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Substance Use Disorder Counselors' Job Performance and Turnover after 1 Year: Linear or Curvilinear Relationship?¹

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Abstract

The main goals of the current study were to investigate whether there are linear or curvilinear relationships between substance use disorder counselors' job performance and actual turnover after 1 year utilizing four indicators of job performance and three turnover statuses (voluntary, involuntary, and no turnover as the reference group). Using longitudinal data from 440 matched counselor-clinical supervisor dyads, results indicate that overall, counselors with lower job performance are more likely to turn over voluntarily and involuntarily than not to turn over. Further, one of the job performance measures shows a significant curvilinear effect. We conclude that the negative consequences often assumed to be "caused" by counselor turnover may be overstated because those who leave both voluntarily and involuntarily demonstrate generally lower performance than those who remain employed at their treatment program.

Keywords

voluntary turnover; involuntary turnover; job performance; organizational citizenship behavior; substance use disorder professionals

Introduction

Considerable research has examined the relationship between job performance and turnover (for meta-analyses see Bycio, Hackett, & Alvares, 1990; Griffeth, Hom, & Gaertner, 2000; McEvoy & Cascio, 1987; Williams & Livingstone, 1994). However, results regarding the nature and direction of this relationship are mixed with some studies reporting a negative relationship between turnover and performance (e.g., Trevor, Gerhart, & Boudreau, 1997), others reporting a positive relationship (e.g., Martin, Price, & Mueller, 1981), and still others finding curvilinear effects (e.g., Hochwarter, Ferris, Canty, Frink, Perrew, & Berkson, 2001). In an effort to shed light on these mixed findings, the current study provides a fine-grained examination of the job performance-turnover relationship by comparing three distinct employee groups: those who leave the organization voluntarily, those who leave involuntarily, and those who remain employed at the organization. We also take a multi-dimensional perspective on job performance in order to ascertain if the job performance-turnover relationship varies across four distinct aspects of job performance. Finally, we test for both linear and nonlinear relationships between turnover and performance given the

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conflicting empirical research to date. In taking this approach, the current study represents the most comprehensive examination of the job performance-turnover relationship to date.

Importance of Studying Job Performance and Turnover among Substance Use Disorder Counselors

In the present study we examine the job performance-turnover relationship among substance use disorder (SUD) counselors. This topic is of high relevance to the SUD treatment field for several reasons. First, organizational turnover among SUD counselors is higher than the national average (Bureau of Labor Statistics, 2010). Estimates suggest that annual counselor turnover rates range from 18% to 33% (Gallon, Gabriel, & Knudsen, 2003; Johnson, Knudsen, & Roman, 2002; Knudsen, Johnson, & Roman, 2003; McNulty, Oser, Johnson, Knudsen, & Roman, 2007), with a recent study finding a cumulative annual turnover rate of 47% over a 3-year period (Eby & Rothrauff-Laschober, 2012). Some studies even suggest annual counselor turnover rates to be as high as 49% in certain centers (Carise, McLellan, & Gifford, 2000; Carise, McLellan, Gifford, & Kleber, 1999). Moreover, Eby, Burk, and Maher (2010), found considerable variability in annual turnover rates across treatment organizations, with some programs experiencing 100% turnover among clinical staff in a 1-year period.

Second, there are wide-ranging effects of turnover on SUD treatment organizations as well as individuals, co-workers, and patients within organizations. For example, although all organizational turnover is costly due to the time, manpower, and resources that are needed to recruit, hire, and train new employees, if higher performing counselors are more likely to leave than are lower performing ones, the costs are even greater. Several of the other negative consequences of turnover include loss of fidelity in the implementation of evidence-based practices (Rollins, Salyers, Tsai, & Lydick, 2010; Wieder & Kruszynski, 2007), lower morale among remaining employees, loss of social support from former employees, discontinuity in patient care, and decreased efficiency and effectiveness of health care delivery (Johnson & Roman, 2002; Kacmar, Andrews, Van Rooy, Steilberg, & Cerrone, 2006; Knight, Broome, Simpson, & Flynn, 2007; Mulvey, Hubbard, & Hayashi, 2003; Scanlon, 2001; Shaw, Duffy, Johnson, & Lockhart, 2005).

Despite these considerations, to date, no research exists about the relationship between SUD counselors' job performance and turnover. The main goals of the present study are to examine whether there is a significant linear (negative or positive) relationship or curvilinear relationship between multiple dimensions of counselors' job performance and three types of turnover statuses (voluntary, involuntary, and no turnover as the reference group).

