Global social work working conditions and wellbeing


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Abstract

This research explores the working conditions of social workers around the globe, using a mixed-methods approach. A survey of working conditions and wellbeing was distributed to social workers via email and social media. Results subsequently informed the interview schedule for individual semi-structured interviews with social work leaders from across the world. Results confirm that social workers have among the most difficult working conditions of all equivalent professions, with detrimental effects on services for individuals and communities due to burnout and retention. Suggested solutions include legal recognition of the social work profession, improved management support, and better pay and conditions.

Stress, wellbeing, working conditions, global mixed methods
Global Social Work Working Conditions and Wellbeing

Social workers play a key role in the lives of some of the most vulnerable and disadvantaged people across the globe (Ravalier et al., 2020a). They are an essential component of a thriving economy, and research has demonstrated that for each dollar spent on social services there is at least a three dollar return to the economy. This is realised through the reduced crime rates, increased health outcomes and higher levels of participation in education and the workplace in communities that are supported by social work and social services (Stuckler and Base, 2014). Having a healthy social work workforce employed under positive working conditions is therefore key to individual and collective outcomes. Despite this, evidence from the UK (Ravalier et al., 2020b), USA (Lloyd et al., 2002), and Turkey (Yurur and Sarikaya, 2012) among others has demonstrated that social workers are often employed under some of the most difficult working circumstances across the globe (Coyle et al., 2005). The aim of this paper, therefore, is to outline and compare the working conditions of social workers from across five global regions.

Working Conditions and Individual Health and Wellbeing

It is widely understood that chronically poor working conditions at work can have a number of negative impacts on the physical and psychological health of employees in all sectors (Chandola et al., 2006). For example, flagship studies by Niedhammer et al. (2020) demonstrated the impact of chronic workplace stress on cardiovascular disease and mortality, with Rosengren et al. (2004) also finding that work stress is as much of a risk factor for the development of cardiovascular disease as well known factors such as high blood pressure and smoking. Chronic and acute stress have also negatively impacted psychological health such as anxiety and depression (Mackay et al., 2004).

Working Conditions and Organisational Outcomes

As well as impacting upon individual health and wellbeing, chronic stress and poor working conditions clearly have a subsequent impact on the organisation that employees work for, and in the case of social workers, also impact various outcomes for the service users that they work with (Flowers et al. 2005). For example, the UK Health and Safety Executive (HSE; 2019) found that stress, anxiety, and depression, in the years 2018/19 were responsible for 54% of all health-related days lost due to sickness absence, and was the leading cause of long-term sickness absence.

In a systematic literature review relating to burnout and resilience factors in child protection social work, McFadden et al. (2015) found a level of international evidence of recurring similar patterns and themes relating to social worker workforce concerns. The review revealed a dearth of research on this topic in some global zones and high numbers of studies in others. Of the 69 studies in the review, 84% were USA, 6 % Canada, 1 % Ireland, 6 % Australia, 2 % UK, 2 % Sweden. Countries categorised as the least developed by the United Nations Conference on Trade and Development (UNCTAD, 2019) did not appear in this review.

Researchers, academics and practitioners in the USA have researched social work workforce concerns most frequently and produced findings that might be applied elsewhere if culturally appropriate. Mainly, the recurring issues related to retention and turnover concerns (USA, Chernesky and Israel, 2009), inexperience in teams due to turnover
(Australia, Healy et al., 2009), working conditions (Sweden, Tham, 2008), and organizational culture (Canada, Regehr et al., 2007). Organizational factors were also analysed in the context of burnout, specifically workload, values, fairness, reward and control (Northern Ireland, McFadden et al. 2017). Evidence of burnout and job satisfaction was also discovered in a more recent study (Spain, Caravaca Sánchez F et al, 2018) and risk laden working lives of social workers has also been reported (South Africa, Truter, 2019). COVID-impact on workforce wellbeing and coping was examined by McFadden et al (2020). Wellbeing is reported as lower than population norms (Ng Fat, 2017). The study found that coping under pressure was helped by supportive management, consistent communication, connection with service users, co-workers and managers (McFadden et al 2020).

Concerns about workforce mental health and wellbeing are broader than social work and go back decades. As a result of ever-increasing general concerns about stress and working conditions related to sickness absence, in 2000 the UK HSE released the management standards approach to assess and deal with psychosocial working hazards (Cousins et al., 2004). As such, through a thorough review of the academic literature, the HSE suggested that chronically poor levels of seven particular aspects of the workplace (such as demands, control, managerial support, peer support, relationships, role, and change) were likely to lead to worsened psychological and physiological health outcomes in employees. To enable organisations and researchers to measure these seven working conditions, the HSE released a Management Standards measurement tool (known as the Management Standards Indicator Tool, MSIT). This allows organisations or researchers to assess the psychosocial hazards in the workforce population.

