

**LICENSED SOCIAL WORKERS IN THE  
UNITED STATES, 2004**

***SUPPLEMENT***

**Chapter 4 of 5**

**Licensed Social Work Practice**

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## Chapter 4. Clients of Licensed Social Workers

### Caseload size

Caseload sizes varied widely. Most social workers (52%) served a primary caseload of between 11 and 50 clients. Fifteen percent served ten or fewer clients, and 8% did not have a client caseload. Almost one in four (24%), however, served more than 50 clients, and 15% served more than 75 clients. Seven percent served more than 100 clients.

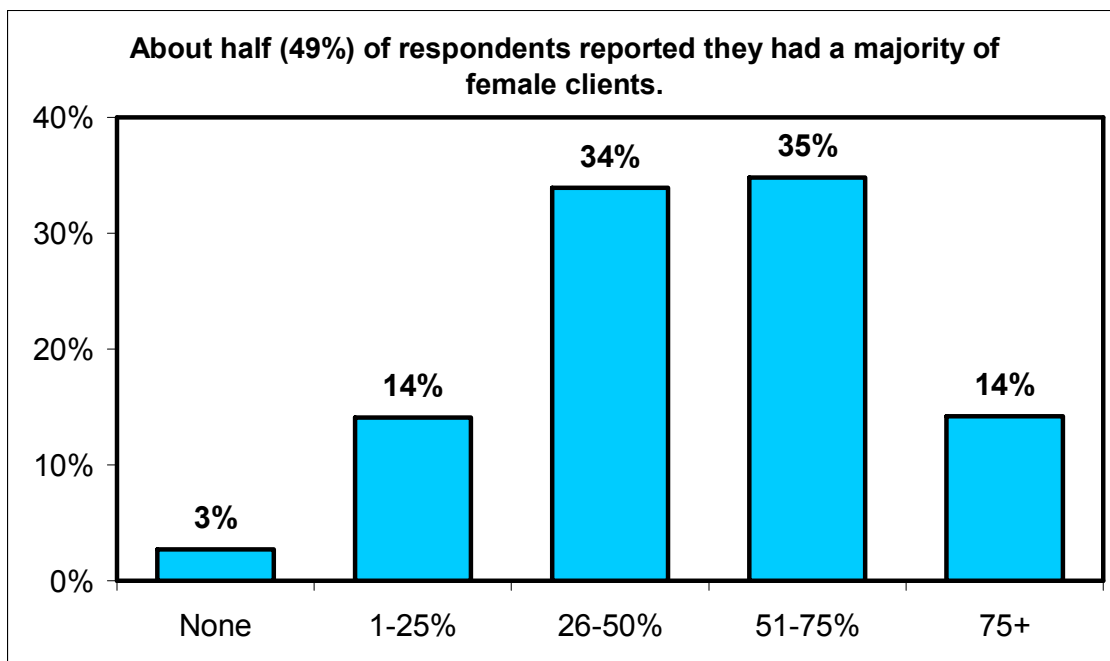
The largest caseloads were found in health clinics and nursing homes, where 43% and 32% of social workers reported caseloads of more than 75 clients, respectively. The smallest caseloads were found in psychiatric hospitals and social service agencies, where 58% and 41% of social workers reported caseloads of 1 to 15 clients.

### Client Demographics

An important and often unavailable aspect of the practice of social work is related to the characteristics of clients that social workers serve. The 2004 survey provides interesting information and insights about this topic.

*Gender of caseload.* Figure 1 shows that a majority (51%) of social workers reported that their caseload<sup>1</sup> was 50% or fewer females (51% of the U.S. population is female), including 3% who reported that they had no female clients. Only 14% of social reported that their caseloads were 75% or more female.

**Figure 1. Percentage of Caseload That Was Female**



<sup>1</sup> Some social workers that did not have a caseload indicated “0%” for this question. These responses were removed and data given here only reflects social workers with a current caseload.

*Gender of caseload by gender and race of social worker.* Male social workers were much more likely to see only male clients than were female social workers (7% versus 2%). Nearly two of three (66%) of male social workers reported that their caseload was 50% or less female (compared to 48% of female social workers). Female social workers were much more likely than male social workers to have caseloads that were 75% or more female (16% compared to 5%). African Americans reported caseloads that were significantly less female than non-Hispanic White caseloads.

