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The Influence of Work Engagement in Social Workers in England

Abstract

Background: Social workers help to maintain and improve the lives of children, their families, and adult service users in the UK. However, while engagement is shown to be an important determinant of both patient and employee outcomes in related healthcare professions, the influence of engagement has not been demonstrated in social workers.

Aims: To investigate the influence of employee engagement on perceived stress, turnover intentions, job satisfaction, and presenteeism.

Methods: A cross-sectional survey of members of one English social work organisation including measures of engagement (Utrecht Work Engagement Scale), the Perceived Stress Scale, and single-item measures of job satisfaction, turnover intentions, and presenteeism. T-tests and Mann-Whitney analyses were conducted to investigate differences in these measures in high and low engagement scores.

Results: A total of 1,049 responses were analysed; social workers with greater engagement had significantly lower stress and turnover intentions, less presenteeism, and greater job satisfaction. Additionally, overall respondents had poor levels of perceived stress, turnover intentions, and presenteeism.

Conclusions: Employee engagement is significantly associated with a number of work-related outcomes in social workers in England. However, social workers seem to have high turnover intentions and presenteeism, and greater than average perceived stress.

Key words: Employee engagement; social work; turnover intentions; job satisfaction; presenteeism; stress

Introduction

Employee engagement is defined as employees having a sense of energetic and effective connection with their work activities [1]. It is a positive work-related state of mind, with engaged employees characterised by a sense of vigour, dedication, and absorption in their role [2]. Engagement is often defined as the conceptual opposite of burnout [3], each representing opposing ends of a wellbeing continuum. However, Schaufeli and Bakker [1] argue that these are two independent concepts which should be assessed separately, and as such research is increasingly investigating the influence of work engagement on numerous individual employee and wider organisational outcomes.

Studies are increasingly demonstrating the positive influence that work engagement has on employee performance. For example, a review by Christian et al. [4] demonstrated greater performance in engaged employees than those who are not engaged. Furthermore, West and Dawson [5] showed that better engagement in employees in the UK National Health Service (NHS) was associated with better patient outcomes including patient satisfaction and mortality, as well as reduced turnover of staff and sickness absence. Similarly, Loerbroks et al. [6] demonstrated that engagement was associated with improved care provided by primary care physicians in Germany.

As well as wider organisational effects, employee engagement is increasingly being shown to reflect individual employee outcomes. For example, Halbesleben's [7] meta-analysis demonstrated that more engaged employees had reduced intentions to leave their job, with Saks [8] finding similar results. Turnover intentions relate to an individual's voluntary intention to leave their current job and is argued to be one of the strongest predictors of actual turnover [9]. Employee engagement has also been shown to be related to employee satisfaction [8, 10]. Satisfaction is a widely-investigated attitude, or emotional state, that employees have toward work which is influenced by positive and negative events at work [11]. Engagement is therefore a potentially good predictor of these employee-organisational outcomes

Presenteeism refers to employees turning up to work despite being ill enough to take time off [12].

Presenteeism has also been related to absenteeism [13], with numerous organisational, team, and

working conditions influencing the experience of presenteeism [14]. Presenteeism is therefore also costly to organisations leading to lower productivity [15] and wellbeing, and its prevalence is argued to be on the increase across Europe [14]. However, while Adamaschew and Dawson [16] demonstrated that higher levels of employee engagement were correlated with lower levels of presenteeism in NHS employees, this relationship has not been widely investigated and never in social workers.

Stress in the workplace has been shown to potentially affect both the psychological and physiological health of employees; it has been related to the development of anxiety and depression [17], which in turn leads to absence from work. Similarly, numerous studies have demonstrated the influence that chronic work stress can have on physiological outcomes such as the development of cardiovascular disease [18], with the association as strong as well-known risk factors such as smoking and high blood pressure, and metabolic syndrome [19]. Stress at work is therefore a key consideration for both employees and employers. However, while Anthony-McMann et al. [20] demonstrated that engagement was related to the experience of work stress, others argue that there is little association [21]. Additionally, there have been no studies which investigate the influence of engagement levels on stress in social workers, despite engagement being a potentially positive influence.

