

Full Length Research

The Role of Social Work in Health Care System of Iran

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Health policy makers in macro level in their plans can pay attention to health infrastructure and notify more to health care than treatment, and with increasing number of patients in the community, social workers can find causes of illness in the population. Present research focus on role of social work in the health field with library research and documents. The findings suggest that access to health care from one country to another, from one group to another, from one person to another is depending on the social, economic, cultural and health policies. In this field, the social workers are able to contribute the understanding of different cultures and environments. The correct and efficient support systems, adequate facilities and equipment provide high quality medical services and technology will be completed. Acceptance the clients and professional attitudes are the prominent features of social workers that cause them to assess the clients in three situations: 1- Needs assessment 2- The condition of the client 3- The interaction between person and community.

Key Words: Social Work, Health care system, Holistic, Need, Patient.

INTRODUCTION

Health policy-makers can plan their health infrastructure in macro level and pay more attention to health care than treatment. Due to the increasing number of patients in the community, social workers can find the main roots of illnesses and social problems by their skills. This means that social workers can use their unique techniques such as counseling, community based rehabilitation, group work, home visit and etc to improve the patient's health.

Medical professionals tend to medical model of health care. These professionals focus on medical history, test results, scrutiny the symptoms, treatment of the patient and eventually led to clinical measures and efficiency. This approach has been criticized because the social environment of the patients is neglected so the success of patient care team could damage.

With this approach World Association of Social Work

for Social Workers has expressed some standard roles in order to raise health and medical services and rectify the social needs for public (Samadi Rad, 2012: 56).

Social worker in a medical team helps to solve social problems in individual patients and their families, and the interaction between the patient and the family is the main role of social workers in health care for patients in order to obtain their health. Therefore the health of human beings needs to meet the growing demands and social workers need to balance life roles. Advances in medical science have provided hope and improved quality of life for many people, although this advancement, it has created ethical dilemmas for individuals and families.

Present research focus on roles of social work in the health care system in Iran to identify how social workers provide services for patients, and how they can increase

life quality of clients and patients.

Research necessity

The disease weakens tilting the balance of physical, psychological, social, economic and human, while increasing illness (both mental and physical aspects), perhaps in the future we will observe the crisis in health care system. Also Iran among the other countries has a high incidence of natural disasters, so the consequences of these disasters include outbreaks of certain diseases and the burden of the crisis on the social, cultural and family in the country. Therefore, social work intervention is necessary and it can play an effective role in these fields.

Research purposes

The purpose of this study includes:

1. Identify the essential role of social work in health care system.
2. How social workers in health care system can improve the quality and performance of this system?
3. What are the strategies and policies for overcoming the problems in social work in healthcare system?

Professional Social Work

Social work as a profession commonly is known in England about 110 years ago and is the benefactor and well-organized group of women to take shape. The ladies and gentlemen who are mainly women, who had excelled in their community, seeing the chaos and confusion of many of its citizens, mostly due to poverty, disease and aging in a busy hospital or home remedy poor were admitted to the idea fell and the good of the group and provide assistance to people who need it. Gradually, it became coherent organizational aspects of behavior and professional infrastructure established that nowadays a large and complex bureaucratic organization and must find any modern democratic society is considered (Samadi Rad, 2008). In 2007 the International Association of Social Workers has accepted the following definition of social work:

“Professional social work, social change, problem solving in human relationships, empowerment and liberation of people to enhance well-being and promotes development. Using theories of human behavior and social systems, social work intervenes at the points

where people interact with their environment. Human rights and social justice are the principles and foundations of Social Work” (IFSW, 2000, cited in Wilson, Ruch, Lymbery and Cooper, 2008:49). Social work has different aspects and includes a sophisticated analysis of the individual and the environment in human behavior (Hutchison, 2008).

The following is an attempt to define the meaning and purpose of their integration in social work:

“Social work is trying to get through to those who do not have the right to earn a living and help to achieve the highest degree of autonomy” (Crouch, 1979). Thus the material presented can be concluded that social work is the professional service or services or special activity that is based on specific knowledge and skills, the purpose of the assistance to individuals, groups or society in order to deal more effectively with the problems they are facing and thus to achieve personal independence and fulfillment of personal or social.

Historical Development of Medical Social work and the Ecological Perspective:

While the focus of social work practice in health care is constantly shifting, looking back historically helps find the continuity in practice and theory which serves to formulate a professional identity over time (Fee and Brown, 1997: 1763). Medical social work was one of the first specialties in social work practice and contributed to the development of the profession. Since 1850, physicians attached to hospitals sought volunteers and paid workers to provide follow up care for new mothers and babies to detect the social and environmental conditions that were associated with high infant mortality and rapidly spreading infectious diseases. Observing and articulating the social conditions contributing to poor health status is a competency derived from the practice of home visiting, which soon became a unique social work activity proving useful for more accurate medical diagnoses. Moreover, the casework approach to gathering information from a variety of sources to determine the needs of families with problems became a basic technique in developing medical social services (Lubove, 1965 cited in Rudolph, 2000: 31).

