

A CRITIQUE OF THE RESEARCH DATA BASE RELATIVE TO WORK ADJUSTMENT

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ABSTRACT

In this paper it was argued that the professional activity of vocational evaluation and work adjustment in rehabilitation, having evolved as a multi-disciplinary entity drawing heavily from psychometrics and behavioral psychology, now finds itself in the middle of a paradigm crises. Since general systems theory evolved as a solution to similar paradigm problems in the physical and biological sciences, the perspective was applied to some of the long-standing research problems in the field of work adjustment. It was suggested that a more holistic view of human behavior would eliminate many of the pseudo-issues that presently divide us into "warring factions."

Social and behavioral science research which is potentially relevant to the human services is accumulating at an astronomical rate. Paradoxically, widespread feelings of helplessness, frustration, cynicism, and burnout are becoming more and more characteristic of human service workers (Ursprung, 1986). Practitioners are not getting as much help from research as we might wish and the problem appears to go deeper than just the lack of adequate research utilization practices within the human services. Much of the existing research is based upon world views that no longer fit the terrain. The accumulation of bits of information which make up the research literature do not, in and of themselves, provide a frame of reference for comprehending or using the information.

One reason for this is found in the revolutionary changes that are evolving across many disciplines. A mechanistic, reductionistic, and dualistic frame of reference for scientific thought is giving way to an organic, holistic, evolutionary view. Newton and Caple (1985) observe "a paradigm shift is taking place," and Tiller (1979, pp. xiii-xiv) points out that "Humankind's view of itself, of the universe, and of the synergistic interrelationships of both is in for great changes." In a similar vein, Richard M. McFall (1986), arguing for broadening the traditional behaviorist view characterized science as being basically revolutionary in nature. In his view, the behavioral movement gradually replaced one orthodoxy with another and thus set the stage for the next scientific revolution.

As a relatively new professional group in search of a technology, we have borrowed most heavily from the disciplines of psychometrics and behavioral psychology. The central concern of psychometrics is the study of personality and individual differences while the central concern of behavioral psychology is the development of a technology for managing behavior.

For a long time these two special interest areas in psychology developed independently of each other and from other subdivisions of the sciences and human service professions. The psychometric study of personality, because its methodology was limited to discovering individual differences, lost track of the common observation that people are a lot more alike than different. The behaviorist orientation, through its search for principles that applied to all organisms, lost track of the role of the individual in shaping behavior.

The evolution of scientific thought is now offering us a new paradigm, a new vision of reality in the form of general system theory which integrates all previous dualisms such as mind-body, structure-process, and objective-subjective reality. The practical consequence of this shift is that "the human person must be viewed as an integrative whole involving interdependent

physical, psychological, social and cultural patterns." (Lucas, 1985, p. 170)

This shift can be seen in the evolution of the work adjustment concept toward career development, the recognition of problems with traditional interpretations of job satisfaction, job performance, and stress, and the emergence of more holistic views of client adjustment. Nevertheless, confusion in the field continues to undermine utilization of these concepts, and practice at the service-delivery level is slow in reflecting these changes.

The Shift From Work Adjustment to Career Development

Although the ground for "work adjustment" could potentially be the entire employment-unemployment continuum, historically, concerns about work adjustment have evolved as a reaction to unemployment, and attributions of the cause of unemployment range from completely within the person to completely within the environment. The term "work adjustment" first evolved within rehabilitation to designate a particular intervention whereby structured work activity was used as a therapeutic agent to treat inadequate work habits (Dean, 1972). This limited meaning, however, became eroded as the term began to be used to refer to characteristics of the individual as in the Work Adjustment Rating Form (Bitter & Bolanovich, 1970) or the Minnesota Theory of Work Adjustment (Davis, 1976). When the cause of unemployment is attributed mostly to individual, the terms work adjustment, personal adjustment, vocational adjustment, or occupational adjustment are often used synonymously.

