of an empirical effort designed to create and test a more comprehensive measure of psychological empowerment (cognitive, emotional and behavioral dimensions) was developed in the context of community organizing (Speer & Peterson, 2000). Created in conjunction with a community-organizing coalition that was working on substance abuse prevention, the aim of the study was to develop a measure of psychological empowerment that reflected the following areas: 1) cognitive - critical

awareness and understanding of community functioning; 2) emotional - feeling about individual's competence or ability to effect change in the community; and 3) behavioral - participatory activities focused on creating change in community contexts. The 27-item scale contained the following: (a) 16-item cognitive empowerment scale comprised of four subscales (power developed through relationships, political functioning, defining debate, and shaping ideology); (b) abbreviated six-item version of the Socio-political Control scale; and (c) an eight-item self-report of community-action behaviors. A second set of community and perceptual variables (sense of community, organizational membership, perceived involvement of institutions in the local community, and perceived drug use) were also included to allow for the exploration of relationships among those variables and the empowerment variables. There were 974 randomly selected residents of six municipalities in the northeastern United Sates who participated in the telephone interview survey. Principle components factor analysis was conducted to assess measures of cognitive, emotional and behavioral dimensions of empowerment, resulting in six significant factors (behavioral empowerment; power developed through relationships; instruments of power; political efficacy; and shaping of ideology). Bivariate and multivariate analyses were performed to explore the relationships among empowerment variables and community involvement and perceptual variables. A technique for analyzing the relationship between two sets of variables (Canonical correlation analysis) was performed to further test the hypothesized relationships among variables.

Findings of the study revealed a pattern of relationships among factors and related constructs that was consistent with some expectations, but not others. For example, the cognitive domain was not correlated with emotional and behavioral

domains, and the emotional and behavioral factors were only moderately correlated. This raised questions about the construct validity of the cognitive scale. Since the basis of the scale was the social science literature, findings suggest that participants' understandings of the methods of empowerment may not correspond to how social scientists have conceptualized them in the literature. Overall, results of the canonical analysis were supportive of the empowerment scale used, affirming the complex, context-specific and multivariate nature of empowerment.

Conceptualizations Emanating from Organizational Sciences

Perspectives of empowerment in the workplace context emanate from literature in organizational studies and applied management fields, with researchers encasing empowerment within the more general concept of power. *Relational* empowerment is referred to as top-down processing and mechanistic, positing that empowerment occurs when higher levels within a hierarchy share power with lower levels within the same hierarchy (Spreitzer, 1995). Such a perspective maintains that it is the implementation of new processes and the distribution of power that empowers employees.

From a historical perspective the theoretical roots of the relational perspective on individual-level empowerment emanate from evolving discourses in management theory (Cartwright, 2002; Cunningham, Hyman & Baldry, 1996; Wilkinson, 1998). In the early 1900s, F.W. Taylor, considered to be the father of scientific management, posed a management approach geared towards boosting worker productivity through a system of work designed to give little discretion or decision-making prerogatives to workers, in favor of having management break jobs down into detailed operational instructions that workers could merely execute (Wilkinson, 1998). In this scheme, brainpower was to be

centered with management. This system was based on worker compliance. Alienation of workers resulting in high labor turnover, absenteeism and conflict were criticisms of this form of work organization. This led to propositions of new models of work organization that were based in industrial democracy, emphasizing worker participation and employee involvement. Such propositions were further propelled by Douglas McGregor's Theory X and Theory Y which suggested that managers viewed the workforce from one of two perspectives: (a) Theory X: workers are inherently lazy and disdaining of work, thus requiring a manager who can direct and control the work process; or (b) Theory Y: workers seek fulfillment and responsibility through work and have untapped intellectual and creative potential, thus requiring a manager who can facilitate and maximize the talents workers bring and want to use (Cartwright, 2000). Movement towards Theory Y led to an array of new management approaches designed to create work environments that could achieve productivity through people. Such an approach urged managers to move away from management based on compliance, hierarchical authority and limited employee decision-making to one that emphasized trust, teamwork, empowerment, employee commitment, and utilization of workforce expertise (Wilkinson, 1998).

The relational perspective on empowerment is an outgrowth of this changing management paradigm. This perspective contends that empowerment is a construct involving a top-down process of power sharing, participatory management and decision-making, employee involvement, increased access to information, delegation and power distribution (Spreitzer, 1995). Researchers such as Kanter (1979, 1988) viewed empowerment from this perspective, involving such things as shared power, control, or perceived decision-making authority. Kanter's structural theory of power in organizations

(1979) asserts that workplace behaviors and attitudes are determined by social structures in the workplace rather than personal predispositions. According to Kanter, workers are empowered when they perceive that their work environments provide opportunity for growth and access to power needed to carry out job demands. Managers in particular must provide their employees not only with information and resources necessary to do a job, but also an effective support system and opportunities for learning and growth (Kane-Urrabazo, 2006; Kanter, 1988). If these conditions do not exist, employees feel powerless. The organizational structures Kanter believe are important to the growth of empowerment include: (a) access to information; (b) receiving support; (c) having access to resources necessary to do a job; and (d) having opportunity to learn and grow (Laschinger, Finegan, Shamian & Wilk, 2003). Viewing empowerment on a continuum of powerless to empowered, Kanter argues that moving persons towards empowerment would reduce the undesirable consequences of powerlessness including: low morale, bureaucratic rules-mindedness and tight territorial control (1977).

Alternative perspectives on empowerment that would distinguish between "situational attributes" (e.g. management practices) and personal or psychological cognitions about those attributes began to abound in organizational studies literature in the 1980s and 1990s. Perceiving some of the limitations in the relational perspective, researchers in organizational studies began to examine empowerment from a psychological perspective, focusing on employee's perception of empowerment and various mediating variables that impact it. This is often referred to as organic or bottom-up processing, maintaining that empowerment is achieved only when psychological states produce a perception of empowerment (Matthews, Diaz & Cole, 2003). This vein of

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thought was pursued because of a belief that management practices were only one set of

conditions that may empower employees, but may not necessarily do so. For example,

Chiles and Zorn (1995) indicate that while managerial strategies and techniques, such as

participative management and goal setting, can cause employees to feel empowered,

individuals' interpretations of such efforts must be emphasized in any conceptualization

of empowerment. Thus, it began to be suggested that while organizational and individual

actions of managers may facilitate empowerment, and may in fact be major influences on

employees' empowerment-related beliefs and feelings, employees' interpretations of such

actions may act as a mediator of the outcome, i.e.empowerment or lack thereof (Albrecht,

1988 as cited by Chiles & Zorn, 1995).

Researchers soon began to consider additional variables that impact the process

and outcome of empowerment in the workplace context on an individual level.

Specifically, researchers such as Conger and Kanungo (1988) added a motivational

construct to the conceptualization, drawing upon Bandura's theory of self efficacy. Self-

efficacy theory has been used to conceptualize personal/interpersonal view of

empowerment, positing that a person's motivation to complete a task is contingent on

belief in her or his ability to perform the task. The more a person believes she or he has

the ability to perform a task, the more motivated she or he is to attempt it. Thus,

developing self-efficacy has been equated with cultivating a sense of empowerment in

employees (Bandura, 1986).

Locus of control is another example of a variable hypothesized to impact the

process and outcome of empowerment in the workplace context on an individual level.

Developed from Rotter's social learning theory (1966, as cited by Wiley, 1999) locus of

control represents one of several psychological variables considered related to empowerment. Locus of control suggests that people interpret what happens to them in one of two ways: 1) people attribute what happens to them as either being controlled by themselves, or 2) people attribute what happens to them as either being controlled by their environment. Those who attribute control of these events to their own actions (internals) are considered to have an internal locus of control; those who attribute control to others or external events are considered externals (Wiley, 1999, p. 15).

Expanding upon self-efficacy and locus of control as two elements within the motivational aspect of empowerment, Thomas and Velthouse (1990, p. 672) proposed four cognitive components of intrinsic motivation as the basis for employee empowerment: (a) *impact* (degree to which behavior is seen as making a difference in terms of accomplishing the purpose of the task or producing the intended effects in one's task environment); (b) *competence* (degree to which a person can perform task activities skillfully when he or she tries); (c) *meaningfulness* (concerns the value of the task goal or purpose, judged in relation to the individual's own ideals or standard); and (d) *choice* (causal responsibility for a person's actions, specifically focusing on the role of choice in decisions).

Spreitzer (1995) further developed the work of Thomas and Velthouse, conceptualizing empowerment in the workplace context using four dimensions: (a) meaning (the match between what the job role requires and an employee's personal values and behaviors; (b) competence - self-efficacy; (c) self-determination - using choice and autonomy in making decisions, initiating and controlling work behavior and process; and (d) impact - the degree to which an individual has influence over job

outcomes. As pictorially described in Figure 1, Spreitzer (1997) suggests that

psychological empowerment mediates the relationship between the social structural

context and behavioral outcomes. The antecedents of empowerment include: (a) social

structural variables that challenge the assumptions of a traditional bureaucratic structure -

less hierarchical and bureaucratic structures, and access to sources of power through

strategic information, resources, and managerial support; and (b) an organizational

culture which values the human assets of the hypothesized to organization. In terms of

outcomes of empowerment, psychological empowerment is hypothesized to be related to

behaviors which challenge the status quo. Empowered individuals are likely to challenge

and question rather than blindly follow, likely to be more innovative and upward

influencing. Therefore, it is suggested that psychological empowerment mediates the

relationship between the social structural context and behavioral outcomes (Spreitzer,

Social Structural Antecedents	*Psychological Sense of Empowerment*	*Behavioral Outcomes*
Organic Structure		
		Innovation
Access to Strategic Information	Meaning	
		Upward Influence
Access to Organizational Resources	Competence	
		Effectiveness
Organizational Culture	Self-determination	
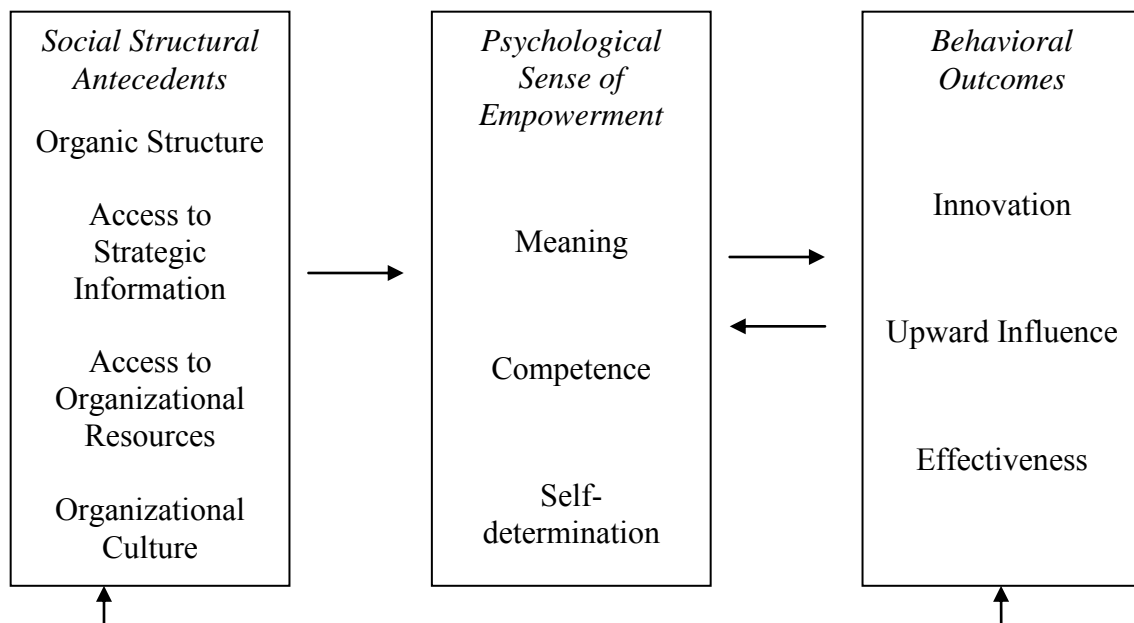
Figure 1. Theoretical model of individual empowerment in organizations.

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1997).

Measuring Empowerment in the Workplace Context

Efforts aimed at measuring individual-level empowerment in the workplace context have most commonly been approached from a quantitative methodology, using empowerment scales with varying populations. The crux of measurement efforts have sought to draw a relationship between empowerment and the theoretical aspects of self-efficacy, self concept, aspects of control, competence, and self-determination. Research has more heavily focused on measuring workers' or employees' perception of empowerment, rather than measuring empowering practices of managers or leaders. In a literature synthesis of how empowerment has been measured in the workplace context in an array of disciplines, Arneson and Ekberg (2006) identify and describe nine questionnaires that have been used in a variety of field applications. My research yielded additional measurement instruments. Examples of populations studied using such instruments include corporate managers, nurses, social workers, teachers, and corporate employees. Table 5 provides a summary of empowerment measurement instruments reviewed by Arneson and Ekberg (2006, p. 41) as well as additional scales that emerged from my own research.

In the workplace context, the empirical study of the relationship between psychological aspects of empowerment and workplace structural conditions of empowerment has been a strong and consistent focus, particularly in the field of nursing since the late 1980s. Driven by chronic staff shortages and high turnover rates of staff nurses, research efforts were initiated to further understand the relationship between various aspects of empowerment (psychological and organizational) and job strain,

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Table 6: *Examples of Questionnaires Measuring Empowerment in the Workplace*

Author	Questionnaire	Subscales	Items (n)	Field of Application
Arnold et al. (2000)	The Empowering Leadership Scale	• Leading by example • Participative decision making • Coaching • Informing • Showing concern/interact with the team	28	Leadership/ management
Chiles and Zorn (1995)	Empowerment Instrument	• Feelings of competence • Feelings of authority or control	6	Employees
Frans (1993)	The Social Work Empowerment Scale	• Feelings of authority or control • Collective identity • Knowledge and skills • Self-conception • Critical awareness • Propensity to act	34	Social workers
Klackovich (1995)	Reciprocal Empowerment Scale	• Reciprocity • Synergy • Ownership	36	Employees
[a] Laschinger (1996)	Conditions of Work Effectiveness Questionnaire (CWEQ)	• Opportunity • Information • Support • Resources	20	Employees
[a] Laschinger et al. (2001)	Conditions of Work Effectiveness Questionnaire II (CWEQ II)	• Opportunity • Information • Support • Resources • Formal power • Informal power	19	Nurses
Leslie et al. (1998)	Worker Empowerment Scale	• Personal control of work environment • Perceived control of work orientation • Perceived control of work relationships	18	Social workers

Author	Questionnaire	Subscales	Items (n)	Field of Application
[a] Matthews, Diaz & Cole (2003)	Organizational Empowerment Scale	• Control of workplace decisions • Dynamic structural framework • Fluidity in information sharing	19	Employees
Menon (1999)	Psychological Empowerment Instrument	• Perceived control • Perceived competence • Goal internalization	9	Employees
[a] Roller (1999)	Perception of Empowerment Instrument	• Autonomy • Responsibility • Participation	15	Employees
Spreitzer (1996)	Psychological Empowerment Instrument	• Meaning • Competence • Impact • Self-determination	12	Employees
Wilson (1993)	The Self-empowerment Index	• Courage to take risks • Self-reflection • Autonomy	25 pairs	Teachers

Note. [a] Scales that emerged from my own research that were not included in the Arneson and Eckberg (2006) synthesis

burnout, employee retention and overall job satisfaction. Some of the latest research has

focused on specifying an *order* in the relationship between psychological aspects of

empowerment and organizational aspects of empowerment.

For example, Laschinger, Finegan, Shamian and Wilk (2001) sought to test an

expanded model of Kanter's structural empowerment, testing relationships among

structural empowerment, psychological empowerment, job strain, and work satisfaction.

The researchers proposed that psychological empowerment is an outcome of structural

empowerment. These relationships were tested using a predictive, non-experimental

design with a random sample of 404 Canadian nurses. The Conditions of Work

Effectiveness Questionnaire (Laschinger, 1996), Spreitzer's Psychological Empowerment

Questionnaire (1995) were used to measure the empowerment variables in the study. Structural equation modeling analysis revealed a good fit of their hypothesized model to the data; however a major limiting factor in the study was the cross-sectional design that did not allow analysis of whether such relationships held over time.

Two years later a longitudinal study was undertaken seeking to determine whether perceptions of structural empowerment and psychological empowerment could predict nurse burnout three years later (Laschinger et al., 2003). Researchers predicted that perception of structural empowerment would increase perception of psychological empowerment, which in turn would decrease perceptions of burnout three years later. It was proposed that the effects of structural empowerment on burnout are indirect, with the relationship between structural empowerment and burnout being mediated by psychological empowerment. 600 staff nurses in Ontario, Canada were randomly sampled at two points in time. The Conditions of Work Effectiveness Questionnaire II and Spreitzer's Psychological Empowerment scale (1995) were used to measure the empowerment variables. Structural equation modeling was again used to model the relations among constructs while simultaneously estimating all hypothesized paths and indirect or mediating effects.

Results indicated that perceived access to structural empowerment in staff nurses' work environment had an impact on psychological empowerment of nurses, and ultimately on emotional exhaustion after three years. While such results provided further evidence for the suggestions that psychological empowerment is a logical outcome of structural empowerment and that empowerment prevents burnout, subsequent research has not produced findings that are as clear cut. For example, a follow-up study analyzed

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the same data, however focused on the relationship between perception of structural empowerment, psychological empowerment and job satisfaction. While changes in perceptions of access to structural empowerment were found to have an impact on changes in both psychological empowerment and job satisfaction over time, researchers did not find that changes in psychological empowerment predicted changes in job satisfaction. This was an unexpected finding, and points to the complexity of such relationships that are still not fully understood.

Measuring Empowerment in Human Service Professionals

In searching for empirical studies on empowerment in the context of human service organizations and the workers who are responsible for facilitating empowering outcomes with, and on behalf of clients, only scant research can be found. Limited studies that have focused on this topic area can be grouped into two categories. In summary, the first category of studies represents research efforts that have sought to understand the development of empowerment in the context of formal educational efforts (e.g. graduate students in social work). Such studies have used both cross-sectional and longitudinal designs, aiming to examine change in students' perception of empowerment throughout the course of their educational experience. The second category of studies represents research efforts aimed at examining the perception of empowerment of professionals currently employed in various fields in human services. Studies uncovered in this category exclusively used cross sectional designs that measured perception of empowerment in particular groups of human service professionals (e.g. child welfare workers, para-professionals etc.). Also, unlike studies focused on the role of formalized education in enhancing perception of personal and professional empowerment, these

studies focus on a broader set of factors believed to potentially account for differences in psychological empowerment of human service professionals.

Role of Formal Education in Facilitating Empowerment

Studies that have examined the role that higher education programs may play in facilitating empowerment are premised on two core assumptions. First, such studies assume that empowerment is something that can be developed, with educational experiences believed to play a role in helping to facilitate an empowerment process for students. In this context, individual empowerment is believed to occur through the process of personal development that involves the expansion of skills, abilities and a more positive self-definition (Staples, 1990). Second, such studies assume empowerment of human service professionals is a critical ingredient in, and connected to, workers' ability to foster client empowerment. In essence, empowered workers, who believe in their ability to make a difference in their own lives as well as in others, are more likely to pass this skill on to those with whom they work (Galant, Trivette, & Dunst, 1999). Examples of how such studies were constructed, as well as key findings, are described below.

Frans and Moran (1992) sought to examine the role of graduate social work education in the development of humanistic attitudes and personal empowerment in social work students, conducting a cross sectional study, as well as a small longitudinal study. In the form of a self-administered questionnaire, modified versions of three scales from the Howard and Flaitz Social Humanistic Ideology instrument were used to assess the humanistic attitudes of students, while five scales from the Social Worker Empowerment Scale (Frans, 1993) were used to measure perception of empowerment in

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students. In a cross sectional study that surveyed 60 beginning and 54 graduating Masters in Social Work students, findings indicated that graduating students had statistically significant higher scores in humanistic attitudes than beginning students; however the difference between those groups in perception of empowerment was not statistically significant. Comparison of differences in mean scores between groups was used to analyze differences. Additionally, ordinary least square regression was used to further analyze socio-demographic factors besides graduate education that may impact both humanistic attitudes and perception of empowerment (e.g. age, gender, race, income etc.). None of the coefficients for the added variables were statistically significant. In the longitudinal portion of the study, 21 of the 60 beginning students included in the first study completed a posttest questionnaire just prior to graduation.

The results were similar to the first study, with statistically significant differences between pre and post-test scores on humanistic attitudes. Statistically significant differences in pre and post test scores on perception of empowerment were not found, although scores moved in a positive direction. Of interest to note, is that overall scores on both scales demonstrated that *entering* students perceived themselves to be empowered, as well as to have strong identification with humanistic attitudes. While the educational experience was found to contribute to further positive change in identification with humanistic attitudes, the authors suggest that one explanation for moderately-high levels of entering scores on both instruments is that as a profession, social work may draw "empowered" individuals because of its emphasis on professional identity and its action orientation. The small sample size, particularly in the second study, is considered a limiting factor.

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Van Voorhis and Hostetter (2006) also examined changes among social work graduate students, focusing on perception of social worker empowerment and commitment to client empowerment through social justice advocacy. The major purpose of the study was to understand changes in MSW students' perceptions of their empowerment as social workers, their commitment to social justice advocacy, and the connection between worker empowerment and commitment to social justice advocacy. Specific to the primary purpose of the study, two instruments were used to measure MSW student perceptions about worker empowerment and commitment to client empowerment through social justice advocacy. First, the Social Work Empowerment Scale (Frans, 1993) was used to measure personal and professional perception of power held by social workers. The Social Justice Advocacy Scale (Van Soest, 1996, as referenced by Van Voorhis & Hostetter, 2006) was used to measure how someone would act when facing a situation in which another person was being denigrated or harmed because of being a member of an oppressed population. Using a pre-post survey design, 85 students completed the pre-test survey, and 52 also completed the post-test survey, reflecting a 61% response rate.

Similar to the empowerment score results in Frans' and Morans' study (1992), results of this study indicated that entering students saw themselves as moderately empowered (mean score of 3.56 on a 5-point scale), as well as possessing commitment to empowering clients through social justice advocacy (mean score of 3.98 on a 5-point scale). A positive correlation between empowerment and commitment to social justice advocacy was also found in entering students. In assessing changes over time, paired sample, one-tailed t-tests were used to analyze entry and exit scores for worker

empowerment and commitment to social justice advocacy. Statistically significant increases in both were found to have occurred between beginning and completing respondents MSW education. Demographic variables (e.g. gender, ethnicity, parents' social class) were not found to be significantly related to increases in either, while a positive association between worker empowerment and commitment to social justice advocacy was maintained over time. The findings suggest that social work education helps students improve their sense of empowerment as social workers, further strengthening the assets such students bring to the educational forum. The non-random, small sample size of students from one school, reliance on self-report responses, as well as attrition (only 52 of 89 students completed the post survey) are considered to be limitations to this study.

Measuring Empowerment of Persons Employed in Human Service Organizations

In addition to limited studies that have examined change in perception of empowerment in students pursuing educational efforts that will presumably lead to employment in the human services field, there are also examples in the literature of empirical studies that examine perception of empowerment in professionals currently employed in the field of human services. While sparse in number, of the studies uncovered, perhaps what most distinguishes such studies from the previously discussed research is their focus on factors believed to potentially account for *differences* in psychological empowerment of human service professionals (e.g. socio-demographic characteristics and various structural conditions in the workplace). Examples of such studies are discussed below.

In dissertation research, Scott (1997) analyzed the difference in empowerment between African American, Hispanic-American and White-American social workers employed by a county human services department. Her study was premised on a belief that oppressive historical experiences of African American and Hispanic Americans have influenced their behavior and perceptions of power to the extent that in the workplace, such perceptions differ from those of White Americans. Examples of her hypotheses include: (a) As a group, White American social workers would report higher levels of autonomy, control and influence than African American and Hispanic American Social Workers; and (b) As a group, White American social workers would report higher levels of self concept, greater perception of organizational strengths, greater access to resources and greater propensity to act.

To test her hypotheses, Scott analyzed responses of 184 social workers from a human services department in Florida to a 93-item self-administered questionnaire. A non-random, convenience sampling method was used. The questionnaire contained items drawn from three scales. First, the Dimensional Empowerment Model scale (Jones & Bearley, 1992, as cited by Scott, 1997) was used to measure perceptions and attitudes about being empowered along five dimensions: autonomy, control, influence, resources and strengths. The Social Worker Empowerment Scale (Frans, 1993) was used to measure empowerment along three additional dimensions (collective identity, self-concept, and propensity to act). Finally, the Anomia Scale (Srole, 1956, as cited by Scott, 1997) was used to measure perception of social alienation. This scale was used as a criterion against which the validity of the other scales would be tested. Analyses of data include frequency, factor analysis, reliability analysis, inter-scale correlations and

multivariate analysis of variance (MANOVA). Seeking to test whether or not there were significant differences between three groups (White, African American and Hispanic American) in perception of empowerment, MANOVA was used to evaluate mean differences on all dependent variables at the same time while controlling for intercorrelations among them.

Results indicated that all three groups had empowerment scores in the moderate range (between 2.5 and 3.5), with no significant differences between the three groups on any of the scales. Thus, even though the literature suggests that there are distinguishing characteristics between the three groups that would be expected to result in different perceptions of empowerment, no differences were found. Scott suggests that the lack of difference may be the result of an underdeveloped construct of empowerment, and its dimensions. In particular, the absence of a scale to explore cross-cultural differences in perception of empowerment was noted, as well as the absence of prior empirical research on the Dimensional Empowerment Model scale used in the study. Future research aimed at developing measures of empowerment that include cultural dimensions was a key recommendation by the researcher.

In a different type of study, Daniels (2002), sought to build upon previous research that showed that counselor licensure is associated with professional identity, and to a lesser extent, with enhanced professional power. Towards that end, counselor licensure status and aspects of empowerment were examined. Daniels speculated that obtaining and maintaining one's license may suggest an increased personal investment in the counseling profession and that this investment may positively influence perceptions of empowerment. A secondary focus of the study examined whether certain demographic

characteristics (number of years in professional practice, full-time or part-time employment and membership in professional organizations) were related to aspects of counselor empowerment. She speculated that counselors who invested more time in the profession and who are members of professional organizations may experience greater perceptions of empowerment. To examine her hypotheses, a non-random sample of 78 mental health counselors voluntarily recruited from two states in southeastern United States completed the 34-item Social Worker Empowerment Scale (Frans, 1993).

