SOCIAL WORK REINVESTMENT

Position Statement
NASW, Iowa Chapter, believes that social workers play a central role in the delivery of services necessary for the support and well-being of individuals, children, and families in Iowa. NASW affirms the use of public resources to support the recruitment and retention of a professionally educated, highly skilled, diverse, and well paid workforce.

Discussion

• Workforce issues
Social workers play a key role in the delivery of mental health services in Iowa, yet they are part of an aging workforce. A report by the Iowa Department of Public Health (Kelly, 2006) notes that a significant number of experienced mental health practitioners will reach retirement age in the next ten years, leaving the state at risk of being unable to meet the demand for mental health services. The report notes “those professions servicing the mental health needs of Iowans exhibited the highest combined percentage of licensees age 55 and older” (p.2). As of January 10, 2013, about half of independently licensed social workers are age 55 or older, and approximately 37% of bachelors-level social workers are age 55 or older (Iowa Department of Public Health, 2013). The shortage of mental health professionals is evident already in certain rural areas, notably the northeast quadrant and the southern two tiers of counties.

As the state’s population ages, there is a growing need for skilled geriatric social workers to address the specialized needs of Iowa’s seniors, especially in rural areas. Currently, about 15% of the population is age 65 and older; by 2030, census data projects that 22.4%, nearly 1 in 4 Iowans, will be 65 or over (Iowa Data Center, 2012b). Among this group, 32% experience at least one form of sensory, physical, mental or care-related impairment. The National Resource Center for Rural Elderly (2006) reports that rural areas typically have a greater proportion of elderly residents, and such persons are more likely to be poorer and less healthy. Also, older citizens in rural areas tend to have limited access to housing and medical treatment compared to their urban counterparts (Rural Assistance Center, n.d.). Additionally, a national study conducted on behalf of the National Association of Social Workers (NASW) (Whitaker, Weismiller & Clark, 2006) reported a number of workforce issues related to providing service in rural areas – high caseloads, low salaries, difficulty filling staff vacancies and the tendency for agencies to hire non-social workers who lack professional training to fill social work positions. As a rural state with a disproportionately large number of older residents and relatively few professionally trained geriatric social workers, Iowa faces many of these service challenges.

Iowa’s population is becoming more diverse. While 93% of the population is white (U.S. Census Bureau, 2010), the number of nonwhites living in Iowa has increased in the past decade and is projected to grow in the years ahead. Census estimates project that by 2040, Latinos will represent 12.7% of the population, and African Americans will make up 5% (Iowa Data Center, 2012a & 2012c). Key counties in the state -- Buena Vista, Marshall, Muscatine, Louisa, Black Hawk, Polk, Johnson, Linn and Scott -- are home to sizeable Latino, African American, and Asian American communities. Correspondingly, more languages besides English are commonly spoken in Iowa, including Spanish, Vietnamese, Chinese, Laotian, Korean and several African dialects (Iowa Data Center, 2005b). By contrast, only 3% of social work licensees are nonwhite (Kelly, 2006), and overall, relatively few are bilingual. In this changing context, the profession needs social workers who reflect the demographic and linguistic diversity of the population they serve and who are knowledgeable and skillful in delivering culturally appropriate services.

• Cost of higher education
Higher education costs have increased substantially in the past two decades, while the availability of financial assistance has decreased. Between 2005 and 2010, undergraduate tuition at Iowa’s four-year public
universities rose by 18.5%, from $5,602 to $6,636 (Washington Higher Education Coordinating Board, March 2010, p. 16). The cost translates into a sizeable increase in the ‘family share’ of higher education operating revenues. Between 1999-2008, Iowa’s ‘family share’ of revenues rose from 23% to 33%, while the national average rose by only 5% (Measuring Up, 2008, p. 4).

Not only are the costs increasing for families, students are placing themselves in sizeable debt to earn their degrees. According to the Project on Student Debt (2012), Iowa ranks sixth in the nation with the average debt among four-year college graduates being over $28,000, and fourth in the proportion of students (72%) who graduate with loan debt (p. 5). In 2009 survey of over 600 Iowa social workers, the average debt load carried by social work students (bachelor, master and doctoral) was $28,093 (Saunders, Marchik, Reedy & Jackson, 2009).

