

A Harsh and Challenging World of Work: Implications for Counselors

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The author presents some of the health risks and economic and job insecurities involved in working in the United States. He suggests ways for counselors to amend their practices to accommodate the changing work environment and to help clients prepare for and deal with the economic and physical realities of the job market.

“Let me out!” victims screamed. Trapped workers pounded on blocked and locked doors trying to escape as a fire raced through a chicken-processing plant in Hamlet, North Carolina on September 3, 1991. Twenty-five died and 50 were injured. The plant was never inspected for worker safety during its 11-year history of operation; the company had no sprinkler system or fire evacuation plan. Is this a melodramatic account of a tragic but unusual event? Unfortunately not.

As many as 200 persons die each day in the United States because of work-related injuries or illness. In addition, each year approximately 9 million persons are injured on the job; 2.5 million of these injuries are serious; and 70,000 become permanently disabled (National Safe Workplace Institute [NSWI], 1992a). Individuals suffering from work-related psychological disorders number in the tens of thousands each year (National Institute for Occupational Safety and Health [NIOSH], 1986i). And among the 2 million children who work illegally, several hundred are killed on the job each year (Kolata, 1992). These startling and disturbing statistics are all the more so because many of these deaths, injuries, and disorders are the result of safety regulations not being enforced and violators who are not punished (U.S. General Accounting Office [USGAO], 1990).

There are many other challenges faced by workers in addition to health threats. Job insecurity, unemployment, and underemployment are obvious ones. Others include balancing work and family roles; discrimination and harassment; fighting for a job or career advancement in a highly competitive environment; and adjusting to boring, low-paying, dead-end jobs that offer little hope for the future.

The purpose of this article is to draw counselors' attention to two harsh realities faced by workers today—threats to health and economic security—and their implications for how counselors think about work and practice counseling. The fact that these two issues are rarely discussed in the counseling literature adds weight to their importance and the need for counselors to consider how they make an impact on their work. Threats to health and economic security are considered first, followed by implications for counselors.

THREATS TO HEALTH

Job-Related Deaths, Injuries, and Illnesses

The NSWI (1992a) analyzed death certificates across the country for 1987. They concluded that in that year between 47,377 and 95,479 people died from work-related disease and injury. This estimate is comparable with the most commonly quoted annual estimate of 100,000, according to a 1985 Office of Technology Assessment report (U.S. Congress, 1985). Taking the midpoint of the range estimated

by NSWI, a conservative estimate of workers who died in 1987 is 71,428: an average of 195 each day.

The NIOSH and the Association of Schools of Public Health identified the 10 leading occupational diseases and injuries (NIOSH, 1986a). These diseases and disorders are briefly summarized here to acquaint counselors with their nature, magnitude, the industries in which they are most likely to occur, and which may manifest themselves in counseling practice.

Occupational lung diseases. This category includes such diseases as silicosis, asbestosis, coal workers' pneumoconiosis, occupational asthma, and lung cancer. Diseases of this type are caused by inhalation of toxic substances including dusts (asbestos, silica, cotton, coal, and chemicals), gases or fumes, and aerosols (bacteria, viruses). The likelihood of toxic exposure can be high; for example, an estimated 1.2 million workers are potentially exposed to silica dust alone (NIOSH, 1986h). Tragically, the U.S. has a long history of employers who have knowingly endangered workers' lungs, for example, in the coal (Smith, 1987) and the asbestos (Castleman, 1986) industries.

Musculoskeletal injuries. These injuries include acute and chronic injury to muscles, ligaments, nerves, bones, and joints. Musculoskeletal injuries are the leading cause of disability of people in their working years; more than 19 million persons are afflicted at some time during their working lives (NIOSH, 1986c). High-risk industries include construction, food processing, and manufacturing. Nearly one half of all workers are affected at some time. These injuries can often be prevented by ergonomically designed work stations and tool design (Armstrong, 1992) as well as by enlightened operating procedures by management.

