

[REPORT]

National Association of Social Workers
MEMBERSHIP WORKFORCE STUDY

**STRESS AT WORK:
HOW DO SOCIAL
WORKERS COPE?**

NATIONAL ASSOCIATION OF SOCIAL WORKERS

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“The major challenge of social work is that social workers have too many things on their plates. They cannot possibly do everything they need to do and do it well. Burnout is a main reason people are leaving the profession. We are short-handed as it is...”

—Survey Participant

INTRODUCTION

The 2004 benchmark national study of licensed social workers provided a wealth of information about social workers' roles and work environments. The study also raised new questions about the social work workforce that required further exploration. Although the 2004 findings pointed to a looming shortage of licensed social workers, there was still much to learn about why this was the case. In what ways did career decision points, educational debt, workplace stressors, and other factors influence the recruitment and retention of this professional workforce? The NASW Membership Workforce Study was an effort to respond to such remaining questions and to gain more insight into the social work workforce.

METHODOLOGY

The NASW Membership Workforce Survey was administered online from August 30, 2007, to November 30, 2007. NASW members were invited to participate through electronic *Memberlink* newsletters, Specialty Practice Section alerts, mailed copies of the *NASW NEWS*, and the NASW Web site. Survey responses were anonymous. The survey received a total of 3,653 responses.

Survey respondents volunteered to participate in the survey and were not randomly selected from the total NASW membership. Due to the sample being based on those who self-selected to participate, estimates of sampling error cannot be calculated. The findings are based solely on the responses and are not generalizable to the entire population of NASW members.

OVERVIEW

Social work professionals often face challenges or obstacles that may cause them to feel overwhelmed and stressed. Notably, those providing direct services, particularly behavioral health and health care, may experience higher levels of stress as a result of their emotionally attenuating practice setting (Coyle, Edwards, Hannigan, Fothergill & Burnard, 2005; Fahy, 2007; Naturale, 2007; Ting, Saunders, Jacobson & Power, 2006). In response to the stress, and in order to maintain psychological and physiological homeostasis, social workers invoke different strategies to help them cope.

In small amounts, stress can be helpful, providing a source of motivation—particularly in situations where one feels like “throwing in the towel” (Jaffe-Gill, Smith, Larson, and Segal, (2007). However, too much stress can be harmful and can threaten the professionals’ physical and mental health, and place them at risk for injury, behavioral and/or serious health-related problems over time.

WORK-RELATED STRESSORS

Work-related stress can be defined as an individual’s emotional and physical response to the demands of a job that is incongruent with his or her abilities, resources, or needs (National Institute for Occupational Safety and Health, No. 99–101).

“[There are a] lack of resources, unrealistic expectations, and safety issues.”
—Survey Participant

When study participants (n=3,653) were asked to identify factors that contribute to work-related stress, many indicated that the lack of time to complete the necessary tasks of their jobs was a major issue (31%) (Figure 1). Twenty-five percent of respondents acknowledged that their heavy workloads contribute to their stress, perhaps adding to their noted difficulty in completing day-to-day work tasks. Respondents also said that working with difficult or challenging clients affected the level of stress they experience (16%).

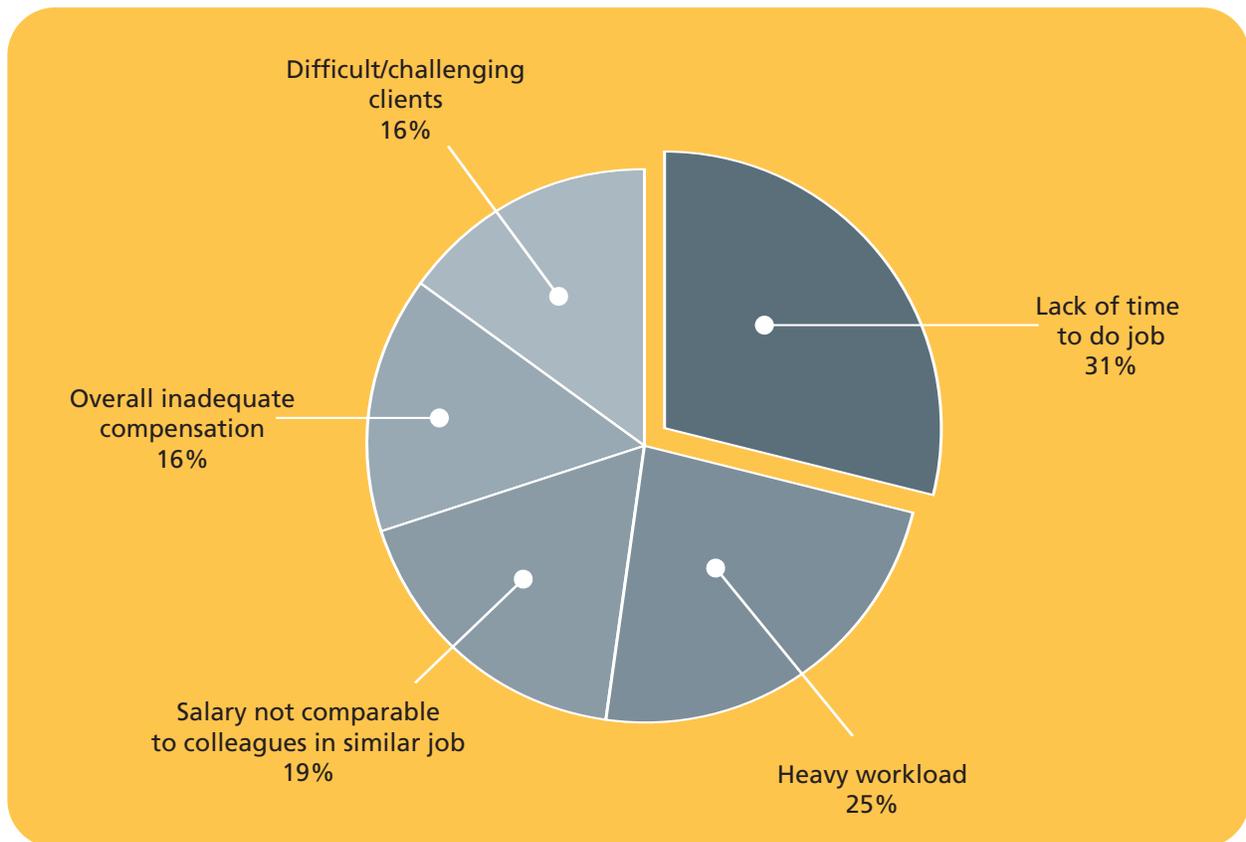
Additionally, 19 percent of individuals stated that their salaries are not comparable to the salaries of people in similar professions who conduct similar work. Overall, 16 percent of social workers surveyed feel they are poorly compensated for their work.

