

The Psychological Burden of Social Workers During the Covid-19 Pandemic

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Abstract:

The aim of the article called 'Psychological Burden of Social Workers During the Covid-19 Pandemic' is to describe the impacts of COVID-19 and the measures related to this pandemic in the context of social workers in social services in the Czech Republic. We mainly focus on the extent to which the current situation affects emotional processes, such as anxiety, depression, or stress. These are circumstances that, due to the ongoing pandemic, can still evolve and change. However, we strive to capture the current situation during the pandemic phase. We are aware of the fact that it is a first glance into the issue and that the emotional processes will change and evolve in the future, which could be the objective of further research or observations. We would like to sincerely thank the respondents who were in these trying times willing to participate in our research by filling out our questionnaire.

Key words: social work, Covid-19, pandemic, psychological burden, social workers

Theoretical Backgrounds in the Field of the COVID-19 Pandemic and Social Work

With regards to the beginning of the pandemic in spring 2020, the issue of COVID-19 in connection with social work has not been sufficiently scientifically processed yet. As of December 2020, the research of available databased articles provided a total of 32 resources, where only a minimum number of them describes the situation in terms of impact on social services or their employees. Some of the resources are more concerned with inequality in society or state policies, and many resources describe the impact on specific target groups, such as the poor, the excluded, and the elderly.

According to Golightley et al., social workers have been affected by the first wave, although this fact is often overlooked in comparison to health professionals.¹ The authors further call for the need to share the experience and for a proper supportive services coordination.

Chen and Zhuang address the transformation of social work in health care facilities in Shanghai

¹ Malcolm Golightley et al., 'Social Work in the Time of the COVID-19 Pandemic: All in This Together?', *The British Journal of Social work* 50, no. 3 (April 2020): 637–641, <https://doi.org/10.1093/bjsw/bcaa036>.

during the COVID-19 pandemic at the beginning of 2020.² Both the facilities and the government identify social workers and their role in managing the pandemic within the team as a key part and even create a new job position of a health and social worker in a quarantine centre. In the context of the pandemic, conditions that are strictly necessary for system functionality have also been created. This involves a supportive working environment, identifying risk activities, and defining a multidisciplinary role within the team.

Gibson et al., describes the transition of social services from presence to a distance state in connection with pandemic measures disabling face-to-face interactions between the social worker and the client.³ A distant way of supplying services is more comfortable for young clients; on the contrary, it is a challenge requiring training for older workers and clients. Limited access to the internet means a complication for the elderly and the poor. The inequalities caused by the pandemic are also pointed out by Blundell et al.⁴ Bitler et al. draws attention to a growing proportion of people using food banks services and finding themselves in economic difficulties and insecurity.⁵ According to Patel et al., people living in poverty show vulnerability in the context of environment (overcrowded homes), stress, and poverty-related comorbidities (including limited access to healthcare).⁶

According to Brooke and Jackson, seniors are the most affected target group of social work.⁷ Not only is there a shortage of staff in facilities for the elderly, but their isolation and ageism are also rising. Seniors compensate their home isolation with social media activities and media consumption, states Brooke and Clark, which raises their concerns about COVID-19.⁸

While most studies agree that the pandemic has complicated social work, Archer-Kuhn et al. describe the advantages of creating up-to-date methodologies in electronic form.⁹ Heinonen and Strandvik also consider social work as one of the most innovative areas due to the pandemic.¹⁰ They even describe specific areas such as supply innovation (using robots, contactless food delivery...), distance innovations (using remote communication devices), expert consultations (development of software, text chats for individual sectors etc.).

Impacts of the Pandemic on Social Workers and Social Services

A study by Tan et al. tested the psychological impacts of the pandemic among a related target group using a similar methodology – among clinical (doctors and nurses) and non-clinical medical workers in healthcare facilities in Singapore.¹¹ The workers experienced increased levels of stress,

2 Yan-Yan Chen et al., 'Roles of medical social workers in interprofessional teams: a case study of a Shanghai COVID-19 quarantine centre for medical observation', *Asia Pacific Journal of Social Work and Development* (2020): 123–131, <https://doi.org/10.1080/02185385.2020.1828157>.

3 Allison Gibson et al., 'COVID-19 and the Digital Divide: Will Social Workers Help Bridge the Gap?', *Journal of Gerontological Social Work* 63, no. 6–7 (June 2020): 671–673, <https://doi.org/10.1080/01634372.2020.1772438>.

