



## Empowering Practitioners in Social Work from Rural Communities

National report and questionnaire analysis for Slovenia (DRPDNM)

### Introduction

International Federation of Social Workers defines social work as “a practice-based profession and an academic discipline that promotes social change and development, social cohesion, and the empowerment and liberation of people”. Social work promotes principles of social justice, human rights, collective responsibility and respect for diversities. It also engages people and structures to address life challenges and enhance wellbeing.<sup>[1]</sup>

Slovenia is a social state governed by the rule of law. In order for it to operate, it is essential that economic and social development go hand in hand. Social changes have transformed Slovenia into the type of welfare state, for which all members of society are responsible. Social welfare is a system of services and financial assistance, regulated by law and provided by the state, in which the activities of the non-governmental, private and informal sector play an ever-greater role.<sup>[2]</sup> Slovenia ensures the functioning of social care institutes, creates the conditions for private social work activities, stimulates and supports the development of self-help, charity work, programmes enabling a more independent life for the disabled, and voluntary work. Rights to social care services and contributions are determined according to the principles of equal availability and free choice for all those entitled. The state makes efforts to prevent social exclusion, particularly by influencing the social position of the population in the areas of taxation, employment and work, and through grants, housing policy, family policy, health care, education and in other policy areas.<sup>[3]</sup>

The Social Security Act of Slovenia (ZSV-UPB2) specifies several types of social services that should be available to assist individuals, families and groups in coping with personal distress, as well as to provide care, protection, education and training. Social services are provided to prevent and alleviate social distress or difficulties and include activities/support for self-help to individuals, families and groups.<sup>[4]</sup>

Different types of services to alleviate existing distress and difficulties include:<sup>[4]</sup>

- **counselling to individuals** to which every person in need who resides in the territory of Slovenia is entitled; personal help includes counselling, personality development and guidance, and aims to enable an individual to develop, complement, maintain and improve his/her social capacities;
- **help to family** encompasses help for home (including professional counselling for family relationship and functioning), domestic help (including social care for persons with disabilities, elderly and others), and social servicing (including help with domestic and other chores in certain cases, namely in case of birth, illness, disability, old age, accidents or other cases where such help is necessary for the inclusion of a person in everyday life);
- **institutional care** that covers all types of help provided in an institution, in other family or through other organised forms with the purpose to substitute or complement the functions of home and own family to an adult or child needing attendance; institutional care is provided in public social care institutes and in other social care homes;
- **organised care for adult persons with physical or mental handicap**, offering guidance and employment under special conditions, provided in care and work centres which hold a status of public social care institute;
- **help to workers** employed with undertakings, institutions and other employers in solving personal problems relating to work or upon the termination of the employment relationship as well as help with exercising their rights from health, pension and disability insurance, and child and family protection.

The Social Security Act stipulates that services have the *nature of right*, which implies that an individual in need of certain services can exercise his/her right pursuant to the envisaged procedure. Entitlement to services is asserted according to the principles of equal accessibility and free choice of forms for all entitled



persons under the conditions set forth by the Act and according to the principles of social justice. Tasks are carried out by public and private social care institutes, namely social work centres, residential homes for the elderly, special institutes for adults, social care institutes for training of children and youth with severe or serious mental development disorder, occupational activity centres, and crisis centres for children and adolescents.<sup>[3]</sup> They can help people in need recognise social distress or problem, find a possible solution, provide information on social assistance services available as well as obligations deriving from the services selected and present the network of practitioners that may help them.<sup>[5]</sup>

The government grants the status of association in public interest in the area of social care on the basis of the Societies Act (ZDru-1). A society is granted this status when the following requirements are met:<sup>[6]</sup>

- it is engaged in the activity in public interest, which is defined in its basic instrument;
- in the previous two years, its funds were mainly used for carrying out this activity and the programmes, projects or other activities for attaining the purpose and objectives in public interest were carried out regularly;
- it has its future action programmes prepared;
- it can show significant results of its activities.