Study participants identified additional stressors, including the following:

- Having more responsibilities than they can handle with ease (i.e., “wearing too many hats”) (15%)
- Needing to complete routine tasks that have little intrinsic value (14%)
- Having few opportunities for advancement and/or promotion (14%)
- Being expected to work long hours (13%)
- Receiving few resources to adequately accomplish work tasks (11%)
- Having conflicting or unclear job expectations (10%)
- Getting minimal support from co-workers and/or supervisors (9%)
- Being unable to balance professional and personal life (8%)

“[There are] greater demands to get more done in a shorter time; clients have more complicated, long-standing difficulties; [and there are] fewer resources...”
—Survey Participant

FIGURE 1. MAJOR WORK-RELATED STRESSORS*



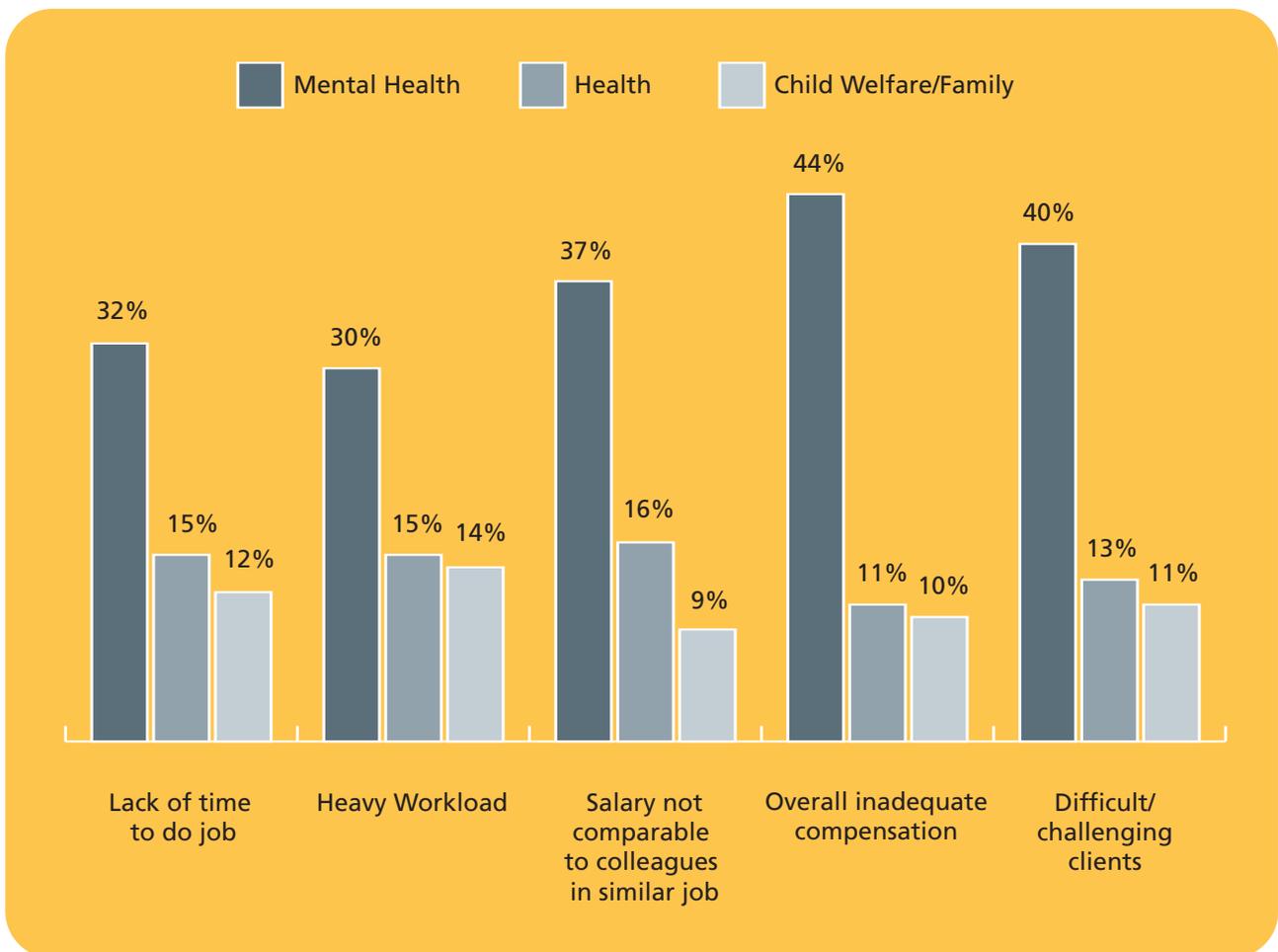
*Participants were allowed to mark multiple responses; total percentages may exceed 100.

“We continue to be underpaid...as professionals and in the work that we do.”
—Survey Participant

Of participants who indicated that they do not have adequate time to complete work-related tasks, 32 percent are employed in mental health settings; 15 percent are employed in mental health settings; 15 percent work in health care; and 12 percent are child welfare/family social workers (Figure 2). These social workers also reported that heavy workloads contribute to their stress. Social workers providing mental health

services had the highest percentages related to stress resulting from working with challenging clients and from being underpaid.

