



The Evaluation Consortium
University at Albany



The Addiction Technology Transfer Center Network
Funded by Substance Abuse and Mental Health Services Administration

Massachusetts Direct Service Providers Summary of Findings

Treatment providers face many challenges in their attempts to fill available positions, and there has been much concern that these staffing needs, along with anticipated demographic and social changes, will result in a treatment community unable to adequately care for those it proposes to serve. Among the many compelling issues our treatment agencies face is the perception of pervasive staff shortages, as evidenced by the reduced numbers of clinicians entering the field, difficulty recruiting and retaining qualified staff, and increased credentialing demands.

The Addiction Technology Transfer Center of New England in collaboration with the New England Institute of Addiction Studies and the State of Massachusetts's Department of Public Health, Bureau of Substance Abuse Services, recognized that a definitive analysis of the state of existing treatment providers was crucial to determining the systemic changes needed to address these problems. Toward this end, a comprehensive examination of the substance abuse treatment provider system was undertaken through a regional workforce survey.

The following is a summary of findings, resulting from the survey of direct service providers employed in state-funded substance use disorder treatment agencies, across the State of Massachusetts. The sample was stratified to ensure that agencies across all



geographic regions and with varying numbers of employees were proportionately represented.

During 2002 and 2003, an in-depth paper and pencil survey was administered to a randomly selected sample of agencies. Surveys were mailed to management staff of 28 agencies for distribution to, and independent completion by, direct service providers. Twenty three of these agencies returned a total of 309 completed surveys; for an agency response rate of 82%.

Completed surveys were forwarded to the Evaluation Consor-

tium at Albany, for analysis. Following are the results which provide a description of direct service workforce demographics, self-reported levels of professional competence, and areas of training interest and need.

The information contained within this summary can assist in recruitment and retention efforts and in the design of training initiatives and professional development programs that will strengthen the knowledge and skills of treatment program personnel.

December 2004

Special points of interest:

- Demographics
- Professional Background
- Academic Preparation
- Compensation
- Primary Duties
- Professional Status
- Recruitment and Retention Issues
- Counselor Proficiencies
- Training Interests

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*Massachusetts:
State Specific Findings
Direct Service Providers*

Agencies Returning Surveys
(n=23)
Completed Surveys (n=309)

Ages	
20 - 30	14%
31 - 40	17%
41 - 50	28%
51 - 60	29%
61 - 70	11%
>70	01%

Professional Discipline	
Addictions Counseling	66%
Social Work/Human Services	25%
Psychology	14%
Nursing	12%
Adolescent Treatment	08%

Academic Degree Status	
Doctoral Degree	06%
Master's Degree	47%
Bachelor's Degree	19%
Associate Degree	07%
Some College	13%
High School Diploma	06%

Coursework Completed	
ATOD Specific	58%
Related Field	61%

Certification/Licensure	
Current	29%
Pending	27%

Current Salary	
< \$14,999	11%
\$15,000 - \$24,999	16%
\$25,000 - \$29,999	20%
\$30,000 - \$34,999	20%
\$35,000 - \$39,000	10%
\$40,000 - \$49,000	08%
\$50,000 - \$74,999	03%
>\$75,000	01%

Who are they?

- Over half (69%) of respondents are female and 79% are white. The reported median age of respondents is 41-50.
- Close to one-third (32%) consider themselves to be in recovery from an alcohol and/or other drug addiction.
- Sixty-six percent of the respondents identified addictions counseling as their current profession.

What are their professional backgrounds?

- More than one-half of the respondents (53%) have a master's degree or above. Only 29% of the respondents are currently licensed or certified, 27% report licensure or certification as pending, and nearly one-half of respondents (43%) have never been licensed or certified.
- Direct service providers demonstrate minimal differences between the number of years in the substance abuse treatment field (2 - 5) and in their current position and role (2- 5).
- Thirty-nine percent of direct service providers indicated that their current employment in substance abuse treatment is a second career. The top two reported reasons for entering the substance abuse treatment field are personal interest (60%) and previous experience with addiction or recovery (46%).

How much are they receiving in compensation?

- The median yearly reported compensation of respondents was \$25,000-\$29,000, with 47% receiving less than \$30,000 and 30% in the \$30,000 - \$39,000 range.
- Level of education is positively correlated to salary.
- Thirty-three percent of respondents report full health insurance as compensation. Full sick leave is paid to 59%, partial sick leave to 20%, and another 52% receive some other fully paid leave. Thirty-six percent reported no retirement contributions from their work site.

What are their primary duties?

- Nearly half of the respondents (48%) are employed in outpatient substance abuse treatment facilities, 18% in residential settings or therapeutic community programs, and 3% in inpatient hospitals.
- Respondents report: treating (85%), making referrals (74%), screening (68%), and diagnosing or formally assessing (60%) individuals with substance abuse disorders, in the last 12 months.
- The top three treatment models reported to have major use are: relapse prevention, integrated substance abuse and mental health, and cognitive-behavioral skill development.

