D. Employment Projections

Occupational projections are prepared annually by COPS (Canadian Occupational Projection System) which is the main occupational forecasting process used widely in Canada. The 1998 scenario, based on Statistics Canada Labour Force Survey estimates, was reviewed for this study. Employment growth rates found in the COPS estimates do not match the 1991 to 1996 Census patterns. The COPS 1991 to 1996 projections shows growth across all occupations in this sector, except for a decline in the employment of probation officers. By comparison Census results shows employment growth for social workers, probation officers and family, marriage and other counsellors along with declines in management and for para-professional workers. In addition the COPS projections of employment growth rates for social workers over this same time period were about half of the annual rate indicated by Census information. Similarly the COPS projections significantly underestimated the employment growth rate for the counselling field.

The COPS projections for the 1996 to 2001 period show significantly reduced employment growth rates for the social services occupations. This five-year pattern includes declines in 1997 and 1998 followed by limited employment gains in 1999 to 2001. The more limited growth projected by COPS through the five years from 1996 to 2001 appears reasonable given fiscal restraint and, especially, the impacts of budget cuts in Ontario. However the COPS projections for the further period from 2001 to 2006 suggest that annual employment growth will continue to weaken. The COPS employment projections are that social workers and counsellors will show annual employment growth of less than one-half of one percent. At the same time the COPS projections show higher employment growth for the management category and the para-professional field. (For more information on the COPS projections and COPS model see the Technical Report)

Given the discrepancy between the COPS historical data and the Census numbers it is felt that the current COPS projections for this sector are too low. The major drivers of demand in this sector are based on demographic trends along with socio-economic conditions. An expected lower overall population growth rate over the coming decade, a relatively static overall youth population and vastly improved economic conditions across much of Canada would suggest that there will be very limited need for increases in employment in the social work and social services sector. But, at the same time, the Aboriginal population is young and increasing, poverty for young families has increased from a decade ago and, despite economic recovery, these poverty rates have been slow to improve. These latter environmental drivers can, in turn, be expected to maintain or even increase the demand for social services and, hence, lead to employment gains in the field. Finally a new area of social service need is seen as emerging from the rapidly growing geriatric population and from limits being placed on provision of health care.

The combination of growing and emerging needs are seen as counterbalancing the trends in reductions in social services funding that would be expected to occur with lower overall population growth. In addition, as shown so clearly in the past decade with social services employment gains and losses in Ontario as well as the policy-driven demand for more child protection social workers in British Columbia, policy can have an over-riding impact on employment numbers. However, with renewed concerns over certain areas of social programming and the potential for overflow from health policies it is expected that the policy environment will be a little more positive than it was in the latter 1990s.

With all these demographic and policy changes taking place it is felt that a more likely scenario is for sector employment to increase generally in line with overall Canadian population growth which is expected to be a little under 2 percent per year. The conclusion drawn from the combination of demographic and policy drivers, is that sector employment for these 5 NOC occupational categories will grow annually at a rate of approximately 2% or somewhat greater, which is a lower rate than seen in the 1991 to 1996
period. This means that employment will grow annually at what is considered an average rate.

Because this projection is based on changing demographic conditions and has considered the history in the 1980s of employment growth for the social worker occupation and other occupations in the social services sector, this potential sector employment growth will be shared differently among the social services occupations.

- Social worker employment (NOC 4152), while unlikely to see a repeat of the quite high growth rates (4 percent per annum) of the early 1990s, is expected to have annual growth that is just over the population growth rate, or close to 2 percent per year.

- Similar growth can be expected for the probation field (NOC 4155).

- A growth rate of slightly higher than 2% is expected for the family, marriage and other counsellors occupational group (NOC 4153), many of whom have a social work degree.

- Lower, but some growth, is most likely for the management (NOC 0314) and para-professional worker (NOC 4212) fields.

Along with looking at the growth or shrinkage areas and the underlying factors for growth, the aging of the social services workforce is also a factor that must be considered. To assess the demand for appropriately trained workers, it is necessary to take into account how many of the existing workforce is expected to retire over time. COPS does provide some reasonable estimates of attrition from the occupation. These attrition numbers, which are calculated based on the age of workers in each occupation, are strictly limited in COPS projections to potential retirements and deaths. Attrition, estimated in this way, does not cover any further movement of current workers between occupations or turnover.

- The management occupation, an older population, is expected to experience attrition of somewhat over 4.0 percent each year. The overall numbers, however, are small.

- Reflecting a younger age of workers, the professional fields of social worker, family, marriage and other counsellors, and probation officers are anticipated to have an attrition rate of 2.3 percent to 2.5 percent each year.

- Attrition from retirement or deaths of a little over 4.0 percent is projected for the community and social services workers category. However, very few in these occupations have a BSW degree or more. A significant number have college-level diplomas.

- Turnover and voluntary withdrawal, while not quantifiable from the existing data, clearly are issues which should be considered in assessing requirements for movement of workers into the field. Stress is an ongoing aspect of work in the social services that can lead to leaving employment, but cutbacks and limited opportunities for employment in traditional social work areas have increased the pressures on workers in the latter 1990s. Attrition of professional social workers across the social work and social services occupations is expected to be somewhat higher in the short term.

- Attrition for people leaving these 5 NOC occupational codes for other reasons was not examined in this study, however it is thought to be significant. There are people who graduate with a social work degree who choose not to be employed as a social worker per se, but use the skills learned in other jobs. There are also others, who after working in the field for a number of years segue into other careers that may or may not be closely linked to the social work occupation. These additional types of attrition have been considered when looking at the employment growth rate.
E. Provincial Highlights: Profiles and Prospects

In terms of demand factors and the profile of the social services sector, the same types of trends, issues and workforce characteristics are seen across Canada. In general, most jurisdictions and areas are facing common demand drivers. The human resources profile and work patterns are also very similar. Issues about the work environment and on education and training needs are common to most locations. In some provinces the mix of occupations, as reflected by employment data, differs somewhat from the national picture. Any of these major provincial differences, especially those that illustrate or impact on the overall perspective of human resource needs across Canada, have already been discussed within the analysis of demand factors, change aspects and within the sector profile.

The majority of any differences seen at a provincial level are best categorized as variations on the overall major themes rather than significant issues in themselves. Yet viewing the array of demand factors, trends and human resource characteristics in a combined way at a provincial level can provide some useful additional tools for human resource planning.

Data profiles have been drawn together to capture key aspects for each province and for the territories. Information included in the provincial and territory profiles was chosen to provide a review of the main demand indicators followed by some of the most important human resource characteristics and education profiles. By following this approach, the individual provincial material links to the discussion of demand drivers and to the sector profile for Canada as a whole. In conjunction with this national sector study the provincial profiles form a basis for human resource planning for the sector at a provincial level. The extensive statistical tables that detail the provincial and territory social service sector profiles, along with a discussion of data sources, coverage and explanatory notes can be found in Appendix A. In the discussion immediately below we present in narrative form highlights based on the analysis of these statistics. This information is seen as key to human resource planning.

Newfoundland and Labrador

Newfoundland and Labrador has been experiencing a decline in population numbers, which is expected to continue over the coming decade. The key to assessing demand for social services programming is the age distribution of the population and how this is changing. In common with the Canadian average, the population is aging. The dependency ratio of persons over 65 is expected to increase from 15 percent in the 1990s to over 20 percent by 2011 and even higher by 2016. At the same time the decline in the children and youth population, already seen in the 1990s, is expected to continue over this same time period.

The proportion of the Aboriginal population matches that found at a Canadian level, at 4 percent. The proportion of children that are Aboriginal, 7 percent, is similar to the Canadian picture. However there is only a small visible minority population.

Social service delivery indicators show little change during the 1990s.

These measures emphasize that aggregate demand for social services delivery is unlikely to increase but that there will be a shift in demand to geriatric and health related services.

In common with the overall Canadian pattern, the Newfoundland and Labrador social services workforce has seen a significant decline in management employment and a major increase in employment of marriage, family and other
counsellors. Also there has been some shift of employment from government to community linked employment, although not to quite the same degree as the national picture.

The unemployment rate for social workers is low, comparable to the Canadian average, while unemployment of community and social services workers is high.

The population reporting qualifications in social work increased from 1991 to 1996. However those identifying gerontology as their field has declined.

**Prince Edward Island**

The 1991 to 1996 period saw a small population gain for the Island and this is expected to continue over the coming decades. The key to assessing demand for social services programming is the age distribution of the population and how this is changing. The population is somewhat older and this trend is continuing in common with the Canadian pattern. The dependency ratio of persons over 65 is expected to increase from 20 percent in the 1990s to about 23 percent by 2011 and even higher by 2016. At the same time the decline in the children and youth population, already seen in the 1990s, is expected to continue over this same time period.

The proportion of the population that is Aboriginal and visible minority is lower than the Canadian picture. Persons with French as their mother tongue amounts to 4 percent of the population.

Social service delivery indicators show little change during the 1990s.

These measures emphasize that aggregate demand for social services delivery is most likely to increase slowly but that there will be a shift in demand to geriatric and health related services.

In common with the overall Canadian pattern, the Prince Edward Island social services workforce has seen a significant decline in management employment and a major increase in employment of marriage, family and other counsellors. Also there has been a significant shift of employment of social workers from government to community-based delivery.

The small numbers in Prince Edward Island means that many income and workplace measures are not statistically reliable. But, in common, with the Canadian unemployment of social workers was low in 1996.

