
The Current State of Addiction Treatment



Results from the 2005 NFATTC Substance Abuse Treatment Workforce Survey

Executive Summary for Hawai'i

The National Treatment Plan, published in 2000 by the Center for Substance Abuse Treatment, identifies workforce development as one of five major issues to be addressed in order to improve the current state of treatment for substance use disorders. Since 1998, the Northwest Frontier Addiction Technology Transfer Center (NFATTC) has invested heavily in workforce development, with recurrent needs assessment at the forefront of this investment. The current report discusses results from the 2005–2006 administration of the NFATTC Workforce Survey.

In the fall of 2005, workforce surveys were sent to a full census of agency directors in Alaska, Hawai'i, Idaho, Oregon, and Washington (674 agency directors representing 936 treatment facilities). Agency directors, in addition to completing a survey, were asked to distribute surveys to clinicians at each facility they managed. A 68% response rate was obtained across the region, with 459 agency director responses returned along with 1,564 clinician responses. In Hawai'i, 21 agency directors and 92 clinicians completed the survey, resulting in a 70% response rate. Results provide rich detail regarding the demographic, academic, and professional background of the substance abuse treatment workforce in Hawai'i, as well as critical information on important topics such as salary, staffing and turnover, training, and technology. Significant findings are highlighted for the following topics:

- Workforce Demographics
- Academic & Professional Background
- Work Detail
- Salary & Benefits
- Staffing & Turnover
- Recruitment & Retention
- Job Satisfaction & Stress
- Training
- Technology Access & Use



2006 HIGHLIGHTS:**Agency Size**

2 or fewer staff	10%
3 to 5 staff	20%
6 to 11 staff	25%
12 or more staff	45%

Agency Setting

Private, for-profit	10%
Private, nonprofit	52%
Public, nonprofit	14%
Government	24%
Tribal	0%

Mean Operating Budgets

2 or fewer	\$25,000
3 to 5 staff	\$338,441
6 to 11 staff	\$721,406
12 or more staff	\$3,417,075

Mean Clients Served

2 or fewer staff	50
3 to 5 staff	2,373
6 to 11 staff	221
12 or more staff	730

Workforce Demographics

- Overall, 48% of agency directors and 62% of clinicians are female, and 60% of agency directors and 45% of clinicians are white. A significant proportion of both directors (40%) and clinicians (55%) report being of nonwhite, minority status.
- The average age for those surveyed is 53 years old for agency directors and 46 years old for clinicians. Results indicate that 70% of directors and 40% of clinicians are 50 years old or older. Further, 20% of directors are 60 years old or older.
- The entire workforce also demonstrates a high average age of entry into the field. Results indicate that the average age of entry is 35 years for directors and 38 years for clinicians. In fact, 70% to 75% of the workforce indicate entering the field after the age of 30. Approximately 50% of directors and clinicians report that substance abuse treatment is a second career.
- Data indicate that 38% of directors and 44% of clinicians report being in recovery. Interestingly, a significantly larger proportion of male than female clinicians report being in recovery.

Academic and Professional Background

- The most frequently cited reasons for entering the field for both directors and clinicians are a personal or family experience with addiction or recovery (38% and 58%, respectively) and a personal interest in substance abuse treatment (38% and 61%, respectively).
- Directors average 17 years in the field and 6 years in their current position, while clinicians average 7 years in the field and 4 years in their current position.
- Despite an average of 7 years experience in the field, one half of clinicians (50%) have only 0 to 4 years experience. Further, the average age of clinicians who have 0 to 4 years experience is also quite variable, again highlighting that clinicians are entering the field at all ages. It is important to note that more than half of these recent entries into the field (52%) are over 40 years old.
- Results indicate that 95% of directors and 61% of clinicians have a Bachelor's degree or above. Further, 80% of directors and 36% of clinicians have a Master's degree or above.
- A significantly smaller proportion of recovering than nonrecovering clinicians have a Bachelor's degree or above.
- Fewer than 15% of the workforce in Hawai'i report having a substance abuse-specific degree.
- Overall, 19% of directors and 33% of clinicians report currently participating in an academic degree or certification program.
- Overall, 62% of directors and 43% of clinicians report current certification. In addition, 14% of directors and 12% of clinicians report current licensure.
- Results indicate that only 50% of clinicians with 0 to 4 years experience in the field have, or are pursuing certification.