Job Performance and Turnover: Theoretical Frameworks

Various theories have been proposed to help explain the relationship between employee job performance and turnover. Three of the most widely cited theories are the unfolding model of turnover (Lee & Mitchell, 1994), March and Simon's (1958) ease-of-mobility model, and the curvilinear or U-shaped push-pull model (Jackofsky, 1984). Lee and Mitchell's (1994) unfolding model focuses on voluntary turnover and proposes that there are several distinct decision paths that precede the decision to quit. Their model concentrates heavily on "shock" experiences (e.g., a negative performance evaluation, change in family situation such as pregnancy) and jarring events that trigger the psychological processes responsible for the decision to quit. According to the model, shock experiences can lead to quick decisions to quit, or be a catalyst for highly rational decisions which consider the pros and cons of leaving one's organization.

The ease-of mobility model (March & Simon, 1958) also emphasizes voluntary turnover and suggests that it is largely a function of employees' perceptions of the ease and desirability of movement. The theory predicts that employees who voluntarily turn over have greater desire and ability to leave. The push-pull model (Jackofsky, 1984) is an extension of the ease-of-movement model. However, unlike the ease-of-movement model, it focuses on turnover both within and across organizations, and applies to both voluntary and involuntary turnover. The push-pull model also notes that the decision to exit one's organization can be motivated by ease of movement, desirability of movement, or both. Moreover, Jackofsky (1984) proposes that there may be a curvilinear relationship between job performance and turnover such that both high and low performers have higher turnover than those with average performance. Low performers are "pushed" out of the organization due to perceived threat of negative sanctions by management and high desirability of movement. By contrast, high performers are "pulled" out of the organization due to greater job alternatives and high ease of movement. Average performers are likely to stay in their current positions because they are neither "pushed" nor "pulled" into leaving.

Summary of Research on the Job Performance-Turnover Relationship

The results of four meta-analyses indicate a negative association between job performance and voluntary turnover such that higher performers are more likely to remain employed than are lower performers (Bycio et al., 1990; Griffith et al., 2000; McEvoy & Cascio, 1987; Williams & Livingstone, 1994). However, the effect sizes reported in these meta-analyses are small to moderate (ranging from $-.12$ as reported in Bycio et al. to $-.28$ as reported in McEvoy & Cascio) and there is considerable between-study variability. After correcting for study methodological artifacts, in all studies there remains a sizable proportion of unexplained variance (ranging from 79% in Williams & Livingstone to 91% in McEvoy & Cascio). Moreover, in all four meta-analyses the 95% credibility interval or confidence interval includes zero, providing additional evidence of considerable between-study variability.

There are several possible explanations for the varying results across primary studies. Some studies suffer from methodological limitations such as small sample sizes (Martin et al., 1981) or the use of single-item measures of job performance (e.g., Bluedorn & Abelson, 1980; Trevor et al., 1997), which raises serious concerns about construct validity (Loo, 2002). There are also differences in the groups that are compared across studies, making it difficult to identify trends in the literature. For example, Trevor et al. combined individuals who left involuntarily with those who stayed and compared this group to voluntary leavers. Other studies made comparisons between those who turned over voluntarily with those who stayed (e.g., Kammeyer-Mueller, Wanberg, Glomb, & Ahlburg, 2005; Lee, Mitchell, Sablinski, Burton, & Holtom, 2004).

Current Study and Research Questions

The current study addresses several of the limitations of previous research by providing a fine-grained examination of the job performance-turnover relationship. We accomplish this in two ways. First, considerable research focuses only on voluntary turnover (e.g., Kammeyer-Mueller et al., 2005; Lee et al., 2004; Mossholder, Settoon, & Henagan, 2005). By contrast, very little is known about the relationship between involuntary turnover and performance, or whether the performance of voluntary leavers is different from that of involuntary leavers. In the present study we compare all three groups (voluntary leavers, involuntary leavers, stayers), which provides a more nuanced understanding of turnover.

Second, we examine four distinct dimensions of SUD counselors' job performance. This is important because job performance is multi-dimensional and the relationship between job

performance and turnover may vary depending on which aspect of performance is considered. Consistent with theoretical models of job performance (Borman & Motowidlo, 1997; Duarte, Goodson, & Klich, 1994), we include task performance (performance of core job duties), relational performance (willingness to learn, responsiveness to job-related feedback), and two aspects of performance that reflect efforts to go above and beyond formal job requirements and role expectations. These are commonly referred to as organizational citizenship behaviors (OCBs) (Borman, 2004; Williams & Anderson, 1991) and can be aimed at individuals within the organization (OCB-Is) (e.g., helping a coworker who has been absent) or the organization as a whole (OCB-Os) (e.g., giving advance notice when unable to come to work).