The population reporting qualifications in social work at the university level showed little change from 1991 to 1996. However those who had completed college or diploma programs in social work and social services increased over the same time period. Much of this increase was in protection services but childcare services also showed strong gains.

**Nova Scotia**

There was a small overall population gain in Nova Scotia from 1991 to 1996 but the number of children and youth declined. This pattern of slow growth is expected to continue over the coming decade. The key to assessing demand for social services programming is the age distribution of the population and how this is changing. The trend towards an aging population is continuing in common with the Canadian pattern. The dependency ratio of persons over 65 is expected to increase from about 20 percent at the end of the 1990s to about 23 percent by 2011 and even higher by 2016. At the same time the decline in the children and youth population, already seen in the 1990s, is expected to continue over this same period.

The proportion of the population that is Aboriginal is slightly lower than in Canada as a whole, as is the visible minority proportion. Persons with French as their mother tongue amount to 4 percent of the population.

Social service delivery indicators show some growth in the number of children in care during the 1990s and social services expenditures have increased at a rate that is a little above most provinces.

Aggregate demand for social services delivery is most likely to increase slowly but a shift in demand to geriatric and health related services could also be expected.

Employment of social workers showed a slight drop from 1991 to 1996, while employment of managers increased. This is different from the Canadian pattern and may reflect how people responded in terms of job functions. Similar to the Canadian situation there was a major increase in employment of marriage, family and other counsellors. Also there has been a
significant shift of employment of social workers from government to community-based delivery.

The number of BSW degrees granted remained fairly constant through the 1990s. However the population reporting that they had qualifications in social work at the university level increased from 1991 to 1996. Applied gerontology, seen as a growth area, increased faster than average.

New Brunswick
The New Brunswick population grew by 2 percent between 1991 and 1996. At the same time the number of children and youth declined slightly. This pattern of slow population growth is expected to continue and to even reduce over the coming decade. Also important in assessing demand for social services programming is the age distribution of the population and how this is changing. The trend towards an aging population is seen in New Brunswick, as in Canada. The dependency ratio of persons over 65 is expected to increase from about 19 percent at the end of the 1990s to about 23 percent by 2011 and even higher by 2016. At the same time the decline in the children and youth population, already seen in the 1990s, is expected to continue over this same time period.

The proportion of the population that is Aboriginal is slightly lower than in Canada as a whole as is the visible minority proportion. Persons with French as their mother tongue comprise about a third of the total population.

Social service delivery indicators show little change during the 1990s and social services expenditures have increased slowly.

Aggregate demand for social services delivery is most likely to increase slowly but, as with most jurisdictions, some increase in demand for geriatric and health related services could also be expected.

Employment of social workers increased by 5 percent from 1991 to 1996. Employment of managers also increased, countering the Canadian pattern. This may reflect how people responded in terms of their job functions. Similar to the Canadian situation there was a major increase in employment of marriage, family and other counsellors. Also there has been a shift of employment of social workers from government to community-based delivery.

The number of BSW degrees granted varied through much of the 1990s but was little different in 1997 than in 1992. However the population reporting that they had qualifications in social work at the university level increased from 1991 to 1996. Applied gerontology, seen as a growth area, increased faster than average.

Quebec
While the chapter on Quebec’s social work sector provides information on all aspects of the Quebec context, this immediate section highlights the major statistics that are of interest when taking a Canada-wide comparative view.

The Quebec population grew by 3.5 percent between 1991 and 1996, which is a little slower than the Canadian average. Recent immigrants contributed to the population growth, with just over 2 percent of the 1996 population identifying themselves as immigrating to Quebec during the previous five years. The number of children declined slightly, while the fastest growing segments were those over 65 years of age. This shift in the age structure is similar to the Canadian average. Projections of population numbers for Quebec show similar patterns to those of the other provinces for the next decade, with overall growth expected to be from 3 to 4 percent over each five-year period.

The age distribution of the population is an indicator of how demand for social services programming can be expected to change. The trend towards an aging population is seen in Quebec as elsewhere in Canada. The dependency ratio for persons over 65 is expected to increase from a current level of about 18 per 100 total population to close to 22 per 100 population by 2011. This means that the number of persons who are over 65 will increase substantially in the coming decade. At the same time the proportion of children in the population is expected to continue to decline.

The Aboriginal and visible minority share of the population is slightly lower than in Canada as a whole. Almost 81 percent of the population identified themselves as persons whose mother tongue was French.
Not all the social service delivery indicators were reported for Quebec but those that were show little change during the 1990s. In the most recent years social services expenditures were static or decreased but did show a small increase in 1998/99, the most recent year reported.

The occupational distribution of those employed in the social services field in Quebec differs from many other provinces, with the social worker occupational category comprising the largest group by a substantial margin. Employment of social workers increased by 44 percent from 1991 to 1996. Employment of managers also increased. Employment of marriage, family and other counsellors showed a similar growth rate to that of social workers but this group is not a large one in Quebec, unlike in many other provinces. During the 1991 to 1996 period there was some shift of employment of social workers from government to community-based delivery, such as non-institutional social services and agencies, but not to the same degree seen in many other provinces.

The number of BSW degrees granted varied through the 1990s from a high of 805 in 1996 to a low of 615 in 1997. The number of people reporting that they had qualifications in social work at the university level increased by about 26 percent from 1991 to 1996. The population with college diplomas in social work increased by about 32 percent.

**Ontario**

Ontario has seen faster population growth during the 1990s than most other provinces. With immigration flows, Ontario has also seen a gain in the number of children 14 years of age and under. This pattern of population growth, about 7 percent in each five-year span, is expected to continue over the coming decade. The age distribution of the population provides a key sense of how demand will change for social services programming. The trend towards an aging population is seen in Ontario. The dependency ratio for persons over 65 is lower in Ontario than many other areas in Canada but will increase. This, plus overall population growth, means that the numbers of persons who are over 65 will increase substantially in the coming decade. Continued population growth fuelled by immigration means that the number of children is also likely to increase or, at least, remain at current levels.

The proportion of the population that is Aboriginal is slightly lower than in Canada as a whole. However visible minorities make up about 16 percent of the population and this share is increasing. Persons with French as their mother tongue make up just over 4 percent of the total population.

Social service delivery indicators show little change during the 1990s. In the most recent years reported on, from 1996 to 1999, social services expenditures have decreased each year.

Aggregate demand for social services delivery is most likely to increase slowly but will be constrained by budgets in the near term. With most jurisdictions, some increase in demand for geriatric and health related services are likely. Another area of growth will be providing services to immigrant and visible minorities, children and adults.

Employment of social workers increased by 16 percent from 1991 to 1996. Employment of managers declined. Employment of marriage, family and other counsellors showed the highest growth rate. There was a shift of employment of social workers from government to community-based delivery such as non-institutional social services and agencies.

The number of BSW degrees increased from early in the 1990s. In addition the population reporting that they had qualifications in social work at the university level increased by over 20 percent from 1991 to 1996. The population with college diplomas in social work increased by about 40 percent.

**Manitoba**

Manitoba showed population growth of 2 percent from 1991 to 1996. Similar growth rates are expected over the next decade.

A key aspect in Manitoba is the proportion of population that is Aboriginal, with over 12 percent in 1996. The Aboriginal population, which is currently young, is expected to grow and this group will provide a significant component of overall population growth as well as ensuring that there will continue to be an increase in the number of children. The visible minority population and some immigration will also help fuel population growth.

Manitoba already has an older population than the Canadian population overall. The province will still
experience the trend towards an aging population but with less impact because of the other demographic strands.

Persons with French as their mother tongue make up just over 4 percent of the total population. Social service delivery indicators show little change during the 1990s. In the most recent years 1997 to 1999, social services expenditures have decreased.

Aggregate demand for social services delivery is most likely to increase despite some constraint from budgets in the near term. The main areas of growth will be services for Aboriginal populations. However, along with most jurisdictions, some increase in demand for geriatric and health related services are likely.

Employment of social workers was essentially static from 1991 to 1996. Employment of managers declined substantially. Employment of marriage, family and other counsellors showed the highest growth rate. Similar to the general Canadian pattern there was a shift of employment of social workers from government to community-based delivery such as non-institutional social services and agencies.

There is an equity gap in the workforce. While visible minorities made up 7 percent of the total population in 1996, the proportion of social workers who were visible minorities was 2 percent. Similarly low proportions are seen in the other social services occupations.

**Saskatchewan**

The population of Saskatchewan remained stable from 1991 to 1996 but the number of children dropped. Little overall population growth is expected over the coming decade.

An important aspect in Saskatchewan is the Aboriginal population, which made up 12 percent of the total population in 1996. The Aboriginal population, which is currently young, is expected to grow and this group will provide a significant component of overall population growth in the coming decade.

The visible minority population is a far smaller share of the total than the overall Canadian picture and immigration flows are small.

Saskatchewan already has an older population than the Canadian picture. With growth of the Aboriginal population, the dependency ratio of those 65 years and over is expected to remain close to the current 23 to 24 percent.

Persons with French as their mother tongue make up about 2 percent of the total population. Social service delivery indicators show little change during the 1990s. In the most recent years reported on, from 1996 to 1999, social services expenditures increased after a few years of decline.

Aggregate demand for social services delivery is most likely to increase slowly and the main areas of growth will be services for Aboriginal populations.

Employment of social workers increased by 33 percent from 1991 to 1996. Employment of managers declined. Employment of marriage, family and other counsellors showed the highest growth rate. As in most provinces there was a shift of employment of social workers from government to community-based delivery such as non-institutional social services and agencies.

