

# **LICENSED SOCIAL WORKERS IN HEALTH, 2004**

## **Chapter 7 of 7**

### **Perspectives on Social Work Practice**

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**March 2006**

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## **Chapter 7. Perspectives on Social Work Practice**

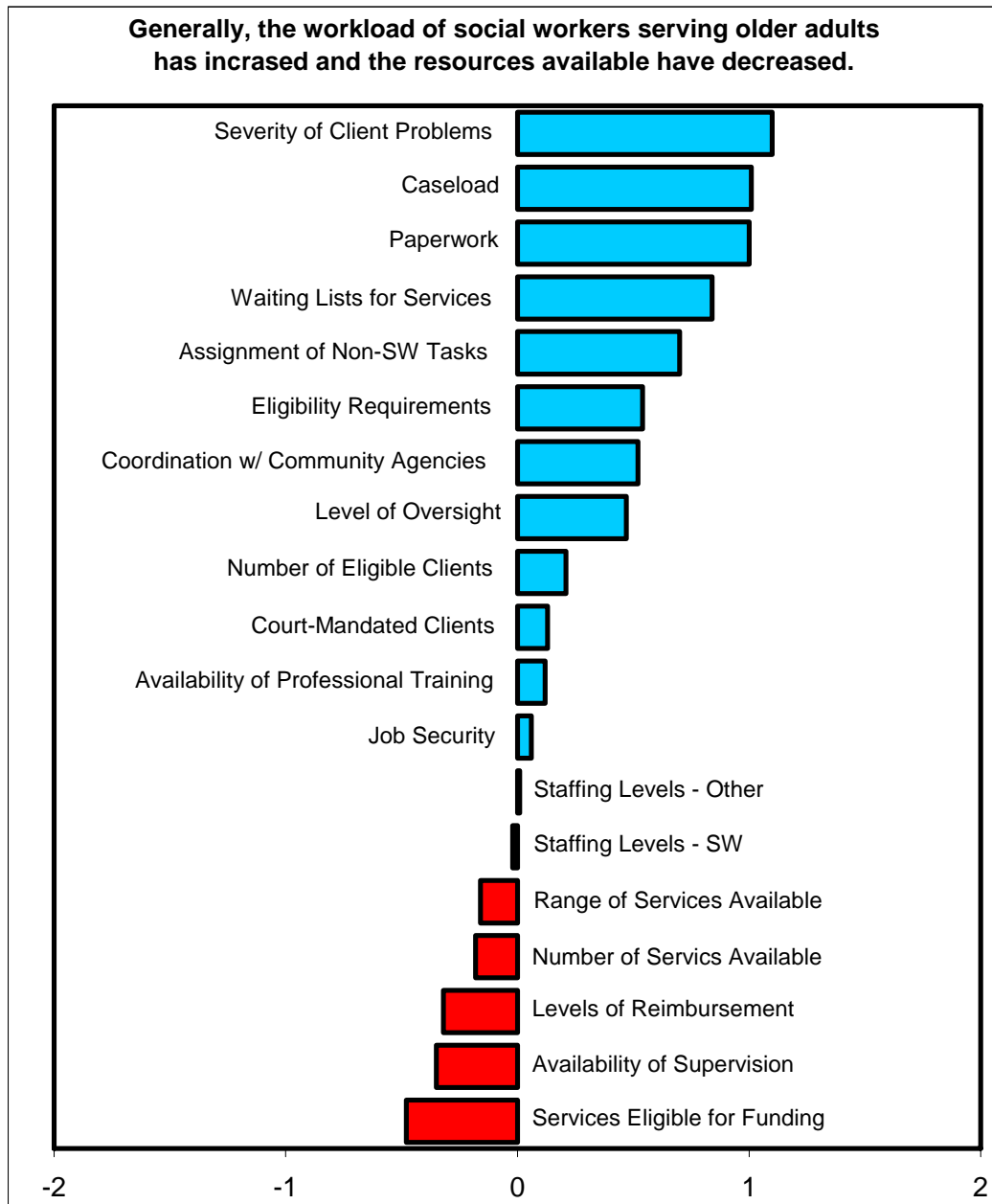
### **Summary of the Findings**

- Social workers have experienced increased demands in their work, but decreased resources and supports over the past two years. Increases in paperwork, severity of client problems, caseload size, waiting lists for services and assignment of non social work tasks are the most frequently reported changes in practice.
- A majority of Health social workers are satisfied with their access to resources for clients with the exception of access to mental health services.
- Health social workers are significantly less satisfied with client access to mental health services than licensed social workers overall (43% versus 59%).
- Health social workers practicing in rural areas are least satisfied with access to all types of resources, unlike social workers in rural areas in other practice areas.
- Social workers employed in the for-profit sector report the greatest access to resources.
- Over four-fifths of social workers believe they are effective in helping clients.
- Three quarters of licensed Health social workers plan to remain in their current position in the next two years, consistent with licensed social workers overall.
- Higher salary, lifestyle/ family concerns, more interesting work and job stress are the primary reasons given for considering job changes, consistent with social workers overall.

### **Changes in Social Work Practices and in the Service Delivery System**

Licensed Health social workers report significant changes in social work practice and the service delivery system in the past two years that have increased barriers to service (Figure 48). More than three-fifths of these social workers report increases in severity of client problems (76%), caseload size (71%), paperwork (69%), and waiting lists for services (62%).