In analyzing results, Pearson correlations for the instrument's five subscales were calculated, showing that certain subscales were significantly related to each other. Propensity to Act and Self-Concept were significantly related to each other. Collective Identity was significantly related to Propensity to Act. Therefore multivariate analysis of variance was used to reduce error in her analysis. Reported findings showed that non-licensed counselors scored higher on overall empowerment, as well as the subscales of collective identity, and propensity to act. There was no difference between the groups on self-concept. In analyzing the relationship between perception of empowerment and years of professional practice, a significant negative relationship was found between years in professional practice and collective identity. No other aspects of empowerment were significant with this variable. Additionally, part-time mental health counselors scored higher than full-time mental health counselors on collective identity, with no other aspects of empowerment significantly correlating with this variable. Finally, membership in professional organization was not significantly correlated with any of the empowerment subscales.

In discussing the nature of her findings, which by-in-large, were unexpected given the premise of the study, the researcher offers interesting insight into the findings. Most significant perhaps is that since all persons in the sample were employed in community mental health agencies, the author speculates that differences in work-related dimensions of empowerment that were not explored in this study may be stronger influencers on perception of empowerment. In light of this consideration, future research the variables considered to affect perception of empowerment in this study may possibly take on new meaning or significance if considered in conjunction with other work-related variables.

In a study that also sought to understand perception of empowerment in a particular group of human service professionals, Wallach (2002), examined whether, and under what conditions para-professionals in human services are empowered. Para-professionals were defined as those working in non-professional, direct service provider roles in a human service organization. In particular, drawing upon dimensions proposed in organizational literature bases, the following workplace variables were selected as potentially important in influencing empowerment of para-professionals in human service organizations: role in decision-making (level and content of participatory involvement), supervisor-supervisee relationship, peer support, and work stressors such as role ambiguity, e.g. absence of clear job descriptions, service guidelines, and behavioral requirement, and role overload, i.e. expectations to engage in several role behaviors, all of which may be mutually incompatible. There were 160 para-professionals recruited from eight non-profit agencies in Hawaii and the state of Hawaii Department of Human Services to participate in the study, with six instruments used to measure empowerment and related variables. Spreitzer's 16-item Empowerment Scale (1995) was used to

measure four dimensions of empowerment, including the following: (a) meaning (the match between what the job role requires and an employee's personal values and behaviors; (b) competence (self-efficacy – a belief in one's capability to perform work activities with skill); (c) self-determination (using choice and autonomy in making decisions, initiating and controlling work behavior and process; and (d) impact (the degree to which an individual has influence over job outcomes). Perception of role ambiguity was measured through a six-item scale by Rizzo, House & Lirtzman (1970, as cited by Wallach, 2002). Horris and Bladen's Role Overload Scale (1994, as cited by Wallach, 2002) measured perception of amount of work. The extent to which workers perceived themselves to be involved in work unit and organizational decision-making was measured by the Participatory Decision-making Scale (Behr, Walsh & Taber, 1976, as cited by Wallach, 2002). Perception of a worker's relationship with his or her supervisor was measured by the Supervisory Working Alliance Inventory (Efstation, Patton & Kadash, 1990, as cited by Wallach, 2002). Extent of support from co-workers was measured using the Peer Support Scale (Abbey, Abramis & Caplan, 1985, as cited by Wallach, 2002). Finally, the extent and nature of staff decision-making within the work unit was measured using the Unit Decisions Scale (Packard, 1993, as cited by Wallach, 2002).

In analyzing the relationship between job dimensions and empowerment, correlation and regression analysis techniques were used. Each of the theoretically derived work-related variables was independently associated with empowerment. Within multiple regression analysis, an assessment of the combined effect of all of the predictor variables on empowerment was conducted. In this analysis, role ambiguity, supervisory-

supervisee work relationship, and decision-making role at the unit level were found to predict empowerment, with remaining variables not contributing new statistically significant information to the prediction of empowerment. Additional stepwise multiple regression analysis was conducted to determine whether and to what extent key work-related variables increased the R^2 above the R^2 predicted by a combination of significant socio-demographic variables (age, education tenure, agency type, and unit size). After entering significant socio-demographic variables ($R^2 = .13$, $F(5, 152)=4.156$, $p<.001$), work-related variables were added, i.e. role ambiguity, role overload, participation, unit decisions, supervisory relationship and peer support, resulting in a statistically significant increase in R^2 (R^2 change $= .41$, $p<.01$), with an overall R^2 of .55. Therefore, work-related variables explained significant variance in empowerment above and beyond variance contributed by socio-demographic variables. Several limitations of the study were identified by the researcher, including the use of a cross-sectional design, use of a convenience sample and use of self-report data. Several implications for future research were identified, including: (a) conducting experimental and longitudinal research efforts that test empowerment interventions effects within human service organizations; (b) replication studies that examine organizational variables and empowerment; and (c) replication studies that include objective indicators of outcomes associated with psychological empowerment such as absenteeism, job retention and performance effectiveness.

A final example of empowerment-based research in human services focusing on a particular group of professionals is a study that examined factors influencing the empowerment of child welfare workers (Cearley, 2004). In this study, empowerment was

defined as workers' belief that they have the capability to shape events in their jobs and their lives, that their actions are effective, and that they have some control over their choices and actions (p. 314). The study was premised on a belief that child welfare workers who are guided toward a sense of empowerment in their work will be able to help their clients believe the same. The over-arching question examined was: What factors contribute to workers' perception of their own empowerment? According to the author, the study sought to operationalize and test one particular aspect of empowerment: decision-making ability. Towards this end, the following factors believed to influence workers' sense of empowerment within a statewide child welfare agency: supervisory help-giving behaviors, organizational support, length of time as a child welfare employee, and type of degree. Using a cross-sectional survey design with a non-probability convenience sample of 91 child welfare workers in an agency administered at the state level in the southeastern United States, participants completed a self-administered questionnaire comprised of three instruments as well as a demographic survey. Perception of empowerment was measured using the Worker Empowerment Scale (Leslie et al., 1998). This 18-item scale measures perception of empowerment along three dimensions: (a) personal control of work environment; (b) perceived control of work orientation; and (c) perceived control of work relationships. The Supervision Helping-Giving Scale (Dunst, Trivette, & Hamby, 1996, as cited by Cearley, 2004) examines whether workers perceive that their supervisors demonstrate certain kind of help-giving characteristics to them as supervisees. Finally, the Survey of Perceived Organizational Support (Eisenberger, Fasolo & Davis-LaMastro, 1990, as cited by Cearley, 2004) assesses employees' perceptions that an organization's judgments of them are favorable

or unfavorable and the expectation that the organization will support or impede them and their work in a variety of situations.

Multiple regression analyses were used to determine what proportion of variance in perception of empowerment can be accounted for by certain work-related variables (perception of supervisors' help-giving behaviors, and perception of organizational support) as well as two demographic variables (length of time as a child welfare worker and type of professional degree). Squared R-value showed that 42% of variation in worker empowerment was explained by all five variables. Each predictor variable was then weighted to determine each variable's contribution to the overall prediction. By calculating a beta weight for variables, the researcher examined the significance of each coefficient in the model to identify which ones were significantly correlated to the variable of interest (worker empowerment) after controlling for all predicted variables.

The results indicated that the only significant variable (and the one with the highest beta weight) was supervisor help-giving behavior. Path analysis, or structured equation modeling was then pursued to confirm relationships among all variables simultaneously as well as confirm the multiple regression results. Similar to previously discussed studies, several limitations of the study include the use of the following: cross-sectional design, non-probability sample and self-report data. Small sample size and collection of data from workers in only one state agency further limit the degree to which study results can be generalized beyond the study population.

Summary of Research on Empowerment of Human Service Professionals

In summarizing current research that examines empowerment of human service professionals, while limited in scope, research efforts have most heavily focused on

understanding factors that account for differences in empowerment, as well as factors that contribute to increased levels of empowerment in workers. Socio-demographic factors alone, e.g. age, ethnicity, licensure status, professional degree, were not found to substantively explain differences in perception of psychological empowerment of human service professionals. However such variables have been found to contribute to differences in overall perception of empowerment when considered in conjunction with work-related aspects of empowerment, e.g. participation in decision-making, role of supervision. Except for studies focused on change in empowerment during the course of higher educational pursuits, no longitudinal studies were uncovered that examined change in perception of empowerment over time in working professionals. Also of interest to note is that no studies were uncovered that sought to examine the effects of empowerment interventions within human service organizations that might affect change in perception of empowerment.

FDC as an Empowerment-based Intervention in Human Services

At its core, FDC is a program with a dual focus that addresses the professional development of workers as a means through which they can be *empowered* themselves, e.g. critical awareness, reflective practice, self-care, and collective identity, as well as *empowering* in their work, that includes working from an empowerment-oriented, strengths-based perspective with individuals and families; creating changes in organizational policies and practices to make them supportive of empowerment-based practice; and participating and affecting change in the larger helping system and community. While not explicitly described in other research studies that have been conducted on the FDC program, empowerment tenets that form the backbone of this

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program are described below, derived from background information published by the

original creators of the program (see Forest, 2003), as well as the trainer and participant

manuals used in the program (Forest, 2003; Palmer-House & Forest, 2003). Figure 2

pictorially describes the key components of the FDC program and what is believed to

occur for participants as a result of participation. The narrative that follows describes in

more detail how key FDC components function together to facilitate a process of

empowerment for participants.

Participating in FDC…	**ignites an empowerment process for participants resulting in:**
• Interagency, Community-based Collaborative Training Program • Critical reflection-action education model based on adult learning principles • Cross-Disciplinary, cohort-based, group training experience that occurs over extended time: 1) 80-hours of classroom-based instruction; 2) learning extension activities; 3) portfolio development and advisement; 4) competence examination	• Change in worker's perception of self-worth, professional identity, purpose, and competence • Change in how workers think about and relate to their environment through: critical thinking abilities of root causes of problems, stronger professional networks and alliances, improved communication, problem-solving and collaboration skills • Change in workers' perception of their capacity to exert control and influence change in multiple domains (self, clients, agency, system)

Figure 2. The role of FDC in facilitating an empowerment process for workers.

Interagency, Community-based Collaborative Program

FDC was intentionally designed to be an interagency, community-based program that would be offered in partnership or collaboration between two or more family-serving agencies. The beginning point for introducing FDC in a community is the formation of an interagency collaboration in order to train facilitators, portfolio advisers and build support for the training model in the community. The rationale behind an interagency collaborative model is that collaboration helps communities understand that family development is not merely a *program*, but rather a unique approach to the helping process that seeks to build a broad network of support for a strengths-based, empowerment-oriented helping system (Palmer-House & Forest, 2003). In describing how and why family development is an interagency and collaborative program, Palmer-House & Forest (2003) write, "the goal is to transform an entire community's family support delivery system" (p. 33). Achievement of such a goal can only be possible through the involvement of a broad array of agencies, including, but not limited to fields such as: home health care; early intervention; mental health; crisis intervention; drug and alcohol; and child welfare. An interagency, collaborative approach models the use of an empowering *process* as one of several tools in achieving an empowerment *outcome*.

In structuring FDC as a collaborative, interagency program, participating agencies build networks together, share leadership and responsibility for the program's development and implementation, including: identifying and training community-based training facilitators and portfolio advisers; building support in the community for strengths-based, empowerment oriented practice through FDC program expansion; and jointly working to secure resources to offer the program. In proposing a framework for

evaluating empowerment-based education programs, Wallerstein suggests that attributes

for organizational empowerment include stronger social networks and ability of

organizations in a community to collaborate and solve problems as evidenced by:

perceptions of support, satisfaction and community connectedness; and changes in

network function and utilization (1992). As an interagency, community-based program,

FDC was designed to support the achievement of empowerment outcomes at not only the

individual level, but also the organizational and community levels.

Critical Reflection-Action Education Model

The roots of a critical reflection-action educational model are traced to the work

of Paulo Freire, a Brazilian educator and who dedicated himself to abolishing cultural

invasion, manipulation, conquest, and domination of oppressed groups of people. The

core of his commitment was the use of conscientization to abolish illiteracy. Through

conscientization, people were encouraged to learn to perceive and understand social,

political and economic conditions and to take action against oppressive elements as a

result of that realization (Freire, 1973). It involved raising awareness of people so they

were able to take personal responsibility and control for their own destiny, including

finding a "voice" with which to question reality and engage in intentional efforts and

actions to change the status quo (Freire, 1973).

Integrating Freireian principles into educational programs involves: (a) treating

people as the subjects of their own learning; (b) "listening" to people's life experiences

and making participants into co-investigators of their shared problems in their

community; (c) encouraging "dialogue" about issues uncovered through listening so that

everyone participates as equals to interpret problems together, using critical thinking or

problem-posing to analyze the root causes of one's situation in society (Wallerstein, 1992).

The *Empowerment Skills for Family Workers Instructors Manual*, describes four types of adult learning promoted in the FDC training experience: (a) instrumental learning ("how to" learning designed to use a variety of teaching techniques and activities that address different learning styles; (b) experiential learning ("try to" learning designed to allow workers to practice skills in a safe and supportive setting; (c) self directed learning ("choose to" learning through learning extension activities and portfolio development activities which allow workers to direct their own learning according to self-identified personal and professional development needs); and (d) transformative learning ("to make meaning of" learning designed to assist workers in making changes in their perception and interpretation of life experiences and envision and carry out news ways to create desired change) (Palmer-House & Forest, 2003, p. 38-39).

The cornerstone of the educational model used in FDC training combines key adult learning principles with a participatory, partnership-based learning environment that consistently encourages critical reflection and action. FDC instructors and portfolio advisers are considered to be partners in the learning process with workers, having a primary role of helping workers explore and grow in knowledge and experience of family development (Palmer-House & Forest, 2003). Information and experiences of workers are held in equal value with those of instructors and portfolio advisers, and are intentionally drawn out in the instructional process. Instructors and portfolio advisers are challenged to model the steps of family development in their relationships with workers,

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further emphasizing their role as partners and facilitators of learning versus that of being a "vessel" of knowledge or "the expert."

Cross-disciplinary, Cohort-based Group Training Experience

Over the course of several months, workers participate in over 80 hours of classroom-based instruction with the same group of participants. Through group-based learning activities, interaction and bonding is highly supported and utilized as a tool in supporting the intended empowerment outcomes for FDC participants. Specifically, workers engage in a group process through which they individually and collectively reflect on their personal and professional lives, their future goals and their potential as individuals, human service workers, and community change agents. Workers develop trusting relationships and networks with others through which support mechanisms can be built to set and achieve goals in multiple areas: for themselves personally and professionally; for the families they work with; in the organizations in which they work; and the larger helping system workers operate within.

Use of a group-based learning environment to facilitate empowerment outcomes is highly consistent with theoretical underpinnings of an empowerment construct in which empowerment is defined not merely an individual-level, psychological phenomenon, but rather from an ecological perspective which links psychological aspects of empowerment (cognitive, personality and motivational components) to an individual's connection and participation in larger structures (Bronfenbrenner, 2005; Perkins, 1995; Segal et al., 1995). It is through the group experience that individuals gain support for, and in some cases, work together to create desired change on multiple levels (individual, organizational, community).

Worker as Initial Focus and Impetus for Achieving Multi-dimensional Goals and

Outcomes in FDC

I propose that the FDC credentialing experience is designed to facilitate

conditions through which workers can: 1) realize empowered outcomes on a personal or

individual level; 2) become empowering in their work with individuals and families; 3)

support and/or become agents of change for creating organizational and system level

changes needed to support a paradigm shift to strengths-based, empowerment-oriented

models of practice. Table 6 outlines key elements in FDC that I believe support the multi-

dimensional goals of the program:

Table 7: *Key Elements of FDC Supporting Multi-dimensional Empowerment Goals*

Helping Workers become E*mpowered* through:	Helping Workers become *Empowering* in their Work through:
• Building critical awareness by unveiling limits and myths of prevailing human service helping models based on deficits and a reliance on a "services approach" • Affirming frustration this causes for both workers and families and introducing a different helping approach: philosophy of family development • Acknowledging potential conflict of existing and new paradigms and helping workers to resolve it • Individually and collectively reflecting on workers' personal and professional lives, their future goals and their potential as individuals, human service workers, and community change agents	A. Teaching tenets of empowerment and strengths-based practice • Sharing power and building helping partnerships • Valuing diversity • Helping families build on strengths, increase self-reliance and set and reach their own goals • Using strengths-based assessment & case planning tools and methods • Valuing and mobilizing informal helping networks as a means of increasing families' ability to build healthy self-reliance in their community

Helping Workers become *Empowered* through:	Helping Workers become *Empowering* in their Work through:
• Facilitating workers' development of trusting relationships and networks with others through which support mechanisms can be built to set and achieve goals in multiple areas: for themselves personally and professionally; for the families they work with; in the organizations in which they work; and the larger helping system they operate within • Affirming and validating human service work and the transforming impact workers who use strengths-based, empowerment-oriented approach can have • Introducing communication techniques to enhance ability to communicate effectively • Introducing self care practices: mindfulness-based stress reduction and management techniques that help workers balance work and family life • Supporting worker self-reliance by exploring how to create and maintain effective support systems • Facilitating sense of efficacy and professional competence by teaching empowerment-based knowledge and skills needed to be effective in their work as well as acknowledging achievements of training by awarding the family development credential upon completion.	• Locating and mobilizing resources: on behalf of clients and teaching clients how to do this themselves • Advocacy: on behalf of clients and teaching clients how to advocate for themselves B. Teaching workers how to be part of creating and/or supporting empowerment-based agencies and systems • Increased networking and collaborating with other professionals to help agencies and the helping system overall become more supportive of families' desire to become self-reliant • Influencing other professionals to adopt strengths-based, empowerment-oriented practices by intentionally sharing new knowledge and skills • Examining policies and practices on agency and system levels that are not supportive of families and taking steps to impact and/or support change.

Helping Workers Become Empowered

In support of empowering workers, FDC directly addresses issues such as emotional

exhaustion and depersonalization of human service workers, which has been found in the

literature to contribute to overall powerlessness of persons who work in the human

service field (Cox & Joseph, 1998; Frans, 1993; Pinderhughes, 1983; Shera & Page,

1995; Turner & Shera, 2005). On the very first page of the curriculum handbook all FDC

participants receive, the following quote is displayed:

> Within each person lies a bone-deep longing for freedom, safety, hope, self-respect,
> and the chance to make an important contribution to family, community, and the
> world. To live fully, we each need ways to express this powerful, natural longing.
> Without healthy outlets, the desire for freedom turns into lawlessness and the need for
> safety and self-respect degenerates into violence. Without avenues to make an
> important contribution, hopelessness translates into dependency, depression, violence,
> substance abuse and other forms of self-abuse. No government program or religious
> group can help people become self-reliant, contributing members of their
> communities unless it is built on an understanding of this powerful force inside each
> human heart." (Forest, 2003, p. 1)

This statement is the basis of family development. While it describes what

individuals and families who seek help from human service agencies most need, workers'

need for this same thing is powerfully exposed through FDC. Through content and

activities engaged in during FDC training sessions, workers are able to get in touch with

why they became involved in the work they do. The difficulty of the job they do is

explicitly recognized, including identification of larger forces that operate in agencies,

communities and the overall helping system that make their job even more challenging.

The pitfalls of a deficits-based helping approach that permeates much of human services

are unveiled, including how such an approach not only leads to discouragement of

families, but also to workers. Workers are encouraged and taught strategies for adopting a

new helping paradigm that is based on strengths and shared power. This also includes

developing a personal support system of those who share a similar approach; engaging in self-care practices to manage stress associated with working in what are often challenging circumstances; developing a sense of personal mission for their work, as well as setting personal and professional goals.

Helping Workers Become Empowering in their Work

In support of workers becoming empowering in their work (interactions with the individuals and families they provide services to as well as other professionals they interact with), the FDC program endeavors to provide workers with concrete knowledge and skills in communicating effectively; using strengths-based assessment and planning strategies and tools; understanding the value of diversity as well as the presence and impact of oppression; facilitating support groups, family conferences and community meetings; and building collaborative relationships within and outside of their organization. FDC recognizes that in order for workers to be able to help families reach goals and develop healthy self reliance, they must have knowledge and skills in working effectively not only with families and individuals, but also with other professionals and community members. This includes modeling family development principles in their interaction with other professionals, as well as effectively engaging in activities that will engender support and growth of strengths-based, empowerment-oriented practice on the part of other professionals.

Through portfolio development work, participants are taught and encouraged to "try out" new knowledge and skills with the individuals/families they work with, as well as with co-workers, supervisors, professionals outside of their agency and their own family members. The following are examples of Activities to Extend Learning at the end

of various chapters of the *Empowerment Skills for Family Workers* handbook (Forest, 2003), which support workers' adoption of empowering behaviors (a) taking the opportunity to intentionally discuss issues of power and powerlessness with families as it relates to their participation in the helping process; (b) taking the time to teach families how to advocate for themselves in order to obtain resources or address problems; (c) meeting with an agency co-worker who is NOT a front-line worker (e.g. staff who provide clerical support) and talking with them about strengths-based practice; (d) setting up a meeting with a professional from another agency to discuss their agency's work and ways in which they might collaborate; (e) maintaining contact or networking with one or more FDC colleagues *outside* of time spent together during the FDC training experience; (f) exploring services available to families that are NOT offered at their agency and sharing what they learned with other staff in their agency; (g) talking with one or more informal "gatekeepers" in their community (person in an official or unofficial position of respect who refers families to their agency) to provide information about their agency's service and ask for ideas about areas of needs in the community that are not being met. In summary, while just providing a few examples, these provide a picture of the types of activities that demonstrate how workers learn to become *empowering* in their work with others.

Helping Workers Change Agencies and Systems

While the ways in which workers interact with and serve individuals and families are critical in helping to create the conditions through which individuals or families can become empowered, forces at the organizational and system level may often work against family development. The FDC program recognizes that families become empowered

when they are able to build their capacity to take care of themselves, which includes building healthy self-reliance in the context of their community (Forest, 2003). This requires changing how the human service system itself functions. Thus, the role of workers in creating and/or supporting empowerment-based agencies and system is a critical topic embedded into the program. Throughout classroom-based instruction, participants are encouraged to identify and critically consider how practices and policies at the organizational and system level support or work against the principles of family development. Again, portfolio development further supports what is learned in the classroom as workers are challenged to begin taking steps to impact change at the organizational and system levels. The following are examples of Activities to Extend Learning found at the end of various chapters in the *Empowerment Skills for Family Workers* handbook (Forest, 2003) aimed at supporting this type of change: (a) meeting with co-workers who have not been through the FDC experience and discussing the family development approach and how it differs from a "provision of services" approach; (b) arranging to meet with a family worker from another agency to network and discuss ways their agencies can better cooperate or coordinate services; (c) reviewing organizational policies (e.g. confidentiality policy, home visiting policy) and meeting with a supervisor or other co-workers to discuss possible changes; (d) communicating with an elected officials (local, state or national) to tell him or her about the value of family development; (e) reviewing standardized forms used at the agency (e.g. case planning documents) and meeting with a supervisor or other co-workers to discuss possible changes; (f) communicating with government staff or other community officials

regarding an existing or proposed policy that may affect the families or individuals their agency serves.

In order to support worker's efforts, "portfolio advisers" are assigned to each participant. Playing a pivotal role in the program, portfolio advisers meet with participants throughout the course of their FDC training experience, providing additional learning support and encouragement as participants attempt to incorporate new learning, skills and change strategies into their daily practice efforts. Portfolio advisers are experienced practitioners in the field who are committed to the tenets of empowerment-based practice, serving in the role as mentor. They are recruited and trained by FDC program administrators to fulfill this role.

Empowerment-based Model-of-Change Framework for FDC

In order to understand and evaluate the effects of the FDC program at multiple levels, I proposed a model-of-change framework for the FDC program using empowerment constructs to elucidate how multi-dimensional programmatic outcomes can be achieved. Figure 3 (FDC Model-of-Change Framework) visually depicts the framework. The model proposes that through participation in the FDC program, workers' sense of psychological empowerment is increased, facilitating change in how workers think about themselves, as well as how they think about and relate to their environment.

It suggests that manifestation of behaviors or actions by workers as a result of increased psychological empowerment may be realized on four levels:

1. behaviors or actions reflecting personal level changes;

2. behaviors or actions reflecting change in practice with clients;

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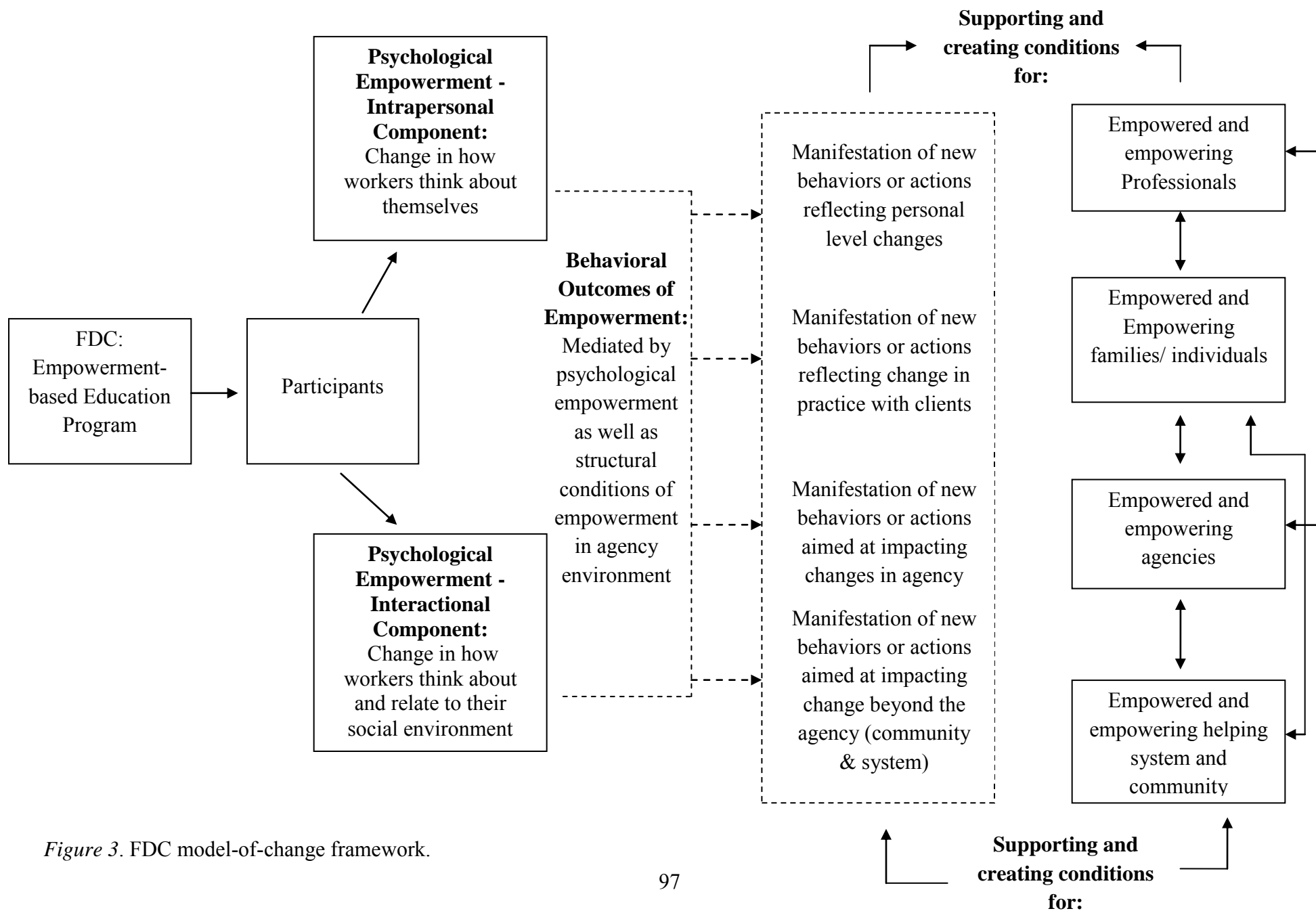
Figure 3. FDC model-of-change framework.