Slovenian Humanitarian Organisations Act (ZHO) governs essential issues concerning status and operations of humanitarian organisations in the areas of social and health care. The Act defines conditions and criteria for obtaining the status of humanitarian organisation; it thus provides for the identification of organisations with public significance that carry out professional programmes in the areas of social and health care. The fundamental objective of the legal regulation is a higher quality of humanitarian social care. When granting the status of humanitarian organisation, the following features are considered:<sup>[7]</sup>

- the application for the status of a humanitarian organisation may be made by the societies or their associations that pursue humanitarian activities in the areas of social or health care at least one year prior to the application;
- charitable organisations and self-help organisations must explicitly define the area in which the predominant part of their humanitarian activity is carried out in their basic instrument, be it the area of social or health care;
- the compliance with general criteria of open, voluntary and non-paying nature must be actually shown in the supporting documents (report on the work);
- the existence and composition of the consultation body and its functioning must be shown as well.

The Social Chamber of Slovenia is Slovenia's central professional social welfare association and can be joined by those performing social welfare activities as well as those performing other activities, who wish to contribute to the development of the field. The Chamber brings together professional workers, associates, and other workers as well as volunteers from many different professions and occupations directly or indirectly active in the social work field.<sup>[2]</sup>

### **Geographic and demographic data**

Slovenia is a relatively small country with the population of around 2 million. It is situated in Central Europe and covers an area of 20.271 km<sup>2</sup>. The coastline is only 46,6 km long, but there are 26.000 kilometres of rivers and streams, some 7.500 fresh water springs, including several hundred of first class therapeutic mineral springs. Forests cover half the territory; Slovenia is the third most forested country in Europe, right after Finland and Sweden. The forest area in Slovenia is expanding through the growing-over of abandoned farmland, primarily meadow and pasture in more remote parts of the countryside. Grassland covers 5.593 km<sup>2</sup> of the country, and fields and gardens 2.471 km<sup>2</sup>. There are also 363 km<sup>2</sup> of orchards and 216 km<sup>2</sup> of vineyards. The largest urban areas in Slovenia include the capital Ljubljana with 270.000 inhabitants, Maribor with 95.000 inhabitants, Celje and Kranj with 37.000 inhabitants each, and other smaller cities with less than 25.000 inhabitants.<sup>[8]</sup>



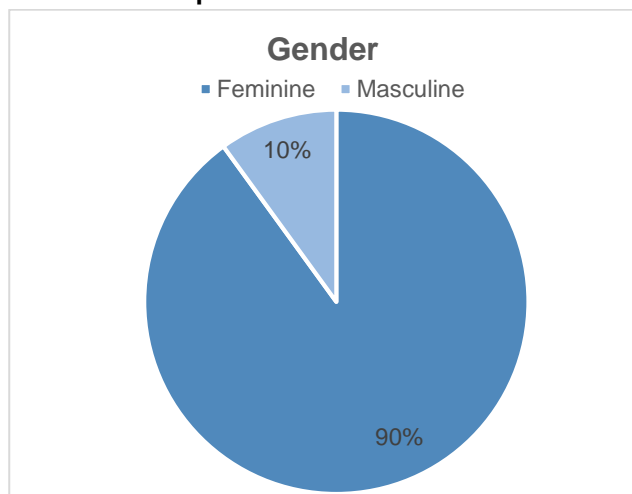
There are two main approaches when defining rural/urban areas in European Union. One is based on OECD's definition and the other on Eurostat's concept of degree of urbanisation:<sup>[9]</sup>

- **OECD** distinguishes between two hierarchical levels; namely local and regional. The only criterion for determining rural areas is population density. At local level, municipalities with less than 150 inhabitants per km<sup>2</sup> are defined as rural. At the regional level, NUTS 3 regions are classified into different types of regions according to the proportion of the population living in rural areas:
  - Predominantly rural regions where more than 50 % of the population lives in rural communities or less than 50 % of the population lives in urban communities.
  - Significantly rural regions/intermediate where 15-50 % of the population lives in rural communities or 50-85 % of the population lives in urban areas.
  - Predominantly urban regions where less than 15 % of the population lives in rural communities or more than 85 % of the population lives in urban areas.
- **Eurostat** takes into consideration minimum population, population density, and territorial connection of municipalities that meet the population density criteria. On the basis of these criteria, the following three areas exist according to the concept of degree of urbanization:
  - Densely populated area is a concluded series of municipalities, where the population density in each municipality is greater than 500 inhabitants per km<sup>2</sup>, and where in this 'artificial unit' there are at least 50.000 inhabitants.
  - Intermediate area is a concluded series of municipalities where the population density in a particular municipality is greater than 100 inhabitants per km<sup>2</sup>, and with at least 50.000 inhabitants in this 'artificial unit'.
  - Thinly populated area is a concluded series of municipalities that do not belong to the other two categories.

