



The Role of Social Workers in Advocating for Patients' Rights, Needs, And Access to Resources in the Hospital Environment

Abdullah Matar S. Alharbi¹, Ali Saad Mohammed Alshkarah², Ibrahim Mohammed Saad Alhamdani³, Saud Mohammed Zaid Ghannam⁴, Rashid Nasser Mudhi Alquraini⁵, Ibrahim Abdullah Rashid Al Mabkhout⁶ and Saleh Mohammed S. Alalaosh⁷

¹ Corresponding Author, Senior Specialist Psychology- Clinical, aalharbi424@moh.gov.sa, Hotat Bani Tamim General Hospital

² Psychologist, aalshkarah@moh.gov.sa, Hotat Bani Tamim Hospital

³ Social Worker, ialhamdani@moh.gov.sa, Hotat Bani Tamim Hospital

⁴ Social worker, sghannam@moh.gov.sa, Hotat Bani Tamim Hospital

⁵ Social worker, ralquraini@moh.gov.sa, Al-Hazm Primary Health Care Center in Riyadh

⁶ Social worker, almbkhot-ia@moh.gov.sa, Hotat Bani Tamim General Hospital

⁷ Social worker, S_alosh@hotmail.com, Hotat Bani Tamim General Hospital

Abstract

Social workers are professionals trained to help people cope with problems in their daily lives. They assist patients in navigating the complex processes of hospitals and emergency rooms. Social workers advocate for patients as they seek immediate services and financial assistance. It is the role of the social worker to ensure that their rights, needs, and access to resources are upheld in the hospital environment. Hospital social workers engage in service planning for patients with multiple needs, including post-hospital community care. They assess the needs of patients, consider various medical and social factors, and coordinate services. Even when treatment services do not go through the hospital, social workers must ensure that patients with infectious diseases receive the necessary care. If patients have difficulty accessing services, social workers intervene directly, either by accompanying the patient to another medical institution or agency or by negotiating with another provider on the patient's behalf. Social workers also have an obligation to report any situations that may endanger the health and safety of hospital staff or other patients, as well as any suspected abuse of dependent adults or children. Hospital social workers also provide crisis intervention services (F. Dziegielewski & C. Holliman, 2001). Despite serious mental health issues, many patients still refuse admission to the hospital or do not follow necessary treatment. Social workers frequently assist in the admission process, working with other hospital staff. If a patient is admitted against their will, social workers advocate for the patient's legal rights and ensure that they understand why they



have been admitted and what the treatment entails. Even with involuntary admission, patients retain certain rights. Social workers inform patients of their rights, including the right to refuse treatment. Patients unwilling to accept treatment must be informed that they can appeal to an outside agency, and social workers assist in this process when necessary. Social workers also support patients as they adjust to the hospital environment. This adjustment can be especially difficult for patients admitted after a suicide attempt (Labbe, 2017).

Keywords: Social Workers, Patients' Rights, Patients' Needs, and Patients' Access to Resources in Hospital Setting Health Care Social Workers play an important role in advocating for patients' rights and needs as well as access to resources. In hospital settings, health care social workers advocate for patients' rights (the right to information, privacy, confidentiality, dignity, and the right to refuse or discontinue treatment), especially for vulnerable patients who may not be capable of advocating for themselves, such as those with mental issues, cognitive disabilities, or being in a coma. Social workers also ensure that patients are informed of their rights and help them voice their concerns if they feel their rights are being violated. In addition to rights advocacy, health care social workers advocate for patients' needs, especially during transitions in care. Social workers help understand what patients need to ensure a safe discharge from the hospital, whether or not they are being admitted to a skilled nursing facility, and assisting with referrals to community resources. On top of that, health care social workers advocate for patients' access to resources, especially accessing state or community benefits. In complex cases involving social services, social workers ensure that patients are well aware of their options and rights throughout the process.

1. Introduction to the Role of Social Workers in Healthcare Advocacy

Patients in the hospital may find themselves in vulnerable situations because of their illness, frustration, lack of knowledge, or fear. These barriers may inhibit a patient's ability to express their needs, rights, or concerns. Social workers in the hospital can advocate for their patients by working to ensure their rights, needs, and access to resources are met. Social workers can assist patients in understanding their rights. Most patients in the hospital should receive a copy of their bill of rights upon admission. Social workers can help patients understand their rights and what to do if they feel any of those rights are being ignored or violated.

If a patient's rights are being violated, social workers can advocate for the patient by acting as a liaison between the patient and the hospital personnel involved (Labbe, 2017). For example, if a patient is aware of a legal guardian or power of attorney having rights that are not being recognized in their care, the social worker can step in to advocate for that patient's best interest and make sure appropriate parties are involved in the care plan. Social workers can also advocate for patients by assisting them in expressing their needs. In some cases, patients may have needs that are not being met, but they are unable to clearly express what they need. Social workers can help identify the need and clarify it for other healthcare professionals. On the other



hand, some patients may be asking for things that cannot be provided for legal or ethical reasons (F. Dziegielewski & C. Holliman, 2001). In this case, the social worker advocates for the patient by helping them understand why their request cannot be fulfilled. Additionally, social workers can assist patients in accessing resources to meet their needs outside of what the hospital can provide. For example, a patient may need assistance finding and scheduling follow-up care after being discharged.

