
This is a pre-copyedited, author-produced PDF of an article accepted for publication in ‘British Journal of Social Work’ following peer review. The version of record is available online at: https://doi.org/10.1093/bjsw/bcy023

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Abstract

It is well documented that exposure to chronic negative working conditions leads to stress. This subsequently impacts sickness absence and attrition, making it a key consideration for policymakers and academics alike. This study therefore seeks to investigate the influence of psychosocial working conditions on stress and related outcomes: sickness presenteeism, job satisfaction, and turnover intentions in UK social workers (SWs). A cross-sectional survey was used, in addition to a single open-ended question designed to further investigate the sources of stress, to collect data from 1,333 registered SWs. Results demonstrate high levels of turnover intentions, presenteeism, and low job satisfaction. Regression analyses found that the interaction between high demands, low levels of control, and poor managerial support was related to SW stress and related outcomes. Qualitative content analysis of the open-ended question corroborated and extended these findings, also demonstrating that poor ergonomic set up of the work environment and a blame culture was adding to the experience of stress. Policy makers need to consider improvements in these working conditions or face losing a large proportion of the SW workforce. Future research needs to be both longitudinal and interventional to focus on these needed improvements.

Key words:

stress, presenteeism, turnover intentions, working conditions, job satisfaction
Psychosocial Working Conditions and Stress in UK Social Workers

Chronic workplace stress has the potential to negatively influence the wellbeing of employees. Indeed, Chandola et al. (2006) demonstrated that work stress was related to the development of metabolic syndrome, a known risk factor for health complaints such as Type 2 diabetes. Similarly, the InterHEART studies (Rosengren et al., 2004) found that work stress was as much of a risk factor for the development of cardiovascular disease as well-known risks such as smoking and high blood pressure. As such, work stress also subsequently affects the organisation. In the United Kingdom (UK), work stress is the second biggest cause of short term sickness absence (fewer than four weeks) in public service workers, and the single biggest cause of long-term sickness absence (Chartered Institute of Personnel Development, 2016). Indeed, 11.7 million working days were lost due to stress, anxiety and depression in 2015-2016, an average of over 23 days per employee per incidence of absence, with stress accounting for 45% of all working days lost due to poor health (Health and Safety Executive [HSE], 2016). Work-related stress is therefore a key consideration for both employers and employees of public service organisations such as social workers (SWs).

Workplace Stress

Numerous theories of workplace stress have conceptualised the influence of the job on employee health. For example, the effort-reward imbalance model proposes that negative health outcomes may be due to a lack of reciprocity between the effort exerted at work and rewards gained (Siegrist, 1996), whereas the person-environment fit model assumes a mismatch between the characteristics of the individual and environment can lead to stress (Edwards and Cooper, 1990). However, the job demands-control-support (JDCS; Johnson et al. 1989) model has been widely applied to research in many occupational areas and been influential academically and in workplace practice (Wong et al. 2007). In particular, the model suggests that it is the interaction of three components of the working environment (high demands, low control, and low peer (collegial) support – known as the iso-strain
[isolation-strain] hypothesis) which lead to stress in the workplace (Mansell and Brough, 2005). This model’s utility has been demonstrated in a number of studies. For example, reviews by Van Der Doef and Maes (1999) of JDJS literature from 1979 to 1997 and Hausser et al. (2010) from 1998 to 2007 each found evidence for the iso-strain hypothesis. However, these findings in longitudinal studies may not be as reliable (de Lange et al. 2003), although Hausser et al. (2010) argue that the effect is found most commonly when the sample size of studies is large enough.

In 2004, the UK HSE released a set of ‘management standards’, based initially on the JDJS, which can be used to assist individuals and organisations to effectively manage and ‘diagnose’ psychosocial working hazards (or working conditions), and thus effectively manage stress (Cousins et al. 2004). The standards are a set of working conditions which, if left at unacceptable levels, can impact on employee health and wellbeing and subsequently performance (Cousins et al. 2004). Alternatively, when optimised employees are motivated and healthy, and thus the organisation performs strongly. In particular the management standards suggest seven psychosocial hazards: demands, control, support (which is split into managerial and peer support, in difference to the JDJS), relationships, role, and change (for more, see Cousins et al. 2004).

At the same time as releasing the management standards, the HSE also released a survey tool, the ‘Management Standards Indicator Tool’ (MSIT), which organisations can use in order to assess levels of each of these working conditions, as well as a series of benchmarks in order to measure an organisation’s performance against UK norms (Edwards and Webster, 2012). Although originally designed to be used within organisations for assessment of these working conditions, the MSIT has been used in academic research to measure working conditions in various populations. For example, the management standards have been assessed in groups as diverse as university academics (Kinman and Court, 2009), police officers (Houdmont et al. 2012), and care and support workers (removed for anonymity). However, SWs are a group in which working conditions have not been
investigated, nor the outcomes which can be related to chronically poor psychosocial working conditions.

