Understanding the Complexities of Workforce Issues among Rural Social Workers

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PRESENTED AT:
Minnesota Social Service Association
Region 6 Annual Conference
October 30, 2008
Hutchinson, Minnesota
Introduction

• Welcome! A little about myself…
  – Yes, I did grow up on a dairy and hog farm in Michigan
  – Education, rural work experience, research focus on rural SOWK labor force issues

• Today’s presentation addresses:

1. Brief history of knowledge around rural social work (including demographics),
2. Current state of knowledge on rural workforce issues,
3. The social work workforce in rural & remote areas,
4. Recruitment & retention issues/concerns,
5. Suggestions for future development of social work workforce, research, & knowledge development.
General Rural Demographics

- Nearly 60 million Americans live in rural or frontier areas (> 7 per sq mile),
- More than 800 rural counties show high poverty rates, but only 25% of residents qualify for Medicaid (compared to urban at 43%),
- Women head 46% of rural households; 27% live below poverty level,
- The elderly are disproportionately represented (higher) in rural areas,
- Rural residents have comparable rates of insurance, but less comprehensive coverage compared to urban counterparts.
- Rural areas often lack inpatient care for the severely mentally ill – care usually distant from support systems, often in primary care systems (limited psychiatric consultation or psychosocial rehabilitation).

Brief History of Rural Social Work

• Rural America has a long (and inaccurate) history of being perceived as “idealistic.” Rural romanticized, urban “demonized.”

• Social work in the 1800’s & 1900’s in America – response to socioeconomic concerns.
  – Focus on farm management, rural health, social welfare, education, and leadership.
  – Vacillation between “rural social work” and “social work in rural areas.”
  – Where are we today?
Current State of Knowledge on Rural Social Work Workforce

- U.S. Department of Labor (2008) identifies the need for more social workers in rural areas in the future.

- Lack of rural mental health and social service professionals in rural areas identified (New Freedom Commission on Mental Health, 2003).

- Overall continued shortage of social workers in rural areas identified (NASW, 2003).

- Shortage of trained geriatric mental health practitioners in rural areas (Rosen, 2005).

- Rogers et al (1995): Rural social workers need to be more “generalist.” Rural social workers also more macro-systems focused versus urban.

- Mackie & Berg (2005): Differences between rural & urban social workers. Each present unique challenges and joys in their work environment:
  - Rural + flexibility, creativity, independence, professional freedom. Rural – dual relationships, lack of resources/funding, isolation, low salary/benefits, burnout.
Mackie & Simpson (2007) Bachelor’s-level social work students are more likely to seek rural employment if raised in rural environment.

- In addition, BSW students from rural areas reported:
  - Greater comfort with living in rural environment,
  - Express desire to raise family in rural environment,
  - Feel there is a greater sense of community in rural areas,
  - Want to work to improve the quality of life among rural residents.

Mackie (2007): Predicting who is more likely to “become” a social worker in rural areas:

1. Raised in rural areas,
2. Participated in rural-based practicum,
3. Received education & training in rural-specific content
Social Work Workforce in Rural and Remote Areas

Based on Mackie (2008a) & Mackie (2008b) findings, current knowledge about the state of social work in rural areas.

Statistically significant differences…

Compared to urban counterparts, rural social workers are:
– Younger,
– have worked fewer years as social worker,
– Work more hours per week,
– More likely to have grown up in rural area,
– More likely to have participated in a rural-based internship,
– More likely to have studied rural-focused social work curriculum.
No statistically significant differences were found re:

- Gender, Ethnicity, level of education (BSW or MSW)

- Employment setting. Little difference working in not-for-profit (rural = 44%, urban = 42%), for-profit (rural = 26%, urban = 28%), or government settings (rural = 30%, urban = 30%).

- Fields of practice. Little difference working in ~
  - Aging/gerontology (rural = 11%, urban = 8%)
  - Child services (rural = 26%, 24%)
  - Mental health (rural = 46%, urban = 53%)
  - “Other” fields of practice (rural = 18%, urban = 15%)
• No statistically significant differences were found re:

  – Levels of burnout between rural and urban social workers (Mackie, 2008b)

    – Using the MBI instrument, rural & urban social workers were *generally* found to not have differences across all sub-scales.

    – HOWEVER, rural social workers do show higher levels of burnout when the variables “*length of time as a social service provider*” and “*number of hours worked per week*” were compared between groups.

    – Conclusion: While little difference exists generally, rural social workers who have been in the workforce longer and work more hours per week (compared to urban social workers) show higher rates of burnout.
Recruitment and Retention Concerns

• Based on information provided thus far, recruitment and retention of rural social workers appear to be influenced by the following:

  – Lack of social workers interested in working in rural regions,
  – Lack of professional development opportunities,
  – Salary,
  – Lack of professional growth opportunities,
  – Lack of agency resources,
  – Dual relationships,
  – Isolation.

  NOT lack of employment opportunities.
Suggestions for the Future

• Enhance loan forgiveness programs to support education and professional development for rural social workers.

• Increase funding & support for mental health professional shortage areas (scholarships similar to Title IV-E Child Welfare assistance, dedicated internships).

• Social work education: Increase rural focus within rural social work curriculum, program design, & learning objectives.

• Identify and address recruitment and retention barriers ~
  – Current study focuses on identifying barriers to hiring and retaining social workers in rural areas (sample = rural social service supervisors & hiring officials).

• Enhance access for social workers in National Health Service Corps loan repayment program – where can resources be best delivered?

• Strategic recruitment – focus on those found more likely to seek out rural employment.
Conclusion

- Staffing social workers in rural areas continues to be problematic. However, based on what we currently know, we might be able to increase the labor force if we –

  – Develop strategies to recruit future social workers from rural areas.
  – Support social workers in rural areas with enhanced financial support and educational opportunities.
  – Focus social work education on rural-specific issues.
  – Increase professional development opportunities and continuing education/training in rural areas.
References