For research purposes, the MSIT has been used throughout a number of public and private organisations and occupations across the UK and more widely. In the UK, researchers have used the MSIT in public sector job roles such as teaching (Ravalier and Walsh, 2018), policing (Houdmont et al., 2013), and social workers (Ravalier, 2020a, 2020b). The MSIT has also been used more widely around the world for example with populations in Italy (Marcatto et al., 2014), Australia (D’Aleo et al., 2015), and Ireland (Boyd, Kerr, and Murray, 2016) among others. The tool is therefore robust for use across a number of populations, countries, and regions.

**Work Conditions and Stress in Social Work**

Literature on global working conditions for international social workers, working across contexts and countries, is not readily available. The available research, mainly from higher income countries, provides a consistent picture relating to the needs of the workforce. The dominant theme is that social workers are at risk of burnout and the role can be highly stressful, characterised by high demands such as workload, excess hours, and increasing levels of bureaucracy (Depanfillis and Zlotnic 2008).

In the UK, studies have consistently shown that social workers are exposed to poor working conditions when compared to the national average (Ravalier, 2019; Ravalier et al. 2020b). Indeed, apart from Managerial and Peer Support (which scored in the 95th percentile), most working conditions in UK social workers were worse than over 75% of the UK average. This will have played at least some part in Health and Social Care workers having the highest levels of stress-related sickness absence of all sectors (HSE, 2019), and social workers working between 11 and 12 hours per week more than they are contracted to (Ravalier,
2019). This therefore has an impact on organisational retention, burnout symptomology, and recruitment difficulties, and subsequently impacting service delivery (McFadden et al., 2017).

The aim of this study therefore is to look into the working conditions that social workers are employed under across the world, and the impact that these working conditions subsequently have on psychological wellbeing.

Research Question 1: What are the characteristics of working conditions for social workers across different global regions?
Research Question 2: What are the differences in working conditions and wellbeing across different global regions?
Research Question 3: Which working conditions are most impactful on wellbeing in different regions of the world?
Methodology

Methods and Participants

A cross-sectional survey design consisted of measures of working conditions, mental well-being, questions about one’s job, and demographics. The presented is a pilot study, the first in a series of bi-annual longitudinal global surveys of social worker wellbeing and working conditions. It was originally developed out of the global agenda for social work’s cross-cutting theme of workforce environment (Jones and Truell, 2012; IFSW, 2019), and the observation by the United Nations Research Institute for Social Development that there is a lack of objective and global data on the social work workforce. Ethical approval was gained from the Bath Spa University research ethics committee.

Data were collected by working with members of organisations that are affiliated with the International Federation of Social Work (IFSW), who distributed online surveys to email lists and through social media. An online survey data collector (onlinesurveys.ac.uk) was use, four separate links were developed (one for each translation of the survey) so that respondents could participate in any of these languages. Survey links were initially sent out in the middle of November 2020, with periodic social media and email pushes and the collectors all closed on the 1st of March 2020. Altogether 3,517 responses were gathered from 69 countries across each of the 5 regions that the IFSW work within (Africa, Asia/Pacific, Latin America and Caribbean, Europe, and North America).

Following the survey, five semi-structured interviews were undertaken with social work leaders in each of the participating global regions (Africa, Latin America and Caribbean, Europe, North America, Asia/Pacific) to gain a broader understanding of the findings from the survey, and thus put those findings into context. Interviews lasted on average 35 minutes, and were undertaken by [initials of authors]. Interviewees were each global regional leads for [removed for anonymity], allowing them to provide context to quantitative findings. Interviewees were recruited by [initial of authors] via email, and took place over Zoom in English. Interview questions were therefore exploratory, focusing on social work regulation and training, employment of social workers across the region, funding and pay of social workers, and public perception of social workers across the regions.

