

Causes of Stress among Social Workers in Selected Public Social Service Institutions in Ho Chi Minh City, Vietnam

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ABSTRACT

Stress is a common issue experienced by most individuals in everyday life. Due to the nature of their profession, social workers are required to confront numerous difficulties and challenges in the workplace. In addition, they must manage family responsibilities and interpersonal relationships. As a consequence, many social workers experience stress. This study aims to identify the causes of stress among social workers in selected public social service institutions in Ho Chi Minh City, Vietnam. The primary research method employed was a questionnaire-based survey. Data were randomly collected from 267 social workers. The collected data were processed using IBM SPSS Statistics 25. The statistical procedures applied included frequency analysis, mean statistics, and correlation analysis. The findings indicate that job characteristics constitute the most significant source of stress among social workers. This is followed by factors related to personal resilience, time-related factors, situational factors, cognitive appraisal factors, and finally relational factors. All groups of stress-related factors demonstrate strong positive correlations with one another.

Keywords: stress; causes of stress; social workers; public social service institutions; Ho Chi Minh City; Vietnam.

INTRODUCTION

Stress is a common phenomenon experienced by most individuals in everyday life. A study by Piao et al. (2024), involving 2,450,043 participants from 149 countries, revealed that levels of emotional distress in the global population have shown a continuous upward trend over time, with significant differences observed across countries and regions. Similarly, a study conducted by Smith and Wesselbaum (2025) across 131 countries indicated that 35.1% of adults reported experiencing stress at the time of the survey, with a higher prevalence among women than men (36.1% compared to 33.6%).

Due to the nature of their professional roles, social workers are required to confront numerous challenges, including working with diverse client populations, addressing complex client issues, coping with high job demands, sustaining heavy workloads, and bearing significant professional responsibilities. In addition, they must also deal with various personal and life-related challenges. Consequently, social workers are particularly vulnerable to experiencing stress. Social work is recognized as a profession associated with stress-related health risks (Truter et al. 2017). Martin and Schinke (1998) conducted a survey of 200 family and child welfare workers and clinical psychologists across seven social service centers in the New York metropolitan area. The findings indicated that 57% of clinical psychologists and 71% of family and child welfare workers reported experiencing very high levels of stress, with many nearing burnout or suffering from severe burnout. Furthermore, according to Mihai et al. (2025), social workers experience higher levels of stress compared to professionals in other occupational groups.

Stress among social workers results in numerous adverse consequences for both health and professional practice. According to Rine (2023), prolonged stress in social workers not only leads to burnout but is also associated with secondary trauma, fatigue, and physical health disorders, significantly impairing both occupational functioning and personal well-being. Kheswa (2019) further emphasizes that occupational stress not only causes psychological exhaustion but also contributes to diminished compassion toward clients and ineffective

workplace relationships among social workers.

In Vietnam, alongside rapid urbanization and profound social transformation, the demand for social work services has been steadily increasing, particularly in large urban centers. Public social service institutions are required to serve a growing number of beneficiaries whose needs are becoming increasingly complex, while human resources, working conditions, remuneration policies, and professional psychological support mechanisms for social workers remain limited. This situation intensifies occupational pressure and increases the risk of prolonged stress among social workers. Although stress has been extensively studied, research on stress among social workers in public social service institutions in Vietnam remains limited. In particular, there is a lack of systematic investigations examining groups of causal factors, including time-related factors, relational factors, situational factors, cognitive appraisal factors, personal resilience factors, and job characteristic factors..

Addressing this research gap, the present study focuses on analyzing the causes of stress among social workers in selected public social service institutions in Ho Chi Minh City, Vietnam, with the aim of clarifying the impact of each group of causal factors on stress among social workers. The findings of this study not only provide empirical evidence regarding the determinants of stress but also offer a scientific foundation for the development of human resource management policies, professional psychological support programs, and stress prevention interventions for social workers within the public social welfare system.

LITERATURE REVIEW / THEORETICAL FRAMEWORK

Literature Review

Stress is regarded as one of the major challenges affecting the health and professional effectiveness of social workers. Due to the nature of their work, which involves frequent interaction with vulnerable client populations, crisis situations, and psychological trauma, social workers are particularly susceptible to stress. International research has consistently confirmed that stress among social workers is a prevalent phenomenon with multidimensional causes, arising not only from individual factors but also from organizational environments and occupational characteristics..

At the organizational level, factors such as heavy workloads, insufficient resources, limited facilities, lack of organizational and managerial support, and organizational culture are considered primary sources of stress. Kheswa (2019) found that social workers in South Africa experience high levels of stress due to inadequate work resources, limited equipment and facilities, and insufficient organizational support, which in turn increase burnout and impair psychological functioning. Similarly, Jutt (2024) affirmed that the conflict between high job demands and limited organizational resources - including excessive workloads, inadequate professional supervision, and lack of leadership support - constitutes a central driver of stress and occupational burnout among social workers. Moreover, Rine (2023a, 2023b) emphasizes that occupational stress among social workers is not merely an individual issue but reflects broader organizational responsibilities and social policy contexts. In this regard, working conditions, management mechanisms, welfare policies, and workplace support systems play a decisive role in safeguarding the psychological well-being and professional capacity of social workers.

