Integrating Leadership Diversity:  
A Social Worker’s Role during COVID-19

South Carolina State University, Orangeburg, South Carolina, USA

This article explores the impact of social work leadership integration and diversity and its response during the COVID-19 pandemic and its daily application. Social workers used various modalities to ensure that immediate priority was given to those individuals who were needed in various agencies and schools. Social workers provided added value and were essential to providing vital support through leadership skills in the development and operation during the COVID-19 pandemic. The social workers and leaders demonstrated the ability to intervene during the pandemic crisis through the infusion of a variety of leadership practices and integration. The profession itself makes social workers innate leaders. In the article, attention is given to the work that social workers embraced during the COVID-19 pandemic, to demonstrate that front-line workers are real experts. Social workers as leaders are guided by the code of ethics which employs a leadership style.

*Keywords:* leadership, diversity, leadership integration, social work

According to the zippa.com website, there are over 188,401 licensed social workers that are currently employed in the United States with 83.9% being women, and 16.1% being men. The most common ethnicity of licensed social is white (66.9%), followed by Black or African American (15.0%), Hispanic or Latino (12.4%), and Unknown (2.2%). (source: Licensed Social Worker Demographics and Statistics [2023]: Number Of Licensed Social Workers In The US (zippia.com)). The average social worker’s age is 45 years which requires a shift in leadership and the diversity of such. The leadership and management that are required for the middle-aged population are participatory rather than traditional authority. Leading a group of professional social workers thru a pandemic further requires transformational and transactional leadership in order to improve productivity. The Social Worker’s role during the pandemic in schools, hospitals, and other related agencies required a shift in operational approaches. This research is aimed to address the associated challenges.

During the COVID-19 pandemic, many lives were changed, and lives were lost because of COVID-19. These changes were due to financial, physical, and mental challenges for families, individuals, and children. In March 2020, most states ordered people to stay home. This order from the states meant that schools were closed; children stayed home, and employees that were once going to work every day also stayed home. The mandates
forced leadership diversity by developing creative ways of leading multiple agencies during a pandemic. Additionally, the older adult population could not see family members living in nursing home facilities. The staying home looked to be easy in the beginning, but it has taken a toll. Staying at home without an outlet or having one’s routine altered over a period presented stress and anxiety.

While these stay-at-home orders kept some people from work, other professionals that were viewed as essential had to continue to work because they were “essential workers.” States that had essential workers had to continue to work, which forced the integration of leadership diversity. Essential workers were seen as individuals that worked in the public health sector, such as doctors, nurses, and other frontline workers and they were visible daily. However, the conversation among state leaders never included social workers as essential. Social workers were left out of the conversation; not seen as important, yet, they still continued to offer a great deal of assistance during the pandemic. Social workers integrated leadership diversity by moving their services online or providing them over the phone, continuing to advocate and gather resources for their clients. According to Guerrero, Avgar, Phillips, and Sterling (2020), as cited by Lipe (2020) “social workers and home health care workers often [served] as the backbone of our social service delivery and healthcare systems, they have been and continue to be, seldom seen, heard, or valued” (p. 6). Despite their roles in hospitals and nursing homes, social workers are not recognized as “essential” workers.” Social workers may have not been recognized as essential in all states, but in March 2020, Governor Charlie Baker deemed social workers as essential in the state of Massachusetts. Although social workers have not been recognized as essential workers, they are ethically responsible for continuing to serve and address the needs of clients and advocate on their behalf. They continue to be the voice for those that are underrepresented or do not have a voice. One may not realize that for social workers, the work is not a choice but an ethical obligation.

During the pandemic, there were challenges with ethical obligations. Social workers had to be creative in the delivery of services without violating any code of ethics. Social workers perhaps thought or asked, how do we maintain confidentiality during the pandemic with the new delivery of services provided through technology rather than its usual way? There are many issues that needed to be considered with the use of technology such as maintaining confidentiality, as well as being competent to deliver services with the use of technology. This approach required leadership to embrace change through diversity.