As the disability service delivery system integrates the developmental concerns of habilitation with traditional rehabilitation and transforms the medical model to a developmental, skills-training model, the concept of career development is beginning to be used as an alternative to the concept of work adjustment (Akridge, 1985). Career development is a more positive term which subsumes the human attributes of both employability skills and vocational adjustment problems and is broad enough to encompass the entire continuum of employment-unemployment. The perspective of "career development" combines the issues of socialization and self-actualization over the life span of the individual and is easier to share with the client than are such terms as work adjustment and vocational evaluation. Persons who are struggling with disabling conditions don't frequently seek us out to get evaluated and adjusted. They want jobs (or career development).

Problems with Interpretations of Research on Job Satisfaction, Job Performance and Stress

Though job satisfaction and job performance may be defined and measured in many different ways, the relationship between these two variables has been one of the most widely researched topics in the work adjustment literature. Iaffaldano & Muchensky (1985) reviewed this literature and published the results of a meta-analysis on a selected sample of 74 studies which concluded that job satisfaction and job performance are only slightly related and that interventions designed to increase one should not necessarily

be expected to increase the other.

On the other hand a growing body of evidence suggests that occupational stress is causally related to physical illness, psychological impairment, and lowered job performance and satisfaction (Cooper & Marshall, 1976; French & Caplan, 1972; Margolis, Kroes, & Quinn, 1974). A more holistic perspective, guided by the principles of general systems theory, would lead one away from the pseudo-question of causality between job satisfaction and job performance to the task of making explicit (understanding) the mutually influencing dimensions and levels of the self-in-situation system we call worker. Job performance, job satisfaction, and job dissatisfaction (stress) are all important subsystems of a larger whole, but do not necessarily have a strong causal relationship with each other.

Stout (1984) incorporated this distinction in his study of supervisor structuring and consideration on rehabilitation workers' job satisfaction, stress, and health problems. Higher job satisfaction was found among workers whose supervisors were high on consideration regardless of their level of structure. Lower stress was reported by workers whose supervisors were high on both structure and consideration and more health problems were reported by workers whose supervisors exhibited high-structure and low-consideration. Unfortunately the study did not include a measure of job performance. Consistent with Schuler (1982), burnout, as reflected by health problems, was conceptualized as the result of prolonged, intense, unresolved stress, while the negative effects of stress may be buffered by various sources of job satisfaction such as social support or commitment to the organization.

The study of stress as a multi-dimensional phenomenon has added much to our understanding of work adjustment. Stress has been studied from the standpoint of person variables such as self-efficacy (Bandura, 1982), hardiness (Kabasa, Maddi, & Kahn, 1982), and coping skills (Cohen & Lazarus, 1979), environmental variables such as social support (Cohen & Wills, 1985), and various person-environment fit variables (Chemers, Hays, Rhodewalt, & Wysocki, 1985; French, Doehrmann, Davis-Sacks, & Vinokur, 1983). This diversity of perspectives also highlighted the need to question traditional research paradigms.

For instance, Baker's (1985) review led him to claim that "From a public health perspective, the key issue in the study of stress at work is whether the etiologic dynamics of stress are to be found within the workplace or within the worker (p. 367). In contrast to the person-environment fit model which reflects a clinical perspective of stress as a psycho-physiological phenomenon that arises from an individual's perception of an imbalance between environmental demands and response capabilities, Baker favored the Job Demand-Control Model proposed by Karasek (1979). This model characterizes types of jobs and individual workplaces as high or low in job demands and in decision latitude. Both high demand and low decision latitude are related to occupational stress, and their interaction is particularly predictive of high strain. This brings us back to the person-situation debate and the search for a paradigm that transcends the polarity.

Person-Situation Debate

Epstein and O'Brien (1985) provided a comprehensive review of the literature relevant to the question, "To what extent is behavior situationally specific, and to what extent are there broad generalities in behavior?" The field of personality, from its beginning, involved a division between those such as Allport (1931, 37) who viewed behavior as centrally organized and purposive, and other such as Thorndike (1906) who viewed behavior as mechanistic and composed of discrete habit elements. Allport's interest in an idiographic approach which emphasized the unique organization of variables within the individuals led him to abandon the effort to establish broad general traits to those personalists who were committed to the normative methods of psychometrics.

