

Advancing Health Equity for the Disadvantaged: The Transformative Role of Social Work in Bridging the Gap

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Introduction to the Thematic Collection

The constitution of the World Health Organisation (1946) endorses the highest attainable standard of health as a fundamental right. The commitment to the right to health has always been a global priority. The Alma Ata declaration affirmed the global commitment to "the right to health" and the need for all people to attain an acceptable level of health (World Health Organization, 1978) and the Sustainable Development Goals (SDG) target 3.8 emphasises the need to extend accessible and affordable healthcare in the form of Universal Health Coverage (United Nations, 2015). However, despite continued efforts, globally, the violation of the right to health is rampant in the forms of 'violation of commission', 'violation of the obligation to protect', 'failure to fulfil minimum core obligations' and 'violations related to gender discrimination' (Chapman, 1998). The right to health envisioned as health equity is an ambitious goal rooted in the idea of social justice that seeks to attain the highest standard of health possible for all, particularly vulnerable sections of society, as persistent health inequalities can entrap marginalised populations in a vicious cycle of poverty and ill health (Wagstaff, 2002). The social factors that influence and shape health outcomes, commonly known as social determinants of health (SDOH) constitute an important aspect in this regard. SDOH are those conditions "in which people are born, grow, work, live, and age, and the wider set of forces and systems shaping the conditions of daily life," including income, education, occupation, housing conditions and food security, among others, (World Health Organization, n.d.). Addressing SDOH is essential in ensuring the right to health for all, and social work, as a public health profession, advances health equity by addressing the problem of SDOH (Kerson & Lee, 2016).

Historically, social work has been a public health profession with the goal of advancing health equity founded on the principle of social justice (Martinez, n.d.). The social work profession has, from the days of its inception, played a crucial role in eradicating health inequalities that are shaped by broader social systems. Social workers often work across the boundaries of policy, healthcare settings, community and families to attain the goal of health equity (Martinez, 2019). While most healthcare professionals work with specialised areas of expertise, social workers "are uniquely positioned across the healthcare system—in hospitals, primary healthcare, public health, community settings, non-profit organisations and elsewhere" (Ashcroft et al., 2021, p.2) to facilitate interventions that cut across micro, macro and meso levels. This cross-boundary nature of the social work profession ensures the judicious combination of methods and materials to attain the goal of health equality, particularly through preventive medicine practices.

However, over the years, due to the influence of the medical model and market forces, health social work is increasingly being identified with and limited to hospital-based medical social work practices that specialise in individual-oriented interventions (Reisch, 2012; Ruth et al., 2019). Disease or ill health is often the end product of intersecting disadvantages and discriminations that people are subject to. Individuals are often born in and live with such disadvantages that lead to poor health outcomes. Health social work is a key public health profession that addresses these disadvantages, which are often causally linked to ill health. However, social workers face immense challenges in reconciling the incongruence between the traditional medical model and social work values (Mitchell, 2012). Given health outcomes and illness experiences of individuals are shaped by the settings from which they hail, the resources available to them to cope with the illness and the structural deficits that make them vulnerable to poor health outcomes, holistic public health interventions are necessary to achieve health equity. Given the historical commitment of health social work in addressing health inequities, comprehensive health social work interventions constitute an important component in achieving the "highest attainable standard of health as a fundamental right" for all.

Reiterating the role of social work as a public health profession transcending the limitations of the medical model, this special issue brings together a collection of articles that highlight the pivotal role of social work in ensuring the right to health and advancing health equity. The collection shall help the readers understand the role of social work in advancing health equity and the right to health for the disadvantaged and remind social work practitioners about their duty, as public health professionals, to work for the comprehensive health outcomes of the population, especially the disadvantaged. This collection will also help in the documentation of social work practice and the role of social workers in advancing health equity and the right to health in diverse settings and cultural contexts.

Overview of the Articles in this Collection

Abdulaziz Albrithen et al., in their article titled *Obstacles Faced by Palestinian Refugees in Accessing Health Services*, discuss how Palestinian refugees face significant challenges in accessing health services. The authors, while deciphering the intersectional nature of disadvantages that constrain Palestinian refugees from accessing healthcare services, also discuss the limitations of social work interventions in the region and suggest ways to improve service delivery. The article can help social workers understand the health challenges faced by people affected by conflict and war and how social work interventions can help improve their lives.