**Alberta**

The population of Alberta grew by 6 percent between 1991 and 1996, with some growth across all age groups. This population growth increased further towards the end of the 1990s and the forecast is for population growth of over 6 percent to occur in each five-year period to 2016.

With population gains from inter-provincial immigration and immigration, the population continues to be younger than the Canadian pattern. The current estimate of the dependency ratio for the 65 plus population is 15 per 100 total population. This is expected to increase to nearly 18 percent in another ten years. The absolute number of children and youth will also continue to increase but the share of the population that they make up will decline.

The Aboriginal share of the population was almost 6 percent in 1996. Visible minorities made up 10 percent of the population. Persons with French as their mother tongue make up 2 percent of the total population.

The children in care delivery indicator shows growth during the 1990s. Social services expenditures have
generally been decreasing annually during the 1990s, especially when viewed in real terms, adjusted for changes in the price index.

Demand for social services for children will continue to increase, although more slowly. Some increase in service demand will likely be seen from the older population and from stress on the health care system. Another area of some growth will be providing services to immigrant and visible minorities, children and adults.

Employment of social workers increased by 9 percent from 1991 to 1996. Employment of managers declined. As in many provinces, employment of marriage, family and other counsellors showed the highest growth rate. There was a shift of employment of social workers from government to community-based delivery such as non-institutional social services and agencies.

The latest year of data, 1997 shows an increase in BSW degrees granted. The proportion of the population who said that they had university level qualifications in social work and social services increased by about 18 percent from 1991 to 1996. The proportion with college level qualifications increased by over 40 percent.

**British Columbia**

British Columbia showed the most rapid population growth from 1991 to 1996, at 13.5 percent. This population growth was a result of movement from other provinces as well as from immigration. As a result there was also strong growth in the numbers of children and youth in the province. Some slowing of population growth occurred towards the end of the 1990s. The population is projected to grow by at least 8 percent in each five-year period to 2016, still fuelled by immigration and in-migration.

The 65 plus population is growing at a higher rate and is expected to comprise 21 percent of the total by 2011, up from a share of about 19 percent currently.

With population gains from inter-provincial immigration and immigration, the population continues to be younger than the Canadian pattern.

The absolute number of children and youth will also continue to increase but the share of the population that they make up will decline slightly.

The Aboriginal share of the British Columbia population was 5 percent in 1996. As a young population, Aboriginals will contribute to population gains over the next decade. Visible minorities made up 18 percent of the population.

Recent immigrants made up almost 6 percent of the 1996 population.

Persons with French as their mother tongue make up just over 1 percent of the total population.

The children in care delivery indicator shows growth during the 1990s while social services expenditures have varied through the 1990s.

Demand for social services for children will continue to increase, although more slowly. An area of some growth will be providing services to immigrant and visible minorities, children and adults, while the growing, young Aboriginal population will also add demand.

Employment of social workers increased by 36 percent from 1991 to 1996, in response to policy changes. Employment of managers declined. As in many provinces, employment of marriage, family and other counsellors showed the highest growth rate. Unlike most other provinces there was no absolute shift of social worker employment out of government.

**Yukon and Northwest Territories**

Since most data derives from the 1996 Census or from historical data series, Nunavut and the Northwest Territories are combined.

Social service demand factors for the northern areas of Canada emphasize the growing Aboriginal population. In the Northwest Territories, Aboriginals comprise over 60 percent of the population. For the Yukon the proportion is over 20 percent. The population is typically younger than the Canadian pattern. The Northwest Territories population is expected to grow by well over 8 percent in each five-year period to 2016. For the Yukon, population growth is often more variable with people moving in, and out, depending on economic conditions.
However growth is still expected to be about 4 percent over each five years. A considerable part of the growth will come from the Aboriginal population, leading to increasing demand for services for Aboriginal people.

Visible minorities comprise about 3 percent of the population. The proportion of the population with French as their mother tongue is 2 percent in the Northwest Territory and 3 percent for the Yukon.

As in most other areas of Canada, employment of marriage, family and other counsellors increased by the highest rate from 1991 to 1996. Employment of community and social service workers also increased in the north.

F. Working in the Social Services: Perspectives from the Field on Human Resources Issues

KEY FINDINGS

Challenges For Sector Identity
- Respondents in this study (and in the previous pilot study) assert that one of the largest challenges facing the social services, and social work in particular, is the lack of a distinct identity for the role and value of the sector.

Employment Conditions

Funding Constraints:
- Social services are expected to do more with less, with particularly negative effects on service provision to those most in need. Respondents emphasized the service needs of Aboriginal peoples and recent immigrants.

Caseload Trends:
- There is an increase in absolute numbers of cases and of the intensity and breadth of service needs. This results to a great degree from the increasing impoverishment of those already economically and socially vulnerable and from the lack of preventive and remedial programming—because of funding constraints.
- Additional factors affecting caseloads are shorter stays in hospital (both medical and mental health facilities), increasing numbers of the elderly, and improved ability to identify and address abuse situations.

Working Conditions:
- The combination of funding constraints and increased and intensified service needs contributes to very stressful day to day working conditions, with high employee burn-out. The additional toll on workers in rural or northern settings, often serving high proportions of very high need clients, is a particular area of concern.
- The relatively new effort to quantify performance according to measures of outcome and productivity often negatively affects both the work experience and the quality of service that can be provided.
- Restructuring of services increasingly results in redefinition of the social services worker’s role, which can lead to replacement of social work functions by those in other occupational categories. Also, there is a decreasing capacity to sustain the social worker role and practice, when restructuring of work units results in the removal of professional social workers from supervisory roles. This increases the isolation and uncertainty of the day to day work of the social services employee.
- Those in private practice report that because government health care plans do not cover their services, the client range they can serve is limited. They also report increased competition as more social workers move into the field.

Ameliorating Stress:
- For the most part, social services workers must develop their own individual or collegial means of reducing stress. A few employers surveyed address these issues by providing workshops or seminars about dealing with stress.
Workplace Benefits:

- The great majority of employers surveyed provide a solid core of basic benefits (health, dental, pension, group insurance, paid vacation over 2 weeks, etc.). Very few provide day care services, paid educational leave, or non-management paid overtime.

- Government and hospitals are somewhat more likely to have the full range of benefits.

- Managers are somewhat more likely to have the most benefits, but the difference for managers among occupational groupings is slight. Social workers in the private or not-for-profit sector have fewer benefits than their counterparts in the government and hospital industries.

Use of Technology on the Job:

- Computers are used almost universally for word processing, communications and financial management, but less often used for research and human resource management. While computer use to date for case management and file recording has not been extensive, there is no doubt that technological usage is the way of the future. Employers struggle to keep their hardware and software up to date and constantly need to upgrade technology skills of employees.

Employers' Human Resource Management Challenges

- Surveyed employers indicate a stable-to-growth labour market, with the largest proportion of employers expecting increases in hiring social workers and the next largest proportion expecting increases in hiring community workers. This reinforces the findings of the labour market analysis.

- Though the actual numbers of equity group members such as Aboriginal, employed by surveyed employers are congruent with their distribution in the population at large, employers are not satisfied with the numbers that they do have. Though many employers have active equity hiring policies, most expressed a need for more equity group representation and more representation from individuals whose background reflects the multi-cultural and ethnic makeup of the groups they primarily serve.

- A related issue is the difficulty in the retention of Aboriginal service providers, particularly in remote communities, due to the stresses of working in these environments, including the challenges of working in one's home community.

- Academic institutions particularly expressed difficulties in finding Aboriginal candidates who met the requirements for hiring professors, especially where the prerequisite is having a doctorate in the field.

The sector profile presented earlier is itself an important tool for understanding human resources trends, but it is not the only one. The "lived life" of those in the sector must be examined in order to understand better the nature of that work and the factors that are shaping its human resource utilization. It is people who make up the sector and it is people they serve. It is individuals and groups who make human resource decisions now and who will shape the sector in future. With an enhanced understanding of the experience of work in social services, the likelihood of stakeholders developing an effective strategy for improved human resource management can be greatly increased.

When considering the day to day work experience of those involved in service delivery, it may be useful for the reader to have at hand the description of the social work profession as provided in documentation from the Canadian Association of Social Workers. This gives a description of the work performed and the attributes and skills that are reference points for those already in the profession and for those who may be contemplating entering it. The following is drawn from a description of the profession provided on its website by Canadian Association of Social Workers.

**Social work is a profession concerned with helping and empowering individuals, families, groups and communities to resolve problems that affect their well being on an individual or collective basis. Professional social workers help people with individual**
personal issues, but they also respond to larger problems, such as those arising from poverty, unemployment, racism or other emerging social needs.

The profession of social work draws its knowledge from a wide spectrum of disciplines within the social sciences and humanities, with a perspective based on the concept of "people within their environment." Major aspects of social work knowledge include: human growth and behaviour, family dynamics, communication theory, organizational theory, theories of oppression and empowerment, social treatment interventions, social research techniques and policy analysis. The BSW is the minimum educational requirement for entry into the profession.

Social work skills include:

- direct intervention strategies with individuals, families, groups or community services;
- supervision, management and administrative skills;
- legislative and policy analysis and development;
- advocacy on behalf of individuals, families or the larger community

Social workers provide services as members of a multidisciplinary team or on a one-to-one basis with the client. The duties performed by social workers vary depending on the settings in which they work. Some of the more typical work roles and functions are as follows:

- Social workers investigate cases of family violence, child abuse and neglect and take protective action as required.
- Many school boards hire social workers to help students adjust to the school environment and to help students, parents and teachers to deal with problems such as aggressive behaviour, truancy and family problems which affect the students' performance.
- In general and psychiatric hospitals, social workers are members of the treatment team, providing a link between the team and the family as well as with community resources.

