ROLES OF SOCIAL WORKERS IN MENTAL HEALTH CARE TEAMS: A SYSTEMATIC REVIEW OF THE LITERATURE

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Abstract: The aim of this review is to determine roles of social workers in mental healthcare teams. This study used a systematic type of literature review in meeting its objective. It involved an online search of articles published in the ProQuest Central database. The search strategy involved retrieving articles using the key words 'Social Worker' AND 'Mental health care' from the ProQuest Thesaurus.

A total of 47 articles were retrieved from the ProQuest database. After screening and conducting an eligibility test, a total of 37 articles were excluded from the study for failing to meet the study inclusion criteria. We included articles that; were published in the English language from 2015 to 2020, outlined roles of social workers in mental healthcare teams, and had verifiable scientific procedures. The remaining 10 articles were subjected to content analysis after fulfilling all inclusion criteria set for the study. From the results of content analysis of the 10 articles, Four (4) articles showed that roles of social workers in mental healthcare teams were those of social support facilitators, three (3) articles showed that their roles were those of social rehabilitation specialists, two (2) articles indicated that they played roles of social reintegration specialists, while one (1) article showed that their roles were those case managers.

We concluded that in mental healthcare teams, social workers play roles of social support facilitators, social rehabilitation therapists, social reintegration specialists, and case managers.

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Introduction

Professional teamwork is the most effective and efficient way of providing comprehensive mental health care. It involves organizing professionals from various disciplines into teams with the sole purpose of improving the wellbeing of their patients. In healthcare, more so in mental healthcare, such professional teams may be formed through adopting either one of the following approaches: Multidisciplinary, Interdisciplinary and Transdisciplinary approaches. . Multidisciplinary approach involves forming of healthcare teams that comprises of professionals trained in various fields of study. These professionals bring expertise in their fields of study to address specific domains of mental health problems. For instance some of them may be involved in restoring equilibrium of brain neurotransmitters while others, such as Social workers, may focus on reintegrating patients back to their families and communities (Grant & Lusk, 2015). In this type of approach, professionals work independently with their own discipline specific care plans. The implementation of these care plans are in turn coordinated from centralized points. On the other hand, the interdisciplinary approach involves a team of professionals drawn from various disciplines who complement each other's roles. Healthcare teams that adopt this approach, normally have their activities integrated to the point where assessment, diagnosis and intervention are not done independently by each discipline but rather jointly as a team. This approach normally results in a continuous and holistic care of patients. Finally, transdisciplinary approach to healthcare, involves diffusing traditional boundaries between various disciplines to create a new theoretically, methodologically and translationally innovation that moves beyond discipline specific approach'. In this case, a professional performs roles that are traditionally reserved for other disciplines. For instance, a social worker as a case manager, in consultation with other professionals, may carry out procedures such as mental health examinations, diet planning etc. (Kopinec, 2006; Hester et al., 2017; Shaw & Jankowska, 2018). Mental health problems normally come intertwined with a multitude of medical, social, emotional, and spiritual problems, necessitating the need for a teamwork approach. Our aim of writing this article is to systematically review literature so as to determine possible roles of Social Workers in mental healthcare teams (Ashcroft et al., 2017).

Materials and Methods

This study employed a systematic type of literature review in meeting its objective. It involved an online search of articles published in the ProQuest Central database. The ProQuest database was chosen over other databases because of its inbuilt thesaurus that aid in retrieving articles with a high level of

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precision.. The search strategy applied in retrieving articles involved the use of key words 'Social Worker' AND 'Mental health care' from the ProQuest Thesaurus. In addition, the following filters were applied during the search so that only articles outlining current practices in mental health care could be retrieved; Full text, Peer Reviewed, Scholarly Journal, and article published within the last 5 years i.e. 2015-2020. From the retrieved articles, we selected articles that met the following inclusion criteria for content analysis articles: were published in English, outlined roles of social workers, were peer reviewed and had verifiable scientific procedures.

The retrieved articles were later taken through four stages of analysis: Identification, Screening, Eligibility, and Inclusion stages. Articles that failed to meet criteria set for each stage of analysis were excluded from the study. A point-based system was used in deciding whether articles needed to be included or excluded from the study. Each of the three authors independently rated and awarded points to articles that met all the set criteria for each levels of analysis. Articles that failed to score a minimum of three points were excluded from the study. This was because each of the three authors was only allowed to award a single point per article.