**Figure 1. Ratings by Health Social Workers of Changes in Social Work Practice and Changes in the Social Work Delivery System in the Past Two Years**



Perspectives on changes in social work practice among Health social workers generally mirror those of social workers overall. Differences reported among Health social workers are seen in Tables 1 and 2. As shown in Table 1, MSWs are more likely to experience barriers than BSWs including: decreases in the availability of supervision; decreases in non-social worker staffing levels; increases in severity of client problems; decreases in services eligible for funding, number of services available and range of services available; and increases in clients receiving services for reasons other than personal choice (e.g. court-mandated). BSWs, in contrast, were more likely to report increases in paperwork and in the assignment of non-social work tasks.

**Table 1. Percentages of Social Workers Reporting Selected Changes in Factors Related to Social Work Practice and Service Delivery Systems**

Social Work Practice Barriers	All Social Workers	Health Social Workers		
		All	MSWs	BSWs
<b>Practice of Social Work</b>				
Availability of supervision decreased	30%	36%	37%	29%
Levels of reimbursement decreased	46%	44%	44%	46%
Staffing levels decreased - SW	33%	30%	32%	22%
Staffing levels decreased - other	34%	30%	33%	18%
Job security decreased	30%	27%	27%	31%
Availability of professional training decreased	17%	18%	18%	13%
Level of oversight increased	52%	45%	46%	41%
Coordination with community agencies decreased	11%	7%	7%	7%
Assignment of non-SW tasks increased	56%	53%	51%	60%
Waiting lists for services increased	60%	62%	63%	63%
Paperwork increased	75%	69%	67%	78%
Caseload increased	68%	71%	71%	73%
Severity of client problems increased	73%	76%	76%	70%
<b>Service Delivery System</b>				
Services eligible for funding decreased	50%	49%	50%	43%
Number of services available decreased	40%	39%	41%	27%
Range of services available decreased	38%	37%	38%	27%
Clients court-mandated increased	44%	25%	25%	17%
Number clients eligible increased	40%	39%	38%	41%
Eligibility requirements increased	51%	51%	51%	52%

Differences by employment settings are also notable, as shown below in Table 2. Health social workers in hospices report fewer negative changes as compared to those in hospitals and health clinics.