Mischel (1968), carrying the banner for the behaviorist position, came out with an influential book that marshalled the various arguments and evidence against a trait position. One major source of evidence consisted of low correlations between objective (non-self-report) measures of the same trait. A second source of evidence consisted of findings that cast doubt on the validity of self-report measures and clinical assessment procedures. The failure to adequately take into account method variance (Campbell & Fiske, 1959), social desirability and response sets (Edwards, 1957), and construct validity (Cronbach & Meehl, 1955) in devising and validating measures of traits was emphasized. Additionally, a series of studies by Endler, Hunt, and their associates (e.g., Endler & Hunt, 1966, 1968, 1969; Endler, Hunt, & Rosenstein, 1962) demonstrated that the amount of variance accounted for by situations and person-situation interactions was greater than that accounted for by persons.

The Epstein and O'Brien (1985) review demonstrates, however, that (a) the presumed .30 barrier between self-report and objective measures of a trait can readily be breached, (b) behavior that is situationally specific and temporarily unreliable when based on single observations can often be demonstrated to be highly general and stable when appropriately aggregated, and (c) there are stable, cross-situationally broad response dispositions, or traits.

The major principle involved in the person-situation debate, at least from a measurement standpoint, is that behavior is often highly situationally specific at the individual-item level but general at the aggregate level. This principle is especially relevant to a troublesome issue in rehabilitation research concerning dimensions of client change.

Dimensions of Client Change

For a sample of spinal cord-injured rehabilitation clients, Cook (1983) failed to find a statistical relationship between their self-report scores on the Mini-Mult (Kincannon, 1968) and vocational adjustment as defined by closure status and income. The lack of correlation between the trait measures and several single behavioral items was interpreted as supporting the theoretical position of no relationship between personal adjustment and led to questioning the efficacy of using work therapy to enhance psychological well-being. These results of their interpretation were

consistent with previous studies by Bolton (1974, 1978) and Growick (1979).

It should be noted, however, that the second study by Bolton (1978) did not use a single behavioral item to define vocational adjustment and his conclusion was less unequivocal. In the later study the residual change scores from the seven factors of the Human Service Scale (HSS) (Kravetz, 1973) and the five factors of the Client Outcome Measure (COM) (Westerhide & Lenhart, 1973), administered at intake and at closure, were factor analyzed. Since both instruments were constructed using a factor analytic methodology, it should be no surprise that change scores derived from the 12 scales would form factors based on whatever content themes existed in the data.

In considering what this factor analysis implied about the independence of vocational and personal adjustment, it should be remembered that an N of 31 does not provide an adequate data base to compute a reliable factor analysis. Also, the first factor to emerge, and the one considered most independent of the remaining factors, consisted of the HSS economic self-esteem and vocational self-actuation scales and the COM economic/vocational status scale all of which were defined by items of economic information available in the client's service record such as source of support, weekly salary, and work status. Thus the method of measurement was essentially different from the other factors and therefore introduced an additional source of variation. The second factor obtained was a more trait-like factor which could be called personal adjustment because the three HSS sub-scores and one COM scale loading on this factor contained mostly psychopathology items. The defining characteristic of the third factor was social adjustment. It consisted of the HSS family and social needs scales and the COM Family Relationships factor. The HSS social score, being primarily an activities measure, had a negative loading (-.15) on the fourth obtained factor which was of equal strength to its positive loading on the social factor. This factor also included the physical functioning scale and the work tolerance scale from the COM. The fourth and final factor might best be interpreted as activities of daily living. The investigator reported that the highest interfactor correlation (.26) occurred between factors I and II. In other words, economic/vocational status was correlated more with personal maladjustment than with social adjustment or activities of daily living and personal maladjustment was more highly correlated with economic/vocational status than with social adjustment or activities of daily living. Thus, a moderate relationship between an indicator of personal adjustment and indicator of vocational adjustment was found even when the methods of measurement was quite different. The fact that residual change scores from the HSS Emotional Needs sub-scores (which has the greatest similarity to factor II referred to above as personal maladjustment) showed a strong correlation with all five of the Client Outcome Measure residual change scores (.40-.48) provides additional evidence for the lack of independence between changes in personal adjustment and changes in vocational adjustment during rehabilitation.