*Gender of caseload by practice area.* Table 10 shows that social workers in the practice area of Criminal Justice were *least* likely (of practice areas with more than 10 respondents) to report seeing any female clients (72.1%), followed by those in the practice areas of Homeless/Displaced Persons (91.8%) and Higher Education (84.4%). At least 88.9% of social workers in all other practice areas reported seeing some female clients. Although virtually all school social workers reported seeing some female clients, 74.3% report that their female caseload was less than 50% female.

Table 1 also shows that social workers who reported predominantly (75% or more) female caseloads were those in the practice areas of homeless/displaced people (40.9%), higher education (34.4%), community development (33.3%), and aging (24.1%). Despite the association between addictions and criminal justice practice and a low percentage of female clients, only 6.2% of addictions social workers and 5.9% of social workers in developmental disabilities had predominantly female caseloads.

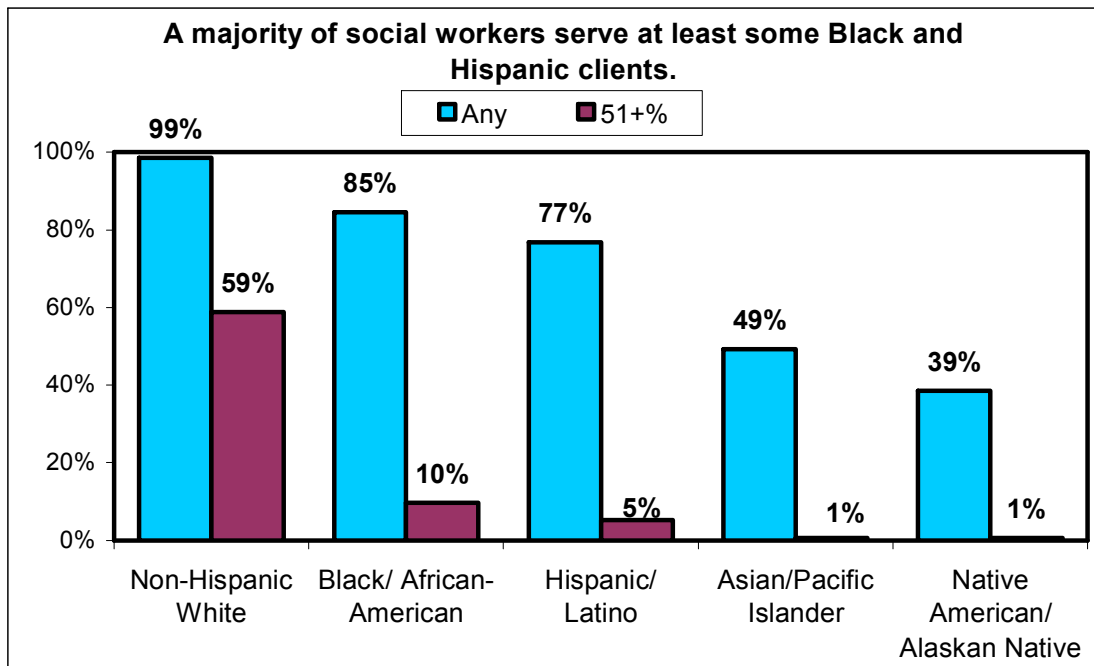
**Table 1. Percentages of Clients That Are Female, by Practice Area**

Practice Area	Percent of Clients that are Female					Total
	None	1-25%	26-50%	51-75%	75+%	
Addictions	11.1%	42.0%	32.1%	8.6%	6.2%	81
Adolescents	10.4%	19.2%	31.9%	24.2%	14.3%	182
Aging	2.6%	4.4%	21.9%	47.1%	24.1%	274
Child Welfare/Family	6.0%	10.7%	36.0%	29.9%	17.3%	364
Community Development	0.0%	33.3%	16.7%	16.7%	33.3%	6
Criminal Justice	27.9%	44.2%	7.0%	7.0%	14.0%	43
Developmental Disabilities	7.1%	17.6%	51.8%	17.6%	5.9%	85
Higher Education	15.6%	6.3%	25.0%	18.8%	34.4%	22
Homeless/Displaced Persons	18.2%	13.6%	13.6%	13.6%	40.9%	22
Income Assistance	33.3%	0.0%	33.3%	16.7%	16.7%	6
Medical Health	2.8%	9.4%	49.7%	28.3%	9.7%	392
Mental Health	7.2%	8.8%	27.8%	42.3%	13.9%	1,135
Occupational Social Work	4.5%	13.6%	27.3%	40.9%	13.6%	22
School Social Work	1.7%	32.4%	41.9%	19.9%	4.1%	241
Other	9.9%	18.0%	31.5%	25.8%	14.8%	644
<b>Total Number</b>	<b>218</b>	<b>451</b>	<b>1,089</b>	<b>1,094</b>	<b>461</b>	<b>3,313</b>