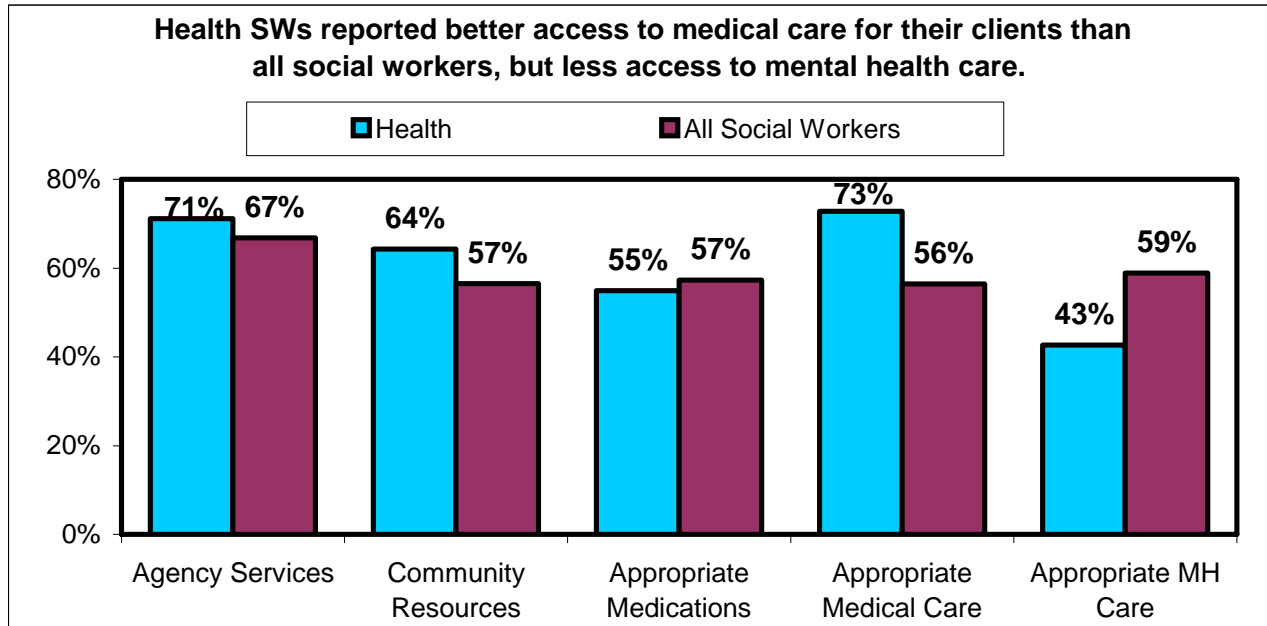
**Table 2. Percentages of Social Workers Reporting Selected Changes in Factors Related to Social Work Practice and Service Delivery Systems**

Social Work Practice Barriers	All Social Workers	Health Social Workers			
		All Health	Hospitals	Health Clinics	Hospices
<b>Practice of Social Work</b>					
Availability of supervision decreased	30%	36%	36%	37%	33%
Levels of reimbursement decreased	46%	44%	50%	44%	19%
Staffing levels decreased - SW	33%	30%	35%	23%	18%
Staffing levels decreased - other	34%	30%	34%	28%	26%
Job security decreased	30%	27%	26%	23%	24%
Availability of professional training decreased	17%	18%	17%	15%	25%
Level of oversight increased	52%	45%	46%	48%	37%
Coordination w/ community agencies decreased	11%	7%	7%	10%	2%
Assignment of non-SW tasks increased	56%	53%	54%	61%	27%
Waiting lists for services increased	60%	62%	65%	54%	42%
Paperwork increased	75%	69%	68%	79%	59%
Caseload increased	68%	71%	73%	80%	72%
Severity of client problems increased	73%	76%	81%	71%	65%
<b>Service Delivery System</b>					
Services eligible for funding decreased	50%	49%	56%	50%	16%
Number of services available decreased	40%	39%	43%	38%	13%
Range of services available decreased	38%	37%	41%	38%	11%
Clients court-mandated increased	44%	25%	25%	23%	14%
Number clients eligible increased	40%	39%	36%	26%	58%
Eligibility requirements increased	51%	51%	53%	52%	30%

