

PSIWORLD 2013

Assessment of social functioning through social fieldwork documents for persons who have been psychiatrically diagnosed

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Abstract

Also known as social investigations or field surveys, social fieldwork documents (SFDs) are required by psychiatrists, psychologists or medical expertise commissions for establishing a diagnosis or assessing the seriousness of a disease or for establishing a therapeutic strategy. The first part of the paper comparatively analyses two “extreme” types of accomplishing SFDs: the “permissive” model and the “hyper-formalized” model; the conclusion we have drawn is that there is no unanimously accepted methodology in the domain. This is the reason why in the present paper we suggest a methodological model that comprises a cognitive matrix, as well as a set of procedures (how one should search), which are meant to improve SFDs methodology. The suggested methodological model is theoretically grounded on ICF, The International Classification of Functioning, Disability and Health (ICF, 2004), and it is based on the concept of social functioning.

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Selection and peer-review under responsibility of Romanian Society of Applied Experimental Psychology.

Keywords: social fieldwork documents; medical-social assessment; social functioning.

1. Introduction. The role of SFDs

The present paper is theoretically and operationally conceived in accordance with ICF (International Classification of Functioning, Disability and Health) (ICF, 2004) and it suggests a minimal methodology for

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creating SFDs (Social Fieldwork Documents) for persons who have been psychiatrically diagnosed (psychiatrically assessed).

Social fieldwork documents (SFDs) are also known as social investigations or fieldwork surveys and are often required by the psychiatrist, psychologist or specialty commissions (e.g. in elaborating the expertise of someone's working capacity) for specifying the diagnosis, assessing the seriousness of the disease, as well as for establishing the therapeutic strategy. Social fieldwork documents lift the veil from the patient's daily behaviour expressivity and bring information as regards the organization of his/her personal life; thus, SFDs can significantly contribute – when they are required – to the elaboration of these persons' "life pattern".

The need to use SFDs may be justified by the fact that the very living context determines or favors the psychical disturbance of a person. "The factors which generate *nervosas* are basically social...the present civilization, which is based on competition and aggressiveness, and constitute the ground upon which pathological personalities are formed" (Horney, 2010.) The same type of correlations can be found in the definitions of neurosis. „ Generally, neurosis means poor ability to adapt to one's environment, an inability to change one's life patterns, and the inability to develop a richer, more complex, more satisfying personality." (Boeree, 2002)

2. Ways of approaching and presenting SFDS: comparative analysis

Since there is no unanimously accepted methodology in the domain we start our analysis with a reference to the most common SFDs model, the one used in most cases. We are going to coin this method as the "permissive model". In this case, the activity performed by the social worker, the elements he/she tries to identify on the field and the manner in which he presents the collected information is to a large extent due to his/her background: cultural factors, interests, mood. In numerous cases, the SFP operator is subject to external confinements. In this situation, SFDs should only confirm the medical investigation. The operator is often unaware of what to look for and, thus, he/she may bring incomplete or irrelevant facts from the field investigation in the absence of a cognitive frame in which he/she may include collected information; moreover, the operator is also not guided where from to gather the data in the absence of specific approach procedures. Due to these reasons, in conformity with this model, different field operators could make different presentations of the same situation. Moreover, due to the above mentioned shortcomings, the operator might encounter not just epistemological difficulties, but also deontological problems, too, i.e. problems specific to ethical deontology. We may also identify approaches that follow only one direction of investigation; in such a situation, information may come either from the patient or from someone outside the patient's family, such as a neighbour, for example; in either case the gathered information does not support a valid investigation. If the operator only knows the way the patient is perceived from the outside, e.g. "the operator only asks the neighbours", in such a situation the accord of the patient as regards the potential dissemination of information in relation to his/her health is ignored. Some other times it happened in numerous cases, due to the discretion of the patient and his/her family, for the neighbours to be unaware of the existing situation so that the functioning issues basically occurred within the patient's house and not outside it.

The second model of knowledge and presentation specific to SFDs could be conceived on the basis of several assessment scales subsequent to the operationalization of certain pre-established indicators, which are selected on the basis of a conceptual and theoretical basis. This model is meant to bring more accuracy and objectivity to the investigation process. We are going to coin this method as "the formalized model". In this model, in a similar case, different operators should conceive the same type of assessment. However, formalized language is not characteristic of social sciences especially that SFDs would be difficult to test. There are many situations and a large number of connotations that might be selected when they are applied to a questionnaire that needs to be ticked. This can inevitably lead to a "scarcity" of the "material" and, thus, it is recommendable to avoid model no. 2 and to choose the former one, which is more "luxuriant" as regards its potential expressivity.

3. Towards a new methodological model

In our opinion we should use a third model for drawing up social fieldwork documents. Thanks to this third model, the drawing up of the social fieldwork documents will be made by means of qualitative language, which is more appropriate for this type of investigations than the formalized one; however, the field investigation must be

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