*Race/ethnicity of caseload.* Figure 2 shows that most survey respondents reported having client bases that are racially and ethnically diverse. Virtually all social workers (99%) see at least some non-Hispanic White clients, and most see some Black/African American and Hispanic clients (85% and 77%, respectively). Fewer social workers reported seeing any Asian clients (49%) or Native American clients (39%).

Forty-one percent of social workers reported that more than half of their caseload belonged to a non-White minority group. Still, few social workers reported seeing caseloads that were predominantly (51% or more) composed of any *single* minority group. Ten percent of social workers reported seeing caseloads that were predominantly Black/African-American, and 5% reported seeing caseloads that were predominantly Hispanic. Fewer than 1% reported seeing caseloads that were predominantly Asian, predominantly Native American, or predominantly “other” race/ethnicity.

**Figure 2. Percentages of Respondents Serving Any or a Majority of Clients in Selected Race-Ethnic Categories**



*Race/ethnicity of caseload by race/ethnicity of social worker.* Licensed social workers were more likely than not to report having caseloads comprised predominantly of their own racial/ethnic group. Fifty-nine percent of social workers had caseloads that were more than half non-Hispanic White, but among non-Hispanic White social workers this increased to 63%. Similarly, only 10% of social workers saw predominantly African-American caseloads, but this increased to 44% for African-American social workers. Five percent of all social workers, but 42% of Hispanic social workers reported seeing predominantly Hispanic caseloads, and 1% of social workers but 18% of Asian social workers reported seeing predominantly Asian caseloads. Less than 1% of social workers reported seeing predominantly Native American caseloads, but 31% of Native American social workers did.

*Race/ethnicity of caseload by practice area.* Licensed social workers in all practice areas reported seeing at least some non-Hispanic White clients (with the percentage ranging from 91% in higher education to 100% in criminal justice, developmental disabilities and medical health). There was much greater variation in the percentage of social workers seeing any members of other racial/ethnic groups by practice area, however. The percent seeing Black/African American clients ranged from 76% in developmental disabilities to 97% in criminal justice, while the percentage seeing Hispanic/Latino clients ranged from 72% in medical health to 60% in aging. Asian/Pacific Islanders were most likely to be seen by higher education social workers (73%), and least likely to be seen by addictions social workers (38%). Native Americans were most likely to be seen by criminal justice social workers (61%), and least likely to be seen by social workers in aging.

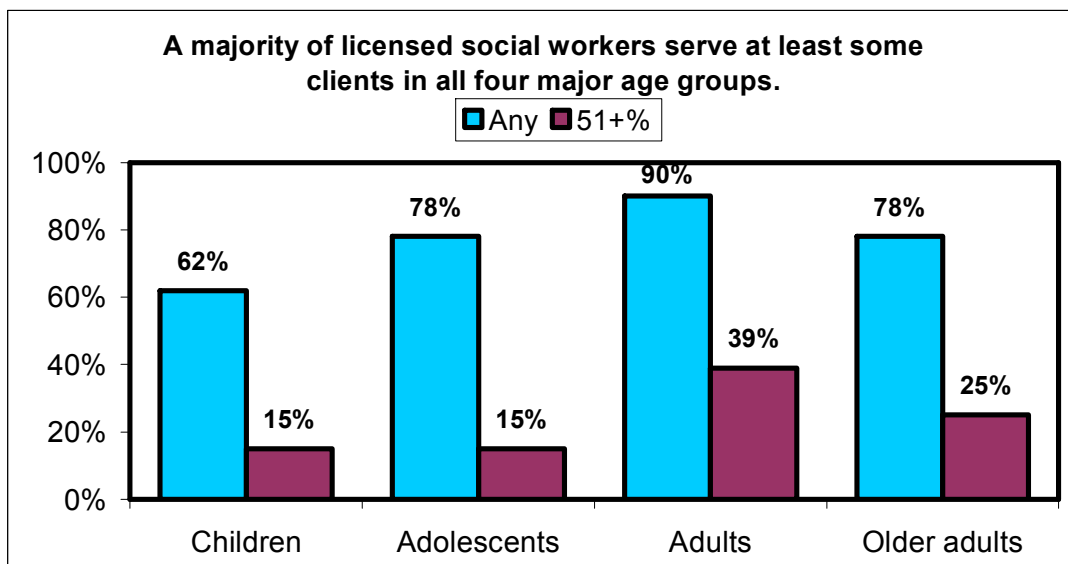
Social workers in the practice area of aging were the most likely to report a predominantly (51% or more) non-Hispanic White caseload (72%), while social workers in the practice area of higher education were least likely (36%). School social workers were most likely to report a