Results

A total of 47 articles were retrieved from the ProQuest database using the keywords. Later, 22 articles were excluded from the study at the screening stage for not being relevant with the research topic. Further, 15 more articles were excluded from the study at the eligibility stage for not meeting the set inclusion criteria.. A total of 10 articles satisfied all inclusion criteria for the study and were subjected to content analysis. From the content analysis, four articles indicated that the roles of social workers in mental healthcare teams to be those of social group facilitators, three articles indicated that their roles to be those of social rehabilitation specialists, two showed their roles to be those of social reintegration specialists, while only a single article outlined their roles to be those of case managers.

Articles retrieved for analysis

We retrieved a total of 47 articles, 22 articles were later excluded from the study after they were considered not relevant. At eligibility state 15 more articles were excluded from the study for failing to satisfy inclusion criteria (Figure 1).

Discussion

Mental health disorders are deviations from normal cognitive processes. Key signs of these abnormal deviations are difficulties in expressing or regulating cognitive processes, emotions, and behaviors. Mental health disorders are caused by a complex interaction between biological, psychological, and environmental factors. Genes, neurotransmitters and hormones, and abnormalities of brain structures have been identified as key biological factors that lead to the development of mental disorders. On the other hand, psychological and environmental factors such as trauma, abuse, neglect, poverty, drug abuse, and brain injuries have been found to trigger the development of mental disorders (Arias et al., 2002; Johnson et al., 2019; Sánchez et al., 2017; Ziegler & Domschke, 2018). A team of healthcare professionals from various areas of specialization is thus needed to holistically address all aspects of mental health disorders. Social work is one of the professions that immensely contributes its members to this team. In this study we sought to determine the roles they play in mental healthcare teams. We found out they played roles of: Case managers, Social rehabilitation therapists, Social support group facilitators, and Social reintegration specialists.

a) Case Management

Case management is a process that involves organizing and coordinating resources and services in response to healthcare needs of individuals (Blundo, 2016). It plays an important role in deinstitutionalizing mental healthcare by making sure patients, especially those with long term care needs, get seamless access to care. This is normally realized through prompt coordination of their appointment schedules, sourcing of relevant information, and processing of various documents required of patients such as those that deal with finances and hospital bills. Depending on the approach used in formulating the mental healthcare team, whether multidisciplinary, interdisciplinary, or transdisciplinary, a case manager is normally needed in coordinating activities of patients. In case a social worker is appointed as a case manager, he/she may be involved in coordinating activities such as therapy sessions, liaising with the State and community agencies, and reintegrating patients back to their communities (Hall et al., 2002; Shaw & Jankowska, 2018) According to Suzuki et al., (2019) roles of

social workers in providing mental healthcare includes assisting psychiatric patients in receiving social and community services. They further stated that social workers may contribute to the mental healthcare team, by furnishing members of the team with information concerning family, financial and social situations of their patients.

Figure 1: Flow diagram outlining the review process

Table 1: Characteristics of the 10 articles selected for the study

Authors	Research Objectives	Scientific procedures	Social worker's Roles
Singh et al (2018)	Efficacy of social skills training	Approved by ethical committee	social rehabilitation therapist
Suzuki et al (2019)	Properties of case management screening sheet	Approved by ethical committee	Case manager
Lee et al (2018)	Effectiveness of inhouse vocation training	Applied retrospective cohort design	social rehabilitation therapist
Gouveia et al (2017)	Describe mental health status of the homeless	Standardized questionnaire was used	Social reintegration specialist
Hean et al (2017)	Effects of interprofessional collaborations	Standardized questionnaire was used	social support group facilitator
Gowda et al (2019)	Determine default from psychiatric treatment	Approved by ethical committee	social support group facilitator
Ashcroft et al (2017)	social work scope in psychiatry	protocol	social rehabilitation therapist
Chen et al (2019)	Explore Perspectives of family caregivers	Informed consent was obtained	social support group facilitator
Vicary & Bailey, (2018)	Impact of integrated care on mental health social work.	Approved by ethical committee	Social reintegration specialist
Beckers et al (2018)	Determine success of referrals	Informed consent was obtained	social support group facilitator

Source: Authors

b) Support group

Mental illnesses have significant negative impacts on both patients and their caregivers. Stigma, loss of controls over one's body, skyrocketing cost of care, and burnout are some of the challenges patients and caregivers cope with. Without significant professional support, most family members and patients may have difficulties in managing or overcoming these challenges. Social support groups come handy to them. This is because such groups have been known to provide platforms for providing emotional support, information, affirmation, and personal assistance (Cowan, 2018; Chen et al., 2019; Elias & Upton-Davis, 2015; Gowda et al., 2019).