At the occupational level, international studies indicate that stress among social workers arises from task characteristics, professional demands, emotional pressure, the nature of professional activities, workload, and role structure. Hobfoll (2001) argues that occupational stress emerges when job demands exceed psychological and professional resources, whereby an imbalance between occupational requirements and individual coping capacity generates prolonged tension. In the context of social work, Pryce et al. (2007) point out that frequent exposure to clients' trauma, working with vulnerable populations, high emotional intensity in professional practice, and secondary traumatic exposure constitute core job characteristics that increase the risk of secondary traumatic stress and chronic stress. Empirical studies further demonstrate that job characteristics such as excessive workload, time pressure, role multiplicity, continuous exposure to complex social problems, high emotional responsibility, and sustained work intensity are directly associated with occupational stress and burnout (Kheswa, 2019). Gudžinskienė et al. (2022) further affirm that occupational stress originates from unclear professional tasks, role ambiguity, overlapping responsibilities, lack of boundaries between work and

emotional life, and professional demands that exceed psychological coping capacity, thereby contributing to prolonged stress and occupational burnout syndrome.

At the individual level, research indicates that stress among social workers is significantly influenced by personal characteristics such as impaired emotional regulation, limited adaptive capacity, conflicts between personal and professional values, diminished intrinsic motivation, and emotional imbalance. According to Hobfoll (2001), the Conservation of Resources (COR) Theory posits that stress arises when individuals experience a loss of psychological resources, face a threat of resource loss, or fail to gain resources following the investment of effort. Within this framework, personal resources - such as emotional regulation capacity, adaptability, intrinsic motivation, and psychological resilience - play a crucial role. Maslach et al. (2001) further suggest that personal characteristics including emotional exhaustion, depletion of psychological energy, weakened intrinsic motivation, and loss of professional meaning are strong predictors of occupational stress and burnout. Their findings are reinforced by Gudžinskienė et al. (2022), who demonstrate that diminished emotional regulation, conflicts between personal and professional values, reduced psychological adaptability, emotional exhaustion, and declining professional motivation are direct contributors to prolonged stress and burnout. These factors reflect the depletion of individual psychological resources within the context of the high-intensity emotional labor inherent in social work practice. In addition, Pryce et al. (2007) argue that over-empathizing, lack of professional emotional boundaries, and absorption of clients' negative emotions erode personal resources, thereby increasing the risk of chronic stress.

Theoretical Framework

This study clarifies several theoretical foundations, including the concept of stress, the concept of social workers, the concept of stress among social workers, and the causes of stress among social workers.

According to the American Psychological Association (2009), stress is defined as a physiological and/or psychological response of an individual to internal or external stressors, in which the demands of a situation are perceived as exceeding the individual's adaptive capacity, resources, or coping abilities, thereby leading to changes in emotional, cognitive, behavioral, and physiological functioning..

According to Miley and DuBois (2007), social workers are professionals who possess the essential knowledge base and adhere to the standards and ethical principles of the social work profession.

According to Mihai et al. (2025), stress among social workers refers to perceived stress that arises when work and life demands exceed the resources and coping capacities that individuals perceive as available to them

The authors of the project on strengthening psychosocial services for vulnerable children argue that the factors contributing to stress among social workers include the following (Le et al., 2012):

Time-related stress: This factor refers to stress arising from situations characterized by a conflict between limited time and excessive workload, where the amount of work required exceeds the time available to complete it.

Relational stress: This type of stress arises from individuals' social interactions and interpersonal relationships.

Situational stress: This type of stress arises from problems emerging from working conditions and life circumstances.

Cognitive appraisal-related stress: This type of stress arises from individuals' interpretations or anticipatory thoughts about events. Psychologists refer to stress resulting from such cognitive appraisal as a state of anxiety or fear concerning events that are expected to occur in the future.

Personal resilience-related stress: Under the same circumstances or situations, individuals may respond differently to stressors. Those with greater resilience typically demonstrate stronger coping capacities when facing stressful situations. Through resilience, individuals are more proactive and adaptive in preventing or effectively managing stress-inducing circumstances.

Job characteristic-related stress: This type of stress arises from the inherent characteristics of the social work profession, including role ambiguity, the demanding and complex nature of tasks, and unfavorable working environments.

RESEARCH METHODOLOGY

Research Design

This study employed a quantitative cross-sectional descriptive design. Data were collected from the study sample at a single point in time using a self-administered questionnaire. The collected data were processed and analyzed using SPSS Statistics 25.

Participants

The study surveyed 267 social workers currently employed at public social service institutions using a random sampling method. The sample size was determined based on multivariate statistical methodological principles, whereby the minimum recommended sample size should be at least five times the total number of observed variables (Hair et al., 2018). With 32 observed variables, the minimum required sample size under the 5:1 ratio was 160 participants. Therefore, the actual sample size of this study ($N = 267$) exceeded the recommended methodological threshold, ensuring the reliability, stability of the analytical model, and generalizability of the research findings. Eligible participants were social workers employed at social service institutions in Ho Chi Minh City, Vietnam, who were capable of completing the questionnaire and voluntarily agreed to participate in the study. In addition, 12 social workers selected from the survey sample and 6 managerial staff members participated in semi-structured in-depth interviews conducted as part of this research.