The most common musculoskeletal injury is repetitive motion illness, or RMI, which is the leading occupational illness in the U.S. To increase productivity, many jobs are now designed in a way that requires workers to perform a few repetitive tasks at a rapid rate, thousands of times per day. Hosiery workers pack 10,000 pairs of pantyhose by hand each shift; poultry workers pull the guts out of 90 birds a minute; and postal workers average 180 keystrokes per minute—well over 60,000 strokes a day. Symptoms of RMI include swelling, numbness, pain, burning, and muscle weakness (Lippin, 1992).

Occupational cancers. It is estimated that approximately 3 to 9 million workers today are potentially exposed to carcinogens at work. Some of the industrial agents associated with cancer are wood dust, chromium, benzene, and asbestos. It is likely that there are many carcinogens present in the workplace that have not yet been identified (NIOSH, 1986f). Furthermore, 1,000 to 3,000 new chemical products are introduced into the workplace each year; few have been tested for toxicity (USGAO, 1990). Occupationally induced cancer usually

occurs decades after the exposure that caused it to begin, so it is often difficult to recognize what occupations pose a risk and for victims to claim compensation.

Severe occupational traumatic injuries. In this type of injury, the skin and bones are broken. At least 10 million persons suffer from these injuries on the job each year; 30% of these are severe, and at least 10,000 are fatal. Occupational trauma is second only to auto accidents as a cause of death in the U.S. (NIOSH, 1986j).

Occupational cardiovascular diseases. Millions of workers are currently exposed to work-related factors associated with an increased risk of cardiovascular disease, such as coronary heart disease and hypertension. More than 1,500 chemicals have been identified as having possible cardiovascular effects. Psychosocial factors associated with such diseases include work overload (e.g., being employed at two jobs), personality type, anxiety, sleep disturbances, and the administrative organization of the workplace (NIOSH, 1986g).

Disorders of reproduction. Reproductive disorders include impotence, infertility, birth defects, low birth rate, spontaneous abortion, and various genetic diseases. They have been associated with certain industrial processes (e.g., rubber manufacture, laboratory work, exposure to organic solvents); video display terminals; and exposure to inhalant anesthetic agents (for female operating-room personnel), sterilizing agents, metals (e.g., lead, cadmium, mercury), and physical agents (e.g., microwave radiation, heat, and vibration; NIOSH, 1986b).

Neurotoxic disorders. More than 750 chemicals have been found to be potentially neurotoxic, and it is estimated that 8 million workers are exposed full time to such agents. Furthermore, it is expected that these numbers will rise with the trend toward increased manufacture of organic chemicals known or suspected to have neurotoxic effects. These chemicals may affect the peripheral nervous system. Peripheral neuropathy is one of the most serious illnesses; symptoms include numbness and tingling of hands and feet followed by clumsiness and incoordination. These chemicals can also attack the central nervous system, including personality and cognitive functions and, therefore, are of particular interest to counselors. Neurotoxic effects include psychoses and suicidal tendencies, shortened attention span, lack of alertness, delusions, depression, anorexia, speech impairment, fatigue, restlessness, sleep disturbances, hallucinations, and loss of memory (NIOSH, 1986d).

Noise-induced hearing loss. Hearing loss is irreversible and increases in severity with continued exposure to noise. Hearing impairment is associated with miscommunication, lowered self-esteem, anxiety, and irritability. Approximately 11 million workers are exposed to potentially hazardous noise in agriculture, construction, forestry, government, manufacturing, mining, and transportation industries (NIOSH, 1986e).

Dermatological conditions. Occupational skin disorders are of three types. First are skin diseases; these include: (a) contact dermatitis, in which inflammation of the skin is caused by exposure to chemical or physical substances such as soaps, solvents, or plastics and resins; (b) skin cancer; and (c) skin infections (e.g., herpes simplex among dentists, nurses, physicians). Second are skin injuries such as burns, lacerations, and punctures. Third is percutaneous absorption, in which the skin absorbs chemical substances that cause acute or chronic systemic toxicity. Together, these skin disorders account for a significant proportion of death and disability in the workplace. For example, in 1984, dermatological diseases accounted for 34% of all cases of chronic occupational disease (NIOSH, 1986a).