It is also important to note that a methodological strength of the present study is the use of matched data from counselors and their clinical supervisors. Supervisory ratings of counselors are the most commonly used operationalization of job performance in applied settings (Cascio & Aguinis, 2005; Gatewood & Field, 1994) and, if properly designed they are valid and legally defensible indicators of job performance (Uniform Guidelines on Employee Selection, 1978). Using supervisor-rated performance eliminates concerns associated with the use of self-report performance measures, most notably rating inflation due to self-serving biases (Mabe & West, 1982).

Using existing research as a guide, and drawing from the theoretical models of the job performance-turnover relationship reviewed earlier, we propose two overarching research questions (RQs):

RQ1: Are there significant linear relationships between (1) task performance, (2) relational performance, (3) OCB-I, and (4) OCB-O and the three types of turnover statuses (voluntary turnover, involuntary turnover, no turnover as the reference group) among SUD counselors?

RQ2: Are there significant curvilinear relationships between (1) task performance, (2) relational performance, (3) OCB-I, and (4) OCB-O and the three types of turnover statuses (voluntary turnover, involuntary turnover, no turnover as the reference group) among SUD counselors?

Method

Study Design and Sample

The data for the present study were collected in 2007 and 2008 and are part of the Managing Effective Relationships in Treatment Services (MERITS I) project. MERITS I is a longitudinal study carried out by researchers affiliated with [author anonymity] and funded by the National Institute on Drug Abuse (NIDA). MERITS I utilizes the NIDA Clinical Trials Network (CTN) as a platform to examine the work experiences of SUD professionals in SUD treatment organizations across the United States. The purpose of the CTN is to investigate the efficacy of evidence-based practices in the field. The response rate was greater than 80% for both counselors and clinical supervisors. All procedures were approved by the Institutional Review Board at [author anonymity].

Twenty-six treatment organizations participated in MERITS I. Treatment organizations are defined as relatively autonomous, free-standing operational units located in the community. Thus, prison-based organizations, Veteran's Health Administration organizations, and driving-under-the-influence schools were excluded. Based on separate reports from treatment administrators, the majority of treatment organizations were non-profit entities (88%), accredited (69%), and free-standing treatment programs that were not located on a hospital campus (85%). Treatment organizations were also diverse regarding the numbers

and levels of care that they provided—50% offered inpatient (IP) detoxification, 54% residential care, 46% outpatient (OP) detoxification, 31% partial hospitalization, 77% intensive OP care, 73% OP care, 65% aftercare, and 42% offered methadone maintenance only. In addition, 27% of organizations described themselves as using primarily 12-step-based therapy, 15% cognitive behavioral therapy, 4% motivational enhancement therapy, and 54% as primarily using an eclectic approach to treating patients. Treatment organizations were also located in all major regions of the United States with 23% in the Eastern U.S., 12% in the Midwest, 27% in the South, and 38% in the Western part of the U.S.

All data were collected by trained research assistants who traveled to the treatment organizations to administer paper-and-pencil surveys to all counselors and clinical supervisors who were identified by administrators shortly before the researchers' arrival. Counselors and supervisors, considering the high turnover rates, who were not included on the list were eligible to complete a survey as long as counselors had direct contact with patients in a therapeutic relationship (i.e., individual or group counseling sessions, or both) and clinical supervisors engaged in written and/or face-to-face supervision with their counselors, which were the identical requirements for staff identified by administrators prior to data collection. Counselors and supervisors completed similar surveys about their experiences working in SUD treatment. However, while counselors also completed information pertaining to their current supervisors (e.g., performance, competence, relationship), supervisors were asked to complete separate surveys pertaining to each of their counselors. Supervisors with more than 3 counselors had the option to complete one survey for each of their counselors or were assigned three random surveys for counselors under their supervision. Thus, it was possible to have supervisor-provided-data about counselors who did not complete surveys and to have counselor-provided-data about supervisors who did not complete a survey.

In 2007, paper and pencil surveys were obtained from 739 counselors and 194 supervisors, of whom 181 also completed information on at least one of their counselors. Through matching of available counselor and supervisor data, the final sample for this study included 168 clinical supervisors and 440 counselors under their supervision. On average, clinical supervisors completed performance appraisals on 2.6 counselors (range 1–9 counselors). In 2008, turnover data were obtained from all counselors who participated in the study in 2007. For the purpose of this study, only counselor data from the 440 counselor-supervisor dyads were analyzed.

The majority of counselors were females (63.64%), non-Hispanic White (62.47%), in recovery (60.91%), certified SUD professionals (51.51%), and held a master's degree or higher (50.23%). The average counselor was 43.43 ($SD = 11.93$) years old, worked as a SUD counselor for 6.85 ($SD = 6.77$) years and 4.41 ($SD = 4.90$) years in the current treatment program, and earned \$32,932 ($SD = 852$) annually.