1. behaviors or actions aimed at impacted changes in their agency; and

2. behaviors or actions aimed at impacting change beyond the agency (community and system).

The manifestation of such behaviors or actions is believed to not only be a function of psychological empowerment, but also a function of structural conditions of empowerment the worker experiences in his or her agency. Higher levels of psychological empowerment and more favorable conditions of structural empowerment will function together to support manifestation of behaviors and actions on the part of workers that ultimately support and create the conditions for the following outcomes: (a) empowered and empowering workers who are committed, confident and competent in what they do; (b) empowered families who are able to set and reach goals; advocate for themselves; draw upon an interdependent network of support in the community; contribute to their family & community; and (c) empowering and empowered organizations that collaboratively address issues and problems on multiple levels in order to support the empowerment of families and communities.

This study focused on the initial tenets of the proposed model-of-change framework: the degree to which workers experienced a change in psychological empowerment as a result of their participation in the FDC program. Thus, this research aimed to evaluate the degree to which participation in the FDC program affected change in psychological empowerment over time, taking into account individual level characteristics of workers and environmental conditions in the agency. The next chapter, (Methods), provides a comprehensive overview of the research methods used in this

study. Variable definitions, instrumentation, and data collection procedures are described

in detail.

CHAPTER IV

METHODS

This chapter provides a comprehensive overview of the methods used to conduct this research study. The chapter addresses the following elements: (a) purpose of the research; (b) research questions and related hypotheses; (c) rationale for the chosen methodology, including pertinent ontological and epistemological considerations related to that choice; (d) researcher standpoint; (e) research design; (f) measurement and instrumentation; (g) data collection procedures; and (h) ethical considerations.

Purpose of Study

As a first step in the context of a larger research agenda, the purpose of this study was two-fold. Psychological empowerment has been found in the literature to be an important facilitator for system change, innovation, entrepreneurship, upward influence and increased effectiveness in employees (Spreitzer, 1997; Kanter, 1993). Current research, particularly in the nursing field, links workers' perceptions of psychological empowerment with perceptions of working conditions in the organizational environment. Such research indicates that organizational conditions of empowerment proposed in Kanter's theory of structural empowerment (information, support, opportunity, resources, informal power and formal power) are related to, and as some research suggests, an antecedent to psychological empowerment (see Laschinger et al., 2001; Laschinger et al., 2003; Laschinger, Finegan, Shamian & Wilk, 2004). Such research is particularly relevant to the human services field, because lack of power or "powerlessness" of human service professionals has consistently been posed in the literature as a potential barrier in

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workers' ability to be empowering and achieve empowered outcomes in partnership with, and on behalf of clients. Structural conditions in human service organizations and the system overall are identified in the literature as contributors to worker powerlessness. However efforts at empirically measuring perceptions of empowerment in both psychological and organizational dimensions are limited.

The first purpose of this research was to empirically measure perceptions of psychological empowerment in front-line human service workers. The aim was to more clearly understand how psychological empowerment is related to both environmental conditions in the workplace as well as individual level characteristics of workers. Second, this research proposed an empowerment-based model-of-change framework that, among other things, suggested that participation in the Family Development Credential (FDC) program would increase workers' sense of psychological empowerment. This study sought to evaluate the degree to which participation in the FDC program affected change in perception of psychological empowerment. It took into account individual level characteristics of workers and environmental conditions in the agency.

Research Questions

The global area of inquiry that provided the basis of the narrower focus of this study was the following question: How do workers *change* and *create change* after participating in the Family Development Credential program? The first part of that question (How do workers change?) was the subject and focus of this study, with the following questions guiding the inquiry:

1. What individual-level factors relate to perception of psychological empowerment in front-line human service workers?

2. How are perceptions of psychological empowerment related to perceptions of structural empowerment in the context of the workplace environment?

3. How does participation in the FDC program affect change in perception of psychological empowerment in workers?

Rationale

While historically empowerment in human services has been a goal focused on addressing powerlessness of clients, on an individual level as well as environmental and socio-political levels, research findings suggest various barriers that act as impediments to those goals coming to fruition. Lack of empowerment or "powerlessness" of human service professionals is one such barrier that has consistently been posed as one such barrier. The use of empowerment-based education as a dual tool by which human service professionals can be *empowered* themselves while simultaneously learning knowledge, skills and values associated with key tenets of empowerment practice on multiple levels (being *empowering* and working to create *empowered conditions*) is one strategy that may hold promise towards overcoming such barriers. The Family Development Credentialing program (FDC) is an example of one such program, being seen as having a dual focus that addresses the professional development of workers as a means through which they can be *empowered* themselves, as well as *empowering* in their work. Compelling qualitative data on the program suggests workers who participate in the program develop both personally and professionally in ways consistent with the underlying dimensions of psychological empowerment proposed in the literature. Over

the past decade or more, steady attention has been given towards the development of scales capable of empirically measuring key dimensions of psychological empowerment, providing useful tools through which psychological empowerment of human service professionals can be measured. Such tools can also be used to measure the effects of programs such as FDC that aim to increase empowerment in human service professionals.

Additionally, while general in nature, findings from known FDC studies to date suggest that organizational and systemic barriers may act as a constraint in allowing the outcomes of FDC to be fully realized. Better understanding of the impact of favorable or unfavorable organizational conditions on the manifestation of psychological empowerment can be gained by drawing upon empowerment-based scales that have been highly developed over the past eight years, particularly in healthcare settings. Such scales specifically aim to measure individual perception of conditions of empowerment in the organizational setting. Applying such tools to measure perceptions of structural conditions of empowerment by human service professionals permits the use of statistical analysis to measure and understand the potential interaction of two distinct, but related aspects of empowerment (perception of psychological empowerment and perception of structural empowerment). This presents a unique opportunity, and served as a compelling rationale for the methods used in this study.

Researcher Assumptions

I believe that the FDC program ignites a process of empowerment, or is an avenue through which empowerment can be engendered in human service professionals that subsequently leads to empowered behaviors or outcomes that can be measured. It is

important however, to discuss certain assumptions regarding the use of quantitative methods to measure change that reflect key assumptions in empowerment theory. Particularly over the past ten years, three underlying assumptions about the construct of individual empowerment (often referred to as psychological empowerment) have evolved. Originally proposed by Zimmerman (1995), and well summarized by Speer (2000), the three assumptions revolve around the form, context and variation of empowerment. First, empowerment takes on different forms for different people, suggesting that the process and meaning of empowerment is influenced by the characteristics of individuals. Second, empowerment is context-specific, meaning that settings and environment in which people live or function shape the form of empowerment that takes place. Third, empowerment is a dynamic phenomenon that varies over time. As suggested by Swift and Levine (1987, p. 79), such assumptions require that any type of empowerment-based research be approached with a "transactional world view" that includes: (a) holistic units of analysis that hone in on the relationship between persons and their environments; (b) recognition of change as dynamic and continuous, with a direction that is not pre-established but rather evolving; (c) identification and description of *patterns* of relationships and events; and (d) the relative and subjective nature of observations and descriptions of empowerment activities. In light of these, critical assumptions that will guide and inform my use of quantitative methods and analysis in this study will be shared.

First, while FDC is designed to be empowering in its educational form (participatory, group-based, cross-disciplinary, critical reflection/action learning model), the degree and nature by which participants experience the program as empowering will

be highly influenced by the unique characteristics and life experiences of participants. This likely includes key demographic groupings such as racial identity, educational level, educational degree, and field of practice, among others. While the impact of some of these variables can be examined through data analysis procedures, quantitative methods inherently limit the degree to which one can understand how and why such characteristics have an impact.

Second, the outcomes of empowerment have been found to vary across individuals, contexts and time (Cornell Empowerment Groups, 1989; Zimmerman, 1995; Akey et al., 2000). In using the *Empowerment Skills for Family Workers* (Forest, 2003) curriculum as a basis for describing outcomes that reflect a form of empowerment for human service workers, it must be acknowledged that the broad arena or settings in which human service practice occurs for persons who participate in the FDC program may influence the form empowerment takes in ways that are not accounted for in this study. As asserted by Swift and Levine (1987), in any measurement effort, the relative and subjective nature of observations and descriptions of empowerment activities must be acknowledged.

Finally, as a time-sensitive phenomenon that is not static, but rather dynamic and continuous, measuring the effects of an empowerment-based educational program at one moment in time only captures information at that moment. This does not preclude however, that the ways and domains in which empowerment-based knowledge, values and skills take hold or evolve for people will change over the course of time. Using quantitative methods that collect data at specific moments in time does not allow such evolutions to be accounted for or explored.

Researcher Standpoint

Endeavoring upon this research effort was driven by my own personal belief in, and commitment to, an empowerment-based human service practice paradigm. As one who has participated in formal educational efforts that led to both bachelors and masters degrees in Social Work, as well as one who has worked in a professional capacity for 17 years in the fields of community organizing, non-profit housing, community development and child-welfare training and education, I possess a deep commitment to the inherent values embodied in empowerment practice. I initially became involved in the Pennsylvania Family Development Credential program four years ago to assist in evaluating programmatic outcomes and developing tools through which ongoing evaluative efforts could be carried out. This involvement grew out of my doctoral dissertation coursework at Indiana University of Pennsylvania.

Since that time, I have become deeply involved in understanding research efforts on FDC occurring across the country, and co-authored an article published in the journal *Families in Society* (Hewitt et al., 2010) that synthesized known research on the FDC program. I have also taught the FDC course as well as served as a portfolio advisor in my own county. On the state level, I serve on the Advisory Board for the Pennsylvania FDC program as well as act as a state-level reviewer for portfolio documents.

In my role as a researcher, I have read many accounts of the professional and personal benefits that workers report experiencing as a result of their FDC professional development experience. In my role as instructor and portfolio advisor, I have become closely involved with workers who have pursued the FDC credential and portfolio advisors who have journeyed with workers through the process. Therefore, I have had the

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privilege of seeing first-hand the impact of the program upon workers. I believe the empowerment principles FDC is inherently conceived upon provide a solid foundation upon which the outcomes of this program can best understood on all levels: for workers, for the families and individuals that agencies serve, for human service agencies and for the communities in which we live. In large part, this research was driven by my own desire to make a contribution towards that end.

Research Design

In order to achieve the stated purposes of this research, a quasi-experimental untreated non-equivalent control group (herein referred to has a comparison group) design with pretest and posttest was used. This type of design is most commonly diagramed as follows (Cook & Campbell, 1979):

$$O_1 \quad X \quad O_2$$

$$O_1 \qquad O_2$$
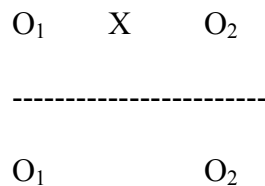
An untreated comparison group design with pretest and posttest is readily used in research endeavors that occur in a practice setting for which participants cannot be assigned randomly to treatment or control groups. It is also highly appropriate when treatment group participants cannot be subject to the treatment or intervention in isolation of other factors (Monette, Sullivan & DeJung, 2003). This type of design was chosen in light of two program-specific elements that relate to those considerations.

First, because FDC is a voluntary, community-based, multi-disciplinary human services training program, randomly assigning participants to treatment (training

participation) or control groups (non-participation) was not possible. As the researcher, I had no control over who chose to participate in the program or when or where FDC classes were initiated.

Second, the FDC programmatic model is intentionally structured to allow the credentialing process to occur over a six to twelve month period, during which participants participate in classroom-based educational experiences two to four days per month. Part of the rationale behind this type of training design is to allow adequate time in between classroom sessions for participants to "test out" new knowledge and skills, as well as begin to integrate and implement new practices into their professional work, while receiving support and feedback from their FDC colleagues, instructors and portfolio advisors. While conducive for a learning experience, such a structure also means that FDC participants could not be subjected to the treatment or intervention in isolation of other factors. These considerations adequately justified the use of a quasi-experimental design for this study. A fuller discussion of the limitations and weaknesses this type of design presented will be more fully discussed at the end of this chapter.

Dependent Variable and Operational Definition

Psychological Empowerment. Psychological empowerment is a multi-dimensional concept concerned with: how people think about themselves, how people think about and relate to their environment and the actions the actions people take to influence their environment or help others to influence their environment. It includes critical awareness, self-concept, collective identity, knowledge and skills and propensity to act.

Independent Variables and Operational Definitions

Structural empowerment. Structural empowerment is the degree to which a work environment provides employees with structural supports or "sources of power" needed to accomplish work, including: opportunity for growth, access to resources, access to information, support systems and access to formal and informal power.

Years of Experience in Human Services. Years of experience in human services is defined as the number of years a frontline worker has been employed in the field of human services. One logical assumption is that human service workers gain knowledge and skills through experience as help-givers, thus higher levels of experience will lead to increased perceptions of effectiveness in their work with those they seek to help. This should result in heightened levels of psychological empowerment in a professional context. However, the literature presents other compelling issues that must be considered. For example, workplace conditions, e.g. limited decision-making power, high caseloads, little opportunity for professional development and overall system conditions, e.g. constantly changing federal and state mandates and the requirements of funding bodies; fragmentation of services, increased pressure for accountability etc. have been identified as forces that contribute to individual and professional powerlessness in the broader field of human services (Breton, 1994; Frans, 1993; Gutierrez et al., 1995a; Itzhaky & Gerber, 1999; Kondrat, 1995; Leslie et al., 1998; Pinderhughes, 1983; Cox & Joseph, 1998; Shera & Page, 1995; Turner & Shera, 2005). Over time, such conditions may cause persons with more years in human services to experience increased frustration and cynicism, and thus decreased perceptions of empowerment.

Level of Education. Level of education is defined as the highest level of formal education completed by participants. In delineating important aspects of psychological empowerment, the literature consistently points towards the sense of competence and self-efficacy as a critical component of the construct (Spreitzer, 1995; Thomas &Velthouse, 1990). In the context of the professional human service worker, one avenue for obtaining higher levels of knowledge and skills needed for practice is university-based education. It is plausible to suggest that persons with higher levels of formal education may have a different sense of professional empowerment specific to their feelings of competence and overall knowledge and skill level than those with lower levels of formal education.

Type of Professional Degree. Type of professional degree is defined as whether someone has a professional degree in human services or a related field. Many higher education programs in human services, such as social work, human development and family studies, etc. contain significant components that teach students to work with clients from an empowerment perspective (Cearley, 2004). The literature suggests that empowerment is a practice orientation (values, knowledge and skill base) that can be learned. Students who graduate from such programs may begin their professional practice with a different sense of empowerment in their professional lives than those who did not benefit from such educational experiences.

Control Variable and Operational Definition

Group Status: Group status was a variable created in this study to control for differences between the treatment and comparison groups. Group Status was defined as the group participants in this study were a member of. Participants in the FDC group (treatment

group) were frontline human service workers who completed the following requirements associated with obtaining the Family Development Credential: 1) 80 hours of classroom-based instruction in Empowerment Skills for Family Workers; 2) development and approval of a professional learning portfolio; and 3) credentialing examination. Participants in the Non-FDC group (comparison group) were front-line human service workers currently working in the field of human services who had not participated in the FDC program. In addition, their agencies had never been involved in the FDC program.

Hypotheses

The major hypotheses tested in this study were as follows:

H1: Perception of psychological empowerment in human service workers will be related to the following individual-level factors: level of formal education; type of professional degree; and years of experience in human services.

H2: Perception of psychological empowerment in human service workers will be related to the following structural conditions of empowerment in the workplace environment: information, support, opportunity, resources, informal power and formal power.

H3: Participation in the FDC program will be related to changes in levels of perceived psychological empowerment in workers.

Measurement and Instrumentation

In the form of one survey, three instruments were used to measure the variables of interest in this study: 1) Social Work Empowerment Scale; 2) Conditions of Work Effectiveness Scale II (CWEQ-II); and 3) demographic survey.

Measuring Perception of Psychological Empowerment

Perception of psychological empowerment was measured using the Social Work Empowerment scale, developed by Frans (1993). The 34-item scale was specifically designed to measure social workers' perceptions of personal and professional power along five key dimensions of empowerment derived from the literature. Each item is scored on a five-point Likert response rating system from strongly disagree (coded 1) to strongly agree (coded 5). Total scores range from 34 – 170, with higher scores on each subscale as well as the summated scores of the total items on the scale, indicating a stronger perception of empowerment. For this study, the instrument was modified slightly by having response choices that alternated between a range from strongly disagree (1) to strongly agree (5) to a range from strongly agree (1) to strongly disagree (5). This response pattern was alternated every other question. By reversing response choices in this manner, response bias was minimized. All responses were returned to their original order of strongly disagree (1) to strongly agree (5) at the data entry phase.

The first subscale, collective identity, measures perceptions of power or powerlessness in the context of group membership. According to Solomon, one of the earliest writers and proponents of empowerment in the field of social work (1976), collective identity involves sharing the goals, resources, and aspirations of the social system in which one is a member, and deriving of sense of identity and power as a result of that membership. Examples of items included in this subscale are "It is helpful to join with others to solve problems" and "the workers in my agency all have a common purpose."

Knowledge and skills represents the second subscale. The broad-based literature on empowerment consistently identifies the acquisition of knowledge and skills as one of several key components in an empowerment process (Spreitzer, 1997; Thomas & Velthouse, 1990). The degree to which human service professionals believe they possess critical knowledge and skills that are unique and vital to their profession is therefore included as an indicator of perceived empowerment. The subscale aims to tap the degree to which professionals' perceive they possess the knowledge and skills needed to be effective; have adequate resources and information for effective problem-solving; and have access to and draw upon resources for professional development. Examples of items included in this subscale are, "I have adequate information resources to solve most professional problems"; "If I don't have the answer to a question, I always know where to get it" and "I attend frequent conferences and training sessions to improve my skills."

The third subscale, self-concept, assesses the degree to which persons positively evaluate themselves as well as positively evaluate the role they play in their social environment. Sense of efficacy, self-esteem, confidence and one's worth or value is captured in this scale. Examples of items included are, "I think I serve a valuable role in my professional capacity" and "I feel that I am important to the people I work with."

The fourth subscale, critical awareness, is derived in part from a similar subscale developed by Torre (1986, as referenced by Frans, 1993), aiming to measure an individual's awareness of political, economic and social system and his or her place in those systems. In the context of an empowerment-based practice orientation, the ability of human service professionals to accurately draw links between personal struggles and larger public issues is considered critical (Adams, 2003; Breton, 1994; Gutierrez et al.,

1995A; Miley & Dubois, 1999; Gutierrez, Parsons & Cox, 1998). Examples of items included in this subscale are, "I always know who has the power in different situations" and "My place in the world is always very clear to me."

The final subscale, propensity to act, focuses on perception of one's ability to initiate effective action on behalf of self and others. Particularly in the social work literature, this type of behavior is widely described as an outcome of individuals or groups being empowered (Breton, 1994; Pinderhughes, 1983). Examples of items included in this subscale are: "I am often the one to initiate response to problems"; "I have organized co-workers or others to offer new programs or interventions and "I would rather take action than to trust that things will work out."

In developing the Social Work Empowerment Scale, Frans conducted several studies that established internal consistency for the scale. Cronbach's alpha coefficient of internal consistency ranged from .71 to .86 for all five subscales, and .89 for the overall scale for a sample of 520 social work practitioners (Frans, 1993). In a second study, Frans & Moran (1993) reported Cronbach's alpha coefficients between .62 to .79 for all five subscales and .86 for the overall scale for a sample of 114 social work graduate students. Van Voorhis & Hostetter (2006) used the scale with graduate students, reporting a Cronbach's alpha of .74. Daniels (2002) used the scale with professionals in an allied field of social workers (counselors) in order to compare perception of empowerment in licensed vs. non-licensed practitioners. Cronbach's alpha coefficients for her study were .92 overall, and ranged between .84 and .92 for the five subscales.

Convergent validity was established for the overall empowerment scale by comparing the correlations between the scale and Torre's empowerment index scale

(Torre, 1986 as cited by Arneson & Eckberg, 2006). Strong association between the overall indices (r = .53, p < .001) suggests that the two indices were actually measuring the concept of empowerment (Daniels, 2002).

Measuring Perception of Structural Empowerment

Perception of structural empowerment in organizations was measured using the Conditions for Work Effectiveness II scale (CWEQ-II) (Laschinger et al., 2001). Originally developed for a nursing population, the CWEQ-II is a shortened version of a longer instrument (CWEQ-I). The CWEQ-II contains 19 items across six subscales that capture key structural elements in the workplace believed to influence perception of empowerment (opportunity, information, support, resources, formal power, and informal power). It also includes a two-item global empowerment scale used for construct validation purposes. All items are rated on a five-point Likert scale from "none" (coded 1) to "a lot" (coded 5). Each subscale poses a general question as a frame of reference for rating items that are believed to be characteristic of a particular structural element in the organization that influences perception of empowerment. For example, in the subscale measuring opportunity, the question reads, "How much of each kind of opportunity do you have in your present job?," followed by three items that persons rank on the five-point Likert scale: (a) challenging work; (b) the chance to gain new skills and knowledge on the job; and (c) tasks that use all of your skills and knowledge." Items on each of the six subscales are summed and averaged to provide a score for each subscale ranging from 1 – 5. The scores of the six subscales are then summed to create the total empowerment score (score range: 6-30). Scores ranging from 6 to 13 are described as low levels of empowerment, 14 to 22 as moderate levels of empowerment, and 23-30 as high levels of

empowerment. Higher scores represent higher perceptions of empowerment (Laschinger, 1996). The two items contained in the global empowerment measure are summed and averaged to create a score ranging from 1-5. This score is not included in the structural empowerment score. The correlation between this score and the total structural empowerment score provides evidence of construct validity for the structural empowerment measure.

Because the scale was originally designed for a nursing population, minor modifications to wording in two of the six subscales were made. In the subscale "information," the question posed is "How much access to information do you have in your present job?" The items that follow are: (a) current state of the hospital; (b) the values of top management; and (c) the goals of top management. Item one was modified to read: "current state of the agency/organization." Likewise, in the subscale "informal power," the question posed is: "How much opportunity do you have for these activities in your present job?" The items that follow are: (a) collaborating on patient care with physicians; (b) being sought out by peers for help with problems; (c) being sought out by managers for help with problems; and (d) seeking out ideas from professionals other than physicians, e.g. physiotherapists, occupational therapists, dieticians). Item one was modified to read: "Collaborating on client service planning with other professionals inside your agency/organization." Item three was modified to read: "Being sought out by managers/supervisors for help with problems." Item four was modified to read: "Seeking out ideas from professionals other than those that work at your agency/organization (e.g. frontline workers in other agencies, psychologists, physicians; educational specialists etc.)."

Cronbach's alpha reliabilities for the CWEQ-II in previous studies ranged from .79 to .82 (Laschinger & Finegan, 2005).Construct validity of the CWEQ-II as a viable shortened version of the CWEQ-I, the Job Activities Scale (JAS) and the Organizational Relationships Scale (ORS) was established through confirmatory factor analysis, sufficiently revealing a good fit of the hypothesized factor structure of the CWEQ-II (Laschinger et al., 2001; Laschinger et al., 2003).

Measuring Key Demographic Variables

Level of education was measured by asking respondents, "What is the highest level of education you have completed?" Respondents were provided with four response categories: (a) high school diploma or GED; (b) Associates degree; (c) Bachelors degree; (d) Masters degree or higher.

Type of professional degree was measured by asking respondents the question: "Do you have a college degree in a human services- related field?" Respondents were provided with two response categories: (a) yes or (b) no.

Years of experience in human services was measured by asking respondents, "How long have you worked in the field of human services?" Respondents were provided with four response categories: (a) 5 years or less; (b) six to ten years; (c) 11 to 15 years; (d) 16 years or more.

Additional Demographic Information Collected

In addition to the previously discussed demographic variables believed to influence psychological empowerment as independent variables, further demographic data was collected in order to better understand the population sample as well as control

for potential differences between the treatment and comparison groups during data analysis. Additional demographic information was collected on the following: gender, age, ethnicity, field of practice, type of work performed, type of agency, and agency size.

Gender was measured by asking respondents, "What is your gender?" Two response categories were offered: (a) male; and (b) female.

Age was measured by asking respondents, "What is your age?" Four response categories were offered: (a) 18-25; (b) 26-39; (c) 40-54; (d) 55-65; and (e) over 65.

Ethnicity measured by asking respondents, "What is your ethnicity?" Six response categories were offered: (a) African American; (b) Asian American; (c) Caucasian; (d) Latino/Latina; (e) Native American; and (f) Other.

Field of practice in human services was measured by asking respondents, "What is the general field in which you currently work?" Respondents were provided with fourteen response categories: (a) alcohol/substance abuse; (b) child welfare/children and youth; (c) adult education/training/workforce development; (d) family center/family services; (e) food/nutrition; (f) healthcare; (g) housing; (h) pre-school/early childhood education; (i) primary or secondary education; (j) public assistance; (k) domestic violence; (l) MH/MR; (m) correctional/probation; (n) other.

Type of work performed was measured by asking respondents, "What type of work do you perform in your agency/organization?" Respondents were provided with three response categories: (a) direct service provision to clients; (b) limited direct service provision to clients; (c) no direct service provision to clients.