predominantly Black/African-American caseload (19%), followed by higher education social workers (18%). Social workers in developmental disabilities and mental health were least likely to serve a predominantly Black caseload (5% and 6%, respectively).

The percentage of social workers serving a predominantly Hispanic/Latino caseload ranged from 12% in school social work to none in criminal justice or higher education, while the percentage serving a predominantly Native American population ranged from 3% in adolescents and 2% in addictions to none in most other practice areas. There was no practice area in which 2% or more of social workers reported serving a predominantly Asian caseload.

*Age of caseload.* Figure 3 shows that 62% of social workers reported seeing at least some clients ages 12 and under, and 15% reported seeing a caseload predominantly (50% or more) in this age group. Seventy-eight percent reported seeing at least some clients ages 13 to 21, and 15% reported seeing a predominantly adolescent caseload. Seventy-eight percent reported seeing at least some clients age 55 and over, and 25% reported seeing a predominantly older adult caseload.

**Figure 3. Percentages of Respondents Serving Any or a Majority of Caseload in Different Age Groups**



Female social workers reported seeing significantly more children in their caseloads than male social workers, and male social workers reported seeing significantly more adolescents and adults. There was not a significant gender difference in the percentage of older adults in respondents caseloads. Age of caseload did not differ notably by race/ethnicity of social worker or by age of social worker.

*Age of caseload and practice area.* Social workers in the areas of school social work and child welfare/family were most likely to see children ages 12 and under (both 94%), and school social workers were most likely to see caseloads that were predominantly children 12 and under (53%). Children were least likely to be seen by social workers in the practice areas of aging and



addictions, but 13% of aging social workers and 21% of addictions social workers reported seeing at least some children.

Adolescents were most likely to be in the caseloads of social workers in the practice area of adolescents (100%), and least likely to be included in the caseloads of social workers in aging (21%). Seventy-six percent of social workers in the practice area of adolescents had caseloads that were predominantly (50% or more) adolescent, followed by 39% of school social workers.

Social workers in the area of aging were most likely to report seeing any older adults (100%), and 95% of them reported seeing caseloads that were predominantly (50% or more) older adults. These were followed by social workers in medical health, 91% of whom reported seeing some older adults and 57% of whom reported seeing predominantly older adults. Social workers in the areas of adolescents and school social work were least likely to report seeing any older adults (both 28%) and least likely to report predominantly older caseloads (both 0%).