1.1. Definition and Scope of Social Work Advocacy in Healthcare

In recent years, health care systems, as well as government policies, have focused on the social determinants of health. As a result, the role of social workers within health care systems has gained considerable attention. Social workers in health care are expected to care for patients' social needs in addition to their medical needs. In particular, social workers are recognized as key players in advocating for patients' rights, needs, and access to resources. Although many social workers work in various health care settings, there is little understanding in the literature of the specific actions they take to advocate for patients. Advocacy aims to promote or reinforce change in one's life, in program or service, and in policy or legislation (M. Ibrahim & M. Aly, 2014). In general, it is the act of arguing in favor of something, such as a cause or policy, and can be performed on behalf of others or for oneself. Commonly accepted health care social work activities include advocating with patients for their rights, access to resources, and needs (Labbe, 2017).

Health care environments can be complex and difficult settings for patients. Although they are in need of care, patients often feel powerless in these environments. Their independence and ability to make decisions become deeply affected by the care model, medical interventions, and their own health conditions. This helplessness is further compounded by the need to interact with multiple systems beyond the simply clinical, including social, economic, legal, and ethical systems, all of which are often opaque to patients. Most patients, therefore, show different degrees of vulnerability in health care environments. Social workers are expected to help patients navigate this system while controlling the quality and safety of the services they receive.

2. Historical Context and Evolution of Social Work Advocacy in Hospitals

The profession of social work was officially born in the late 1800s and early 1900s for the upper class and social elite, known as the "social gospel." The idea was that society needed to care for the "less fortunate," creating programs to help the poor, needy, ill, insane, and disheveled. Many hospitals were then founded on this idea, start-up revenue generated from upper class families willing to pay generous donations to start the hospital. This created a class divide, as the upper class cared for their patients' needs tethered to their own social status. In 1905, the first social workers were hired to help patients of the Boston Psychopathic Hospital,



trying to bridge the class divide (Labbe, 2017). This idea of social workers advocating for patient's rights, needs, and access to resources became a pillar of the hospital environment.

Social Work evolved as a profession, encapsulated by education, organization, and legislation. On a national level, many social workers were hired to bridge the class divide throughout the hospital environments. With the growth of hospitals throughout America came the need for social workers within hospitals. The Great Depression ruined many families, and mental health institutions were overrun by those who could no longer afford to donate their time or money. Instead there was a rush by the needy, ill, and insane to seek help, which hospitals could no longer provide due to financial restraints. Hospitals then began to hire social workers as a way to triage patients not on the social elite playing field (F. Dziegielewski & C. Holliman, 2001).

2.1. Origins of Social Work in Healthcare Settings

Beginning with the settlement house movement in the early 1900s, social work has carried the mission of improving lives of society's marginalized and oppressed (Sky Niesen, 2018). The establishment of hospitals and community clinics in tenement neighborhoods provided venues for nurses, doctors, and other reformers to deliver services to the sick, needy, and mentally ill who were previously invisible to the dominant culture. Along with nurses, the initial group of hospital social workers came from the settlement houses with a mission to alleviate poverty in all its forms—material poverty, educational poverty, and cultural poverty (F. Dziegielewski & C. Holliman, 2001). The early focus on patients' economic needs later evolved to include their needs for education, cultural enrichment, and dignity in their interactions with the dominant culture, as well as a recognition of the stress imposed on immigrant families by the dominant culture's efforts to mold them into "ideal" American citizens. This broad perspective on social work's role in hospitals—with attention to the social, economic, and cultural context of care—was later narrowed by changes within the profession and the health care delivery system.

Social work as a profession is a mandated component of many healthcare teams, such as cancer care, palliative care, and hospice. In this capacity, social workers advocate for patients' rights, needs and access to resources and services. Social work's historical relationship with healthcare; a traditional focus on rights advocacy; and an adaptable, strengths-based practice model that is a good fit for rural systems are discussed. Four cancer care social workers from a rural state with a predominantly white population in the northern plains participated in the study. This state is home to four tribal nations and one urban reservation. Despite similarities, each nation has a unique history, language, and traditions. With the worst cancer mortality rates in the nation, cancer care systems have been primarily researched from the perspective of health disparities, environmental barriers, and the challenges of interconnected rural and Indigenous identities. Nonetheless, rural Indigenous communities offer strengths that are often overlooked in the context of cancer care.



3. Legal and Ethical Frameworks Guiding Social Work Advocacy in Hospitals

Social work in a health care setting can take on many different roles, depending on the needs of the patient population being served. In a general medical/surgical hospital, a social worker's primary role may be an advocate. Advocacy in health care can be defined as promoting or defending the welfare of patients and helping to ensure their rights are protected (M. Ibrahim & M. Aly, 2014). But patients may not always know what their rights are or how to voice their needs and concerns. That's where social workers come in as advocates in the hospital environment. Patients have the right to be informed about their care. This includes understanding diagnosis, prognosis, and possible side effects of treatment. Patients also have the right to refuse treatment and receive care without discrimination. Hospital social workers can help make sure patients fully understand their rights by providing clear explanations, answering questions, and offering resources such as printed material or access to patient advocates. Patients unable to speak for themselves may need additional assistance. Social workers can help ensure these patients are still able to exercise their rights through the appointment of legal proxies, such as guardians and power of attorney. Meetings can also be arranged with family members or friends to address concerns. Finally, social workers can ensure that patients are aware of the appropriate channels for voicing grievances regarding care.