Type of agency was measured by asking respondents, "What kind of agency do you currently work in?" Respondents were provided with three response categories: (a) nonprofit agency; (b) public/government agency; (c) private/for-profit agency.

Agency size was measured by asking respondents, "What size agency do you currently work in? Respondents were provided with four response categories: (a) 25 persons or less; (b) 26 – 50 persons; (c) 51 -100 persons; and (d) 101 persons or more.

See Appendix G for full Survey Questionnaire.

Sampling

The sample for this study was comprised of human service professionals who had participated in the Pennsylvania FDC program (FDC), as well as a comparison group of human service professionals who had not (non-FDC). The sample of FDC-trained professionals was drawn from class rosters of four FDC classes conducted in two counties in southwestern Pennsylvania between January and August of 2009. All persons who signed up to participate in these FDC classes were invited to participate in the study, for a total available sample of 89 persons. The sample of non-FDC trained human service professionals was obtained using a non-probability convenience sampling method targeting human service professionals that had not participated in the program. In order to avoid the pitfall of design contamination, the comparison group sample was drawn from an area of the state in which the FDC program had not yet been introduced. This maximized the likelihood that participants had not had exposure to the FDC program, either through personal participation or the participation of co-workers. It also reduced the likelihood of treatment and non-treatment groups interacting together. The targeted sample population for the comparison group was 100 persons.

Upon obtaining approval from the Institutional Review Board (IRB) at Indiana University of Pennsylvania, I solicited the willingness of agencies to allow workers to participate in the comparison group. I used email and telephone to contact directors of human service agencies in south central Pennsylvania that were similar to those represented in typical FDC course rosters: child protective service agencies, community action agencies, Head Start, family counseling agencies etc.. As someone who has lived and worked in the human service arena in south central Pennsylvania for 15 years, I had existing relationships with agency directors of many local human service agencies. Thus, after explaining the purpose of the research project, what would be required of staff who participated and the anticipated timeframes, I was able to secure the interest and support of agency directors in most cases. Additionally, Barbara Mooney, the statewide director of training for the Community Action Association of Pennsylvania (CAAP) and coordinator of the Pennsylvania FDC Program, also assisted me in identifying and contacting directors of similar type agencies in central and northwestern Pennsylvania, two other areas in which FDC had not yet been introduced. Comparison group agency support was solicited using this strategy because of CAAP's long-standing and substantive involvement in human service programming at the local level. After Dr. Mooney's initial contact with such agency directors I followed up via email and phone to further explain the project and provide necessary details in order for directors to make informed decisions regarding possible participation.

For all agencies that were approached, after explaining the overall project and gaining support to invite staff to participate, directors were asked to sign a formal letter of support regarding participation. A sample of this letter is included in Appendix A.

Data Collection Procedures

Using a pre-post test design, data for this study was collected from treatment and comparison group participants at two points in time. Following the approval of the dissertation proposal and the IRB protocol, the timeframe for all data collection activities took seven months.

Treatment Group (FDC)

For all FDC participants, the first wave of data (pretest) was collected prior to beginning the FDC professional development experience. In preparing to begin the FDC training experience, all participants attend a one-day course orientation. As a part of the orientation experience I made a brief presentation about this research project and distributed survey packets containing the following items: (a) letter from the FDC coordinator describing the program's participation in this study; (b) letter from me introducing them to the study in a more detailed manner; (c) the questionnaire itself; and (d) postage-paid return envelope. Copies of these documents are included in the Appendix of this document. After the presentation, persons were asked to review the survey packet contents at a later time in order to complete and return the survey at their discretion. Within two weeks of distributing survey packets a follow-up mailing that included a new survey packet was mailed to those who had not returned their surveys. Any persons slated to begin the FDC program however did not attend the orientation event were mailed a survey packet. If the packet was not returned within two weeks, a follow-up packet was mailed out.

In order to maintain confidentiality of participants, each survey was coded with a number. I maintained a record of survey numbers that corresponded with the name and address of participants for purposes of tracking the response rate as well as the second wave of data collection (posttest). Between the first and second wave of data collection, this list was kept in a locked filing cabinet in order to protect the confidentiality of participants. After the second wave of data collection was completed, the list was destroyed.

There was approximately six months between the first and second wave of data collection. The second wave of data (posttest) was collected at the time FDC-trained participants took their credentialing examination. After refreshing participants about the purpose and nature of the project, pre-prepared survey packets were given to participants who opted to participate in the pre-training survey several months ago. Packets for the post-survey included the following: (a) letter from me reminding them of their participation in the first part of the study and requesting their participation in the second part; (b) the questionnaire itself; and (c) postage-paid return envelope. Persons were asked to review the survey packet contents in order to complete and return the survey during a break period or at a later time if preferred. Within two weeks of distributing survey packets a follow-up mailing that included a new survey packet was mailed to those who had not returned surveys.

Comparison Group

At the same time data was collected from the FDC group, a first wave of data (pretest) was collected from a comparison group. I contacted directors of agencies (or other appointed person in the agencies) who had agreed to allow staff to participate and

was provided with a mailing list of names and work-based addresses of front-line workers. Similar to the treatment group, in preparing the survey mailing packets, I coded each survey with a number. A list that maintained a record of survey numbers that corresponded with the name and work-based address of anticipated participants was maintained for purposes of tracking the response rate as well as the post-survey follow-up mailing. Between the pre and post survey period, this list was maintained in a locked filing cabinet in order to protect the confidentiality of participants. After post-survey data collection procedures were completed, the list was destroyed. Each survey packet included the following: (a) a letter from their director (or other appropriate person) indicating the agency's participation in this study; (b) letter from me introducing them to the study in a more detailed manner; (c) the questionnaire itself; and (d) postage-paid return envelope. Copies of these documents are included in the Appendix of this document. Within two weeks of survey packets being mailed a follow-up mailing including the same items was mailed to those who had not returned surveys.

There was approximately six months between the first and second wave of data collection. Mailing packets for the post-survey included the following: (a) letter from me reminding them of their participation in the first part of the study and requesting their participation in the second part; (b) the questionnaire itself; and (c) postage-paid return envelope. Within two weeks of survey packets being mailed a follow-up mailing including the same items was mailed to those who had not returned surveys.

Ethical Considerations

In any research endeavor, ethical considerations are critical to consider in every phase of the process. In this study, minimal risks to participants were anticipated, with

individuals being free to decline involvement anonymously. For both treatment and comparison groups, while identifying data was maintained during the study to facilitate the pre and post survey design, careful data management procedures were followed to maximize confidentiality. Finally, this research was submitted to the Internal Review Board (IRB) at Indiana University of Pennsylvania for review and approval. Data collection procedures did not commence until approval was obtained.

In Chapter V: Result, I present the major findings from this study, including how the data analysis process was approached. Descriptive data on key measurement variables are provided as well as inferential statistical results including multivariate regression. Regression diagnostics are provided to demonstrate that data models meet the underlying assumptions of linear regression. Data modeling was used to show how change in psychological empowerment occurred over time and the impact of Family Development Credentialing upon such change as well as conditions of empowerment in the agency environment.

CHAPTER V

RESULTS

Purpose of Research

Personal and professional empowerment of workers is believed to be a critical ingredient in their ability to use empowered and empowering practices that facilitate lasting outcomes for the families and individuals agencies serve. The first purpose of this research was to empirically measure perceptions of psychological empowerment in front-line human service workers. The aim was to more clearly understand how psychological empowerment is related to both environmental conditions in the workplace as well as individual level characteristics of workers. Second, this research proposed an empowerment-based model-of-change framework that, among other things, suggested that participation in the Family Development Credential (FDC) program would increase workers' sense of psychological empowerment. This study sought to evaluate the degree to which participation in the FDC program affected change in perception of psychological empowerment. It took into account individual level characteristics of workers and environmental conditions in the agency.

Demographic Data Analysis

This study involved two waves of data collection. In total, 180 front-line human service professionals were surveyed at Wave One (89 FDC participants and 91 comparison group participants). There were 156 surveys returned resulting in an 86.7% return rate overall. Analyzed by group, 83 surveys were returned by the FDC group reflecting a 93.2% return rate. 73 surveys were returned in the comparison group,

resulting in an 80.2% return rate. Wave Two data collection occurred approximately six months later. At the time of Wave Two data collection, nine out of the 156 participants had to be eliminated from the sample pool. Eight participants were eliminated from the FDC group because they had dropped out of the FDC program and one participant was eliminated from the comparison group due to employment termination. Thus, at Wave Two data collection 147 surveys were distributed (75 FDC surveys and 72 comparison group surveys) and 131 surveys were returned for a response rate of 89.1%. In the FDC group, 68 participants returned surveys for a response rate of 90.7%. In the comparison group, 63 participants returned surveys, resulting in an 87.5% response rate. All data was compiled and entered into a Microsoft Excel spreadsheet and then transferred into STATA IC Version 11 from STATACORP LP of College Station, TX for further analysis.

Three surveys were eliminated because of high levels of incomplete data (one or more sections of the survey were left blank). Thus, the final sample for analysis consisted of 128 cases. Table 7: Demographic Summary of Sample Population provides a detailed of the demographic information collected on the sample population.

In summary, human service professionals in the sample were mainly female (82%). Nine percent (9%) were between the ages of 18 and 25; 41% were between the ages of 26-39; 34% between the ages of 40-54; and 16% between the ages of 55-65. In terms of race or ethnicity, 67% identified themselves as Caucasian; 23% as African American; and 7% as Latino. The sample was highly varied in terms of education level, with 30% having a high school diploma or GED; 13% having an Associate's degree; 37% having a Bachelors degree; and 20% having a Masters degree or higher.

Table 8: *Demographic Summary of Sample Population*

Variable		FDC Group (n)	FDC Group [c](%)	Comparison Group (n)	Comparison Group [c](%)	Total Sample (n)	Total Sample [c](%)
[a] Gender							
Female		49	75.4	56	88.9	105	82.0
Male		16	24.6	7	11.1	23	18.0
	Total:	65	100.0	63	100.0	128	100.0
Age							
18-25		7	10.7	4	6.0	11	8.6
26-39		26	40.0	25	39.7	51	39.8
40-54		20	30.8	23	36.5	43	33.6
55-65		10	15.4	10	15.9	2	15.6
Over 65		0	0	0	0	0	0
Missing Data		2	3.0	1	1.2	3	2.3
	Total:	65	99.9	63	99.3	128	99.9
Ethnicity							
African American		22	33.8	7	11.1	29	22.7
Asian American		0	0	2	3.2	2	1.6
Caucasian		42	64.6	44	69.8	86	67.2
Latino/Latina		0	0	9	14.3	9	7.0
Native American		1	1.5	0	0	1	1.0
Other		0	0	1	1.6	1	1.0
	Total:	65	99.9	63	100.0	128	100.5
[a] Highest Level of Education							
High School Diploma or GED		14	21.5	25	39.7	39	30.5
Associates Degree		10	15.4	7	11.1	17	13.3
Bachelors Degree		22	33.8	25	39.7	47	36.7
Masters Degree or Higher		19	29.2	6	9.5	25	19.5
	Total:	65	99.9	63	100.0	128	100.0
[a] College Degree in Human Services or Related Field							
Yes		41	63.1	26	41.3	67	52.3
No		24	36.9	37	58.7	61	47.7
	Total:	65	100.0	63	100.0	128	100.0
Years of Experience in Human Services							
5 years or less		22	33.8	16	25.4	38	29.7
6 to 10 years		17	26.2	22	34.9	39	30.5
11 to 15 years		12	18.5	14	22.2	26	20.3
16 years or more		14	21.5	10	15.9	24	18.8
Missing Data		0	0	1	1.6	1	1.0
	Total:	65	100.0	63	100.0	128	100.3

Variable	FDC Group (n)	[c](%)	Comparison Group (n)	[c](%)	Total Sample (n)	[c](%)
[b] Current Field of Practice						
Alcohol/Substance abuse	5	N/A	0	N/A	5	N/A
Child welfare/children and youth	19		13		32	
Adult education/training/workforce development	4		5		9	
Family services/family center	14		14		28	
Food/nutrition	0		16		16	
Healthcare setting	2		0		2	
Housing	7		1		8	
Pre-school/early childhood education	3		3		6	
Primary or secondary education	2		1		3	
Public assistance	0		1		1	
Domestic violence	2		0		2	
MH/MR	15		1		16	
Probation/corrections	1		1		2	
Other	14		8		22	
Total:	88	N/A	64	N/A	152	N/A
[a] Type of Work Performed						
Direct service provision to clients	44	67.7	54	85.7	98	76.6
Limited direct service provision to clients	20	30.8	8	12.7	28	21.9
No direct service provision to clients	1	1.5	1	1.6	2	1.6
Total:	65	100.0	63	100.0	128	100.1
Type of Agency						
Nonprofit	50	76.9	42	66.7	92	71.9
Government/public	13	20.0	21	33.3	34	26.6
Private/for-profit	2	3.1	0	0	2	1.6
Total:	65	100.0	63	100.0	128	100.1
[a] Agency Size						
25 persons or less	16	24.6	6	9.5	22	17.2
26-50 persons	7	10.7	20	31.7	27	21.1
51-100 persons	8	12.3	19	30.2	27	21.1
101 persons or more	34	52.3	18	28.6	52	40.1
Total:	65	99.9	63	100.0	128	99.5

Note. [a] FDC and Non-FDC groups were demographically different in a statistically significant way. [b] Frequency total exceeds 128 because participants could make more than one selection. [c] Some percent totals do not equal 100 due to rounding errors.

Fifty-two percent (52%) of workers in the sample had a degree in human services or a related field. "Professional years of experience" was also highly varied in the sample, with 30% having five years or less of experience; 30% having 6 to10 years of experience; 20% having 11 to 15 years of experience; and 19% having 16 or more years of experience. The majority of workers performed direct service 100% of the time in their work (77%); while 22% performed direct service part of the time. Professionals in the sample worked in agencies of varying sizes as well (17% in agencies with 25 persons or less; 21% in agencies with 26 to 50 persons; 21% in agencies with 51 to 100 persons and 41% in agencies with 101 or more persons). Most workers were employed in nonprofit agencies (72%); followed by government/public agencies (27%). Only 1% worked for private/for-profit agencies.

Finally, in considering the fields of practice represented in the sample, using a number count method, the highest fields of practice represented were as follows: 1) child welfare/children and youth; 2) family services/family center; 3) food/nutrition; and 4) mental health/mental retardation. It should be noted however that persons were given the option of selecting one or more fields of practice. Thus, for persons who work in an agency that administers many different types of programs (e.g. housing, food/nutrition, workforce development) a worker may feasibly have considered her/his field of practice to be all three.

In order to check for differences in the sample based on group status (FDC and Non- FDC) I conducted Pearson's Chi-square tests for independence on all the demographic variables except for "current field of practice." Due to "thin cells" in three variables (ethnicity, level of direct service, and agency type), variables were collapsed

into fewer categories in order to permit the test. In analyzing the results, the FDC and

Non-FDC groups were demographically different in several statistically significant ways:

1) Gender (Chi2=3.9581; Pr= 0.047); 2) Highest Level of Education (Chi2=10.5548; Pr =

0.014; 3) Level of Direct Service (Chi2=5.7906; Pr = 0.016); and 4) Agency Size (Chi2=

20.1829; Pr = 0.000). Variables representing statistical differences between the groups

were retained in all statistical regression models as control variables during analysis

procedures.

In summarizing those differences, the FDC group had more male participants than

the comparison group did. In terms of education level, the FDC group had more persons

in the highest education category (Masters Degrees or higher) while the comparison

group had more persons in the lowest education category (high school diploma/GED).

Commensurate with having more persons with education levels of Masters Degrees or

higher, the FDC group also had more persons with a degree in human services or related

field. The FDC group had more persons who did not perform direct service 100% of the

time in their job than the comparison group did as well. Finally, the FDC group had more

persons who worked in very small agencies (less than 25 persons) as well as very large

agencies (100 persons or greater).

Data Screening

In preparing data for analysis, I analyzed the percent of cases with missing data

by variable, determining that no one variable had more than 1.4% missing values. There

were 17 cases with one or more missing data points. Missing values were handled by

calculating the mean score of a particular variable by *group* (FDC or Non-FDC). Missing

values were then replaced with the group's mean score on that variable. This is referred

to as "mean substitution," and is considered to be a common and conservative method of handling missing data. The argument for using mean substitution is based on the premise that the sample mean is the best estimate of the population mean (Meyers, Gamst, & Guarino, 2006). Upon completing data analysis, I also examined multiple regression results to see if the results would differ if cases with missing data were eliminated from the sample all together. The results did not change, adding further credibility to the findings reported.

<center>**Factor Analysis of Measurement Instruments**</center>

Two measurement instruments were used in this study: the Social Work Empowerment Scale and the Conditions of Work Effectiveness Questionnaire II. Perception of psychological empowerment was measured using the Social Work Empowerment scale, developed by Frans (1993). The 34-item scale was specifically designed to measure social workers' perceptions of personal and professional power along five key dimensions of empowerment derived from the literature (collective identity, self-concept, knowledge and skills, critical awareness and propensity to act). Perception of structural empowerment in organizations was measured using the Conditions of Work Effectiveness Questionnaire II scale (CWEQ-II) (Laschinger et al., 2001). The CWEQ-II contains 19 items across six subscales that captured key structural elements in the workplace believed to influence perception of empowerment (opportunity, information, support, resources, formal power, and informal power).

Factor analysis is commonly used in survey questionnaires in which many different questions are intended to measure a smaller number of latent variables (Hamilton, 1992). The purpose of factor analysis is to identify or verify the unique

<center>131</center>

existence of subscales within an overall measurement instrument. In examining the factor

loadings of the Social Work Empowerment scale, it was discovered that there was only

one factor in the scale rather than five as suggested by Frans (1993). Table 8 shows the

results of the factor analysis. Factor one has an eigen value of 2.01, with all other factors

having eigen values well below one. A typical rule of thumb is that factors with eigen

values less than one should be disregarded as separate factors (Hamilton, 1992). The

scree plot graphically depicting the eigen values of the factor analysis is presented in

Figure 4.

Table 9: *Factor Analysis Results of Social Work Empowerment Scale*

```
Factor analysis/correlation                     Number of obs    =       128
Method: principal factors                       Retained factors =         3
Rotation: (unrotated)                           Number of params =        10


--------------------------------------------------------------------------
    Factor  |   Eigenvalue   Difference         Proportion   Cumulative
------------+-------------------------------------------------------------
    Factor1 |      2.01012      1.91118             1.1652       1.1652
    Factor2 |      0.09894      0.08585             0.0574       1.2226
    Factor3 |      0.01309      0.18112             0.0076       1.2301
    Factor4 |     -0.16803      0.06095            -0.0974       1.1327
    Factor5 |     -0.22898         .               -0.1327       1.0000
--------------------------------------------------------------------------
LR test: independent vs. saturated:  chi2(10) =  163.03 Prob>chi2 = 0.0000

Factor loadings (pattern matrix) and unique variances


----------------------------------------------------------------
    Variable         |  Factor1   Factor2   Factor3 |  Uniqueness
-------------------+----------------------------+-------------
Collective Identity |   0.5525    0.1879    0.0372 |     0.6580
Knowledge & Skills  |   0.6661    0.0167    0.0612 |     0.5522
Critical Awareness  |   0.6375   -0.1792    0.0244 |     0.5609
Propensity to Act   |   0.5835    0.1366   -0.0688 |     0.6361
Self Concept        |   0.7171   -0.1121   -0.0513 |     0.4706
----------------------------------------------------------------
```

In examining the factor loadings of CWEQ-II scale, it was also discovered that

there was only one factor in the scale rather than six as proposed by Laschinger et al.

2001). Table 9 shows the results of the factor analysis of the six subscales. Factor one has

an eigen value of 2.898, with all other Factors having eigen values well below one. The

scree plot graphically depicting the eigen values of the factor analysis are presented in

Figure 5.

Eigenvalues after Factor Analysis
Figure 4: Scree Plot (Social Work Empowerment Scale)
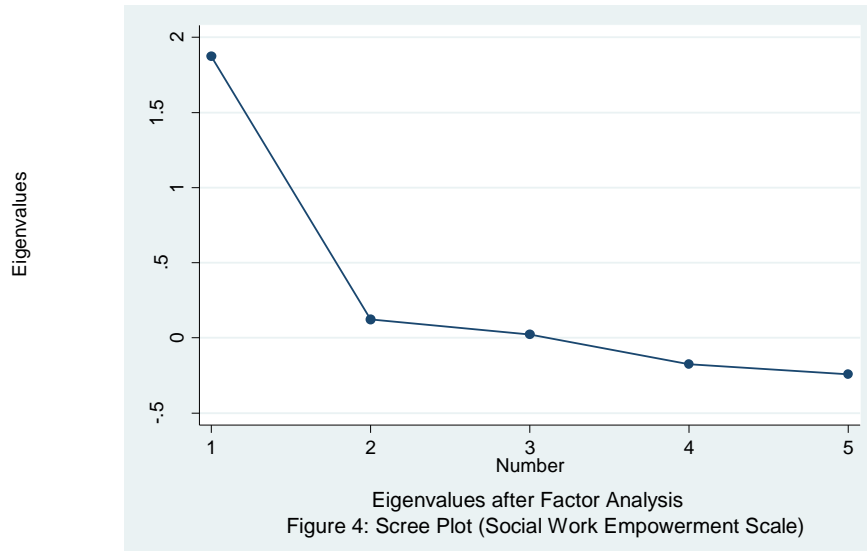
Table 10: *Factor Analysis Results of CWEQ-II*

```
Factor analysis/correlation                    Number of obs    =      128
Method: principal factors                      Retained factors =        2
Rotation: (unrotated)                          Number of params =       11


    --------------------------------------------------------------------------
        Factor |   Eigenvalue   Difference        Proportion   Cumulative
    -------------+------------------------------------------------------------
        Factor1 |      2.89843      2.75615            1.1017       1.1017
        Factor2 |      0.14228      0.16802            0.0541       1.1558
        Factor3 |     -0.02574      0.04698           -0.0098       1.1460
        Factor4 |     -0.07272      0.06180           -0.0276       1.1184
        Factor5 |     -0.13452      0.04235           -0.0511       1.0672
        Factor6 |     -0.17687            .           -0.0672       1.0000
    --------------------------------------------------------------------------

 LR test: independent vs. saturated:  chi2(15) =  291.16 Prob>chi2 = 0.0000



 Factor loadings (pattern matrix) and unique variances


    ---------------------------------------------------
        Variable  |   Factor1    Factor2 |   Uniqueness
    --------------+--------------------+--------------
    Opportunity   |    0.6254     0.1293 |     0.5922
    Information   |    0.6576     0.2021 |     0.5267
    Support       |    0.7462     0.0295 |     0.4423
    Resources     |    0.6219    -0.2306 |     0.5601
    Formal Power  |    0.8057    -0.1651 |     0.3236
    Informal Power|    0.6944     0.0585 |     0.5144
    ---------------------------------------------------
```

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Figure 5: Scree Plot (CWEQ-II)
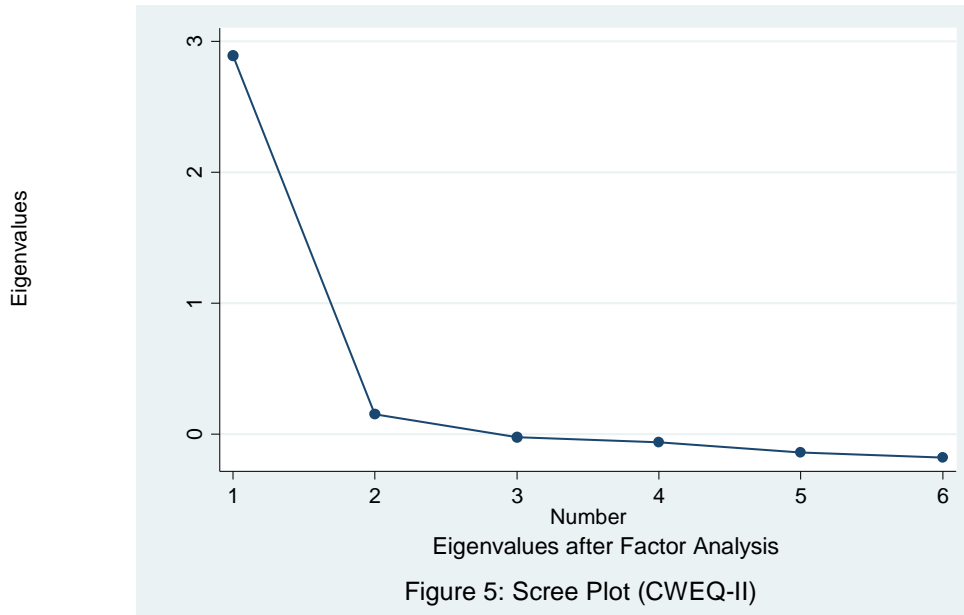
Factor analysis results on both measures show the instruments to be strong overall measures of psychological and structural empowerment. However, factor analysis results do not support the subscales being used in analysis as separate dependent or independent variables. Thus, it was decided that statistical analysis would proceed using the scales as overall measures of empowerment. Further implications of the factor analysis results are explored in Chapter 6: Discussion.

Analysis of Construct Validity of the CWEQ-II

The CWEQ-II contains two questions that serve as a global empowerment measure which is not included in the overall structural empowerment score. The two questions are summed and averaged to create a score ranging from 1-5. The correlation between this score and the total structural empowerment score provides evidence of construct validity for the structural empowerment measure (Laschinger et al., 2001). I performed pairwise correlations of these scores for both Wave one and Wave Two data.

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Results revealed high levels of correlation between the global measure of empowerment and the structural empowerment scores at Wave One data collection (r = .6711; p = .000) as well as at Wave Two data collection (r = .6905; p = .000), thus providing strong evidence of construct validity for the overall structural empowerment measure.