On the one hand, Bolton presented the 1978

paper as a replication of the 1974 study in which he concluded that "vocational success and psychological adjustment are independent dimensions of client change during the rehabilitation process" (p. 103) and on the other hand he concluded the 1978 study with the statement that: "The broadest conclusion that is supportable at the present time is that psychosocial adjustment and vocational adjustment are distinguishable yet related dimensions of client improvement during the rehabilitation-counseling process." (p. 13) Growick (1979) and Cook (1983) cited both studies as supporting a lack of relationship between changes in personal adjustment and vocational adjustment during the rehabilitation process. When all of the available studies are considered, it appears to this reviewer that the independence observed between the two dimensions was an artifact of the measurement methodology used and the kinds of statistical manipulations employed.

A Holistic Model of Self-in-Situation Adjustment

Since successful rehabilitation as practiced in democratic cultures depends heavily upon the voluntary cooperation of the individual receiving services, we must be able to translate the process and products of vocational evaluation into the process of client self-assessment. "Self-assessment is the process of summarizing one's satisfactions and dissatisfactions with self and with the personally relevant aspects of one's situation," (Akridge, 1981, p. 37). Most of this paper has focused on the field's inability to deal with the self-situation distinction in an adequate and non-dualistic manner. Of equal importance, however, has been the field's lack of attention to sources of self-satisfaction and its over-emphasis on psychopathology.

A review of the self-assessment literature reveals a proliferation of instruments relating to various aspects of self-dissatisfaction (e.g., MMPI type measures, anxiety scales, most self-concept measures, and other indicators of psychopathology such as Factors II and III of the Human Service Scale). There is however, a paucity of instruments which tap personal effectiveness skills and other personal attributes that constitute the source of self-satisfaction or positive affect.

While the measurement of negative affect has been a major part of the psychological adjustment literature, the field is just now becoming aware that positive affect is not just the absence of negative affect. A meta-analysis by Watson and Tillegan (1985) demonstrated that a basic two-dimensional structure of positive affect and negative affective and their respective sub-factors represent the major dimensions of emotional experience. As such, positive affect and negative affect have different correlates across an array of personality dimensions.

After discovering that even the relatively more comprehensive personal adjustment measures such as the Human Services Scale (which was supposedly based on Maslow's positive model of human nature) did not include a measure of adjustment skills, I began developing such a measure. Sample items from this measure, which was initially referred to as the Psychosocial Development Matrix (Akridge, 1981), are included in

Table 1, along with selected items from the Human Service Scale to represent the four dimensions of self-in-situation assessment. Previous attempts to describe the dimensions of personal adjustment, work adjustment, or the larger system of which these two elements are components, are incomplete and distorted when the factor of adjustment skills is left out.

Summary

Historically, the development of the social and behavior sciences lagged behind the development of the physical and biological sciences and therefore copied their models. Scientific activity, like every other known human activity is shaped by the perceptions, conceptions, feelings, intentions, and actions of the persons involved. The world view, or frame of reference of the investigator determines the questions asked and the methods used to answer them.

The development of quantum theory led to a radical paradigm shift in the physical and biological sciences. Unfortunately, the social and behavioral sciences are still basing their models on a science that no longer is. The case was made that many of the current difficulties involved in trying to integrate research findings in the field of human services are related to the need for a new paradigm for understanding human experience.