Table 1 below demonstrates the demographic data of respondents. Results have been broken down by region, and then where more than 30 responses were gained from any one country (apart from the United States), demographic data is broken down by country.

| TABLE 1 ABOUT HERE |

Table 1 outlines the demographic findings from the present study. For all participants, most respondents were aged 34-37 and female, and the majority were qualified social workers (77%) at degree level or above (82.7%). Those who were not currently social work practitioners were mostly team leaders, managers, or academics and thus likely to be practitioners with experience, and thus included within the project. Most of those (15.2%) with a degree or above were qualified to another level, and although the most frequently cited length of experience was 1 to 6 years, 15.3% (the next most prevalent length) had been in social work for 21 years or more. Individual regions were broken down into Africa, Asia/Pacific, Latin America and Caribbean, Europe, and North America.
Materials
To ensure that the project was as valid and reliable as possible, only tools which were psychometrically valid were used to measure working conditions and well-being. Questions about work role and demographics (age, gender, role status, educational status, and length of experience in the role) were each single item questions. Where translations were available, the projects used those original translations. However, where translations of questions were not available, an expert in the language translated the questions, and these were piloted among a small number of native speakers in order to check the veracity of these questions.

Working conditions were measured using the 25-item version of the Management Standards Indicator Tool, originally released by Edwards and Webster (2012) and subsequently used in a number of studies in English (e.g. Ravalier et al., 2020) and in other languages. The shorter version was chosen because it has similar psychometric properties to the 35-item measure but is quicker to complete, has been used in wide-ranging studies with UK social workers (e.g. Ravalier et al., 2020a; 2020b), and has UK-based scoring norms. Responses are given on a 5-point Likert scale ranging from 1 (never) to 5 (always) in the first fifteen questions, and 1 (strongly disagree) to 5 (strongly agree) for the remaining ten. The seven working conditions measured by the MSIT are:

- Demands - the quantitative workload employees have.
- Control - the amount of autonomy an employee has over the way in which they do their job.
- Managerial Support - support received from organisational management.
- Peer Support - support received from colleagues.
- Relationships - promoting positive practices to avoid conflict.
- Role - understanding of individual’s role within the organisation.
- Change - how well organisational change is communicated across the organisation.

Mental wellbeing was measured using the 14 item Warwick-Edinburgh Mental Wellbeing Scale (WEMWBS; Tennant et al., 2007). The 14 positively-phrased items within the WEMWBS are answered on a five-point Likert scale from 1 (none of the time) to 5 (all of the time). The tool assesses positive affect, psychological functioning, and interpersonal relationships with higher scoring indicative of better wellbeing. The WEMWBS is once again a valid and reliable tool which has been used in numerous populations from across the world including healthcare staff in the UK (e.g. Ravalier et al., 2020), the general population in Northern Ireland (Lloyd and Devine, 2012), psychiatric and general populations in France (Trousselard et al., 2016), and the general Spanish population (Castellvi et al., 2013) among many others.

Three individual questions were asked about the role of social work and each respondents’ country was recorded. The additional questions asked were:

- Whether there is a ‘law on social work your country’ (yes/no).
- Do the laws and legal context in your country enable you to practice in accordance with social work ethics’ (yes/no) (this sought to investigate whether there were national laws which guided elements of their social work practice).
- Do you feel you are paid fairly in comparison with other professionals doing similar work? This was answered on a five point Likert scale from Strongly Agree (1) to Strongly Disagree (5).
**Analytical Strategy**

Data were analysed using descriptive statistics for comparison of regional and country findings using IBM SPSS 22.0 (IBM Corp., USA). These could subsequently be compared to UK-wide social work scoring by Ravalier (2020). A series of hierarchical linear regression analyses were subsequently conducted in order to determine the influence of working conditions on wellbeing at a global, regional, and national level. Qualitative responses were first translated by a member of the research team and then analysed using a Conventional Content Analysis (CCA) approach (Hsieh and Shannon, 2005). The CCA approach is appropriate because it is flexible for use in health-related research, with the methodology outlined by Hsieh and Shannon (2005), and subsequently utilised with UK social workers by Ravalier (2019).

Qualitative semi-structured interviews were analysed using Thematic Analysis (TA; Braun and Clarke, 2014) in order to pick out regional similarities and differences in response to questions. As such, the six steps of TA allowed the identification, description and reporting of themes found across the interviews. Audio recordings were transcribed and analysed, with a pragmatic approach to theme development taken.
Results

As above, 3,517 total responses were gathered to this global survey from all five regions covered, although as questions were not mandatory to complete there are some differences in response rate across each of the three descriptive questions and measures of working conditions and wellbeing. Across all participants, 84.2% (n=2918) suggested that there was a law on social work in their country, and 75.5% (n=2616) that these laws allowed them to practice in accordance with social work ethics. However, just 30.7% (n=1071) felt that they were paid fairly in comparison with professionals doing similar work.