3.1. Key Legislation and Regulations Affecting Patient Rights in Healthcare

Patient rights refer to the rights of patients while receiving medical treatment. These rights are defined by the rules and regulations established by the government and various professional organizations. Patients now have the right to access their complete medical records and receive explanations, in simple terms, about the tests and treatments being conducted on them. Furthermore, patients have the right to accept or reject the treatment offered to them (M. Ibrahim & M. Aly, 2014). The patients' rights charter is a fundamental document that guarantees the rights of patients. It is crucial for social workers to familiarize themselves with this charter and ensure its implementation within the hospital setting. Nurses, as the closest caregivers to the patient, play a vital role in advocating for the rights of the ill. However, it is essential to recognize that patients often find themselves in a vulnerable state, lacking a voice to defend their rights. To uphold patients' rights, a holistic approach involving all stakeholders is necessary, with the nurse being the first line of defense.

4. Key Skills and Competencies for Social Workers Engaged in Healthcare Advocacy

Healthcare social workers must understand the policies and procedures that govern their work, whether they are hospital- or community-based. Some of these policies may be set at the community level but are often mandated by national policy. These procedures not only regulate the work of social workers but also grant them particular rights with respect to their clients.



Hospital-based social workers must maintain an up-to-date knowledge of hospital policies, including admission and discharge policies, medication protocols, and infection control procedures. Access to care policies and eligibility determination criteria must be understood by social workers who practice in a community-based capacity. Community-based social workers must also take some time to understand the community in which they work (Kaye Dean, 2009). This means acquiring a working knowledge of local resources, developing relationships with gatekeepers, and gaining an understanding of how community needs and resources might differ from those determined at the national level. Each community is unique, and a policy that appears appropriate in theory may not be in practice. For these reasons, social workers can be most effective advocates when they work within the environments they know best. Social workers engaged in advocacy must also have a strong understanding of the rights of their clients. Patient rights in the hospital environment usually encompass access to care, the right to refuse care, informed consent, and privacy and confidentiality. These rights are often addressed at the legislative level but may also be reiterated in hospital policies. Community-based social workers must also be aware of eligibility determination criteria.

4.1. Active Listening and Empathy in Patient Interactions

Social workers, as a component of the specialized healthcare team, have a diverse set of duties. Social workers are expected to take the lead on human rights issues, especially the rights of patients involving access to healthcare and treatment since they advocate for and assist a number of disadvantaged communities in fighting for their rights, needs, and access to resources (Lee & Seo, 2022). In particular, hospital social workers play the dual role of professional mediator and patient advocate in order to ensure a patient's rights, needs and access to resources. To provide effective advocacy for patients, it is essential for social workers to get involved in positive interactions with patients. By identifying the essential elements that must be in place to ensure the success of social workers' advocacy role, this study aims to support the continuous and expanding function of social workers in hospitals and contribute to the ongoing discourse on the significant role of social workers in patient advocacy. The need for social workers to play an advocacy role on behalf of patients was consistent across various cases. It is crucial for social workers, particularly those in hospitals, to have direct engagement with patients in order to effectively perform their advocacy role. In particular, social workers' active listening abilities and empathy are essential when they first meet patients. Active listening refers to the ability to listen attentively to a patient's narrative while also focusing on their verbal and non-verbal cues. Through active listening, social workers can gain a deeper understanding of the concerns of a vulnerable group, such as patients, thereby enhancing the quality of advocacy. Empathy is the capacity to comprehend and resonate with a patient's emotions. Social workers can connect with patients and create relationships based on trust and understanding through empathic engagement, which ultimately paves the way for effective advocacy.



5. Collaboration and Interprofessional Communication in Healthcare Advocacy

Advocacy is at the core of social work practice, and social workers in healthcare settings advocate for patients' rights, needs, and access to resources. Hospitalized patients are often vulnerable and at risk of having their rights, needs, and access to resources compromised. Social workers are in a unique position to advocate for patients in the hospital environment. This explores the role of social workers in advocating for patients' rights, needs, and access to resources in the hospital environment by reviewing current literature on social workers' roles in advocacy in healthcare settings and discussing the importance of this theme in current healthcare practice and policy.

This literature review found that social workers in healthcare settings advocate for patients in various ways: directly, indirectly, and through interprofessional teamwork and communication. Direct advocacy typically occurs during social work intervention and involves social workers advocating for patients' rights, needs, and access to resources in one-on-one or group settings. Indirect advocacy occurs outside the direct social work intervention and includes actions or involvement from social workers that affect multiple patients or the entire patient population. Social workers also engage in advocacy for patients' rights, needs, and access to resources by working collaboratively with other healthcare professionals as part of a healthcare team (Kirschbaum, 2017).

5.1. Working with Multidisciplinary Healthcare Teams

Social workers in hospital settings work with multidisciplinary healthcare teams to provide patients with the best care possible. It is crucial for social workers to establish collaborative relationships with the various members of the healthcare team to build trust and comfort with one another's "space" and expertise (Kirschbaum, 2017). Each profession's valuable contributions to patient care become more evident as social workers and other professionals learn to work alongside one another, gaining a greater understanding of each other's roles in the healthcare environment. This collaborative effort benefits patients, as there is increased awareness of how to access the various services available to them.

Social workers are an integral part of the multidisciplinary healthcare team. Collaboration is key to delivering quality care and using resources wisely. Each discipline brings unique strengths, and awareness of these strengths maximizes the effectiveness of the team. Teamwork is a key element in cost containment, effective care coordination, and quality social work practice. Research demonstrates that teams provide more effective care with fewer resources. Teams are more effective because they are familiar with local community resources and are more responsive to patient crises, providing more efficient care.



