

Project: "Empowering Practitioners in Social Work from Rural Communities"

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## **Spanish Survey On the perceptions and the needs of the PSW from the Andalusians rural regions addressing the "burn-out" phenomenon**

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**Authors: Sonia Azuar Ponce  
Carolina Damiá Ordaz**

### **1. INTRODUCTION**

#### **1.1. Social intervention in Spain**

In a broad meaning, we can define social intervention as the action that is carried out on individuals and groups with the intention of producing an improvement.

Social intervention's main objective is to modify situations of exclusion or risk of social exclusion, both from a preventive and rehabilitative approach.

For Lowy, Social Intervention means "a professional action" (qualified) on a social system derived from an initial diagnosis through appropriate means and aimed at change.

Social Intervention requires the need for planning, analysis, systematic observation, disciplined work, adequate material and suitable means to respond to the needs of citizens.

These needs have been dealt with the social planning carried out by the administrative spheres that make up the **Social Welfare State in Spain**. The development of the Welfare State constitutes a great advance in the field of social policy, since the consolidation and extension of the administrative instruments of welfare have meant a decisive turn in the conception of the treatment of social needs.

Social Intervention takes place in a formalised framework and its purpose or intentionality can be both to prevent, alleviate or correct processes of social exclusion, and to promote processes of social inclusion or participation and these interventions are generally legitimised by public administrations (social policy) through partial or total public funding.

This social protection of citizens through public service systems (education, housing, health, work, economic benefits, social services, care for dependency), has an intentional purpose: social welfare. The guarantee of social rights is in fact set out in the Spanish Constitution, the magna charter of our legal system. But... What is meant by social welfare? Social welfare is a value, which establishes as a goal that all members of society must have the necessary means to satisfy those demands that are accepted as needs.

It considers that all citizens have the same rights to achieve certain levels of welfare. It determines means to try to solve the problems of those groups that cannot access these levels. It starts by accepting that the problems have social approach, and therefore affect groups and communities. It considers that the participation of citizens in the resolution of problems is a fundamental aspect.

In order to satisfy those demands that are accepted as social needs, the State formalizes social policy through plans or programmes of social intervention, either from sectoral policies in accordance with their defined scope of social needs (Education, Social Services...), or from sectoral/transversal plans for equal opportunities (Disabled, youth, old age...) or also through the integration of economic, technological and social development policies: National Social Exclusion Plans.

Social needs are responded through social protection organized by the Social Welfare State, protection that is developed through social intervention actions by professionals who intervene from professionalization in an institutionalized framework, with equipment and resources that facilitate prevention; palliate; or modify social exclusion processes or promote processes of social inclusion, insertion or integration. (Source: *Macias Mateos, Consuelo, La intervención social. Social intervention in social integration and marginalization: Concept and theories.*)

The context in which social intervention is framed influences its development. The social work from the rural environment presents characteristics inherent to the characteristics of this environment.

The rural environment has undergone a more discreet development of the system of social services than that experienced by the urban environment.

Rural Social Workers carry out their interventions by encouraging the participation of individuals, groups and communities in the activities, making them participants throughout the process to promote their personal development. This is achieved by accompanying the person and empowering them towards the promotion of their capacities, thus favoring their autonomy.

Spain is an eminently rural country with more than 85% of the territory considered as such. In the case of Andalusia, this figure increases up to 90%.

The importance of the rural environment is given not only because it concentrates the entire primary productive activity, but also because it houses the natural spaces, being the support of environmental goods and services increasingly demanded by society, and the depositary of most of the population.

However, all this common territorial heritage has been experiencing in recent decades a process of social disarticulation that must be avoided. And although in recent times, for example in Andalusia, the migratory trend towards urban areas has been reduced, a problem of depopulation still persists in many rural areas, and the depopulation suffered by the majority of the rural areas of Andalusia is very worrying, with a high degree of ageing population.

Even so, the loss of rural population, less accentuated in our region than in the rest of Spain, is due to multiple factors among which the low birth rate and the scarcity of public services linked to education, health, communications, etc. would stand out.