FIGURE 2. PRACTICE AREA AND WORK-RELATED STRESSORS



STRESS-RELATED HEALTH CONCERNS

Stressful work conditions, whether caused by individual or situational factors, can lead to health problems and risk of injury. Many participants indicated that they experience health-related problems

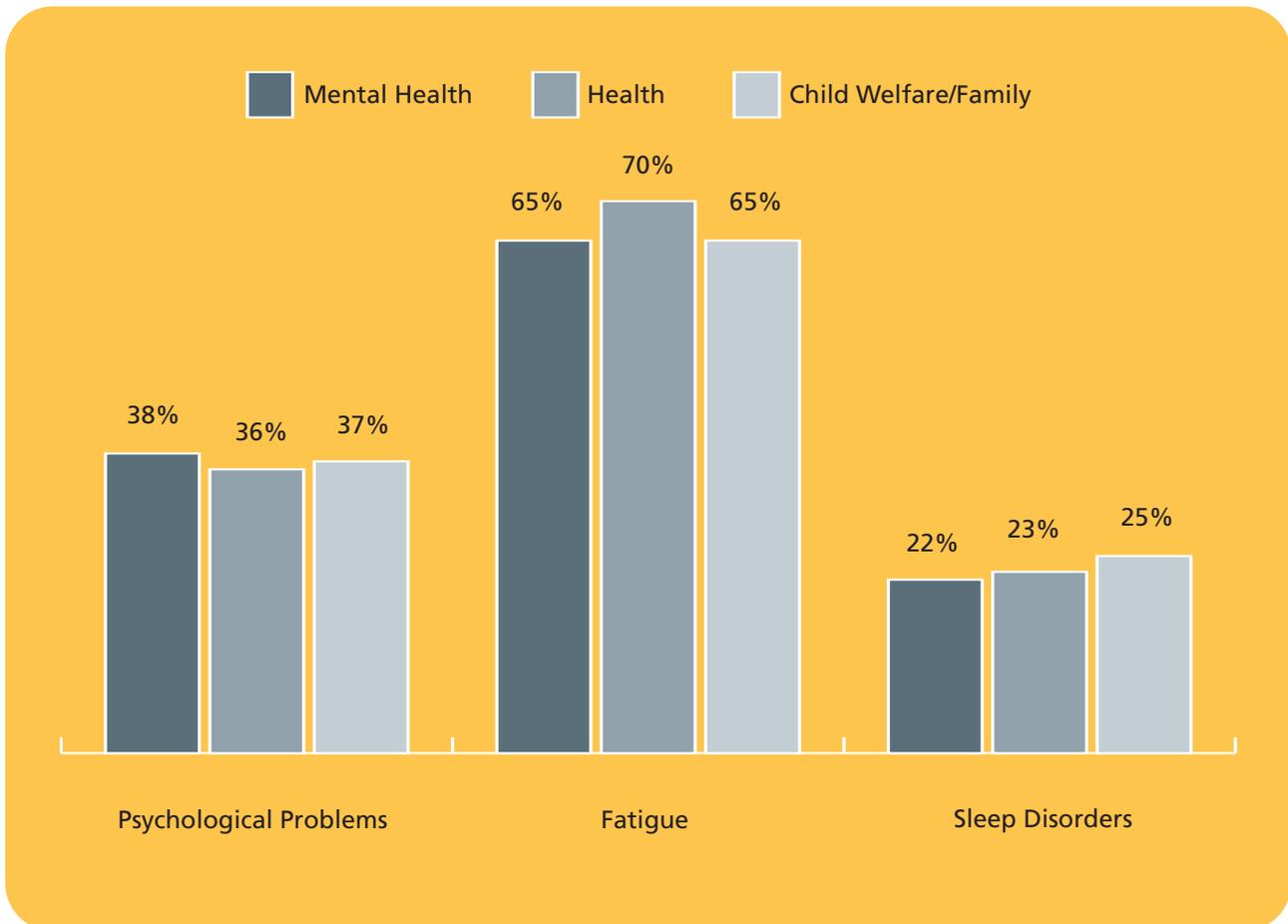
“The demands of the clients and the overwhelming desire to help everyone with problems are the classic set up for potential burnout...” —Survey Participant

resulting from the stress they experience at work. Among social workers providing direct services, fatigue, psychological problems, and sleep disorders were the most commonly reported stress-related health concerns.

Seventy percent of social workers employed in health care settings reported feeling fatigue from stress (Figure 3).

Thirty-eight percent of social workers in mental health acknowledged that psychological problems are a stress-related health concern. Additionally, one-fourth of individuals employed as child welfare/family social workers reported they experience sleep disorders.