4 Richard Blundell et al., 'COVID-19 and Inequalities', *Fiscal Studies* 41, no. 2 (June 2020): 291–319, <https://doi.org/10.1111/1475-5890.12232>.

5 Marianne Bitler et al., 'The Social Safety Net in the Wake of COVID-19', *National bureau of economic research* (September 2020): 119–158, <https://doi.org/10.3386/w27796>.

6 J. A. Patel et al., 'Poverty, inequality and COVID-19: the forgotten vulnerable', *Public Health* 183, no. 6 (May 2020): 110–111, <https://doi.org/10.1016/j.puhe.2020.05.006>.

7 Joanne Brooke et al., 'Older people and COVID-19: Isolation, risk and ageism', *Journal of Clinical Nursing* 29, no. 13–14 (April 2020): 2044–2046, <https://doi.org/10.1111/jocn.15274>.

8 Joanne Brooke et al., 'Older people's early experience of household isolation and social distancing during COVID-19', *Journal of Clinical Nursing* 29, no. 21–22 (November 2020): 4387–4402, <https://doi.org/10.1111/jocn.15485>.

9 Beth Archer-Kuhn et al., 'Canadian reflections on the Covid-19 pandemic in social work education: from tsunami to Innovation', *Social Work Education* 39, no. 8 (September 2020): 1010–1018, <https://doi.org/10.1080/02615479.2020.1826922>.

10 Kristina Heinonen et al., 'Reframing service innovation: COVID-19 as a catalyst for imposed service Innovation', *Journal of Service Management* 32, no. 1 (January 2020): 101–112, <https://doi.org/10.1108/JOSM-05-2020-0161>.

11 Benjamin Tan et al., 'Psychological Impact of the COVID-19 Pandemic on Health Care Workers in Singapore', *Public Health Emergency Collection* 173, no. 3 (September 2020): 317–320, <https://doi.org/10.7326/M20-1083>.

depression, anxiety, and post-traumatic stress disorder (PTSD). Positive anxieties screening was most prevalent, overall, in 14.8% of workers. Furthermore, there were depression in 8.9%, stress in 6.6%, and PTSD in 7.7%. Overall, a higher prevalence of psychological problems occurred in non-clinical medical workers (pharmacists, maintenance workers, paramedics...). It is worth mentioning that doctors and nurses had lower trauma scores, which is, according to the authors, due to better access to medical information and psychological support. As this study identified the impact of COVID-19 on non-clinical medical workers, the support should be more focused on support and intervention towards these workers.

A study carried out during 6-18th May 2020 summarises international findings of the ethical challenges of social workers during the COVID-19 pandemic. There were 607 responses from 54 countries received through interviews and an online survey. According to the interviews provided by social workers and social work students, the COVID-19 pandemic brought predominantly a range of negative emotions; some of the informants also stated positive emotions. Many social workers and students stated helplessness, anger, anxiety and disappointment, and mental and physical exhaustion. The informants also emphasised the lack of appreciation of the work of a social worker, which is related to a shortage of personal protective equipment. Social work students emphasised little support from the management following which the education administration hesitated whether to retain these student internships or not. Social workers also spoke about the difficulties when coping with their emotions, caring responsibilities, or even illness in their own families while carrying out their professional duties.

The authors also refer to the COVID-19 pandemic as to the time when insufficient funding and undervaluation of social services were revealed. The COVID-19 pandemic experience has also highlighted the importance of community and voluntary support networks in neighbourhoods, communities, and the roles of social workers in creating necessary networks.¹²

The results of research by Munoz-Moreno et al. also show increased stress levels and workload for social workers.¹³ The results show a higher workload for volunteers and workers with less work experience compared to experienced social workers. A lack of human resources, insufficient coordination, support network, and help put mental and physical strain on social workers.