Social workers play an important role in the UK, and social work is regarded as one of the most stressful occupations [22], with the social care sector having one of the highest incidences of stress-related sickness absence [22], and high levels of turnover as well as poor recruitment rates [23]. However, very little is known about turnover intentions in social workers in England, or levels of presenteeism or job satisfaction. Additionally, despite employee engagement being shown to be related to individual and organisational outcomes, there has been very little research on the influence of engagement on employee outcomes in social workers. With engagement being related to actual turnover and sickness absence in the healthcare sector [5], greater understanding of the

relationship between engagement and outcomes may help inform health promotion interventions, and subsequent job performance, for social workers in England.

This study therefore aimed to investigate employee engagement in social workers in England, as well as the influence of engagement on stress, turnover intentions, presenteeism, and job satisfaction in this population.

Methods

Survey data were collected in this cross-sectional study in February 2017 from a sample of social workers who were recruited through one organisation representing social workers in England. One email was sent to members of this organisation (all of whom are social workers) in the first week of February 2017, with a reminder email sent two weeks later. The survey was closed one week after the reminder. Five survey tools in addition to demographic questions were included in the survey to assess the influence of employee engagement on stress, job satisfaction, turnover intentions, and presenteeism. Demographic questions included age, gender, job role, and ethnicity.

A 9-item version of the Utrecht Work Engagement Scale (UWES; [1]) was used to measure employee engagement. This is a validated and reliable measure of engagement which is made up of vigour, dedication, and absorption sub-factors. The tool is widely used and validated across a number of populations [24], with scoring on a 6-point Likert scale from 'never' to 'always'. Reference scoring is provided to identify high, moderate, and low scorers [1].

Four separate outcome measures were also used. Perceived stress was measured by the 4-item version of the perceived stress scale (PSS) [25]. The PSS asks participants to rate on a Likert scale from 0 (never) to 4 (very often) how often they have experienced certain stressful situations in the previous 12 months, with mean scoring presented as per previous studies [25, 26]. The measure has been validated for use in numerous other populations, with Warttig et al. [26] finding an average PSS score of 6.11 in an English sample.

Both job satisfaction and turnover intentions were measured by single-item measures. Single item measures such as these are as reliable as multi-item/factor models with the additional advantage of being quick to complete [27]. The question asked regarding job satisfaction was “taking everything into consideration, how do you feel about your job as a whole?”, with responses from 1 (extremely dissatisfied) to 5 (extremely satisfied). Turnover intentions were measured using the question “are you considering leaving your current job?” (1, yes, or 2, no) [27]. Additionally, to assess the length of time social workers were considering staying in their current role, the following was also asked, “If yes, how long (in months) do you see yourself staying in the social work profession?”, with responses given numerically. Presenteeism was measured by a final single outcome measure, “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?” [12]. Responses are given on a 4-point Likert scale from 1 (no, never) to 4 (yes, more than 5 times).

Two sets of analyses were conducted following closure of the survey. Firstly, frequencies and mean scoring on each measure were compared against normative data where available. Secondly, with high levels of engagement shown to be related to improved performance and wellbeing in the healthcare sector [5], high engagement scorers (as defined by [1]) were compared with low scorers on each outcome measure using independent samples t-tests and non-parametric Mann-Whitney testing.

Results

Overall, 1,112 responses were obtained. It was difficult to ascertain an exact response rate due to daily fluctuations in membership of the participating organisation, and the generic link sent to members of the organisation. It is therefore difficult to know how many members received the email link due to ‘junk’ filters etc. However, the organisation had approximately 9,200 members in England who were invited to take part in the survey (estimated lowest possible response rate 12%). Of the 1,112 responses gained, 1,049 completed all measures (completion rate = 94%).

Respondents were all social workers in England, employed to work specifically with adults (n = 252, 24%) or children (n = 607, 58%), as independent social workers (n = 98, 9%), or 'other' social work roles (n = 53, 5%; although not all completed all demographic questions). The mean age of respondents was 42.7 years (SD 10.1), 79% (n=827) were female, and the majority (n = 901; 82%) were white British/European.

Table 1 about here

Table 1 demonstrates the percentage of respondents who were satisfied/dissatisfied in their role, the level of presenteeism in the role, the turnover intentions, and perceived stress. While more (n = 530, 51%) social workers were satisfied in their jobs than were dissatisfied (n = 415, 40%; remaining were neutral scorers), an even greater percentage were looking to leave their present role within an average of approximately 16 months. Sixty percent (n=632) of respondents had been to work at least twice in the previous 12 months when they should have taken time off due to illness (the remaining were less than twice, or never). Mean PSS was higher than that reported in an English sample by Warttig et al. [26]. Mean UWES scoring for all participants was 3.60 (SD=1.09).