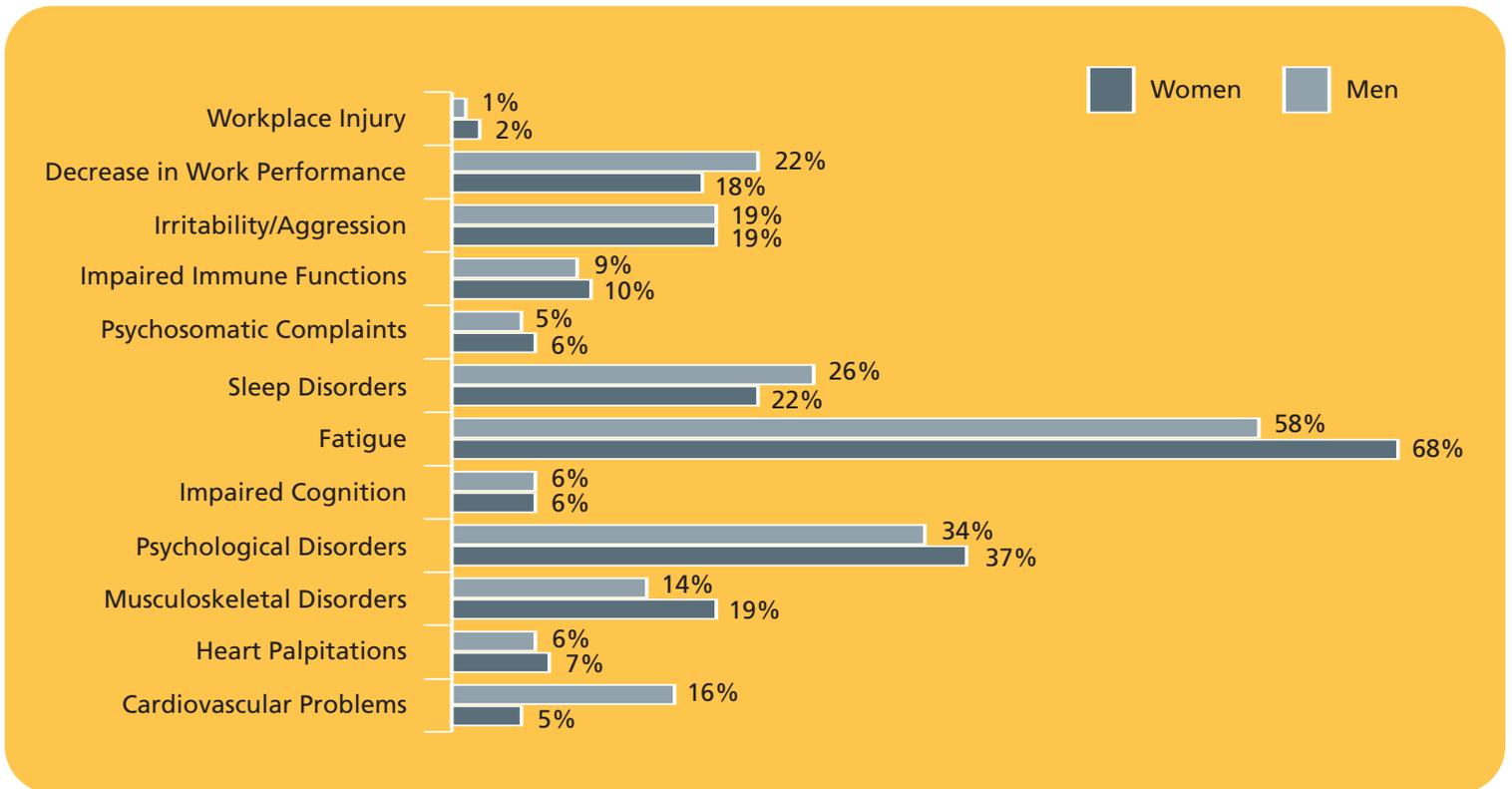
FIGURE 3. PRACTICE AREA AND STRESS-RELATED HEALTH CONCERNS*



*Participants were allowed to mark multiple responses; total percentages may exceed 100.

When male and female social workers were compared to one another, in terms of the stress-related health concerns they experience, 68 percent of women and 58 percent of men said they experience symptoms of fatigue (Figure 4). Additionally, 37 percent of female and 34 percent of male participants stated that they experience psychological problems when they are stressed. Interestingly, men are more likely than women to exhibit a decrease in work performance (22%), to experience sleep disorders (26%), and to suffer cardiovascular problems (16%) as a result of work-related stress.

FIGURE 4. GENDER AND STRESS-RELATED HEALTH CONCERNS*



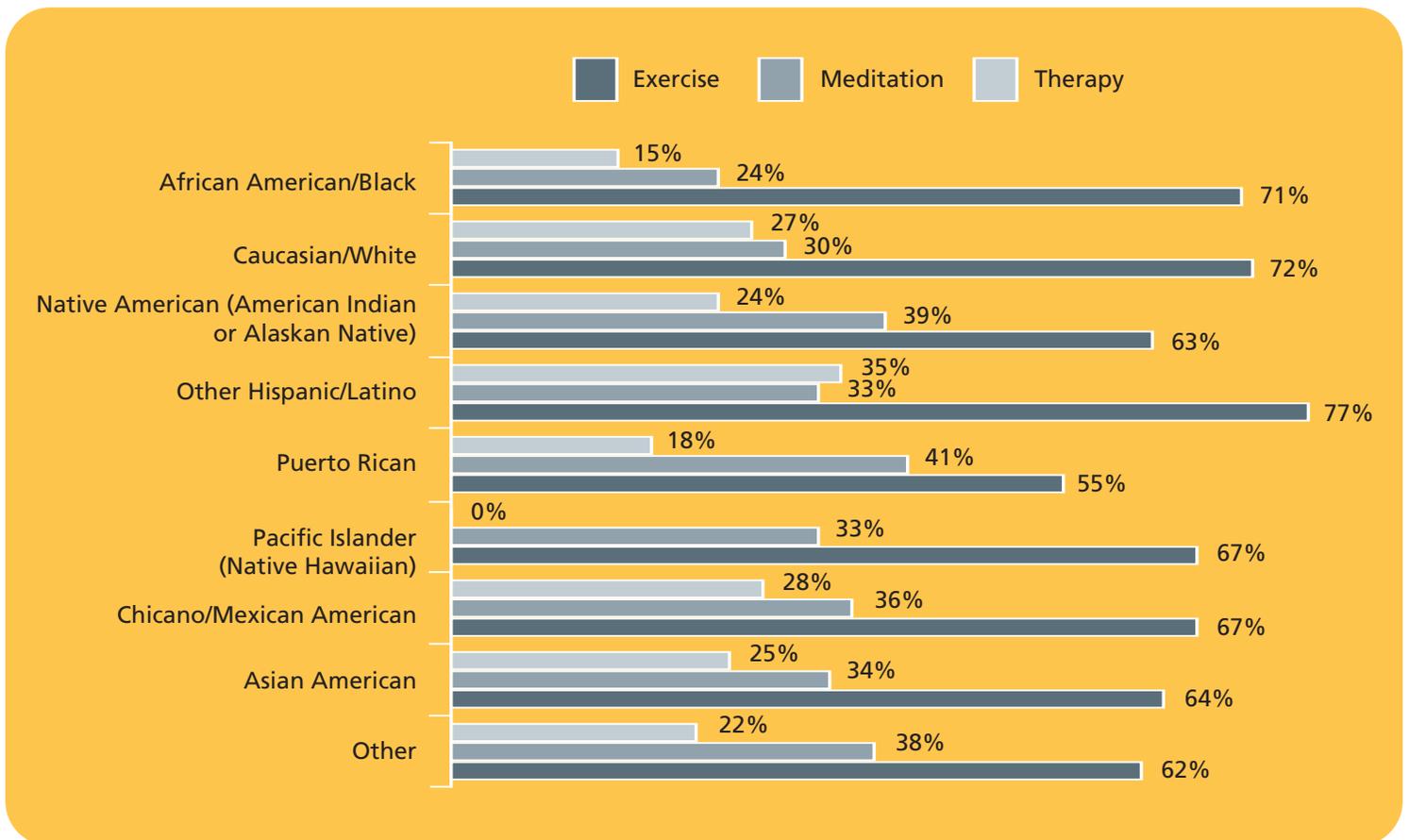
*Participants were allowed to mark multiple responses, total percentages may exceed 100.