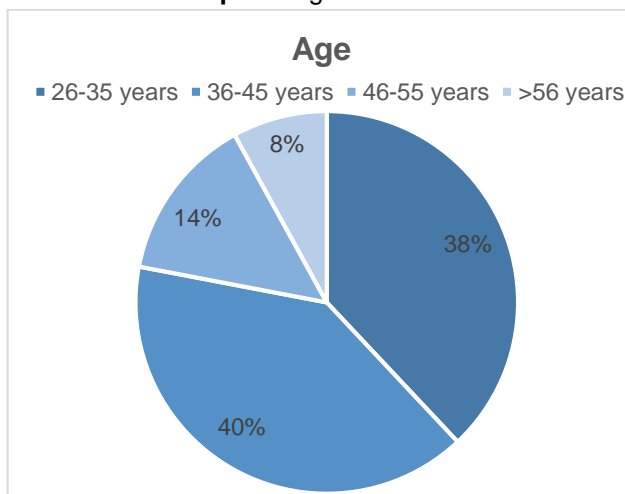
According to OECD's definition, none of the Slovenian regions fall into the class of predominantly urban regions where the share of the population living in rural areas would be less than 15%. According to Eurostat's definition only the municipalities of Ljubljana and Maribor are in the densely populated area.<sup>[9]</sup>

Results of this national report are based on the answers of 50 questionnaire respondents from Slovenia, active in the field of social work. 45 participants or 90 % of the survey respondents are female with the other 5 participants or 10 % being male. Gender distribution (Graph 1) of the Slovenian survey participants is not surprising, considering social work (like nursing or teaching) has long been considered a 'female profession' in this environment. Age distribution (Graph 2) shows that none of the survey respondents are younger than 25 years. 38 % of them are between 26 and 35 years old, with another 40 % being between 36 and 45 years old. 14 % of practitioners in social work participating in our survey are between 46 and 55 years old, while 8 % of them are older than 56 years.

**Graph 1: Gender distribution**



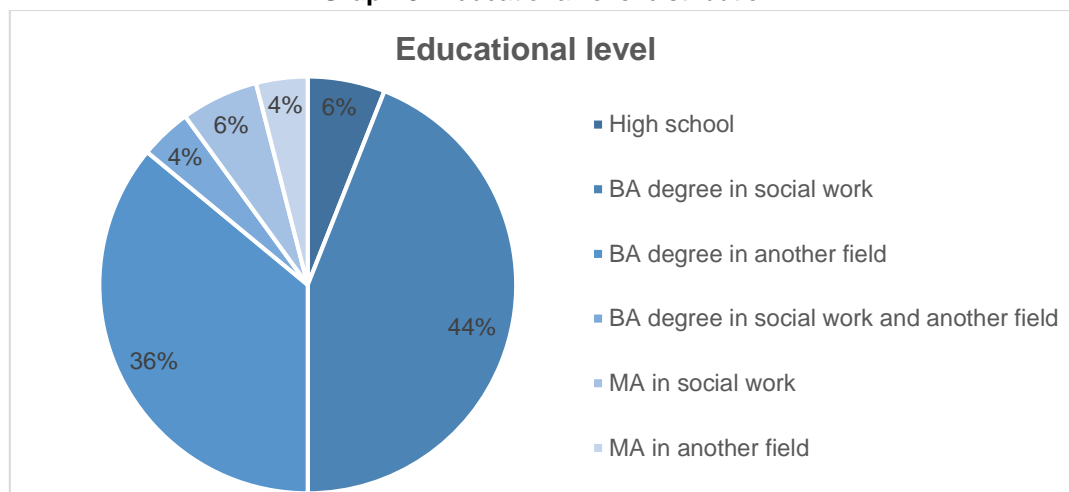
**Graph 2: Age distribution**





Results for the educational level of the survey respondents (Graph 3) show that more than half of them have a degree in social work. 44 % or 22 participants have a bachelor's degree in social work, 6 % or 3 participants have a master's degree in social work, while 4 % or 2 survey participants have a bachelor's degree in social work as well as a second bachelor's degree in another field. 36 % or 18 practitioners in social work from Slovenia participating in this survey have a bachelor's degree in a field other than social work. There are also 4 % or 2 participants with a master's degree from some other field. 6 % or 3 survey respondents only have a high school degree, while none of our respondents hold a PhD degree.