Table 2 about here

In order to compare low versus high engagement employees on the four outcome measures, Table 2 presents results of independent samples t tests (high scorers = 4.67 or greater, n = 181) and low scorers (2.88 or lower, n = 244 [1]), with a mid-level engagement group excluded to allow low-versus-high analyses. There was a significant difference in scoring between high and low employee engagement scorers on perceived stress with those who were high in engagement having significantly less perceived stress than those who were low in engagement.

Table 3 about here

Non-parametric Mann-Whitney U calculations (see Table 3) were conducted to test differences in low and high scoring on each of job satisfaction, presenteeism, and turnover intentions. Non-parametric approaches were undertaken because job satisfaction and presenteeism violated the assumption of homogeneity of variance in t-test calculations, and turnover intentions 'yes' or 'no'

responses determined this as a nominal variable. Analysis again demonstrated significant differences in scoring between low and high UWES scorers on each of these variables (each $p < .001$).

Discussion

This study shows that employee engagement seems to play an important role in the experience of perceived stress, job satisfaction, turnover intentions, and presenteeism in social workers in England. Those who scored high overall in engagement scored significantly better across each of these four measures, with high engagement being related to significantly less perceived stress, greater job satisfaction, reduced likelihood of going to work while ill, and wanting to leave the job. Engagement therefore seems to be important in the experience of these outcomes.

These results support those found in previous studies in UK NHS staff which demonstrated that employees with greater engagement performed better at work [5] and had reduced presenteeism [16]. Despite NHS staff and social workers being employed in different roles and having differing responsibilities, the findings support the importance of having an engaged workforce, with results demonstrating that if the levels of engagement in the social work workforce can be improved, this may improve levels of turnover intentions, presenteeism, job satisfaction, and perceived stress.

Mean PSS scoring for this sample (7.66) was higher than that reported by Warrtig et al. ([26]; 6.11, maximum possible score 16). However, the Warrtig et al. sample was of a non-occupational group, and scoring was within one standard deviation, so findings need to be considered with caution. Furthermore, over 50% of social workers were considering leaving their role within an average of 16 months and over 60% of individuals had attended work while ill enough to have taken time off work at least twice in the previous 12 months. Although turnover intentions do not always equate to actual turnover [27], both this figure and high levels of perceived stress and presenteeism indicate that social workers are exposed to significant amounts of strain in the job. Despite this, more respondents were satisfied in their role than were not.

This study makes some important contributions to the literature; it is the first to look at engagement in a sample of social workers in England, in addition to being the first to demonstrate the influence of engagement on perceived stress, turnover intentions, job satisfaction, and presenteeism. Prior research had demonstrated some of these relationships in the healthcare sector [5, 16], but not in social workers. One surprising finding is that, despite higher than average scores on perceived stress, and high turnover intentions and presenteeism, more than half of social workers in the sample were satisfied with their jobs. This apparent incongruity needs further investigation, because job satisfaction has been shown to be an important determinant of a number of individual or organisational outcomes, although it is worth noting that nearly 40% of social workers in England were dissatisfied in their role.

The study does however have limitations; firstly, the response rate is both approximate, due to the data collection method, and low. Despite this being an issue for many internet-mediated studies, it also raises questions about the validity of the study. Furthermore, this study did not distinguish between social workers wanting to leave the profession completely (attrition) and those wanting to move to a different social work role (migration). Ryan et al. [28] argues that this is a distinct issue in turnover research, and this study has the same pitfalls. As such, while we know that a large proportion of social workers are looking to leave the role, it is unclear as to whether this is due to migration or attrition. Despite this, the costs of any kind of turnover are great for employing organisations, and thus the findings are important nonetheless. There is also potential for selection bias, in that individuals completing the survey may inherently be the most engaged among the sample, or alternatively those who are most biased toward reporting difficulties at work.

Future research should look toward the implementation and evaluation of workplace approaches to improving levels of engagement in the social work workforce. By doing so, and regularly monitoring related outcomes, greater knowledge of the influence of engagement on these outcomes will be obtained. Furthermore, causality cannot be ascertained from this cross-sectional study, and thus larger, fully representative and longitudinal studies of social workers from across the UK and more

widely Europe would be advantageous, especially given the current austerity agenda in many countries, would be advantageous.