The article titled *Health Financing and Equity in Healthcare for Disadvantaged Groups in Vietnam* by Thi Xuan Huong Le et al. discusses the role of health financing in ensuring equity in accessibility to healthcare services for disadvantaged groups in Vietnam. The study also describes the nature of services provided by social workers to ensure equity in accessibility to healthcare services. Based on the findings, the authors also suggest measures that need to be implemented to improve health social work education and practice. The article, besides giving insights regarding the role of social workers in advancing health equity, also helps the readers acquaint themselves with the nature of social work practice in a socialist republic.

Nada Eltaiba and Suad Al Hamad, in their article titled *Social Work at Hamad Medical Corporation: Historical Perspective*, discuss the origins and evolution of health social work practice in Qatar through the narratives of the pioneers in Hamad Medical Corporation. The article serves as a historical narrative of the introduction and evolution of health social work

in the context of the Middle East, introducing the authors to early phases of social work in the region and the role the profession plays today in ensuring better health outcomes for people in the region.

The article *Poly-Victimisation and Health Risk Behaviors amongst Street Children in Zimbabwe* by Constance Gunhidzirai and Leila Patel discusses one of the critical challenges faced by street children in developing countries, i.e. poly-victimisation. The authors discuss the problem and its adverse impact on the physical and mental health of young children, and the role of social work professionals in helping the children attain comprehensive physical and mental health.

Md. Golam Azam et al., in their article titled *Ensuring Equity in Health Services in Hospital Settings through Social Work Interventions: A Mixed Method Study*, discuss how health social workers can work towards advancing health accessibility in hospital settings. Drawing from the data on diabetes patients in a tertiary care hospital in Bangladesh, the authors argue that health social work interventions can help improve the quality of service availed by the patients. The article suggests that health social work interventions can enhance the quality of services provided in tertiary care settings when practised effectively.

Meenu Anand and Gunjan Chandhok, in their article titled *Re-Examining Intimate Partner Violence: Feminist Social Work Reflections*, reflect on intimate partner violence and its impact on women's mental and physical health from a feminist social work perspective. The authors emphasise the need for integrating feminist social work perspectives in social work education and practice to address intimate partner violence effectively. The readers are introduced to the basics of feminist social work theories and the methods to integrate them into practice.

In their article titled *Domestic Violence*, *Mental Health*, *and COVID-19: A Community-based Study of Women in Delhi*, Ajit Kumar Lenka et al. discuss how unequal power relations in households can result in domestic violence. The authors, based on their findings, emphasise the need for social action to combat domestic violence, as it can adversely impact the mental and physical health of women.

Ngaopunii Trichao Thomas, in his article titled *Social Work Education and Health Equity in India: A Critical Review*, critically evaluates social work education in India and advocates for a curriculum revision to highlight the need for fairness in health provision. The article helps the readers understand how the social work curriculum needs to adhere to the principle of social justice and promote health equity by promoting contextualised knowledge and critical pedagogy.

Sigamani Panneer et al., in their article titled *Prevalence, Patterns and Implications of Gender-Based Violence against Women –Challenges and the Way Forward*, discuss the implications of gender-based violence (GBV) against women through a systematic review. The authors examine the forms of GBV and their impact on the physical and mental health of women. In addition, the authors also highlight the role of social work in preventing and addressing GBV.

The article titled *Preventing and Controlling Tuberculosis through Village Adoption Model in Koppal District of Karnataka: A Case Study* by D. Srinivasa discusses the success of a health intervention model in eliminating TB in India. The author emphasises how community-

oriented intervention models can be a successful tool in implementing health promotion strategies. The author also lays down some of the roles that health social workers can play in the successful implementation of health promotion strategies.

Hanumant Waghmare et al., in their article titled *Nutritional Status among the Women and Children in Bangladesh: Implications for Health Social Work Practice*, discusses the pressing problem of undernutrition in Bangladesh. The authors argue that addressing undernutrition among women and children requires a multisectoral approach, with social work having a very important role in dealing with the social determinants associated with undernutrition. The article helps authors understand how health social work in developing countries needs to have a community-based outlook for successful public health outcomes.