Frontline medical workers and the general public have noted the psychological impacts after the COVID-19 outbreak. According to the survey, the psychological impacts of the pandemic became more prevalent among medical workers, however, both research groups showed symptoms of depression, anxiety, and insomnia, Liang et al. state.¹⁴

On the other hand, even a pandemic crisis can and does have positive effects. One such positive can be, according to the reflection of social service organisations in the research of Horecký and Švehlová¹⁵ from the Asociace poskytovatelů sociálních služeb ČR (Association of Social Care Providers of the Czech Republic), for example, testing their flexibility in responding to crisis situations. In addition, social services also mentioned social networks for information sharing and deepening

12 Sarah Banks et al., 'International Federation of Social Workers: Ethical Challenges for Social Workers During Covid - 19: Global Perspective', IFSW, cited on 17th December 2020, <https://www.ifsw.org/ethical-challenges-for-social-workers-during-covid-19-a-global-perspective/>.

13 Rocío Munoz-Moreno et al., 'COVID-19 and social services in Spain', *PLOS ONE* 15, no. 11 (November 2020), <https://doi.org/10.1371/journal.pone.0241538>.

14 Liang Yiming et al., 'Mental Health in Frontline Medical Workers during the 2019 Novel Coronavirus Disease Epidemic in China: A Comparison with the General Population', *International Journal of Environmental Research and Public Health* 17, no. 18 (October 2020): 6550, <https://doi.org/10.3390/ijerph17186550>.

15 Jiří Horecký et al., 'PANDEMIE COVIDU-19 A SOCIÁLNÍ SLUŽBY 2020–2021. Jaký byl dopad covidu-19 na sociální služby v České republice?' *Asociace poskytovatelů sociálních služeb ČR*, cited on 12th March 2021, https://www.apsscr.cz/files/files/A4_FACT%20SHEETS%20PANDEMIE%20COVID-19.pdf.

cooperation with other organisations or institutions (regions, etc.). The positive evaluation of cooperation with the regions and, for example, with the Association of Social Service Providers and the Government Council was also evaluated by respondents in the research by Kliment and Nádorníková.¹⁶ Another significant positive was the deepening of intergenerational cooperation in the form of young people's activity with the help of volunteering.¹⁷ Last but not least, the pandemic has opened up new opportunities for the introduction of new methodologies or social change.¹⁸

Methodology

The quantitative research was carried out using the standardised DASS-21 questionnaire.¹⁹ The questionnaire was administered in the Czech language and was distributed at a time of restrictions on residential facilities and a ban on visits. It has not yet been standardised in the Czech context, but it has been translated by the author's team using double back-translation. According to research in existing articles concerning the COVID-19 pandemic and its impact on helping professions, it is the most common tool used, Tan, as stated by Chew, Lee, et al.²⁰ The questionnaire consists of a self-assessment scale designed to measure negative emotional state of depression, anxiety and stress. The questionnaire contains twenty-one statements where the respondent expresses the level of agreement on a four-point Likert scale (0-3). An example of an item is the statement 'I felt I was close to panic' (Q15). Other statements are worded in a similar way. The individual questions are subsequently averaged for three sub scores consequently showing the rate of the phenomenon occurrence – see Table 1 below. The standardised questionnaire was further supplemented with a few questions addressing the socio-demographic characteristics of the respondent (gender, age, length of experience in social services, type of social service) and the situation regarding COVID-19 and related measures – a question concerning changes in the number of clients in connection with the pandemic, changes in the number of employees on duty, the state of protective equipment, evaluation of impacts on services operation, state support, and changes in client orders.

Table 1

	Depression	Anxiety	Stress
Normal	0-9	0-7	0-14
Mild	10-13	8-9	15-18
Moderate	14-20	10-14	19-25
Severe	21-27	15-19	26-33
Extremely Severe	28+	20+	34+

The research group consisted of social workers working in various types of social services, N=127. The research group was addressed by the method of stratified random sampling within the South

16 Pavel Kliment et al., 'Prvotní reflexe dopadu epidemie koronaviru na sociální služby v ČR', *FÓRUM sociální práce* 2, (November 2020): 9–19.

17 Jaroslava Marhánková, 'Ageismus, věkové rozdělení a zkušenost stáří v době krize: Zamyšlení nad společenskými dopady pandemie COVID-19', *Sociologický časopis/Czech Sociological Review* 57, no. 2 (2021): 143–164, <https://doi.org/10.13060/csr.2021.008>.

18 Jiří Mertl, 'Pozitivní společenský dopad koronaviru? Impuls k úvahám o solidaritě, empatii, důstojnosti a základním nepodmíněném příjmu', *FÓRUM sociální politiky*, no. 5 (2020): 29–35.