Psychological disorders. These disorders include maladaptive behavioral and lifestyle patterns, chemical dependencies and alcohol

abuse, and affective disturbances such as anxiety, depression, and job dissatisfaction. They are most heavily concentrated among workers with lower income, lower education, fewer skills, and less prestigious jobs, but they afflict persons at all occupational levels (NIOSH, 1986i). For example, health professionals (e.g., physicians, dentists, nurses, and health technologists) have higher than expected rates of suicide and drug abuse (Hoiberg, 1982).

According to a NIOSH report (1986i), the number of psychological disorders are likely to increase because of occupational and demographic trends. Many of the fastest growing occupations are those having the highest risk factors: health service professionals and jobs in the service sector. Computer and robotics advances are projected to result in job displacement and lower paying jobs.

Health threats in an economic-legal context. To fully appreciate the significance of these health threats, they need to be put in the context of a highly competitive work environment motivated by profits. Businesses exist to make profits, and managers must weigh the costs of protecting workers against their ability to show a profit. For example, negative publicity, liability suits, and workers' compensation awards are potential economic costs; however, the threat of fines for safety violations is insignificant for most businesses. For example, in 1988, the average assessed penalty by the Occupational Safety and Health Administration (OSHA) for a serious violation was \$261. The likelihood of an organization being inspected for safety violations is minimal and decreasing. In 1989 only 3% of the worksites that OSHA identified as high hazard for health reasons were inspected (USGAO, 1990).

Employers who disregard workers' health and public health have little to fear from the law. A notorious example is the asbestos industry, in which corporate executives knowingly and recklessly abused the health of workers and the public. More than 200,000 persons will die by the year 2000 from asbestos-caused cancer and other deadly illnesses, and the projected medical costs are a staggering \$500 billion (Castleman, 1986). None of the company officials involved was prosecuted for criminal conduct. "White-collar crimes" such as these are usually not treated as crimes, but when they are, the penalties suggest a misdemeanor rather than a felony. For example, the penalty for the willful violation of federal law resulting in the death of a worker is 6 months imprisonment (NSWI, 1992a).

And, finally, the economic-legal context must include the powerlessness of workers to protect themselves from the negligent or uncaring employer. In theory, work is an "at will" relationship in which workers can withdraw their labor and quit their employer at anytime. In reality, most workers do not have that freedom because of the lack of job openings, family and financial responsibilities, and other economic and psychological costs. Although workers have the right to organize and be represented by a labor organization, this right has been significantly compromised during the past decade. Employers can easily violate labor laws, because cases can often be delayed for years and penalties are usually negligible (Novak, 1991). This is particularly unfortunate because labor unions have often been the only meaningful force protecting workers' health.

THREATS TO ECONOMIC SECURITY

Most workers are finding it more and more difficult to meet their financial needs; they are also losing ground to the wealthy. Average family income in the U.S. has dramatically shifted among income groups in the last decade. The income for the wealthiest families has increased, and those in the middle and lower brackets has decreased. For the years 1977-1988, for example, average family income for

those families in the lowest 10% income bracket dropped 14.8%; the income for the middle 50% bracket dropped 6.3%; and those in the top 10% bracket saw their income rise 16.5%. The families in the top 1% saw their income rise 49.6%, an average of \$134,513. This gap between those earning at lower income levels and those at the higher levels is growing, and it is greater than in any of the other major Western nations. This increasing concentration of income among the wealthy has come largely as a consequence of federal policies adopted in the past decade (Phillips, 1990) and has been accompanied by an increase of those in poverty as well as a lower standard of living for most workers.

The proportion of the working poor is increasing. Of full-time workers today, 18% do not earn enough to place them above the government's poverty line (\$13,091 in 1992). This is up from 12% in 1979 (U. S. Department of Commerce [USDOC], 1994). The proportion of men with high school diplomas who cannot earn enough to support a family of four above the poverty line is disturbing: in 1989, it was 42.7% among African Americans, 35.9% for Hispanic Americans, and 22.6% among Whites (U.S. Department of Labor [USDOL], 1992).

Many workers face other financial woes. More and more workers find they cannot afford health insurance premiums and are leaving their families uninsured (Ready, 1991). And the likelihood of getting a well-compensated job is not very promising. Most of the occupations with the largest job growth projected between 1988 and 2000 (Pilot, 1992) are ones that provide relatively low wages and limited benefits, such as retail salespersons, janitors, waiters and waitresses, office clerks, nursing aids, and truck drivers.