- In health and community services centers, social workers are involved in the provision of counselling to individuals or families and in providing services to seniors. Some work as community developers helping citizens to identify their needs and proposing ways of meeting these needs. Others may assist with parent-child relationships and marriage counselling.
- In the correctional field, social workers may be part of a team concerned with the social rehabilitation of young or adult offenders.
- They may work as probation officers or as parole officers.
- Social workers in private practice offer their services on a fee-for-service basis to individuals, families and organizations. Their services include counselling, psychotherapy, mediation, sex therapy, policy and program development, organizational development, employee assistance programs, and other specialties.
- Social workers may also be involved in policy analysis, policy development and others are teaching in universities and community colleges.

In turning to the primary data drawn from field work, the value of the multi-faceted methodology of the study is very evident. This is because these data allow for the description of the experience of employment in the sector. This description comes from the extensive program of in-depth individual interviews with key respondents across Canada, focus groups with a range of participant categories, and the fax-back and telephone surveys of employers. Much of the data is qualitative, some is quantitative, but all of it responds to questions about what it is like to be in the field—whether as an educator/trainer, a program funder, employer, or employee (including self-employed practitioners).

In reviewing the findings that follow, another methodological issue should be recalled. That is, though the overall numbers of respondents are not large in comparison to large-scale survey research with which the public is familiar, the fact is that for the in-depth exploration of human resources conditions and issues, the numbers are sufficiently large to imbue the findings with validity. The careful
selection of respondents for representation from key occupations or industries and from those actively involved with services for particular high need groups also leads to the aggregate findings being valid. Finally, the fact that there was near uniformity in the responses given across industries, across various areas of expertise, and across a variety of historical, cultural, and political contexts, also tends to confirm the strength of the methodology and therefore the validity of the findings.

Though commonality of experience is the predominant characteristic of the data to be reported on here, any divergences across any analytical category will, of course, be noted and discussed.

The human resources issues that are addressed from the experiential side are:

- The larger context: challenges for sector identity
- Employment conditions
- Human resource challenges
- Educational and training responses

Drawing on the perspectives of key respondents, the findings on each issue are clear.

1. The Larger Context: Challenges for Sector Identity

The social services sector, like all sectors, is dependent for its existence on whether its product—which is service—is demanded by those who can support it. For the most part, in Canada, it is the public sector that funds social services. By definition, public funds are ultimately allocated through public demand, and if that demand is not there, the support is reduced or withdrawn. Demand for social services does not come solely as a direct call for assistance from those in need. That can be one source of demand. But those in need tend not to be the ones shaping public policy, much less determining resource allocation. The allocation of public funds is ultimately decided through the political process. The direction of policies and the allocation of public resources depends on the interests, concerns and power of the public at large and of various interest groups that make up that public. Demand is thus not an absolute, it cannot be measured and responded to simply on the basis of statistics on poverty or violence or wealth or well-being. It is how these conditions are perceived, and by whom, that ultimately may turn a situation into an issue and an issue into a policy, and then into a program. The social services sector delivers those programs.

But if the value of the programs is being questioned, then the impact on resource allocation is likely to be negative. If the services are not valued, then the value of those providing them may be diminished commensurately.

It is very difficult to justify the existence of a sector or an occupation within it if it is not clear what the sector actually is and what workers really do. From a human resources viewpoint, lack of a distinct identity for a sector or occupation can have a number of impacts, many of them negative. These include:

- Recruitment can be impeded if it is not clear what the work consists of and what advantage there may be to employment in the field.
- Training is affected, because if the nature of the occupation is not clear, it is difficult to devise or adapt education or training that actually meets the needs of employees and employers—and in the case of social services, training that ultimately meets the needs of those served.
- Employment opportunities can be negatively affected by funders/employers underestimating the need for the particular skills offered by the occupation/sector or by undervaluing the training, skills, and competencies of workers in the sector.
- Retention of workers can be more difficult if their occupation is undervalued—pay levels may be less, amount of workload may be unduly high if there is a lack of qualified workers, and intangibles such as lower prestige or lack of regard from the larger community can have a decided negative impact on motivation to continue in the job, or in the sector.
- Other sectors and occupations can become direct competition for the same funding or employment source, if it is not clear that a particular sector’s workforce has distinctive skills and capacities. In turn, the workers in the competing sectors can find themselves
further blurring the boundaries of their work, in response to employer demands to do so.

- It may be more difficult for the sector and its occupants to advocate effectively for improvements in their employment status and working conditions, if it is difficult to make the case that they do have distinctive capacities that are best suited to certain niches of the labour market. (In the case of social services, it also can make it more difficult to advocate for those served, those in need of the services the sector sees itself as best providing.)

While it is not an explicit human resources issue as such, it is clear that any of these impacts on the sector and its workers can have negative impacts on their ability to meet client needs. Undervalued, overtaxed workers, or those whose jobs do not match their training and skills, are unlikely to be as effective as they might otherwise be.

The sector profile statistics have shown that indeed there is a blurring of boundaries between health and social services and within various occupations, i.e., family counsellors versus social workers. This statistical picture is reinforced by the accounts of those working in the field. The issue of clarity of professional identity was pursued in virtually all lines of evidence. For example, the telephone survey of employers, which encompassed 51 respondents, showed that slightly over half of these respondents (52.9%, or 27 of 51) felt that social work as a distinct profession would be threatened in the future. Those holding this view are fairly evenly distributed across the country and across organizational type (government, not-for-profit, private, hospital/health care). Those respondents stated that the threat to professional identity needed to be countered through a clear articulation of what social work consists. They felt that professional associations, colleges and universities should take a lead in this clarification and should make this an integral part of education and training in the field.

Additional remedies would be consistent, national accreditation of the profession, and greater promotion of public awareness of the range and value of social services provided.

In the other in-depth interviews with stakeholders across the country, those commenting on the issue of professional identity were distributed across the spectrum of respondents; that is, educators, government, employers and employees. Typical comments were:

The future of the profession is to some extent based on its own definition of itself, and making sure the public understands this. The whole idea of who we are and how we are identified is a crucial question for the profession across the country. We're not sure, and we're not good at communicating what we do. If we can't do that, we're at risk of having our role minimized and at risk of others moving into our sphere of practice. Having credibility as a profession, too, that's at the forefront of the critical issues we face.

(Association, Prairies)

There is a problem in defining in a tangible way what unique services are provided by social workers. There are more grey areas now, where other professions are moving into services similar to social work (like, doctors and nurses wanting to pick up some social work skills). The social worker's unique contribution is to look at the whole person in their environment.

(Government, Prairies)

The image of the profession is a critical issue. Here there is real difficulty at the university level in that students are coming out and not identifying themselves with the profession. They see it as a training program and they will get a job. And if the job doesn't say "social work" as a title, then they are not a social worker. We have, as a profession, to instil pride in the profession and identification with it, so they will identify with the profession and say, "I am a social worker," regardless of what they are doing. "unless we can instill that pride in our people, the pride that many other professions have, we will be in trouble."

(Association, Central)
Social workers are not held in as high regard as other professions. Our contributions are not recognized. It’s related to the public perception of our clients—the poor—because the poor are seen as being poor because they want to be. (Employer, East)

L’identité, l’image de la profession, l’ordre se cherche un mandat. On ne se reconnaît pas comme membre de l’Ordre.
translated as:
There needs to be a mandate for a shared identity and image of a professional social worker. We do not consider ourselves to be members of the “profession”. (Employee focus group, Central)

It is important for the field to solidify its standards and put an end to the infiltration into the field by those not trained in the area. This will force agencies to set aside the resources to hire properly skilled staff to do the job. The scope of practice needs to be firmed up. This will ensure that the public can request, and receive, the trained professionals that they deserve. (Association, East)

The last comment is an indicator that the ambiguity of definition of the field is not only between social services versus other sectors, such as health care, but within the social services sector. The respondent is making a distinction between “professionals” and other less (or differently) trained individuals who may be performing the same functions. The cost containment efforts of employers are clearly seen as an important factor leading to the employment of non-professionals within the social services sector. (Again, this trend is supported by the statistical data.) That there may be an undervaluing of the role of social services workers, and professionals among them, is also seen as a contributing factor to this allocation of positions.

Having articulated the problems associated with the lack of a clear identity of the sector, and particularly of the professional social work occupation within it, respondents often expressed their views on how these problems should be addressed, from an advocacy position. As did the employers surveyed by phone, most of these respondents felt it is the role of professional associations to take the lead in identity clarification and very much in communicating to governments and the larger public about the role and value of their sector. It was felt by several respondents that the educational institutions should play a major role in both identity clarification and also passing on to students the positive values associated with that identity.

2. Employment Conditions and Human Resource Management

The everyday experience of work within the social services reflects the larger human resource context—the degree of societal support, of funding, the value attributed to the sector and thus to its labour force and even of those it serves. At the same time, the experience itself shapes the human resource trends and employment conditions. Key factors that shape the everyday experience of work that are examined below are:

• Funding constraints
• Caseload trends
• Working conditions (worker well-being)
• Ameliorating the stress of workplace conditions
• Workplace benefits and services for employees
• Use of technology on the job

a. Funding Constraints: Doing More With Less

That social services as a whole have been experiencing declining funding is well documented. But what is it like to work within this increasingly constrained environment on a day to day basis? When respondents are asked to describe the challenges facing their organization, the answer is the same, no matter where and no matter who the service provider is, what services are provided, or who is being served. The primary, most insistent challenge is funding constraints, and many human resources dilemmas flow from that.