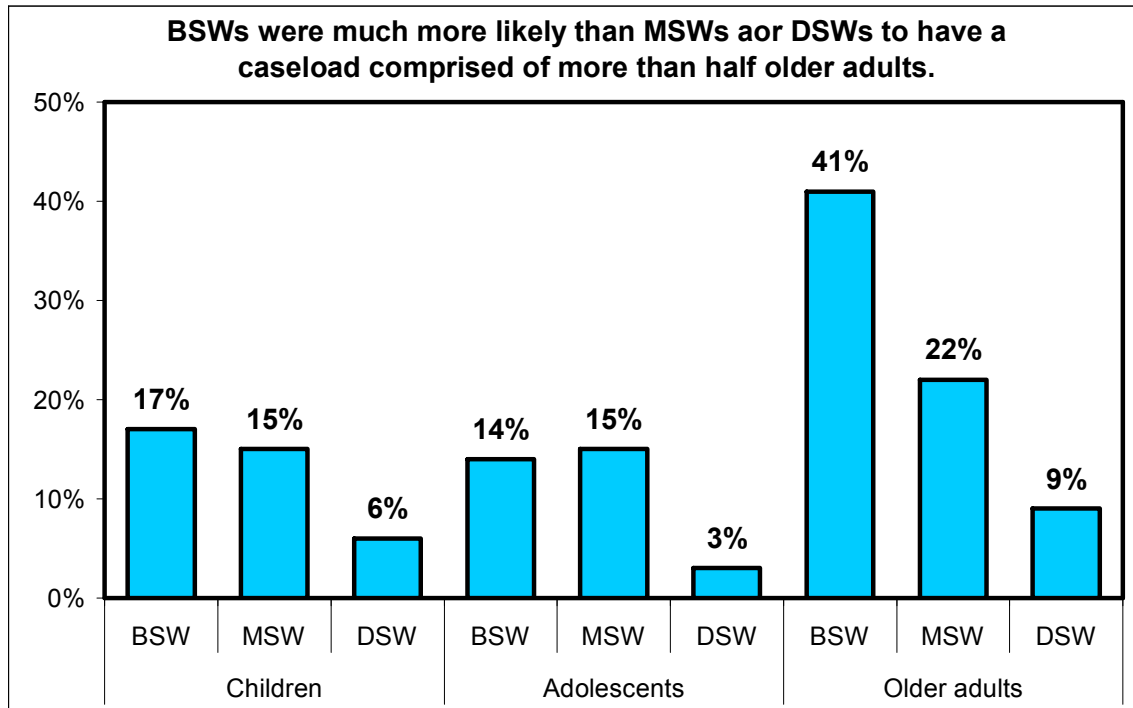
*Age of caseload and practice setting.* Social workers in schools, social service agencies, and behavioral health clinics were most likely to report seeing any children (90%, 79% and 67%, respectively) or adolescents (86%, 85%, and 85%, respectively), while hospital and health clinic social workers were most likely to report seeing any adults (96% and 95%, respectively), and nursing home and hospice social workers were most likely to report seeing any older adults (100% and 97%).

Similarly, social workers in schools and social service agencies were most likely to report caseloads that were predominantly (50% or more) children (49%, 21%, and 12%, respectively) or adolescents (47%, 18%, and 14%, respectively). Social workers in psychiatric hospitals were most likely to have predominantly adult caseloads (58%), while those in nursing homes and hospices were most likely to have predominantly older adult caseloads (99% and 82%, respectively).

*Age of caseload and highest social work degree.* Differences in whether a social worker reported seeing any children, adolescents, or older adults by highest degree are modest, except that DSW/PhDs were less likely to see any children or any adolescents than BSWs and MSWs. Figure 4 shows much greater differences in the percentages of social workers at each education level that see caseloads that were *predominantly* (50% or more) from one age group.

The difference between the percentage of MSWs and BSWs seeing predominantly older adult caseloads was very large, with almost twice as many BSWs reporting that they worked mostly with older clients. In addition, DSW/PhDs were substantially less likely than BSWs or MSWs to report seeing caseloads of predominantly children or adolescents (6% for children and 3% for adolescents compared to 17% of BSWs and 15% of MSWs for children and 14% of BSWs and 15% of MSWs for adolescents). DSW/PhDs were also less likely to see predominantly older adults (9% of DSWs, compared to 41% of BSWs and 22% of MSWs).

**Figure 4. Percentage of Social Workers Serving 50% or More Children, Adolescents, or Older Adults, by Highest Social Work Degree**