**Graph 3: Educational level distribution**



In Slovenia, to be able to be employed and work for a public institute in the field of social protection, it is necessary to have a bachelor's or a master's degree in the field of social work. Not only that, employees also need to pass an examination of professional competence in social protection to be able to work on cases independently. Candidates can apply to take the examination after gaining at least one year of work experience in the field of social work. Until they pass their examination of professional competence in social protection, they can only work in this field under the mentorship and guidance of more experienced social workers. Private institutes, non-governmental associations and humanitarian organisations are more likely to employ not only certified social workers, but also practitioners in social work without a diploma in this field or without a certificate of professional competence in social protection. However, certain tasks and activities can only be handled by certified professionals.

**Table 1: Work experience in social work**

	N	Minimum	Maximum	Mean	Std. Deviation
Work experience in social work	50	0,50	33,00	10,4160	7,43473

As can be seen from the results presented in Table 1, work experience in the field of social work of the 50 survey participants varies very much. The answers to this question ranged from 6 months to 33 years of work experience. The calculated mean is 10,416 years, while the standard deviation is 7,43473 years.

### Sources of satisfaction

Results about sources of job satisfaction in the workplace (Table 2) show the highest positive response regarding work climate (minimum is 3, maximum is 5, mean is 4,36, and standard deviation is 0,722). Practitioners in social work participating in our survey are also very satisfied with the work itself (minimum is 2, maximum is 5, and mean is 4,06). In third place we have relationships with clients with the mean of 4,00 and the lowest standard deviation of 0,639. The remaining four sources of satisfaction in the work place that



were offered in the questionnaire all have a minimum of 2 and a maximum of 5. We can say that the majority of the survey respondents are quite satisfied with their work conditions (mean is 3,74 and standard deviation is 0,828), recognition of their work (mean is 3,64) as well as with their salary and rewards (mean is 3,44 and standard deviation is 0,733). We received the lowest response regarding promotion opportunities with the mean of 3,10 and a standard deviation of 0,647.

6 of the survey respondents chose to write in and rate their own important satisfaction factors. One person is very satisfied with the understanding they receive from colleagues (they marked this factor with a 5), while another practitioner in social work is satisfied with their chance for personal growth (they marked the factor with a 4). Two survey respondents wrote in working hours as an important satisfaction factor, with one of them rating their working hours with a 4, while the other rated them with a 2. One practitioner in social work is dissatisfied with the lack of their own work space/office (they rated this important satisfaction factor with a 2). We also have one very dissatisfied practitioner in social work with their workload (they rated this with a 1).

**Table 2:** Sources of satisfaction in the workplace

	N	Minimum	Maximum	Mean	Std. Deviation
Salary and rewards	50	2	5	3,44	0,733
Promotion opportunities	50	2	5	3,10	0,647
Work conditions	50	2	5	3,74	0,828
Work itself	50	2	5	4,06	0,652
Recognition of my work	50	2	5	3,64	0,802
Work climate	50	3	5	4,36	0,722
Relationship with clients	50	2	5	4,00	0,639
Other important satisfaction factor	6	1	5	3,00	1,549

Generally speaking, Slovenian practitioners in social work participating in this survey are quite satisfied with their work and work environment. The biggest factors of dissatisfaction for them are the lack of promotion opportunities, salary and rewards or other work-related benefits.

### Sources of stress

Every occupation has its downsides as well as upsides. Stress and burnout are unsurprising given the nature of the issues social workers come into contact with on a daily basis: child abuse, adult abuse, homelessness, depression and poverty to mention just a few. These, alongside an over bureaucratized system and financial cutbacks, have had a weakening effect on the profession in many communities/societies.<sup>[10]</sup> It is important for practitioners in social work to recognise this is a very stressful profession and that the volume of work is never going to diminish, but it is how that work is managed which really matters.

Table 3 presents the results regarding various factors of stress for the target population of our survey. The highest rated statement among 25 offered in this section is “*My work tasks are clear to me*” with a mean of 4,44 and a standard deviation of 0,577. The second highest rated statement is “*I have the occasion to consult another professional when I have difficult cases*” with a mean of 4,30. Third highest mean of 4,18 is shared among two statements; “*I have the support of my colleagues in my activity*” has a standard deviation of 0,629, while “*I have the support of my boss in my activity*” has a standard deviation of 0,691. Statement “*I feel exhilarated after working closely with my clients*” received a lot of positive responses from survey respondents, with a mean of 4,08. The last statement with a mean above 4 is “*I deal very effectively with my clients’ problems*”, which has a mean of 4,02 and a standard deviation of 0,553.