### Satisfaction with Resources and Skills

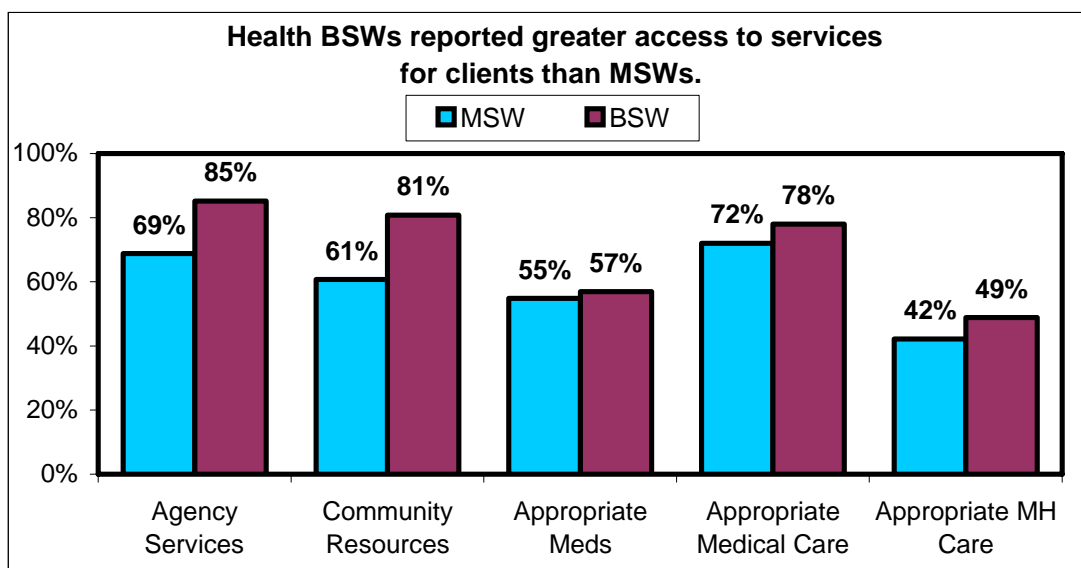
A majority of Health social workers are satisfied with their access to agency services (71%), community resources (64%), appropriate medications (55%), and appropriate medical care for their clients (73%). As seen in Figure 2, Health social workers are more satisfied than social workers overall with their access to appropriate medical care, but less satisfied than others with their access to appropriate mental health care. Mental health services are also the area of greatest dissatisfaction (30%) for social workers in this practice area, compared to agency services (8%), community resources (12%), appropriate medications (20%), and appropriate medical care for their clients (9%).

**Figure 2. Percentages Satisfied with Access to Selected Types of Resources, Health Social Workers and All Social Workers**



BSWs in this practice area are more likely to be satisfied with their access to all types of resources than MSWs. This difference is particularly pronounced in regard to agency services and community resources, as shown below in Figure 3.

**Figure 3. Percentages Satisfied with Access to Selected Services for Clients, by Degree**



While a small cohort among Health social workers, social workers in rural areas are the least satisfied with all types of resources. This is somewhat different than the pattern seen among

social workers overall. Social workers in rural areas overall tend to be less satisfied with access to medications, more satisfied with access to medical care, and do not differ in their satisfaction with access to other types of resources. It is not clear why this geographic disparity is more pronounced among Health social workers.

**Table 3. Percentages Satisfied with Access to Selected Types of Resources, by Urban/Rural Location of Practice**

Type of Resources	Metropolitan Area	Micropolitan Area	Small Town	Rural Area
Agency Services	71%	74%	67%	57%
Community Resources	65%	70%	58%	43%
Appropriate Meds	56%	54%	57%	43%
Appropriate Medical Care	73%	69%	79%	72%
Appropriate MH Care	43%	46%	42%	29%

Health social workers in the for-profit sector reported the greatest access to resources, as shown below in Table 4. Those social workers employed in hospice settings tended to be more satisfied with nearly all types of resources than those in hospitals and health clinics.

**Table 4. Percentages Satisfied with Access to Selected Types of Resources by Sector and Setting of Primary Employment**

Type of Resources	Sector			Setting		
	Public	Non-Profit	For-Profit	Hospital	Health Clinic	Hospice
Agency Services	68%	69%	78%	66%	65%	91%
Community Resources	68%	62%	70%	62%	68%	70%
Appropriate Meds	54%	55%	56%	50%	59%	81%
Appropriate Medical Care	61%	77%	74%	71%	80%	86%
Appropriate MH Care	44%	37%	53%	39%	53%	49%

### *Perceived Satisfaction and Efficacy*

Health social workers are very similar to social workers overall in their reported satisfaction with their efficacy in helping others. Social workers in Health report that that they were highly effective in helping clients with a range of problems (93%); as well as in improving the quality of life for clients (86%); helping clients address a few key problems (82%); helping clients resolve crisis situations (79%); and helping families respond to client needs (79%).