Social Work Law, Ethical Practice, and Pay

Among social workers in Africa, 41.4% (n=36) suggested that there was a social work law in their country, and half (n=44) that this allowed them to practice in an ethical way. 21.6% (n=19) felt they are paid commensurate with similar professions. 55.5% (n=146) of social workers in the Asia/Pacific region agreed that there is a social work law governing their practice, and 74.8% (n=196) that laws allowed them to practice ethically. 38.1% (101) were paid commensurate with others. Over three quarters (75.7%, n=256) of those practicing in Latin America and the Caribbean had a social work law, and 73.9% (n=252) that this allowed ethical practice, whilst 21.5% (n=73) felt they were paid fairly. Among social workers in Europe, 89.3% (n=2374) practice under a social work law, with 76.5% (n=2033) suggesting this allowed ethical practice, and 31.6% (n=845) felt fairly paid. Finally, among North American social workers 94.5% (n=69) felt they had a social work law and 84.7% (n=61) that this law allowed them to practice ethically. However, 28.8% (n=21) felt they were paid fairly.

TABLE 2 ABOUT HERE

Global Working Conditions

Table 2 depicts mean scoring on working conditions and wellbeing for all respondents and separated by region. In comparison to UK-wide social work scoring (Ravalier (2020), North American social workers scored poorly on demands, control, managerial support, role understanding and change communication. Latin American social workers scored poorly on managerial support, peer support, and relationships, African social workers on control, and both Asian and European on role understanding. Alternatively, African social workers had good levels of demands, role understanding, managerial support, and change communication. European and Asian social workers scored poorly on control and relationships, and European social workers on peer support. Finally, Asian social workers scored well in comparison to the UK comparison group on managerial support, and those based in Latin American/Caribbean countries on both demands and role understanding.

TABLE 3 ABOUT HERE

Using the enter method, a series of multiple linear regression analyses were conducted to examine the relationship between social workers’ working conditions and wellbeing among all respondents and broken down by the five participating regions (see Table 3). Across all respondents the model was significant (p<.001) and explained 36% of the model’s variance. All variables entered into the model were significant at <.001, apart from ethical social work practice (<.05) and the ‘Relationships’ working condition (non-significant).
When separated by region, all five regression analyses were significant (<.001). Among social workers in Africa, just two working conditions variables (fair pay and role) were significant associated with wellbeing (<.05; <.005 respectively), accounting for 31% of variance. In Asia/Pacific social workers, demands, control and role each significantly influenced psychological wellbeing (all <.001), accounting for 43% of the variance. For those social workers within Latin America and the Caribbean, four working conditions influenced wellbeing: demands (<.005), peer support (<.01), role and change (both <.001). Among European social workers, only relationships with colleagues was not significant. All other variables significantly influenced wellbeing (<.001), apart from whether pay was commensurate with similar occupations (<.005). Finally, three factors were significantly associated with wellbeing among North American social workers: fair pay, Demands, and Role (each <.05).

**Qualitative Comments**

As above, a content analysis was conducted to gain a more detailed understanding of how social work practice could be improved in the country within which respondents were employed. This was an optional open-ended question, and across all participants (N=3,517), 3,323 provided individual responses, with these arranged into a number of separate themes through the CCA analysis.

**TABLE 4 ABOUT HERE**

Table 4 demonstrates the findings from the content analytical findings of the open-ended question within the quantitative survey element of the study. Across all respondents in the study, three themes emerged most frequently. These were: a request to have greater respect and understanding of the role of social workers across the globe, better pay, and improved resources in order to create better outcomes for service users.

**Role Recognition and Respect**

The theme of 'role recognition and respect' was one of the most often cited themes across all five regions included within the study. The theme relates to external understanding of the role and responsibility of those within the profession. This would mean greater respect and support from other professionals, service providers, service users, employers, and politicians alike.

> “Social workers should be seen as an important field that contribute positively to the betterment of the people in need. This in turn will give a social worker a positive mindset of being useful and in turn bring out the best in them.” *(African Social Worker, 38)*.

> To bring a greater awareness of the practice of Social Work, in particular the many different areas of practice, training, professionalism” *(European Social Worker, 120)*.

> “The public’s awareness of social work practice needs to be supported more by medical, political and social organisations and groups” *(North American Social Worker, 46)*.

**Law and Legislation**

The Law and Legislation theme was one of the most frequently mentioned in African, Asia/Pacific, and Latin American/Caribbean regions. The theme relates to suggestions from...
respondents in each of these regions that social work should be a profession which is recognised in law, and/or has strong representation from a professional organisation or union. This would mean greater recognition legally for ethical social work practice and better outcomes for service users.