Data Collection Instrument

The causes of stress among social workers were measured using a self-developed scale consisting of 32 items, categorized into six groups of stress-related factors: time-related factors, relational factors, situational factors, cognitive appraisal factors, personal resilience factors, and job characteristic factors. The scale employed a five-point rating system: (0 = not present; 1 = occasionally present; 2 = present about half of the time; 3 = present most of the time; 4 = present almost all of the time). Reliability analysis was conducted using Cronbach's α coefficient. After removing items with low reliability, all groups of stress-related factors demonstrated satisfactory reliability, with alpha coefficients ranging from .811 to .948. The interpretation of mean scores was conducted according to the following criteria:

Table 1: Interpretation of Mean Scores for Classifying the Levels of Stress-Related Causes among Social Workers (Qualitative Categorization)

Mean Score	Qualitative Interpretation Level
0.00 - 0.50	Not present
0.51 - 1.50	Occasionally present
1.51 - 2.50	Present about half of the time
2.51 - 3.50	Present most of the time
3.51 - 4.0	Present almost all of the time

In addition, a semi-structured in-depth interview guide was employed to collect qualitative data on the causes of stress among social workers.

Data Collection Procedure

Data were collected through a face-to-face survey. The questionnaires were distributed directly to social workers, accompanied by instructions on how to complete them. Prior to completing the questionnaire, participants were required to confirm their voluntary consent to participate in the study. The collected data were subsequently screened to remove incomplete or invalid responses in order to ensure data accuracy. Semi-structured in-depth interviews were conducted using purposive sampling until data saturation was achieved. All interview data were audio-recorded, transcribed verbatim, and systematically coded for analysis.

Data Analysis

Survey data collected through the questionnaire were processed using SPSS Statistics 25 after preliminary data screening and cleaning. Descriptive statistics—including frequencies, percentages, means, and standard deviations—were employed to examine the causes of stress. The reliability of the measurement scale was assessed using Cronbach's alpha coefficient. Inferential statistical analysis, specifically correlation analysis, was conducted to examine the relationships among the stress-related factors.

RESULTS

Time-Related Factors

The causes of stress related to time-related factors among social workers include specific elements, as presented in Table 2 below:

Table 2: Causes of Stress Related to Time-Related Factors

No.	Time-Related Causes	SD	Mean	Rank
1	Frequently required to work beyond official working hours	1.18	1.18	4
2	Continuously preoccupied with resolving clients' issues even after returning home	1.05	1.33	2
3	Insufficient time to emotionally recover from clients' distressing experiences	1.14	1.12	5
4	Insufficient time to fully implement all tasks within the client intervention process	1.12	1.23	3
5	Excessive workload (agency work, family responsibilities, personal matters, etc.), resulting in limited rest	1.12	1.38	1
Overall Mean		0.96	1.25	

Note: Minimum score = 0; Maximum score = 4.0; Higher mean scores indicate a greater frequency of time-related stressors.

The analysis results presented in the table above indicate that the causes within the time-related factor group occur at an occasional level among social workers, with mean scores (M) ranging from 1.12 to 1.38. Among these, the factor with the highest level of impact is excessive workload (agency duties, family responsibilities, personal matters, etc.), resulting in limited opportunities for rest. In practice, the number of clients that each social worker at public social service institutions in Ho Chi Minh City is required to care for and support is relatively large. At the same time, they must also fulfill family and personal responsibilities, thereby increasing time pressure and overall stress levels. This observation is further supported by insights shared by a managerial staff member at the Thi Nghe Center for the Protection of Disabled and Orphaned Children, who noted that work

overload leads to extended working hours and significantly restricts employees' rest time, thereby becoming a fundamental cause of stress (in-depth interview, managerial staff member).

The next most influential factor is continuously being preoccupied with resolving clients' problems even after returning home ($M = 1.33$). This reflects the emotional demands inherent in the social work profession, whereby social workers experience not only work-related pressure during official working hours but also prolonged psychological strain in their personal lives, thereby increasing the risk of chronic stress. This finding is further illustrated by the account of a social worker at the Binh Trieu Drug Counseling and Rehabilitation Center, who reported that after clients complete rehabilitation, difficulties in supporting their reintegration—particularly in securing suitable employment—along with uncertainties regarding clients' ability to obtain and adapt to employment, create sustained psychological pressure. This, in turn, becomes one of the fundamental causes of occupational stress (in-depth interview, social worker).

Conversely, the factor with the lowest level of influence within this group is insufficient time to emotionally recover from clients' distressing experiences ($M = 1.12$). Nevertheless, from a professional perspective, this factor remains noteworthy. In the course of supporting clients, social workers may encounter cases whose circumstances resemble their own past experiences, thereby increasing the risk of secondary traumatic stress. In such situations, a lack of adequate time for emotional recovery may undermine mental well-being and professional effectiveness. Therefore, in professional practice, it is essential to encourage case-sharing mechanisms, peer support, and appropriate case reassignment, within the framework of fostering an open working environment that enables social workers to proactively discuss personal experiences and occupational challenges.