**Stress and Organisational Outcomes**

**Job Satisfaction**

Job satisfaction has been shown to be related to chronic workplace stress in populations such as teachers (Collie et al. 2012) and nurses (Hayes et al. 2013). It is defined as an attitude that an employee has toward work, and occurs due to the experience of positive and negative events (Hayes et al. 2013). Wilberforce et al. (2014) demonstrated that the interaction of high work pressures and lack of control (i.e. the JDC strain hypothesis) was related to greater job dissatisfaction in SWs. Despite this, the influence of stress and working conditions on job satisfaction is under-researched in this sample.

**Sickness Presenteeism**

Sickness presenteeism (SP) is defined as ‘the phenomenon that people, despite complaints and ill-health that should prompt them to rest and take sick leave, go to work in any case’ (Aronsson and Gustafsson, 2005, pp. 958). SP is a distinct issue in organisations because it is strongly related to a number of other outcomes such as sickness absence, productivity, and overall employee wellbeing (Institute for Employment Studies, 2016). As such SWs who attend work while ill may provide worsened care to service users under their charge. However, despite the importance of SP, to the author’s knowledge the prevalence and antecedents of SP has never been investigated in SWs.

**Turnover Intentions**

Turnover intentions are important considerations for employers, and in public sector job roles such as SW, for the wider government too. The concept of turnover intentions relates to an individual’s voluntary intention to leave their current job, and is one of the strongest predictors of actual
attrition (Griffith et al. 2000). Therefore, by investigating turnover intentions, researchers can also investigate the reasons for actual turnover. Indeed, there are currently more roles available for experienced SW professionals in the UK than there are available SWs (Research in Practice, 2016). In a sample of Californian SWs, turnover intentions were related to social support and autonomy, although not job demands as per the JDCS. Despite the potential impact of turnover intentions on the social care sector, very few studies have been conducted in UK samples, and none have looked at the organisational working conditions (or psychosocial hazards) and how they influence turnover intentions.

**Stress in Social Work**

Across Europe SWs are becoming increasingly challenged since the financial ‘crash’ of 2008 due to the range of austerity measures which are under practice (Garret and Bertotti, 2017). Since 2010 cuts have been made to local authority budgets each year, with 24% of savings in 2016-17 to service user personal budgets, and ‘controlling wages’ either quite or very important priority areas for savings for the majority of care service directors (ADASS, 2016). Additionally, the austerity agenda has influenced SW practice (Colley, 2012), with Pentaraki (2017) finding that austerity affected SWs personal lives, and increasing personal stress.

Despite official figures regarding absenteeism and sickness absence for SWs being difficult to obtain, the social care sector in general has among the highest incidence of sickness absence of all employment sectors in the UK (HSE, 2015). Additionally, there is a distinct problem with recruitment and retention of SWs in the UK which may be linked to austerity (Research in Practice, 2016). Despite SW often being reported as a high-stress occupation (Beer and Asthana, 2016), few have studied the influence of psychosocial working conditions on stress and stress related outcomes (such as turnover intentions, job satisfaction, and SP) in UK SWs. Indeed, a recent systematic review (Rohling, 2016) identified just five such studies, the most recent of which from 2004. This study is
therefore among the first to investigate the influence of psychosocial working conditions on stress and stress-related outcomes (satisfaction, turnover intentions, and presenteeism) in UK social workers.

Research Question 1: How do UK SWs working conditions compare to the UK average?

Research Question 2: What is the prevalence of sickness presenteeism, job satisfaction, and turnover intentions in UK SWs?

Research Question 3: how do working conditions add to the experience of stress in the SW profession?

Research Questions 4, 5, 6: which working conditions add to the experience of job satisfaction, sickness presenteeism, and turnover intentions?
Methods

Methods and Participants

This project incorporated a mixed-method research design. This consisted of an online cross-sectional survey as well as a further open-ended question designed to look at the specific types of stressor inherent in the SW profession. Data was collected from members of two British SW organisations (names withheld to ensure anonymity) who were otherwise completely independent of the study. Members were emailed first early in March 2017, with a reminder/prompt email sent two weeks later. The online data collector used to gather responses (www.surveymonkey.com) was closed one week after the second reminder. 1,333 responses were gathered during this three-week period. Response rates are difficult to estimate because a generic link to the survey was sent on behalf of the researcher by executive in the organisations to members, with the organisations having daily fluctuation of membership numbers.

Table 1: demographic representation of respondents.