Typical expressions of the challenge of fiscal reductions are:

The challenge is to meet fiscal restraints and budget cutbacks, which affect the funding of agencies, and it may reduce service delivery. We are also dealing with anger from agencies facing these cutbacks.

(Government respondent, West/NW)
Funding is a challenge. We need to be more efficient to make ends meet and still deliver service. ...there is a higher workload for staff [because of policy changes] but no increase in funding.

(Government respondent, Central)

Financement, précarité, pas de sécurité en emploi, gens ne sont pas syndiqués. translated as:

Funding, insecurity, lack of job security, individuals who are not unionized.

(Not-for-profit agency, Central)

The challenge is that there are more and more clients, but less funding to serve them, which means less funding for social workers.

(Not-for-profit service agency, Central)

Agencies serving established immigrant or multi-cultural client groups, or new immigrants and/or refugees report the same difficulties. Representative comments include:

The challenge is sustainable funding.
The decline in government funding has necessitated increased fund-raising.

(Not-for-profit service agency, West/NW)

It’s funding—we are having to pursue private funding more to provide more services.

(Not-for-profit agency, Central)

The lack of funding results in a decrease in staffing, which results in cancellations and cuts in programming. It also means that fund-raising is taking up more staff time.

(Not-for-profit agency, Central)

Aboriginal respondents emphasized the difficulty of meeting increasing needs with limited funds.

With the increase of First Nations people moving into the city, the demand for services has increased but the supply of services has remained the same. For urban people this is devastating, because the capacity to offer programs and services is not available.

(Not-for-profit agency, Praries)

Funding cutbacks target the most vulnerable populations. Aboriginal people have historically been the most marginalized and are constantly faced with playing “catch-up” in terms of accessing, developing, and delivering social services.

(Not-for-profit agency, Central)

Respondents representing organizations serving Aboriginal communities also point out that although there is a lack of adequate funding for services, with increased control over services, more creative ways are being found to meet needs within limited budgets. For example:

First Nations services have been very creative with their transfer dollars. They are required to provide an abundance of programs with few dollars from the governments. Therefore, we look for partnerships, networking and creative program planning. For example it is cheaper to bring in one doctor than to send 20 people out of a northern community for a checkup.

(Not-for-profit agency, Praries)

b. Caseload Trends: Numbers and Needs

The changes in caseload patterns are both qualitative and quantitative. The fax-back survey of 109 employers clearly demonstrates virtual consensus on the part of respondents, and the in-depth individual interviews with employers and employees give added richness to the understanding of the impacts of these trends on those engaged in the provision of social services.

From the fax-back survey of employers, it is evident that the sheer numbers of cases have increased for the great majority of them. For example, when comparing four main occupational categories, when the 109 employers were asked about the trends in case numbers, the findings are:
<table>
<thead>
<tr>
<th>Job</th>
<th>Decreased</th>
<th>Stayed the Same</th>
<th>Increased</th>
</tr>
</thead>
<tbody>
<tr>
<td>Community worker (n=15)</td>
<td>1</td>
<td>6</td>
<td>8</td>
</tr>
<tr>
<td></td>
<td>6.7%</td>
<td>40.0%</td>
<td>53.3%</td>
</tr>
<tr>
<td>Social Service worker (n=31)</td>
<td>4</td>
<td>10</td>
<td>17</td>
</tr>
<tr>
<td></td>
<td>12.9%</td>
<td>32.3%</td>
<td>54.8%</td>
</tr>
<tr>
<td>Social Worker (n=94)</td>
<td>8</td>
<td>30</td>
<td>56</td>
</tr>
<tr>
<td></td>
<td>8.5%</td>
<td>31.9%</td>
<td>59.6%</td>
</tr>
<tr>
<td>Supervisor (n=43)</td>
<td>4</td>
<td>16</td>
<td>23</td>
</tr>
<tr>
<td></td>
<td>9.3%</td>
<td>37.2%</td>
<td>53.5%</td>
</tr>
</tbody>
</table>

(Note: the “n” is the number of employers who have this occupational category in their workplace. Numbers do not add up to 105, because employers do not necessarily have all four job positions in their organization.)

It is clear the over half of the respondents report an increase in caseloads for each occupation. Somewhat over one-third report stable numbers, and an approximate average of 10% report decreases.

Numbers are one thing, and the increases are evident, but numbers alone do not tell the whole story of the trends in the working environment of social services workers. Employers also report that the difficulty of cases, the levels of need that they see, also have increased. In fact, of 104 individuals responding to the question on level of difficulty of cases, 87.5% (91 of 104) reported an increase in difficulty and only one respondent reported a decrease.

These respondents report increased caseloads, and increased level of intensity of client need, but what are the reasons to which they attribute these increases? The following table sets out the findings on their identification of the first-ranked of the three major reasons that they give for why caseloads are different today compared with three years ago.

<table>
<thead>
<tr>
<th>Categories</th>
<th>Employers (N=92)</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>%</td>
</tr>
<tr>
<td>1. Social Conditions</td>
<td>66.3%</td>
</tr>
<tr>
<td>Increases in case volume and complexity were attributed to increases in poverty, unemployment, family violence, social dislocation, stress, substance abuse, and mental illness.</td>
<td></td>
</tr>
<tr>
<td>2. Reductions in Resources</td>
<td>36%</td>
</tr>
<tr>
<td>Budget cutbacks and reductions in resources (financial and human) compared to increases in both client demand and the number of referrals.</td>
<td></td>
</tr>
<tr>
<td>3. Changes in Medical/Hospital Policies</td>
<td>18.5%</td>
</tr>
<tr>
<td>Changes in medical/hospital policies leading to a shorter hospital stays for patients, are contributing to an increased workload for social service personnel.</td>
<td></td>
</tr>
<tr>
<td>4. Changing Identification of Needs</td>
<td>15.2%</td>
</tr>
<tr>
<td>The increasing elderly population, increased awareness of abuse issues, and improved assessment of clients.</td>
<td></td>
</tr>
<tr>
<td>5. Restructuring of Health Care Systems</td>
<td>8.7%</td>
</tr>
<tr>
<td>Financial cutbacks and the mandate for health care restructuring have removed the existing responsive structure. Situations are increasingly complex, necessitating a multi-systems resource-based approach, which is currently not available.</td>
<td></td>
</tr>
<tr>
<td>6. De-Institutionalization of Mental Health Patients</td>
<td>6.5%</td>
</tr>
<tr>
<td>Mental health clients being de-institutionalized into communities that often do not have the network of services available to address their specific social service needs.</td>
<td></td>
</tr>
</tbody>
</table>

(Note: Employers could identify more than one category and therefore, the columns do not add to 100%.)

It is obvious that even though it is possible to differentiate various factors contributing to more difficult case loads, these factors are very closely related. In fact, most will tend to interact with and influence the other. The largest single reason to which the 92 responding employers attribute the increasing difficulty of cases seen today is the negative impact of deteriorating social conditions. It is more difficult for more people to cope with daily life.

A primary element of these conditions is poverty. Poverty is widely seen as one of the most basic components of needs for support and social services. It often creates or exacerbates family violence, social dislocation, stress, the turn to
substance abuse, etc. At the same time, in a society where government sees itself as financially constrained, the resources to combat poverty and to support services to those most in need are themselves cut and cut again.

Though the employers did not speak in terms of changes in societal values that once supported such programming to a greater degree, changing values are in themselves a change in social conditions that contribute to an unwillingness of governments to allocate what may be scarce funds to what they deem to be less important areas—like social supports. This value change is well documented in the literature on social welfare policies and programs.

The second-ranked reason given for changes in the difficulty of caseloads is the impact of the reduction in funding on the availability of preventive and remedial services, at early stages of the problem development. This leaves social services facing clients who are suffering from the cumulative effects of poverty, family violence, mental illness and poor health. People are worse off when they come to services than they used to be, and they are provided with even less than used to be available. The added strains on service deliverers are manifold.

The other factors affecting caseloads are also indicative of the interwoven, interactive nature of the fraying social fabric. Health care restructuring is a factor in at least three of the categories of response, if the de-institutionalization of the mentally ill is included. The common thread in all is a decrease in hospital/institutional care and increased expectation that the “community” will be able to provide a seamless transition to services and eventual increased well-being. However, employers point out in these interviews and in many others conducted for the sector study that these community-based services have not materialized in anything like the scope and depth that would be called for. Which brings the contributing factors full circle—to too much to do and too little with which to do it.

The in-depth individual interviews with employers and employees dramatize the quantitative findings from the fax-back and telephone surveys. Problems with lack of funding reflect the larger environment, in terms both of nation-wide fiscal restraint and a generally weak economy, and in relation to societal devaluing of those most vulnerable and those who provide services to them.

Employers in the in-depth interviews and focus groups reflect the same concerns about being able neither to keep up with direct service needs nor to do preventative work. As the sector study’s employee focus groups on multicultural issues from multi-cultural agencies:

More than half of the agencies surveyed stated that there was an increasing demand for their services because of increased numbers of newcomers, newcomers’ difficulties in obtaining employment, government policy changes [resulting in] funding cuts, or complex needs of clients such as traumatized refugees. Another challenge faced by employers was that newcomers and visible minorities tend to be under-served groups in terms of social service. [They sometimes find that for groups who have] been under-served for many years that there were some second and even third generation conflicts that had never been resolved.