19 S.H. Lovibond et al., *Manual for the Depression Anxiety Stress Scales* (Sydney: Psychology Foundation of Australia, 1995), 42.

20 Tan et. al., 'Psychological Impact', 317–320.

Bohemian and the Central Bohemian regions and the Vysočina region. The questionnaire was distributed via an online link to available e-mail addresses of these services. The obtained data were transferred to the SPSS programme and processed using descriptive statistics and hypothesis testing. We focused on the extent to which the scores of the DASS21 questionnaire affect the type of social services, changes in number of employees and clients, and subjective evaluation of support during the pandemic.

The research group consisted of a total of 112 women (89.6%) and 13 men (10.4%). The average age of the respondents was 40.5 years, min. 20, max. 64, median 40. We also analysed the length of practice in the social worker job position which was as follows: 7 (5.6%) respondents worked in this position for up to one year, 23 (18.4%) respondents for one or two years, 33 (26.4%) respondents for three to four years, and 24 (19.2%) for five to eight years. The average length of practice was 3.72 years, median 4 years.

Due to the nature of the research, we also identified target groups the respondents work with. The largest group consisted of social workers working with seniors (54; 43.2%), followed by social workers working with people with disabilities (40; 32%), 11 (8.8%) social workers working with children and youth, eight (6.4%) social workers working with marginalised groups, three (2.4%) social workers working with target groups – adults, families with children and domestic violence victims, two (1.6%) working with addictive substances addicts, and one working with survivors. We asked the respondents which service was most requested by the clients during the pandemic. There were 67.6 % of requests focused on contact with their families, 10.8 % concerned assistance with school duties, and the third most common request was assistance with routine tasks, which was mentioned by 7.8% of respondents. Help with finding a job mentioned by 4.9% of respondents is also worth mentioning. Other variants were mentioned marginally.

The following statistics have been used: independent sample t-test, ANOVA, and correlation.

Results

According to the respondents, the number of their social service workers usually did not change in connection with the pandemic (54.8%) but decreased in 38.7% and increased in 6.5%. Of the respondents, 93.6% said they had a sufficient amount of personal protective equipment. However, respondents stating they had not enough personal protective equipment showed a significantly higher stress score ($t=-3.735$; $p=0.000$), anxiety ($t=-4.033$; $p=0.000$), and depression ($t=-3.351$; $p=0.001$), see Table 2.

Table 2

	Personal Protective Equipment	N	Mean	Std. Deviation
Stress score	yes	117	4.23	3.874
	no	8	9.63	5.069
Anxiety score	yes	117	2.21	3.000
	no	8	6.88	5.167
Depression score	yes	117	4.02	4.017
	no	8	9.25	7.305

In the DASS-21 questionnaire, the respondents as a whole showed mild depression ($m=4.35$, $std.=4.45$), no anxiety ($m=2.51$; $std.=3.35$) and no stress ($m=4.58$; $std.=4.15$), see Table 3. Regarding stress, 81.6% of the respondents were stress-free, 4% had signs of mild stress, 8.8% moderate stress, 4.8% severe, and 0.8% extremely severe stress. As for anxiety, 74.4% were asymptomatic, 15.2% mild, 1.6% moderate, 0.8% severe, and we find it worrying that 8% showed extremely severe anxiety. As for depression, 56.8% were asymptomatic, 23.2% mild, 8% moderate, 6.4% severe, and 5.6% extremely severe.

Table 3

	N	Minimum	Maximum	Mean	Std. Deviation
Stress score	125	0	19	4.58	4.153
Anxiety score	125	0	15	2.51	3.352
Depression score	125	0	21	4.35	4.445

To the question ‘To what extent did the COVID 19 pandemic affect your social service operation?’ the respondents answered on average 2.98 on a scale of 1 to 5. This question correlated with all types of emotional stress: stress $r=0.246$; $p=0.006$; anxiety $r=0.203$; $p=0.024$ and depression $r=0.289$; $p=0.001$. The respondents rated the overall support of social services during the pandemic with the average value of 3.04 and this variable also correlated with all types of emotional stress: stress $r=0.226$; $p=0.011$; anxiety $r=0.2017$; $p=0.015$; depression $r=0.202$ $p=0.024$. The respondents rated financial support during the pandemic with the average value of 2.86, which is lower than the overall support. This variable also correlated with all types of emotional stress: stress $r=0.245$; $p=0.006$; anxiety $r=0.253$; $p=0.004$; depression $r=0.258$ $p=0.004$, see Table 4.