<table>
<thead>
<tr>
<th>Job Role</th>
<th>Mean Age (SD)</th>
<th>Gender</th>
<th>Ethnicity</th>
<th>Disability</th>
<th>Mean Experience</th>
<th>Mean Hour Disparity (SD)</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Mean</td>
<td>Male</td>
<td>Female</td>
<td>White (British)</td>
<td>Yes (%)</td>
<td></td>
</tr>
<tr>
<td>All Respondents (n = 1,333)</td>
<td>45.4 (10.9)</td>
<td>17%</td>
<td>82%</td>
<td>84%</td>
<td>11%</td>
<td>15%</td>
</tr>
<tr>
<td>Children’s (n = 385)</td>
<td>42.3 (10.9)</td>
<td>18%</td>
<td>82%</td>
<td>83%</td>
<td>12%</td>
<td>15%</td>
</tr>
<tr>
<td>Adult’s (n = 262)</td>
<td>45.9 (10.4)</td>
<td>18%</td>
<td>82%</td>
<td>82%</td>
<td>12%</td>
<td>18%</td>
</tr>
<tr>
<td>Independent</td>
<td>52.8</td>
<td>19%</td>
<td>79%</td>
<td>84%</td>
<td>92%</td>
<td>10%</td>
</tr>
<tr>
<td>(n = 68)</td>
<td>(9.05)</td>
<td>1 month</td>
<td>(11.18)</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>-----------</td>
<td>--------</td>
<td>---------</td>
<td>---------</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Other</td>
<td>48.5</td>
<td>11%</td>
<td>89%</td>
<td>83%</td>
<td>9%</td>
<td>15%</td>
</tr>
<tr>
<td>(n = 144)</td>
<td>(10.2)</td>
<td>8 years</td>
<td>6 months</td>
<td>(7.19)</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Note that 474 respondents decided not to include all demographic information.

Table 1 (above) demonstrates the demographic data of respondents. 474 decided not to complete this element of the survey, despite completing the other measures in the project. The majority of SW respondents who did respond to this question identified as working either in children’s (44.8%) or adult’s (30.5%) services.

Skills for Care (2016) report that the mean age of adult SWs in the UK was 43 years, with 82% being female and 83% of employees were White British. Values reported in the present study demonstrate similar findings, suggesting a nationally representative sample. However, it is worth noting that the present study was available to all SWs across the UK, whereas the Skills for Care report was for English SWs only. Such data is not available for children’s SWs. As part of these demographic questions, participants were also asked to state the number of hours that they are contracted to, as well as an estimate of the number of hours that they were actually working. This is demonstrated as a ‘mean hour disparity’ in Table 1.

An online survey approach was utilised in order to gain the largest response rate possible. Indeed internet-mediated research (IMR) is ideal for gathering large response rates and thus the most efficient way of gathering data which is as representative of the target population as possible (Whitehead, 2007). Additionally, this approach allows respondents to ensure anonymity of answer and is quick and efficient to both administer and analyse (Wright, 2005). We took an IMR approach in this project in order to gain the most representative sample of UK SWs possible. Ethical approval was gained from the [name of university withheld] research ethics committee in January 2017.
Materials

In order to ensure that the quantitative aspect of the project was as valid and reliable as possible, only valid and reliable survey tools were used. As such measures of working conditions, stress, turnover intentions, job satisfaction, and SP, as well as a series of demographic questions were included.

Working Conditions: measured using a 25-item version of the MSIT (Edwards and Webster, 2012). This shortened version was used instead of the longer 35-item alternative in order to reduce the burden of questioning on respondents. However, the shorter version has been demonstrated to be as psychometrically valid and reliable as the longer version, with this validity demonstrated across both public and private-sector organisations (Edwards and Webster, 2012). Individuals respond on a five-point Likert scale from [1] never to [5] always for questions 1 through 15, and [1] strongly disagree to [5] strongly agree for the remaining 10. Scoring is reversed on the demands and relationships factors. Edwards and Webster (2012) provide benchmark scoring for the 25-item version, thus demonstrating the levels of each of these working conditions against UK norms.

Perceived Stress: investigated using the 4-item version of the Perceived Stress Scale (PSS-4; Cohen et al. 1983) which asks participants to rate on a 4-point Likert scale (from 0 – never to 4 – very often) how often in the previous month they had experienced certain stressful situations. The measure has been heavily validated across a number of populations in the UK and beyond (Warttig et al. 2013). Scoring on items 2 and 3 are reversed.