Facing a problem of this magnitude involves strengthening the local economic development and employment, but also deals with the constant presence of schools, with the possibility to have available access to medical care or support services for the elderly, as well as with communication infrastructures, including access to the Internet. These are key challenges on which big companies must step forward and invest in rural areas far from the big cities, as having this type of service is essential to fix the population to the territory.

Source: [https://www.diariodesevilla.es/agr\\_andalucia/medio-rural-reclama-politicas-apoyo\\_0\\_1136286621.htm](https://www.diariodesevilla.es/agr_andalucia/medio-rural-reclama-politicas-apoyo_0_1136286621.htm)

## 2. RESEARCH METHODOLOGY

### 2.1. Research objectives

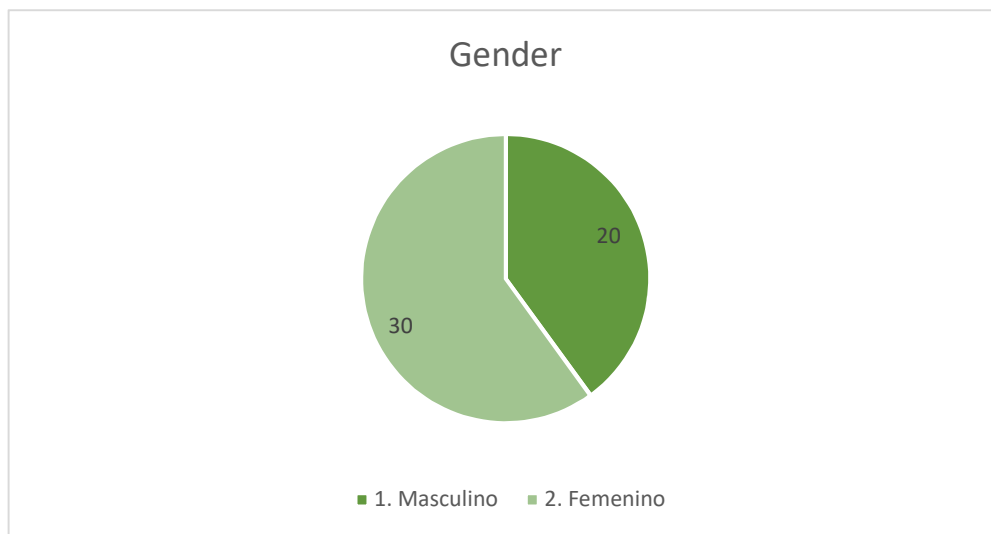
This study aims to identify:

- social intervention professionals 'opinions on social work and social intervention as a profession, social problems and difficulties daily faced in their work, interaction ways with the people in need,
- the extent of these professionals' self-care practices, stress and frustration from failures and moral distress and explore its causes,
- the meaning of concepts like self-care and reflective practice and if those concepts are used in practice,
- social intervention professionals 'needs for professional training and education,
- the extent of networking practice and the relations social intervention professionals' have with the community members, with local private or public institutions representatives (schools, local authorities, NGOs) and with other specialists from the professional community.