In past years, financial assistance, particularly scholarships and grants, was readily available; today it is far more limited. Additional funding for higher education has decreased with state spending. The State only spends 33 cents of every dollar in Pell Grant aid, down from 40 cents in 1993 (Measuring Up, 2008, p.3). Students fund education from a mix of family assistance, personal savings, employment income, and sizeable education loans taken against future earnings. And where human service agencies once offered tuition assistance, textbook reimbursements, and/or practicum stipends, today almost no agency assistance is available. For some, these costs have made higher education unreachable.

A loan repayment program could facilitate social work education and training. Currently, there are federal loan repayment programs that include social workers. Unfortunately, these programs are limited to the mental health arena and social workers must compete with other professions for available funds. The State supports higher education with loan repayment programs in fields such as barbering and cosmetology, but no such program for social work exists.

- **Comparable pay issues**

Social work incomes fall at the lower end of the pay scale when compared to other bachelor- and master-related professions. According to a survey of Iowa social workers conducted on behalf of the NASW – Iowa Chapter (Abendroth, 2005), the mean salary for a bachelor’s-level social worker with less than 4 years of experience was $22,828. By comparison, in 2005 the average salary for elementary and secondary school teachers with bachelor’s degrees was above $35,000 (Iowa Workforce Development, n.d.). For registered nurses having post-secondary education but less than a bachelor’s degree, the average hourly wage in 2005 was $21.42, equivalent to an annual salary of $42,840 (Iowa Workforce Development, n.d.). Data from the NASW survey revealed that the mean salary for master’s-level social workers with less than 4 years of experience was $30,381 (Abendroth, 2005). By contrast, in 2004, the average base salary for master’s-level nurses was $49,700 (Allied Physicians, n.d.). Frustrated with the pay scale, some entry-level social workers have moved to other types of work, including pumping gas. Given the cost of living, the frequent need to repay educational loans, the long work hours, the high caseloads and job stress, a low salary serves as a significant disincentive to many who may wish to enter or remain in the social work profession.

The low pay is related to another troubling dynamic. In recent decade, the state has moved to privatize human services as a cost-saving strategy. Rather than funding relatively well-paying state level social work positions to deliver services, those services are contractually delivered by private agencies where salaries are markedly lower, often by as much as a third. The burden of the state’s cost saving falls directly on the individual worker who performs the same work far less income, and on the clients who are faced with fewer services. Consequently, many young undergraduate professionals are prompted either to leave the profession entirely or to bypass traditional social service work and pursue graduate studies, with the goal of eventually entering private practice and thereby securing a reasonable income. The built-in economic incentives both devalue traditional social work practice, and drive competent professionals into other practice arenas.
• **Title Protection**

Many human services workers refer to themselves as “social workers”, but their professional education and training may vary greatly. Some who call themselves social workers indeed have received a baccalaureate or master degree in social work from a college or university accredited by the Council on Social Work Education (CSWE); as such they received the academic knowledge and hands-on training to assure that they were qualified to practice as social work professionals. However, many others who call themselves social workers do not have this education and training. Some may have degrees in related fields such human services, psychology, sociology, or mental health counseling, or in some cases, they may only have a high school diploma. Because the same title is used, members of the public may believe that they are receiving services from a professionally trained “social worker” when, in reality, this is often not the case.

To assure the public’s safety, the state should reserve the title of “social worker” for individuals who have received a degree in social work from an accredited school of social work or who are current licensed social workers in Iowa. This provides the public with the assurance they are receiving services from a trained and qualified professional.

**Recommendations**

- Develop and fully fund a loan repayment program for Iowa social workers.
- Forgive educational loans for individuals who make a commitment to work in underserved geographic areas or designated fields of practice.
- Expand state funding to support social work education for DHS case workers, funded through the Title IV-E program.
- Provide educational funds to recruit and educate social workers from minority communities.
- Provide funding for cross-cultural, bilingual, and geriatric education and training of social workers.
- Ensure that funding of human service programs is linked to salaries that provide a living wage and are commensurate with a worker’s credentials, experience, skills and caseload
- Enact legislation to limit the title “social worker” to individuals who have a degree or a license in social work.

**References**


Iowa Department of Public Health. (January 2013). Licensed social workers in Iowa. [Data file]. Retrieved from Iowa Department of Public Health Bureau of Professional Licensure Database.


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