STRESS MANAGEMENT

People’s resilience and ability to manage stress and its symptoms depend on their use of strategies to help them: (a) cope with stressors, and (b) regain a sense of competence and mastery over their situations.

Study participants living with high levels of stress identified several strategies that aid them in managing the stresses of their day-to-day work. Notably, for social workers of all races/ethnicities, exercise is the leading method for alleviating stress, followed by meditation and therapy (Figure 5). Puerto Rican social workers are more likely to use meditation than other races/ethnicities, while other Hispanic/Latino social work professionals are more likely to participate in therapy.

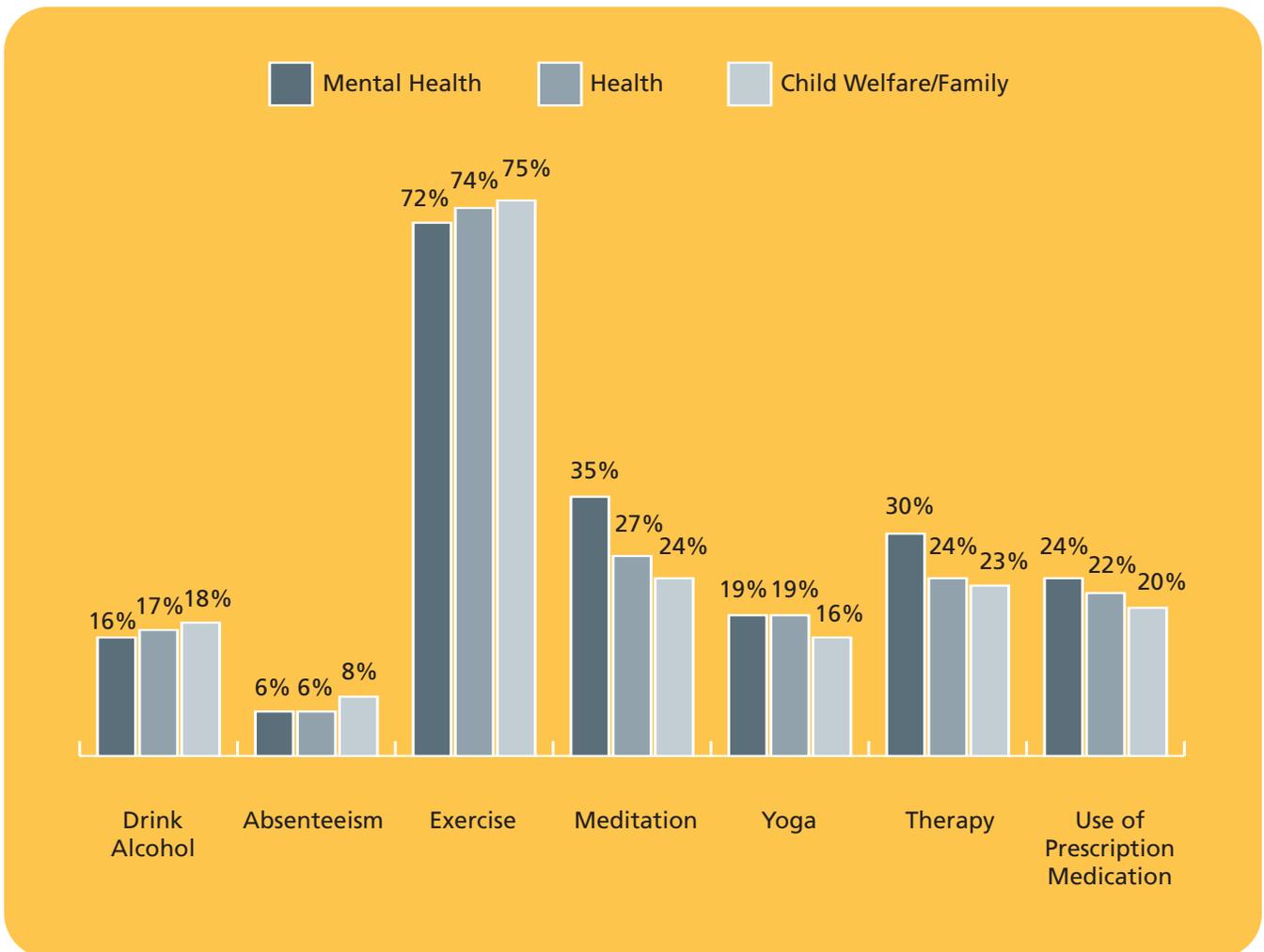
FIGURE 5. RACE/ETHNICITY AND COPING STRATEGIES FOR STRESS*



*Participants were allowed to mark multiple responses; total percentages may exceed 100.

In terms of practice areas, 75 percent of child welfare/family social workers, 74 percent of health social workers, and 72 percent of social workers in mental health acknowledged that exercising helps reduce stress (Figure 6). Additionally, compared to their colleagues in other practice areas, social work professionals employed in mental health are more likely to use meditation (35%), therapy (30%), and prescription medication (24%) to alleviate work-related stress. Furthermore, child welfare/family social workers reported they are more likely to drink alcohol (18%) or be absent from work (8%) when stressed.