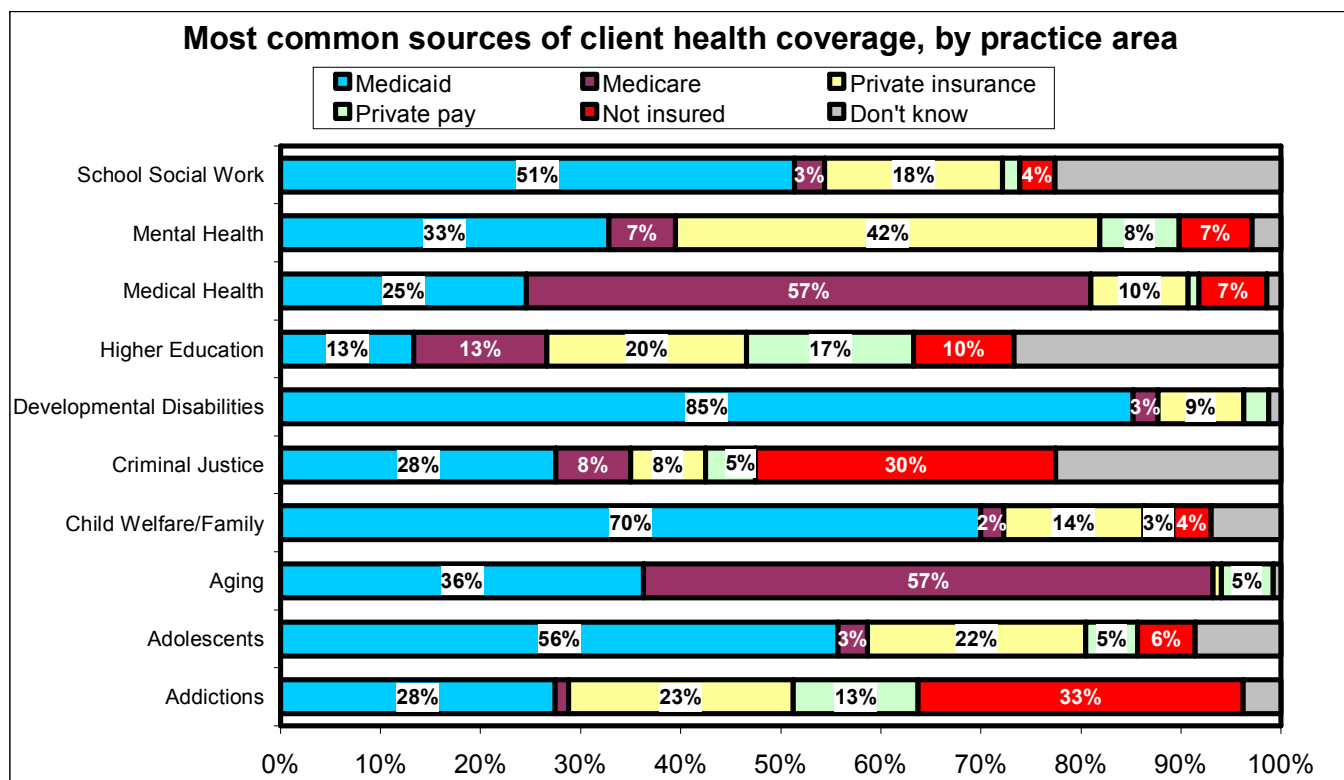
### Health Coverage

Client health coverage is an important indicator of client socioeconomic status. Social workers who reported that Medicaid was the most common source of client health coverage or that most of their clients were uninsured were likely to work with low-income populations. On the other hand, social workers who reported that private insurance was the most common source of client health coverage were likely to work with a middle-class caseload. Social workers were most likely to report Medicaid as the most common source of client health coverage (41%), followed by private insurance (24%) and Medicare (16%). Smaller percentages of clients were uninsured (7%) or private pay (6%). Six percent of social workers reported that they did not know their clients' most common source of health coverage.

*Health coverage and practice area.* Figure 5 shows that social workers in developmental disabilities and child welfare/family were most likely to work with Medicaid populations (86% and 70%, respectively), while only 10% of higher education social workers reported that their clients were primarily Medicaid-insured. Social workers in medical health and aging were most likely to report working with Medicare populations (58% and 56%, respectively), while this was unlikely in higher education (0%), addictions (2%), and child welfare/family (2%). Private insurance was most often reported by mental health social workers (44%), followed by addictions (25%) and adolescents (21%). No social workers in higher education and only 1% in aging reported that most of their clients had private insurance. Private pay was most common in addictions (13%) and higher education (10%), and least common in medical health and school

(both 1%). Social workers in criminal justice (31%), addictions (30%), and higher education (30%) were most likely to report that their clients were not insured.