Information and Technology during COVID-19

Prior to COVID-19, the use of technology was permeated before COVID-19 to provide services to clients. Services were provided through mobile devices, smartphones, and face-to-face, to name a few. However, due to the pandemic, the use of technology changed for social workers because there were no longer able to provide services face-to-face which led to an increase in the use of technology. According to Faye, Milne, Bogo, and Pereira (2020), with the suspension of all non-essential face-to-face social work as cited by, OCSWSSW, 2020, social workers [were], in effect, now relying on ICTs for all work and communication with clients. There was an increase and mandate to use technology, which many felt would impact the confidentiality and privacy of clients. Social workers were forced to provide these services with no training. In fact, Faye et al (2020) stated that “without proper training or support on providing this treatment, social service providers [were] left with many questions about how they can appropriately use technology to bridge the gap caused by COVID-19” (p. 485).
Social workers are aware that if they are not competent or hold a level of expertise in a particular area, they should not provide services. Barsky (2020) states that “the Code of Ethics says that we should not provide services unless we are competent to do so—...If they do not use the technologies right away, they may be violating ethical standards by abandoning clients in need” (Barsky, 2020, p. 3). In regard to maintaining confidentiality, the use of technology presents issues because of the breach of information that often takes place. Some technologies are not designed to be used for telehealth such as Skype, FaceTime, messaging apps, or other communication programs that are not specifically designed for health and mental healthcare communications (Barsky, 2020). However, due to the lack of clear protocols, social workers had to be creative in meeting the needs and demands of clients.

Social workers continued to serve their clients and communities during the pandemic. In the article, As I See It: Social workers essential personnel, so why aren’t we talking about them? Gerwirtz (2020) stated that “During a time of heightened anxiety for all, social workers … diligently[worked] to provide mental health and social services, creating and identifying resources to meet the evolving social needs of the clients and communities they continue to serve during this pandemic” (Gerwirtz, 2020, p. 3). Social workers are very important in addressing the needs of individuals, families, and communities. Social Workers assisted with coping with the impact of COVID-19. During this time, it is known that many people faced and are still facing anxiety, stress, depression, substance abuse, and mental health issues which social workers are expected to address. Social workers are able to provide counseling and resources to those families and individuals. Deering (2020) reported that “social workers [supported] individuals with depression, anxiety, and other mental health challenges. Quarantines and lockdowns increase isolation, intensifying these conditions for many people” (The Role of Social Workers During COVID-19, 2020).

**Roles of Social Workers**

Sometimes the roles of social workers are unknown, and many do not understand the roles of social workers. Barsky (2020) stated that “Social workers possess many important methods and skills to help clients and communities to cope and thrive in times of crisis and transition. We can provide moral and instrumental support, access to services, advocacy to address client needs, therapy to help clients deal with anxiety and trauma, community organization, and a myriad of other methods of helping” (Barsky, 2020, p. 2). Globally, the social worker’s role and tasks were very similar. The pandemic has shed light on the work of social workers. During the pandemic, social work roles and responsibilities looked different everywhere through leadership diversity. They worked long hours and worked in various settings. For example:

In mainland China, many social workers were called upon by the government to help implement the lock-down and to conduct duties in the community, including taking residents’ temperatures, checking digital health codes, and conducting home visits to trace suspected cases and close contacts. In the global North social workers were more commonly working to maintain existing services with individuals and families, and finding ways around the new constraints. Social workers had to adapt rapidly in all countries and invent new ways of delivering services. (Faye, Milne, Bogo, & Pereira, 2020, p. 484)

Social work is a multidimensional profession from working in the healthcare and school systems to social services, both private and public sectors where they provide an array of services. In addition, some social workers
can go into business for themselves. Guerrero et al. (2020) stated that “Social workers are key players in interdisciplinary healthcare and serve as a critical link to home healthcare workers by recommending and approving services for clients, managing and training workers, and advocating for client-centered supports” (p. 2). During Covid-19, social workers responded to the call and continued to meet the needs of clients. Social Workers are very essential and must continue to integrate the diversity of leadership. They used many skills and creativity to meet the high demands of families and individuals during the pandemic. Community agencies, schools, and other organizations should evaluate the use of social workers in leadership discussions and planning. The pandemic shed light on the diverse roles of social workers and opened the dialogue about the array delivery of services that can be provided. The pandemic demonstrated that there has been a need to increase the use of social workers in various arenas that will require the integration of leadership diversity.

**Conclusion**

The aftermath of the Covid-19 health crisis will continue to have an impact in years to come. However, the leadership of social workers will remain instrumental in the success of business and industry. The research in this article revealed a need for social workers before the pandemic and will continue to grow as the demands become apparent from post-COVID. Social workers provide the resources to help individuals, families, groups, and communities. Social workers’ leadership skills will continue to play a vital role in the recovery while transitioning towards a new way of living and leadership as the demands of social service systems, healthcare, education, business, and industry continue to require diverse leaders.

**References**