Similar to counselors, the majority of supervisors were females (66.07%), non-Hispanic White (75.45%), certified SUD professionals (73.49%), and held a master's degree or higher (73.21%), although only 29.27% of supervisors were in recovery. The average supervisor was 46.89 ($SD = 10.72$) years old, worked as a SUD counselor for 12.01 ($SD = 7.90$) years and 8.41 ($SD = 7.03$) years in the current treatment program, and earned \$50,227 ($SD = 1419$) annually.

Measures

Turnover status—Representatives from each treatment organization provided turnover information in 2008 for each SUD counselor who was employed at the organization at the

time of data collection in 2007. Information gathered included whether they were still employed at the organization (reference group) or had turned over. If the counselor surveyed in 2007 was no longer employed at the treatment organization, we inquired as to whether turnover was voluntary or involuntary. Reasons for involuntary turnover included termination by the organization (91%) and program closure or layoffs (9%). Thus, the dependent variable had 3 levels—voluntary turnover, involuntary turnover, and no turnover.

In almost half (46%) of the organizations, turnover information was compiled by human resource directors or managers. In about one third (32%) of the organizations, turnover information was captured by the COO/VP or president. In the remaining organizations, turnover information was completed by either clinical supervisors (16%) or executive assistants (5%). Organizational representatives noted high levels of confidence regarding the correctness of their employee turnover records. In order to verify the validity of the turnover information, we compared the data to information obtained in qualitative exit interviews with a subsample of former counselors whether they voluntarily or involuntarily left the organization and the reason for leaving or being terminated. Comparisons of turnover status and turnover rates were similar between former employees and organizational records. Organizations received \$1,000 to off-set the time required for staff to gather the turnover data.

Counselor job performance—Clinical supervisors provided ratings of each of their counselors' job performance using four measures—task performance, relational performance, and two types of OCB (OCB-I and OCB-O). All measures used a 1 = *strongly disagree* to 5 = *strongly agree* Likert-type scale, with higher scores indicating higher performance.

Task performance was measured with a 20-item scale (see Appendix A) developed for this study following guidelines for the development of performance rating instruments (see Gatewood & Field, 1994; Uniform Guidelines on Employee Selection, 1978). Items included in the counselor task performance scale are based on a thorough review of their job tasks using the Department of Labor's O*Net system (<http://online.onetcenter.org/>) and empirical research on counselor job requirements and competencies (e.g., Ellis, 1991; Overholser & Ricciardi, 1997; Powell & Brodsky, 2004; United States Department of Health and Human Services, 1998). An advisory board panel of 9 experts in the SUD field with varying educational degrees (e.g., MSW, PhD, MD) and positions (e.g., executive director of addiction research and treatment services, senior vice president for clinical services, SUD program director) reviewed the instrument and provided feedback on the appropriateness and comprehensiveness of counselor job tasks.

We examined the factor structure of the counselor task performance measure using exploratory factor analysis with maximum likelihood extraction and oblimin rotation. We adopted Kaiser's eigenvalues greater than 1.0 rule, Cattell's scree test, and Horn's parallel analysis as criteria for determining the number of factors to retain. Each of these criteria supported the unidimensionality of the scale. The one-factor solution accounted for a substantial percentage of the variance of the initial solution (98.18%) and factor loadings ranged from .63 to .75. The coefficient alpha for the measure was .94.

Relational performance was measured with Eby, Durley, Evans, and Ragin's (2008) 7-item measure. A sample item is "This counselor does not seem willing to learn" (reverse scored item). Coefficient alpha for this measure was good ($\alpha = .92$). *OCBs-I and OCBs-O* were each measured with Williams and Anderson's (1991) 7-item scales. A sample item from the OCB-I scale is, "Counselor helps others who have heavy workloads." A sample item from

the OCB-O scale is, “Counselor gives advance notice when he/she is unable to come to work.” Coefficient alphas were acceptable for both OCB-I ($\alpha = .88$) and OCB-O ($\alpha = .85$).

Potential control variables—Based on previous research that also examined the linear and curvilinear relationship between job performance and turnover (e.g., Becker & Cropanzano, 2011; Hochwarter et al., 2001; Trevor et al., 1997), we considered six control variables that were reported by counselors in 2007: gender (0 = *male*, 1 = *female*), highest level of education (0 = *less than master’s degree*, 1 = *master’s degree or higher*), marital status (0 = not married, 1 = married), age in years, annual salaries in dollars, and tenure in the current treatment organization in years.