In addition to the aforementioned factors, insufficient time to fully implement all tasks within the client intervention process and frequently working beyond officially regulated hours were also identified as occasional sources of stress among social workers. These findings suggest that stress among social workers arises not only from workload demands but also from issues related to work organization and labor management.

Relational Factors

The causes of stress related to relational factors among social workers are presented in Table 3 below:

Table 3: Causes of Stress Related to Relational Factors

No.	Relational Factors	SD	Mean	Rank
1	Lack of cooperation from clients	1.05	1.30	1
2	Disagreements with colleagues regarding methods of client support	1.14	1.12	2
3	Conflicts with colleagues or supervisors	1.04	0.83	3
4	Family conflicts (divorce, disputes, disagreements, disharmony, unfair treatment, etc.)	1.13	0.80	4
5	Conflicts with in-laws (spouse's family)	0.97	0.62	6
6	Conflicts with friends or neighbors	1.06	0.70	5
Overall Mean		0.88	0.90	

Note: Minimum score = 0; Maximum score = 4.0; Higher mean scores indicate a greater frequency of relational stressors.

The survey results indicate that all stress-related causes within the relational factor group were reported at an occasional level among social workers, with mean scores (M) ranging from 0.70 to 1.30. Among these, the most influential factor was the lack of cooperation from clients ($M = 1.30$). Clients' non-cooperation directly affects

the intervention process, reduces the effectiveness of support, and undermines work outcomes for social workers. In such contexts, even when social workers invest substantial professional effort and expertise, intervention effectiveness may remain limited, thereby increasing psychological pressure and occupational stress. This issue is particularly pronounced when working with client groups who have severe limitations in communication and cognitive functioning, which further complicates the implementation of supportive activities. As shared by a department head at the Thi Nghe Center for the Protection of Disabled and Orphaned Children, one of the primary sources of occupational stress among social workers stems from clients' limited cooperation. Specifically, many children with severe disabilities are unable to communicate verbally, resulting in situations where proposed intervention and support activities are not fully understood or responded to by the children. This circumstance significantly heightens psychological pressure during professional practice (in-depth interview, managerial staff member).

The next most influential factors were disagreements with colleagues regarding methods of client support ($M = 1.12$) and conflicts with colleagues or supervisors ($M = 0.83$). These findings indicate that stress among social workers originates not only from interactions with clients but also from internal workplace relationships. Unresolved professional conflicts may intensify emotional frustration, diminish work motivation, and reduce job satisfaction. According to a social worker at a Mental Health Care Center, conflicts and disagreements in work coordination with colleagues constitute a significant source of psychological stress. The inability to express negative emotions, the difficulty in implementing tasks according to one's professional judgment, and the perceived restriction of professional autonomy contribute to heightened feelings of frustration and psychological pressure during the process of client support (in-depth interview, social worker).

The factor with the lowest level of influence within this group was conflict with in-laws ($M = 0.62$). This result suggests that most social workers do not experience significant conflicts within their extended family relationships. This represents an important psychosocial protective factor, as stability and harmony within the family environment play a substantial supportive role in reducing stress, enhancing adaptive capacity, and maintaining the mental well-being of social workers.

Situational Factors

The causes of stress related to situational factors among social workers are presented in Table 4 below:

Table 4: Causes of Stress Related to Situational Factors

No.	Situational Factors	SD	Mean	Rank
1	Clients' problems are complex and difficult to resolve	0.93	1.12	4
2	Changes in clients do not meet personal expectations	1.09	1.21	3
3	Low salary and little or no allowance while current living expenses are high	1.23	1.62	1
4	Frequent staff turnover at the workplace	1.10	1.09	5
5	Important and significant others experience difficulties, challenges, danger, or threats	1.06	0.85	6
6	Hot weather conditions	1.26	1.46	2
Overall Mean		0.84	1.23	

Note: Minimum score = 0; Maximum score = 4.0; Higher mean scores indicate a greater frequency of situational stressors.

The group of stress-related causes associated with situational factors among social workers was reported at an “occasionally present” level, with an overall mean (M) of 1.23. Among these factors, the most influential cause was low salary and little or no allowance despite high current living expenses, which was rated at the level of “present about half of the time” (M = 1.62). The income of social workers in Vietnam in general, and in Ho Chi Minh City in particular, remains lower than the overall average income level, directly affecting their quality of life and personal economic stability. Low income generates considerable financial pressure, compelling many social workers to seek additional employment and manage expenditures strictly, thereby increasing stress levels.

The second most influential factor was hot weather conditions (M = 1.46). This finding reflects two interrelated aspects: suboptimal facilities and working environments at social service institutions in Ho Chi Minh City, and the region’s hot climate - particularly during the dry season—which contributes to increased stress among social workers during their professional practice.

Conversely, the factor with the lowest level of influence within the situational group was important and significant others experiencing difficulties, challenges, danger, or threats (M = 0.85). This result indicates that most social workers do not face substantial pressure arising from serious adverse events involving significant individuals in their lives. Such relative stability in their personal sphere serves as a psychological protective factor, enabling them to remain focused on their professional responsibilities and mitigating overall stress levels.