Table I PDM and HSS Items Representative of the Major Self-Assessment Dimensions

- A. Self-Satisfaction (PDM Factors I, II, & III)
- 67. My ability to control my own feelings.
 - 56. My ability to relax my body whenever I wish to.
 - 48. My ability to show caring to the people who are important to me.
 - 88. My ability to ask for what I want instead of always waiting for permission.
 - 113. My ability to objectively specify the degree to which I accomplish previously set goals.
 - 33. My ability to know what I want to see happen in any situation.
- B. Self-Dissatisfaction (HSS Factors I & II)
- 5. How often are you bothered by rapid heartbeat?
 - 52. How often do you worry about your health?
 - 16. How often do you worry about the future?
 - 34. How often have you considered a doctor, psychiatrist, psychologist, or anyone else about a nervous problem?
- C. Situation Satisfaction (HSS Factor V & VII)
- 15. How often do you get together with friends (going out together or visiting each other's home)?
 - 54. Number of activities taken part in with other people in your community?
 - 64. How often does your present work let you make decisions on your own?
 - 76. How often are you told in your present work that you have done a good job?
- D. Situation Dissatisfaction (HSS Factors III, IV, & VI)
- 48. How often do you worry about having enough money?
 - 56. How many weeks during the last six months

- were you unemployed?
17. How often has your family failed to help you when you needed help?
 27. How often does your family accept you as you are?