“We need a Social Work law or a stronger professional representation, like a union or an association.” (African Social Worker, 1).

“Strengthening of the professional social work association in support of SW rights, welfare and well being” (Asia/Pacific Social Worker, 37).

“Generate a law that recognizes professional practice and defines areas of intervention, to properly validate us” (Lat. America/Caribbean Social Worker, 35)

**Better Pay**

This theme was also described as one of the most frequent by those in three regions: Africa, Europe, and Latin America/Caribbean. This theme is relatively self-explanatory, but those who were practicing in the social work profession in these three regions wanted improved compensation which was relatable to other, similar professions, and reflected their skills, knowledge, training and experience.

“Compensation should match the level of education and expertise desired for the position.” (African Social Worker, 3).

“Amount of clients should be more reasonable and payment from the work should be equal and enough.” (European Social Worker, 37).

Professional recognition translated into salaries comparable to professions of the same category (Lat. American/Caribbean Social Worker, 52).

**Qualifications and Competency**

This theme was most frequently discussed by colleagues in two regions: Asia/Pacific and North America. It refers to participants’ desire for all colleagues to be appropriately qualified to do their jobs, and thus having the right skill and ability set to do so. Similarly, having a more expanded social work provision during university training may provide greater support.

“Professional qualifications of persons doing social work job because most are not social workers” (Asia/Pacific Social Worker, 28).

“Social Work needs to be recognised as a profession, not just a support service” (North American Social Worker, 32).

**Resources and Understaffing**

This theme was only mentioned most frequently among European social workers. It relates to social workers requesting both more staff and greater resources to support not only their own wellbeing and social work practice, but also improved levels of resources to ensure positive outcomes for service users.

“Payment, amount of the work, how many clients for one social worker” (European Social Worker, 31).

“Increase in community services for referral including women’s refuges and crisis support” (European Social Worker, 81).

**Semi-Structured Interviews**

As per the methods, five interviews were conducted with social work leads, in most cases two representing each of the five participating global regions. The questions sought to investigate the way in which social work is regulated in different regions, whether social
workers are paid and treated commensurate with other similar roles, and the public perception of social workers in the region.

Regulation of Social Work
This question referred to whether the social work profession is in some way regulated within the region covered. For the most part, North American and European social work is covered by regulation and/or professional organisations, “Most countries have some recognition of social work” (Europe), with this being supportive of positive practice. Other regions, such as South America and the Caribbean are “moving towards being a regulated profession” (Latin Am. and Caribbean), but many are not. Similarly, “most countries [in Africa are] not regulated in a formal sense” (Africa), and there are “very mixed conditions – some have well established formal regulation (e.g. Aotearoa New Zealand (ANZ), Philippines)” (Asia/Pacific) in the Asia/Pacific region.

Social Worker Pay
This question sought to investigate whether social workers were similarly paid across the regions in comparison to roles such as teachers and nurses. African “social workers are leaving the profession and some migrating (for) economic and professional reasons” and have “in general lower pay than other professions” (Africa). However, the story is much more mixed in North America, and Asia/Pacific. Here, different SW roles are remunerated very differently. For example, while “many social workers In Asia (are) paid $150 a month - on the fringe of poverty” (Asia/Pacific), in India private hospital social workers can be paid better than nurses. However, generally in Europe and Latin America/Caribbean, social workers were described as undervalued and underpaid. “Social work is paid lower than all other professions in all settings – can be less than $1000 per month” (Lat. Am/Caribbean).

Public Perception of Social Workers
Across many regions, there appears to be a mistrust and misunderstanding of the social work role, with social workers perceiving public perception to be often negative or simply misunderstanding the occupation. In the United States, “some qualified social workers do not identify as social workers or use the titles – this is often a reaction to perception challenges” (North America), and in South America, “vulnerable communities are suspicious of social workers because of child removal and lack of family support”. However, even when social work is seen as positive there is a misunderstanding of the role, “social workers are seen as responsible for charitable distributions – handouts – humanitarian assistance”, but also that “anybody doing good is a social worker” (Africa).