Despite these limitations, this study is the first to assess the influence of work engagement in England's social workers, as well as the influence on stress and related outcomes, and could therefore serve as a benchmark for future studies. Furthermore, despite a low response rate, the number of participants was relatively large and completion rate of the survey high. This study has demonstrated the positive influence of employee engagement on a number of outcomes in this sample of social workers. Levels of turnover intentions, presenteeism, and perceived stress seem high in this population, although a greater number of social workers were satisfied in their role than not.

Key points

1. High levels of employee engagement seem to have a positive influence on levels of perceived stress, turnover intentions, presenteeism, and job satisfaction in England's social workers.
2. Social workers in England seem to have high levels of perceived stress, turnover intentions, and presenteeism, although a greater number of respondents were satisfied in their jobs than not.
3. Future research should focus on the design, implementation, and evaluation of interventions to increase engagement in organisations, and subsequently influence the negative outcomes measures in this paper.

References

- [1] Schaufeli W, Bakker A. *UWES: Utrecht Work Engagement Scale, Preliminary Manual*. Utrecht, the Netherlands: Occupational Health Psychology Unit, Utrecht University, 2003.
- [2] Schaufeli W, Bakker A, Salanova M. The measurement of a Work Engagement with a short questionnaire. *Educational and Psychological Measurement* 2006; 66(4): 701-716
- [3] Maslach C, Leiter MP. *The truth about burnout: How organisations cause personal stress and what to do about it*. San Francisco, CA: Jossey-Bass, 1997
- [4] Christian MS, Garza AS, Slaughter JE. Work engagement: a quantitative review and test of its relationships with task and contextual performance. *Personnel Psychology* 2011; 64: 89-136
- [5] West MA, Dawson JF. Employee Engagement and NHS Performance. The King's Fund [Online]. 2011. https://www.researchgate.net/profile/Jeremy_Dawson3/publication/266868148_Employee_engagement_and_NHS_performance/links/550036cc0cf260c99e8f884e.pdf (1 November 2017, date last accessed)
- [6] Loerbroks A, Glaser J, Vu-Eickmann P, Angerer P. Physician burnout, work engagement and the quality of patient care. *Occupational Medicine* 2017; 5(1): 356-362
- [7] Halbesleben J. A meta-analysis of work engagement: relationships with burnout, demands, resources and consequences. In Bakker A, Leister MP (Eds.). *Work engagement: recent developments in theory and research*, London: Routledge, 2010
- [8] Saks AM. Antecedents and consequences of employee engagement. *Journal of Managerial Psychology* 2006; 21(7): 600-619
- [9] Griffeth RW, Hom PW, Gaertner S. A meta-analysis of antecedents and correlates of employee turnover: Update, moderator tests, and research implications for the millennium. *Journal of Management* 2000; 26: 463-488

- [10] Harter JK, Schmidt FL, Hayes TL, Murphy KR. Business-unit-level relationship between employee satisfaction, employee engagement, and business outcomes: a meta-analysis. *Journal of Applied Psychology* 2002; 87(2): 268-179
- [11] Hayes B, Douglas C, Bonner A. Work environment, job satisfaction, stress and burnout among hemodialysis nurses. *Journal of Nursing Management* 2013; 23(5): 588-598
- [12] Aronsson G, Gustafsson K. Sickness presenteeism: prevalence, attendance-pressure factors, and an outline of a model for research. *Journal of Occupational and Environmental Medicine* 2005; 47: 958-966
- [13] Chatterji M, Tilley CJ. Sickness, absenteeism, and sick pay. *Oxford Economic Papers* 2002; 54: 669-687
- [14] Institute for Employment Studies. *Presenteeism: A review of current thinking* [Online]. 2016. http://www.employment-studies.co.uk/system/files/resources/files/507_0.pdf (1 November 2017, date last accessed)
- [15] Baker-McCleary D, Greasley K, Dale J, Griffith F. Absence management and presenteeism: the pressures on employees to attend work and the impact of attendance on performance, *Human Resource Management Journal* 2010; 20(3): 311-328
- [16] Admaschew L, Dawson J. The association between presenteeism and engagement of National Health Services staff. *Journal of Health Services Research & Policy* 2010; 16(1): 29-33
- [17] Melchior M, Caspi A, Milne BJ, Danese A. Work stress precipitates depression and anxiety in young, working women and men. *Psychological Medicine* 2007; 37(8): 1119-1129
- [18] Rosengren A, Hawken S, Ounpuu S et al. Association of psychological risk factors with risk of acute myocardial infarction in 11,119 cases and 13,648 controls from 52 countries (the INTERHEART Study): a case-control study. *Lancet* 2004; 364: 953-962
- [19] Chandola T, Brunner E, Marmot M. Chronic stress at work and the metabolic syndrome: prospective study. *British Medical Journal* 2006; 332. doi: 10.1136/bmj.38693.435301.80