Cognitive Appraisal–Related Factors

The causes of stress related to cognitive appraisal factors among social workers are presented in Table 5 below:

Table 5: Causes of Stress Related to Cognitive Appraisal Factors

No.	Cognitive Appraisal–Related Factors	SD	Mean	Rank
1	Concern about being unable to resolve clients’ problems	1.13	0.91	3
2	Concern about clients’ lack of cooperation	1.24	0.79	4
3	Concern about clients’ slow progress during the intervention process	1.18	1.03	2
4	Concern about adverse events occurring to oneself, family members, or friends...	1.16	0.79	4
5	Concern about providing ineffective support to clients	1.09	1.20	1
Overall Mean		0.97	0.95	

Note: Minimum score = 0; Maximum score = 4.0; Higher mean scores indicate a greater frequency of cognitive appraisal–related stressors.

The group of stress-related causes associated with cognitive appraisal factors among social workers was reported at an “occasionally present” level, with an overall mean (M) of 0.95. The causes ranked from highest to lowest were as follows: concern about providing ineffective support to clients (M = 1.20), concern about clients’ slow progress during the intervention process (M = 1.03), and concern about being unable to resolve clients’ problems (M = 0.91). These findings indicate that social workers primarily focus on professional effectiveness and client intervention outcomes. This reflects a high level of professional commitment and strong sense of professional responsibility among social workers. However, this very commitment and responsibility may also contribute to increased stress levels in their professional practice.

The two factors with the lowest levels of influence within this group were concern about clients’ lack of cooperation and concern about adverse events occurring to oneself, family members, or friends. These findings suggest that, alongside prioritizing professional responsibilities, social workers also attach considerable

importance to family and social relationships. This reflects the intersection between professional roles and social roles in their personal lives, which may contribute to stress. According to a social worker at a Mental Health Care Center, instability related to family life and the educational circumstances of family members can also become significant sources of psychological stress. Specifically, inconsistent information regarding training quality, the legal status of academic programs, and delays in degree issuance during a relative's university studies generated prolonged anxiety, uncertainty, and psychological pressure, thereby negatively affecting the emotional stability of the social worker (in-depth interview, social worker).

Personal Resilience Factors

The causes of stress related to personal resilience factors among social workers are presented in Table 6 below:

Table 6: Causes of Stress Related to Personal Resilience Factors

No.	Personal Resilience–Related Factors	SD	Mean	Rank
1	Lack of proactiveness and positive efforts to prevent or cope with stressful situations	1.10	1.35	2
2	Poor health reducing personal resilience	1.19	1.40	1
3	Avoidance of difficulties and hardships	1.12	1.26	4
4	Lack of effort in problem-solving	1.13	1.29	3
Overall Mean		0.98	1.33	

Note: Minimum score = 0; Maximum score = 4.0; Higher mean scores indicate a greater frequency of personal resilience–related stressors.

The stress-related causes within the personal resilience factor group among social workers were all reported at an “occasionally present” level, with mean scores (M) ranging from 1.26 to 1.35. Among these, the most influential factor was poor health reducing personal resilience (M = 1.40). This factor has a considerable impact on stress levels, as poor health not only directly affects the psychological well-being of social workers but also diminishes work performance and increases the likelihood of unfavorable professional outcomes. However, the survey results also indicate that this condition occurs only among a proportion of social workers or manifests occasionally rather than consistently across the workforce.

The subsequent factors in terms of level of influence include: lack of proactiveness and positive efforts to prevent or cope with stressful situations; insufficient effort in problem-solving; and avoidance of difficulties and hardships. These factors highlight the central role of individual psychological resources in mitigating stress among social workers.

Job Characteristic Factors

The causes of stress related to job characteristics among social workers are presented in Table 7 below:

Table 7: Causes of Stress Related to Job Characteristic Factors

No.	Job Characteristic - Related Factors	SD	Mean	Rank
1	Diverse client populations	1.31	1.71	1
2	Clients' problems are complex	1.23	1.69	2

3	Working environment lacks professionalism	1.28	1.46	5
4	Insufficient work facilities and resources	1.33	1.51	4
5	Adherence to professional principles is sometimes challenging	1.37	1.54	3
6	Role ambiguity regarding responsibilities, scope of work, and future career development	1.17	1.15	6
Overall Mean		1.06	1.51	

Note: Minimum score = 0; Maximum score = 4.0; Higher mean scores indicate a greater frequency of job characteristic-related stressors.

The group of stress-related causes associated with job characteristics among social workers was reported at the level of “present about half of the time,” with an overall mean (M) of 1.51. This indicates that job-related factors represent a relatively high and consistent source of stress among social workers.

Within this group, the highest-ranked factor was diverse client populations (M = 1.71), followed by the complexity of clients’ problems (M = 1.69), both rated at the level of “present about half of the time.” Professional practice indicates that social workers are often simultaneously responsible for multiple client groups (such as children, persons with disabilities, older adults, and individuals with psychological disturbances). Each client presents unique circumstances, resources, and challenges; therefore, no single intervention model can be uniformly applied. The highly individualized nature of interventions, combined with the need for flexible adaptation of professional methods, constitutes a significant source of stress for social workers.