The research findings showed that:

Employee burnout is the primary workplace challenge. The employers were very concerned with staff burnout and blamed heavy workloads on funding restraints and changes, and on increased client demand and numbers of clients.

In the background document on the human resources profile of Aboriginal social services

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* In using the term “services for” an individual or group, it must be recognized that this language does not take into account the larger mission of social work, which is to facilitate the move to greater self-determination on the part of those who are in need. This is expressed in the 1997 RUFUTS report on education in the social services, where it is stated, “Donc qu’il est essentiel de travailler avec plutôt que pour les personnes,” as quoted with original emphasis in Cadre de référence de la pratique du travail social au CLSC Côte-des-Neiges, October, 1999; p. 12 in that document.
prepared for this study, the interaction of social conditions and caseloads were set out as:

The greatest challenges faced at work include stress and burnout, huge caseloads, the risk of vicarious trauma...Caseloads are unrealistic...not enough time in the day to get everything done...caseloads are huge due to large catchment areas and fewer resources than in the past...FAS and FAE [are linked to] increased demand for support services, particularly for adults.

In the Canada-wide research there are frequent affirmations of this situation. A multi-service family-serving agency in the West reported the link between deteriorating social conditions, lack of support for social services, and the impact on their service delivery:

There is an increasing gap between the rich and the very poor. As an agency, we are going back to dealing with issues of clothing people, feeding people, housing people and ensuring people are safe before they can engage. The loss of universal programs in Canada has made an incredible difference to us. We see more and more people in our agency that are people who would have been seen in statutory agencies several years ago. And we are seeing an increasing number of dual diagnosis clients, the homeless, and especially youth who are homeless.

(Multi-service agency, West.)

The impacts of funding cuts mixed with the changes in the structure of institution/hospital based care, including the rapid discharge from hospital, are reflected in the comments of an employer in community-based mental health services:

Funding is a challenge. Government is shifting from an institutional focus to a community care approach, but has not contributed funding to community programs. There is a discontinuity of service. A person can be discharged from a hospital, but there is no community system in place to provide basic services, like shelter. Many clients don’t have life skills, they can’t cook, etc. They are in the hands of social workers in hospitals. The challenge will be providing service to these clients as the system changes and ensuring that these clients don’t fall through the cracks.

(Mental health agency, Central)

The Estates General, a background document on Quebec social services demonstrates these same caseload trends—in difficulties and numbers. As the report notes:

Client bases are now more informed about their rights and more demanding in terms of service. Workers must adapt to new client bases...and furthermore, cultural diversity has created the need for adjustments and adaptation. Violent behaviour, situations involving severe poverty and marginalization are becoming run-of-the-mill...[community social and health service centers] are frequented more and more by new client bases with serious, persistent psychiatric problems in the wake of de-institutionalization and hospital closures, and by clients who are unwilling and unmotivated....Heavy caseloads are sent to the community sector, which is not equipped to handle everything.

Caseload increase obviously is not a simple matter. There is a downward spiral of declining resources and of structural changes in delivery systems that can increase the vulnerability of the physically and mentally unwell. There is also a continuous circle of increased need, difficulty of meeting those needs, and further intensification of needs—to be met with fewer resources than before. The impacts on the work environment in the social services are reported by all to be negative.

c. Working Conditions: On the Job in Social Services

The impacts on workers of insufficient budgets, increased caseload numbers and exacerbated intensity of client and community need, all conspire to make the well-being of workers a matter of concern for employers and workers themselves. As one employer in the East put it, “worker wellness is critical to providing a safe and humane service to clients.” “Burnout” is not simply a buzzword in social services; it is a fully legitimated term describing what is seen as virtually an inevitable
condition of work. It is not a matter of "if" it will happen, but "when" (and for how long). In a focus group with employees in a public sector community service a long list of challenges faced in the course of work included:

Il y a beaucoup de burn-out. On est toujours en train de s'ajuster, on veut être disponible. Il y a des changements perpétuels. Et puis avec les gens à la retraite; on s’est privé de ressources. On a aucun appui.

translated as:

Burn out is common. We are constantly trying to be flexible in an effort to make ourselves available. Things are always changing. In addition, due to the number of people retiring, we are running out of resources. We have no support.

(Employee focus group, Central)

Employment in the north or in more distant rural areas can present special challenges to the psychosocial and physical well being of workers. This is often commented upon by those working with Aboriginal communities, because Canada's demographic patterns are such that Aboriginal peoples have historically occupied a major proportion of northern and rural areas. However, whether serving largely Aboriginal populations or not, "Northern" should be understood to include not only Yukon or Nunavut/Northwest Territories, but also northern areas of virtually all provinces—from British Columbia to Newfoundland and Labrador. Typical of comments by northern employers are the following:

The isolation is hard for a person who is not experienced, and it’s hard to understand what it is like not to have support professionally—no doctor, maybe no nurse, no police. So the social worker becomes the catchall. They may have gone into the community to do child protection, but soon are called on for everything, yet there is no collegial support for them. It's hard to convey this to potential employees.

(West/NW)

The pressure of the job is very difficult. There are pressures from the community. The staff are often from the community and the community is often very critical of the job they are doing. For example, the child they are apprehending could be the child of a friend or neighbour they have grown up with—it is very emotionally stressful to do the right thing.

(Employee West/NW)

Other focus group responses to questions about issues employees face in their daily work include:

In a community agency, people have to do a little bit of everything. It can be hard to change gears after preparing a challenging report or proposal and be calm for a client....The intake worker in particular does not know what to expect each day....The caseload at this agency is quite heavy, which can add to the stress level of employees. All of the workers see that there are more needs than help available.

And:

Contract employment also has added stress to the lives of many workers. It is personally difficult and it is also challenging to do social work, especially counselling, if you’re not sure that you’ll be staying in the job. It's because of uncertainties about funding or funding that's just project-based.

(Employee focus group, Central)

Hostility of clients and risks to personal safety of workers appears to be an increasing issue, as exemplified in an employee focus group. For example, the very image of social work and social services can affect the approach of clients to the workers. As respondents in a focus group said,

One of the big and new problems is that clients are resistant at first contact because of bad PR, which didn’t use to be the case so much before. That's gone, they approach us from the beginning with an aggressive, abusive attitude from the start and we are getting a lot less progress than we would have...Or it might have come earlier...They have a pre-conceived notion that we are there to take their kids...I've been threatened.
with weapons in the home and this is a problem...Clients are being pushed to such a level of extreme frustration that we will see more of that.

And:
I feel pretty disappointed, in my view when I think of how little we are able to do for the [First Nations] children we are supposed to protect. Looking back over 25 years, I've had to accept so much failure, and it weighs on me. I wish I had a different perspective.

(Employee focus group, Prairies)

Changes in the human resources management, where there are greater demands for accountability, or the justification and rationalization of work also have stressful effects on workers. For example, another focus group described the following stressors:

The work [here] is outcome based, and finding tools to measure outcomes is difficult when you are working with people, especially those who are very vulnerable.
It becomes stressful to have to justify our work to our administration.
And:
Clients don't bring as much stress as the organization does. The administration wants to define our jobs. They now even want measurable social work.

(Employee focus group, Central)

Another group's comments on the impact on their work and their own sense of well-being of the trend toward outcomes measurement include:

Government is into productivity and outcome regarding money, rewards, etc.
...and you start questioning the clients you serve, if you don't get good outcomes, like if they are low functioning or have certain mental health problems, and can't be helped.
...the outcome is a bigger thing, they're just using it as a measure of work, not looking at the broader issues...you end up working to the measure and it may not be very accurate and not a true indicator of effectiveness.
...Every agency is feeling dumped on, and if you are burnt out and can't accomplish what you want, you get angry.

From the health care industry, comes a similar comment:

Social workers always thought they would be essential...We didn't look at outcomes and measures, which we now need to do to prove the importance of what we do.

(Focus group, East)

Restructuring of the workplace is also a very large factor in increasing anxiety and stress in the workplace, for many of the workers interviewed. This goes with the trend to contracting out of services and of increased use of contract or term positions. There are many ramifications of this for workers. These range from the increased pressure to "prove" their value in a rather limited time and with unclear criteria for that valuation, to significant changes in reporting structures and a generalized sense of loss—of support and collegiality. Typical comments include:

As a contract worker, I have two years to produce statistics that prove my "value."

(Employee focus group, Central)

For me, the biggest difference is we went into a program management model. We used to have a social work director. We no longer have a social work department. We are part of other programs, and this is a big adjustment. I have a sense of loss.
We were part of a good group. And now I report to a nurse, not a social worker. She is a good boss, but I can't consult with her, I have to go to peers, but that's peer supervision [not "clinical" supervision].

And:

It's the same for me. [government] went through major restructuring recently and community and family services have been amalgamated with Parks, into what's now community services. So the social services side lost a lot of positions. I report to someone in recreation now. I have my peers but they are spread all over the city, so I have to make an extra effort and my current supervisor doesn't understand what I do. I'll be trying to make a point about what we do, what needs to be done, to justify it.

I spend much more time with [supervisor] doing this. For them it is black and white—do a recreation activity or not. But for me the job is animating the community.

(Focus group, Prairies)

Whether or not the reporting structure arises out of re-structuring or is a part of a longer-standing arrangement, there are additional elements of "drift" of occupational boundaries that several focus group respondents commented on. This drift relates to many other circumstances, such as the lack of clarification of roles, staffing cuts, and increased demand for justifying the social services function.