Lack of Job Security

Many people are concerned about keeping their jobs, and they should be. During the 1970s and 1980s, one in every four manufacturing jobs was eliminated (Harrison & Bluestone, 1988). The 1980s saw millions of management jobs eliminated in corporate America. "Cradle-to-grave" job security for most workers has vanished; company loyalty has declined markedly since the 1960s (Kanter & Mirvis, 1989). Being tired or laid off is a situation that most workers will face, probably several times in their working life, and it can be a very difficult time. The worker must cope with both the job loss and the stress of finding a new one, and "the interplay of loss and stress often leads to an emotional roller coaster which reduces self confidence and interferes with interpersonal relationships during the period of job search" (Amundson & Borgen, 1992, p. 316). Those who are terminated also face the loss of their health insurance along with their job. A study of data for 1983-1984 (Podgursky & Swaim, 1987) showed that such workers are likely to remain uninsured for an extended time, even after new employment is secured.

To summarize, millions of workers today are beset with challenges that threaten their economic, physical, and mental health. Many (a) die or are injured as a result of their work, (b) are unemployed, or will be, (c) will lose their health insurance, (d) are unprotected against the unscrupulous employer, and (e) are becoming less and less able to financially support themselves and their families.

IMPLICATIONS FOR COUNSELORS

Career counseling has been heavily influenced by notions of implementing one's self-concept through career choice, finding meaning in work, and self-development over the life span. Although these ideas are important, they largely ignore the fact that most workers do not find self-fulfillment and meaning in their work (Marshall, 1983; War-

nath, 1975). Furthermore, the nature of work has changed; it has become more automated, profit oriented, competitive, and dynamic. Job security, to the extent that it exists, rests primarily on marketable skills, not on job seniority or on the paternalism of a company. It is essential that counselors understand these realities of work and guide their clients accordingly. The following are offered to counselors as guidelines for practice.

Emphasize That Work Is Primarily an Economic Relationship

Counselors can teach individuals that work is fundamentally an economic exchange: labor for pay. Workers are hired to produce goods and services, to maintain and increase company profits. They are hired to use their knowledge and skills, which determine their economic value to an employer. Counselors can help their clients understand the implications of this economic reality.

First, counselors can help clients become knowledgeable about job skills, help them to answer questions such as, What are skills? What are my skills? How can I use the skills I enjoy using, my "motivated skills," to give me a career direction? How can my skills be sharpened or expanded? Are they marketable? Transferable to other jobs? How do I learn what skills are marketable? How do I communicate my skills to employers? Counselors can help clients understand that marketable skills lead to greater pay and advancement, self-esteem, employment opportunities, and freedom to leave jobs where unsafe working conditions exist.

Second, counselors can teach individuals how to look out for their own self-interests. For example, employers will make decisions based on the company's economic interests, even though their decisions in some cases may be illegal, unethical, or physically harmful to employees. Individuals need to learn the caveat, "Let the worker beware." Similarly, workers need to be alert to factors that affect the economic health of their employer. What are the trends in their industry? Are manufacturing jobs being diverted to other countries where labor costs are less? What business strategies is the employer using to enhance profitability? Are there laws or regulations pending that will affect the business?

Third, counselors can help workers limit their emotional involvement with their employer. Unconditional company loyalty is for the naive; "be loyal to yourself" is the primary rule. That is not to say that individuals should not perform their jobs well. They should, to make themselves more economically valuable. In this way they can make themselves less vulnerable to layoffs, expect better references from their bosses, and position themselves for raises, advancement, or other jobs. Workers need to keep in mind that they are employed for their labor, not because of who they are as persons. They may be laid off at any time. Their loyalties and friendships need to be focused primarily outside the work setting.

Promote the Concept of the "Free Agent Worker"

Vonk and Hirsch (1992) took the concept of "free agent" from baseball and applied it to management. They wrote, "Where we as managers once expected to find a good job and spend our entire careers with a paternalistic organization, we no longer have that security . . . free agent managers, have chosen to proactively manage their own careers, scanning opportunities both within the organization and across firms and industries, maintaining knowledge of their own market value while at the same time taking every opportunity to increase that value as they perform the functions of their jobs" (p. 151).