Distribution Analysis of Measurement Instruments

Distributions of each measurement instrument were examined. The distribution of the Social Work Empowerment scale, while slightly light tailed, is fairly symmetrical and approximates a normal distribution. The nature and distribution of this variable is represented in Figure 6. As can be seen pictorially, the "identity" distribution approximates normality.
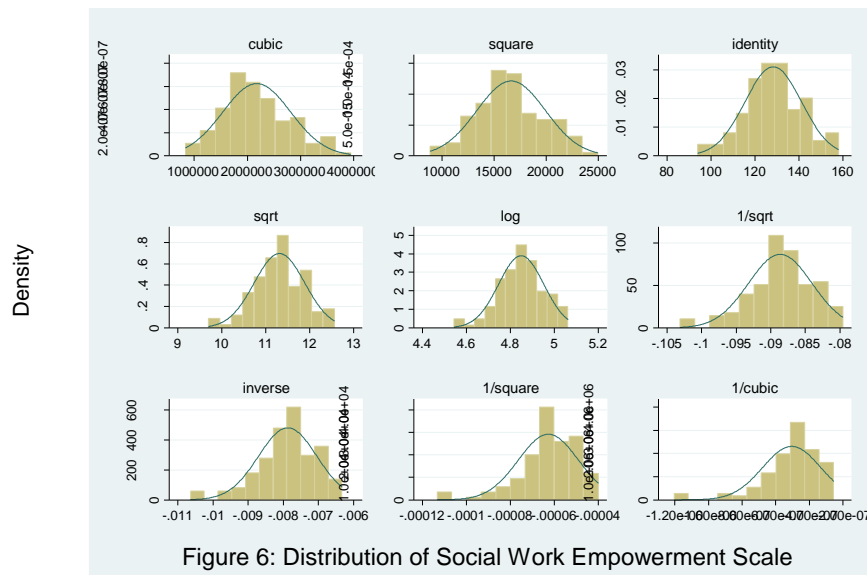
Figure 6: Distribution of Social Work Empowerment Scale

The distribution of the CWEQ-II scale is negatively skewed with outlier scores. The nature and distribution of this variable is represented in Figure 7.

Figure 7: Distribution of CWEQ-II Scale
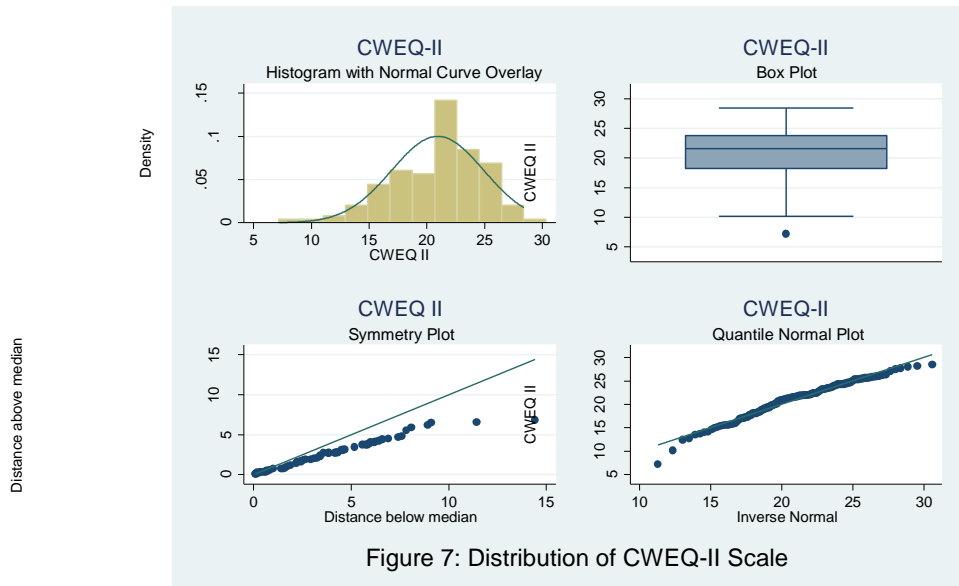
By using the Ladder of Powers, I was able to determine how to change the distribution's shape and make it more symmetrical (Tukey, 1977 as cited by Hamilton, 1992). In this case, the aim was to reduce the negative skew. I used the square. The improvement of the distribution can be shown graphically in Figure 8.

Figure 8: Transformed Distribution of CWEQ-II
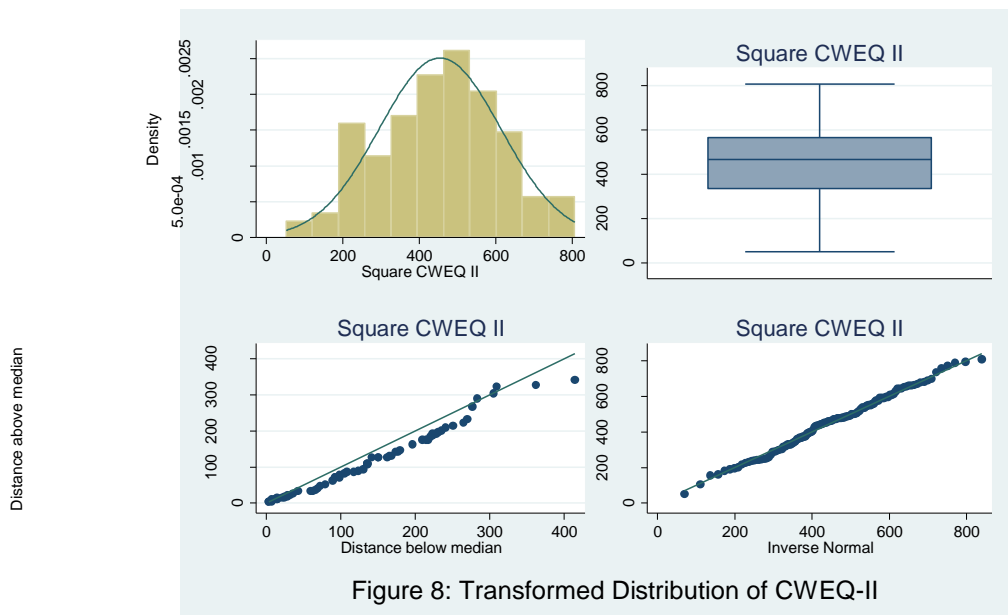
Descriptive Data on Key Measurement Variables

Table 10 presents the number of items, minimum and maximum values, means, standard deviations and reliability estimates for the key measures used in this study. The analysis was performed using the entire sample (n=128). Estimates of reliability were computed using Cronbach's alpha coefficient. Reliability coefficient estimates of .80 or better is the standard convention for establishing reliability (Monette et al., 2005).

Table 11: *Summary of Variables and their Measures*

Measure	Social Work Empowerment Scale	Conditions of Work Effectiveness Questionnaire (CWEQ II)
No. of Items	34	19
Minimum	94	7.17
Maximum	158	28.45
Mean	128.32	20.95
Standard Deviation	12.88	3.99
Cronbach's Alpha	.85	.92

Intercorrelations among Demographic Variables

In preparing to use multivariate regression analysis in order to investigate the research questions, I first tested for inter-correlations among the following socio-demographic variables at the bivariate level: gender, age, ethnicity, education level, type of degree, level of professional experience, agency type, agency size, and level of direct service. The variables "age" and "level of professional experience" were highly correlated ($r = .5790$). In addition, level of education and type of degree were also highly correlated ($r = .7797$). It intuitively makes sense that the variables age and level of professional experience would be correlated, given that as a general rule, persons who are older have more years of professional experience.

Table 12: *Degree in Human Services and Highest Level of Education*

	Degree in Human Services		
Highest Level of Education	Yes	No	Total
HS Diploma/GED	0 (0%)	39 (62.9%)	39 (30.5%)
Associates Degree	4 (6%)	13 (21%)	17 (13.3%)
Bachelors Degree	38 (57.6%)	9 (14.5%)	47 (36.7%)
Masters Degree +	24 (36.4%)	1 (1.6%)	25 (19.5%)
Total	66 (51.6%)	62 (48.45)	128 (100.0%)

In exploring the relationship between level of education and whether persons have a degree in human services (or a related human services degree), it is also clear why those variables are highly correlated. Table 11 visually shows that 62 out of 72 persons in the sample (86%) with four-year degrees or higher have those degrees in human services or a related field. In contrast, 52 out of 56 persons with degrees at the Associates level or lower (93%) do not have a degree human services or a related field.

Checking for variable intercorrelation at the bivariate level is typically done in order to anticipate potential problems with multicollinearity at the multivariate level. Multicollinearity refers to linear relationships between two or more X variables (Hamilton, 1992).

High intercorrelations among X variables can cause trouble in multivariate regression, making the results less stable. Since the variables discussed had high intercorrelations at the bivariate level, prior to approaching multivariate regression, I regressed each of these X variables on all of the other X variables to examine tolerance values. Tolerance is the proportion of variability in a variable that is not explained by its linear relationship with other independent variables (Hamilton, 1992). The far right column in the Variance Inflation Factor Table (Table 13) displays those values or percentages.

Results revealed that only 37% of the variance in the variable "level of education" and 39% of the variance in "college degree in human services" is independent of all the other X variables. Thus, in order to reduce potential problems with multicollinearity, the variable "college degree in human services" was dropped in favor of retaining "level of education." I chose to retain "Level of education" because it was a more complex

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variable, having four categories, rather than two. In dropping the variable "college degree in human services" and examining tolerance levels again, tolerance levels for all variables were in a comfortable range, with the mean VIF reduced to 1.23.

Table 13: *Variance Inflation Factor Analysis*

Variable	VIF	1/VIF
College Degree in Human Services	2.69	0.371626
Education Level	2.59	0.386041
Years of Professional Experience	1.54	0.649209
Age	1.47	0.679594
Ethnicity	1.21	0.828983
Agency Type	1.10	0.908285
Agency Size	1.10	0.911105
Level of Direct Service	1.07	0.930532
Gender	1.03	0.974048
Mean VIF	1.53	

Multivariate Regression Analysis

Multivariate regression analysis allowed me to investigate the research questions and demonstrate that significant relationships exist between variables. The research questions were as follows:

1. What individual-level factors relate to perception of psychological empowerment in human service professionals?

2. How are perceptions of psychological empowerment related to perceptions of
   structural empowerment in the context of the workplace environment?

3. How does participation in the FDC program affect change in perception of
   psychological empowerment for workers?

My goal was to investigate each research question individually and generate
multivariate regression analysis that would best explain and model data results.

Individual Factors in Workers and Perception of Psychological Empowerment

Using Ordinary Least Squares Regression (OLS) I tested the relationship between
perception of psychological empowerment and individual level factors by exploring the
impact that the various demographic variables had on the dependent variable,
psychological empowerment. From a theoretical perspective, three individual-level
factors were hypothesized to be related to psychological empowerment among human
service workers: years of experience in human services, level of formal education and
type of professional degree. As discussed previously, preliminary statistical analysis
procedures caused me to eliminate the variable "type of professional degree" due to
potential problems with multicollinearity.

Years of experience in human services is defined as the number of years a
frontline worker has been employed in the field of human services. One logical
assumption is that human service workers gain knowledge and skills through experience
as help-givers, thus higher levels of experience will lead to increased perceptions of
effectiveness in their work with those they seek to help. This should result in heightened
levels of psychological empowerment in a professional context. However, the literature

presents other compelling issues that must be considered. For example, workplace

conditions (e.g. limited decision-making power, high caseloads, little opportunity for

professional development) and overall system conditions (constantly changing federal

and state mandates and the requirements of funding bodies; fragmentation of services,

increased pressure for accountability, etc.) have been identified as forces that contribute

to individual and professional powerlessness in the broader field of human services

(Breton, 1994; Frans, 1993; Gutierrez et al., 1995a; Itzhaky & Gerber, 1999; Kondrat,

1995; Leslie et al., 1998; Pinderhughes, 1983; Cox & Joseph, 1998; Shera & Page, 1995;

Turner & Shera, 2005). Over time, such conditions may cause persons with more years in

human services to experience increased frustration and cynicism, and thus decreased

perceptions of empowerment.

Level of education is defined as the highest level of formal education completed

by participants. In delineating important aspects of psychological empowerment, the

literature consistently points towards the sense of competence and self-efficacy as a

critical component of the construct (Spreitzer, 1995; Thomas &Velthouse, 1990). In the

context of the human service worker, one avenue for obtaining higher levels of

knowledge and skills needed for practice is university-based education. It is plausible to

suggest that persons with higher levels of formal education may have a different sense of

professional empowerment specific to their feelings of competence and overall

knowledge and skill level than those with lower levels of formal education.

While there was no theoretical reason to believe that the other demographic

variables (gender, age, level of direct service, agency size, ethnicity, or agency type)

would influence change in perception of psychological empowerment in human service

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workers; I included them in my preliminary regression model to rule out any unexpected effect these variables might have. This decision was made because there are relatively few quantitative studies to draw upon that have examined the impact of individual level factors upon perception of psychological empowerment in the human service field.

In addition, "group status" was included as a variable in the model to control for potential differences between the treatment and comparison groups. I included this variable in this regression because I wanted to understand whether the groups differed in perception of psychological empowerment from the onset even *before* any treatment occurred (in this case, the FDC professional development training experience).

In modeling data using psychological empowerment as a dependent variable and socio-demographic variables as independent variables, none of the included variables were significant predictors of psychological empowerment. The F-test in the multivariate regression output was not statistically significant at the .05 level of confidence, revealing that the demographic variables in the model were not able to explain difference in psychological empowerment among human service professionals, and that the model as a whole was not viable. Implications of these results will be further explored in the Discussion Chapter.

Psychological Empowerment and Structural Empowerment: A Statistical Model

Initial multivariate regression analysis that only included socio-demographic variables as potential predictors of psychological empowerment did not find demographic variables predicted variance in psychological empowerment among human service professionals. Thus, my next step was to build a more complex model incorporating the structural empowerment measure as an independent variable. In the initial model, I

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included psychological empowerment as the dependent variable and structural

empowerment as the independent variable. I also included those demographic variables

theoretically believed to be related to psychological empowerment as derived from the

literature (education level and years of professional experience); as well as those that

represented differences between FDC and Non-FDC groups in my sample (gender, level

of direct service, and agency size). Finally, I included "group status" as a control variable

to account for potential differences between the groups in perception of psychological

empowerment solely based on which group they were in. Table 14 shows the STATA

output from the initial multivariate regression analysis. The p-value of the F-test in this

STATA output shows that the model is statistically significant beyond the .05 level. The

R-squared output is .2276 which indicates that 22% of the variability of psychological

empowerment is represented.

Table 14: *Preliminary Regression Model*

```
      Source    |       SS        df       MS                Number of obs =       128
----------------+------------------------------             F(  7,   120) =     5.05
        Model   |  4796.57835      7   685.225479            Prob > F      =   0.0000
     Residual   |  16279.2888    120   135.66074             R-squared     =   0.2276
----------------+------------------------------             Adj R-squared =   0.1825
        Total   |  21075.8672    127   165.95171             Root MSE      =   11.647

--------------------------------------------------------------------------------
Psychological Emp. |    Coef.   Std. Err.     t    P>|t|     [95% Conf. Interval]
----------------+---------------------------------------------------------------
Structural Emp.    |  .0353397   .0069344    5.10   0.000     .0216101    .0490694
Gender             | -1.538163   2.800733   -0.55   0.584    -7.083419    4.007094
Education Level    |  3.26707    1.010023    3.23   0.002     1.267294    5.266845
Professional Exp.  | -.1905892   .8653324   -0.22   0.826    -1.903887    1.522709
Level Dir. Service |  .4208123   2.568748    0.16   0.870     -4.66513    5.506755
Agency Size        | -.1141881    .94267    -0.12   0.904    -1.980609    1.752233
Group Status (FDC) | -6.225163   2.228176   -2.79   0.006     -10.6368   -1.81353
_cons              |  109.247    7.767157   14.07   0.000      93.8686    124.6255
--------------------------------------------------------------------------------
```

I performed several regression diagnostics to ensure that the assumptions

underlying the model were adequately met. The primary assumptions of ordinary least

squares regression result in normal, independent and identically distributed errors

(Hamilton, 1992). I first generated a residuals versus fitted values plot to check for normal pattern among the residuals (error). The plot is shown in Figure 9. I also generated a leverage versus residual squared plot (Figure 10) to understand which observations might be exerting leverage on the regression model or those that might be poorly fit to the model.

Figure 9: Resudiuals vs. Fitted Values Plot

Figure 10: Leverage vs. Residuals Squared Plot
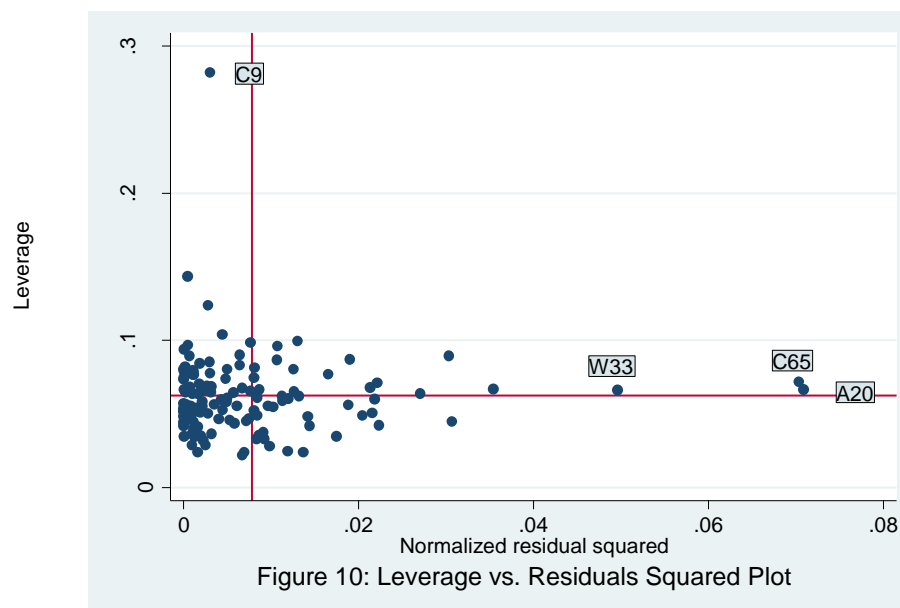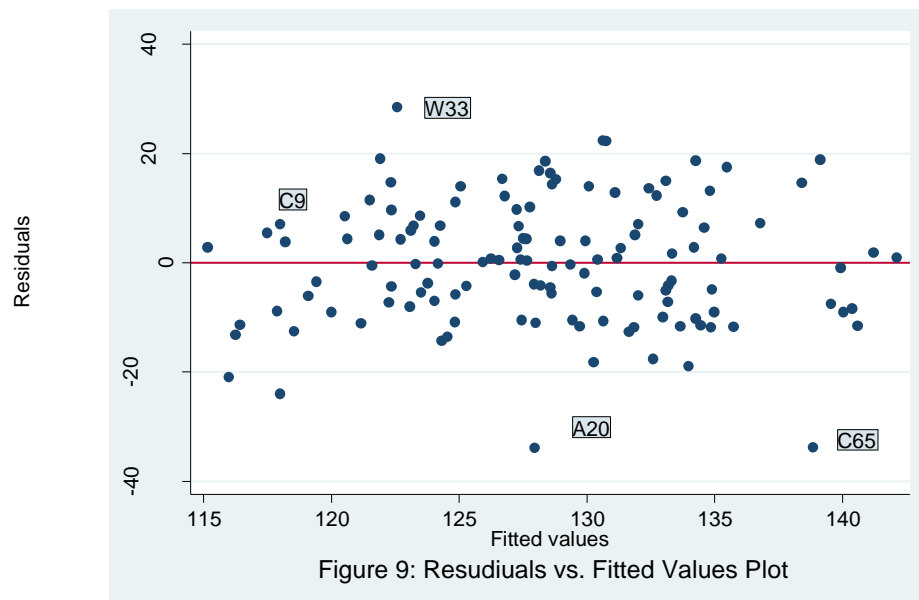
The leverage vs. residuals squared plot indicates some points exert leverage (e.g.

C9) and others are poorly fit (W33, A20 and C65); however no points stand out as being

both ill fit and exerting leverage and thereby not exhibiting potential influence. None-the-

less, by looking at the graphs, it caused me to examine cases "C9," "W33," "C65" and

"A20" to see if there was anything unusual with how their surveys were completed.

When examining surveys A20 and C65, it became apparent that respondents likely did

not realize questions 1-34 on the Social Work Empowerment scale were "reverse

ordered" by every-other-question, and thus, their responses do not make sense. While this

cannot be verified, it seemed like a prudent decision to run the multivariate regression

again without those cases. Table 15 shows the actual STATA output from the

multivariate regression dropping cases A20 and C65.

Table 15: *Final Model: Variance of Psychological Empowerment in Human Service*
Workers

```
      Source    |       SS       df       MS                Number of obs =     126
----------------+------------------------------             F(  7,   118) =    6.81
       Model    | 5560.15657      7  794.308081             Prob > F      =  0.0000
     Residual   | 13767.6212    118  116.674756             R-squared     =  0.2877
----------------+------------------------------             Adj R-squared =  0.2454
       Total    | 19327.7778    125  154.622222             Root MSE      =  10.802


--------------------------------------------------------------------------------
Psychological Emp. |    Coef.  Std. Err.     t    P>|t|    [95% Conf. Interval]
-------------------+------------------------------------------------------------
Structural Emp.    |  .0406536   .006552    6.20   0.000    .0276788    .0536284
Gender             | -2.836127  2.612942   -1.09   0.280   -8.010463    2.338209
Education Level    |  2.775239  .9429047    2.94   0.004    .9080306    4.642446
Professional Exp.  | -.2777121  .8031929   -0.35   0.730   -1.868253    1.312828
Level Dir. Service |  1.013425   2.38566    0.42   0.672   -3.710832    5.737682
Agency Size        | -.1293199  .8874293   -0.15   0.884   -1.886671    1.628032
Group Status (FDC) | -5.759048  2.088406   -2.76   0.007   -9.894661   -1.623435
_cons              |  109.1118  7.238763   15.07   0.000    94.77711    123.4466
--------------------------------------------------------------------------------
```

I generated a residuals versus predicted values plot to examine the distribution of

error. Figure 11 shows the distribution of error to be fairly normal, with no obvious

patterns. I also generated an added variable plot in order to examine the relationship

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between psychological empowerment and structural empowerment, adjusting for the effects of the other *X* variables in the model. Added variable plots help uncover observations exerting a disproportionate influence on the regression model. As visually displayed via Figure 12, no such problems are revealed.

Figure 11: Residuals vs. Fitted Plot

coef = .04234101, se = .00666961, t = 6.35

Figure 12: Added Variable Plot
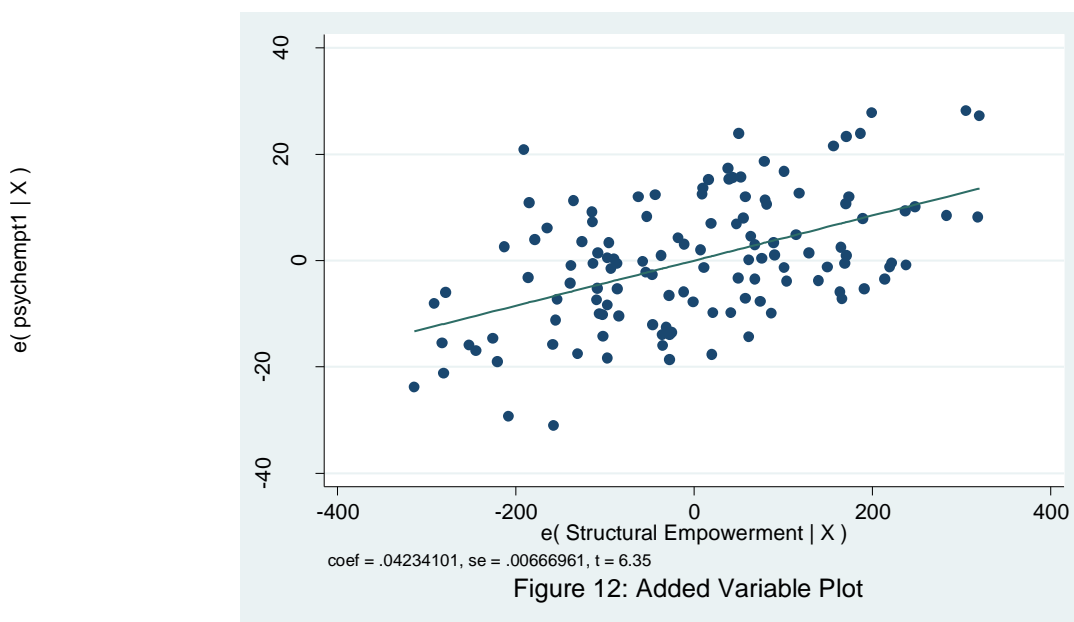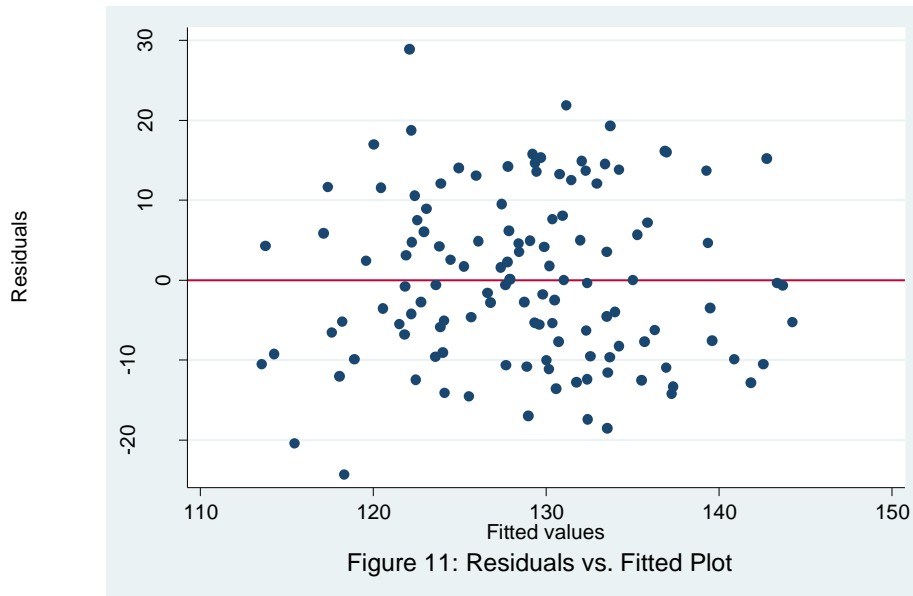
Thus, in the final data model, the R-squared output is .2877 which indicates that 28% of the variability of psychological empowerment is represented. The p-value of the F-test in this STATA output shows that the model is statistically significant beyond the .05 level. The variables that were statistically significant in the preliminary model remained significant in this final model; however the strength of the influence of education level and group status was slightly reduced.

Perception of psychological empowerment was higher in workers with more favorable conditions of structural empowerment in their agencies and workers with higher levels of education. The coefficients for each of these variables indicate the amount of change you would expect to see in psychological empowerment, given a one unit change in that particular variable, irrespective of the other variables. A one unit increase in education would result in a 2.775239 increase on the psychological empowerment measure while holding the other variables constant. Similarly, a one unit increase in square root structural empowerment would result in a .0406536 increase on the psychological empowerment measure after controlling for the other variables.