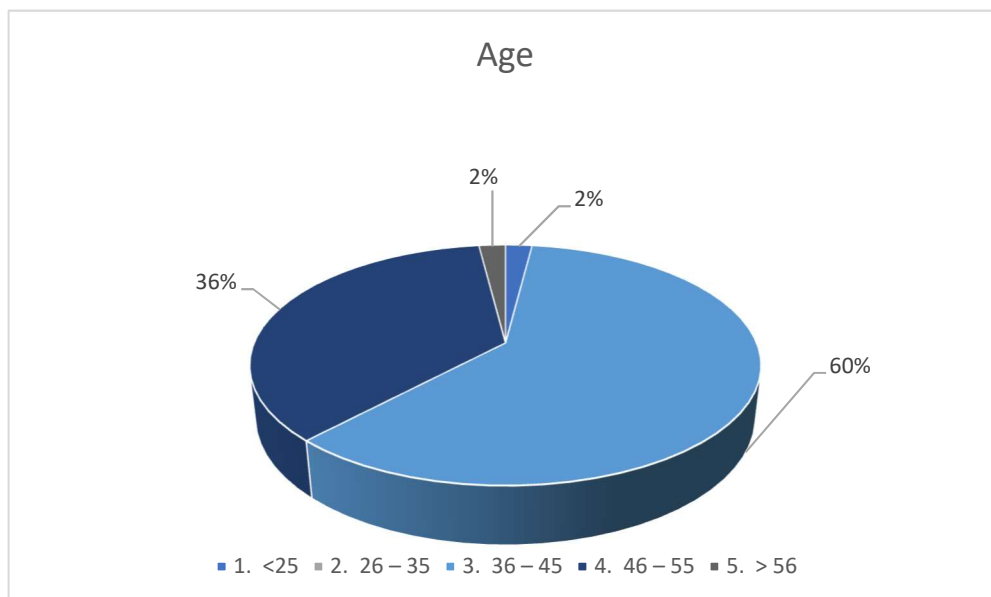
## 2.2. Participants

The sample consists of 50 social intervention professionals' from rural areas from Andalusia, Spain. They are 20 men (40%) and 30 women (60%). Please find below Gender distribution (Graph 1) and Age distribution (Graph 2) shows that only one of the survey respondents is younger than 25 years. 0 % of them are between 26 and 35 years old, with another 60 % being between 36 and 45 years old. 36 % of social intervention professionals' participating in our survey are between 46 and 55 years old, while one person representing 2 % of them is older than 56 years.

**Graph 1:** Gender distribution



**Graph 2:** Age distribution

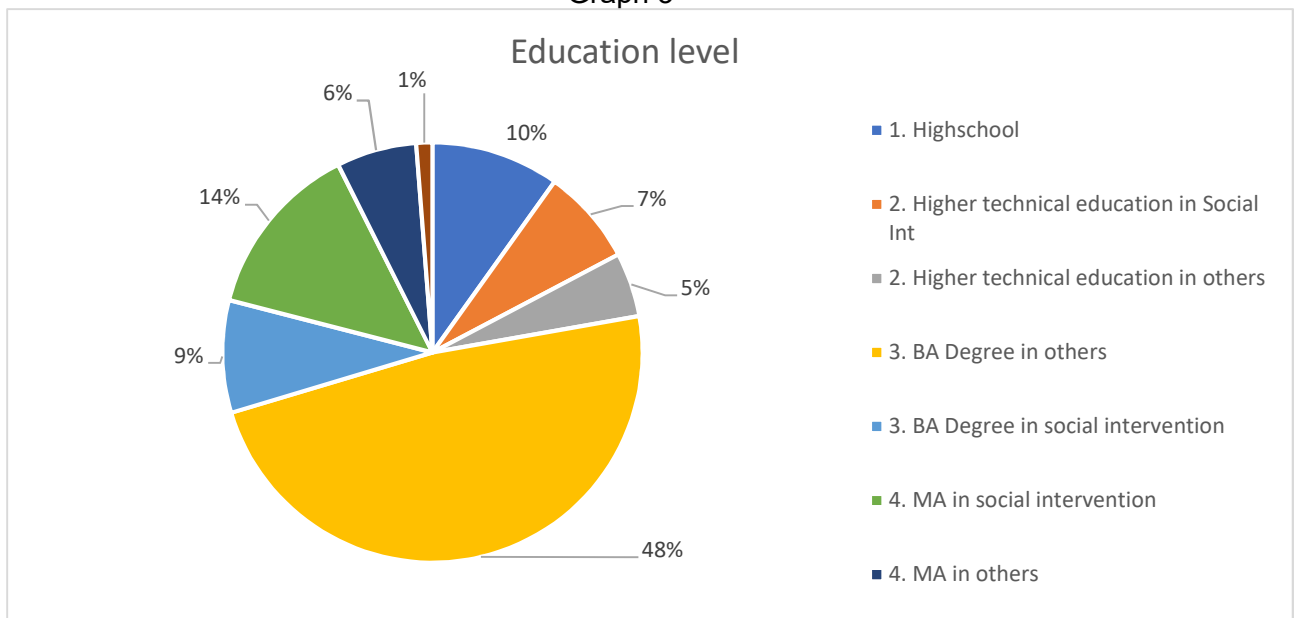


Results for the educational level of the survey respondents (Graph 3) show that more than half of them have a degree in different fields. 48 % or 11 participants have a Master in social intervention (14%), 8 participants have high school degree, while 9 % or 7 survey participants have a bachelor's degree in social intervention. There are also 6% or 5 participants with a master's degree from some other field. 5 % or 4 survey respondents have Higher technical education in others, while only one of our respondents hold a PhD degree.