**Figure 5. Most Common Client Health Coverage, by Practice Area**



*Health coverage and employment sector.* Social workers in public-sector agencies were more likely than those in private/nonprofit-sector organizations to report serving clients Medicaid populations (55% compared to 43%) or uninsured populations (11% compared to 6%). Those in the private/nonprofit sector were much more likely to report serving Medicare populations than those in the private sector (26% compared to 10%), and somewhat more likely to report serving clients with private insurance (17% compared to 12%). Social workers in private practice overwhelmingly reported serving populations that have private insurance (66%) or private pay (18%).

*Health coverage and employment setting.* Medicaid was more common in social service agencies (64%) and nursing homes (60%), and least common in hospices (6%). Medicare was most common in hospices (88%), and least common in schools (2%). Private insurance was most common in psychiatric hospitals (24%), although not as common in this setting as Medicaid (38%). A significant number of social workers in behavioral health clinics also reported that private insurance was their clients' most common source of health coverage (22%). Private pay

was most common in nursing home caseloads (11%), and non-insurance was most common in psychiatric hospitals (20%).

*Health coverage and degree.* BSWs were much more likely than MSWs to work with Medicaid populations (61% compared to 37%), and were somewhat more likely to work with Medicare populations (21% compared to 16%). MSWs, in contrast, were more likely than BSWs to work with clients who were predominantly privately insured (27% compared to 6%) or private pay (6% compared to 3%).