In addition, from the onset of the study, the results show that holding all other variables constant, perception of psychological empowerment was over six points lower for persons in the FDC group than for persons in the comparison group ($r = -5.759048$, $p < .007$). These results indicate that from the onset, these two groups differed in perception of psychological empowerment; however the reason for those differences is not readily known. This will be further explored in the Discussion chapter of this study. Again, all measures were taken in both groups <u>before</u> the FDC professional development experience occurred.

Prior to moving ahead with examining change in psychological empowerment between Wave One and Wave Two data collection, I used regression diagnostics to detect whether there may have been other cases in which persons completed the Social Work Empowerment survey incorrectly at the time of Wave Two data collection (failing to realize questions 1-34 on the scale were "reverse ordered" by every-other-question). By generating a leverage versus residual squared plot (Figure 13), case "W45" was shown to be a potential outlier, having poor fit but not exerting influence. In examining the individual survey, it was apparent that there was likely an error in completing the survey at Wave Two data collection. This case was eliminated prior to moving ahead with further data analysis intended to examine change in psychological empowerment over time.

Figure 13: Leverage vs. Residuals Squared Plot
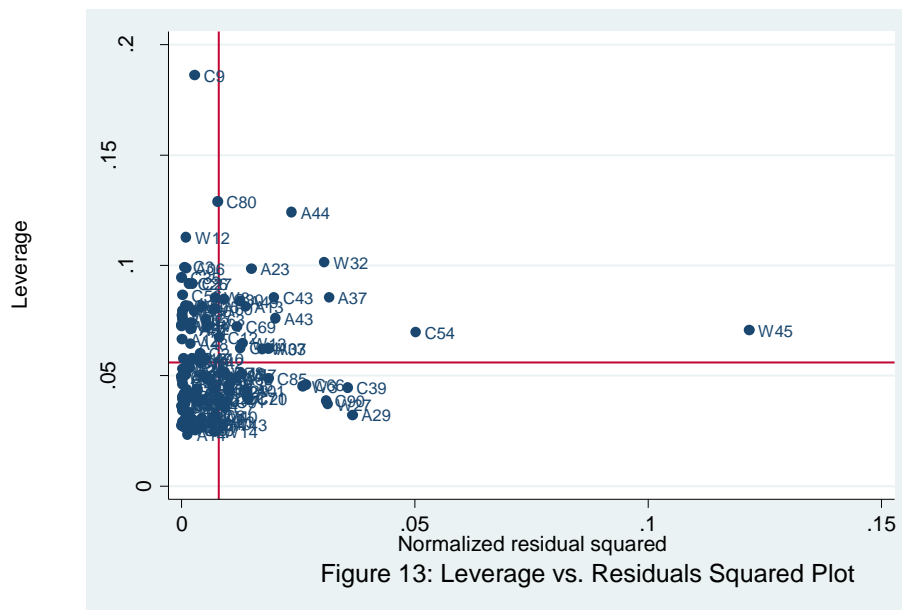
Change in Psychological Empowerment and the Impact of FDC: A Statistical Model

As stated in the beginning of this chapter, the first purpose of this study was to understand how psychological empowerment was related to individual level characteristics of workers as well as environmental conditions in the workplace. The second major purpose of this research was to examine whether participation in the FDC program was associated with change in perception of psychological empowerment. Thus, in this portion of my analysis, the goal is to use multivariate regression to determine which individual level factors and conditions of empowerment in the agency (structural empowerment) predict change in psychological empowerment, controlling for group status (FDC vs. Non-FDC) as well as differences between the groups from the onset of the study (gender, level of education, level of direct service and agency size).

Tables 16 and 17 display the summary statistics of each group's scores on the Social Work Empowerment scale as well as the CWEQ-II scale at Pretest and Posttest.

In seeking to determine differences over time and differences between the groups, "change scores" needed to be calculated for the scores on both instruments in preparation for multivariate regression analysis. Such scores are considered the best measures

Table 16: *Summary Statistics of Social Work Empowerment Scale by Group Status*

	Mean		Median		Minimum		Maximum	
	Pretest	Posttest	Pretest	Posttest	Pretest	Posttest	Pretest	Posttest
FDC	126.83	134.68	127.0	132.0	94	110	153	165
Non-FDC	131.03	129.87	130.50	128.5 0	111	103	158	159

Table 17: *Summary Statistics of CWEQ II by Group Status*

| | Mean | | Median | | Minimum | | Maximum | |
	Pretest	Posttest	Pretest	Posttest	Pretest	Posttest	Pretest	Posttest
FDC	20.97	21.40	21.67	21.50	12.5	10.92	27.75	29.67
Non-FDC	20.69	20.70	21.17	20.63	7.17	7.58	28.42	28.33

to determine actual differences in scores between wave 1 and wave 2 in a longitudinal data set. In order to do this, two new variables were created, "change in psychological empowerment" and "change in structural empowerment." The variables were created by subtracting time one scores from time two scores for both measures. I then examined the distribution of the newly created variables. The nature and distribution of the variable "Change in Psychological Empowerment" is represented in Figure 14. As can be seen pictorially, the "identity" distribution approximates normality.

In visually examining the "Change in Structural Empowerment" variable, the distribution is light-tailed and has a slight negative skew. It appears that it would benefit from transformation. Figure 15 visually depicts this. By using the Ladder of Powers (Tukey, 1977 as cited by Hamilton, 1992) I was able to determine how to improve the distribution's shape. I chose to transform the variable using the square root. Figure 16 visually show the improvement in distribution.

Using Ordinary Least Squares Regression, a model was built to best explain change in psychological empowerment among human service workers in the sample. The final model included Change in Psychological Empowerment as the dependent variable.
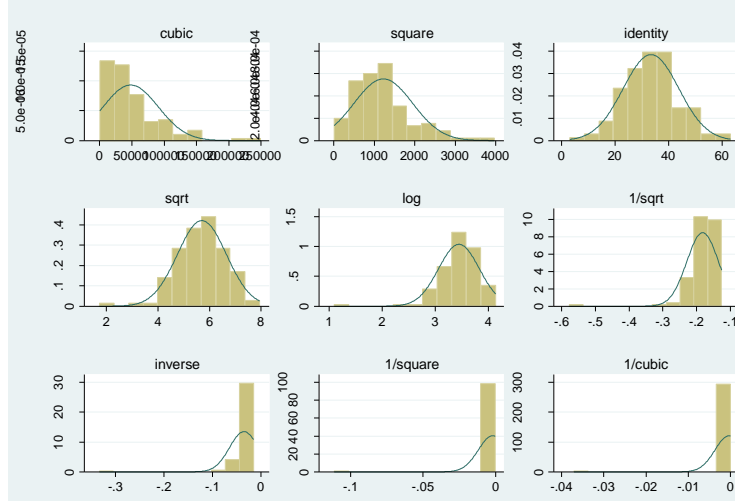
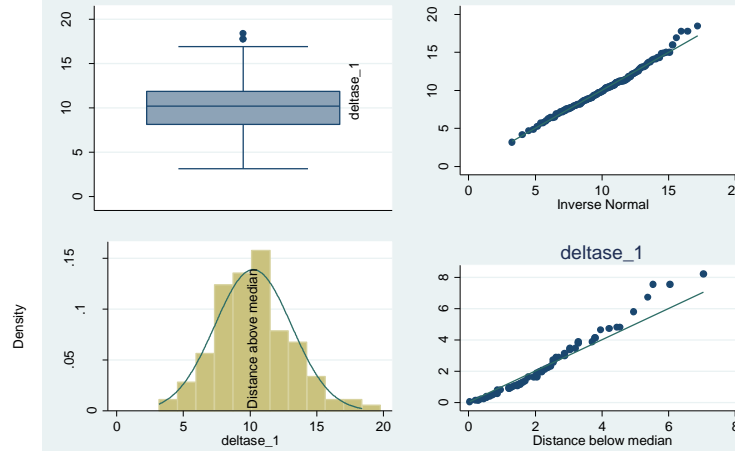Figure 14: Distribution of Variable "Change in Psychological Empowerment"

Figure 15: Distribution of Variable "Change in Structural Empowerment"
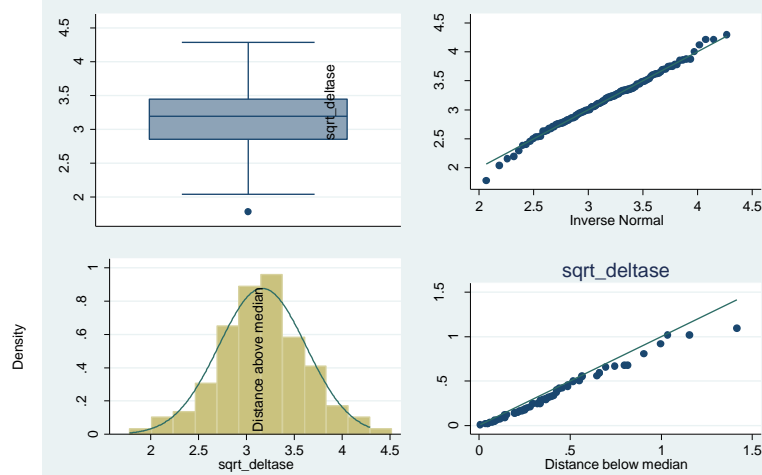

Figure 16: Square Root of "Change in Structural Empowerment"

From a theoretical perspective, I included three independent variables as potential predictors of change in psychological empowerment based on theoretical premise. First, "Change in Structural Empowerment" was included because as indicated in the literature, and further confirmed in earlier analysis results herein, psychological empowerment in human service professionals is positively associated with the conditions of empowerment in agencies (structural empowerment). Thus, it is logical to assume that change in psychological empowerment will also be associated with change in structural empowerment.

"Professional Experience" was included in as a variable in the model because workplace conditions (e.g. limited decision-making power, high caseloads, little opportunity for professional development) and overall system conditions (constantly changing federal and state mandates and the requirements of funding bodies; fragmentation of services, increased pressure for accountability etc.) have been identified as forces that contribute to individual and professional powerlessness in the broad field of human services (Breton, 1994; Frans, 1993; Gutierrez et al., 1995a; Itzhaky & Gerber, 1999; Kondrat, 1995; Leslie et al., 1998; Pinderhughes, 1983; Cox & Joseph, 1998; Shera & Page, 1995; Turner & Shera, 2005). Thus, over time, such conditions may cause persons with more years in human services to experience increased frustration and cynicism, and thus higher levels of negative change in perception of psychological empowerment.

Finally, Level of Education was included in the model for a reason that is related to the previous discussion. In response to what are often challenging workplace conditions and overall system conditions, it is reasonable to suggest that persons with

differing levels of education may respond differently to such challenges over time. Additionally, the literature consistently points towards the sense of competence and self-efficacy as a critical component of psychological empowerment (Spreitzer, 1995; Thomas &Velthouse, 1990). In earlier results herein, level of education also was found to be associated with higher levels of perception of psychological empowerment in this sample population.

I included the variable "Group Status - FDC" in order to examine differences in change based on whether participants were in the treatment group (participated in the FDC training experience) or in the comparison group (no FDC training). I included three additional control variables that represented demographic differences between the FDC and Non-FDC groups in my sample: gender, level of direct service and agency size.

Table 18 shows the actual STATA output from the multivariate regression analysis. The p-value of the F-test in this STATA output shows that the model is statistically significant beyond the .05 level. The R-squared output is .2748 which indicates that 27% of the variability of change in psychological empowerment is represented.

I performed several regression diagnostics to ensure that the assumptions underlying the model were adequately met. I first generated a residuals versus fitted values plot to check for a normal pattern among the residuals (error). The plot is displayed in Figure17, showing the distribution of error to be fairly normal, with no obvious patterns. I also generated a leverage versus residual squared plot (Figure 18) to understand if any observations might be exerting leverage or influence on the regression model or those that might be poorly fit to the model. The graph indicates that no points

stand out as being both ill fit and exerting leverage and thereby do not exhibit potential influential.

Table 18: Statistical *Model Predicting Change in Psychological Empowerment in Human Service Workers*

```
      Source     |       SS       df       MS                Number of obs =     125
-----------------+------------------------------            F(  7,   117) =    6.33
       Model     |  3661.77791      7   523.11113            Prob > F      =  0.0000
     Residual    |  9663.79009    117   82.5964965           R-squared     =  0.2748
-----------------+------------------------------            Adj R-squared =  0.2314
       Total     |  13325.568     124   107.464258           Root MSE      =  9.0883


---------------------------------------------------------------------------------
 Change Psych. Emp. |    Coef.   Std. Err.      t    P>|t|    [95% Conf. Interval]
--------------------+------------------------------------------------------------
Change Structural Emp. |  4.731565   1.804207    2.62   0.010    1.158428   8.304701
Gender                 | -.0882711   2.172132   -0.04   0.968   -4.390064   4.213522
Education Level        | -1.341782   .7780774   -1.72   0.087   -2.882724   .1991591
Professional Exp.      | -.5900388   .6791331   -0.87   0.387   -1.935026   .7549487
Level Direct Serv.     | -1.923596   2.015431   -0.95   0.342   -5.915051   2.06786
Agency Size            | -1.022758   .7466439   -1.37   0.173   -2.501447   .4559315
Group Status (FDC)     |  9.25015    1.767097    5.23   0.000    5.750507   12.74979
_cons                  | -5.14377    7.728401   -0.67   0.507   -20.44946   10.16192
---------------------------------------------------------------------------------
```


Figure 17: Residuals vs. Fitted Plot

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Figure 18: Leverage vs. Residuals Squared Plot
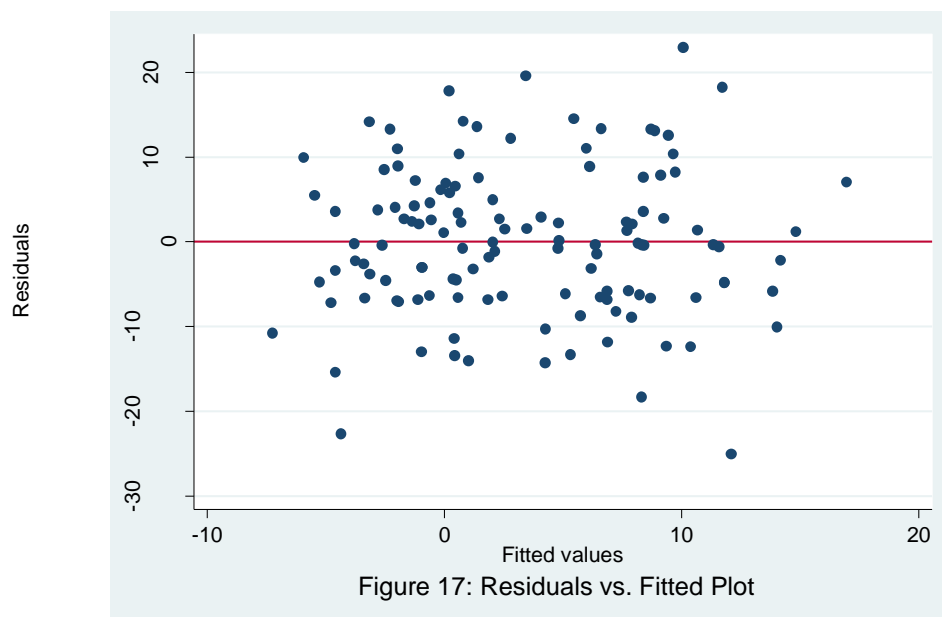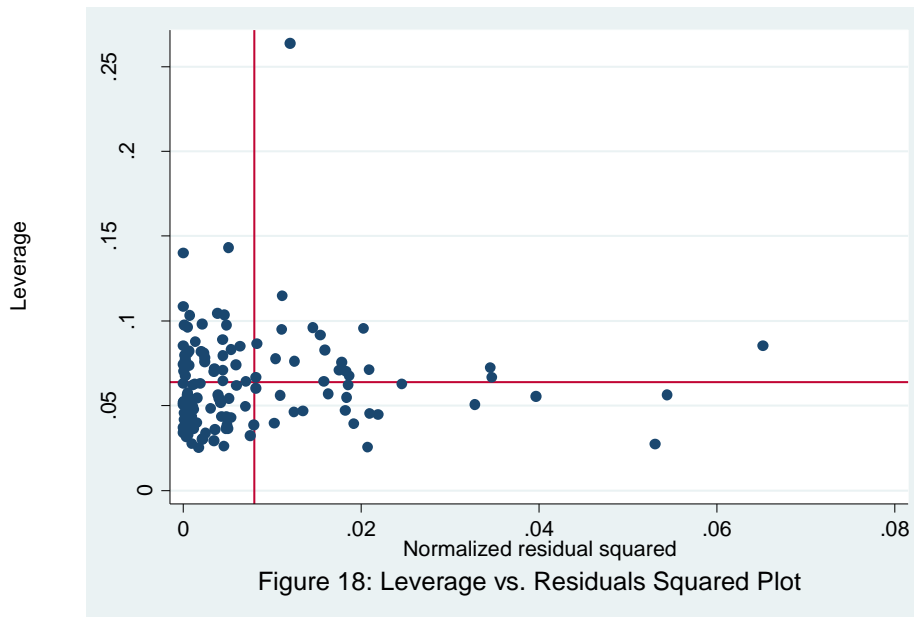
In analyzing and interpreting the results, the coefficients for each of the variables indicate the amount of change one would expect to see in psychological empowerment, given a one unit change in that particular variable. Thus, the coefficients provide a means by which to evaluate the level of impact a particular variable has while controlling for the other variables. However, when performing regression with transformed variables (in this case the variable "change in structural empowerment" was transformed), a straight forward interpretation of the results can prove difficult. A quick way to observe curvilinear relationships among variables after transformation and multivariate regression is to make a set of predictions when all the variables *except* that predictor are set to a constant value and the transformed predictor is included in its original units (Hamilton, 1992). Thus, I generated a conditional effects plot (Figure 19) in order to visually see the relationship between change in psychological empowerment (dependent variable) and change in structural empowerment (predictor variable) for both groups in the study (FDC

and non-FDC), holding all other variables constant. This allowed me to visually see if both groups behaved in a similar way.

Figure 19: Conditional Effects Plot by Group Status
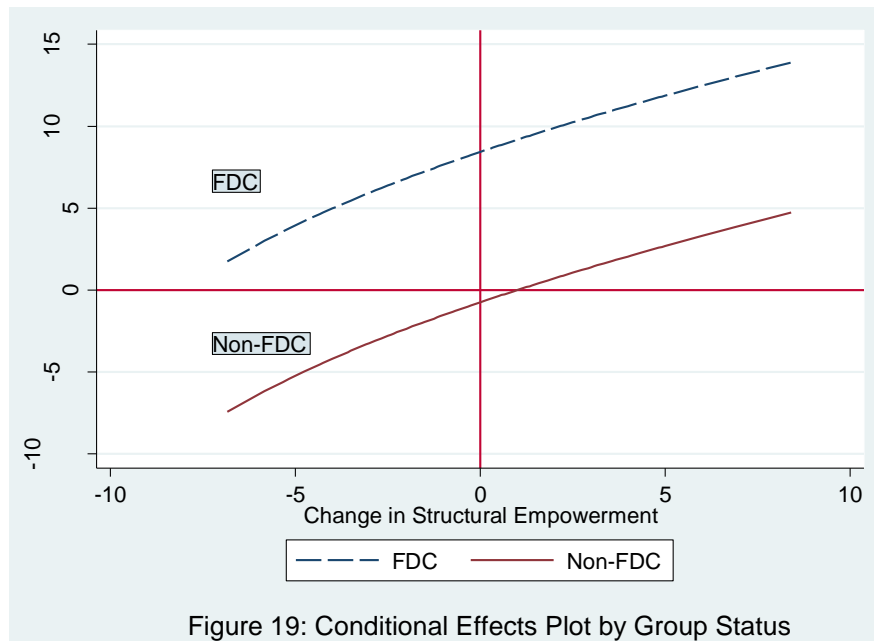
First, the X-axis of the conditional effects plot represents change in structural empowerment (change in scores between Wave 1 and Wave 2 data collection). The "0" point represents no change from the pretest to the posttest. Similarly, the Y-axis of the conditional effects plot represents change in psychological empowerment (change in scores between Wave 1 and Wave 2 data collection). Again, the "0" point on the axis represents no change from the pretest to the posttest. For both groups, the graph pictorially shows that as change in structural empowerment increases, change in psychological empowerment increases. Thus, each group's line represents a regression line depicting how change in psychological empowerment occurs in relation to change in structural empowerment, holding all other variables constant.

While change in perception of structural empowerment occurred at similar rates for both groups, the level of change in perception of *psychological empowerment* was very different based on group status. I quantified the actual difference using the results of the multivariate regression equation that generated the conditional effects plot. In mathematically calculating the change holding all other variables constant, the difference between mean change in psychological empowerment between FDC and Non-FDC groups was 14.39392. In the overall regression model, the most significant influence on change in psychological empowerment was group status. That difference is visually represented as the "space"' between the two regression lines.

In comparing the effects of change in psychological empowerment and change in structural empowerment by group (FDC and non-FDC), the conditional effects plot visually shows three things of particular interest. First, in the FDC group, holding all other variables constant, change in psychological empowerment went up most significantly as change in structural empowerment increased (as observed in the upper right quadrant). This was the case for the non-FDC group as well; however, the level of overall change in psychological empowerment was lower in the comparison group than the FDC group, with modest positive gains in change in psychological empowerment realized only in those who had reported substantive change in structural empowerment (as observed in the lower right quadrant).

Second, in the FDC group, positive change in perception of psychological empowerment was realized even when perception of change in structural empowerment remained level (unchanged or when change in structural empowerment was at zero). In the comparison group, those with no perceived change in structural empowerment

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experienced *negative* change in their perception of psychological empowerment (as observed in the lower left quadrant).

Third, for the FDC group, when negative change in perception of structural empowerment occurred (an apparent decline in agency conditions), *positive* change in perception of psychological empowerment occurred (as observed in the upper left quadrant). The opposite was the case in the non-FDC group: when changes in perception of structural empowerment remained level or decreased, negative change in psychological empowerment resulted.

In summary, the FDC group demonstrated increases in change in psychological empowerment at a much greater level than the comparison group. It remains apparent that the FDC program results in positive levels of change in psychological empowerment even in the face of declining conditions of empowerment in agencies (structural empowerment).

In the next Chapter key findings of this study are discussed. Interpretations of the results are offered, integrating them with current literature of psychological empowerment, organizational empowerment and the Family Development Credentialing (FDC) Program. Limitations of the study are explored, including issues of internal and external validity. Implications for practice and recommendations for future research are offered.

CHAPTER VI

DISCUSSION

This chapter summarizes and interprets key findings of this study, integrating them with current literature of psychological empowerment, organizational empowerment and the Family Development Credentialing (FDC) Program. The discussion proceeds as follows: (a) summarization of key findings; (b) overview of the concept and theory of empowerment as the foundation for this study; (c) research questions explored; (d) findings related to psychological empowerment and individual-level characteristics of workers and integration with existing literature; (e) findings related to psychological empowerment and structural empowerment and incorporation with existing literature; (f) findings related to the impact of the FDC Program on change in perception of psychological empowerment among human service workers; (g) relationship of findings to the empowerment-based model-of-change framework proposed for the FDC program; (h) implications for practice; (i) internal and external validity of findings; and (j) recommendations for future research.

Summary of Key Findings

A summarization of the key findings of this study is as follows:

1. Higher levels of psychological empowerment in human service workers were found to be associated with: 1) more favorable conditions of empowerment in agencies (structural empowerment); and 2) higher levels of education. Holding all other variables constant, workers who perceived their work conditions to be more empowering (i.e. having higher levels of support,

resources, access to information etc.), as well as workers with higher levels of

formal education, had higher levels of psychological empowerment than

workers with less favorable agency conditions and lower levels of education.

2. Irrespective of the other variables, a positive relationship exists between

   change in structural empowerment and change in psychological

   empowerment.

3. For persons who participated in the FDC program, change in psychological

   empowerment was higher at all levels of change in structural empowerment

   when compared to persons in the Non-FDC group, and controlling for the

   other variables.

4. For the FDC group, when negative change in perception of structural

   empowerment occurred (i.e. an apparent decline in agency conditions),

   positive change in perception of psychological empowerment still occurred,

   when controlling for the other variables.

Concept and Theory of Empowerment

The concept and theory of empowerment has grown to be understood as a multi-

dimensional, highly complex, dynamic and integrated phenomenon. Many scholars have

developed frameworks for considering the multiple levels or domains in which

empowerment occurs as a means to further define and understand the scope and breadth

of the concept. While most readily conceptualized on an individual-level, various authors

describe how empowerment can be explored and described on multiple levels, including

individual, organizational and societal. At the individual level, psychological

empowerment is a multi-dimensional theory concerned with: (a) how people think about

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themselves (e.g. self-esteem, competence, locus of control, motivation); (b) how people think about and relate to their environment (e.g. critical awareness, ability to mobilize resources, decision-making, problem-solving); and (c) the actions people take to influence their environment or help others to influence their environment (Akey et al., 2000; Bolton & Brookings, 1998; Peterson et al., 2006; Speer, 2000; Zimmerman, 1995; Zimmerman & Warschausky, 1998).

At the organizational-level empowerment theory is dually focused. First, it is concerned with organizational efforts that generate psychological empowerment among members and organizational effectiveness needed for goal achievement. Emanating from research in the field of organizational studies, it is concerned with how organizations create structural conditions in the workplace that reduce powerlessness (empowering organizations). As a broader dimension, it also focuses on efforts by organizations to impact the sociopolitical structure and create social change in the community (e.g. organizational coalitions aimed at improving quality of life in a community; facilitating citizen participation in change efforts; avoiding community threats) (Kane-Urrabazo, 2006; Kanter, 1979, 1988; Peterson & Zimmerman, 2004; Spreitzer, 1995; Zimmerman, 2000).

As a community-level construct, attention is given to the sociopolitical structure and social change, including efforts to avoid community threats, improve quality of life and facilitate citizen participation (Zimmerman, 2000).

Research in the field of empowerment continues to evolve. Experts in the field of empowerment such as Perkins (2005) increasingly call for new approaches that will yield knowledge about real-world empowerment processes. Also, pundits encourage more

specific attention be paid to what models of empowerment work with what populations in which settings.

Research Questions

The following questions guided the research inquiry:

1. What individual-level factors relate to perception of psychological empowerment in front-line human service workers?
2. How are perceptions of psychological empowerment related to perceptions of structural empowerment in the context of the workplace environment?
3. How does participation in the FDC program affect change in perception of psychological empowerment for workers?