Table 1:

| EDUCATIONAL LEVEL                           |    | Percent |
|---|----|---------|
| 1. Highschool                               | 8  | 10%     |
| 2. Higher technical education in Social Int | 6  | 7%      |
| 2. Higher technical education in others     | 4  | 5%      |
| 3. BA Degree in others                      | 39 | 48%     |
| 3. BA Degree in social intervention         | 7  | 9%      |
| 4. MA in social intervention                | 11 | 14%     |
| 4. MA in others                             | 5  | 6%      |
| 5. Doctoral studies                         | 1  | 1%      |

Graph 3



Results presented in table 2 shows work experience in the field of social intervention of the 50 survey participants varies very much. The answers to this question ranged from 1 year to 30 years of work experience. The calculated mean is 14,88 years, while the standard deviation is 9,804 years.

Table 2

|                                | N  | Minimum | Maximum | Mean  | Std. Deviation |
|--------------------------------|----|---------|---------|-------|----------------|
| Work experience in social work | 50 | 1       | 30      | 14,88 | 9,804444444    |

### 2.3. Sources of satisfaction in the workplace.

Results about sources of job satisfaction in the workplace (Table 3) show the highest positive response regarding relationship with clients (where 46 of the participants are satisfied or very satisfied). Practitioners in social intervention participating in our survey are also very satisfied with the work itself (80% is satisfied or very satisfied). In third place we have work climate (31 of the 50 practitioners are satisfied or very satisfied with the work climate). The remaining four sources of satisfaction in the work place that were offered in the questionnaire all have a minimum of 2 and a maximum of 5.

We can say that the majority of the survey respondents are quite satisfied with their work conditions, recognition of their work, as well as with their salary and rewards.

We received the worst response in terms of promotion opportunities, with 42 responses out of a total of 50 showing neutrality, dissatisfaction or a lot of dissatisfaction in this regard.

All of the survey respondents chose to write in and rate their own important satisfaction factors. 10 persons are very satisfied with the relationship they establish with colleagues and clients, while others 2 practitioner in social intervention are dissatisfied with the scarce resources that the public administration allocates for social intervention in small rural municipalities.

Table 3

| N  | Minimum | Maximum | Mean | Std. Deviation |
|----|---------|---------|------|----------------|
| 50 | 1       | 5       | 3,26 | 1,391111111    |
| 50 | 1       | 5       | 2,58 | 1,426666667    |
|    |         |         |      |                |
| 50 | 1       | 5       | 3,38 | 1,417777778    |
| 50 | 3       | 5       | 4,14 | 0,697777778    |
| 50 | 2       | 5       | 3,38 | 1,026666667    |
| 50 | 1       | 5       | 3,54 | 1,453333333    |
| 50 | 3       | 5       | 4,24 | 0,72           |
| 50 | 1       | 5       | 3,58 | 1,462222222    |



### 3. RESULTS AND DISCUSSION

The first section of the survey intended to explore social workers' opinions on various aspects of their job, social problems and difficulties daily faced in their work, the sources of occupational stress.

Table 4 presents the results regarding various factors of stress for the target population of our survey. The highest rated statement among 25 offered in this section is "I feel exhilarated after working closely with my clients" "with a mean of 4,40 and a standard deviation of 0,75. The second highest rated statement is "My work tasks are clear to me" with a mean of 4,40 and a standard deviation of 1,2. Third highest mean of 4,28 is "I feel I'm positively influencing other people's lives through my work.", with a standard deviation of 1,173. Fourth highest mean of 4,20 is shared among two statements; "I have the possibility to consult another professional when I have difficult cases", with a standard deviation of 0,71 and "I deal very effectively with my clients' problems", which deviation is 1,6.