Job Satisfaction: measured via a single-item global measure. Authors such Dolbier et al. (2005) suggest that single item measures of job satisfaction are as reliable as multi-item, multi-factor measures whilst also being quick and easy to complete. The question asked therefore was “taking everything into consideration, how do you feel about your job as a whole?” (Dolbier et al. 2005) with responses on a 5-point Likert scale from 1 to 5 (extremely dissatisfied to extremely satisfied respectively).
Turnover Intentions: a second single-item measure was used to investigate turnover intentions. This question assessed whether employees were planning on leaving their job. The question ("are you considering leaving your current job? Dolbier et al. 2005) was answered using either ‘yes’ or ‘no’. A second follow-up question asked “If yes, how long (in months) do you see yourself staying in the SW profession?” in order to gauge the length of time SWs considering leaving are likely to remain in the role.

Sickness Presenteeism: SP was measured by a final single-item measure. We asked “As far as you can recall, has it happened over the previous 12 months that you have gone to work despite feeling that you really should have taken sick leave due to your state of health?” (Aronsson et al. 2000), and responses given on a 4-point Likert scale from ‘no, never’ to ‘yes, more than 5 times’.

Demographic Questions: in order to ensure anonymity and confidentiality of answer, no personally identifiable data was asked for or collected. Therefore, the demographics collected consisted of age, gender, job role, length of experience in their job role, ethnicity, disability, and hour disparity (calculated by asking the number of hours respondents were contracted to from an average estimate of the number of hours actually worked).

Finally, we asked one open-ended question designed to allow respondents to expand on the causes of stress which are specific to SW, and how these stressors can be improved upon. The question asked was: “In one sentence, how would you make the role of a SW less stressful?”.

Analytical Strategy

Quantitative data was analysed through series of multivariate linear regressions using IBM SPPS 22.0 (IBM Corp.), in addition to calculating descriptive statistics for comparison against benchmark scores. Regression analyses were therefore performed to examine the influence of working conditions experienced by UK SWs on perceived stress, job satisfaction, turnover intentions, and SP, in UK SWs.
Qualitative responses were analysed using a ‘Conventional Content Analysis’ (CCA) approach (Hsieh and Shannon, 2005, pp. 1279). Content analysis is often used in health research as a flexible method for analysing textual data, with CCA appropriate here due to the existence of pre-conceived theories, thus allowing the researcher to adequately describe the reasons why SWs are feeling stressed in their jobs (for more on the procedure carried out, see Hsieh and Shannon, 2005, pp. 1279). This question was not compulsory to answer, although 1,107 individuals did so (completion rate of 87%), providing 1,829 suggestions for improvement within the role. Following the content analysis of these findings, they were compared with the inferential findings from the linear regression analysis in order to seek commonalities, and thus further define the sources of workplace stressors for UK SWs.

Within content analytical studies, credibility relates to the focus of the research and confidence in how well the data addresses the key components of the project (Graneheim and Lundman, 2004). As such, participants in the project being a large number of SWs from a variety of backgrounds and experiences contributes to improved credibility. Additionally taking a recognised, peer-reviewed approach to the analysis also increases credibility (Elo et al. 2014). Further the IMR approach meant quick data collection, ensuring that the data (i.e. perspective of respondents) will not have had the opportunity to change over the period of data collection, and thus ensuring dependability (Graneheim and Lundman, 2014). Finally, the large sample size and representative nature of the sample demonstrates increased transferability (Graneheim and Lundman, 2004).
Results

Table 2 demonstrates mean and percentile scoring (according to Edwards and Webster, 2012) on each MSIT variable for all respondents, and separated by job role. Compared to these benchmarks, both demands and relationships scored at or lower than the 5th percentile, indicating scoring which is worse than 95% of those in the benchmark sample. Outside of this, scoring was either in the 5th or 10th percentile for each working condition measured apart from peer support, which scored in the 25th percentile, i.e. better than only 25% of benchmark organisations.

Table 2: mean, standard deviation, and percentile scoring statistics from MSIT scoring.