Table 4

		The extent of the impact on services	Overall support	Financial support	stress	anxiety	depression
The extent of the impact on services	r	1	.476**	.368**	.246**	.203*	.289**
	p		.000	.000	.006	.024	.001
Overall support	r	.476**	1	.701**	.226*	.217*	.202*
	p	.000		.000	.011	.015	.024
Financial support*	r	.368**	.701**	1	.245**	.253**	.258**
	p	.000	.000		.006	.004	.004
Stress	r	.246**	.226*	.245**	1	.726**	.691**
	p	.006	.011	.006		.000	.000
Anxiety	r	.203*	.217*	.253**	.726**	1	.594**
	p	.024	.015	.004	.000		.000
Depression	r	.289**	.202*	.258**	.691**	.594**	1
	p	.001	.024	.004	.000	.000	

* Question: How do you evaluate the financial support from the state during the pandemic?

We also tested whether the type of social service, or the target group the service is focused on, relates to current emotional problems of social workers. The conducted ANOVA test did not show a statistically significant relationship with this variable in case of anxiety ($p=0.771$), stress ($p=0.728$) or depression ($p=0.161$).

Another tested relationship related to the type of request and emotional states. Contrary to expectations, when some requests are considered to be more emotionally demanding by the social workers, a statistically significant relationship was not shown here: anxiety $p=0.656$, stress $p=0.663$ a depression $p=0.427$.

Table 5

		F	p
Stress	Between Groups	1.081	.381
	Total		
Anxiety	Between Groups	.661	.724
	Total		
Depression	Between Groups	1.577	.139
	Total		

Discussion

The results of our survey show several significant factors that contribute to the higher levels of stress, anxiety, and depression according to the participating workers. These factors were primarily the sufficiency or the lack of thereof of protective aids, as well as financial support. Financial support was the factor which was assessed as worse in comparison to other modes of support of social work during the pandemic. In this regard our research correlates with the results of Chen and Zhuang, according to which appropriately created working conditions (support in work environment, identifying risky activities) are crucial for the entire system working.²¹

One of the key findings is the fact that the most frequent task that the workers received from their clients was to organise contact to their loved ones. This fact is likely connected to the fact that the majority of our respondents work with senior citizens for whom contact with loved ones is an issue discussed in both public and expert discourses. Online communication can serve as an alternative but tends to be complicated, such as limited access of senior citizens to the Internet, or the need to teach them how to use the online options.²²

An additional question for future research could be the finding that (or how) fulfilling or not fulfilling (or only partially fulfilling) the request to meet loved ones can influence the social workers levels of stress or depression, and if their clients needs for interpersonal contact transfers to the workers themselves.

Regarding the levels of stress, anxiety, and depression of the workers, the highest levels (extremely severe) were detected for anxiety (8% of respondents) and depression (5.6% of respondents). Stress on the highest level (extreme severe) was only detected for 0.8% of respondents. Work stress, or work-related stress describes the general definition of excessive requirements that exist

²¹ Chen et al., 'Roles of medical', 123–131.

²² Allison et al., Popeet, 'COVID-19', 671–673.

in connection to the working process.²³

The results of our research can be caused, for example, by the fact that workers in the said situation were conducting their usual daily activities that they are used to (therefore the low results for stress in the extremely severe category) but these were done under changed (more difficult) circumstances, which caused the results for anxiety and depression in the extremely severe category. These assumptions should be tested as part of future research.

A limitation of the survey is the fact that it was conducted at a time when specific measures related to the closure of residential facilities to visitors were underway, which may have influenced respondents' answers.

Conclusion

The presented results show that the current pandemic situation reflects to a certain degree in the emotional processes of social workers, which is also concluded by other studies looked at in this article.

Our article presents several results but also many suggestions for further research that could be conducted for the target group (social workers and workers in social services) – not only currently but also within a longer time horizon when it will be possible to reflect on the potential impacts of the pandemic in various areas (physical, psychological, economic, etc.).

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23 David Michalík, 'Řízení pracovního stresu a psychosociálních rizik', *Časopis výzkumu a aplikací v profesionální bezpečnosti* 8, no. 1 (April 2015).