Social work practice entered the hospital setting when the desire to improve physician education led to an alliance in 1902 between the Charity Organization Society in Baltimore and Johns Hopkins Medical School. This alliance provided medical students with the opportunity to examine how social and environmental factors affected their patients. The support from this alliance legitimized social work as a component of patient

care within a hospital setting. The presence of caseworkers within a hospital environment concerned with social and other influences affecting the health of patients gave the hospital institution a more holistic and benign persona. Beginning in the early 20th century, Dr. Richard Cabot of Massachusetts General Hospital hoped that the activities of the medical social worker would support the development of preventive medicine. A preventive approach could help the community better understand the need to control environmental conditions that undermine health and delay recovery from illness (Ibid: 32).

Meanwhile social work was eager to identify itself as separate from the nursing profession from which many the early medical social workers had come. By 1915, early medical social workers seized the opportunity to organize a distinct professional identity based on the skill of relating psychic and social conditions to physical and emotional distress (Insley, 1998 cited in Rudolph, 2000: 32).

Understanding the effect of community life on the health status and patient condition was the skill that separated hospital social workers from the work of nurses and volunteers. Ida Cannon was among the first medical social workers who sought to standardize the skills and competencies required for hospital social services; such skills and competencies distinguished the professional worker from the volunteer and supported the recognition of medical social work as a distinct identity within professional circles. The effort to develop standards of practice led medical social work to become part of the curriculum at Boston University School of Social Work, which advanced the use of scientific principles in professional social work. By 1916, medical social workers established the first professional social work organization.

The early 20th century is noted for American society's awakening to the problems of rapid urbanization that coincided with an influx of immigrants who were ill equipped to deal with the exigencies of their new environment. This is also a time when diseases spread out of control, threatening large population groups. Social workers had a clear mission to seek out and identify the health and social problems of mothers, infants and children in which they lived. Some social workers gravitated to the community activist role in health services during the early part of the settlement house movement. As early as 1912, social worker Julia Lathrop directed the Federal Children's Bureau, which monitored the well-being of children nationally. Social workers, with the backing of the Federal Children's Bureau, were active in the formulation of the Sheppard Towner Legislation of 1921, and in the Maternal and Child Health (MCH) Title V Federal Legislation of 1935, which provided prenatal care and child health care as a public service of state and local government health departments. According to

Lesser (1985), former director of the Children's Bureau, the legislative history establish the Children's Bureau reveals Congress intent to provide resources to state and local governments to improve the care of pregnant women and children (Rudolph, 2000: 33).

Much of this history took place in an environment of growing professional interest in specialization. In today's world, however, specialization is no longer the panacea it was once thought to be. The current environment of health and social service delivery is multi-disciplinary. Service systems are being integrated to provide a continuum of services addressing a variety of special needs. Social workers are being asked to cross social service systems in their practice, to develop collaborative relationships with community based service systems, to organize wrap around services across programs to meet client needs, and to maintain clients in the community. Health care workers, mental health workers and child welfare workers serve the same populations and use similar practice skills. Hospital social workers are no longer hospital based. Increasingly, they practice in the community and the skills envisioned as unique to public health social work are blended with social workers in other fields of practice and with other disciplines as well. The population included in Medicaid and Child Welfare will find all of the helping professions working collaboratively with poor children, single parents and their families. The ecological perspective used in public health social work practice focuses on the interaction of person and environment which needs to be integrated within all fields of social work practice. Rather than being concerned with differentiating public health, social work as a separate field of practice, the combined skills of all fields of practice need to be focused on the tasks ahead (Rudolph, 2000: 33).

Therefore it can be concluded that social workers from the twentieth century have been involved in health care system such as providing services for poor people, worked with the elderly and patients with tuberculosis. In 1977, the World Association of Social Work published standards for the provision of health care services in hospitals and in 1980, the standards for social workers in health centers developed and it replaced hospital standards. Between 1981 and 1982, the National Association of Social Work Board's new developed standards approved and added to the previous standard of care. These standards include the activities of social workers in the field of kidney patient, disability, treatment and health care and followed by social workers into the health care system and the public and private sectors were engaged. More activities of social workers concentrate on transferring the patient or refer him or her to home and in some cases solve the financial problems.