Wellbeing and Support
Social worker wellbeing and support offered by organisational management and governments were discussed as key to the social work profession across all regions. Wellbeing and support were discussed in combination - adequate support is needed for social worker wellbeing, with much of this support coming from the managers above them “Not all social workers are managed by social workers and this makes for difficulties and lack of understanding” (Asia/Pacific). This support may come in the form of supervision, although where social workers are not managed by people trained within social work it can create issues, “Sometimes supervisor is often not a social worker” (Lat. Am. and Caribbean).
Discussion

The aim of this project was to better understand the working conditions of social workers from across the globe and to better understand conditions in five regions of the world, using a mixed-methods approach. This pilot study provides an opportunity to review the research questions and reflect on how best to approach the issues in subsequent surveys. Across all participants, in both the open-ended questions within the survey, as well as semi-structured interviews, a number of similar themes emerged.

Firstly, respondents wanted greater role recognition and respect from the general public, other professionals such as doctors, nurses, and teachers, and more widely at governmental and legislative levels. Furthermore, respondents suggested pay was generally either poor compared to commensurate roles such as teachers and nurses, or poor in general, with some being paid wages on the edge of poverty. This is further reflected in the survey results - within Africa, Europe and North America, poor pay was one significant predictor of poorer wellbeing outcomes. Relatedly, regional leaders and individual respondents reported that those who did not have law or regulation wanted social work-specific laws in order to better support social workers and the service users they work with.

However, some themes emerged from the qualitative interviews which were distinct from the open-ended survey question yet reflected upon the working conditions survey itself. Firstly, interviewees discussed wellbeing needs as being important. In particular, they required greater support from organisations and management, who themselves at times require greater support. This is reflected in the survey findings, which indicated that managerial support significantly impacts upon wellbeing outcomes. Furthermore, demands were significant predictors of wellbeing across the sample, and interview respondents suggested that lack of resources and understaffing were difficulties associated with working in the role. Finally, role understanding was significantly associated with wellbeing across all regions, meaning that social workers had higher levels of work satisfaction in settings where there was greatest consistency between the expectations of employers and the social workers.

When comparing mean regional survey scoring on the management standards working conditions indicator tool, it was not expected that North American respondents would report the worst psychosocial working conditions of all regions. Respondents based in Africa had similarly poor levels of autonomy over the way in which they do their jobs. Latin American/Caribbean respondents also scored more poorly on support received from management, and the relationships that they have with colleagues. These results are similar to those found when comparing scoring from a UK sample (Ravalier, 2020) with American and Latin America/Caribbean respondents also scoring poorly in comparison to social workers in the UK.

These apparent paradoxes were explored in the qualitative interviews with regional leaders. It is reasonable to assume that, in responding to questions, social workers were comparing themselves with others in their region rather than with counterparts in other parts of the world, since knowledge about pay and working conditions in different regions is not widely known and was not specifically addressed in the questions. Another possibility worth further examination is that social workers in more developed economies are more subject to forms of new public management and bureaucratic control through the digital environment, whilst
those practicing in parts of Africa and Asia can work more independently and therefore feel more in control of their own decisions. On the other hand, the interviews with regional leaders confirmed that in many parts of Asia and Africa, social workers and their families cannot have the lifestyle they seek on a social worker salary alone so most have two or more jobs to make ends meet. This is hardly ever the case in the more developed economies but in comparison with other professions in those contexts, the pay and work conditions for social workers is usually worse than for comparable professions, so they feel disadvantaged.

While this global survey is the first of its kind, and the first to assess working conditions at a global regional level, the results do compare to those found by previous researchers. For example, organisational factors such as workload and leadership have been shown to be associated with outcomes such as turnover (Chernesky and Israel, 2009), burnout (McFadden et al., 2017), and poor job satisfaction (Caravaca et al., 2018) in international social work populations.

However, while poor pay has not been a frequent discussion in recent qualitative or quantitative social work literature, this project is not unique in finding that pay and conditions are poor - particularly in comparison to other roles. Female-dominated professions such as social work have often had a demonstrably lower level of pay compared to male-dominated professions, with a significant gender pay gap even within the profession (Alkadry and Tower, 2006; Gibelman, 2003). Research has also demonstrated that social workers often feel as though they are treated with a lack of respect at times by the general public, the media, employers and governments (Ravalier, 2019). Indeed, the British Association of Social Work developed the ‘Campaign for Professional Working Conditions’, of which respect for the profession is one of the keys remarks (BASW, 2018).

**Strengths and Limitations**

A strength of the project is that the majority of respondents are social work practitioners - they are front line social workers from across the world, as opposed to teachers of social workers, academics, managers, or directors. Furthermore, the majority of social work professionals around the world are female, and thus our work is representative from this perspective. This is also the first study of its kind - there have been no global studies of social work working conditions or mental wellbeing, with the national-level studies generally being conducted in more financially affluent countries (McFadden, 2013). This work therefore adds significantly to the global literature and understanding.