Psychological Empowerment and Individual-level Characteristics of Workers

Level of formal education; type of professional degree; and years of experience in human services were hypothesized to be significantly related to psychological empowerment among human service workers. In modeling data using psychological empowerment as the dependent variable and socio-demographic variables as independent variables, none of the included variables were found to be statistically significant predictors of psychological empowerment, with the model as a whole not being statistically significant.

In other related studies that used data modeling, individual-level factors alone (e.g. age, ethnicity, licensure status, professional degree) were not found to substantively explain differences in perception of psychological empowerment of human service professionals (see Cearley, 2004; Daniels, 2002; Scott, 1997; Wallach, 2002). However,

due to the limited number of studies as well as highly varied instrumentation used to measure empowerment, exploration of demographic differences based on theoretical premise as well as my own professional experience in human services seemed to inherently make sense.

Particularly over the past two decades years, underlying theoretical assumptions around the form, context and variation of psychological empowerment have been widely accepted. One of those assumptions is that psychological empowerment takes on different forms for different people, suggesting that the process and meaning of empowerment is influenced by the characteristics of individuals (Zimmerman, 1995). It seemed plausible to suggest that current instrumentation aimed at measuring dimensions of psychological empowerment should be sensitive enough to delineate how socio-demographic differences influence perception.

In analyzing these results and integrating the findings with other empirically-based empowerment research in human services, findings in this study are consistent with other studies that have used the Social Work Empowerment Scale (see Daniels, 2002; Frans & Moran, 1992; Scott, 1997; Van Hoorhis & Hostettler, 2006), all of which found socio-demographic variables not to be significant predictors of variation in empowerment scores. Only two other studies that empirically examined perception of psychological empowerment in human services using alternative instruments were found. One study, using the Worker Empowerment Scale also found that socio-demographic variables included in the model (length of professional experience and type of degree) were not significant predictors of worker empowerment in a study involving child welfare workers (Cearley, 2004). In a second study, Wallach (2002) found that significant correlations at

the bivariate level between perception of psychological empowerment and the following demographic variables using Spreitzer's Empowerment Scale: agency type, education level, age, unit size and tenure in the agency. However, in data modeling, when only considering demographic variables in relation psychological empowerment, only "agency type" was found to be a significant predictor of empowerment. However, similar to what will be discussed next, Wallach found that socio-demographic factors became significant when the data model became more complex, taking into consideration organizational aspects of empowerment. Albeit there are limited studies available to consider, the inability of socio-demographic variables alone to predict variance in psychological empowerment among human service professionals seems to underscore the complex and multi-dimensional nature of an empowerment construct that theorists have spent many years understanding and articulating.

Many authors (Adams, 2003; Gutierrez et al., 1995; Spreitzer, 1995; Zimmerman, 2000) emphasize the multi-faceted, person-in-environment nature of empowerment. Going back to Zimmerman's multiple levels of analysis, each level is described separately, however all levels are proposed to be inherently connected to, mutually interdependent upon and both a cause and consequence of each other. Table 16 outlines the unique aspects of empowerment processes and outcomes across these levels of analysis (Zimmerman, 2000, p. 46-47).

The ways in which socio-demographic factors influence how the process and outcome of empowerment is experienced and realized by individuals is highly complex and context specific. This study as well as previous research affirms the need to continue working to identify discreet socio-demographic variables specific to the research context

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at hand that may increase understanding of how perceived psychological empowerment and structural empowerment are influenced by unique or distinct individual characteristics.

Table 19: *Empowering Processes and Empowered Outcomes across Levels of Analysis*

Levels of Analysis	Process ("empowering")	Outcome ("empowered")
Individual	- Learning decision-making skills - Managing resources - Working with others	- Sense of control - Critical awareness - Participatory behaviors
Organizational	- Opportunities to participate in decision-making - Shared Responsibilities - Shared leadership	- Effectively compete for resources - Networking with other organizations - Policy influence
Community	- Access to resources - Open government structure - Tolerance for diversity	- Organizational coalitions - Pluralistic leadership - Residents' participatory skills

Relationship between Psychological Empowerment and Structural Empowerment in Human Service Workers

This study hypothesized that perception of psychological empowerment would be positively related to perception of structural empowerment in human service workers. Findings supported this hypothesis. The final data model built to explain variation in psychological empowerment in human service workers included two significant independent variables (structural empowerment and level of education) and one significant control variable (group status). Holding all other variables constant, higher

levels of perceived psychological empowerment were associated with persons who had higher levels of perceived structural empowerment, those with higher levels of education, and those in the comparison group.

Initial data modeling that only included socio-demographic variables as potential predictors of psychological empowerment did not find demographic variables predicted variance in psychological empowerment among human service professionals. However, when a more complex model was built incorporating a measure that also examined organizational influences of empowerment (structural empowerment) the demographic variable "level of education" became significant in the regression data model. This again highlights the importance of the underlying assumptions of empowerment discussed in the literature. In addition to the assumption that psychological empowerment takes on different forms for different people (suggesting individual characteristics influence it) theorists posit that psychological empowerment is context-specific, meaning that settings and environment shape the form of empowerment that takes place (Speer, 2000). The interaction of these two complex assumptions are only now becoming more understood through research that seeks to explore perception of empowerment in very specific settings and circumstances. For example, when considered in conjunction with work-related aspects of empowerment (e.g. participation in decision-making, role of supervision) demographic variables have been found to contribute to differences in overall perception of empowerment at modest, yet statistically significant levels (see Wallach, 2002). Likewise, in this study, when perception of structural empowerment was added into the regression model, the demographic variable "level of formal education" contributed to a significant amount of variance in perception of psychological

empowerment among human service professionals. Holding all other variables constant, persons with higher levels of education had higher levels of perceived psychological empowerment than persons with lower levels of education. This finding is consistent with theoretical underpinnings of the construct, which purport knowledge and skills as one of several critical components in an individual-level conceptualization of psychological empowerment, particularly in the work-based setting. The broad-based literature on empowerment consistently identifies the acquisition of knowledge and skills as one of several key components in an empowerment process as well as the sense of competence and self-efficacy as a critical component of the construct (Spreitzer, 1995; Thomas &Velthouse, 1990). In the context of the professional human service worker, one avenue for obtaining higher levels of knowledge and skills needed for practice is university-based education. It makes sense that persons with higher levels of formal education may have a higher sense of professional empowerment specific to their feelings of competence and overall knowledge and skill level than those with lower levels of formal education.

Psychological empowerment and structural empowerment are two concepts treated by the literature on a conceptual basis as inter-related, yet distinct dimensions of an empowerment construct. The relationship found between psychological empowerment and structural empowerment is highly consistent with other findings in the literature within and beyond the human service literature. In the discipline of organizational studies, the empirical study of the relationship between psychological aspects of empowerment and workplace structural conditions of empowerment has been a strong and consistent focus, particularly in the field of nursing since the late 1980s. Research consistently proposes that an individual's perception of psychological empowerment is

related to the structural conditions of empowerment in the environment, with the most recent focus attempting to more clearly delineate the direction or path of influence.

Such research indicates that organizational conditions of empowerment proposed in Kanter's theory of structural empowerment (information, support, opportunity, resources, informal power and formal power) are related to, and as some research suggests, an antecedent to psychological empowerment (see Laschinger et al., 2001; Laschinger et al., 2003; Laschinger et al., 2004). In particular, researchers suggest that in the workplace context, structural empowerment is the perception of the presence or absence of empowering conditions, whereas, psychological empowerment is the employees' psychological reaction to these conditions.

This research is particularly relevant to the human services field, because lack of power or "powerlessness" of human service professionals has consistently been posed in the literature as a potential barrier in workers' ability to be empowering and achieve empowered outcomes in partnership with, and on behalf of clients. Structural conditions in human service organizations and the system overall are identified in the literature as potential contributors to worker powerlessness; however empirical research aimed at documenting this phenomena are scant. Given the lack of other studies which have examined the relationship between psychological and organizational empowerment in the field of human services, findings from this study add support to the limited empirical base of research in human services documenting the positive relationship between psychological empowerment and conditions of empowerment in the agency environment.

Impact of the FDC Program on Change in Perception of Psychological

Empowerment in Human Service Workers

This research proposed a model-of-change framework suggesting key components of FDC would function together to facilitate a process of empowerment for those who participated in the Program. Findings from this research solidly support the viability of the initial tenets of the model. By using a quasi-experimental non-equivalent control group design with pretest and posttest, this study was able to empirically measure change in perception of psychological empowerment over time, and compare results between two groups, those who participated in the FDC program and a comparison group who did not. A statistical model was built that explained variation of change in psychological empowerment among human service professionals in the sample, with two variables found to contribute to change in psychological empowerment: 1) whether persons participated in the FDC program; and 2) perception of change in structural conditions of empowerment in the agency environment.

From the onset of the study, "group status" was a control variable created in this study to account for unanticipated differences between the treatment and comparison groups. Interestingly, initial results on the psychological empowerment measure showed that holding all other socio-demographic variables constant, perception of psychological empowerment was nearly five and a half points lower for persons in the FDC group than for persons in the comparison group ($r = -5.49890$, $p < .03$). This measure was taken prior to any treatment occurring. The apparent difference between the two groups in perception of empowerment from the onset of the study is worthy of discussion prior to discussing

the nature of change that occurred during the course of the research project and the implications of those findings.

First, what might have been different or unique about the two groups from the onset of the study that was not accounted for in the research design? For example, one aspect of the demographic differences between the groups that could not be controlled for but reflected differences between the groups included the fields of practice represented in each group. In the FDC group, there were 15 participants who identified their field of practice as "mental health/mental retardation, and only one in the comparison group. Likewise, in the comparison group, there were there were 16 participants who identified their field of practice as "food/nutrition," and none in the FDC group. There are no known studies that have examined the impact of fields of practice on perception of empowerment in human services. However in related fields such as nursing that have attempted to understand how setting and context affect perception of empowerment, differences across "specialty area" (e.g. critical care, surgery etc.) also did not produce variation (see Laschinger et al., 2004). Similarly, while I did not ask participants to indicate whether they worked in a primarily rural, urban, or suburban geographic area, both groups were drawn from agencies primarily located in rural and urban counties. The FDC group likely had a higher level of urban-based workers than the comparison group however. Thus, geographic differences could be another potential influence not accounted for. In reviewing the literature, this is not an area that has been explored in other studies that I was able to uncover.

Related to the question of what might have been different or unique about the two groups that were not controlled for in this study, there is a second question of interest:

Did the FDC group represent a group of persons who were different in some way than the general population of human service workers? There are two ways human service professionals enter the FDC program. First, some workers enter by choice because they are attracted to what the program presents and the potential benefits of becoming credentialed (self selection). Second, some workers enter the program at the direction of an agency supervisor or manager. In this study, there was no way to know "how" participants entered the FDC program (by choice or by direction); however it is important to acknowledge that based on the unique features and aspects of the FDC program, it could attract persons that are perhaps different than the overall human service population. For example, if a large percentage of the FDC group was made up of frontline workers who were mandated by supervisors or managers because they determined those workers would more highly benefit from FDC, the "effect" of such decisions could potentially be represented in the difference in empowerment scores between the groups that were present from the onset of the study. This underscores the need for replication of the findings of this study, which will be discussed in greater depth later in this chapter under limitations and weaknesses of this study.

In this study I hypothesized that participation in the FDC program would be related to positive changes in levels of perceived psychological empowerment in workers. This hypothesis was strongly supported. Of particular interest to discuss is the nature of that change, particularly in light of what was happening in the comparison group at the same time as well as changing conditions of empowerment in the agency environment.

In both groups (FDC and Non-FDC), change in perception of structural empowerment occurred at similar rates, both positive and negative. What distinguishes

the groups however is the impact such changes had on changes in psychological

empowerment, and the role that FDC played in minimizing negative effects and

maximizing positive effects. For example, in the FDC group, holding all other variables

constant at their mean values, positive change in psychological empowerment occurred

even when conditions in the agency were changing in adverse ways. The *opposite* was

the case in the non-FDC group: when negative changes in perception of structural

empowerment occurred (agency conditions declined), perception of psychological

empowerment also declined. Current path models in the literature predicting the

relationship between psychological and structural empowerment support the latter as the

logical outcome.

In the literature, workplace conditions (e.g. limited decision-making power, high

caseloads, little opportunity for professional development) and overall system conditions

(constantly changing federal and state mandates and the requirements of funding bodies;

fragmentation of services, increased pressure for accountability etc.) have long been

identified as forces that contribute to individual and professional powerlessness in the

broader field of human services (Breton, 1994; Frans, 1993; Gutierrez et al., 1995a;

Itzhaky & Gerber, 1999; Kondrat, 1995; Leslie et al., 1998; Pinderhughes, 1983; Cox &

Joseph, 1998; Shera & Page, 1995; Turner & Shera, 2005). Results of this study do not

specifically reveal what negatively changed in the agency environments of workers.

However, results suggest FDC acted as a buffer, or counteracted the negative effects of

changing conditions for workers who participated in the Program. As discussed in the

theoretical framework chapter of this research project, FDC represents a unique

educational program with a dual focus that addresses the professional development of

workers as a means through which they can be *empowered* themselves, e.g. critical

awareness, reflective practice, self-care, and collective identity.

Empowerment theory suggests empowered individuals are the basis for building

and achieving empowerment outcomes on other levels (Zimmerman, 2000). Critical

outcomes of FDC are built upon that same premise. As a program, FDC positions the

worker as the initial *focus* of change as well as the *vehicle* for creating change in order to

meet the transformative outcomes the program is designed to achieve. Thus, worker

empowerment is a critical initial component in the FDC model that serves as the

springboard to the following behavioral outcomes for workers: (a) working from an

empowerment-oriented, strengths-based perspective with individuals and families; (b)

creating changes in organizational policies and practices to make them supportive of

empowerment-based practice; and (c) participating in and affecting change in their

agencies, the larger helping system and community. The results of this research add to

existing qualitative research findings that reported personal and professional benefits of

FDC to workers; although such studies did not specifically examine such benefits under

an empowerment framework (see Bell & Hollingsworth, 2006; Crane, 2000; Hewitt,

2007; Palmer-House, 2006; Rolison & Watrous, 2003; Salandy, 2000; Smith et al., 2007;

Svihula & Austin, 2004; Watson-Smith, 2003).

In further examining the outcomes of empowerment, the literature proposes

psychological empowerment to be related to behaviors which challenge the status quo.

Empowered individuals are likely to challenge and question rather than blindly follow,

likely to be more innovative and upward influencing (Spreitzer, 1997). It is most

commonly suggested that the antecedents of psychological empowerment include: (a)

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social structural variables that challenge the assumptions of a traditional bureaucratic structure (those that are less hierarchical and provide access to sources of power through strategic information, resources, and managerial support); and (b) an organizational culture which values the human assets of the organization. Therefore, it is suggested that psychological empowerment mediates the relationship between the social structural context and behavioral outcomes (Spreitzer, 1997). Figure 20 (Theoretical Model of Individual Empowerment in Organizations) visually depicts this relationship.

In summarizing the essence of Spreitzer's model, organizational supports alone (resources etc.) will not make persons effective if they have a sense of powerlessness: no purpose in what they do; lack of commitment to their work; lack of belief that what they do will make a difference; a sense that they do not have the necessary skills and knowledge to do what they are being asked to do. Similarly, persons can be highly innovative and competent, but if they work in organizations that are overly bureaucratic, do not provide access to opportunity to use skills and talents, do not provide the necessary resources to do jobs effectively, psychological empowerment is reduced and those behavioral outcomes are minimized or may not occur at all. Thus, psychological and organizational empowerment function together in order to produce the types of outcomes Spreitzer identifies. Similarly, in order to support and create the conditions for multi-level outcomes proposed in the model-of-change framework described herein, the results of this research have several practice implications worthy of discussion.
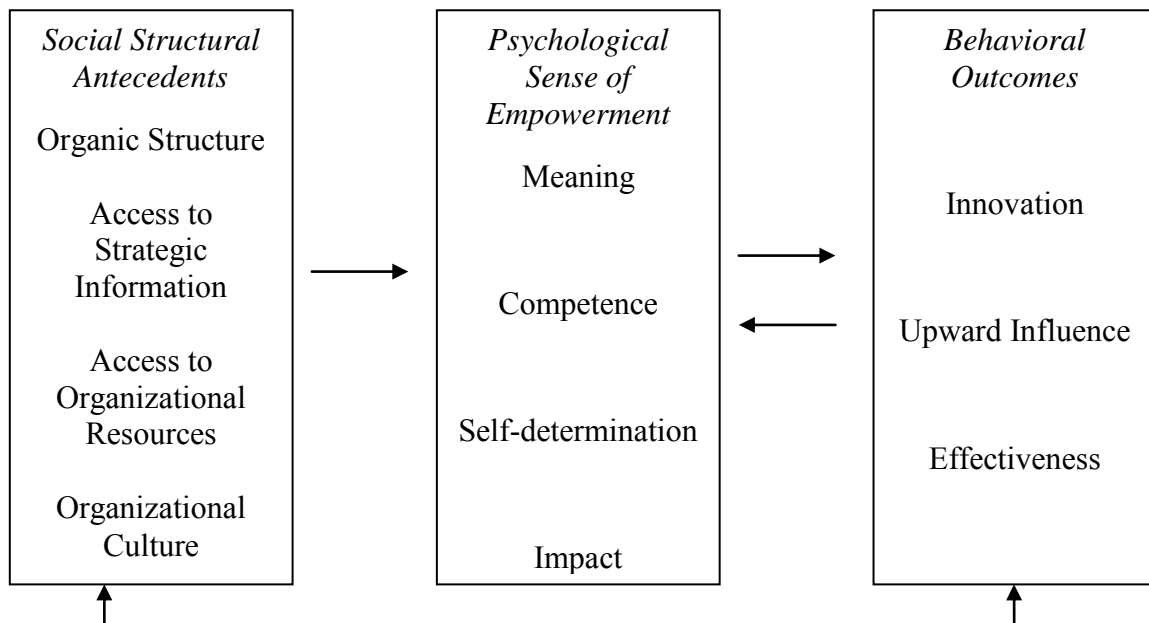
Social Structural Antecedents	Psychological Sense of Empowerment	Behavioral Outcomes
Organic Structure	Meaning	Innovation
Access to Strategic Information	Competence	Upward Influence
Access to Organizational Resources	Self-determination	Effectiveness
Organizational Culture	Impact	

Figure 20. Theoretical model of individual empowerment in organizations.

Implications for Practice

Through the FDC professional development experience, workers experienced an empowerment process that changed how they thought about themselves as well as their environment. This initial change has potential implications for how workers practice with families, interact with colleagues, function in agencies, and provide leadership in their communities. As discussed further in the theoretical framework chapter, all of these represent transformative behavioral outcomes FDC hopes to achieve. In this context, it is important to understand what the FDC experience provides and the implications for practice that will best support the realization of such outcomes.

In Chapter III of this dissertation (Theoretical Framework), the key tenets of FDC as an Empowerment-based Intervention in Human Services were outlined in great depth. In summary, the FDC model includes the following key components:

(a) Interagency, community-based collaborative training;

(b) Critical reflection-action education model based on adult learning principles;

(c) Cross-disciplinary, cohort-based, group training experience that occurs over extended time: (1) 80-hours of classroom-based instruction; (2) learning extension activities; (3) portfolio development and advisement; (4) competence examination; (5) achievement of the credential.

The results of this study are based on the FDC program in the state of Pennsylvania. One of the most significant practice implications from this study is the need to understand and maintain *fidelity* to the FDC model. Specifically pertaining to the outcomes of empowerment for workers, results of this study provide practice implications for the FDC model in the following areas: (a) critical reflection-action education model; (b) training experience that occurs over time; and (c) the portfolio advisement process.

Four types of adult learning are promoted in the FDC training experience: (a) instrumental learning ("how to") learning designed to use a variety of teaching techniques and activities that address different learning styles; (b) experiential learning ("try to") learning designed to allow workers to practice skills in a safe and supportive setting; (c) self directed learning ("choose to") learning through learning extension activities and portfolio development activities which allow workers to direct their own learning according to self-identified personal and professional development needs; and (d) transformative learning ("to make meaning of") learning designed to assist workers in making changes in their perception and interpretation of life experiences and envision and carry out news ways to create desired change (Palmer-House & Forest, 2003, p. 38-39).

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Through the classroom learning experience as well as portfolio development process (which occurs outside of the classroom), participants engage FDC values and concepts on many levels. As an FDC instructor, I often say in the classroom, "Empowerment isn't something you „do' to someone else. You don't empower another person, but rather create conditions through which another person can realize his or her own power." From my own experience as an FDC instructor and portfolio advisor, "conditions" are being created by participation in the FDC program through which workers can realize their own power; however, this can only happen over an extended period of time. Thus, while it may be tempting to devise methods by which participants can complete FDC coursework in as little time as possible, it is critical to remember that theoretically and conceptually empowerment is both a *process* and an *outcome*. The FDC professional development experience facilitates an empowerment process for workers, with the goal of supporting and creating conditions for empowerment outcomes on many levels. As such, the FDC professional development model supports a learning process that typically occurs over a six to twelve month period. I believe the results of this study support the merits of this timeframe.

The cornerstone of the educational model used in FDC training combines key adult learning principles with a participatory, partnership-based learning environment that consistently encourages critical reflection and action. FDC instructors and portfolio advisers are considered to be partners in the learning process with workers, having a primary role of helping workers explore and grow in knowledge and experience of family development (Palmer-House & Forest, 2003). Information and experiences of workers are held in equal value with those of instructors and portfolio advisers, and are

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intentionally drawn out in the instructional process. Instructors and portfolio advisers are challenged to model the steps of family development in their relationships with workers, further emphasizing their role as partners and facilitators of learning versus that of being a "vessel" of knowledge or "the expert."

FDC instructors and portfolio advisors play vital roles in the FDC professional development experience. The selection and training of persons who fulfill those roles is of critical importance. Beyond the initial training built into the programmatic model for persons who wish to serve in those roles, from a programmatic standpoint, ongoing training and professional development opportunities are critical ongoing quality assurance measures.

Portfolio advisers are considered to be partners in the learning process with workers, having a primary role of helping workers explore and grow in knowledge and experience of family development. As a general rule, a FDC worker is matched with a portfolio advisor outside of his or her agency, and at a minimum, is matched with an advisor who is not his or her supervisor. This is a unique aspect of FDC which at times presents great coordinating challenges. However, there are several benefits in matching workers with portfolio advisors in this way. First, as an interagency, community-based collaborative training program, intentional cross-fertilization occurs through this process. Second, a supervisor-supervisee relationship often has power tenets associated with it that inherently change the nature of advisee-advisor relationship as conceived in the critical-reflection educational model. Third, at times workers experience a conflict between what is learned in FDC and what practice looks like in their agencies. Sometimes, a worker's supervisor, director or even co-workers are not supportive of strengths-based,

empowerment-oriented practice methods. At other times, conditions at the agency level make it challenging or even unfavorable for workers to apply and implement the new concepts and strategies they're learning. The FDC model uses the portfolio development and advisement process in order to facilitate the transfer of learning process. The role of the portfolio advisor is to help workers apply FDC principles and strategies to navigate the complexities of their practice with families *as well as* the agency environment.

Results of this study affirmed that perception of psychological empowerment in workers was related to conditions of empowerment in agencies. Results also showed that the degree of change in psychological empowerment in FDC workers was related to how agency conditions were changing (positively or negatively). By pairing a worker with an advisor who is not connected with his or her agency, advisors are uniquely positioned to assist workers in applying FDC principles and concepts, whether their agency is favorable or unfavorable to strengths-based, empowerment-oriented practice. Similarly, and particularly relevant to the findings of this study, if the conditions in a worker's agency are not empowering, the relationship with an advisor may be a powerful vehicle through which a worker is able to realize and implement change. By not being connected to the agency in which a worker is employed, advisors are also able to assist workers in thinking through how they might impact changes at the agency level (working to created empowered conditions). This is a good example of how FDC positions the worker as the initial *focus* of change as well as the *vehicle* for creating change in order to meet the transformative outcomes the program is designed to achieve.

Results of this study demonstrate the interconnected relationship between psychological empowerment and conditions of empowerment in the agency environment.

In order to best support change in workers as well as other outcomes of empowerment envisioned in the model-of-change framework proposed herein, a final practice implication is the need to intentionally support change from the "top down." One way to consider doing this is to implement the *Empowerment Skills for Leaders* (Forest & Palmer-House, 2004) in tandem with the Family Development Credential component. Originally created in 2002, the *Empowerment Skills for Leaders* (Forest, 2004) is based on core concepts and competencies taught in FDC. The goal of the curriculum is to help supervisors and agency leaders learn and use the principles and practices of strengths-based, empowerment-oriented leadership. The objectives of the curricula are as follows (Forest & Palmer-House, 2004, p. 6):

(a) Learn the core concepts and competencies used by family workers trained in the Family Development Credential Training Program;

(b) Identify their leadership styles and vision for transforming their organization through the principles of empowerment-based leadership;

(c) Learn techniques to reduce stress and increase feelings of self-empowerment in their daily activities;

(d) Practice empowerment-based communication techniques to build mutually respectful relationships with families, staff, co-leaders, and others;

(e) Practice skills in strengths-based assessment that balance empowerment-based support with accountability for outcomes;

(f) Participate in community-based professional development series focused on the principles of empowerment-based leadership and family development.

Empowerment-based Model-of-Change Framework Examined in this Research

Consistent with the tenets of empowerment theory, this research proposed a model-of-change framework for an empowerment-based human service professional development program known as the Family Development Credential Program (FDC). This research explored the initial component of the model-of-change framework for FDC: through participation in the FDC program, workers' sense of psychological empowerment would increase, facilitating change in how workers thought about themselves, as well as how they thought about and related to their environment. Findings of the study strongly support the viability of the initial tenets of the model. In analyzing the educational components and process used in FDC model, it is believed that FDC increased workers' sense of psychological empowerment through developing and/or affirming the following:

- A sense of personal and professional mission;

- Professional networks, alliances and support systems;

- Self-care practices;

- Sense of efficacy and professional competence in using strengths-based, empowerment-oriented skills and practice methods;

- Enhanced critical awareness relevant to issues of power in multiple contexts.

These elements are highly consistent with dimensions of psychological empowerment proposed for human service workers in the literature and were affirmed through the results of this study.