On the other hand, when we look at the statements with the lowest means, we can see that “*I really don’t care about what happens to some clients*” received a lot of answers of “*Never*”; mean is 1,50 and standard deviation is 0,886. Similar can be said for statements “*I have a difficult collaboration with the authorities*” and “*I’ve become more callous toward people since I took this job*”, since both have a mean of 1,76 with the former statement having a standard deviation of 0,687 and the later 0,744.

**Table 3:** Sources of stress in the workplace

	N	Minimum	Maximum	Mean	Std. Dev.
I deal very effectively with my clients’ problems.	50	3	5	4,02	0,553
I have the occasion to consult another professional when I have difficult cases.	50	3	5	4,30	0,735
I have too much work to do.	50	2	5	3,52	0,677
I have a difficult collaboration with the authorities.	50	1	3	1,76	0,687
I can organise my work by myself.	50	2	5	3,98	0,769
I feel emotionally drained from my work.	50	1	5	3,06	0,712
I face the lack of understanding and cooperation from my clients.	50	1	4	2,56	0,644
I solve the work tasks by myself.	50	2	5	3,82	0,661
I feel tired when I wake up in the morning and I have to face a new work day.	50	1	4	2,54	0,838
I’ve become more callous toward people since I took this job.	50	1	3	1,76	0,744
I feel I’m positively influencing other people’s lives through my work	50	3	5	3,94	0,512
I have the support of my colleagues in my activity.	50	2	5	4,18	0,629
I have the support of my boss/bosses in my activity.	50	2	5	4,18	0,691
My work tasks are clear to me.	50	3	5	4,44	0,577
I feel I treat some clients as if they were impersonal objects.	50	1	3	1,92	0,695
Working with people is really a strain for me.	50	1	4	2,18	0,850
I accomplish tasks which are not in my responsibility.	50	2	5	2,98	0,742
I really don’t care about what happens to some clients.	50	1	5	1,50	0,886
I feel I need to know other professional intervention methods.	50	1	5	3,38	0,780
I have difficult cases to handle and solve in my work.	50	2	5	3,14	0,756
I have all the resources I need to do my job.	50	1	5	3,56	0,812
My work is appreciated by my colleagues.	50	3	5	3,98	0,622
I feel exhilarated after working closely with my clients.	50	3	5	4,08	0,634
I have to fill in many documents in my activity.	50	2	5	3,84	0,912
My work is appreciated by my boss.	50	3	5	3,98	0,685



### Consequences of stress

Stress is associated with both short and long-term health problems. On the one hand, it can contribute immediately to ill health by promoting damaging behaviours such as excess alcohol consumption and drug misuse. On the other hand, chronic stress is known to produce metabolic changes relating to cholesterol levels, obesity and an increased risk of coronary heart disease, as well as having other knock-on effects such as depression and poorer immune function.<sup>[11]</sup>

Results regarding various consequences of stress in the workplace are presented in Table 4. Practitioners in social work participating in our survey were presented with a list of 14 stress related aspects and instructed to choose the ones they have experienced in the last year of work (multiple answers were allowed). 44 % of the survey respondents have in the last year experienced feelings of dissatisfaction, 30 % have experienced sleep disturbances and difficulty concentrating, while 20 % of respondents report having low motivation for work, precarious health, and experiencing weight loss or weight gain. 9 survey participants report lower work productivity as one of the aspects they have experienced in the last year of work, while 8 people report experiencing apathy or change of their eating habits. 12 % of the target population chose low self-confidence and weakness as two other consequences of experiencing stress in the workplace. The lowest frequencies of positive answers received tense relations with family or friends, increased use of tobacco, alcohol, pills and/or other substance, and difficult decision-making. 5 participants of the survey (10 % of the sample population) report not experiencing any of the stress related aspects presented on the list, at least not in the last year of work.