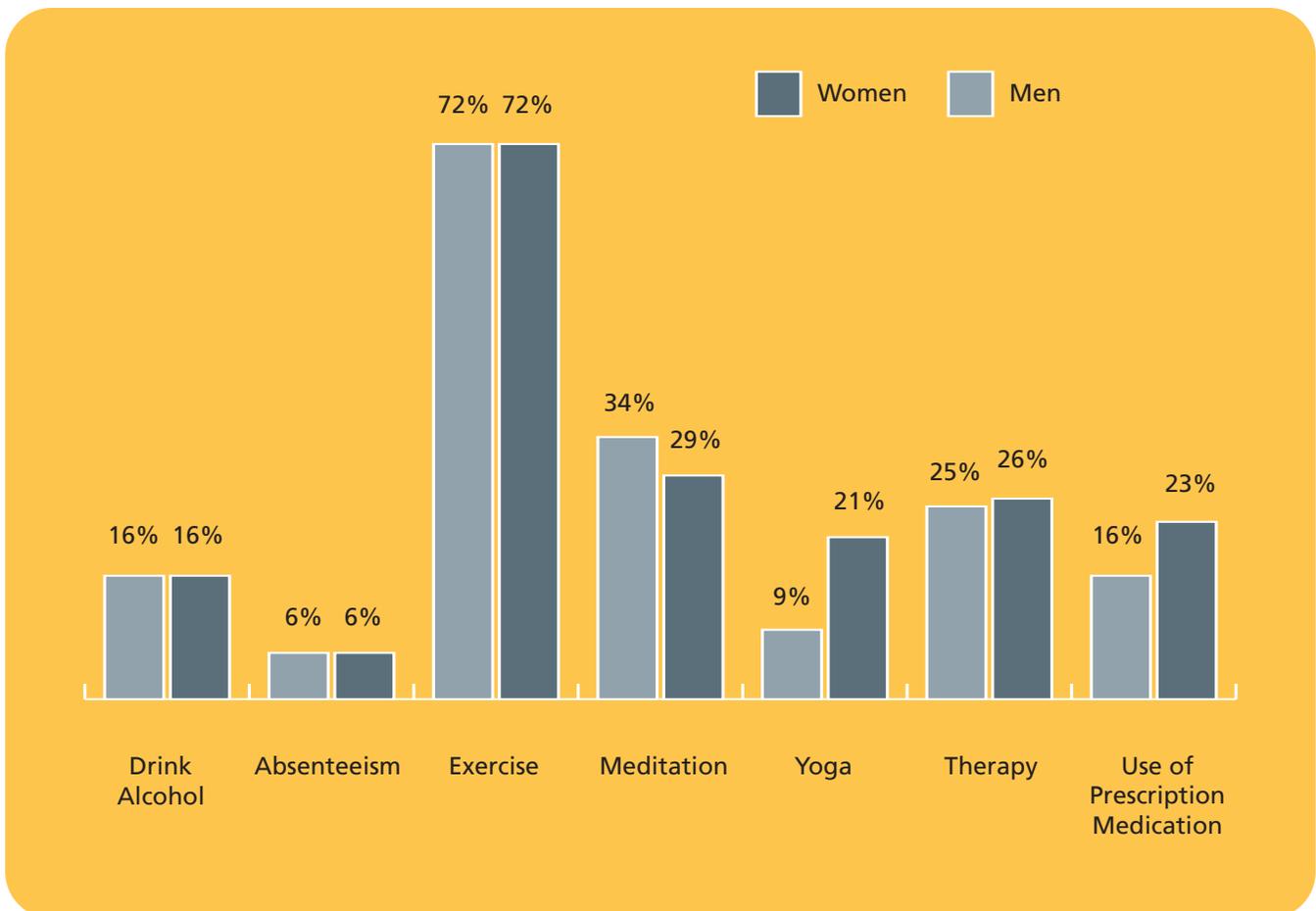
FIGURE 6. PRACTICE AREA AND COPING STRATEGIES FOR STRESS



Consistent with the previous data in terms of gender, women and men acknowledged the usefulness of incorporating exercise into their weekly activities to relieve stress (72%) (Figure 7). Men are more likely than women to engage in meditation (34% vs. 29%), while a slightly higher percentage of women (26% vs. 25%) participate in some form of therapy.

In addition to exercise, meditation, and therapy as useful strategies, study participants also stated they use “other” coping strategies—such as gardening, listening to music, watching television, massage, camping, fishing, painting, pilates, yoga, reading, spiritual development, and martial arts—to help alleviate stress.