Venkatanarayanan Sethuraman et al., in their article titled *Inter-State Migration, Footloose Labour and Accessibility to Health Care: An Exploration among Metro Workers of a Camp in Bengaluru*, deciphers the plight of migrant workers in Bengaluru, India. The authors argue that migrant workers have poor accessibility to health facilities owing to poor knowledge. Addressing this problem from legal, economic and psychological vantage points, the authors argue that social work interventions can improve the health services related knowledge and awareness among migrant labourers and thereby help improve their health prospects

The article titled *Health Social Workers in Promoting Mental Health Equity: Voice and Agency for the Marginalized* by Chandramathi Ramaswamy et al. is a systematic review that inquires about the role of social workers in mental health promotion. The authors highlight the global shortage of mental health professionals and the need for trained mental health professionals, including social workers, to advance the mental health outcomes of the population.

Oluwagbemiga Oyinlola et al., in their article titled *Understanding Experiences of Medical Social Workers Managing Older Adults with Chronic Illnesses: Insights from Nigeria*, introduces the readers to the nature and scope of gerontological social work in Nigeria. Based on the narratives of gerontological social workers in Nigeria, the authors bring out some of the challenges faced by social workers working with older adults. The readers are introduced to the landscape of gerontological social work in Nigeria and are also reminded of the emerging need for social work interventions with older adults.

Fathima Sherin Ottakkam Thodukayil et al., in their article titled *Structural Violations of Mental Health Equity among Divorced Women: Challenges and Policy Implications*, discuss the impact of divorce on the mental health of women. The authors argue that women experience significant mental health challenges in the post-divorce phase, and structural disadvantages like gender stereotypes and cultural factors limit their access to mental health services. The authors advocate for extending social work service delivery through possible channels to improve the mental health prospects of divorced women.

Closing Remarks

This special issue brings together fifteen insightful articles that affirm the vital role of social work in challenging systematic inequities and driving progress towards health equity for marginalised populations. The collection collates the experiences of social workers from across the globe in advancing health equity, emphasising the important role of the social work profession in public health. We hope that this collection helps document the role of the social work profession in advancing health equity and thus contribute to the social work literature.

References:

Ashcroft, R., Lam, S., Kourgiantakis, T., Begun, S., Nelson, M. L., Adamson, K., ... & Craig, S. L. (2021). Preparing social workers to address health inequities emerging during the COVID-19 pandemic by building capacity for health policy: A scoping review protocol. *BMJ Open*, 11(11), e053959

Chapman A. R. (1998). Conceptualising the Right to Health: A Violations Approach. *Tennessee Law Review*, 65(2), 389–418.

Kerson, T. S., & Lee, J. E. (2016). Public health social work primer. In T. S. Kerson & J. L. M. McCoyd, & Associates (Eds.), *Social work in health settings: Practice in context* (pp. 287–295). New York, NY: Routledge.

Martinez, L. S. (2019, October 28). Health Equity, Social Determinants of Health, and the Role of Social Work. *Health City: Boston University Center*. Retrieved from https://healthcity.bmc.org/population-health/social-work-health-equity-social-determinants

Mitchell J. A. (2012). Integrating Education on Addressing Health Disparities into the Graduate Social Work Curriculum. *Journal of teaching in social work*, 32(5), 471–486. https://doi.org/10.1080/08841233.2012.725458

Reisch, M. (2012). The Challenges of Health Care Reform for Hospital Social Work in the United States. *Social Work in Health Care*, 51(10), 873–893. https://doi.org/10.1080/00981389.2012.721492

Ruth, B., Wachman, M. K., & Marshall, J. (2019). Public Health Social Work. In S. Gehlert & T. Browne (Eds.), *Handbook of Health Social Work* (1st ed., pp. 93–118). Wiley. https://doi.org/10.1002/9781119420743.ch5

United Nations. (2015). *Transforming Our World: The 2030 Agenda for Sustainable Development*. Retrieved from https://sdgs.un.org

Wagstaff, A. (2002). Poverty and health sector inequalities. *Bulletin of the World Health Organization*, 80, 97-105.

World Health Organization. (1946). *Constitution of the World Health Organization*. Retrieved from https://www.who.int/about/governance/constitution

World Health Organization. (1978). *Declaration of alma-ata* (No. WHO/EURO: 1978-3938-43697-61471). World Health Organization. Regional Office for Europe.

World Health Organization. (n.d). *Social Determinants of Health*. Retrieved from https://www.who.int/health-topics/social-determinants-of-health

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