Statements "My work is appreciated by my colleagues" and "I have to fill in many documents in my activity" shares the same mean 4,18 and a standard deviation 1,5111.

With a mean of 4,16, we can find statements as "I can organize the work by myself" and "I have the support of my colleagues in my activity", both with 1,146 as standard deviation.

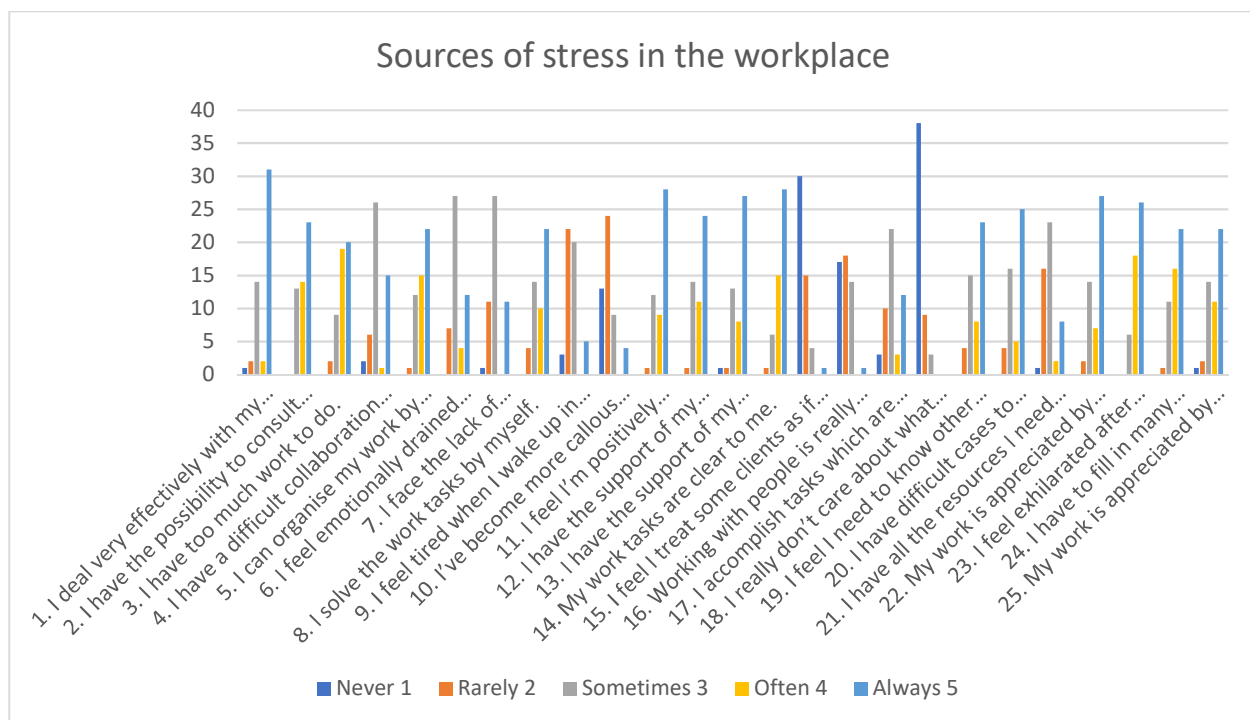
On the other hand, when we look at the statements with the lowest means, we can see that "I really don't care about what happens to some clients" received a lot of answers of "Never"; mean is 1,30 and standard deviation is 0,822. The second lowest mean, 1,54 is for statement "I feel I treat some clients as if they were impersonal objects", with a standard deviation of 1,657. Statement "I've become more callous toward people since I took this job", have a mean of 2,16 having a standard deviation of 1,52 and the last statement with a mean lower than 3 is "I feel tired when I wake up in the morning and I have to face a new work day" with a mean of 2,64 and a standard deviation of 1,413.