Social support is a type of social resource that accumulates through networks of human relationships that protects individuals from the effects of stressors (Robinson & Weiss, 2020). This type of social resource can be tapped through group work and be used in assisting patients and caregivers of people

living with mental illnesses. The power of this resource can even be further concentrated by forming social groups exclusively for people with shared life experiences. In this case, shared experiences may range from diagnosis, treatment to challenges of living with or caring for people with mental health problems. The aim of forming such groups is usually to mitigate or ameliorate the impacts of mental illnesses on patients and their families. There are several types social support groups which can be formed to serve specific goals, for instance; peer led support groups are normally formed by either patients themselves or their caregivers for the purpose of sharing their own lived experiences (Castelein et al., 2015). According to Jolly et al., (2019) sharing of experiences help in improving physical and psychological wellbeing of patients and their families. Therapy support groups are normally created for the purpose of taking patients or their families through a set of activities that are considered to be therapeutic such as group counseling, Educational support groups are groups formed for the purpose of making patients or their caregivers be knowledgeable about issues they face, and Aftercare support groups are designed to provide necessary assistance to members who have been discharged from mental health facilities (Cowan, 2018).

c) Reintegration

Mental health problems have an ugly and hidden side that is rarely talked about. They usually leave mentally ill patients with a trail of social problems. One of these social problems is social devaluation, i.e. lowering someone's social position in the societal hierarchy. Stigmatization is the main factor that makes psychiatric patients to be devalued in the society. . Due to social devaluation, psychiatric patients, whether they have recovered or not, are normally pushed to second positions in all societal events and interactions. This is because people tend to harbor negative attitudes towards them. . People may begin to treat them with suspicion, question their capabilities, and even isolate, or discriminate them. Social devaluation has far reaching implications on mentally ill patients; it may push them to the margins of the society. Due isolation and stigmatization, people with mental health disorders may have difficulties in securing employment or accessing societal services such as education and healthcare. Without stable sources of income and shrinking networks of acquaintances, they may be disadvantaged when it comes to participating in societal events such as purchasing of commodities like housing (Dethier, 1996; Hoffmann, 1997; Lee et al., 2018) . Left alone on the margins of the society, mentally ill patients, may never regain their social positions in the society. . Thus, a structured process of reintegrating them may be required. There are two approaches of reintegration which social workers may apply in bringing them back to the core of the society. The two approaches are social and economic reintegration. Social reintegration involves the process of rebuilding with patients, family and community ties that may have been severed due to mental illnesses. It may also involve dis-integrating patients from unhealthy social networks such as those associated with drug addiction homelessness etc. Economic reintegration normally involves improving employability of patients who have recovered or have successfully gone through the process of rehabilitation, by taking them through skills enhancement trainings and other activities that secures their livelihood. Enhancing livelihood security involves improving on the levels of the asset pentagon i.e. human capital, social capital, physical capital, natural capital, and financial capital (Gouveia et al., 2017; Subedi, 2018).

d) Social Rehabilitation

Rehabilitation is a concept that has its origin in medicine, where it was used to refer to the process of restoring failing health to its former condition. More specifically it refers to the process of 'enabling individuals with disabilities, including those with mental health problems, to interact with their environments and maintain optimal physical, sensory, intellectual, psychological and social functioning levels'. In the mid-1970s, a new perspective of disability emerged that gave way to the development of social model of disability. Proponents of this new model argued that disability is not a condition confined to individuals but rather something that is imposed on them through environmental barriers. With this, focus, rehabilitation changed from addressing shortcomings of individuals, as espoused in the medical model of disability, to removing of social and physical barriers such as discrimination and housing designs that stands on the way of people with disability. In addition, methods for carrying out rehabilitation have also expanded to include; counseling, vocational training and educational programs rather than reliance on pharmacotherapy (Gough, 2013; Albrecht, 2015). Usage of social rehabilitation in the context of disability, more so mental health, refers to the process of restoring abilities and skills of patients that had been lost due to illnesses. These abilities and skills that needs to be restored may

range from communication skills, performance of activities of daily living, to relationship skills. Restoring these skills and abilities may require mentally ill patients to undergo some interventions that improves their abilities to perform their social roles. In some situations, depending on the severity of the mental disease, complete restoration of these skills and abilities may not be attainable. In such cases, the most viable option is to teach them how to compensate for the loss of such skills. . For instance, patients who have lost ability to speak due to mental illness may be taught sign language as a way of compensating for the loss (Stein, 2004). Social rehabilitation does not end there, it goes further to involve all sets of activities that are geared at removing all social and physical barriers that may have been erected on the ways of people living with mental disorders, such social barriers include discrimination in accessing education and job opportunities (Kusin et al., 2019; Singh et al., 2018; Šebestová, 2019).

Conclusion

The aim of this study was to determine the roles social workers play in mental healthcare teams. After analyzing several articles, we concluded that their roles are case managers, social rehabilitation specialists, social support facilitators, and social reintegration specialists

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