Counselors can broaden this "free agent manager" concept to include all working individuals. They can teach the following credo: Seek those assignments that look best on your resume and avoid those

that detract from your marketability, cultivate networks, protect yourself psychologically and financially, be ready to move and take advantage of new opportunities, and look at changing jobs as a challenge. To apply this, concept, counselors may need to teach individuals skills in networking, information interviewing, job hunting, job interviewing, mentoring, career exploration, and self-managed change. The free agent idea affirms the earlier recommendations of acknowledging one's economic value, having a skills orientation, and limiting one's emotional ties to the employer.

Avoid Portraying Work as the Prime Source of Self-Esteem and Meaning in One's Life

In 1975, Warnath criticized the counseling profession for its romantic and unrealistic view of work: "The connection between work and the confirmation of one's worth as a human being has been severed for the greater majority of our population [as a consequence of the changed nature of work, e.g., automation, meaningless job activities]" (p. 428). He concluded that for the majority of people work is not, and never can be, fulfilling.

Marshall (1983) argued that the underlying American values that equate occupational success with high self-esteem and the belief that work is meaningful are unrealistic for most workers, particularly those who are unemployed or the large numbers who are employed in low-status, low-paying jobs. For example, in 1989, only 25.9% of American workers were employed in managerial and professional specialties; the overwhelming majority, 74.1%, were employed in traditional blue-collar, service, and lower echelon white-collar occupations (USDOC, 1991). She recommended that counselors emphasize a meaningful lifestyle, not a meaningful job. Individuals can be helped to consider how their hobby; sport; community, educational, and spiritual activities; and relationships with others can be used to increase personal fulfillment and satisfaction along with their work.

In light of Warnath (1975) and Marshall's (1983) comments, as well as the ideas in this article, counselors who view work as being a principal source of self-esteem and meaning in one's life may want to reconsider. Burns (1980) argued persuasively that this attitude of "your work is your worth" is a dysfunctional cognition that can lead to lowered self-esteem and depression. "Being productive and doing well can be enormously satisfying and enjoyable. However, it is neither necessary nor sufficient to be a great achiever in order to be maximally happy. You don't have to earn love or respect on the treadmill, and you don't have to be number one before you can feel fulfilled and know the meaning of inner peace and self-esteem" (p. 308). Because this attitude is at the core of Western culture and our work ethic, counselors need to examine whether this is one of their beliefs. Counselors can help individuals replace this dysfunctional cognition with one that will lead to greater fulfillment, inner peace, and self-esteem.

Reconsider the Goals of School Career Development Programs

A review of books and workbooks developed for career development programs at the high school and college levels shows that the challenges described here—health threats, financial insecurity, and job insecurity—are seldom, if ever, mentioned. The fundamental truth that work is an economic relationship is not emphasized. These realities need to be included. For example, if handled properly, students could profit from talking with individuals coping with (a) a low-paying, dead-end job, (b) unemployment, or (c) job-related disabilities. Students need to realize that they will enter a tough and challenging world of work that requires their initiative, skills, and perseverance. The intent is not to frighten or discourage them, but to

give them a realistic view of the challenges they will face and to show them how to prepare for them.

National efforts to influence the direction of career development programs should reflect the workplace realities described here. For example, although the National Career Development Guidelines (National Occupational Information Coordinating Committee, 1989) at the high school level include many important competencies, others need to be considered. For example, students should be able to do the following:

1. Understand the nature of the health threats that exist in the workplace, the work hazards associated with different industries and occupations of interest, and how to protect themselves.
2. Demonstrate an understanding that job security does not exist in most occupations and that having marketable skills is the key to being employed.
3. Understand that the fastest growing occupations are ones of low-status and low pay and that the key to better jobs is through increasing one's knowledge and skills in areas that are economically valued.
4. Understand that employers' interests are economic, and as a consequence they make decisions based on profitability, even though those decisions may be unethical, illegal, or harmful to workers' health.

These and other related ideas can be found in a recent book, *Job Skills for the 21st Century: A Guide for Students* (Jones, 1996).