Data Analysis: Descriptive statistics using SAS 9.2 were run to examine counselor characteristics, supervisor characteristics, and counselor turnover. Next, we compared the characteristics of counselors who stayed, turned over voluntarily, and turned over involuntarily using general linear models with Tukey post-hoc tests for continuous variables and chi-square tests for categorical variables (see Table 1). Then we conducted correlation analyses to examine relationships among the study variables (see Table 2). Voluntary versus no turnover was not significantly related to any of the job performance measures. Involuntary versus no turnover was significantly negatively related to all of the job performance measures. To preserve statistical power and not inflate standard errors by including variables in the analyses that were unrelated to turnover, we examined correlations between turnover status and the potential control variables. Gender, education, and tenure were significantly related to turnover at $p < .05$ and therefore used as control variables in all subsequent analyses. Finally, all of the job performance measures were significantly positively related to education; relational performance and OCB-I were significantly positively related to gender; and relational performance and age were significantly negatively related.

To answer the research questions, we considered the nested or multi-level structure of the data (counselors nested within supervisors, nested within organizations) by calculating the intraclass correlation coefficients (ICCs). The results showed that less than 1% of the variance in turnover status was explained by supervisor nesting and less than 2% of the variance for turnover status was explained by organization nesting. These low ICCs indicate that it is not necessary to use statistical techniques that account for the nested nature of the data. An examination of statistical tests indicated multicollinearity. Thus, all of the performance measures were centered at the mean and the quadratic terms (e.g., task performance X task performance) were created based on the centered measures. Finally, we conducted separate multinomial regression models for each of the four performance measures because the dependent variable has 3 levels (voluntary turnover, involuntary turnover, no turnover as the reference group) (see Table 3). The first analysis included the control variables (gender, education, and tenure in the treatment program) and the job performance measure (RQ1). The second analysis included the quadratic term for performance, in addition to the control variables and performance, to ascertain a curvilinear relationship between turnover status and counselor job performance (RQ2). Effect sizes (adjusted R^2) ranged from .10 to .14. Odds ratios that are smaller than 1.00 indicate a negative relationship and odds ratios that are larger than 1.00 indicate a positive relationship between job performance and turnover.

Results

Differences between Counselors Who Turned Over Voluntarily, Involuntarily, and Did Not Turn Over

Table 1 shows that there were some differences in characteristics among counselors who turned over voluntarily, involuntarily, and those who did not turn over. More females turned over voluntarily compared to those who did not turn over and turned over involuntarily. Fewer non-Hispanic White counselors left involuntarily compared to those who did not turn over and voluntarily left. More counselors who did not turn over were in recovery than counselors who left voluntarily and involuntarily. More counselors with higher education did not turn over than did those who left voluntarily and involuntarily. Finally, counselors who were still employed at the center after 1 year had greater tenure at their current treatment program than those who left either voluntarily or involuntarily.

Extent and Type of Turnover and Retention among SUD Counselors

Of the 440 counselors for whom matched data with their clinical supervisors were available for this study in year 1, 317 (72%) were still employed in their original treatment organizations by year two, compared to 101 (23%) counselors who left their organizations voluntarily and 22 (5%) counselors who left involuntarily during that same time period.

RQ 1: Are there significant linear relationships between (1) task performance, (2) relational performance, (3) OCB-I, and (4) OCB-O and the three types of turnover statuses (voluntary turnover, involuntary turnover, no turnover as the reference group) among SUD counselors?

First, compared to counselors who did not turn over, those with lower task performance were significantly more likely to leave involuntarily ($OR = .33, p < .05$; see Table 3, column 2, linear results). No significant linear relationship was found for task performance between those who did not turn over and those who left voluntarily ($p > .05$). Second, compared to counselors who did not turn over, counselors with lower relational performance were more likely to turn over voluntarily and involuntarily ($OR = .69, p < .01$ and $OR = .41, p < .001$, respectively; see Table 3, column 3, linear results). Third, compared to counselors who did not turn over, those with lower OCB-I were more likely to turn over voluntarily and involuntarily ($OR = .69, p < .05$ and $OR = .31, p < .001$, respectively; see Table 3, column 4, linear results). Fourth, compared to counselors who did not turn over, counselors with lower OCB-O were more likely to turn over involuntarily ($OR = .34, p < .001$; see Table 3, column 5, linear results). No significant linear relationship was found for OCB-O between those who did not turn over and those who left voluntarily ($p > .05$).

RQ2: Are there significant curvilinear relationships between (1) task performance, (2) relational performance, (3) OCB-I, and (4) OCB-O and the three types of turnover statuses (voluntary turnover, involuntary turnover, no turnover as the reference group) among SUD counselors?

We found one significant curvilinear relationship between job performance and turnover. Compared to counselors who did not turn over, those with lower OCB-I were more likely to turn over voluntarily up to a point but this trend reversed itself ($OR = 1.57, p < .05$; see Table 3, column 4, quadratic results), supporting a quadratic effect. That is, counselors who were both higher and lower in OCB-I were more likely to leave voluntarily compared to those who did not leave. This supports a U-shaped relationship between performance and turnover. No significant curvilinear relationships were found for task performance, relational performance, and OCB-O.