Work Detail

- On average, directors report spending 85% of their time on administrative tasks, while clinicians report spending 62% of their time on client-related tasks.
- Clinicians report spending 17% of their time conducting individual counseling sessions, and 16% of their time leading group counseling sessions. Clinicians report spending only 2% of their time providing family counseling. It is also worth noting that clinicians report spending just 13% of their time (approximately 1 hour each day) on paperwork/ documentation.
- Multivariate analysis of variance results indicate that clinicians' time spent on client-related and administrative tasks does not vary in a practically meaningful way based on academic and professional background characteristics.
- The majority of clinicians (82%) report carrying a caseload, with an average caseload size of 17 clients. Only 16% of clinicians report that their caseload is not manageable.
- From directors' and clinicians' perspectives, relapse prevention and cognitive-behavioral therapy are the most frequently endorsed models playing a major role in their agencies approach. While these data do not address fidelity of implementation, it is encouraging that both of these models are considered to be evidence-based practices.
- Overall, 71% of directors and 57% of clinicians report weekly clinical supervision. Another 19% of directors and 20% clinicians report daily clinical supervision. Clinicians report spending an average of 4% (just over 1½ hours) of their time each week receiving clinical supervision.

Salary and Benefits

- Director salaries are quite high in Hawai'i, as 43% of directors report earning \$65,000 or more a year. Clinician salaries are more variable, with 79% of clinicians earn less than \$45,000 a year.
- Overall, 91% of directors and 81% of clinicians report receiving full or partial health insurance benefits, while 68% of directors and 78% of clinicians report receiving retirement benefits.
- Both sick leave and vacation/other paid leave are provided to the vast majority of the workforce. A sizeable portion of the workforce is provided with maternity leave, but tuition assistance is less common.
- Regression analysis results indicate that a few individual factors appear to be significant predictors of salary in Hawai'i: role (directors earn more than clinicians), degree status (individuals with higher degree status earn more), and years experience (individuals with more experience earn more).

Gender & Ethnicity

	Directors
Female	48%
White	60%
	Clinicians
Female	62%
White	45%

Age Status

	Directors
20–29 years old	0%
30–39 years old	15%
40–49 years old	15%
50–59 years old	50%
60 + years old	20%
	Clinicians
20–29 years old	8%
30–39 years old	27%
40–49 years old	25%
50–59 years old	28%
60 + years old	12%

Recovery Status

	Directors
In Recovery	38%
	Clinicians
In Recovery	44%

Years Experience in Field

	Directors
0 to 4 years	5%
5 to 9 years	5%
10 to 14 years	21%
15 to 19 years	32%
20 + years	37%

	Clinicians
0 to 4 years	50%
5 to 9 years	20%
10 to 14 years	9%
15 to 19 years	14%
20 + years	7%

Degree Status

	Directors
High school	0%
Some college	5%
Associate's	0%
Bachelor's	15%
Master's	60%
Ph.D.	5%

	Clinicians
High school	6%
Some college	28%
Associate's	5%
Bachelor's	26%
Master's	35%
Ph.D.	1%

Staffing and Turnover

- On Average, Hawai'i agencies employ 20 clinical staff. Agency size ranges from 1 to 77 direct clinical staff.
- On average, agencies employ 2 to 3 trainees for every 10 clinicians on staff.
- Based on agency director reports of staffing in the past year, agencies experience an average turnover rate of 18% of their staff. Consistent with 2002 data is the fact that most turnover (55%) in agencies across the state is voluntary (quitting).
- Reported turnover rates appear to be significantly elevated in large towns. Agencies in large towns report an average turnover rate of 48%.
- Overall, 48% of directors report that their agency is understaffed, with an average staff vacancy of 2.70 FTE (1.10 FTE after all budgeted positions are filled). Based on this data, the average staff vacancy across all agencies is 1.43 FTE.
- Data indicate that 50% of directors reporting a staff shortage would still be under-staffed if all budgeted positions were filled.
- Across the workforce, 52% of directors indicate that they expect to hire staff, reporting an average of 3.00 FTE in planned hires. Within these agencies, the number of planned hires range from 1 to 8 FTE.
- Results indicate that 76% of directors and 43% of clinicians have worked for more than one agency, with 76% of directors and 41% of clinicians voluntarily changing agencies at least one time. Overall, data indicate that 80% of director movement and 65% of clinician movement within the field is voluntary in nature.
- Overall, 82% of directors and 62% of clinicians rate their likelihood of changing agencies within the next two years as *remote* or *not at all*. In addition, 85% of directors and 73% of clinicians rated their likelihood of leaving the field within the next two years as *remote* or *not at all*. It is worth noting that a number of clinicians indicate not being sure about their future with their agency (21%) or in the field (17%).
- Both directors and clinicians cite better salary, better work opportunities (within the field), and burnout as significant factors in clinicians voluntarily leaving (i.e., quitting). The burnout experienced by clinicians appears to be largely underestimated by directors as only 14% of directors compared to 47% of clinicians indicate that burnout is a factor in clinicians' decisions to quit.
- Logistic regression results indicate that certain factors are predictive of directors and clinicians planning on changing agencies (and those not), and between those planning on leaving the field (and those not). Overall, individual turnover seems to be strongly related to financial considerations (being the primary wage earner for your family), mobility considerations (degree status, previous experience in another field), past turnover behavior, and job satisfaction and stress. Interestingly, simply earning a higher salary does not appear to be a significant predictor of staying at an agency or staying in the field.