Several respondents described this phenomenon as they see it taking place in the health care system.

Comments included:

Part of our problem is that there are no hard tasks that we can describe, and our managers are [in health care] and not social workers, so they don't understand very well what we do.

And:

We don't have enough workers so we can't do as good a job as we want to in the area where we have expertise. For example, we often spend time making travel arrangements for a child who has to go to another city, and this should be done by a social services worker, and we can't spend time with our clients... So the psychologist does the crisis intervention and the social worker makes the travel arrangements.

And:

We are fighting for the right to stay as an essential services on an interdisciplinary team, so very often we do whatever we have to do to remain essential to the process, even if it means not using our skills properly.

(Focus group, East)

Another respondent who was not in health care but whose position provided an excellent overview of employment trends in their province said:

Specifically in health care here, the hospitals are becoming part of regional health authorities, and often there is no longer a social work department in the hospital. There is a team on certain wards which may contain a social worker, like in geriatrics, but there is a strong concern that social work is being eroded in health care settings. For example, there is a feeling that nursing, which is a much larger profession, is stepping into traditional social work areas—crisis intervention, grief therapy, etc., and potentially pushing social work out of the picture. In the new structure with social work not having a department, it is now an "allied profession," along with physiotherapy and occupational therapy—so it's not standing on its own as equivalent to nursing.

(Interview, Prairies)

For private practitioners, the stressors in the workplace are similar in many ways to those described by those working in organizational settings. There is too much work to be done, with too little time to do it. Also, shrinking government budgets for social services have the effect of reducing the amount of work contracted to these workers as private practitioners. There is thus a fair amount of uncertainty for them in terms of building and maintaining a robust client base. It is not that the need isn't there, but the capacity to pay can be in doubt.
A related problem that some live with is that government health care plans generally do not include coverage for social worker services for individuals, and this limits the numbers private practitioners can serve and the types of needs they can respond to. Finally, there is increased competition among private practitioners arising from more individuals moving into this field. They come from two sources, recent MSW degree holders (and post-graduates in other fields, such as the various counselling streams—education, family and marriage programs, etc.) and those who have been laid off from government or agency jobs or are taking early retirement from these organizations. One respondent pointed out that the combination of cutbacks in staffing for contracted services and the increase in private practitioners means that there are long waiting lists for publicly funded services and an under-supply of clients for services provided by the private sector.

All of these factors carry their own stress, but in the course of their day to day work private practitioners report also that they find it difficult to develop and maintain collegial networks. They do indeed know many colleagues, but for the most part they are physically separated from them, working out of home or office with one or two other practitioners. Private practitioners also often hold evening groups, conduct weekend workshops, or otherwise have very irregular and time-consuming schedules. All of this can result in a relatively isolated working environment, which can leave them lacking in support they would like to have—professionally and interpersonally. This situation appears to be less intense for private practitioners in larger communities than in smaller ones.

d. Ameliorating the Stress of Workplace Conditions

Employees have a variety of ways of trying to counter or reduce the stressors of their work. Many of these strategies are individualized, or rely on informal group supports, rather than programs or services offered by employers. However there are formal supports provided by many employers and these will be reviewed shortly.

Beginning with the individual social service workers themselves, in focus groups employees described several personal strategies for dealing with the challenges of doing more for less, with more complex and high-demand caseloads. From one of the employee focus groups some several typical comments on this issue:

I need to find creative ways to take care of myself, and to make sure the needs of my employer don’t undermine the lives of my clients or co-workers. Difficult clients are not the problem, difficult ministries are. And:

I have learned to be selfish. I have gone part-time so I can devote time to outside interests and not get so swallowed up by work. I’m doing this instead of going into a supervisory position and making it worse...I also have an emotional detachment. Nothing about people surprises me any more. Some kids affect me, and that’s tough.

And:

I try to stay calm. I keep things in perspective and separate employer expectations from my own. I have learned to develop healthy boundaries between myself and my clients.... I try to stay positive. I believe in the good of people because I have to. I also believe in myself and the capacity to do this job.

(Employee focus group, West/NW)

As a supervisor, I can tell when I need more client contact. It’s unhealthy to deal only with what others tell me is going on. So I need more time to meet clients, but can’t do it as much as I should, because of the administrative burden. But there comes a hardness unless I keep in touch with clients. And:

Yes, it’s very important; a worker will come into my office and cry, and feel bad about crying. But I say, “you must feel in this job. We all need to feel the pain.”

(Focus group, Prairies)

Private practitioners report that they counter stresses through means such as sharing their feelings with partners, who seem often to be in related work; communicating with colleagues whenever possible; and varying their workday so that they were not only having client contact on a continuous basis. They may teach, conduct or attend workshops, do research or other professional enrichment activities.
One practitioner described a combination of most of these strategies:

Il faut mettre des limites, on est obligé de limiter son engagement; d’apprendre à vivre avec ses problèmes. On parle beaucoup avec d’autres; on échange sur les clients suicidaires. On se prend des grosses assurances. Ça prend une bonne collaboration avec son mari et ses enfants.

(Individual interview, Central)

translated as:
We must set limits. We must limit our involvement and learn to live with our problems. We frequently confer with others. We exchange ideas concerning suicidal clients. We gain a great deal of confidence from consulting one another. The cooperation of one’s husband and children is essential.

Though individuals have developed a number of ways to take a positive approach to the stressors in their working lives, the 41 employers surveyed in the in-depth interviews described many means of addressing these problems. Approximately one-quarter of them said that they have a mentoring and/or peer support program, though it may be quite informal. They often reported regular staff de-briefing sessions to help share the strains of work and to provide support to each other. A few employers offered workshops and seminars on dealing with stress. A very few provided financial assistance for counselling sessions for employees.

e. Workplace Benefits and Services for Employees

The employee benefits provided for employees have important human resource management implications for at least two reasons. One is the link to employee well being, in terms of the supports that are available to them. These supports can range from services to deal with stress or problems dealing with family, work, or individual personal difficulties, such as substance abuse. Employee Assistance Programs are the standard way for an employer to provide this kind of support for employees. Fiscal benefits such as pension plans to which the employer contributes, or dental or supplementary health care coverage plans can be of great importance to employee peace of mind. Extended coverage for paid vacations, extended paternity or maternity leave, paid educational leave or paid overtime for all staff or non-management staff all contribute to a positive working environment.

At the same time, the type and extent of benefit coverage may vary according to the category of employer or the occupational category. For example, direct government employees tend to be unionized and to have considerable breadth and depth of benefits. On the other hand, smaller employers, or those in the not-for-profit or private sector, tend to have a narrower band of benefits. With the trends in social services away from direct government employment, it would be well to follow the trends in benefit provision to make the appropriate responses in terms of human resource policy development and implementation.

The follow-up telephone survey of 51 employers explored the benefits that these organizations provide. Data on the twelve most common types of benefits were elicited, both for employers overall and according to how these benefits were distributed - by occupation and by employer type (provincial or municipal employer, not-for-profit, private/not-for-profit, and hospital).

The following table shows the aggregate figures on the provision of the twelve kinds of benefit offered by the 51 employers surveyed.

<table>
<thead>
<tr>
<th>Benefits</th>
<th>Count</th>
</tr>
</thead>
<tbody>
<tr>
<td>Health Plan</td>
<td>44</td>
</tr>
<tr>
<td>Dental Plan</td>
<td>42</td>
</tr>
<tr>
<td>Pension Plan</td>
<td>42</td>
</tr>
<tr>
<td>Group Insurance</td>
<td>42</td>
</tr>
<tr>
<td>Paid Vacation (beyond mandatory 2 weeks)</td>
<td>40</td>
</tr>
<tr>
<td>Paid Overtime (all staff)</td>
<td>33</td>
</tr>
<tr>
<td>Employee Assistance Programs (EAP)</td>
<td>31</td>
</tr>
<tr>
<td>Maternity Leave</td>
<td>29</td>
</tr>
<tr>
<td>Extended Maternity Leave (beyond EI benefits)</td>
<td>29</td>
</tr>
<tr>
<td>Paid Educational Leave</td>
<td>17</td>
</tr>
<tr>
<td>Paid Overtime (non-management)</td>
<td>14</td>
</tr>
<tr>
<td>Day Care Services</td>
<td>4</td>
</tr>
</tbody>
</table>

Table 38: Proportion of Employers Providing Various Benefits (N=51)
Obviously the most widely offered benefit is a health plan. Dental, pension, and group insurance plans follow closely behind, with paid vacations also being offered by over three-quarters of responding employers. Paid overtime for all staff, Employee Assistance Plans, and extended parental leaves are supported by over half of the employers.

The low rate of paid educational leave is worth noting, in a field that is under considerable pressure for its members to be further educated and increasingly certified. Relatively few employers report providing paid overtime only to non-management, with the other side of this being the nearly two-thirds who provide it for all staff.

In a field that is female-dominated, the lack of day care services is noticeable, but on the other hand the actual provision of these services, as in on-site day care, is quite rare across Canada. Unfortunately, there is not data on whether employers supported child care in other ways, such as flex-time, child care subsidies, referral services for child care, etc.

When the same data were analyzed across the five service types (government, etc.), there was a tendency for the government and hospital employers to have a wider range of benefits for their employees, though the difference was not great.