<table>
<thead>
<tr>
<th></th>
<th>Demands</th>
<th>Control</th>
<th>Managerial support</th>
<th>Peer support</th>
<th>Relationships</th>
<th>Role</th>
<th>Change</th>
</tr>
</thead>
<tbody>
<tr>
<td>All responses (SD)</td>
<td>2.47 (.88)</td>
<td>3.11 (.85)</td>
<td>3.25 (.95)</td>
<td>3.71 (.76)</td>
<td>3.91 (.92)</td>
<td>3.85 (.80)</td>
<td>2.52 (.86)</td>
</tr>
<tr>
<td>Percentile</td>
<td>&lt;5th</td>
<td>5th</td>
<td>10th</td>
<td>25th</td>
<td>5th</td>
<td>10th</td>
<td>&lt;5th</td>
</tr>
<tr>
<td>Child &amp; Family (SD)</td>
<td>2.18 (.81)</td>
<td>2.94 (.81)</td>
<td>3.24 (.94)</td>
<td>3.72 (.76)</td>
<td>3.86 (.92)</td>
<td>3.85 (.78)</td>
<td>2.42 (.83)</td>
</tr>
<tr>
<td>(Percentile</td>
<td>&lt;5th</td>
<td>5th</td>
<td>10th</td>
<td>25th</td>
<td>5th</td>
<td>10th</td>
<td>&lt;5th</td>
</tr>
<tr>
<td>Adults (SD)</td>
<td>2.52 (.85)</td>
<td>3.15 (.85)</td>
<td>3.21 (1.01)</td>
<td>3.72 (.78)</td>
<td>3.88 (.86)</td>
<td>3.66 (.83)</td>
<td>2.47 (.88)</td>
</tr>
<tr>
<td>Percentile</td>
<td>&lt;5th</td>
<td>10th</td>
<td>10th</td>
<td>25th</td>
<td>5th</td>
<td>&lt;5th</td>
<td>&lt;5th</td>
</tr>
<tr>
<td>Independent (SD)</td>
<td>2.93 (1.02)</td>
<td>3.22 (.88)</td>
<td>3.13 (.86)</td>
<td>3.54 (.73)</td>
<td>4.04 (.84)</td>
<td>4.05 (.76)</td>
<td>2.77 (.91)</td>
</tr>
<tr>
<td>Percentile</td>
<td>5th</td>
<td>10th</td>
<td>5th</td>
<td>5th</td>
<td>10th</td>
<td>25th</td>
<td>10th</td>
</tr>
<tr>
<td>‘Other’(SD)</td>
<td>2.62 (.87)</td>
<td>3.19 (.86)</td>
<td>3.23 (.92)</td>
<td>3.73 (.76)</td>
<td>3.91 (.96)</td>
<td>3.89 (.79)</td>
<td>2.60 (.84)</td>
</tr>
<tr>
<td>Percentile</td>
<td>&lt;5th</td>
<td>10th</td>
<td>10th</td>
<td>25th</td>
<td>5th</td>
<td>10th</td>
<td>5th</td>
</tr>
</tbody>
</table>

Descriptive statistics and total prevalence for each of job satisfaction, SP, turnover intentions, and perceived stress demonstrate high levels of these outcomes. For example across children’s and adult’s SWs over 40% of respondents were either extremely or slightly dissatisfied with their jobs. Furthermore over 50% of all respondents had attended work while ill at least twice in the previous
12 months, again with children’s SWs having the highest incidences of this (64%). Results also demonstrate that over 50% of children’s, adult’s, or independent SWs were planning on leaving their job in an average of 14.5 months, 18 months and 9.5 months respectively, although it should be noted that the question asked does not differentiate between leaving the current job and leaving the profession as a whole. Finally, Warttig et al. (2013) found an average PSS-4 score of 6.11 in an English sample of respondents, with findings here demonstrating greater levels of perceived stress across all job roles, although mean scoring was within one standard deviation of the Warttig et al. (2013) sample (3.14).

**Table 3: descriptive statistics from PSS-4, SP, job satisfaction, and turnover intentions**

<table>
<thead>
<tr>
<th></th>
<th>All Respondents</th>
<th>Child &amp; Family</th>
<th>Adults</th>
<th>Independent</th>
<th>‘Other’</th>
</tr>
</thead>
<tbody>
<tr>
<td>Slightly dissatisfied</td>
<td>266 (20.0%)</td>
<td>77 (20.0%)</td>
<td>60 (22.9%)</td>
<td>11 (16.2%)</td>
<td>27 (18.8%)</td>
</tr>
<tr>
<td>Extremely dissatisfied</td>
<td>263 (19.7%)</td>
<td>89 (23.1%)</td>
<td>50 (19.1%)</td>
<td>11 (16.2%)</td>
<td>26 (18.1%)</td>
</tr>
<tr>
<td><strong>Total</strong></td>
<td><strong>39.7%</strong></td>
<td><strong>43.1%</strong></td>
<td><strong>42.0%</strong></td>
<td><strong>32.4%</strong></td>
<td><strong>36.9%</strong></td>
</tr>
<tr>
<td>Sickness</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>2-5 Times</td>
<td>560 (42.0%)</td>
<td>165 (42.9%)</td>
<td>99 (37.8%)</td>
<td>31 (45.6%)</td>
<td>62 (43.1%)</td>
</tr>
<tr>
<td>5 Times +</td>
<td>239 (17.9%)</td>
<td>81 (21.0%)</td>
<td>47 (17.9%)</td>
<td>7 (10.3%)</td>
<td>23 (16.0%)</td>
</tr>
<tr>
<td><strong>Total</strong></td>
<td><strong>59.9%</strong></td>
<td><strong>64.0%</strong></td>
<td><strong>55.7%</strong></td>
<td><strong>55.9%</strong></td>
<td><strong>59.1%</strong></td>
</tr>
<tr>
<td>Turnover</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>% Leave</td>
<td>693 (52.0%)</td>
<td>212 (55.1%)</td>
<td>134 (51.1%)</td>
<td>37 (54.4%)</td>
<td>70 (48.6%)</td>
</tr>
<tr>
<td>Intentions</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Average Length</td>
<td>14.5 months</td>
<td>13 months</td>
<td>18 months</td>
<td>9.5 months</td>
<td>18 months</td>
</tr>
<tr>
<td>Perceived Stress</td>
<td>Mean Score (SD)</td>
<td>7.82 (3.11)</td>
<td>8.11 (3.14)</td>
<td>7.91 (3.02)</td>
<td>6.96 (2.94)</td>
</tr>
</tbody>
</table>