This study however is not without its limitations. Firstly, the findings cannot be argued to be representative. We received neither sufficient numbers of responses from the countries that did respond, nor did we receive responses from all countries in all regions. Relatedly, although we distributed versions of the survey which were translated into a number of different languages, contextual differences may mean differing understanding of the questions asked. Similarly, frameworks of employment and regulation vary across the world and across different regions/countries, thus potentially influencing the outcomes of the study. Furthermore, our interview data is based on a small sample of 5 participants - mostly two per region. While these are, however, organisational leaders from each region, and thus have a strong contextual understanding of their representative regions, again they cannot be generalised across all in each region. Through the qualitative element of the project,
participants suggested that there are laws and regulation which they had to work around through elements of their practice, but the questionnaire did not specifically ask about the regulation of the profession in each country. Lastly, although we determined that North American social work respondents reported the overall poorest working conditions, these findings must be taken with caution due to the small sample size. However, as a preliminary and pilot-phase study, these are results which need to be further studied.

**Future Research**

The presented project is a pilot - the first in a series of biannual surveys seeking to investigate psychosocial working conditions and wellbeing in social workers from across the world, and to look into what can be done in varying regions and individual countries to support social workers. Subsequent runs of the survey will include further translations of the survey. We will also consider how to disseminate the survey more effectively, especially considering there will be a number of social work professionals across the world who do not have regular access to email and the internet to complete the study. This will also support the gathering of data which is more representative of the global social work population. Small response rates from African and North American populations means a greater reach is needed. This does not mean, however, that the presented results are without utility. Future research should seek to develop national or regional-level interventions to support the perceptions of social work, as well as pay and respect afforded them. There are potentially also differences across regions and countries, according to their financial statuses. Future iterations of this project, which have a greater and more representative response rate, will therefore make these comparisons.

**Implications**

This study has a number of implications for social work management and practice across the world. Firstly, it is clear that, irrespective of where study participants were based, a greater understanding of the role of a social worker is required for those outside of the profession. The Global Agenda for Social Work and Social Development and World Social Work Days were designed in part to challenge that perception but the challenge continues. Social work stakeholders, such as national and international professional organisations and unions will strengthen advocacy with employers, political organisations and national politicians, to counter this perception, celebrate positive social work and discuss the social work role.

The interviews from several regions highlighted the perception that some in the general public have a negative perception of social workers, although evidence suggests that there is also recognition of and respect for social workers; some see the role of social workers as being mainly to remove children from families - or they see any person doing positive work in the community (such as clearing litter) as ‘social work’ (when it is not). This perception needs to be challenged with evidence, such as that gathered in the Global Agenda process.

It is also clear that, across all regions, there are issues with social work pay. Improved pay and conditions for social workers are good not only for the service users that social workers work with, but it also has positive country-wide financial benefits.

Finally, we have seen that excessive work demands and poor managerial support are predictive of poorer wellbeing outcomes. These realities are the work of conscious choices
by politicians and managers and can therefore be changed. This research provides evidence to support campaigns to improve pay working conditions by the key stakeholders.
References


Table 1: Demographic representation of respondents.