#### Sources of stress in the workplace

Table 4

|  | N  | Minimum | Maximum | Mean | Std. Desv.   |
|--|----|---------|---------|------|--------------|
| 1. I deal very effectively with my clients' problems.                                  | 50 | 1       | 5       | 4,20 | 1,6          |
| 2. I have the possibility to consult another professional when I have difficult cases. | 50 | 3       | 5       | 4,20 | 0,7111111111 |
| 3. I have too much work to do.   | 50 | 2       | 5       | 4,14 | 1,1422222222 |
| 4. I have a difficult collaboration with the authorities.                              | 50 | 1       | 5       | 3,42 | 1,4266666667 |
| 5. I can organise my work by myself.   | 50 | 2       | 5       | 4,16 | 1,1466666667 |
| 6. I feel emotionally drained from my work.  | 50 | 2       | 5       | 3,42 | 1,0177777778 |
| 7. I face the lack of understanding and cooperation from my clients.                   | 50 | 1       | 5       | 3,18 | 1,3733333333 |
| 8. I solve the work tasks by myself.   | 50 | 2       | 5       | 4,00 | 1,1111111111 |
| 9. I feel tired when I wake up in the morning and I have to face a new work day.       | 50 | 1       | 5       | 2,64 | 1,4133333333 |

|   |    |   |   |      |              |
|---|----|---|---|------|--------------|
| 10. I've become more callous toward people since I took this job.           | 50 | 1 | 5 | 2,16 | 1,52         |
| 11. I feel I'm positively influencing other people's lives through my work. | 50 | 2 | 5 | 4,28 | 1,1733333333 |
| 12. I have the support of my colleagues in my activity.                     | 50 | 2 | 5 | 4,16 | 1,146666667  |
| 13. I have the support of my boss/bosses in my activity.                    | 50 | 1 | 5 | 4,18 | 1,595555556  |
| 14. My work tasks are clear to me.  | 50 | 2 | 5 | 4,40 | 1,2          |
| 15. I feel I treat some clients as if they were impersonal objects.         | 50 | 1 | 5 | 1,54 | 1,657777778  |
| 16. Working with people is really a strain for me.                          | 50 | 1 | 5 | 2,00 | 1,555555556  |
| 17. I accomplish tasks which are not in my responsibility.                  | 50 | 1 | 5 | 3,22 | 1,382222222  |
| 18. I really don't care about what happens to some clients.                 | 50 | 1 | 3 | 1,30 | 0,822222222  |
| 19. I feel I need to know other professional intervention methods.          | 50 | 2 | 5 | 4,00 | 1,111111111  |
| 20. I have difficult cases to handle and solve in my work.                  | 50 | 2 | 5 | 4,02 | 1,115555556  |
| 21. I have all the resources I need to do my job.                           | 50 | 1 | 5 | 3,00 | 1,333333333  |
| 22. My work is appreciated by my colleagues.                                | 50 | 2 | 5 | 4,18 | 1,151111111  |
| 23. I feel exhilarated after working closely with my clients.               | 50 | 3 | 5 | 4,40 | 0,755555556  |
| 24. I have to fill in many documents in my activity.                        | 50 | 2 | 5 | 4,18 | 1,151111111  |
| 25. My work is appreciated by my boss.                                      | 50 | 1 | 5 | 4,02 | 1,56         |



### Consequences of stress

Excessive and prolonged stress is a risk factor for longer term chronic disease. Social workers' employers have a duty of care to protect them from work-related stress and the associated health risks.

In Table 5 are presented the results regarding some consequences of stress in the workplace. Practitioners in social intervention participating in our survey were presented with a list of 14 stress related aspects and instructed to choose the ones they have experienced in the last year of work (multiple answers were allowed).

34 % of the survey respondents have in the last year experienced feelings of dissatisfaction, 30 % have experienced Tense relations with others (family, friends etc.), while 26 % of respondents report having low motivation for work, Lower work productivity, and Difficulty concentrating.

The lowest frequencies of positive answers received Increased use of tobacco, alcohol, pills and/or other substance, no one chose that option, and Weakness, with 4 participants of the survey.