The next most influential factor was that adherence to professional principles is sometimes challenging (M = 1.54), rated at the level of “present about half of the time.” In social work practice, ethical values may be interpreted differently depending on sociocultural contexts. Certain core professional principles—such as respect for clients’ self-determination—can become particularly difficult to uphold when clients make decisions or engage in behaviors that conflict with moral norms or legal regulations. The tension between professional standards, personal values, and real-world circumstances generates substantial psychological pressure, thereby contributing to stress among social workers.

Another important factor was insufficient work facilities and resources (M = 1.51), rated at the level of “present about half of the time.” Limitations in infrastructure and equipment reduce the effectiveness of interventions and increase feelings of professional inadequacy, thereby contributing to heightened stress levels. According to a social worker at a Mental Health Care Center, the physical therapy room at the center is inadequately equipped, containing only basic items and lacking sufficient facilities and tools to effectively support clients (in-depth interview, social worker).

The factor with the lowest level of influence within this group was role ambiguity regarding responsibilities, scope of work, and future career development (M = 1.15), which was reported at the level of “occasionally present.” This finding suggests that most social workers possess a relatively clear understanding of their professional position, job functions, and career development pathways. Such clarity represents an important protective factor, enhancing professional commitment, proactive engagement in work, and ultimately reducing stress.

In addition, an unprofessional working environment was also identified as a source of stress (M = 1.46). This situation is reflected in the fact that many social service institutions continue to operate primarily under an administrative–basic care model (e.g., hygiene, meals, daily living activities), while in-depth interventions, personal development initiatives, and psychosocial rehabilitation activities for clients remain limited. Such a lack of professionalism diminishes the professional role of social workers, thereby contributing to increased stress. According to a social worker at the Go Vap Child Care and Protection Center, daily tasks are largely centered on direct caregiving activities for children, such as personal hygiene and feeding support (in-depth

interview, social worker). Similarly, a department head at the Thi Nghe Center for the Protection of Disabled and Orphaned Children noted that one of the causes of occupational stress among social workers stems from an unfavorable working environment, along with unclear delineation of responsibilities and authority (in-depth interview, managerial staff member).

Correlation among the Causes of Stress among Social Workers

The correlations among the causes of stress among social workers are presented in Table 8 below:

Table 8: Correlations among the Causes of Stress

Groups of Causes	Time-Related Factors	Relational Factors	Situational Factors	Cognitive Appraisal Factors	Personal Resilience Factors	Job Characteristic Factors
Time-Related Factors	1	.731**	.775**	.717**	.723**	.695**
Relational Factors	.731**	1	.783**	.775**	.641**	.631**
Situational Factors	.775**	.783**	1	.782**	.770**	.765**
Cognitive Appraisal Factors	.717**	.775**	.782**	1	.742*	.678**
Personal Resilience Factors	.723**	.641**	.770**	.742**	1	.730**
Job Characteristic Factors	.695**	.631**	.765**	.678**	.730**	1

Note. ** $p < .01$ (2-tailed).

The results of the Pearson correlation analysis among the groups of stress-related causes indicate that all groups are positively and strongly correlated, with statistical significance. The correlation coefficients range from $r = .631^{**}$ to $r = .783^{**}$, and all correlations are statistically significant ($p < .01$), reflecting a strong interconnection and mutual interaction among the groups of stress-related factors. These findings suggest that occupational stress among social workers is not the result of isolated causes, but rather a cumulative outcome of multiple interrelated groups of factors that simultaneously interact and exert a synergistic impact on the individual.

DISCUSSION

The findings indicate that stress among social workers is simultaneously influenced by multiple groups of factors. This result is consistent with contemporary stress frameworks, which conceptualize stress not as the consequence of isolated factors but as the outcome of interactions among job demands, organizational environments, and individual resources (Lazarus & Folkman, 1984; Cooper et al., 2001).

Job characteristic-related factors were identified as the strongest and most frequent sources of stress. This finding is consistent with studies by Maslach et al. (2001), Figley (1995), and Bride (2007), which argue that helping professions—particularly social work—contain inherent occupational stressors, including frequent exposure to trauma, complex client problems, high emotional demands, and substantial ethical responsibilities.

The diversity of client populations and the complexity of client problems identified in this study are consistent with Hochschild's (1983) emotional labor framework, in which workers are required to continuously regulate their emotions, attitudes, and professional behaviors, thereby generating sustained emotional strain. Moreover, the challenges associated with adhering to professional ethical standards reflect the phenomenon of value conflict, which has been identified by Reamer (2013) and Banks (2012) as a significant source of stress in social work practice.

The fact that personal resilience factors ranked second in level of influence highlights the critical role of internal psychological resources in mitigating stress. This finding aligns with the Job Demands–Resources (JD–R) model proposed by Demerouti et al. (2001), which posits that stress emerges when job demands exceed individual resources. Factors such as declining health, inadequate coping capacity, and limited problem-solving ability reflect the depletion of psychological resources, thereby increasing the risk of stress and occupational burnout. This result is also consistent with the findings of Grant and Kinman (2014), who emphasized that personal resilience and professional self-efficacy function as core protective factors in helping social workers reduce stress and maintain psychological well-being.