**Table 5. Percentages Agreeing with Statements about Satisfaction/Efficacy**

Statement About Satisfaction/Efficacy	All Social Workers	Health Social Workers		
		All	MSWs	BSWs
Help clients with range of problems	91%	93%	94%	93%
Improve quality of life	87%	86%	86%	89%
Help clients address few key problems	86%	82%	83%	77%
Help clients resolve crisis situations	80%	79%	80%	73%
Help clients meet objectives	79%	72%	72%	77%
Satisfied with ability in cultural differences	74%	69%	70%	69%
Help families respond to client needs	70%	79%	77%	85%
Satisfied with ability to address complex problems	68%	75%	73%	88%
Satisfied with ability to help clients navigate	59%	68%	65%	85%
Satisfied with amount of time spend with clients	58%	51%	47%	60%
Satisfied with ability to coordinate care	54%	56%	54%	65%
Effectively respond to number of requests for help	52%	53%	51%	64%
Work with community orgs to adapt system	46%	51%	47%	71%
Satisfied with ability to influence service design	46%	40%	37%	58%

Mean levels of satisfaction with their efficacy and resources varies with the demographic location of their practice, as shown in Table 6 below. Generally, those in rural areas are least satisfied: they are least likely to say that they help clients with a range of problems, that they help families respond to client needs, that they are satisfied with their ability to help clients navigate the service delivery system or their ability to coordinate care, that they work with community organizations to adapt the service delivery system, that they are satisfied with their ability in cultural differences or their ability to influence service design.

**Table 6. Percentages Agreeing with Statements about Satisfaction/Efficacy, by Geographic Location of Practice**

Statement About Satisfaction/Efficacy	Metropolitan Area	Micropolitan Area	Small Town	Rural Area
Improve quality of life	87%	92%	79%	100%
Help clients meet objectives	72%	79%	65%	71%
Help clients with range of problems	93%	100%	92%	86%
Help clients address few key problems	82%	81%	79%	100%
Help clients resolve crisis situations	80%	78%	70%	72%
Help families respond to client needs	79%	85%	83%	71%
Satisfied with ability to help clients navigate	67%	69%	74%	57%
Satisfied with ability to coordinate care	56%	67%	57%	43%
Effectively respond to number of requests for help	54%	67%	33%	43%
Work with community orgs to adapt system	50%	69%	62%	43%
Satisfied with ability to address complex problems	76%	78%	70%	71%
Satisfied with amount of time spend with clients	49%	70%	46%	57%
Satisfied with ability in cultural differences	69%	81%	61%	43%
Satisfied with ability to influence service design	37%	62%	41%	29%

There are also differences in satisfaction by practice setting. Generally, those in hospices are the most satisfied with their efficacy, while those in hospitals and health clinics tend to be less satisfied, as shown in Table 7.

**Table 7. Percentages Agreeing with Statements About Satisfaction/Efficacy, by Employment Setting**

Statement About Satisfaction/Efficacy	Hospital	Health Clinic	Hospice
Improve quality of life	82%	90%	98%
Help clients meet objectives	68%	65%	80%
Help clients with range of problems	93%	98%	96%
Help clients address few key problems	81%	82%	85%
Help clients resolve crisis situations	78%	75%	85%
Help families respond to client needs	79%	67%	92%
Satisfied with ability to help clients navigate	65%	71%	69%
Satisfied with ability to coordinate care	53%	58%	60%
Effectively respond to number of requests for help	46%	51%	64%
Work with community orgs to adapt system	46%	58%	51%
Satisfied with ability to address complex problems	77%	71%	76%
Satisfied with amount of time spend with clients	44%	37%	73%
Satisfied with ability in cultural differences	71%	64%	69%
Satisfied with ability to influence service design	35%	29%	62%

**Satisfaction with time.** Social workers were asked whether time was adequate to address client needs. Over three-fifths of Health social workers were satisfied with time available to address presenting problems, provide clinical services, and address the severity of client problems. Differences by degree are not pronounced, but MSWs in Health are more likely than BSWs to be satisfied with time to provide clinical services, while BSWs are more likely to be satisfied with time to access basic services, address breath of problems, and participate in training, as shown in Table 8.