9 participants (18 % of the sample population) reported not experiencing any of the stress related aspects presented on the list in the last year of work.

| <b>Table 5 Distribution for stress consequences</b>                | Count | %   |
|--|-------|-----|
| 1. Low motivation for work   | 13    | 26% |
| 2. Low self-confidence   | 6     | 12% |
| 3. Feelings of dissatisfaction                                     | 17    | 34% |
| 4. Increased use of tobacco, alcohol, pills and/or other substance | 0     | 0%  |
| 5. Precarious health   | 9     | 18% |
| 6. Tense relations with others (family, friends etc.)              | 15    | 30% |
| 7. Lower work productivity   | 13    | 26% |
| 8. Sleep disturbances  | 7     | 14% |
| 9. Weight loss or weight gain                                      | 7     | 14% |
| 10. Weakness   | 4     | 8%  |
| 11. Change of eating habits  | 8     | 16% |
| 12. Apathy   | 7     | 14% |
| 13. Difficulty concentrating                                       | 13    | 26% |
| 14. Difficult decision-making                                      | 7     | 14% |
| 15. None of the above  | 9     | 18% |

### Ways of improving professional activities

The last section of the survey intended to explore ways of improving professional activities of social

intervention practitioners.

**Table 6. Descriptive statistic for the use of different ways to improve professional activity**

|  | N  | Minimum | Maximum | Mean | Std. Deviation |
|--|----|---------|---------|------|----------------|
| Emotional regulation techniques  | 50 | 1       | 3       | 2    | 0,666666667    |
| Supervision from another professional  | 50 | 1       | 3       | 1,9  | 0,688888889    |
| Communication with other colleagues  | 50 | 2       | 3       | 2,52 | 0,337777778    |
| Being a member of a professional network/association   | 50 | 1       | 3       | 2,4  | 0,755555556    |
| Professional training  | 50 | 2       | 3       | 2,52 | 0,337777778    |
| Reading about the latest developments in the field of social work                            | 50 | 1       | 3       | 2,32 | 0,737777778    |
| Exchange of experience with other professionals in my field (from my country or from abroad) | 50 | 1       | 3       | 2,24 | 0,72           |

As we can observe from table 6, social intervention professionals use to a large extent three ways of improving their professional activity: communication with other colleagues, and professional training, with a mean of 2,52. They also are used to read about the latest developments in the field of social work, the mean for this statement is 2,32, and the standard deviation 0,737. They use less: supervision from another professional (mean 1,9), and emotional regulation techniques (the mean is 2 and the standard deviation 0,666).

30 professionals added to this section others ways they are using, mainly they mentioned: Programmes and protocols of care of other regional health centers; Coordination and exchange of experiences in non-work spaces with colleagues and collaborators Carry out another activity not related to the field of the profession: The regular practice of sport has been mentioned by 6 of the people interviewed, they have also mentioned workshops on personal growth, relaxation techniques; Consultation of new working methods and disciplines, and attendance at workshops with common training needs.

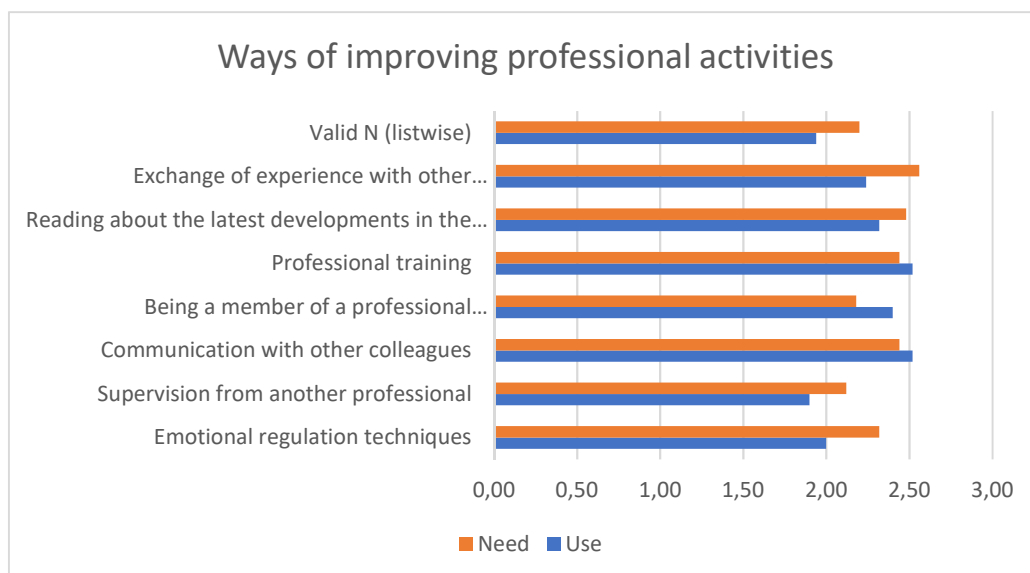
**Table 7. Descriptive statistic for the need of different ways to improve professional activity**