What are the key recruitment and retention issues?

- Direct service providers work in agencies of varying sizes; 13% have 5 or less direct service substance abuse treatment staff, 22% have 6-10 direct service staff, 12% have 11-15 direct service staff, and 14% have more than 15 direct service staff.
- More than one-third of the respondents (38%) reported that their agencies have difficulty recruiting staff. The top three reasons reported are: insufficient funding, lack of interest in the position, and insufficient number of qualified applicants.
- Little or no experience in substance abuse treatment (16%), inadequate education and training (12%), and lack of appropriate certification (11%) are the top three reported reasons for applicants failing to meet minimum qualifications.

What factors aid recruitment and retention?

- The five most important work characteristics that enhance job satisfaction and promote recruitment and retention are identified by respondents as: one-to-one interactions with clients (89%), commitment to treatment (60%), interaction with agency/co-workers (54%), opportunities for personal growth (53%), and their role as a change agent (49%).
- Agency changes that would promote retention of direct provider staff include: more frequent salary increases (72%), more/improved on-going training (42%), lessen/provide assistance with paperwork (42%), more individual recognition/appreciation (34%), and promote career growth (28%).

What factors hinder recruitment and retention?

- Over half of respondents (59%) reported that they believe the status of addiction counselors is lower than that of other helping professionals. The top three reasons given for this perception are: greater likelihood for substance abuse professionals to have a personal history of substance abuse (33%), stigmatization due to association with substance abusers (31%), and the perception that substance abuse professionals have less formal education/training (28%).
- Most respondents report low salary/poor benefits (93%), large caseloads (86%), competition from other fields in terms of compensation (86%), the cost of education/training (82%), negative preconceptions regarding addicted clients (82%), and certification/licensure/academic requirements as barriers to entering the substance abuse treatment field.
- Major areas of dissatisfaction, that hinder retention of direct providers once they are in the field, include: salary/benefits (67%), inability to influence agency decisions (31%), and lack of career growth opportunities (28%).

Is there interest in developing leadership abilities?

- Despite self-reported minimal proficiency in clinical supervision (22%) and administrative management skills (28%), over half of respondents expressed interest in receiving training in clinical supervision (57%) and more than a third (36%) in administrative management skills.

Massachusetts: State Specific Findings Direct Service Providers

Agency Setting

Outpatient Substance Abuse Treatment	48%
Residential/Therapeutic Community	18%
Outpatient Community	17%
Inpatient Hospital	03%
Outpatient Hospital	02%

Top 5 Treatment Models

Relapse Prevention	64%
Integrated Substance Abuse & Mental Health	46%
Cognitive Behavioral	42%
Twelve-Step	41%
Psycho-educational	40%

Turnover Rate (past 12 months)

Terminated	23%
Quit	32%
Laid off	12%

Areas of Proficiency

Professional & Ethical Responsibilities	91%
Interpersonal Communication Skills	90%
Signs & Symptoms of Substance Abuse/Withdrawal	78%
Documentation Skills	75%
Screening & Assessment Skills	71%

Areas of Training Interest

Co-occurring Substance Abuse & Mental Health Problems	79%
Relapse Prevention	77%
Intervention Skills	76%
Individual Counseling Skills	76%
Relationship Between Substance Abuse & Other Medical Problems	71%
Treatment Engagement	71%



What areas have been identified as in need of professional development?

- Direct care providers in Massachusetts perceive themselves as lacking proficiency in several key areas. These include: staff recruitment and retention skills (89% and 88%, respectively), clinical supervision (78%), marriage and family therapy (75%), treating adolescents (68%), and client, family and community education (68%).
- Almost all the respondents report that they are interested in receiving training in: co-occurring substance abuse and mental health problems, relapse prevention, intervention skills, individual counseling skills, relationship between substance abuse and other medical problems, treatment engagement, theoretical models of substance abuse, and group counseling skills.

How would providers prefer to receive professional development?

- Respondents reported that providing direct supervision (79%), in-service training (57%), and paying cost of continuing education (51%) are effective ways to develop skills and enhance abilities.

Electronic copies of the *Addiction Technology Transfer Center of New England Workforce Survey*, and resulting data reports, are available for downloading at the ATTC-NE website: www.attc-ne.org. Technical questions or concerns about the data analysis should be directed to: Dianna L. Newman, PhD, The Evaluation Consortium, University at Albany.

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The Addiction Technology Transfer Center Network
Funded by Substance Abuse and Mental Health Services Administration

*Dedicated to your success
– by putting the latest academic
research into the hands of
professionals who work on the
front lines daily.*

The pressure behavioral health care professionals face every day can make keeping abreast of the latest research almost impossible. We are committed to making it easier to infuse evidence-based research throughout the workforce. Our programs are designed to enhance the knowledge, skills and attitudes of the substance abuse treatment workforce; both individually and collec-

Unifying science, education and services to transform lives.