6. Cultural Competence and Diversity Considerations in Advocacy Work

Advocacy work is explored through the lens of the advocacy approach defined by (Kaye Dean, 2009), specifically with regard to the role of social workers in framing, working through and promoting hospital advocacy on issues of patient rights, needs and access to resources. Four core principles of the advocacy approach are examined: the importance of mutual learning, understanding power relations, training as an environmental change mechanism, and the need for creative communication strategies. Responses to these principles from a focus group discussion with three social workers at a Swedish general hospital are presented. In doing so, present actions aimed at influencing hospital procedures, care priorities and everyday behaviours in ways that target and promote patients' rights, needs and access to resources are elaborated.

In this sense, the identification of a role for social workers in advocacy training and change-action project work in hospitals is essential. These projects would help clarify the importance of patient advocacy work for social workers in hospitals and address the lack of attention given to this in the social work profession. This could also help reframe advocacy issues in terms of the rights, needs and access to resources of hospital patients, who are often powerless, passively viewed as recipients of care and disadvantaged through hospital-based social categorisations. This understanding of advocacy work could also inform the development of hospital social work on a broader international scale. The four principles discussed could be used to contextually and concretely explore local circumstances surrounding social workers' role in advocacy work with regard to the rights, needs and access to resources of hospital patients.

6.1. Addressing Health Disparities and Inequities

Health disparities and inequities persist in the U.S. hospital environment despite enacting policies and advocacy efforts to solve this issue. These disparities are closely tied to social determinants of health. A growing public awareness of the unmet rights, needs, and access to resources of vulnerable populations receiving hospital care has emerged during the COVID-19 pandemic (Sky Niesen, 2018). Social workers are trained to understand the interplay between public policy, social determinants of health, and social inequalities. Social work's professional commitment to vulnerable populations lays groundwork for social workers to lead hospital advocacy efforts toward basic rights, needs, and access to resources. The hospital environment is an important and under-examined setting for advocacy efforts. Those who receive hospital care and their families often experience profound vulnerabilities, creating urgency for advocacy. At the same time, the rights, needs, and access to resources of hospital patients relate to complex systems of power. Health care systems, public policy, and clinical environments shape patients' hospital advocacy experiences. Addressing health disparities and inequities in the hospital environment requires efforts to create public awareness and responsibly engage



social workers. The vulnerable populations receiving hospital care include people with disabilities, children, and people experiencing homelessness.

7. Assessment and Intervention Strategies in Social Work Advocacy

Social work advocacy is an important yet underexplored topic in health care literature. While broad social work roles are often described, specifics of advocacy roles and responsibilities are not well known (P. Griffiths et al., 2022). A clear understanding of social work advocacy in hospital settings may help advance social work practice, education, and research. In a qualitative study exploration of social workers' descriptions of assessment and intervention strategies used in advocacy roles in hospitals is presented, revealing similar approaches to advocacy in patient care across diverse hospital settings. Descriptions of assessment strategies and intervention strategies used in advocacy roles advance the understanding of social work advocacy in health care and invite further research on the impact of advocacy in hospital social work practice. Social work in health care is often synonymous with role expectations for social workers as patient advocates. Social work advocacy is described as actions taken on behalf of another to advance their interests, rights, needs, or access to resources, with a focus on social work actions in patient advocacy roles in hospital settings. Social workers in hospitals have expressed a commitment to advocacy, viewing it as central to their role and essential for the profession. However, despite the commitment to advocacy, many social workers recognize barriers to their ability to be effective advocates. Addressing these barriers requires an understanding of what advocacy looks like in practice, including the assessment and intervention strategies social workers use when acting in advocacy roles.

7.1. Assessing Patients' Needs and Resources

Social workers have an ethical responsibility to ensure that all patients' rights and needs are met in the hospital environment (Labbe, 2017). This includes advocating for patients to access the resources they need, whether they are physical resources or efforts to ensure a patient's emotional needs are met through talking to a psychologist or social worker. Social workers are trained to interview patients when they arrive in the hospital as part of the team's approach to assessing the patient's needs and resources. This is an essential step in making sure patients feel safe and supported. When patients are not able to care for themselves properly, it is crucial to look for signs that they are struggling and assess what supports that patients might need. Everything from physical injuries to changes in mental health or social situations should be taken into consideration when looking at a patient's situation. This will then help determine what resources are appropriate for the patient, whether that could be social worker involvement in the patient's care, ongoing support from outside agencies, or community services. Social workers also want to ensure that patients are fully aware of and able to access any support available to them. Social workers are part of a multi-disciplinary team in hospitals who focus on meeting the social and emotional needs of the patients while also supporting the family.



8. Case Management and Care Coordination in Hospital Settings

The core tasks of a case manager centre around analysing a user's needs and available resources, as well as planning, coordinating, and monitoring care (Ethier et al., 2024). In the hospital environment, these tasks become a challenge when there are different definitions, processes, and contexts between the hospital and home care settings in regard to case management and care coordination. In order to secure a smooth transition and continuity of care for older adults returning home after a hospital stay, it is crucial for home care providers to be involved as early as possible in the hospital stay. However, case managers in home care often learn that an older adult has been admitted to the hospital either by chance or not until the hospital staff gives them notice that an assessment of the case is required right away. Conversely, hospital case managers assert that they systematically transmit the information to home care services when an older adult is admitted to the hospital. In this context, the coordination of care between hospitals and home care services relies heavily on the communication efforts of individual employees, as well as on pre-existing relationships between staff at both establishments.