Discussion

The primary aims of this study were to provide a fine-grained examination of the relationship between three types of turnover statuses (voluntary, involuntary, no turnover) and four distinct dimensions of job performance using a sample of SUD counselors. Three main conclusions can be reached from our findings. First, we document that voluntary turnover among SUD counselors is 23% and involuntary turnover among SUD counselors is 5%. This is similar to most previous research on turnover rates in SUD treatment programs (Eby et al., 2010; Gallon et al., 2003; Johnson et al., 2002; McNulty et al., 2007). Second, the nature of the relationship between performance and turnover varies considerably across the four dimensions of job performance. This suggests that research examining only task performance may be limited in understanding the complex association between job performance and turnover. Third, limited support is found for a curvilinear effect between job performance and turnover, with only OCB-I demonstrating a U-shaped relationship with voluntary turnover.

Significant Linear Relationships between Job Performance and Turnover Status?

Our results reveal a complex relationship between job performance and turnover. In terms of task performance, we find no difference between voluntary leavers and those who stay. This suggests that counselors who choose to leave their treatment program voluntarily are not higher performers than those who choose to stay. This runs counter to research which indicates that voluntary turnover is detrimental to organizations in terms of the loss of high performers (McEvoy & Cascio, 1987). We also find that when decisions are made by organizations to terminate counselors, such decisions are generally sound because those who leave involuntarily tend to have lower task performance than those who stay. These findings for task performance are consistent with the “push” hypothesis (i.e., poorer performers are pushed out of the organization) but not the “pull” hypothesis (i.e., higher performers are not pulled out of the organization due to greater job mobility) from the push-pull model of turnover (Jackofsky, 1984).

A different pattern of effects is found for relational performance. Counselors who leave both voluntarily and involuntarily are lower in relational performance than stayers. This means that when turnover occurs in the SUD treatment organizations under study, counselors who leave are those who are less willing to learn and less receptive to feedback compared to those who stay. Moreover, relational skills are particularly important in occupations requiring skills such as cooperation, empathy, and sensitivity; SUD counseling is one such occupation. As the first study to examine the association between relational performance and turnover, our findings provide an interesting juxtaposition to the more frequently studied relationship between task performance and turnover.

In terms of OCBs aimed at the organization as a whole, the only difference we find was that those who leave involuntarily are rated lower on OCB-Os than those who stay. One explanation is that although OCB-Os have historically been conceptualized as discretionary, extra-role behaviors (Borman, 1991), some of the items measuring the absence of OCB-Os refer to behaviors that may be viewed by supervisors as potentially punishable offenses. This includes behaviors such as taking undeserved breaks, not giving advance notice when missing work, and complaining about insignificant things (Williams & Anderson, 1991). While speculative, it may be that repeatedly engaging in these behaviors leads to termination for some counselors.

In summary, involuntary counselor turnover is consistently and negatively related to job performance. Those who leave involuntarily have significantly lower task performance, lower relational performance, and lower OCB-Os than those who do not turn over. These

findings support the notion that turnover may not always be bad, assuming good decisions are made regarding whom to let go. These findings may also be helpful for SUD treatment organization administrators, particularly during times of recession and mandatory downsizing, because it suggests that administrative decisions that lead to justifiable termination may cause the least harm to the organization. In terms of voluntary turnover, counselors who choose to leave on their own tend to be lower in relational performance and either higher or lower in OCB-Is. Interestingly no differences in task performance are found between voluntary leavers and stayers. Taken together, this suggests that although turnover among SUD counselors incurs a variety of costs (e.g., selecting and training new staff, stress and strain on remaining personnel, patient discontinuity in care), treatment programs are not necessarily losing their higher performers when they experience voluntary turnover.

Significant Curvilinear Relationships between Job Performance and Turnover Status?

Limited support is found for the push-pull theory's (Jackofsky, 1984) prediction of a U-shaped relationship between job performance and turnover. One exception is that higher and lower OCB-I performers are more likely to leave voluntarily than not to leave. An explanation for this finding is that counselors who engage in higher levels of helping behavior aimed at colleagues may experience greater burnout over time, particularly because their core job duties already have heavy interpersonal demands. This is consistent with research linking burnout at work to turnover intentions (e.g., Lee & Ashforth, 1996). Another explanation is that counselors who engage in more citizenship behaviors toward others have greater job alternatives because helping behavior is valued in this profession. As a consequence, such counselors may be "pulled" out of their current jobs by job opportunities elsewhere.