The linear regression model demonstrating the influence of working conditions on perceived stress scoring across all participants showed a good fit to the data ($p < .001$), accounting for 34% of the variance. Further analyses of the coefficients demonstrated that demands, control, peer support, and relationships each significantly predicted PSS-4 scoring.
Table 4: linear regression analyses of the impact of working conditions on perceived stress across all participants.

<table>
<thead>
<tr>
<th>Outcome Measure</th>
<th>Significantly Related Factors</th>
<th>Coefficient Estimates</th>
<th>T</th>
<th>P</th>
<th>R² Adjusted R²</th>
</tr>
</thead>
<tbody>
<tr>
<td>Perceived</td>
<td>Demands</td>
<td>-1.37</td>
<td>-13.16</td>
<td>&lt;.001</td>
<td></td>
</tr>
<tr>
<td>Stress Scale</td>
<td>Control</td>
<td>- .43</td>
<td>-3.89</td>
<td>&lt;.001</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Peer Support</td>
<td>-.54</td>
<td>-4.65</td>
<td>&lt;.001</td>
<td>.34</td>
</tr>
<tr>
<td></td>
<td>Relationships</td>
<td>-.37</td>
<td>-3.72</td>
<td>&lt;.001</td>
<td></td>
</tr>
</tbody>
</table>

For each subsequent linear regression analysis of the influence of working conditions on SP, job satisfaction, and turnover intentions, the models again provided a good fit to the data (each p <.001).

For SP, each of demands, control, relationships, and change contributed to account for 22% of the variance in the model. Similarly, for job satisfaction 46% of the variance was accounted for by demands and control, alongside managerial support, and role. Finally, 24% of the variance was accounted for in the turnover intentions outcome measure, comprising the same conditions as for job satisfaction: demands, control, managerial support, and role.

Table 5: linear regression analyses of the impact of working conditions on SP, turnover intentions, and job satisfaction.

<table>
<thead>
<tr>
<th>Outcome Measure</th>
<th>Significantly Related Factors</th>
<th>Coefficient Estimates</th>
<th>T</th>
<th>P</th>
<th>R² Adjusted R²</th>
</tr>
</thead>
<tbody>
<tr>
<td>Sickness</td>
<td>Demands</td>
<td>-.24</td>
<td>-6.50</td>
<td>&lt;.001</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Control</td>
<td>-.11</td>
<td>-2.74</td>
<td>&lt;.005</td>
<td>.22</td>
</tr>
<tr>
<td></td>
<td>Relationships</td>
<td>-.17</td>
<td>-5.06</td>
<td>&lt;.001</td>
<td>.22</td>
</tr>
</tbody>
</table>
Change | -.16 | -4.34 | <.001
Demands | .38 | 8.90 | <.001
Job | Control | .33 | 6.90 | <.001 | .46 | .46
Satisfaction | Managerial Support | .43 | 10.43 | <.001
Role | .28 | 6.16 | <.001
Demands | .18 | 5.63 | <.001
Turnover | Control | .13 | 3.80 | <.001 | .25 | .24
Intentions | Managerial Support | .23 | 7.12 | <.001
Role | .10 | 3.19 | <.005

**Content Analysis**

Content analysis was conducted to gain a more detailed understanding of the stressful working conditions faced by SWs in the UK. From the 1,829 individual responses provided, the majority (1,690) fit into one of five overarching categories and related codes in Table 6.