8.1. Navigating the Healthcare System for Patients

Patients in need of healthcare services often lack the knowledge, experience, or resources to negotiate and navigate an exceedingly complex and rapidly changing healthcare system. Even more so, vulnerable patients with low incomes, chronic illnesses or disabilities, cultural and language differences, and jeopardized housing may find themselves in situations where their health needs go unrecognized, unmet, or neglected entirely. Hospital social workers greet patients at the emergency department or hospital admission, attempting to assess and address their social and emotional needs as time and resources allow. Social workers have a significant role in advocacy efforts, which require policy knowledge and awareness of system intricacies that may go unrecognized by other professionals in a hospital setting. Advocacy efforts may take the form of direct intervention on the patient's behalf in interactions with medical personnel; education and support regarding the healthcare system or a particular agency; assistance in the preparation of necessary documentation or forms to increase access to services; and facilitation of transportation to appointments (Marmo & Hirsch, 2022).

Advocacy efforts are often undertaken at a community, social service agency level. Typically, these agencies have established relationships with certain medical systems and an understanding of that system's policies and procedures. Hospital social workers must collaborate with community agency personnel to negotiate access and services for mutual patients and share information about the services each offers. Community personnel may accompany patients to appointments when needed to help advocate for their acceptance into a particular service or program. These collaborative relationships benefit patients and ensure that advocacy efforts by social work personnel in both settings are not duplicated.



9. Advocacy for Vulnerable Populations in Hospitals

Due to their recurring hospitalizations, impoverished persons, especially the homeless and those without health insurance or private health insurance, suffer from loss of the ability to manage their own resources and personal business affairs, temporary homes, and family ties. While in the hospital, they are at risk of further marginalization, contempt, and curtailment of their rights (M. Ibrahim & M. Aly, 2014). In the hospital environment, social workers advocate for patients' rights, needs, and access to resources through their role in a multidisciplinary team committed to reducing readmissions among vulnerable populations. The hospital social worker participates in a systematic screening process for high-risk patients, determines need for social work intervention, conducts an in-depth psychosocial assessment, develops and implements a discharge plan, and advocates for patient access to resources.

To enhance evidence-based social work practice, social work researchers aim to develop a concise protocol on the role of hospital social workers in a multidisciplinary team's approach to reduce readmissions among vulnerable populations. This protocol describes the team's operation, team members' roles, and the social worker's role in screening patients, conducting psychosocial assessments, planning discharges, networking with community resources, and advocating for patient rights and access to resources. Social workers also ensure that vulnerable patients are treated with kindness and respect and that their rights are upheld. With training, social workers can be a vital resource in hospitals and interdisciplinary teams that serve vulnerable populations dealing with physical and mental health problems. Having social workers in hospitals and interdisciplinary teams that serve vulnerable populations struggling with physical and mental health issues is necessary.

9.1. Children and Pediatric Patients

Children and pediatric patients face complex challenges in the hospital environment, requiring social workers to advocate for their rights, capacities, and needs. Social workers help children feel safe and secure in hospital settings by developing relationships with parents and caregivers, gathering information about the child's situation at home, and creating a calming hospital environment. They also ensure that children have access to age-appropriate play situations that facilitate recovery and health maintenance (L. Ng et al., 2015). Advocacy plays a crucial role, ensuring that children's voices are heard and considered regarding actions that affect them.

In health care environments, children's advocacy primarily lies in pediatric services, where nurses and physicians advocate for children's needs and rights in care situations (J. Coia, 2017). Despite being the most vulnerable group in society, children have rights to protection, participation, and provision. Social workers play a vital role in making children's voices heard in political and social discussions, particularly in hospital settings. Children should be acknowledged as full citizens in society, ensuring their right to be heard in all matters affecting



them, even when they cannot express their opinions. Hospitals as child's rights arenas should guarantee every child's right to participation and ensure that children understand their rights.

10. Advocacy for Mental Health and Substance Use Disorder Patients

Social workers play a pivotal role in advocating for the rights, needs, and access to resources for patients in a hospital environment. This advocacy is crucial in protecting vulnerable patients who may lack decision-making capacity and face barriers in accessing necessary care. While social workers in hospitals address various social and emotional issues for patients, their advocacy role in promoting access to resources and services is often overlooked in the existing literature. With the increasing population of vulnerable patients reliant on hospital care, social workers' advocacy is essential in upholding patients' rights and ensuring a voice within the healthcare system (R. Leverette, 2009).

Social workers can provide unique patient advocacy compared to other healthcare professionals. They are specifically trained to address psychosocial needs and advocate for accessing resources and services outside the hospital's scope. In addition, hospital social workers' professional ethics guide them to advocate for patients' rights and access to necessary resources and care addressed. This is particularly crucial for vulnerable patients who may experience mistreatment or denial of rights due to their care dependence, mental illness, or lack decision-making capacity. Social workers' knowledge of patient rights is instrumental in ensuring patients understand and uphold these rights within often-complex healthcare systems, empowering them to address grievances or concerns about care quality.

Advocacy may take various forms, including collaboration and negotiation with healthcare professionals or outside agencies to ensure access to services and resources. On the other hand, advocacy may involve confrontation and legal action against professionals or institutions denying access to resources or care. Social workers are often the sole hospital professionals equipped and responsible for such advocacy, necessitating a comprehensive understanding of their advocacy role in safeguarding patients' rights and ensuring access to resources and services.