**Table 8. Percentages Satisfied with Time for Selected Tasks**

Satisfied with time to:	All Social Workers	Health Social Workers		
		All	MSW	BSW
Providing clinical services	71%	62%	62%	57%
Address presenting problems	70%	68%	68%	69%
Addressing severity of problems	67%	61%	60%	64%
Addressing breadth of problems	59%	48%	47%	58%
Providing services to client families	55%	58%	59%	61%
Participating in training	50%	46%	46%	52%
Access basic services	48%	59%	59%	65%
Addressing service delivery issues	43%	44%	45%	49%
Performing administrative tasks	40%	41%	43%	40%
Conducting investigations	38%	39%	39%	39%

Health social workers in hospices were most likely to be satisfied with time available for most tasks, followed by social workers in health clinics. Those in hospitals were least likely to be satisfied with time for selected tasks, as shown in Table 9.

**Table 9. Percentages Satisfied with Time for Selected Tasks, by Employment Setting**

	Hospital	Health Clinic	Hospice
Address presenting problems	60%	67%	87%
Access basic services	51%	62%	73%
Providing services to client families	54%	35%	83%
Addressing severity of problems	56%	56%	75%
Addressing breadth of problems	37%	47%	69%
Addressing service delivery issues	33%	44%	70%
Providing clinical services	54%	67%	83%
Conducting investigations	31%	41%	58%
Participating in training	42%	51%	50%
Performing administrative tasks	35%	35%	48%

## Career Plans

Three-quarters (75%) of Health social workers reported that they would remain in their current position over the next two years. Six percent plan leave employment to pursue a social work degree; 4% plan to retire; 5% plan to leave the field but remain employed; 1% plan to stop working. It is important to note that statements about career plans are informative, but not necessarily borne out in practice. Future tracking of social workers entry and exit patterns within this practice area will further assist in predicting sufficiency within the workforce.

Table 10 shows that Health social workers are somewhat more likely to plan to stay in their current position than other social workers, but are otherwise similar in their career plans.

**Table 10. Career Plans of Health Social Workers in Next Two Years, By SW Degree**

Career Option	All Social Workers	Health Social Workers		
		All	MSWs	BSWs
Remain in current position	70%	75%	74%	78%
Seek new opportunity/promotion as SW	26%	22%	23%	17%
Pursue non-degree SW training	14%	11%	12%	9%
Decrease SW hours	10%	12%	13%	6%
Increase SW hours	8%	5%	4%	7%
Pursue additional non-SW degree	7%	7%	6%	7%
Pursue additional SW degree	6%	6%	3%	17%
Retire	6%	4%	3%	6%
Leave SW but continue to work	5%	5%	4%	7%
Stop working	2%	1%	2%	2%
Other	6%	5%	6%	4%

Note: Columns do not sum to 100% because responses were not mutually exclusive.

Despite a high level of satisfaction generally, Health social workers in hospices are least likely to plan to remain in their current position and most likely to plan to seek a new opportunity or promotion as a social worker. None of the hospice social workers in our sample reported plans to retire.

**Table 11. Career Plans of Health Social Workers in Next Two Years, by Employment Setting**

Career Option	Hospital	Health Clinic	Hospice
Remain in current position	76%	71%	67%
Seek new opportunity/promotion as SW	23%	22%	30%
Pursue non-degree SW training	12%	7%	15%
Decrease SW hours	10%	16%	17%
Increase SW hours	4%	4%	6%
Pursue additional non-SW degree	7%	7%	7%
Pursue additional SW degree	6%	6%	6%
Retire	4%	6%	0%
Leave SW but continue to work	5%	4%	6%
Stop working	1%	0%	6%
Other	2%	13%	7%

Table 12 shows that Health social workers in rural areas were least likely to plan to remain in their current position, most likely to plan to seek a new opportunity or promotion within social work, and most likely to plan to reduce their hours as a social worker.