The model further proposes that manifestation of behaviors or actions by workers as a result of increased psychological empowerment may be realized on four levels: (a) behaviors or actions reflecting personal level changes; (b) behaviors or actions reflecting change in practice with clients; (c) behaviors or actions aimed at impacting changes in their agency; and (d) behaviors or actions aimed at impacting change beyond the agency (community and system). The manifestation of such behaviors or actions is believed to not only be a function of psychological empowerment, but also a function of structural conditions of empowerment the worker experiences in his or her agency. Future research recommendations will be made pertaining to other aspects of the model-of-change framework.

Quality of Research: Internal and External Validity of Findings

As in any research design, certain limitations and weaknesses exist. As the principal researcher, it is critical that the quality of the research be considered, focusing on the external and internal validity of the findings. External validity refers to the appropriateness of extending or generalizing the findings of this research to groups beyond those involved in this study. There are several factors to consider in this vein. First, due to unique aspects of the Program researched, the type of sampling strategy employed presents certain limitations in generalizing findings beyond the context of the study at hand. Because FDC is a voluntary, community-based, multi-disciplinary human services credentialing program, randomly assigning participants to treatment or control groups was not possible. As the researcher I did not have control over who participated in the program or where and when FDC classes were initiated during the data collection period. The available sample frame for this study consisted of FDC participants in a large

urban county in the western region of Pennsylvania as well as smaller rural counties in the same region. From this population, all participants in the FDC program were included in the sample. Participants for the comparison group were drawn from several human service organizations in other geographic regions of the state, using a non-probability, convenience sampling method. Both urban and rural areas were targeted.

It is important to acknowledge that those who chose to participate in the FDC program may have been different than those who did not, therefore making threats of selection a potential limitation. It is possible that persons who participated in FDC had more favorable dispositions toward the tenets and methods used in empowerment-based educational efforts than the general population of human service workers. As in any study in which the population sample is not randomly selected, there is a chance that the subjects in the study may not be representative of the larger population. Caution must be used in generalizing findings from this research to groups beyond those involved in this study because of this.

Additionally, by conducting the study in one regional location, it must be acknowledged that the unique features and characteristics of human service work and the structure of the systems in which that work occurs may be very different than other areas.

Finally, while all FDC programs nationally use the same training curriculum, decisions about how the program is implemented (e.g. use of cross-disciplinary training model; training timeframes etc.) are left to the discretion of each program. Thus, Pennsylvania's faithful use of the training model designed by Cornell must be taken into consideration when extending findings beyond Pennsylvania's FDC program. For all of

these reasons, replication of findings in future studies will be a critical step in strengthening the degree to which findings can be generalized.

Internal validity refers to the evidence or proof that a particular program, in this case FDC, caused change in a dependent variable. There are two threats to internal validity that should be acknowledged in light of the findings of this study.

First, design contamination is a potential threat to internal validity in this study. Design contamination occurs when participants know that they are in a study and act differently because of it. Participants may have sensed what responses on the instruments were desired and reported those responses instead of what actually occurred or was believed.

Second, the FDC training and credentialing process occurred over a seven month period. Because of the length of time required to complete the program, the threat of maturation must be considered. Maturation refers to changes that take place in people being studied that are natural, or in essence, would have occurred regardless of the program. While use of a comparison group helps mitigate this limitation, maturation could not be statistically controlled for.

Recommendations for Future Research

As a body of research, FDC investigative efforts have been highly varied in scope, focus, theory, and methodology. The major focus of this research was to demonstrate how empowerment constructs can be used to measure program effects, further contributing to the research base of what is known about FDC. Results of this study affirm that empowerment theory is a strong foundation upon which outcomes of the FDC program can be understood and measured. Recommendations for future research are

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related to how such efforts might be further expanded in order to measure multi-level programmatic outcomes as proposed in the model-of-change framework through this study.

This research empirically measured perceptions of psychological empowerment in front-line human service workers. The aim was to more clearly understand how psychological empowerment was related to both environmental conditions in the workplace as well as individual level characteristics of workers. Second, this research evaluated the degree to which participation in the FDC program affected change in perception of psychological empowerment, taking into account individual level characteristics of workers and environmental conditions in the agency. While the measurement instruments used were strong overall measures of psychological empowerment and structural empowerment, demonstrating strong internal reliability as well as overall construct validity, the subscales of these measures could not be analyzed separately, which will now be discussed in terms of recommendations for future research efforts.

In the data analysis process, in examining the factor loadings of the Social Work Empowerment scale, it was discovered that there was only one factor in the scale rather than five as suggested by Frans (1993). As an overall scale, all 34 items loaded strongly together theoretically, suggesting a sound measure of psychological empowerment. However, factor loadings did not support the use of the subscales separately as dependent variables. In reviewing previous research that employed the Social Work Empowerment Scale in whole or part, no other studies reported using factor analysis to confirm the existence of the discreet subscales other than when the scale was originally created (see

Frans, 1993). As originally constructed, the subscales of the Social Work Empowerment scale were designed to tap specific dimensions of empowerment for purposes of potentially being used to assess the domains or outcomes of certain organization or personal interventions (Frans, 1993, p. 325). In future FDC research, analysis at this level would be of benefit, because it would permit a more discreet focus on particular elements of empowerment believed to be fostered through FDC. Additionally, exploration or development of alternative measures of psychological empowerment may be valuable, focusing on specific dimensions of empowerment to be further understood, particularly in the specific context of interventions designed to impact empowerment.

Similarly, in examining the factor loadings of the Conditions for Work Effectiveness Questionnaire II (CWEQ II) it was also discovered that as an overall measure of structural empowerment the items loaded strongly together; however factor loadings did not support the use of the subscales separately as independent variables. Additional analysis of the CWEQ-II provided strong evidence of construct validity for the overall measure. In future FDC studies however, the ability to analyze discreet dimensions of organizational aspects of empowerment in relation to key dimensions of psychological empowerment may be desirable. In reviewing the literature in the field of organizational sciences, the scope and depth of scales aimed at capturing specific dimensions of organizational empowerment is high. Again, of critical importance is to focus on measures that capture specific dimensions of structural empowerment to be understood, in the context of interventions designed to impact perception of empowerment.

Positive levels of change in psychological empowerment were experienced by the FDC group at all levels of change in structural empowerment, both positive and negative. Future research that examines whether gains in psychological empowerment hold over time would be highly valuable. It would be highly valuable to understand how credentialed workers connect what they gained from their FDC experience to their ability to affect or create change on multiple levels, including: in their own lives, the lives of the families they work with, in their agencies, as well as their communities.

The findings of this research naturally suggest additional research that employs mixed methods in order to gain further depth of understanding in specific areas. For example, in measuring levels of psychological and structural empowerment, future research might include interviews with persons with different combinations of empowerment levels (e.g. high levels of psychological empowerment and high levels of structural empowerment; high levels of psychological empowerment but lower levels of structural empowerment). The aim would be to explore differences in how credentialed workers have been able to implement FDC principles and practices based on different levels of psychological and structural conditions of empowerment. Towards this end, such research would also allow researchers to explore other related questions, such as, "Do highly empowered workers approach their work with families differently? If so, how, and are the outcomes different?"

Finally, the broader literature outside of human services has sought to establish a link between psychological empowerment, structural empowerment, burnout, and turnover rates. In the field of nursing, research predicts that perception of structural empowerment increases perception of psychological empowerment, which in turn

decreases perceptions of burnout over time (Laschinger et al., 2003). The literature

suggests that the effects of structural empowerment on burnout are indirect, with the

relationship between structural empowerment and burnout being mediated by

psychological empowerment. Discovering the "path" of relationship between these

concepts is equally relevant and crucial in the field of human services. Crane (2000)

developed a logic model that proposed short-term, intermediate, and long-term impacts of

FDC for workers, families, agencies and communities as the model is implemented.

Higher staff morale and lower levels of turnover were proposed as positive short-term

outcomes, which are related conceptually to burnout. Future studies designed to measure

the positive impact of FDC on burnout rates of human service workers, using

empowerment constructs to ground the research is an additional recommendation.

Concluding Summary

Using a quasi-experimental control group pretest posttest design, this research

sought to understand how psychological empowerment is related to environmental

conditions in human service agencies as well as individual-level characteristics of

workers. Results showed that higher levels of psychological empowerment in human

service workers to be associated with: 1) more favorable conditions of empowerment in

agencies (structural empowerment); and 2) higher levels of education. Second, this

research evaluated the degree to which participation in a program called Family

Development Credentialing (FDC) affected change in perception of psychological

empowerment over time. Key findings showed that for persons who participated in the

FDC program, change in psychological empowerment was higher at *all* levels of change

in structural empowerment when compared to persons in the Non-FDC group, controlling

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for all other variables. For the FDC group, when negative change in perception of structural empowerment occurred (agency conditions declined), *positive* change in perception of psychological empowerment still occurred, controlling for all other variables. This suggested FDC acted as a buffer, or counteracted the negative effects of changing conditions in agencies for workers. Initial tenets of a model-of-change framework using empowerment constructs proposed for the FDC program were strongly supported. Promising implications for use of the model to understand multi-level programmatic outcomes for workers, families, agencies and communities were presented, including recommendations for future research.

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Appendix A

Letter of Support from Pennsylvania FDC Program Coordinator to Researcher

November 19, 2008

Nicole M. Hewitt, Doctoral Candidate
Indiana University of Pennsylvania (IUP)
Administration and Leadership Studies
73 Tyler Drive, Chambersburg, PA 17201

Dear Ms. Hewitt:

This is acknowledgement of our support of your research study aimed at understanding how participants' personal and professional perception of empowerment changes as a result of participation in a Family Development Credential (FDC) program. It is my understanding that such research is being conducted for the purpose of completing your doctoral dissertation at Indiana University of Pennsylvania. We are pleased to support your study, which is projected to involve front-line human service workers who begin the FDC program between January and March 2009. It is my understanding that these workers will be invited to participate in the study, which will consist of a self-administered, confidential questionnaire prior to beginning the program (pre-program survey), as well as after they have taken completed the program (post-program survey). Participation by any person is completely voluntary, and participation or non-participation will not affect any person's status in the FDC program. Further, participants will not be subjected to any psychological, social or work related risks.

Approved By:

Barbara Mooney

November 19, 2008

_____   _____
Barbara Mooney, Ed. D.   Date
Director, PA Family Development Credential Program
Training Director, Community Action Association of Pennsylvania

Appendix B

Letter of Support from Agency Directors to Researcher

January 15, 2010

Nicole M. Hewitt, Doctoral Candidate
Indiana University of Pennsylvania (IUP)
Administration and Leadership Studies
73 Tyler Drive, Chambersburg, PA 17201

Dear Ms. Hewitt:

Please be advised that I am pleased to support your request regarding the participation of staff in a research study aimed at understanding change in employees' opinions and beliefs as they relate to themselves, their profession and their organization. It is my understanding that such research is being conducted for the purpose of completing your doctoral dissertation at Indiana University of Pennsylvania. It is also my understanding that front-line human service workers in my agency will be invited to participate in the study, which will consist of a self-administered, confidential 65-item questionnaire that will be completed twice, with approximately four to six months of time in between pre and post survey data collection. Participation by any person is completely voluntary, and participation or non-participation will not affect any person's status in this agency. Further, participants will not be subjected to any psychological, social or work related risks.

Approved By:

_____   _____
                    .   Date

Appendix C

Letter from FDC Coordinator to FDC Participants Regarding Participation

(insert date)

Dear FDC Participant:

In 2005 the Family Development Credential (FDC) program was introduced in Pennsylvania through a partnership between the Pennsylvania Community Action Association, Cornell University and Indiana of Pennsylvania (IUP). Since 2005, over 250 frontline workers have been credentialed. The FDC program periodically engages in research efforts aimed at evaluating the effectiveness, quality and outcomes of the FDC program. You are being invited to participate in a doctoral research study that proposes to assess the impact of FDC on you personally and professionally. It is believed that the results of this study will provide key information on program impacts, as well as supply critical data to inform program enhancements or changes.

With this letter, you will find a letter from the researcher (Nicole Hewitt) that more fully describes the study as well as invites you to participate. I hope that you will consider voluntarily participating in this study.

Thank you!

Barbara Mooney, Ed. D.
Director, PA Family Development Credential Program
Training Director, Community Action Association of Pennsylvania

Appendix D

Letter to Staff from Agency Directors Regarding Participation

Agency Letterhead

(insert date)

Dear Agency Employee:

Our agency periodically participates in research efforts that solicit employees' opinions about professional and organizational issues in order to identify future training and organizational development needs. You are being invited to participate in a doctoral research study that aims to assess your opinions and beliefs as they relate to yourself, your profession and this agency. With this letter, you will find a letter from the researcher (Nicole Hewitt) that more fully describes the study as well as invites you to participate. Your participation is *completely* voluntary, and participation or non-participation will not affect your status in this agency. I hope you will consider participating in order to aid our efforts at improving organizational effectiveness.

Thank you!

Signature (Agency Director or other appropriate person)

Appendix E

Cover Letter from Researcher to FDC Participants

(insert date)

Greetings:

You are being asked to participate in a research study which examines change in front-line human service workers' opinions and beliefs as they relate to themselves, their profession and their organization. Towards that end, you are being asked to complete the enclosed survey now, as well as another survey in approximately four to six months.

This study is part of the requirements for my doctoral degree in Administration and Leadership Studies at Indiana University of Pennsylvania (IUP). IUP supports the practice of protection of human subjects participating in research. This project has been approved by the Indiana University of Pennsylvania Institutional Review Board for the Protection of Human Subjects (Phone: 724-357-2223). There are no known risks or discomforts associated with this research. Participation is totally voluntary and confidential.

The survey should take no more than 10 minutes of your time. No one beside me will know that you took the survey, which has an identification number for mailing purposes only. This number is used to verify returned surveys, to assist with follow-up on unreturned surveys as well as to determine who should receive the second survey in approximately six months. Your name will never be placed on a survey and your name will not in any way be associated with any of the findings. All data will be combined and analyzed collectively, as I am only interested in understanding trends in opinions about professional and organizational issues, not individuals.

You are one of less than 100 people who are receiving an invitation to participate in this study. Your willingness to complete this survey will be greatly appreciated, and may contribute to a greater understanding of critical issues in human services pertaining to staff and organizations. Please complete and return the survey in the enclosed, stamped envelope by **(insert date).** Your return of a completed survey implies consent.

If you have any questions or require additional information, please feel free to contact either of us as listed below. If you choose not to participate, please return the incomplete survey in the enclosed envelope. We thank you for your time and cooperation and look forward to receiving your completed survey.

Sincerely,

Nicole M. Hewitt, Doctoral Candidate   Dr. Robert Heasley
Indiana University of Pennsylvania (IUP)   Associate Professor
Administration and Leadership Studies   Sociology Department
73 Tyler Drive   102D McElhaney Hall
Chambersburg, PA 17201   Indiana, PA 15705
Phone: 717-267-0544   Phone: 724-349-0691
n.t.hewitt@iup.edu   heasley@iup.edu

Appendix F

Cover Letter from Researcher to Comparison Group Participants

(Date)

To Whom it May Concern:

Because you are an important resource to your organization, you are being asked to participate in a research study which examines change in front-line human service workers' opinions and beliefs as they relate to themselves, their profession and their organization. Towards that end, you are being asked to complete the enclosed survey now, as well as another survey in approximately four to six months.

This study is part of the requirements for my doctoral degree in Administration and Leadership Studies at Indiana University of Pennsylvania (IUP). IUP supports the practice of protection of human subjects participating in research. This project has been approved by the Indiana University of Pennsylvania Institutional Review Board for the Protection of Human Subjects (Phone: 724-357-2223). There are no known risks or discomforts associated with this research. Participation is totally voluntary and confidential.

The survey is simple and confidential, and should take no more than fifteen minutes of your time. The survey has an identification number for mailing purposes only. This number is used to verify returned surveys, to assist with follow-up on unreturned surveys as well as to accurately determine who should receive the second survey in approximately six months. Your name will never be placed on a survey and your name will not in any way be associated with any of the findings. All data will be combined and analyzed collectively, as I am only interested in understanding trends in opinions about professional and organizational issues, not individuals.

Your participation is greatly appreciated, and may contribute to a greater understanding of critical issues in human services pertaining to staff and organizations. Please complete and return the survey in the enclosed, stamped envelope by **(insert date).** Your return of a completed survey implies consent.

If you have any questions or require additional information, please feel free to contact either of us as listed below. If you choose not to participate, please return the incomplete survey in the enclosed envelope. We thank you for your time and cooperation and look forward to receiving your completed survey.

Sincerely,

Nicole M. Hewitt, Doctoral Candidate   Dr. Robert Heasley
Indiana University of Pennsylvania (IUP)   Associate Professor
Administration and Leadership Studies   Sociology Department
73 Tyler Drive   102D McElhaney Hall
Chambersburg, PA 17201   Indiana, PA 15705
Phone: 717-267-0544   Phone: 724-349-0691
n.t.hewitt@iup.edu   heasley@iup.edu

Appendix G

Survey Questionnaire

Thank you for taking the time to complete this survey! In this questionnaire you will be asked about some of your opinions and beliefs as they relate to you, your profession and the organization in which you work. Please provide only one response to each question.

Part I. Please tell us about some of your opinions and beliefs as they relate to you and your profession:

1. I enjoy spending time with other people in my profession
   ☐ Strongly agree   ☐ Agree   ☐ Uncertain   ☐ Disagree   ☐ Strongly Disagree

2. It is helpful to join with others to solve problems.
   ☐ Strongly disagree   ☐ Disagree   ☐ Uncertain   ☐ Agree   ☐ Strongly Agree

3. The workers in my agency all have a common purpose.
   ☐ Strongly agree   ☐ Agree   ☐ Uncertain   ☐ Disagree   ☐ Strongly Disagree

4. I identify strongly with my profession.
   ☐ Strongly disagree   ☐ Disagree   ☐ Uncertain   ☐ Agree   ☐ Strongly Agree

5. I consider myself a joiner.
   ☐ Strongly agree   ☐ Agree   ☐ Uncertain   ☐ Disagree   ☐ Strongly Disagree

6. I enjoy using a team approach.
   ☐ Strongly disagree   ☐ Disagree   ☐ Uncertain   ☐ Agree   ☐ Strongly Agree

7. I have frequent contact with other specialists in my field.
   ☐ Strongly agree   ☐ Agree   ☐ Uncertain   ☐ Disagree   ☐ Strongly Disagree

8. I usually know what response to take to situations that arise at work.
   ☐ Strongly disagree   ☐ Disagree   ☐ Uncertain   ☐ Agree   ☐ Strongly Agree

9. My education prepared me for my job.
   ☐ Strongly agree   ☐ Agree   ☐ Uncertain   ☐ Disagree   ☐ Strongly Disagree

10. I have adequate information resources to solve most professional problems.
   ☐ Strongly disagree   ☐ Disagree   ☐ Uncertain   ☐ Agree   ☐ Strongly Agree

11. I am aware of all the pertinent issues related to my field of practice.
   ☐ Strongly agree   ☐ Agree   ☐ Uncertain   ☐ Disagree   ☐ Strongly Disagree

12. I rarely run into unfamiliar problems at work anymore.
☐ Strongly disagree   ☐ Disagree   ☐ Uncertain   ☐ Agree   ☐ Strongly Agree

13. I often read professional journals.
☐ Strongly agree   ☐ Agree   ☐ Uncertain   ☐ Disagree   ☐ Strongly Disagree

14. I attend frequent conferences and training sessions to improve my skills.
☐ Strongly disagree   ☐ Disagree   ☐ Uncertain   ☐ Agree   ☐ Strongly Agree

15. If I don't have the answer to a question, I always know where to get it.
☐ Strongly agree   ☐ Agree   ☐ Uncertain   ☐ Disagree   ☐ Strongly Disagree

16. I am frequently told that I am very knowledgeable worker.
☐ Strongly disagree   ☐ Disagree   ☐ Uncertain   ☐ Agree   ☐ Strongly Agree

17. I feel that I am important to the people I work with.
☐ Strongly agree   ☐ Agree   ☐ Uncertain   ☐ Disagree   ☐ Strongly Disagree

18. I feel as competent as anyone else I work with.
☐ Strongly disagree   ☐ Disagree   ☐ Uncertain   ☐ Agree   ☐ Strongly Agree

19. I feel pretty sure of myself even when people disagree with me.
☐ Strongly agree   ☐ Agree   ☐ Uncertain   ☐ Disagree   ☐ Strongly Disagree

20. I think I serve a valuable role in my professional capacity.
☐ Strongly disagree   ☐ Disagree   ☐ Uncertain   ☐ Agree   ☐ Strongly Agree

21. I generally make a good impression with others.
☐ Strongly agree   ☐ Agree   ☐ Uncertain   ☐ Disagree   ☐ Strongly Disagree

22. I feel self-assured around my superiors.
☐ Strongly disagree   ☐ Disagree   ☐ Uncertain   ☐ Agree   ☐ Strongly Agree

23. I don't doubt my self-worth even when I think others do.
☐ Strongly agree   ☐ Agree   ☐ Uncertain   ☐ Disagree   ☐ Strongly Disagree

24. I am usually able to think through all the relevant issues.
☐ Strongly disagree   ☐ Disagree   ☐ Uncertain   ☐ Agree   ☐ Strongly Agree

25. I always know who has the power in different situations.
☐ Strongly agree   ☐ Agree   ☐ Uncertain   ☐ Disagree   ☐ Strongly Disagree

26. My place in the world is always very clear to me.
☐ Strongly disagree   ☐ Disagree   ☐ Uncertain   ☐ Agree   ☐ Strongly Agree

27. I usually know exactly where I stand.
☐ Strongly agree   ☐ Agree   ☐ Uncertain   ☐ Disagree   ☐ Strongly Disagree

28. My intuitions and hunches prove to be right most of the time.
☐ Strongly disagree   ☐ Disagree   ☐ Uncertain   ☐ Agree   ☐ Strongly Agree

29. I volunteer to take on extra work in areas of concern or interest to me.
☐ Strongly agree   ☐ Agree   ☐ Uncertain   ☐ Disagree   ☐ Strongly Disagree

30. When I become aware of activities to address a problem of interest, I try to find out how to get involved.
☐ Strongly disagree   ☐ Disagree   ☐ Uncertain   ☐ Agree   ☐ Strongly Agree

31. I am often the one to initiate responses to problems.
☐ Strongly agree   ☐ Agree   ☐ Uncertain   ☐ Disagree   ☐ Strongly Disagree

32. I have organized co-workers or others to offer new programs or interventions.
☐ Strongly disagree   ☐ Disagree   ☐ Uncertain   ☐ Agree   ☐ Strongly Agree

33. One of the things I like in a job is to have multiple involvements in different areas of interest.
☐ Strongly agree   ☐ Agree   ☐ Uncertain   ☐ Disagree   ☐ Strongly Disagree

34. I would rather take action than to trust that things will work out.
☐ Strongly disagree   ☐ Disagree   ☐ Uncertain   ☐ Agree   ☐ Strongly Agree

Part II: Please tell us about some of your opinions and beliefs as they relate to you and your agency/organization:

1. How much of each kind of opportunity to you have in your present job?

	None		Some		A lot
1. Challenging work	1	2	3	4	5
2. The chance to gain new skills and knowledge on the job	1	2	3	4	5
3. Tasks that use all of your skills and knowledge	1	2	3	4	5

2. How much access to information do you have in your present job?

	No Knowledge			Some Knowledge	Know a lot
1. The current state of the agency.	1	2	3	4	5
2. The values of top management.	1	2	3	4	5
3. The goals of top management.	1	2	3	4	5

3. How much access to support do you have in your present job?

	None	Some			A lot
1. Specific information about things you do well.	1	2	3	4	5
2. Specific comments about things you could improve.	1	2	3	4	5
3. Helpful hints or problem solving advice.	1	2	3	4	5

4. How much access to resources do you have in your present job?

	None	Some			A lot
1. Time available to do necessary paperwork.	1	2	3	4	5
2. Time available to accomplish job requirements.	1	2	3	4	5
3. Acquiring temporary help when needed.	1	2	3	4	5

5. In my work setting/job:

	None	Some			A lot
1. The rewards for innovation on the job are	1	2	3	4	5
2. The amount of flexibility in my job is	1	2	3	4	5
3. The amount of visibility of my work	1	2	3	4	5

6. How much opportunity do you have for these activities in your present job?

	None	Some		A lot	
1. Collaborating on client service planning with other professionals in your agency.	1	2	3	4	5
2. Being sought out by peers for help with problems	1	2	3	4	5
3. Being sought out by managers/supervisors for help with problems	1	2	3	4	5
4. Seeking out ideas from professionals other than those that work at your agency/organization (e.g. frontline workers in other agencies, psychologists, physicians; educational specialists etc.).	1	2	3	4	5

7. Overall, my current work environment empowers me to accomplish my work in an effective manner.

	Strongly Disagree				Strongly Agree
	1	2	3	4	5

8. Overall, I consider my workplace to be an empowering environment.

	Strongly Disagree				Strongly Agree
	1	2	3	4	5

Part III: Please tell me some things about yourself:

1. Gender
   a. Female
   b. Male

2. Age
   a. 18-25
   b. 26-39
   c. 40-54
   d. 55-65
   e. Over 65

3. Ethnicity
   a. African American
   b. Asian American
   c. Caucasian
   d. Latino/Latina
   e. Native American
   f. Other

4. Highest level of education you have completed
   a. High school diploma or GED
   b. Associates degree
   c. Bachelors degree
   d. Masters degree or higher

5. Do you have a college degree in a related human service field?
   a. Yes
   b. No

6. How long have you worked in the field of human services?
   a. 5 years or less
   b. 6 to 10 years
   c. 11 to 15 years
   d. 16 years or more

7. What is the general field of practice in which you currently work?
   a. Alcohol/substance abuse
   b. Child welfare/children and youth
   c. Adult education/training/workforce development
   d. family services/family center
   e. Food/nutrition
   f. Healthcare setting
   g. Housing
   h. Pre-school/early childhood education
   i. Primary or secondary education
   j. Public assistance
   k. Domestic violence
   l. MH/MR
   m. Probation/corrections
   n. Other_____

8. What type of work do you perform in your agency/organization?
    a. Direct service provision to clients
    b. Limited direct service provision to clients
    c. No direct service provision to clients

9. What kind of agency do you currently work in?
    a. Nonprofit agency
    b. Government/public agency
    c. Private/for-profit agency

10. What size agency do you currently work in?
    a. 25 persons or less
    b. 26 – 50 persons
    c. 51 -100 persons
    d. 101 persons or more

Thank you very much for taking the time to complete this survey. Your contribution to this study is greatly appreciated. Please return the completed survey in the enclosed, pre-addressed stamped envelope.

Nicole M. Hewitt, MSW
Doctoral Candidate, Indiana University of Pennsylvania
73 Tyler Drive
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