10.1. Supporting Patients with Co-Occurring Disorders

Social workers are a vital resource in approaching patients' rights, needs and access to resources, as patients face challenges in understanding and asserting their rights, negotiating their needs, and navigating access to resources. The expertise of social workers is critical in the hospital environment, where they help advocate for and provide resources to patients from diverse backgrounds. This is particularly important given that socio-economic-status-related inequalities affect patients' employment and access to healthcare resources.

Patients experiencing mental illness may present in a hospital with co-occurring substance use issues, and efforts by emergency department social workers to help such patients secure



detoxification/rehabilitation placements would likely be enhanced by training in motivational interviewing. Social workers in the emergency department, like other healthcare providers, experience increased workload and systemic challenges, including limited interdepartmental communication. Thus, healthcare provision is most effective when delivered by interdisciplinary teams, as patients requiring a range of services benefit from integrated care. Emergency departments and inpatient medical units provide healthcare to patients with co-occurring disorders, and emergency department social workers help such patients secure detoxification and rehabilitation placements. However, knowledge of and capacity to provide best practice approaches is inconsistent across social workers, which may lead to missed opportunities to provide choice and recovery-oriented care (Kirschbaum, 2017).

11. Advocacy for Older Adults and Geriatric Patients

Social workers play a critical role in advocating for the needs and rights of older adults and geriatric patients within the hospital setting. With the aging population and increased complexity of health issues, it is essential for social workers to be sensitive to the unique needs of this demographic. Social workers must be aware of and advocate against ageism and other forms of discrimination that impact hospital policies and patient care. (E. Barba & DOCKS at The University of North Carolina at Greensboro, 2007) explains that the attitudes and experiences of nursing staff shape the clinical environment for older patients. Strategies aimed at community-building between nursing staff and social workers should create connections and a shared sense of responsibility for the care of older patients. Research on advocacy efforts should assess how social workers perceive their responsibility for older adult patients and how that responsibility is acted upon. Understanding the perceived responsibility towards older patients will help identify barriers to effective advocacy and create focused interventions to overcome those barriers.

The clinical environment plays a critical role in shaping how older patients are viewed, treated, and cared for. Older patients have unique needs for care that are often shaped by historic or current discrimination based on age. For social workers to advocate effectively for older patients, they must be knowledgeable about the rights, needs, and resources available to these patients and recognize and actively seek to change policies that do not protect or meet the needs of older patients and their families (Labbe, 2017).

11.1. Promoting Aging in Place and Independent Living

The focus of this literature review is social work involvement with home health care recipients and related home health care outcomes. Social Work involvement with home health care recipients lowered the number of hospital readmissions and lowered the number of emergency room visits for patients who were more complex medically. The path of home health care began with early settlement houses but evolved as Medicare was enacted in the 1960s. As the elderly



population grew, so did the desire to keep people out of institutionalized settings. Social Work in Home Health Care began to grow in the 1970s, initially focusing on counseling and providing resources to patients. However, as the system changed to a more medical model, Social Workers became more involved in discharge planning from the hospital and coordinating home health care plans. Social Work involvement in home health care has been proven to increase patient outcomes (Gail Hebert, 2007).

The elderly population had grown rapidly in the last half of the twentieth century and would continue to grow. The focus of health care had transitioned from institutionalized settings to keeping people “in place” in their homes. A history of home care in the United States is discussed. In the 1800s, nursing in hospitals rose to prominence, and nursing outside of hospitals was considered inappropriate. The Civil War changed the perspective of women as nurses as they were allowed to care for the sick and wounded on the battlefields. Following the war, these women brought nursing home care skills back to the cities. The Visiting Nurse Association was founded in 1885 in New York City, and similar organizations formed in other major cities.

12. Advocacy in End-of-Life Care and Palliative Services

Social workers, as a recognized specialty within health care, actively engage in patients' outcomes and rights, particularly regarding access to health care resources and professional advocacy for patients' needs. Advocacy is integral to social work ethics and is essential in promoting social justice and addressing societal disparities (D. Underwood-Mobley, 2018). As health care advocates, social workers extend their role beyond individuals to encompass populations, communities, and social institutions. This advocacy dimension emphasizes collective issues that society faces or inflicts on specific groups. Advocacy attempts to change existing norms, policies, or rules to produce alternative approaches to resource distribution or opportunity sharing. Hence, advocacy aligns with social workers' foundational goals, emphasizing social welfare and justice through a unique lens of rights, needs, and resources.

In hospitals, social workers usually possess a master's degree, have completed relevant internships, and have conducted additional training to pass a national exam to achieve licensure. Social work education involves various subjects, including behavioral psychology, research methodology, group dynamics, statistics, ethics, policy, etc. However, it is crucial that health care social workers pursue additional training on end-of-life care rights to address knowledge gaps and the increasing demand for palliative and hospice services. State requirements for social workers include awareness and compliance with rights and regulations, yet this knowledge does not necessarily translate into practice, particularly regarding complex end-of-life rights. Social workers are tasked with rights advocacy but often lack adequate training in this field. A modest yet essential first step toward improving end-of-life rights



advocacy is increasing social workers' awareness of care options and corresponding rights. It is paramount that social workers are aware of existing rights and corresponding regulations.