**Table 6: hierarchial results of the content analysis into stressors experienced by UK SWs.**

<table>
<thead>
<tr>
<th>Main Category</th>
<th>Number of Mentions</th>
<th>Underlying Codes</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>Workload</td>
<td>767</td>
<td>Reduce caseload</td>
<td>Large caseload – these cases were too numerous in number and/or complexity, and not having enough SWs to complete all of the cases</td>
</tr>
<tr>
<td>Category</td>
<td>Description</td>
<td></td>
<td></td>
</tr>
<tr>
<td>-----------------------</td>
<td>-----------------------------------------------------------------------------</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Reduce paperwork</td>
<td>Typified by two things: reducing the amount of paperwork that a SW has to undertake, or having more administrative support for the paperwork they have to do.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Managerial support</td>
<td>Respondents wanted management who understand the SW role, and thus able to provide greater support.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Timescales &amp; Expectations</td>
<td>Timescales set by management for completion of complex case work, and expectations placed upon SWs by management.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Reflective supervision</td>
<td>Respondents wanted reflective supervision with an experienced colleague at regular intervals, such as least once a month, in order to improve practice.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Respect and understanding</td>
<td>More respect and understanding of the job that they do, and the difficulties of the job. This respect/understanding is required from politicians and public alike.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Blame culture</td>
<td>SWs feel there is a distinct culture of blame – both within organisations and more widely politically. This again makes the job role more stressful.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Ergonomics</td>
<td>The work environment, and in particular hot desking/not having a dedicated computer, was a distinct issue.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Pay &amp; conditions</td>
<td>Some respondents asked for a ‘modest’ increase in pay, whereas others asked for greater availability of flexible working policies.</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

The most frequently discussed overarching category was that of workload – having too much work to do during the course of their job. In particular, qualitative findings described the number of cases in
combination with cases which are too complex to be leading them to becoming stressed. Relatedly, not having enough SWs in teams was mentioned on a number of occasions. Furthermore, the administrative load and repetition of paperwork influenced the experience of stress.

The second most commonly discussed stressor was a lack of managerial support, and expectations placed upon employees by management. Respondents often described management as lacking in understanding of the SW role, and therefore unable to provide adequate employee support. Furthermore, SWs described the expectations and timescales from management to complete what is often very complex work and reports was difficult to adhere to, and thus stressful.

The third most commonly described area was that participants felt that they lacked adequate reflective supervision. They described reflective supervision as an important tool for helping to ensure positive outcomes for cases and service users, but this often happened infrequently and often without a clear structure and purpose.

The category ‘social work culture’ was the fourth most discussed category. This relates to how SWs feel they are treated both within their organisation and more widely. First of all, respondents wanted greater respect and understanding for the job that they do from external stakeholders such as the public and wider political figures. Secondly respondents described a culture in which ‘blame’ was prevalent. Therefore, they described being continually under scrutiny from their employing organisation, the public, and politically for decisions that were being made.

The final category is described as ‘other’ working conditions. Detailed over 100 times, respondents discussed two main codes: the physical working environment and pay/conditions. The physical work environment was to do with the ergonomic set up of work, such as having to hot desk and not having enough computers in offices for the number of SWs. Furthermore, respondents described low pay, and a lack of ability to work flexibly, as issues which needed to be improved upon.
Discussion

This project sought to investigate the influence of psychosocial working conditions on stress and stress-related outcomes in UK SWs. Firstly, it is clear that SWs are exposed to high levels of negative working conditions, irrespective of their job role. In fact, all of the psychosocial hazards assessed by the management standards apart from peer support were, according to benchmark scoring (Edwards and Webster, 2012), operating at levels worse than 90% to 95% of those in the other organisations. Additionally, close to 40% of respondents were dissatisfied in their jobs, 60% had attended work while ill at least twice in the past 12 months, and over 50% were intending to leave the job in an average of 14.5 months.

Findings also determined that job role demands, lack of control, and support from others in the organisation were associated with stress, SP, turnover intentions, and job satisfaction. This resonates with Wilberforce et al. (2014) which also demonstrated the influence of workload and control on job satisfaction in SWs. Similarly, in partial support of the findings from Kim and Stoner (2008), it was also found that turnover intentions were related to both control and support in the workplace. Additionally, however, a lack of communication as to the reasons for organisational change added to individuals attending work despite being ill. Furthermore, a lack of understanding of an individual’s role within an organisation also influenced both job satisfaction and turnover intentions in the sample.

In support of these findings, the qualitative component of the project also demonstrated that the amount of demands individuals were exposed to was the number one element of working which, if reduced, would help to improve on the stress experienced due to the role. In particular, a reduction in caseload and administrative duties which could be achieved by having more SWs and greater administrative help/reduction in repetitive form filling would help to reduce these demands. Additionally, greater support from management and supervisors would help to improve on the experience of stress. As such respondents wanted greater management understanding of their job
role, which would therefore reduce the expectations placed upon employees. Furthermore, structured and supportive reflective supervision with understanding management would provide an enhanced stress-reduction role.