FIGURE 7. GENDER AND COPING STRATEGIES FOR STRESS*

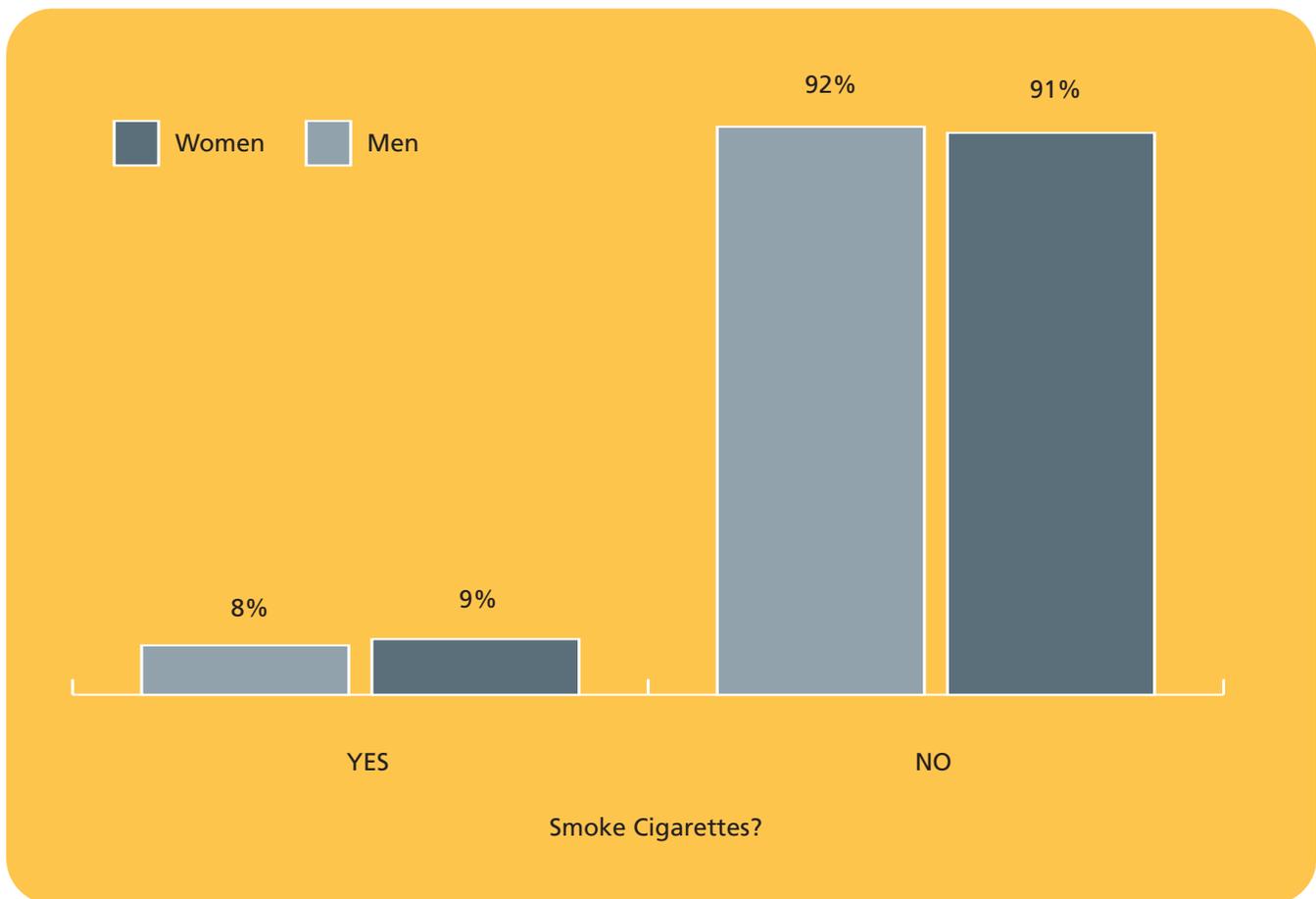


*Participants were allowed to mark multiple responses; total percentages may exceed 100.

TOBACCO USE

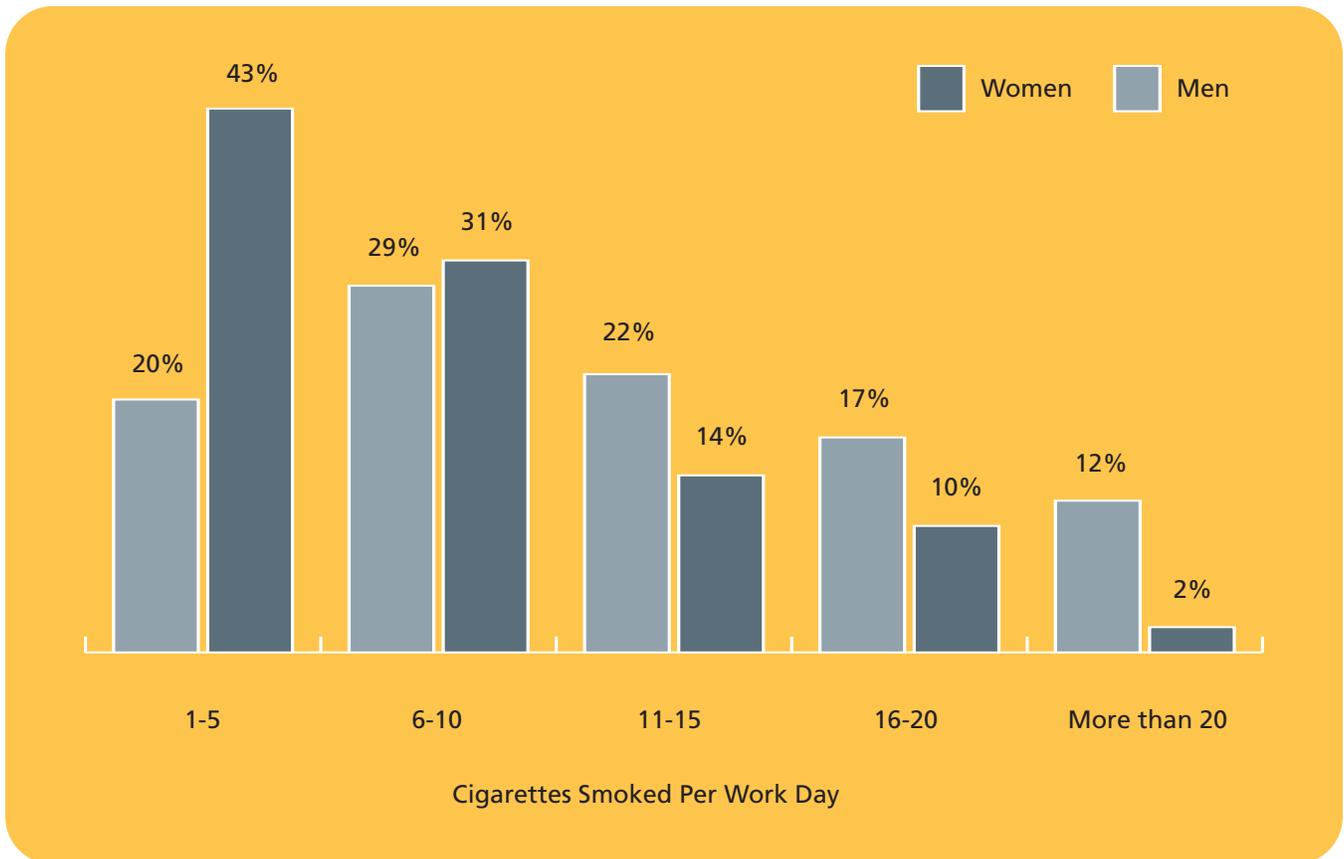
Either as an effort to alleviate stress, or perhaps as a long-time habit, a small percentage of social workers reported smoking cigarettes. When asked if they smoked cigarettes, only nine percent of female respondents and eight percent of male respondents indicated “yes” (Figure 8).