12.1. Supporting Patients and Families in Difficult Decisions

Patients and families facing end-of-life decisions need support in understanding complicated medical information and processing how that information relates to their goals, values, and preferences. Involving social workers in end-of-life discussions may facilitate better understanding of choices faced by patients and families. Patients and families facing critical illness are challenged by complications related to their illness, as well as medical information that may be difficult to understand. Patients needs and values may be obscured, making it difficult to align care with the patient's values and goals and resulting in the need for surrogate decision-makers. When surrogate decision-makers are substituted, clearer understanding of the patient's needs, values, and goals may be particularly challenging, requiring health care providers to assist families in understanding choices and options. This may include discussing how medical choices relate to the patient's values and goals (D. Underwood-Mobley, 2018).

Patients and families facing end-of-life decisions may require particular assistance in understanding complicated medical information and processing how that information relates to their goals, values, and preferences. Involving social workers in end-of-life discussions may facilitate a better understanding of choices faced by patients and families. Social workers in the health care setting are a natural fit because basic values of social work are called upon that include the promotion of the individual's rights to self-determination, empathy for the individual while negotiating barriers, and advocating for people. Social workers may be asked to assist patients and families with advance directives, which are legal documents that address a person's wishes for medical treatment in the event that they cannot speak for themselves, identify a person to make health care decisions on their behalf, or both. Social workers are key members of the multidisciplinary health care team and are vital to helping patients and families with end-of-life decisions. While there are ethical and legal mandates for involving social workers in end-of-life discussions, they need to advocate for their inclusion in these discussions. It is important for social workers to collaborate with other providers in the hospital setting to optimize service provision to hospitalized adults in need of advance care planning.

13. Innovations and Best Practices in Social Work Advocacy in Hospitals

Innovations and best practices for social workers advocating for rights, needs, and access to resources for patients in the hospital environment was examined based on findings from the literature review. Patient access to rights, needs, and resources must be advocated and addressed by social workers in hospitals for the health care system to function and operate at its best. There is a critical need to develop the innovation of advocating rights, needs, and



access to resources for patients as a role of social workers in hospitals based on the best practices reviewed (Labbe, 2017).

Best practices in social work advocacy for rights, needs, and access to resources include social workers being stationed in emergency rooms to ensure patients are receiving appropriate care, educational materials and trainings around hospital social work services, and utilizing student social workers to meet care coordination social work needs (F. Dziegielewski & C. Holliman, 2001). Each of these programs allow for patients to have access to social work services, rights, and needs in a unique way specific to their hospitals and environments. Developing, implementing, and directing social work advocacy programs focused on rights, needs, and access to resources for patients in the hospital environment is essential for social work professionals. In hospitals where such advocacy programs do not exist, social work professionals should review existing models and implement similar rights, needs, and resource advocacy programs.

13.1. Telehealth and Virtual Advocacy Services

According to (Addario et al., 2023), the COVID-19 pandemic led to an accelerated demand for telehealth cancer care services. This transition prioritized the implementation of services, sometimes without adequate consideration of patient advocacy needs. Since then, stakeholders have recognized the importance of incorporating patient needs and preferences from the outset when designing, delivering, and evaluating telehealth services. Telehealth has the potential to improve access to care, meet individual patient needs, and enhance experiences and outcomes. However, these benefits will only be realized if services are designed around patient preferences and are continuously updated in response to changing needs. Cancer patient advocates have extensive experience in co-designing cancer services and can make a valuable contribution to telehealth service development, implementation, and evaluation. Co-designing telehealth services with patient advocates ensures they meet patient needs, preferences, and expectations from the outset, leading to high-quality services. There is a need for clarity in the roles and responsibilities of patient advocates in telehealth co-design to maximize their valuable contribution.

14. Challenges and Future Directions in Social Work Advocacy in Hospitals

Social work is a profession specifically devoted to the welfare of people needing assistance, care, or advocacy in various situations. Social workers have been an integral part of the hospital, assessing, planning, coordinating, and providing vital support services to patients and their families in emotional, social, and financial aspects. Social workers encounter various challenges while advocating for patients' rights, needs, and access to resources in the hospital environment. From lack of awareness to limited access, the presentation will look at the



patients' challenges and the limits and difficulties faced by social workers. Attention will also be drawn to the future directions for social work advocacy in hospitals.

There is a lack of awareness of needs and rights among many patients regarding access to resources or services that they are entitled to. This is primarily seen among patients from lower socio-economic backgrounds and marginalized communities. Even if they are aware, many patients are unable to express their needs and rights due to illness, depression, anxiety, or feeling overwhelmed with the sudden changes in their life circumstances. Language barriers also add to this problem in multicultural societies where many patients may not speak the local or dominant language. In such situations, advocacy moves beyond just making a case for or on behalf of patients and requires social workers to actively inquire about their rights, needs, and access and help them articulate the same (Labbe, 2017). Social workers also face limitations in advocacy when the rights or needs of patients are not legally recognized or protected. For instance, while most patients in a hospital have the right to refuse treatment, there is no such right for in-patients in a mental health facility. If a patient is deemed a danger to themselves or to others, a certified psychiatrist can forcibly admit them for treatment against their will (F. Dziegielewski & C. Holliman, 2001). In such situations, social workers cannot advocate for patient autonomy and instead have to explain the legal framework.