The findings from this study therefore lend support to the iso-strain hypothesis of the JDCS (Johnson et al. 1989), which suggests that high levels of demands, low control, and a lack of peer support lead to strain outcomes. However, differentially this project found that for both job satisfaction and turnover intentions it was lack of support from management, rather than peers as suggested by the JDCS (and, indeed, strained relationships with peers), which was related to these outcomes. This therefore suggests that, at least in the SW context, support in the context of the JDCS should include that which occurs from management as well as peers from within their employing organisations. The findings from the qualitative element also extend beyond the quantitative findings. In particular, the culture of the role was characterised by a lack of respect and understanding from those external to the organisation, as well as a distinct culture of blame.

**Strengths and Limitations**

This study has a number of distinct strengths and limitations. Firstly, the stated ‘turnover’ item, despite having been used in previous studies, is vague. It is therefore unclear whether respondents are looking to leave the SW profession, or move within it. This needs further elaboration in future research. A strength is the mixed-methods approach taken, and in particular the triangulated findings. According to Hsieh and Shannon (2005), triangulation of findings by using a mixed-methods approach is a source of ensuring credibility in a project, and thus trustworthiness of the findings is increased. However, the cross-sectional and internet-mediated research (IMR) approach taken poses issues. Firstly, common method variance bias may be introduced, but this has been reduced due to the large sample size and population which consisted of SWs from a range job roles. Additionally, IMR allowed the collection of a large number of participants and ensured anonymity and
confidentiality in the project. Not knowing the response rate within the project is also a distinct limitation, and one which can affect the validity of findings. However, this large study of SW psychosocial working conditions in the UK provides a valuable contribution to knowledge.

Implications & Future Research

This study has a number of implications for SW practice, and poses areas for future research. First of all the JDCS model of workplace stress is applicable in the UK SW workforce, although support extends beyond just that from peers and also includes managerial support. There is also clear need to focus on reduction of the demands faced by UK SWs. Organisations and politicians with an interest in the role of the SW must recognise the interaction of the four working conditions identified, and thus introduce interventions which will reduce the demands expected on SWs, and improve on both the control they have over their job and support from management and peers. It is also well known that employees who work under greater levels of stress perform worse than those who do not (e.g. Colligan and Higgins, 2005; Olsen, Bjaalid, and Mikkelsen, 2017), therefore focusing on improving these conditions would improve the performance and ability to handle cases for UK SWs.

Furthermore, with turnover intentions being such a strong indicator of actual staff turnover (Griffeth et al. 2000), it is possible that the UK social care system is going to experience a large turnover in staff. The findings of this project suggest that improving on each of demands, control, managerial support, and role understanding would improve upon these turnover intentions. Additionally, however the lack of recognition and understanding of those external to the SW role and ‘blame’ culture that SWs discussed in the project need to be addressed from a political and organisational level in order to reduce turnover intentions. However, in the current austerity agenda underlined by cuts in funds for SW wages (ADASS, 2016) it is likely that these conditions will continue and therefore SWs across much of Europe may continue to experience such conditions. Furthermore
SWs, like employees of any other organisation (e.g. Thayer et al. 2010), need to be able to work under suitable physical conditions (thus having enough space to within an office, and being offered the opportunity to work from home at times), and an increase in pay may also improve on these issues.

Future research should focus on two approaches: longitudinal and interventional. Longitudinal studies should be undertaken to determine whether these findings are consistent across time, rather than being a snapshot of a particular point in time for UK SWs. Intervention research also needs to be conducted in order to determine the best evidence-based methods to improve on the issues raised in this project, and thus the most appropriate ways to reduce the stress faced in the SW role which is due to organisational factors. By doing this each of turnover intentions, job satisfaction, SP, and perceived stress can be improved in this working population. Finally, future research could investigate the influence and experience of gender and race on work-related outcomes, which were not considered in this project.

Conclusion

Despite workplace stress and working conditions being a key consideration for employees, employing organisations, and politically in the UK, the influence of these conditions in the SW profession is distinctly under-researched. The findings of this study demonstrate that particular working conditions, and in particular demands, control, and support (both managerial and peer), as well as the organisational culture and ‘other’ conditions such as low pay, each negatively influence the experience of stress and related outcomes in this population. These findings demonstrate therefore that these psychosocial hazards clearly influence the feelings that SWs have about their job role. Future research is needed into these issues, and in particular the incorporation of evidence-based interventions for the improvement of working conditions in UK SWs.
References

ADASS (2016) ‘ADASS Budget Survey 2016’ [online]. Available at:


**Reference Removed for Anonymity**