In the capital of Iran, Tehran, in 1960 at Roozbeh Hospital, social work began to work, after a decade in

office the of Health and Welfare and then in the Ministry of Health, Social Work Department was established. Nowadays Iran received more than eight million patients annually in the hospitals. However, the hospitals do not have the ability to meet all the needs of patients. There are a total of 120,000 beds in which more than 80% of them are occupied, while the universal standard for occupation of bed is 75 percent. By analyzing the degrees of practitioners in the field of social work at the Ministry of Health, from the 552 employees as social workers only 32 person has social work degree (psycho-social therapy) and 100 persons has social services degree, That means only 5 percent of practitioners in the field of social work at the Ministry of Health graduated in social work and 20% of them graduated in social services and 75 percent of them have Bachelor or Diploma and the small number of social workers working in this field(website of Iran Health Ministry, 2010). Therefore macro planning policy based on a balance between patient, needs of community and health system with using social work team seems to be required.

Theories in Medical Social Work:

Medical social work is the large field of social work and psychology that focuses on treatment of patients. Each theory represents a formal approach to a patient's psychological needs and works to assess those needs and offer a supportive solution to help clients address those needs in healthy way.

Psychodynamic Theory

Psychodynamic theories investigate personal theories about a patient's past that led to the patient's current psychological state or condition. The emphasis is on the personal, individual insight of patients in relation to their or situation, both how it evolved and how it affects the patient currently. This includes the effects of trauma, such as childhood trauma or assault trauma, as well as personal motivations for psychological health or troubles. Psychodynamic theories seek to learn from a patient's past and lead them to an understanding of how their past continues to affect them. The goal of psychodynamic theories is to help patients become aware of their own influences on their condition and to personally avoid those influences.

Cognitive Behavioral Theory

Cognitive behavior theories focus on a patient's current situation with emphasis on how to overcome the

problems they are facing. While psychodynamic theories focus on a patient's past, cognitive behavioral theories only recognize a patient's history as an underlying cause of their current state. Instead, cognitive behavioral theories often involve changing a patient's habits, perceptions and behaviors, in order to overcome personal anxieties and stress caused by their unhealthy behaviors. This may include communication techniques or discussing alternate behaviors that will yield a healthier outcome.

Humanistic Theory

Humanistic theories focus on positive emotional reinforcement and the state of a patient's emotions at the moment. The idea behind humanistic theories is that each patient has the ability to overcome his problems, but long-term negative reinforcement can erode an individual's ability to succeed at doing so. The humanist approach focuses on the moment, avoiding evaluations about a patient's past or future. This idea is that the past and future are both filled with anxieties and problems that can hinder a patient's healing.

Post-Modern Theory

Post-modern social work theories concentrate on the empowering of patients to confront and overcome their problems. These theories acknowledge that no single psychological theory is adequate to help all patients and it's better to evaluate each patient individually. Post-modern social workers evaluate a patient's history, as well as their current emotions. The focus is self-empowerment and giving patients the tools and techniques they can use to confront their own issues, proactively, in their own lives.

Social workers Standards in Health Care System:

Journal of the National Association of Social Work in Health Care expressed standards for social workers considered that some of them are:

1. Ethics and Values
2. Health inequalities
3. Cultural Competence
4. Privacy professionals
5. Knowledge
6. Assessment
7. Intervention and Treatment
8. Leadership in social work
9. File Management
10. Crisis Intervention
11. Empowerment

Most of these standards, the role of social work in the health care system has been investigated. Therefore, according to this definition, one-dimensional view of the patient and the patient is almost obsolete.

Iranian constitution and the role of social work in health care system:

In Iran, the Ministry of Health is defined by the constitution therefore it's responsible for health care tasks and social workers are also one part of this ministry. In the constitution the Ministry of Health has been defined:

For optimal use and coordination of medical facilities and extended to provide health care, education and medical research the 29th principle express: "The entitlement to social security and retirement, unemployment, old age, disability, orphans, accidents and the need for health services, medical care, insurance and ... are the public rights of citizens and it's the government duty to provide these services with public finance and profits from the participation of local people to support every citizen's needs".

For each part of the duties of the ministry of health policy and action plan has been approved by the Council. Among the tasks formulated and approved for social work as well as a few tips that are mentioned briefly (Administrative Affairs and Employment, 1995)

1. Planning in order to identify issues and constraints created by the families of patients and how to deal with it.
2. Participate in medical teams and provide information on issues and problems that can be effective in making decisions
3. Coordinated in collaboration with the medical team in order to improve the patient and the medical team cooperation with social worker.
4. Emphasis on group work with patients who are hospitalized for long time.
5. Support after discharge.
6. Social services at home (Home care)
7. Professional practice of social workers (social workers working with cancer patients, AIDS patients, etc.).
8. Follow Legal Affairs patients.
9. Investigate and solve the health problems of patients admitted to care centers.
10. Get introduced to guide patients admitted for medical and paramedical clinics and other medical institutions.
11. Collect and evaluate cost-free discount applied to the unit's social worker and the amount of discount centers ministry, as well as for follow-up funding from the

Ministry of Health and assign it to the centers.