- [20] Anthony-McMann PE, Ellinger AD, Astakhova M, Halbesleben JRB. Exploring different operationalizations of employee engagement and their relationships with workplace stress and burnout. *Human Resource Development Quarterly* 2017; 28(2): 163-195
- [21] Bakker AB, Albrecht SL, Leiter MP. Key questions regarding work engagement. *European Journal of Work and Organizational Psychology* 2011; 20: 4-28
- [22] Health and Safety Executive. *Health and safety in the health and social care sector in Great Britain, 2014/15* [Online] 2015. <http://www.hse.gov.uk/Statistics/industry/healthservices/health.pdf?pdf=health> (1 November 2017, date last accessed)
- [23] Research in Practice. *Social work recruitment and retention* [Online] 2016. https://www.rip.org.uk/~ftp_user/social_work_recruitment_and_retention_full/files/assets/basic-html/page1.html (1 November 2017, date last accessed)
- [24] De Bruin GP, Henn CM. Dimensionality of the 9-item Utrecht Work Engagement Scale (UWES-9). *Psychological Reports: Human Resources & Marketing* 2013; 112(3): 788-799
- [25] Cohen S, Kamarck T, Mermelstein R. A global measure of perceived stress. *Journal of Health and Social Behaviour* 1983; 24(4): 385-396
- [26] Warttig SL, Forshaw MJ, South J, White AK. New, normative, English-sample data for the Short Form Perceived Stress Scale (PSS-4). *Journal of Health Psychology* 2013; 18(12): 1617-1628
- [27] Dolbier CL, Webster JA, McCalister KT, Mallon MW, Steinhardt MA. Reliability and validity of a single-item measure of job satisfaction. *American Journal of Health Promotion* 2005; 19(3): 194-198
- [28] Ryan SV, von der Embse NP, Pendergast LL, Saeki E, Segool N, Schwing S. Leaving the teaching profession: the role of teacher stress and educational accountability policies on turnover intent. *Teaching and Teacher Education* 2017; 66: 1-11

Table 1: Turnover intentions, job satisfaction, and presenteeism scoring.

Measure		N (%)
Job Satisfaction	Dissatisfied	415 (40)
	Satisfied	530 (51)
Presenteeism	Yes, once	264 (25)
	2-5 times	434 (41)
	5 Times or More	198 (19)
Turnover Intentions	Percentage Leave	538 (51)
	Mean Length (SD)*	16.3 months (15.15)
Perceived Stress	Mean (SD)	7.66 (3.11)

*Refers to the average number of months respondents suggested they would stay in the role prior to leaving.

Table 2: T-test results of high versus low engagement scorers on perceived stress.

Factor	Utrecht Work Engagement Score	Mean Scoring (Standard Deviation)	Degrees of freedom	P value
Perceived Stress Scoring	High scorers	5.35 (2.98)	420	<0.001
	Low Scorers	9.64 (2.70)		

Table 3: Mann-Whitney results for high versus low* UWES scores on job satisfaction, presenteeism, and turnover intentions.

	UWES Score	Median Score	Range	U	P value
Job Satisfaction	High scorers	5.0 (Extremely Satisfied)	4.0	11578.5	<0.001
	Low Scorers	1.0 (Extremely Dissatisfied)	4.0		
Presenteeism	High scorers	2.0 (Yes, once)	3.0	2294.0	<0.001
	Low Scorers	3.0 (Yes, 2 to 5 times)	3.0		
Turnover Intentions	High scorers	2.0 (No)	1.0	7051.0	<0.001
	Low Scorers	1.0 (Yes)	1.0		

*High UWES scores are 4.67 or more, and low UWES scores 2.88 or less.