The time-related and situational factors reflect forms of contextual stress, consistent with Karasek and Theorell's (1990) Job Demands–Resources model. According to this model, high time pressure combined with low levels of control over work conditions increases stress and undermines mental health.

The financial pressure resulting from low income identified in this study is also consistent with the findings of Kim and Stoner (2008) and Lloyd et al. (2002), who demonstrated that inadequate remuneration contributes to increased stress, reduced job satisfaction, and a higher risk of turnover within the field of social work.

The cognitive appraisal–related factors (subjective perception and evaluation) indicate that stress arises not only from objective conditions but also from the internalization of professional responsibility, consistent with Lazarus and Folkman's (1984) cognitive appraisal theory. Social workers' predominant concern about the effectiveness of client support reflects a high level of professional empathy; however, it simultaneously increases the risk of emotional exhaustion and compassion fatigue (Figley, 1995; Stamm, 2010).

The Pearson correlation analysis revealed strong interrelationships among the groups of stress-related factors, consistent with Bronfenbrenner's (1979) ecological systems perspective and systems theory in social work. From this viewpoint, stress is not a linear phenomenon but rather the result of simultaneous interactions among individual, professional, and organizational factors.

This study proposes a multidimensional classification model that integrates various groups of stress-related factors among social workers. The findings demonstrate the close interaction among these groups of causes as an integrated structural framework. Based on large-scale empirical data collected through field surveys, the study contributes to filling the data gap in research on stress among social workers in Vietnam. The findings provide a scientific foundation for the development of professional policies and multi-level intervention models aimed at reducing stress and promoting the sustainable development of the social work workforce.

The study findings provide important practical implications for management, social service organizations, and social work practice. First, social service institutions should restructure task allocation, regulate workload, and reduce overlapping responsibilities in order to minimize cumulative stress among social workers. Second, professional supervision mechanisms, psychological support, and peer support systems should be established as regular and substantive practices rather than symbolic activities, enabling social workers to share emotional burdens and effectively manage complex cases. Third, training and professional development programs should incorporate components on stress management, coping skills, strengthening personal resilience, and self-care, tailored to specific practice contexts. Fourth, administrators of social service institutions should foster a supportive and professional working environment in which roles, responsibilities, and professional authority are clearly defined. Finally, improving working conditions, facilities, support tools, and remuneration policies will directly contribute to reducing occupational stress, enhancing intervention effectiveness, and improving the overall quality of social services.

The findings indicate the need to further refine the professional policy framework for social work toward greater professionalization. This includes standardizing job.

The study has several limitations that should be acknowledged. First, the cross-sectional design does not allow for the establishment of causal relationships between the groups of stress-related factors and stress levels. Second, the use of self-report instruments may increase the risk of common method bias. Third, the research sample was primarily drawn from public social service institutions in Ho Chi Minh City, Vietnam, which may limit the generalizability of the findings to other contexts..

CONCLUSION

The study confirms that stress among social workers emerges from the simultaneous interaction of occupational characteristics, organizational contexts, and individual resources. The findings indicate that job characteristic–related factors constitute the strongest and most frequent source of stress, surpassing the other groups of factors and occurring at the level of “present about half of the time.” The remaining groups of factors were all reported at the level of “occasionally present,” and were ranked from highest to lowest as follows: personal resilience factors, time-related factors, situational factors, cognitive appraisal factors, and relational factors.

The Pearson correlation analysis indicates that all groups of stress-related factors are strongly interrelated, confirming that these factors do not operate independently. Rather, they exhibit statistically significant associations, reflecting their interaction and mutual interdependence in the formation of stress among social workers.

The study findings suggest that in order to help social workers reduce and overcome stress, multi-level intervention strategies are required. These strategies should combine improvements in professional practice conditions, enhancements to the organizational environment, and strengthening of individual resources. Such an integrated approach is essential to ensure the sustainable development of the social work workforce and to improve the quality of social work services.

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REFERENCES

1. American Psychological Association. (2009). APA concise dictionary of psychology. American Psychological Association. <https://doi.org/10.2307/j.ctv1chrr93>
2. Banks, S. (2012). Ethics and values in social work (4th ed.). Palgrave Macmillan. <https://doi.org/10.1007/978-0-230-37592-5>
3. Bride, B. E. (2007). Prevalence of secondary traumatic stress among social workers. *Social Work*, 52(1), 63–70. <https://doi.org/10.1093/sw/52.1.63>
4. Bronfenbrenner, U. (1979). The ecology of human development. Harvard University Press. <https://doi.org/10.4159/9780674028845>
5. Cooper, Cary L., Dewe, Philip J., & O'Driscoll, Michael P.. (2001). Organizational stress: A review and critique of theory, research, and applications (Foundations for Organizational Science). SAGE Publications Ltd. <https://doi.org/10.4135/9781452231235>
6. Demerouti, E., Bakker, A. B., Nachreiner, F., & Schaufeli, W. B. (2001). The job demands-resources model of burnout. *Journal of Applied Psychology*, 86(3), 499–512. <https://doi.org/10.1037/0021-9010.86.3.499>
7. Figley, C. R. (1995). Compassion fatigue: Coping with secondary traumatic stress disorder in those who treat the traumatized. Brunner/Mazel.