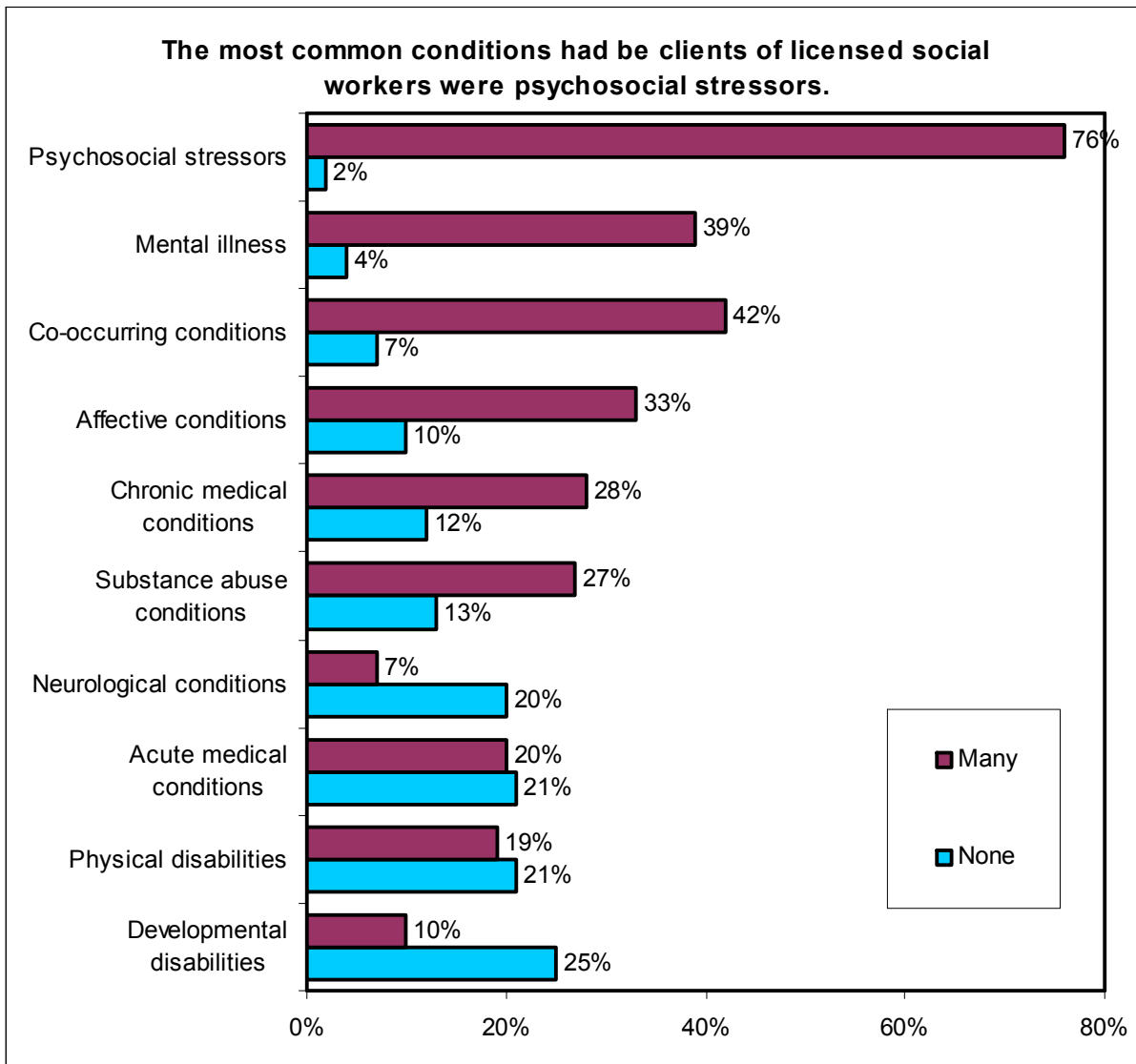
### **Client Presenting Problems**

Survey respondents treated clients with a wide variety of problems. These problems were physical, psychological, or social in nature and they may have required different tasks and treatments on the part of social workers. The problems that social workers confronted most often varied by factors such as the composition of the caseload and the settings in which clients were seen.

Virtually all social workers reported seeing some clients who suffer from psychosocial stressors (98%) or mental illness (96%). A large percentage of social workers also had some clients with co-occurring disorders (93%), affective conditions (90%), and substance abuse conditions (87%). Although these problems were commonly associated with social work practice, 88% of social workers reported serving clients with chronic medical conditions; 80% of social workers reported serving at least some clients with neurological conditions; 79% of social workers reported serving clients with acute medical conditions or physical disabilities; and 75% of social workers reported serving clients with developmental disabilities.

A better indicator of the client problems that social workers confront on a day-to-day basis, however, is how many social workers report “many” clients with given problems or conditions. Figure 6 shows that the majority of social workers (76%) reported that “many” of their clients suffer from psychosocial stressors, and that other conditions were less common within caseloads and were likely to be associated with certain practice areas and types of clients. Forty-two percent of social workers reported serving “many” clients with co-occurring conditions, and 39% report having “many” clients with mental illness. Thirty-three percent reported serving “many” clients with affective conditions. Chronic medical conditions were a common problem, with 28% of social workers reporting that “many” of their clients have such conditions, and many social workers (27%) reported seeing “many” clients with substance abuse conditions. Twenty percent of social workers reported seeing many clients with acute medical conditions, and 19% reported seeing many clients with physical disabilities. Developmental disabilities and neurological conditions appeared to be specialty niches for most social workers—although many social workers reported having some clients with these conditions, relatively few (10% and 7% respectively) reported having “many” clients with these conditions.

**Figure 6. Percentage of Clients Reported to Have Many or None of Selected Conditions**



*Client problems and gender of social worker.* Male social workers reported significantly more clients than female social workers with mental illness, affective conditions, and substance abuse conditions. Women reported more clients with physical disabilities, acute medical conditions, and chronic medical conditions.

*Client problems and race/ethnicity of social worker.* There were also differences between Black/African American and non-Hispanic White social workers in terms of the problems of their clients. Black social workers reported fewer clients with mental illness, affective conditions, neurological conditions, psychosocial stressors, chronic medical conditions, or co-occurring conditions than did White social workers.

*Client problems and age of caseload.* The most common problems in a social worker caseload varied by the age distribution of the caseload. Social workers whose caseload was predominantly children, adolescents, or adults reported the greatest prevalence of psychosocial stressors and mental illness, regardless of the size of their caseload. The percentage reporting 'many' clients with mental illness varied from 30% among children to 46% among adolescents and 47% among adults. The third most common condition also varied among social workers who reported serving these three groups. For those seeing predominantly children, co-occurring conditions ranked third (27%), while substance abuse conditions ranked third for adolescents (35%), and affective conditions ranked third for adults (47%).

Older adults had very different presenting problems. The most common problem reported by social workers who saw a predominantly older caseload was chronic medical conditions. This was followed by psychosocial stressors (67%), acute medical conditions (62%), physical disabilities (61%), and co-occurring conditions (60%). Psychological conditions were all much less common in predominantly elderly caseloads.