<table>
<thead>
<tr>
<th>Region</th>
<th>Country</th>
<th>Median Age</th>
<th>Gender (%)</th>
<th>Social Work Practitioner role* (%)</th>
<th>Degree or above (%)</th>
<th>Median Experience</th>
</tr>
</thead>
<tbody>
<tr>
<td>All Participants (n=3517)</td>
<td>---</td>
<td>34-37 (13%)</td>
<td>388 (11%)</td>
<td>2679 (77%)</td>
<td>2858 (82.7%)</td>
<td>1-6 years (32%)</td>
</tr>
<tr>
<td>Africa (n=88)</td>
<td>---</td>
<td>30-45 (60.2%)</td>
<td>40 (45.5%)</td>
<td>60 (69%)</td>
<td>81 (93.1%)</td>
<td>1-9 years (53.9%)</td>
</tr>
<tr>
<td>Asia/Pacific (n=266)</td>
<td>All respondents</td>
<td>34-41 (27.2%)</td>
<td>64 (24.2%)</td>
<td>198 (75%)</td>
<td>166 (62.4%)</td>
<td>1-9 years (50.9%)</td>
</tr>
<tr>
<td></td>
<td>Australia (n=118)</td>
<td>34-41 (23.7%)</td>
<td>14 (12%)</td>
<td>101 (85.6%)</td>
<td>77 (65.2%)</td>
<td>1-6 years (41%)</td>
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<tr>
<td></td>
<td>India (n=33)</td>
<td>22-37 (78.7%)</td>
<td>13 (40.6%)</td>
<td>19 (59.4%)</td>
<td>18 (54.6%)</td>
<td>0 months-3 years (59.4%)</td>
</tr>
<tr>
<td>Latin America &amp; Caribbean (n=341)</td>
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<td>30-45 (44.6%)</td>
<td>39 (11.6%)</td>
<td>296 (87.8%)</td>
<td>232 (68.6%)</td>
<td>1-9 years (39.1%)</td>
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<td>Puerto Rico (n=186)</td>
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<td>165 (88.7%)</td>
<td>138 (74.6%)</td>
<td>1-6 years (27.4%)</td>
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<td></td>
<td>Mexico (n=34)</td>
<td>50-53 (41.2%)</td>
<td>2 (5.9%)</td>
<td>32 (94.1%)</td>
<td>16 (50%)</td>
<td>1-9 years (39.4%)</td>
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<tr>
<td>Europe (n=2683)</td>
<td>All respondents</td>
<td>30-41 (36.6%)</td>
<td>231 (8.6%)</td>
<td>2438 (91%)</td>
<td>2139 (80%)</td>
<td>1-6 years (31.3%)</td>
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<td></td>
<td>Finland (n=155)</td>
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<td>8 (5.1%)</td>
<td>148 (94.9%)</td>
<td>85 (54.4%)</td>
<td>1-6 years (47.5%)</td>
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<td></td>
<td>France (n=1341)</td>
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<td>122 (9.1%)</td>
<td>1211 (90.4%)</td>
<td>1132 (84.7%)</td>
<td>4-12 years (37.1%)</td>
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<td>181 (89.2%)</td>
<td>187 (92.1%)</td>
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<td>1-6 years (41%)</td>
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<td>1-6 years (46.9%)</td>
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<td>United States (n=29)</td>
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<td>26 (89.7%)</td>
<td>20 (71.5%)</td>
<td>1-6 years (44.8%)</td>
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Note that not all participants completed all demographic questions.
*Proportional representation of those who are employed as a practicing social worker.
Table 2: Mean scoring on working conditions and mental wellbeing measures.

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<tr>
<th>Region</th>
<th>Demands</th>
<th>Control</th>
<th>Managerial Support</th>
<th>Peer Support</th>
<th>Relationships</th>
<th>Role</th>
<th>Change</th>
<th>WEMWBS</th>
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<td>3.89</td>
<td>2.52</td>
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Higher scoring on each measure indicates better performance.
**Table 3:** Regression outcomes of the impact of working conditions, pay, and ethical practice on mental wellbeing outcomes.

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<tr>
<th>Significant Related Factors</th>
<th>Coefficient Estimate (B)</th>
<th>t</th>
<th>p</th>
<th>Adjusted R²</th>
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<td>DEMANDS</td>
<td>CONTROL</td>
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<td>&lt;.005</td>
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</table>

<table>
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<tr>
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<th>DEMANDS</th>
<th>ROLE</th>
<th>CHANGE</th>
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<td>2.82</td>
<td>3.11</td>
<td>2.53</td>
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<td>&lt;.05</td>
<td>&lt;.05</td>
<td>&lt;.05</td>
<td>&lt;.05</td>
<td>&lt;.05</td>
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</table>
Table 4: content analytic findings from the qualitative comments separated by region.

<table>
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<tr>
<th>Region</th>
<th>Responses (n)</th>
<th>Mentions (n)</th>
<th>Theme 1</th>
<th>Theme 2</th>
<th>Theme 3</th>
<th>Theme 4</th>
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<tbody>
<tr>
<td>Africa</td>
<td>78</td>
<td>112</td>
<td>Law and legislation (n=25)</td>
<td>Better pay (n=19)</td>
<td>Role recognition and respect (n=11)</td>
<td>--</td>
</tr>
<tr>
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<td>233</td>
<td>324</td>
<td>Law and legislation (n=48)</td>
<td>Role recognition and respect (n=37)</td>
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<td>Resources (n=391)</td>
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<td>499</td>
<td>Role recognition and respect (n=84)</td>
<td>Better pay (n=50)</td>
<td>Law and legislation (n=40)</td>
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<td>80</td>
<td>Qualifications and competency (n=19)</td>
<td>Role recognition and respect (n=14)</td>
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<td>--</td>
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</tbody>
</table>