School counselors can help by supporting efforts to increase students' workplace know-how and by teaching skills needed by all workers (USDL, 1991). These "foundation skills" can be organized into four groups (Jones, 1996):

1. Basic Skills: reading, writing, mathematics, speaking, and listening
2. Thinking Skills: creative thinking, problem solving, decision making, and visualization
3. People Skills: social, negotiation, leadership, teamwork, and cultural diversity
4. Personal Qualities: self-esteem, self-management, and responsibility

Learning these essential, marketable job skills can provide a strong foundation for students' success in the workplace. School counselors can play a vital leadership role by encouraging efforts to teach these skills to students and integrating these efforts with their career development programs.

School counselors should also reappraise their career development programs in light of the new School-to-Work Opportunities Act (Brustein & Mahler, 1994; *Program Guide*, 1994). According to this initiative, students should select a "career major" not later than the beginning of the 11th grade, which means that students choose "a coherent sequence of courses or field of study that prepares a student for a first job and that—(a) integrates academic and occupational learning, integrates school-based and work-based learning, establishes linkages between secondary schools and postsecondary educational institutions; (b) prepares the student for employment in a broad occupational cluster or industry sector . . . (e) results in the award of . . . (iii) a skill certificate" (School-To-Work Opportunities Act of 1994, pp. 572-573). Clearly, school career development programs

need to go beyond career awareness, exploration, and planning to include a strong job skills, work-based orientation.

Consider Occupational Health Threats When Counseling

There are three areas in which this suggestion applies. First, when selecting a career or an occupation, one factor to consider is whether there are any known hazards associated with the occupation. When looking at dentistry, for example, individuals should consider the risk of contracting hepatitis or HIV, just as they consider potential earnings and job outlook. Because information on hazards is frequently not readily available, it may require further research. When instructing clients on information interviewing, for example, counselors need to encourage them to inquire discreetly about any workplace hazards. If a person is considering a job working all day at a computer as an airline reservations agent, what safeguards are taken to protect him or her from repetitive motion illness? Are there frequent breaks? Is the workstation ergonomically designed? Another source of information is *The Monthly Labor Review*. Recent articles have appeared on safety and health in the fabricated structural metal industry (Personick, Biddle, & Lettman, 1991), and eating and drinking places (Personick, 1991). This informative and inexpensive government publication is an excellent one for counselors.

Second, workplace safety may be an important consideration when choosing a geographical location in which to work. How well does the state protect its workers? What does it offer with respect to unemployment benefits and compensation of injured and diseased workers? How well does it enforce occupational safety laws? Two publications, *Basic Information on Workplace Safety & Health in the United States*, 1992 edition (NSWI, 1992a) and *The Climate for Workers in the United States: 1990* (MacLachlan & MacLachlan, 1991) rank states on these matters. The latter publication also provides information by state on the opportunity for employment and advancement for women and African Americans. It reports the percentage of Blacks and women employed in what traditionally have been predominantly White, male occupations—which are typically better paid, carry higher status, and require higher skills than other occupations.

Third, when counseling with working individuals, counselors need to be mindful that workplace hazards may be contributing significantly to the client's problem. As described earlier, for example, it is estimated that 8 million workers are exposed daily to neurotoxic chemicals, and these can affect personality and cognitive functions. In addition, there are a number of psychosocial factors at work that can increase the risk of psychological disorders. NIOSH (1988i) has identified several:

1. Workload and workplace: The amount of control over job demands is the most decisive factor in determining health consequences. For example, machine-paced assembly workers suffered the most anxiety, depression, and irritation among 23 occupations studied.
2. Work schedule: Rotating shifts and night work can have significant negative effects. Unfortunately, more and more workers are having to work under these conditions.
3. Role stressors: Unclear job duties (role ambiguity) and role conflict are linked to job tension and dissatisfaction. A related problem is the multiple role demands of work and family.
4. Career/Security factors: Lack of job security, under- or over-promotion, and fear of job obsolescence have been related to adverse psychological and physical health effects.
5. Interpersonal relations: Support from friends and family and good relationships with supervisors and coworkers can help buffer workers from negative job demands.
6. Job content: Routine, repetitive work is associated with low job dissatisfaction and poor mental health.
7. Participation/Control: Having the opportunity to offer input on decisions or actions that affect their jobs and how they are performed can help reduce the risk of mental illness.