**Table 4:** Consequences of stress in the workplace

	N	Yes		No	
		Frequency	Percent	Frequency	Percent
Low motivation for work	50	10	20 %	40	80 %
Low self-confidence	50	6	12 %	44	88 %
Feelings of dissatisfaction	50	22	44 %	28	56 %
Increased use of tobacco, alcohol, pills and/or other substance	50	3	6 %	47	94 %
Precarious health	50	10	20 %	40	80 %
Tense relations with others (family, friends, etc.)	50	4	8 %	46	92 %
Lower work productivity	50	9	18 %	41	82 %
Sleep disturbances	50	15	30 %	35	70 %
Weight loss or weight gain	50	10	20 %	40	80 %
Weakness	50	6	12 %	44	88 %
Change of eating habits	50	8	16 %	42	84 %
Apathy	50	8	16 %	42	84 %
Difficulty concentrating	50	15	30 %	35	70 %
Difficult decision-making	50	0	0 %	50	100 %
None of the above	50	5	10 %	45	90 %

Excessive and prolonged stress is a risk factor for longer term chronic disease. Social workers' employers have a duty of care to protect them from work-related stress and the associated health risks.<sup>[11]</sup> Presented results suggest more needs to be done to fulfil this obligation.



### Ways of improving professional activity

The peculiarity of the work social workers do is determined by the diversity of social problems and clients they encounter, as well as by their dynamic relationships with different groups of clients. Social workers must be able to efficiently organise the work process with clients, establishing and assessing their social needs and problems. It is therefore extremely important that social workers aim for improvements in their professional activity, since only a continuously improving specialist may efficiently help their clients by way of creating mutually meaningful and problem-solving orientated interrelationships.<sup>[12]</sup>

There are many ways social workers can improve their professional activity. Our survey participants were offered a list of seven possible ways, and were asked to rate, on a scale from 1 to 3, the extent to which they already use (Table 5) or would need (Table 6) each of them. “*Communication with other colleagues*” received a minimum of 2, a maximum of 3, the highest mean of 2,66, and the lowest standard deviation of 0,479. The second highest rated aspect of improving one’s professional activity that our survey respondents already use is “*Supervision from another professional*”, with a calculated mean of 2,42 and a standard deviation of 0,702. “*Professional training*” and “*Exchange of experience with other professionals in my field*” both received a mean of 2,00, with the former having a standard deviation of 0,495 and the latter 0,606. All three remaining aspects of improving one’s professional activity received means below 2; “*Reading about the latest developments in the field of social work*” has a mean of 1,94, “*Emotional regulation techniques*” has a mean of 1,86, while “*Being a member of a professional network/association*” is the lowest rated, with a mean of 1,62 and a standard deviation of 0,667.

**Table 5:** Ways of improving professional activity practitioners in social work are already using

	N	Minimum	Maximum	Mean	Std. Deviation
Emotional regulation techniques	50	1	3	1,86	0,606
Supervision from another professional	50	1	3	2,42	0,702
Communication with other colleagues	50	2	3	2,66	0,479
Being a member of a professional network/association	50	1	3	1,62	0,667
Professional training	50	1	3	2,00	0,495
Reading about the latest developments in the field of social work	50	1	3	1,94	0,550
Exchange of experience with other professionals in my field (from my country or from abroad)	50	1	3	2,00	0,606

Personal and professional development help ward off negative thoughts that prevent people from taking steps towards self-improvement. Employees often sit back and wait for an annual performance review to identify areas they need to improve. Everyone should position them self to be accountable, improve their skill set, and continually learn by setting personal benchmarks and reviewing them regularly. Learning leads to a better quality of life, boosts confidence and personal development, which are all positive aspects of life.<sup>[13]</sup>

Practitioners in social work participating in our survey put the most emphasis on “*Professional training*”, as the aspect they would need the most to improve their professional activity (mean is 2,46 with the standard deviation of 0,542). According to our sample population, the second most useful feature would be “*Exchange of experience with other professionals in my field (from my country or from abroad)*”, with a calculated mean





of 2,38 and a standard deviation of 0,567. Third in line, with a mean of 2,30 and a standard deviation of 0,580, is “*Communication with other colleagues*”, which they currently use the most (as evidenced by results presented in Table 5). “*Supervision from another professional*” is the fourth choice of our sample population. This answer received a mean of 2,16. The least popular aspects of improving one’s professional activity, according to the results of this survey, are “*Emotional regulation techniques*” (mean is 2,10), “*Reading about the latest developments in the field of social work*” (mean is 2,08), and “*Being a member of a professional network/association*” (mean is 2,02). It is also worth mentioning that all seven answers received a minimum of 1 and a maximum of 3.