Employers were also asked how the various benefit plans were distributed across four of the main social services occupational categories—social worker, social service worker, manager, and supervisor—and “other.” The latter included one or two each of what the employers designated as: case support worker, addiction counsellor, multicultural worker, community social services representative, or counsellor. The findings by occupation are:

<table>
<thead>
<tr>
<th>Benefits</th>
<th>Social Worker (n=48)</th>
<th>Social Service (n=34)</th>
<th>Manager (n=35)</th>
<th>Supervisor (n=35)</th>
<th>Other (n=8)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Health Plan</td>
<td>43 89.6%</td>
<td>24 88.5%</td>
<td>32 94.1%</td>
<td>34 97.1%</td>
<td>6 75%</td>
</tr>
<tr>
<td>Dental Plan</td>
<td>41 85.4%</td>
<td>23 85.2%</td>
<td>29 85.3%</td>
<td>32 91.4%</td>
<td>5 62.5%</td>
</tr>
<tr>
<td>Pension Plan</td>
<td>41 85.4%</td>
<td>24 88.5%</td>
<td>30 88.2%</td>
<td>34 91.4%</td>
<td>5 62.5%</td>
</tr>
<tr>
<td>Group Insurance</td>
<td>41 85.4%</td>
<td>25 92.5%</td>
<td>28 82.4%</td>
<td>33 94.3%</td>
<td>6 75%</td>
</tr>
<tr>
<td>Paid vacation (beyond mandatory 2 weeks)</td>
<td>39 81.3%</td>
<td>24 88.9%</td>
<td>30 88.2%</td>
<td>34 97.1%</td>
<td>5 75%</td>
</tr>
<tr>
<td>Paid overtime (all SW staff)</td>
<td>33 68.8%</td>
<td>20 74.1%</td>
<td>12 35.3%</td>
<td>21 80%</td>
<td>5 62.5%</td>
</tr>
<tr>
<td>Employment Assistance Programs (EAP)</td>
<td>31 64.6%</td>
<td>18 66.7%</td>
<td>22 64.7%</td>
<td>26 74.3%</td>
<td>4 50%</td>
</tr>
<tr>
<td>Maternity leave</td>
<td>28 58.3%</td>
<td>16 59.3%</td>
<td>19 55.9%</td>
<td>26 74.3%</td>
<td>5 62.5%</td>
</tr>
<tr>
<td>Extended maternity leave (beyond EI benefits)</td>
<td>28 58.3%</td>
<td>18 66.7%</td>
<td>22 64.7%</td>
<td>27 77.1%</td>
<td>4 50%</td>
</tr>
<tr>
<td>Paid educational leave</td>
<td>16 33.3%</td>
<td>10 57%</td>
<td>11 32.4%</td>
<td>15 42.9%</td>
<td>3 37.5%</td>
</tr>
<tr>
<td>Paid overtime (non-management staff)</td>
<td>5 10.4%</td>
<td>3 11.1%</td>
<td>10 23.4%</td>
<td>4 11.4%</td>
<td>1 12.5%</td>
</tr>
<tr>
<td>Day care services</td>
<td>4 8.3%</td>
<td>0 0%</td>
<td>1 8.6%</td>
<td>3 12.5%</td>
<td>1 12.5%</td>
</tr>
</tbody>
</table>
It is clear that for the most part there is little difference in the availability of the various benefit regimes across the five occupations. The only slight variation is a very modest increase in the proportion of employers providing benefits to managers or supervisors. This is not true across all benefit types (see group insurance), but there is a tendency for some three to five percent more employers to offer a given benefit to these two positions.

When the distribution of benefits across employer types was reviewed, the one occupation “social worker” was reviewed in particular. The findings are that in the private-for-profit sector and the not-for-profit sector, the benefits were relatively less frequently available for social workers than in the governmental and hospital sectors.

The picture of benefits for the social services sector, judging from this relatively small, but diverse, group of employers is one with a relatively broad benefit package for employers and employees as a whole. However, where there are fewer benefits, these employers tend to be found in the private and not-for-profit employer groups.

When it is to be considered that there is clear evidence from the labour market analysis and the many interviews conducted for the occupational study that social services are being increasingly devoted to these very not-for-profit and private sector service providers, then their more modest benefit picture calls for a closer look in the course of sector human resources planning.

f. Use of Technology On The Job

The literature in the field and the Phase 1 research interviews indicate that use of technology in social services is seen as one of the important factors affecting the workplace and the scope and quality of service. The 109 employers responding to the fax-back survey were asked whether they use computer technology in the workplace. The 41 employers participating in the in-depth individual interviews also were asked about the use of this technology in their organizations.

Of the 109 employers, 105 reported at least some use of computer technology. The results of the fax-back survey show the following:

<table>
<thead>
<tr>
<th>Use of computer technology</th>
<th># of employers</th>
<th>% of employers</th>
</tr>
</thead>
<tbody>
<tr>
<td>Word processing</td>
<td>103</td>
<td>98.1%</td>
</tr>
<tr>
<td>Financial management</td>
<td>80</td>
<td>76.2%</td>
</tr>
<tr>
<td>Communication</td>
<td>79</td>
<td>75.2%</td>
</tr>
<tr>
<td>Research, literature reviews, etc.</td>
<td>58</td>
<td>56.2%</td>
</tr>
<tr>
<td>Human resources management</td>
<td>50</td>
<td>47.6%</td>
</tr>
<tr>
<td>Case management</td>
<td>47</td>
<td>44.8%</td>
</tr>
<tr>
<td>Case analysis</td>
<td>26</td>
<td>24.6%</td>
</tr>
<tr>
<td>Learning, education</td>
<td>25</td>
<td>23.8%</td>
</tr>
<tr>
<td>Other included: data management (7); statistical requirements (2); scheduling; service delivery management; information management; network with partner agencies; Internet access; service authorization</td>
<td>14</td>
<td>13.3%</td>
</tr>
</tbody>
</table>

[Note: employers could list more than one use.]

While it might be expected that there would be nearly universal use of computers for word processing, and substantial use for communications or quantitative data manipulation, as in the case of financial management, it can be seen that there is a rather rapid fall-off when it comes to professional issues such as research, human resource management, and case management. Also the day to day work of scheduling of clients or staff, networking, Internet access for staff, are dependent on computer use to any appreciable degree.

Further analysis was done on the use of computers in the various types of worksites. Because of the diversity of the size and service delivery across the 105 organizations, the findings can be dealt with on only the most general level. However, it appears that federal and provincial government social service employers, and hospitals use computers most and for a wider variety of reasons. For instance, provincial employers are most likely to report use for case management, communications, and human resource management. Hospitals are quite similar in this pattern of usage. Next in line are the not-for-profit agencies. But their usage still tends to be about 20% less on most categories (i.e., communication, research, human resource management, case management).
The in-depth interviews with employers reveal more shadings of the exact usage of computers and other electronic technologies on the job. In general, the respondents report that their use of electronic technology is a constantly changing reality. They often are struggling to keep up with technology, to be able to replace outmoded computers or software, to purchase equipment and software that will meet the constantly increasing demand for efficiencies that are expected from computerization. They also often report that getting training in any new equipment or software is problematic. Funding restraints constrain them, and there is also a lack of time for training even if it were to be available. The sense is of one of organizations just barely hanging on to the edge of computer currency, but somehow managing to do so.

Many of the employers use other forms of electronic technology in their work. Voice mail, cell phones, e-mail, faxes and laptop computers are the most commonly mentioned. In the case of cell phones this often reflects the nature of the work, in that child protection workers are often in the field and require this equipment both for efficiency and personal security. (It was mentioned, however, that in more remote regions, cell phones could be unreliable and landlines are often disrupted, thereby limited the dependability and access of electronic communication.)

The area where respondents reported relatively little use of computerized technology was in case management and file recording. This is, of course, reliant at least in part on the kinds of software that may be available, and the development of user-friendly case management and tracking systems is notoriously difficult. However, this is the direction in which the workplace is going, and respondents are fully aware of this.

Whatever the variation in the use of electronic technology, its presence is ubiquitous and as will be shown shortly, employers report that they look for basic computer skills in new hires and that that current staff must come up to speed on the use of this workplace tool.

g. Human Resource Management Challenges and Responses: Hiring and Retention

In terms of sheer employment rates, it has been shown in the labour force statistics that social services as a field is fairly robust. There are internal shifts in the labour force distribution that are disquieting for those in the sector, it is true. Increasing numbers and intensity of caseloads, having to do more with less, increased use of contracts, uncertainty of longer-range job security due to budget cuts and organizational restructuring, potential loss of traditional responsibilities and of employment as occupational drift increases—all of these are worrisome undercurrents in what appears on the surface to be a relatively advantaged sector, from a sheer employment rate standpoint.

However, the experiential accounts of selected aspects of day to day work in the social services sector help illuminate the undercurrents of unease and uncertainty that permeate the profession. Given these undercurrents, which are nonetheless well recognized and well articulated across the sector, what are the responses of employers and employees, and students to the challenges of recruiting and retaining workers?

i. Coming and going: patterns of employment reported in the employer survey

The sector human resources profile showed a very low overall unemployment rate for the social services, but the fax-back survey of 109 employers and the in-depth interviews and focus groups with employers across Canada allow for a more intensive look at hiring and retention as experienced directly "on the ground." First, was there much movement out of employment for the 109 employers? There were 75 employers who reported that staff had left during the previous year (1998). When asked the most important reason for the individual leaving the organization, the two most frequently given responses were the employee moving from the community (29.3% of employers responding) and the person making a career change (20% of employers responding). Over four employers (5.3%) gave no other response. Four said that the employees left because of the transfer of a spouse. Another four said the departure was due to the individual's incapability of meeting job requirements.