Counselors wishing to become better informed about workplace hazards should consider a course offered by the American Industrial Hygiene Association and the National Safety Council called "Fundamentals of Industrial Hygiene." It is designed for professionals with limited experience in this area and is offered several times a year. Another source is the *Encyclopedia of Career Change and Work Issues* (Jones, 1992), which has several articles on this topic.

Monitor Teenage Part-Time Employment

Many of the work hazards described here can also affect working teenagers. For example, eating and drinking places, where many work, report large numbers of workplace injuries and illnesses (Personick, 1991). In 1991, it is estimated that more than 77,000 teen-agers suffered work-related injuries or illnesses (NSWI, 1992b).

Another potential problem is the negative effect of part-time employment on school performance. This is illustrated by the findings of a recent study by Steinberg and Dornbusch (1991) using a heterogeneous sample of 4,000 15 through 18-year-olds: "Students who work more hours each week earn lower grades, spend less time on homework, pay attention in class less often, exert less effort in school, are less involved in extracurricular activities, and report higher levels of mind wandering in class, more school misconduct, and more frequent class cutting . . . higher rates of drug and alcohol use, higher rates of delinquency, and higher levels of psychological and psychosomatic distress" (pp. 307-308). Students who worked did not have any advantages over those who did not work with respect to self-reliance, work orientation, or self-esteem. The researchers did not find a threshold in hours worked above which the results were dramatically negative. In general, it can be said that the more hours worked, the more likely those negative effects would occur. The results of this study largely replicated the findings of earlier studies (e.g., Greenberger, Steinberg, & Vaux, 1981; McNeil, 1984; Wirtz, Rohrbeck, Charner, & Fraser, 1987), which suggest that parents, educators, and counselors need to protect teenagers from the negative effects of part-time work, such as limiting their employment to fewer than 10 hours per week and monitoring its effects on their school work and social development. In addition, these adults need to be aware of the potential work hazards in teenagers' places of work.

Advocate for an Improved Workplace Environment

Although few counselors have expertise in industrial hygiene, they can join with those who do. For example, many communities have Committees for Occupational Safety and Health, or COSH groups. These are coalitions of local labor unions, health, medical, and legal professionals, and safety and health activists who (a) monitor city, state, and federal government legislatures and agencies responsible for enforcing safety and health laws and regulations; and (b) advocate for actions that improve working conditions. This emphasis on prevention by making the environment safer and more nurturing, according to Lewis and Lewis (1989), is an essential role of the community counselor, and they assert that counselors must also learn to recognize expertise in other people, professional or nonprofessional,

and work with them in interdependent teams to bring about changes in the community.

The professional organizations of counseling, such as the American Counseling Association and the National Career Development Association, can play an important advocacy role by joining with other organizations in pushing for such things as increased funding for the agencies charged with enforcing health and safety regulations, stiffer fines and criminal penalties for individuals and companies who endanger workers' health and safety, and a stronger National Labor Relations Act to create a level playing field between labor and management. Outside of these health issues, professional organizations can push for actions that improve working conditions in such areas as sexual harassment, discrimination, parental leave, unfair use of testing, and safeguarding retirement benefits.

Counselors who work in organizations can improve the work environment in several ways. First, those working in Employee Assistance Programs (EAP) are well positioned to identify work-related problems and take action toward ameliorating them through prevention and environmental changes. There are important steps companies can take to minimize sexual harassment (Klein, 1992). Second, EAP counselors can encourage workers to adopt a free agent attitude toward their job, emphasizing the importance of developing knowledge and skills that are transferable. Third, counselors can advocate for company policies that emphasize human resource development. For example, there is considerable interest in creating high-performance businesses by adopting the ideas of W. Edwards Deming (1982), the "father" of the Japanese economic miracle. His 14 points leading to increased performance and quality products and services include, "remove barriers that rob people of pride of workmanship" and "encourage education and self-improvement for everyone."

In conclusion, the world of work today is a harsh and challenging one for most people. In acknowledging this reality, counselors may need to reappraise their view of work and their counseling role in it. Counselors can play a vital role in helping individuals prepare for and cope with work, as well as help transform the workplace into a safer and more rewarding environment.

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