For those lower in OCB-Is, voluntary turnover may be more likely due to a perceived lack of person-environment fit. In other words, because SUD treatment is a helping occupation, those who are less willing to go above and beyond to help colleagues at work may perceive less job or occupational fit. This is supported by research finding a negative relationship between organizational citizenship behavior and perceived person-organization fit (Hoffman & Woehr, 2006). It may also be that failing to engage in OCBs toward others reflects general dissatisfaction with social relationships at work, and research finds that feelings of social embeddedness are negatively related to voluntary turnover (Lee & Mitchell, 1994). Given this logic, low OCB-I counselors may be "pushed" out of their current organization by the desire to find work that better suits their relational style. Interestingly, none of the other performance dimensions displayed curvilinear effects with turnover. Although our results need to be replicated before reaching firm conclusions, the curvilinear effects for only OCB-I may reflect the unique social context of this occupation and emphasis on helping others.

Limitations and Conclusion

Our study has several limitations that may affect the generalizability of our findings. Counselors' job performance was rated by clinical supervisors and it is possible that supervisor ratings are influenced by liking or favoritism. While it is difficult to disentangle liking from actual job performance it is important to recognize that those counselors who are higher performing are probably liked for that very reason. This is supported by the finding that employees who perform more highly based on objective measures of performance are liked more by supervisors (Allen & Rush, 1998). Moreover, supervisor ratings of job performance are considered the most appropriate source of information for professional jobs such as SUD counselors (Cascio & Aguinis, 2005). More objective measures of counselor performance such as patient success in treatment or number of counseling sessions attended suffer from both criterion contamination (many things contribute to success in treatment that

have nothing to do with a counselor's efforts) and criterion deficiency (patient attendance in sessions does not fully capture the job performance of a counselor) (Cascio & Aguinis).

Another limitation is that information on voluntary and involuntary turnover was provided by administrators based on organizational records. It could be that organizations vary in the way they record actual turnover as well as the amount of detail that is collected about the reason for turnover. However, Eby and colleagues (2010) found strong congruence between organizational turnover records and former employees' own accounts of whether they left their organization voluntarily or involuntarily. In addition, Eby et al. reported that organizational representatives noted high levels of confidence regarding the accuracy of their employee turnover records. This increases our confidence in the accuracy of the turnover data used in the present study.

A further limitation is the sample size for counselors who turned over involuntarily ($N = 22$, 5%). The small sample size provides limited statistical power to detect significant differences between counselors who turnover over involuntarily and those who did not turn over. However, our study is one of the few to distinguish between voluntary, involuntary, and no turnover. Our finding of differences between involuntary leavers and stayers provides initial evidence of the importance of distinguishing among distinct types of turnover.

Finally, our sample was based on counselors who work in CTN-affiliated SUD treatment programs, which is not a nationally representative sample. However, there are indications that the CTN-affiliated treatment programs represent different cross-sections of SUD treatment programs. For example, the CTN includes treatment programs from all major treatment modalities (e.g., detox, drug-free outpatient, short-term and long-term residential, methadone maintenance) and is located in 26 states in every major geographic region of the country.

In conclusion, high turnover rates are a real concern for the SUD treatment field but should be considered within the context of counselors' job performance. The negative consequences that are often assumed to be "caused" by counselor turnover may be overstated in light of our finding that lower performing counselors are more likely to leave both voluntarily and involuntarily. Our findings underscore the importance of investing in recruitment, selection, and training in SUD treatment in an effort to reduce the costs of turnover and increase the likelihood of successful hires that will perform well and remain employed at the treatment organization.

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Appendix A: Counselor Task Performance (Rated by the Supervisor)

Conducts individual counseling sessions with patients:

1. Facilitates individual counseling sessions with patients.
2. Performs assessment and initial diagnostic evaluation of patients.
3. Conducts problem-related and objective-driven sessions.
4. Educates patients on their disease and/or diagnosis to assist in their understanding of the problem (or to support their recovery).
5. Creates therapeutic relationships with patients.

Counsels patients in group settings:

6. Facilitates group counseling sessions with patients.
7. Effectively facilitates group interaction to bring about recovery.
8. Interviews patients, reviews records, and confers with other professionals in order to evaluate individuals' suitability for participation in a particular program.
9. Develops patient treatment plans based on evidence-based research.
10. Develops patient treatment plans based on observations, clinical experience, and patient histories.
11. Reviews and evaluates patients' progress in relation to measurable goals described in treatment and care plans.
12. Intervenes as an advocate for patients in crisis situations and other non-routine events.
13. Provides patients or family members with information about available services and programs.
14. Coordinates counseling efforts with mental health professionals.
15. Coordinates counseling efforts with health care professionals such as doctors, nurses, and physician assistants.
16. Coordinates activities with courts, probation officers, community services, and other post-treatment agencies.
17. Maintains accurate records and reports regarding patients' histories and progress, services provided, and other relevant information.
18. Participates in treatment center meetings to facilitate patient care (e.g., case conferences).
19. Follows rules and regulations of treatment center in terms of personal and professional conduct.
20. Contributes to a positive team environment by working well with other counselors.