**Table 12. Career Plans of Health Social Workers in Next Two Years, by Geographic Location of Practice**

Career Option	Metropolitan Area	Micropolitan Area	Small Town	Rural Area
Remain in current position	75%	63%	79%	57%
Seek new opportunity/promotion as SW	22%	30%	17%	57%
Pursue non-degree SW training	12%	4%	8%	14%
Decrease SW hours	11%	19%	13%	29%
Increase SW hours	5%	4%	4%	0%
Pursue additional non-SW degree	8%	7%	8%	0%
Pursue additional SW degree	4%	7%	17%	29%
Retire	5%	0%	0%	0%
Leave SW but continue to work	4%	7%	4%	0%
Stop working	2%	0%	4%	0%
Other	5%	7%	4%	0%

Health social workers reported several primary factors that might cause them to consider changing jobs: higher salary (74%), lifestyle/family concerns (53%), interesting work (40%), job

stress (39%), and better benefits (33%). These do not differ from those reported by social workers overall, but vary by highest degree, as shown below in Table 13.

**Table 13. Potential Factors in Career Change for Health Social Workers, By SW Degree**

Career Change Factor	All Social Workers	Health Social Workers		
		All	MSW	BSW
Higher salary	73%	74%	75%	74%
Lifestyle/family concerns	52%	53%	55%	48%
Interesting work	37%	40%	42%	33%
Stress of current job	35%	39%	39%	46%
Personal reasons	34%	32%	30%	41%
Location	32%	32%	32%	37%
Better benefits	30%	33%	30%	48%
Increased mobility	24%	22%	23%	20%
Lighter workload	22%	23%	23%	24%
Opportunities training/educ.	19%	17%	18%	13%
Different supervisor/mgmt	15%	19%	18%	20%
Increased responsibility	10%	13%	13%	6%
Quality of supervision	10%	11%	10%	15%
Agency mission	9%	11%	11%	11%
Peer support	9%	10%	9%	17%
Other	9%	7%	7%	6%
Ethical challenges	6%	5%	5%	4%

Potential reasons for changing positions varied by employment setting. Hospital social workers more likely to say they would do so due to stress; those in health clinics for increased mobility, and hospice social workers for a different supervisor/management or personal reasons.

**Table 14. Potential Factors in Career Change for Health Social Workers, by Employment Setting**

Career Change Factor	Hospital	Health Clinic	Hospice
Higher salary	76%	76%	69%
Interesting work	42%	46%	32%
Increased mobility	22%	31%	20%
Different supervisor/mgmt	18%	15%	37%
Opportunities training/educ.	15%	22%	19%
Location	34%	36%	13%
Lifestyle/family concerns	53%	51%	50%
Agency mission	10%	15%	7%
Peer support	10%	11%	4%
Lighter workload	22%	29%	28%
Increased responsibility	16%	9%	13%
Quality of supervision	12%	7%	13%
Personal reasons	32%	18%	44%
Ethical challenges	5%	6%	6%
Stress of current job	42%	35%	35%
Better benefits	31%	33%	37%
Other	6%	6%	9%

**Table 15. Potential Factors in Career Change for Health Social Workers, by Geographic Location of Practice**

Career Change Factors	Metropolitan Area (n=331)	Micropolitan Area (n=27)	Small Town (n=24)	Rural Area (n=7)
Higher salary	74%	63%	83%	71%
Lifestyle/family concerns	55%	44%	46%	71%
Interesting work	41%	33%	29%	57%
Stress of current job	40%	37%	42%	29%
Personal reasons	33%	41%	29%	29%
Location	33%	22%	42%	0%
Better benefits	30%	33%	63%	71%
Lighter workload	24%	22%	17%	14%
Increased mobility	22%	37%	13%	14%
Different supervisor/mgmt	19%	4%	29%	43%
Opportunities training/educ.	17%	19%	8%	29%
Increased responsibility	13%	30%	4%	0%
Agency mission	11%	11%	8%	29%
Peer support	11%	0%	13%	29%
Quality of supervision	10%	19%	17%	14%
Other	7%	4%	8%	14%
Ethical challenges	4%	7%	4%	29%