FIGURE 8. CIGARETTE SMOKING AND GENDER



Among the male and female respondents who indicated that they do smoke cigarettes, men, on average, smoke more cigarettes in a single work day than women (Figure 9). Twenty-two percent of male participants smoke 11 to 15 cigarettes per day; 17 percent smoke 16 to 20 cigarettes per day; and 12 percent smoke more than twenty cigarettes per day.

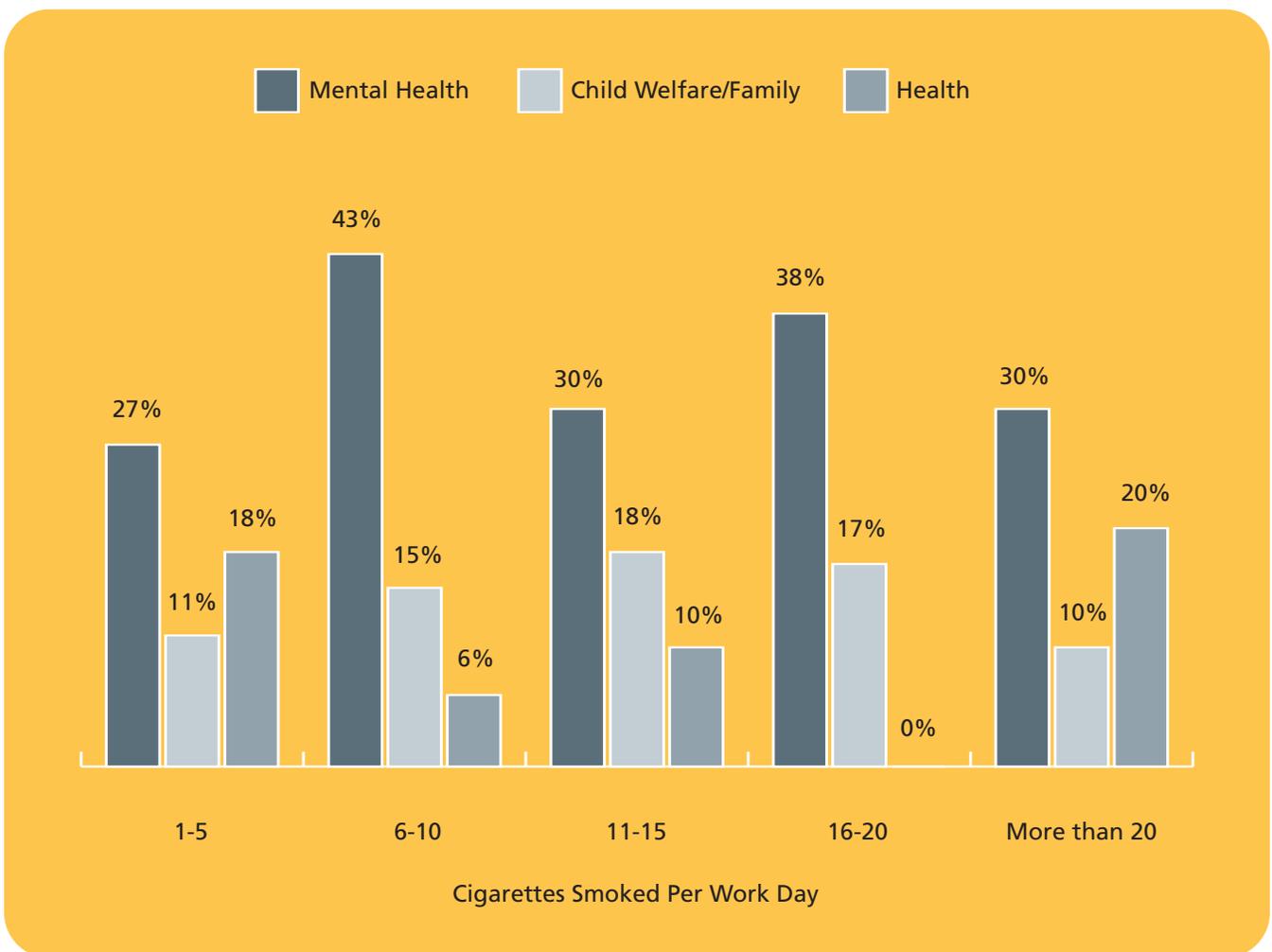
FIGURE 9. GENDER AND AVERAGE NUMBER OF CIGARETTES SMOKED PER WORK DAY



In terms of practice area, smokers are most common in mental health. Of participants who indicated that they smoke one to five cigarettes per day, 18 percent are employed in health, and 11 percent in child welfare/family (Figure 10). Fifteen percent of all child welfare/family, and six percent of health social work professionals smoke six to 10 cigarettes a day.

Additionally, child welfare/family workers account for 17 percent of the individuals who smoke 16 to 20 cigarettes in a single work day. Fewer child welfare/family social workers (10%) than health social workers (20%) stated that they smoke more than twenty cigarettes in a day.

FIGURE 10. PRACTICE AREA AND AVERAGE NUMBER OF CIGARETTES SMOKED PER WORK DAY



SUMMARY

Work-related stress is common in today's workforce, including individuals practicing social work. Given their profession's client-centered nature, stress is a concern among social workers—particularly among those providing direct services.

Considering their experiences of insufficient time to complete day-to-day work tasks, heavy workloads, poor compensation, challenging and/or difficult clients, few resources, long work hours, and unclear job expectations, it is not surprising that social workers experience work-related stress. Under these less-than-optimal work conditions, social workers are often “pushed to the limit” when trying to complete their job requirements.

Over time, work-related stress can result in burnout, increased risk for work place injury, impaired performance, poor mental health, impaired cognitive functioning, decreased concentration, and health-related problems for social workers. Additionally, these issues may cause these professionals to consider a career change.

Reestablishing a sense of control, mastery, and competence in one's work situation may seem, at first glance, a daunting task. However, with strategies like regular exercise, meditation/relaxation techniques, and therapy—identified by professional social workers as useful coping tools—alleviating work stress can be an attainable goal.

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