Recruitment and Retention

- In terms of staff recruitment, 71% of directors and 52% of clinicians indicate that their agency has difficulty filling open positions.
- An insufficient number of clinicians meeting minimum requirements is the most frequently cited reason for recruiting difficulties. The most frequently cited reasons for applicants failing to meet minimum qualifications are applicants having little or no experience, insufficient or inadequate training/education, a lack of appropriate certification/licensure, and a lack of practical applied skills.
- Salary is identified as the number one barrier to entering the substance abuse treatment field by both directors and clinicians. Other frequently cited barriers include evening and weekend work hours, large caseloads, paperwork, and negative preconceptions about the nature of addicted clients.
- Overall, 60% of directors and 42% of clinicians report that from the perspective of other helping professionals, addiction professionals are thought to have lower status. Reasons for the perception of lower status are numerous, but lower salary is the most frequently cited by both directors and clinicians. Interestingly, 55% of clinicians in Hawai'i perceive having the same status from the perspective of other helping professionals. This percentage is significantly higher than in other states.
- In addition to more frequent salary increases, both directors and clinicians frequently cite more individual recognition and appreciation, assistance with paperwork (or lessening the amount of paperwork), more and improved ongoing training, and more teambuilding with staff as retention strategies.

Job Satisfaction and Stress

- 91% of directors and 74% of clinicians report their job satisfaction as above average. Only 3% of clinicians report below average job satisfaction.
- Overall, directors and clinicians cite qualities in their work as more frequently contributing to their satisfaction than their dissatisfaction. Some expected differences exist between factors that contribute to directors' and clinicians' satisfaction, as directors more frequently cite qualities such as decision making and leadership, while clinicians more frequently cite work with clients and colleagues.
- Both directors and clinicians report job stress as relatively high. In fact, 55% of directors and 48% of clinicians report above average job stress.

Certification

	Directors
Current	62%
Active (pending, awaiting, pursuing)	0%
Inactive (never, previous)	38%
	Clinicians
Current	43%
Active (pending, awaiting, pursuing)	23%
Inactive (never, previous)	35%

Salary

	Directors
Less than \$15,000	0%
\$15,000–\$24,999	0%
\$25,000–\$34,999	0%
\$35,000–\$44,999	5%
\$45,000–\$54,999	19%
\$55,000–\$64,999	33%
\$65,000–\$74,999	14%
\$75,000 or higher	29%
	Clinicians
Less than \$15,000	4%
\$15,000–\$24,999	7%
\$25,000–\$34,999	25%
\$35,000–\$44,999	42%
\$45,000–\$54,999	13%
\$55,000–\$64,999	6%
\$65,000–\$74,999	2%
\$75,000 or higher	0%

Turnover Rates

Overall	18%
Urban core	16%
Rural urban fringe	4%
Large town	48%
Small town/isolated rural	5%

Training

- Results indicate that 100% of directors and 89% of clinicians have participated in substance abuse workshops or training in the past two years. On average, both directors and clinicians report having attended 8 workshops/trainings in the past two years.
- Based on self-rated proficiency and training interest in 28 Addiction Counseling Competency areas, 4 areas are identified as training priorities for clinicians: co-occurring disorders, drug pharmacology, gender-specific treatment, and offender treatment

Technology Access and Use

- Overall, 100% of directors and 97% of clinicians report having computer access in the workplace. In addition, 95% of directors and 80% of clinicians reported having internet access in the workplace.
- The vast majority of both directors (91%) and clinicians (83%) report feeling proficient using technology to obtain information about substance abuse. However, a significantly larger proportion of directors than clinicians report that technology helps them be more effective at their job and that their agency encourages the use of computers and web-based technology.

Contact Information

A full copy of *The Current State of Addiction Treatment: Results from the 2005 NFATTC Substance Abuse Treatment Workforce Survey—Hawai'i* can be downloaded from the NFATTC website: www.nfattc.org, or requested from the NFATTC office. Questions about how this data is being used can be directed to Dr. Steve Gallon: gallons@ohsu.edu. Questions concerning methodology, data collection, and data analysis can be directed to Jeffrey R.W. Knudsen: jknudsen@rmccorp.com.