14.1. Addressing Burnout and Compassion Fatigue

Social workers regularly address challenges that have implications on their capacity in addressing the rights, needs, and access to resources of patients. Burnout (i.e., emotional exhaustion) and compassion fatigue (i.e., reduced capacity to empathize with others) are prevalent among social workers in health care settings and other health care environments (D. Weekes, 2011). These occupational stressors are linked to patient care error, low job satisfaction, and turnover, which compromise the delivery of social work services to patients. To consider these stressors, the demands faced by social workers are described, and the coping mechanisms employed are outlined. Additionally, and more importantly, the stressors and coping mechanisms of social workers in hospitals are examined to provide an understanding of how these social workers perceive and address burnout and compassion fatigue. In doing so, attention remains on a narrowly defined group of social workers in hospitals so that the unique challenges and coping mechanisms of this group of social workers can be better understood.

Understanding how social workers perceive and cope with burnout and compassion fatigue in hospital environments can lead to improved recruitment and retention strategies for social workers in hospitals and intervention strategies for these social workers. Social workers are frontline providers of caring and advocacy services in hospitals who address patients' rights, needs, and access to resources. These services are fundamental to maintaining the health of patients, especially vulnerable patients who require additional assistance in exercising their



rights and accessing services. However, social workers in hospitals face unique challenges that compromise their capacity to work toward patients' rights, needs, and resource access.

15 Conclusion

Social workers in the hospital environment strive to ensure that patients clearly understand their rights and know how to access the appropriate resources to advocate for themselves. Social workers must assist vulnerable patient populations in advocating for their access to their rights. First and foremost, advocating for patients' rights is one of social work's most important roles. A gross neglect of human rights occurs when vulnerable groups cannot advocate for their access to their rights. Social workers must thoroughly understand patients' rights under national legislation in healthcare settings to act as patients' advocates. If patients cannot advocate for themselves, social workers should step in as advocates and provide educational resources so patients can learn about their rights and how to access them independently .

Social workers act as a bridge between patients and the outside world. Patients often feel isolated from external news; hence, they may be unable to access information regarding their rights in the hospital environment. Social workers ensure that a patient has access to information regarding their rights outside the hospital environment. With the rapid development of technology, information tends to be distributed through online sources. However, not all patients in the hospital environment possess the skills to access information online, nor do they have the appropriate resources to do so. Social workers ensure that patients have access to information regarding their rights through online resources or printed resources.

References:

1. F. Dziegielewski, S. & C. Holliman, D. (2001). Managed Care and Social Work: Practice Implications in an Era of Change. [\[PDF\]](#)
2. Labbe, J. (2017). Social Workers' Experiences Using Self-Advocacy on the Job. [\[PDF\]](#)
3. M. Ibrahim, M. & M. Aly, S. (2014). Nursing Students' Perception regarding Patients' Rights and Patients' Advocacy. [\[PDF\]](#)
4. Sky Niesen, J. (2018). Social Work's Dynamic Role in Oncology: Providing Leadership for Environmental Responsiveness. [\[PDF\]](#)
5. Kaye Dean, J. (2009). Quantifying Social Justice Advocacy Competency: Development of the Social Justice Advocacy Scale. [\[PDF\]](#)
6. Lee, M. & Seo, M. (2022). Effects of Human Rights Sensitivity on Empathy and Working Relationship in Mental Health Social Workers: Using Vignettes of Schizophrenia and Alcoholism. ncbi.nlm.nih.gov
7. Kirschbaum, S. (2017). The Social Work Perspective: A Systematic Review of Best Practices for Social Workers in Healthcare Teams. [\[PDF\]](#)



8. P. Griffiths, E., J. Lai, C., Ziv, T., Dawson, D., Dhaliwal, G., Wheeler, M., & Teherani, A. (2022). Patient Advocacy Assessment in the Medicine Clerkship: A Qualitative Study of Definition, Context, and Impact. ncbi.nlm.nih.gov
9. Ethier, A., Dubois, M. F., Savaria, V., & Carrier, A. (2024). Tensions experienced by case managers working in home care for older adults in Quebec: first level analysis of an institutional ethnography. ncbi.nlm.nih.gov
10. Marmo, S. & Hirsch, J. (2022). Visitors not Welcome: Hospital Visitation Restrictions and Institutional Betrayal. ncbi.nlm.nih.gov
11. L. Ng, S., Lingard, L., Hibbert, K., Regan, S., Phelan, S., Stooke, R., Meston, C., Schryer, C., Manamperi, M., & Friesen, F. (2015). Supporting children with disabilities at school: implications for the advocate role in professional practice and education. ncbi.nlm.nih.gov
12. J. Coia, B. (2017). A Description of Approachable Nurses: The Voice of the Hospitalized Child. [PDF]
13. R. Leverette, J. (2009). Views and Experiences of Mental Health Counselors Toward Social Advocacy. [PDF]
14. E. Barba, B. & DOCKS at The University of North Carolina at Greensboro, N. C. (2007). Recognize the many facets of gerontological nursing. [PDF]
15. Gail Hebert, C. (2007). An examination of the presence of social work intervention with home health care recipients of related home health care outcomes. [PDF]
16. D. Underwood-Mobley, O. (2018). Inclusion of Social Workers in End-of-Life Discussions in Intensive Care Units. [PDF]
17. Addario, B., Astratinei, V., Binder, L., Geissler, J., K. Horn, M., U. Krebs, L., Lewis, B., Oliver, K., & Spiegel, A. (2023). A New Framework for Co-Creating Telehealth for Cancer Care with the Patient Community. ncbi.nlm.nih.gov
18. D. Weekes, J. (2011). The Relationship of Self-Care to Burnout Among Social Workers in Health Care Settings. [PDF]