8. Grant, L., & Kinman, G. (2014). Emotional resilience in the helping professions and how it can be enhanced. *Health and Social Care Education*, 3(1), 23–34. <https://doi.org/10.11120/hsce.2014.00040>
9. Gudžinskienė, V., Pozdniakovas, A., & Sinkuniene, J. R. (2022). Individual factors that cause professional burnout syndrome in social workers, employed in community rehabilitation centre for addictive diseases. *SHS Web of Conferences*, 131, Article 03004. <https://doi.org/10.1051/shsconf/202213103004>
10. Hair, J. F., Black, W. C., Babin, B. J., & Anderson, R. E. (2018). *Multivariate data analysis* (8th ed.). Cengage Learning.
11. Hobfoll, S. E. (2001). The influence of culture, community, and the nested-self in the stress process: Advancing conservation of resources theory. *Applied Psychology*, 50(3), 337–421. <https://doi.org/10.1111/1464-0597.00062>
12. Hochschild, A. R. (1983). *The managed heart: Commercialization of human feeling*. University of California Press.
13. Jutt, S. (2024). Factors that affect social workers' job satisfaction, stress and burnout. *Journal for Social Science Archives*, 1(3), 13–26. <https://doi.org/10.59075/jssa.v1i3.17>
14. Karasek, R. A., & Theorell, T. (1990). *Healthy work: Stress, productivity, and the reconstruction of working life*. Basic Books.
15. Kheswa, J. G. (2019). Factors and effects of work-related stress and burnout on the health of social workers in Eastern Cape, South Africa. *South African Journal of Industrial Psychology*, 45, Article a1661. <https://doi.org/10.4102/sajip.v45i0.1661>
16. Kim, H., & Stoner, M. (2008). Burnout and turnover intention among social workers: Effects of role stress, job autonomy and social support. *Administration in Social Work*, 32(3), 5–25. <https://doi.org/10.1080/03643100801922357>
17. Lazarus, Richard S., & Folkman, Susan A.. (1984). *Stress, appraisal, and coping*. Springer Publishing Company
18. Lê, C. A., Nguyễn, T. D. H., Mai, X. H., Bùi, T. X. M., & Nguyễn, H. T. (2012). Quản lý stress đối với nhân viên xã hội. *WWO*
19. Lloyd, C., King, R., & Chenoweth, L. (2002). Social work, stress and burnout: A review. *Journal of Mental Health*, 11(3), 255–265. <https://doi.org/10.1080/09638230020023642>
20. Martin, U., & Schinke, S. P. (1998). Organizational and individual factors influencing job satisfaction and burnout of mental health workers. *Social Work in Health Care*, 28(2), 51–62. https://doi.org/10.1300/j010v28n02_04
21. Maslach, C., Schaufeli, W. B., & Leiter, M. P. (2001). Job burnout. *Annual Review of Psychology*, 52(1), 397–422. <https://doi.org/10.1146/annurev.psych.52.1.397>
22. Mihai, A., Crivoi, E. S., Alecu, L., Pop, O., Nita, D., Renta, G. C., Luca, A., & Lazar, F. (2025). Stress and burnout among social workers – a relation mediated by coping styles. *Humanities and Social Sciences Communications*, 12, Article 1430. <https://doi.org/10.1057/s41599-025-05780-1>
23. Miley, K., & DuBois, B. (2007). Ethical priorities in the clinical practice of empowerment social work. *Social Work in Health Care*, 44(1), 27–45. https://doi.org/10.1300/j010v44n01_04
24. Piao, X., Xie, J., & Managi, S. (2024). Continuous worsening of population emotional stress globally: Universality and variations. *BMC Public Health*, 24, Article 3576. <https://doi.org/10.1186/s12889-024-20961-4>
25. Pryce, J. G., Shackelford, K. K., & Pryce, D. H. (2007). Educating child welfare workers about secondary traumatic stress. In J. G. Pryce, K. K. Shackelford, & D. H. Pryce (Eds.), *Secondary traumatic stress and the child welfare workforce* (pp. xx–xx). Oxford University Press. <https://doi.org/10.1093/oso/9780190615918.003.0004>
26. Reamer, F. G. (2013). *Social work values and ethics* (4th ed.). Columbia University Press.
27. Rine, C. M. (2023a). Workplace care for social worker stress. *Health & Social Work*, 48(3), 157–158. <https://doi.org/10.1093/hsw/hlad015>
28. Rine, C. M. (2023b). Social policy priorities to advance health and social work. *Health & Social Work*, 48(1), 3–4. <https://doi.org/10.1093/hsw/hlac039>
29. Smith, M. D., & Wesselbaum, D. (2025). Global evidence on the prevalence of and risk factors associated with stress. *Journal of Affective Disorders*, 374, 179–183. <https://doi.org/10.1016/j.jad.2025.01.053>

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30. Stamm, B. H. (2010). The concise ProQOL manual. ProQOL.org. https://proqol.org/ProQOL_Test_Manuals.html
 31. Truter, E., Fouché, A., & Theron, L. (2017). The resilience of child protection social workers: Are they at risk and if so, how do they adjust? A systematic meta-synthesis. *British Journal of Social Work*, 47, 846–863.