12. Cooperation in the form of in-service training courses to improve the quality of social work.
13. Gathering statistics and information on the activities of social workers and medical centers to examine and evaluate the activities and reflection related authorities.
14. Cooperation in the field of practical training (internship) for students of social work.
15. Cooperation and provide social services or send social workers to help victims of natural disasters such as earthquakes, floods and other natural disasters.

The objectives in the field of healthcare in general is the specific mode and influenced policy, attitudes, ideologies, values and scholars in this field. But the concept of social work intervention aims to improve the social functioning of the health care so the goals and roles of social work will become clearer below:

1. Evaluation of stress on psychological, social, emotional and physical environment for patients and their families may encounter and provide assistance to them directly.
2. Play the role of counselor, advocate, liaison, mediation and helping patients to make optimal use of health care programs.
3. Providing health care programs, including prevention programs and improving the quality of life in a way that is applicable and accessible to all patients and members of the community.
4. Human and social support programs for the benefit of needy patients.
5. Create interaction and communication between health care personnel and patients treated with the positive cooperation between them is obtained.
6. Participation and correct analysis of health policy and planning (member of making macro policy committee).
7. Leadership programs in the areas of participation and patient education.
8. Management and evaluation of how to provide health services to the poor through research.
9. Changing health care services from service center to need center and the combination of the two.
10. Working with the mentally ill, frail and their families and assess their needs.
11. Identify the main causes of mental illnesses and other diseases with providing community based rehabilitation.

CONCLUSION

According to social and collectivist perspective, social

work seeks cooperation and mutual support in the community. But most deprived people do not have the power over their own lives. Unfortunately, nowadays most of the time, life of the patients has been tied with income levels. While we have the best equipped public and governmental hospitals, the culture of sending patients to private facilities and practices have been expanded. Therefore people, who can not go to private centers, are faced with two options: 1-They can choose private treatment and hospitals with lots of debt collection 2- Forcibly with lots of stress and emotional turmoil the patients should go to public part. In both setting anxiety and emotional stress is for low-income patient.

Nowadays Social workers in order to support social functioning of individuals, families and communities apply a holistic and rational approach instead of considering one-dimensional approach to human. In this approach the other dimensions of human such as social, cultural, environmental, physical, emotional, value and dignity of human beings is also scrutinize. Therefore the important role of social workers in the field of health is very important because the social workers are the fundamental performers in health care system.

The role of social work in comparison with other professions in health care system and social services are so different. Acceptance of the clients and professional attitudes are the prominent characteristics of social workers that cause them to assess the clients in three situations: 1- Needs assessment 2- The condition of the client and 3- The interaction between person and community. While other professions concentrate on certain aspects of a person's life such as health needs, education, income or housing. Important role of social workers in health care is when the three sectors of society, patient and health care system are integrated so it will help them to avoid facing the problems in one dimension.

Suggestions

According to the material presented can be used to improve the quality of services to patients, families and communities aimed at following suggestions are offered:

1. The social workers in the health care system can play the role of researcher for finding the detection of diseases and patient needs.
2. Social workers in health care system can make major decisions regarding the type of services and enhance patient satisfaction.
3. In order to avoid increasing the level of diseases in the community, social workers should improve the structures and institutions of society, scientific planning and management should be considered.
4. For preventing the diseases in society, we will require the cooperation of all agencies and governmental and nongovernmental organizations (NGOs).
5. Increasing funds share of gross domestic income to health care system.
6. Opening the Social Work Department in health care system and support all the hospitals with professional social workers.
7. Changing the physician-centered approach to patient-centered approach in health care system.

REFERENCES

- Administrative Affairs and Employment (1995). Law and employment regulations. Tehran: Administrative Affairs and Employment organization publication.
- Crouch C (1979). Social Work Defined. National Association of Social Workers.
- Fee E, Brown TM (1997). Why History? American Journal of Public Health. 87(11).
- Hutchison E (2008). Dimensions of Human Behavior Person and Environment. London, Sage.
- Insley V (1998). Social work in Public Health and Medical care. Washington DC.
- Rudolph CS (2000). Educational Challenges Facing Health Care Social Workers in the Twenty First Century. Professional Development: The International Journal of Continuing Social Work Education, Vol,3. No,1.
- Samadi Rad A (2008). social work in Iran. Kayhan 25/04/2008.
- Samadi Rad A (2012). Retraining of Social Workers Employed in Health Care. Tehran.
- Wilson K, Ruch G, Lymbery M, Cooper A (2008). Social Work. Harlow, UK, Longman, Pearson.
- Website of Ministry of Health website (2010). Available at: www.webda.ir