Table 1

Substance Use Disorder (SUD) Counselor Characteristics by Turnover Status

Variables	No Turnover (<i>N</i> = 317, 72%)	Voluntary Turnover (<i>N</i> = 101, 23%)	Involuntary Turnover (<i>N</i> = 22, 5%)	<i>F</i> / χ^2
Female (<i>F</i> , %)	195 (61.51)	75 (74.26)	10 (45.45)	8.68 ^{<i>a</i>} , ^{<i>b</i>}
Non-Hispanic White (<i>F</i> , %)	200 (63.09)	62 (61.39)	6 (27.27)	11.10 ^{<i>a</i>} , ^{<i>b</i>} , ^{<i>c</i>}
Certified SUD Professional (<i>F</i> , %)	168 (54.19)	44 (44.44)	10 (45.45)	3.20
In Recovery (<i>F</i> , %)	130 (43.05)	29 (30.53)	4 (20.00)	7.97 ^{<i>a</i>} , ^{<i>c</i>}
Master's Degree and Higher (<i>F</i> , %)	147 (46.82)	59 (61.46)	10 (50.00)	6.31 ^{<i>a</i>}
Married (<i>F</i> , %)	110 (34.70)	34 (33.66)	6 (27.27)	.52
Age (<i>M</i> , <i>SD</i>)	43.92 (11.99)	41.80 (12.04)	43.55 (10.24)	1.15
Tenure as SUD counselor/yrs (<i>M</i> , <i>SD</i>)	7.30 (7.10)	6.09 (6.11)	3.92 (2.87)	3.41 ^{<i>d</i>}
Tenure in SUD treatment program/yrs (<i>M</i> , <i>SD</i>)	5.01 (5.30)	2.99 (3.36)	2.50 (2.58)	8.49 ^{<i>a</i>} , ^{<i>b</i>} , ^{<i>c</i>}
Annual Salary/1,000 (<i>M</i> , <i>SD</i>)	33.488 (9.04)	31.547 (7.11)	30.826 (4.68)	2.38

Note. ^{*a*}Difference between no turnover and voluntary turnover;

^{*b*}Difference between voluntary turnover and involuntary turnover;

^{*c*}Difference between no turnover and involuntary turnover;

^{*d*}No post-hoc differences between groups.

*
p < .05;

**
p < .01,

p < .001.

Table 2

Correlations among Study Variables

Variable	1.	2.	3.	4.	5.	6.	7.	8.	9.	10.	11.	12.
1. Voluntary vs. No Turnover	1.00	-.13**	-.02	-.09	-.05	-.04	.12*	.12*	-.16***	-.00	-.07	-.09
2. Involuntary vs. No Turnover		1.00	-.12*	-.16***	-.16***	-.15***	-.09	-.00	-.09	-.03	.00	-.06
3. Task Performance			1.00	.63***	.51***	.55***	.01	.15**	.05	.00	.02	.09
4. Relational Performance				1.00	.61***	.71***	.09*	.12*	-.03	-.04	-.13**	.04
5. OCB-I					1.00	.51***	.10*	.10*	-.04	.01	-.07	.05
6. OCB-O						1.00	.01	.14**	-.05	.00	-.05	.02
7. Gender (Female)							1.00	.10*	-.10*	-.11*	-.17***	-.06
8. Education (Master's degree)								1.00	-.18***	.08	.07	.34***
9. Years of experience in current center									1.00	.01	.37***	.32***
10. Marital status (Married)										1.00	.05	.06
11. Age											1.00	.21***
12. Annual Income												1.00

* $p < .05$;** $p < .01$;*** $p < .001$.

Table 3

Multinomial Logistic Regression Results: Job Performance Odds Ratio^a

Variable	Voluntary vs. No Turnover		Involuntary vs. No Turnover		Wald χ^2	
	Linear	Quadratic	Linear	Quadratic	Linear	Quadratic
Task Performance	.83	.96	.33 *	.98	29.47 ***	29.49 ***
Relational Performance	.69 **	1.17	.41 ***	1.13	38.53 ***	39.72 ***
OCB-I ^b	.69 *	1.57 *	.31 ***	1.74	36.39 ***	41.37 ***
OCB-O ^c	.77	1.20	.34 ***	.95	34.84 ***	34.97 ***

Note. ^aControlling for gender, education, and years of experience at the current center;

^b Organizational citizenship behavior-individual level;

^c Organizational citizenship behavior-organization level.

* $p < .05$;

** $p < .01$,

*** $p < .001$.