**Table 6:** Ways of improving professional activity practitioners in social work would need

	N	Minimum	Maximum	Mean	Std. Deviation
Emotional regulation techniques	50	1	3	2,10	0,580
Supervision from another professional	50	1	3	2,16	0,618
Communication with other colleagues	50	1	3	2,30	0,580
Being a member of a professional network/association	50	1	3	2,02	0,589
Professional training	50	1	3	2,46	0,542
Reading about the latest developments in the field of social work	50	1	3	2,08	0,665
Exchange of experience with other professionals in my field (from my country or from abroad)	50	1	3	2,38	0,567

Social work practice occurs in the context of rapidly changing community needs and policies, as well as new research findings and theoretical developments. Lifelong learning enables practitioners in social work to continually update their knowledge and skills in order to provide relevant and effective services to their clients. They encounter ongoing and growing expectations to serve new populations experiencing emerging social problems. At the same time, they experience pressures to engage in evidence-based and culturally-responsive practices, and are required to be accountable for outcomes in environments of shrinking public resources. Therefore, it is essential for social workers to be lifelong learners. Lifelong learning in the field of social work addresses the continuous learning and transformation needed to be an effective social worker in today’s rapidly changing social, economic, and political environment.<sup>[14]</sup>

## References

- [1] <https://www.ifsw.org/what-is-social-work/global-definition-of-social-work/>
- [2] <https://www.szslo.si/presentation>
- [3] <http://www.slovenia.si/live-and-work/welfare-state/>
- [4] [http://www.mddsz.gov.si/en/areas\\_of\\_work/social\\_affairs/social\\_assistance/](http://www.mddsz.gov.si/en/areas_of_work/social_affairs/social_assistance/)
- [5] <https://infotujci.si/en/integration-into-slovenian-society/social-security/social-work-centres/>
- [6] [http://www.mddsz.gov.si/en/areas\\_of\\_work/social\\_affairs/societies\\_in\\_public\\_interest/](http://www.mddsz.gov.si/en/areas_of_work/social_affairs/societies_in_public_interest/)
- [7] [http://www.mddsz.gov.si/en/areas\\_of\\_work/social\\_affairs/humanitarian\\_organizations/](http://www.mddsz.gov.si/en/areas_of_work/social_affairs/humanitarian_organizations/)
- [8] [http://www.vlada.si/en/about\\_slovenia/geography/](http://www.vlada.si/en/about_slovenia/geography/)
- [9] [https://www.stat.si/doc/sosvet/Sosvet\\_18/Sos18\\_s452-2005.doc](https://www.stat.si/doc/sosvet/Sosvet_18/Sos18_s452-2005.doc)
- [10] <https://www.theguardian.com/social-care-network/social-life-blog/2018/mar/20/social-workers-resilience-coping-strategies-blame-austerity>



- [11] <https://www.plymouth.ac.uk/news/pr-opinion/opinion-how-stress-impacts-social-workers-nil-and-how-theyre-trying-to-cope>
- [12] <https://www3.mruni.eu/ojs/social-work/article/view/4352>
- [13] <https://www.iris.xyz/development/20-ways-improve-your-performance-work>
- [14] [https://pdxscholar.library.pdx.edu/cgi/viewcontent.cgi?article=1182&context=ulib\\_fac](https://pdxscholar.library.pdx.edu/cgi/viewcontent.cgi?article=1182&context=ulib_fac)

### Additional tables

**Table 7:** Gender distribution (in reference to Graph 1)

	Frequency	Percent	Valid Percent	Cumulative Percent
Feminine	45	90 %	90 %	90 %
Masculine	5	10 %	10 %	100 %
Total	50	100 %	100 %	

**Table 8:** Age distribution (in reference to Graph 2)

	Frequency	Percent	Valid Percent	Cumulative Percent
Less than 25 years	0	0 %	0 %	0 %
26-35 years	19	38 %	38 %	38 %
36-45 years	20	40 %	40 %	78 %
46-55 years	7	14 %	14 %	92 %
More than 56 years	4	8 %	8 %	100 %
Total	50	100 %	100 %	

**Table 9:** Educational level distribution (in reference to Graph 3)

	Frequency	Percent	Valid Percent	Cumulative Percent
High school	3	6 %	6 %	6 %
BA degree in social work	22	44 %	44 %	50 %
BA degree in another field	18	36 %	36 %	86 %
BA degree in social work and another field	2	4 %	4 %	90 %
MA degree in social work	3	6 %	6 %	96 %
MA degree in another field	2	4 %	4 %	100 %
PhD degree	0	0 %	0 %	100 %
Total	50	100 %	100 %	