|                                       | N  | Minimum | Maximum | Mean | Std. Deviation |
|---------------------------------------|----|---------|---------|------|----------------|
| Emotional regulation techniques       | 50 | 1       | 3       | 2,32 | 0,737777778    |
| Supervision from another professional | 50 | 1       | 3       | 2,12 | 0,693333333    |
| Communication with other colleagues   | 50 | 1       | 3       | 2,44 | 0,764444444    |

|  |    |   |   |      |             |
|--|----|---|---|------|-------------|
| Being a member of a professional network/association   | 50 | 1 | 3 | 2,18 | 0,706666667 |
| Professional training  | 50 | 1 | 3 | 2,44 | 0,764444444 |
| Reading about the latest developments in the field of social work                            | 50 | 1 | 3 | 2,48 | 0,773333333 |
| Exchange of experience with other professionals in my field (from my country or from abroad) | 50 | 1 | 3 | 2,56 | 0,791111111 |

As we can see from table 7, regarding the need of different ways to improve professional activity, the respondents say they mainly need: *“Exchange of experience with other professionals in my field (from my country or from abroad)”*, with a mean of 2,56 and a standard deviation of 0,79, and in second place they remark *“Reading about the latest developments in the field of social work”*, here the mean is 2,48 and the standard deviation 0,77. Professional training and communication with other colleagues are also very important for them (sharing the mean with a 2,44), and finally, with 2,32 of mean practitioners shows needs of emotional regulation techniques.

### Comparison between the usage and the need for ways of improving professional activity



This graphic shows us the mean differences in the usage of and the need for several way of improving social workers' activity. The main aspects here are:

- There is a larger difference regarding the experience of changing information between

colleagues as we can observe their present situation (use) and social intervention practitioners' need for this statement. The obvious need for this kind of experience is a sign of development for their activity, as Social Intervention Professionals, they want to improve their knowledge through information sharing with other professionals.

- There is also a larger difference regarding emotional regulation techniques, as Social Intervention Professionals really feel the need for such habits.
- It is also really important to observe the differences regarding the experience of supervision from another professional and also reading about the latest developments in the field of social work.
- Communication with other colleagues, and professional training are the aspects in which the use of and the need are almost to the same extent, but the use is a bit larger than the need. This means that these are some of the effective ways that these persons use in their professional activity.
- Social Intervention Professionals do not use and do not show the need to use supervision from another professional as a way of improving professional activity.

## CONCLUSION

The results of this survey highlight the need to exchange information on the social intervention that these professionals develop in their day-to-day work with other colleagues in the profession. The need to attend activities such as training sessions, meetings, conferences, both nationally and internationally, has also been raised as a practical possibility to improve their work.

The possibility of being a member of a professional network/association, although they already use these tools at national level to improve their professional activity, constitutes an opportunity at transnational level.

This questionnaire has allowed us to confirm the opportunity of the EPSWRA project, which comes to propose several tools that are ratified as necessary in this report.

## REFERENCES

- Macias Mateos, Consuelo, *La intervención social. Social intervention in social integration and marginalization: Concept and theories.*
- [https://www.diariodesevilla.es/agr\\_andalucia/medio-rural-reclama-politicas-apoyo\\_0\\_1136286621.htm](https://www.diariodesevilla.es/agr_andalucia/medio-rural-reclama-politicas-apoyo_0_1136286621.htm)
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