References

- Akridge, R. L. (1981). Psychosocial assessment in rehabilitation. *Journal of Applied Rehabilitation*, 12, 36-39.
- Akridge, R. L. (1985). Rehabilitation, career development, and self-awareness. *Journal of Rehabilitation*, 51, 24-30.
- Allport, G. W. (1931). What is a trait of personality? *Journal of Abnormal and Social Psychology*, 25, 368-372.
- Allport, G. W. (1937). *Personality: A psychological interpretation*. New York: Holt.
- Bandura, A. (1982). Self-efficacy mechanism in human agency. *American Psychologist*, 37, 122-147.
- Bitter, J. A., & Bolanovich, D. J. (1970). WARF: A scale for measuring job readiness behaviors. *American Journal of Mental Deficiency*, 74, 616-621.
- Bolton, B. (1974). A factor analysis of personal adjustment and vocational measures of client change. *Rehabilitation Counseling Bulletin*, 18, 99-104.
- Bolton, B. (1978). Dimension of client change: A replication. *Rehabilitation Counseling Bulletin*, 22, 8-15.
- Campbell, D. T., & Fiske, D. W. (1959). Convergent and discriminant validation by the multi-trait-multimethod matrix. *Psychological Bulletin*, 56, 81-105.
- Chemers, M. M., Hays, R. B., Rhodewalt, F., & Wysocki, J. (1985). A person-environment analysis of job stress: A contingency model explanation. *Journal of Personality and Social Psychology*, 49(1), 628-635.
- Cohen, F., & Lazarus, R. S. (1979). Coping with the stress of illness. In G. C. Stone, F. Cohen, N. E. Adlet, and associates (Eds.), *Health psychology: A handbook* (pp. 217-254). Washington: Jossey-Base.
- Cohen, S., & Wills, T. A. (1985). Stress, social support, and the buffering hypothesis. *Psychological Bulletin*, 98(2), 310-357.
- Cook, D. W. (1983). Disability, psychopathology, and vocational adjustment. *Rehabilitation Psychology*, 28(3), 177-184.
- Cooper, C. L., & Marshall, J. (1976). Occupational sources of stress: A review of the literature relating to coronary heart disease and mental ill health. *Journal of Occupational Psychology*, 49, 11-28.
- Cronbach, L. J., & Meehl, P. E. (1955). Construct validity in psychological tests. *Psychological Bulletin*, 52, 281-302.
- Davis, R. V. (1976). The Minnesota theory of work adjustment. In B. Bolton (Ed.), *Handbook of Measurement and Evaluation in Rehabilitation*. University Park Press, Baltimore.
- Dean, R. J. N. (1972). *New life for millions: Rehabilitation for American disabled*. Hastings House: New York.
- Edwards, A. L. (1957). *The social desirability variable in personality assessment and research*. New York: Dryden Press.
- Endler, N. S., & Hunt, J. M. (1966). Sources of behavioral variance as measured by the S-R inventory of anxiousness. *Psychological Bulletin*, 65, 336-346.
- Endler, N. S., & Hunt, J. M. (1968). S-R inventories of anxiousness. *Journal of Personality*, 37, 1-24.
- Endler, N. S., Hunt, J. M., & Rosenstein, A. J. (1962). An S-R inventory of anxiousness. *Psychological Monographs*, 76 (17, Whole No. 536).
- Epstein, S., & O'Brien, E. J. (1985). The person-situation debate in historical and current perspective. *Psychological Bulletin*, 98(3), 513-537.
- French, J. R. P., & Caplan, R. D. (1972). Occupational stress and individual strain. In A. J. Marrow (Ed.), *The failure of success* (pp. 30-66). New York: Amacon.
- French, J. R. P., Doehman, S. R., Davis-Sacks, M. L., & Vinokur, A. (1983). *Career change in midlife: Stress, social support, and adjustment*. Ann Arbor, Michigan: The University of Michigan Institute for Social Research.
- Growick, B. W. (1979). Another look at the relationship between vocational and non-vocational client change. *Rehabilitation Counseling Bulletin*, 23, 136-139.
- Iaffaldano, M. T., & Munchinsky, P. M. (1985). Job satisfaction and job performance: A meta-analysis. *Psychological Bulletin*, 97(2), 251-273.
- Karasek, R. A. (1979). Job demands, job decision latitude, and mental strain: Implications for job redesign. *Administration Science Quarterly*, 24, 285-308.
- Kincannon, J. C. (1968). Prediction of the standard MMPI scale scores from 71 items: The mini-mult. *Journal of Consulting and Clinical Psychology*, 32, 319-325.
- Kobasa, S. C., Maddi, S. R., & Kahn, S. (1982). Hardiness and health: A prospective study. *Journal of Personality and Social Psychology*, 42, 168-172.
- Kravetz, S. (1973). *Rehabilitation need and status: Substance, structure, and process*. Unpublished doctoral dissertation. University of Wisconsin.
- Lucas, C. (1985). Out at the edge: Notes on a paradigm shift. *Journal of Counseling and Development*, 64(3), 165-172.
- Margolis, B. L., Kroes, W. H., & Quinn, R. P. (1974). Job stress: An unlisted occupational hazard. *Journal of Occupational Medicine*, 16, 654-661.
- McFall, Richard M. (1986). Theory and method in assessment. *Behavioral Assessment*, 8, 3-10.
- Newton, F. B., & Caple, R. B. (1985). Once the world was flat: An introduction and overview. *Journal of Counseling and Development*, 64(3), 163-164.
- Schuler, R. S. (1982). An integrative transactional process model of stress in organizations. *Journal of Occupational Behavior*, 3, 5-19.
- Stout, J. K. (1984). Supervisor's structuring and consideration behaviors and workers' job satisfaction, stress, and health problems. *Rehabilitation Counseling Bulletin*, 28(2), 133-138.
- Thorndike, E. L. (1906). *Principles of teaching*. New York: Seiler.

- Tiller, W. A. (1979). Preface. In I. Bentov, Stalking the wild pendulum. New York: Bantam.
- Tinsley, H. E., & Heesacker, M. (1984). Vocational behavior and career development, 1983: A review. Journal of Vocational Behavior, 25, 139-190.
- Ursprung, A. W. (1986). Burnout in the human services: A review of the literature. Rehabilitation Counseling Bulletin, 29(3), 190-199.
- Watson, D., & Tellegan, A. (1985). Toward a consensual structure of mood. Psychological Bulletin, 98(2), 219-235.
- Westerhide, W. J., & Lenhart, L. (1973). Development and reliability of a pretest-posttest rehabilitation service outcome measure. Rehabilitation Research and Practice Review, 4, 15-24.
- Young, R. A. (1986). Counseling the unemployed: Attributional issues. Journal of Counseling and Development, 64(6), 374-378.

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