

Original Article

# Knowledge and Perception of the Relevance and Roles of Medical Social Workers among Outpatients Community of University College Hospital Ibadan, Nigeria

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**Abstract:** Medical social work services appear to be underutilised even with the recent global increase of medical social work within hospitals and healthcare settings, particularly among Nigeria's outpatient community. This study aimed to investigate University College Hospital [UCH], Ibadan, Nigeria outpatients' knowledge and impression of the importance and functions of medical social workers. The survey design used in the study was descriptive. The tool was a structured questionnaire that the participant self-developed. Based on the average number of outpatients per day (1423) in UCH, Ibadan, 16 clinic departments were used to proportionately select a sample size of 312 respondents. Three hundred correctly completed questionnaire copies were collected from the 312 copies that were distributed, and the Statistical Package for Social Sciences (SPSS) Version 21. The data was presented using descriptive statistics such as means, standard deviations, frequencies, percentages, and pie charts. The study's findings demonstrated that outpatients had a positive opinion of the importance and function of medical social work as well as a solid understanding of those functions. The study suggested that in order to increase understanding among others, medical social workers should collaborate with the media to raise awareness of their duties and significance. For a nationwide evaluation, it was recommended that this study be repeated throughout the six geopolitical zones.

**Keywords:** Outpatient Community, Medical Social Work, Roles, Relevance.

## I. INTRODUCTION

### A. Background

Medical social workers should be helpful in all communities, but it appears that inpatient patients gain more from their services than outpatient ones. This predicament may be the result of people not understanding the importance and duty of medical social workers. The assessment of patients' and families' psychosocial functioning when they require psychosocial support is the main focus of medical social work, a subdiscipline of social work. Providing or facilitating the necessary social interventions for the patient's benefit is another aspect of medical social work (Beaulaurier, 2002). These interventions include bereavement or supportive counselling, psychotherapy, putting patients and their families in touch with community resources and support, and assisting patients in expanding their. Doctors and nurses are unable to address the psychosocial or occasionally financial issues of their patients due to their workload. Therefore, medical social workers are essential in meeting these requirements in a timely and effective manner (Raiz & Safaraz, 2015). A medical social worker can do a wide range of roles. It include guiding patients, helping them and their families deal with illness, simplifying a patient's discharge from the hospital, and bridging the communication gap between patients and medical personnel, all of which help to facilitate and improve the delivery of health care services overall.

Compared to other people, patients require greater care on a social, mental, and physical level. This is due to their unique circumstances and susceptibility, which may prevent them from providing all of the care that is needed (Masteneh & Mouseli, 2013). In order to achieve full patient recovery, patients must collaborate with practitioners to make sure that all facets of their lives—physical, social, and psychological—are balanced or regulated in a way that promotes healthy psychosocial functioning. Social workers employ ecological, clinical, and bio-psychosocial techniques to work at all levels of society, from people and families to neighbourhoods, organisations, and governments. They are committed to enhancing human well-being and psychosocial functioning (Ruth & Marshall, 2017). Notwithstanding the expansion of medical social work in Nigeria, there



appears to be a disconnect between the profession's services and patients' understanding of the importance and duties of medical social work. Patients are now unable to clearly define the tasks of social workers, which causes them to miss out on medical social work treatments that could speed up their recovery and enhance their general well-being. For this reason, the researchers set out to find out what patients at University College Hospital [UCH], Ibadan knew and thought about the importance of medical social workers and their duties in the hospital.

### **B. Statement of the Problem**

Medical social workers are employed in healthcare settings and participate in nearly every stage of their patients' recuperation. This is an example of the practice of medical social work. Medical social workers provide services that patients are accustomed to in many health settings in Nigeria, such as counselling in antiretroviral clinics, managing patient billing, and helping patients find funding for necessary medical tests. There are many more services available to patients; however, frequently, patients are unaware of the benefits offered by medical social workers, which prevents them from taking advantage of social services that could enhance their entire recovery process, social wellness, and psychosocial functioning. In other situations, patients may have inaccurate impressions of the assistance that medical social workers offer. The seeming unpopularity of medical social workers among groups outside of the in-patient group may be caused by a lack of understanding of the field and an underestimation of its importance and duties. Additionally, it may make it more difficult for professionals to get the sufficient feedback they need for service evaluation and development.

Regretfully, a survey of the relevant literature found relatively little research that looked at patients' perceptions of and understanding about medical social work. These outpatient studies seem to be nearly nonexistent. It is imperative to address the requirements of outpatients as well. For this reason, the study aims to explore the outpatient community's understanding and impression of the value of medical social work at University College Hospital in Ibadan, Nigeria.

### **C. Purpose of the Study**

The specific goal of this study is to find out how much outpatients at University College Hospital in Ibadan know about medical social work and how they view its importance and duties. To be more precise, the study aims to :

1. Examine the level of knowledge of medical social work among outpatients at University College Hospital, Ibadan.
2. Determine the perceptions of the role and relevance of medical social workers among outpatients at University College Hospital, Ibadan.

### **D. Research Questions**

1. What level of knowledge do outpatients have on the roles of medical social workers at University College Hospital, Ibadan?
2. What are the perceptions of medical social workers' roles and relevance among outpatients at University College Hospital, Ibadan?

### **E. Scope of the Study**

The University College Hospital in Ibadan, Oyo State, Nigeria, was the sole study site. The main focus of the study was to examine the opinions and understanding of outpatients on the value of medical social work at University College Hospital. All outpatient clinic departments at University College Hospital in Ibadan, Nigeria, were used to choose the participants. Oritemefa, Ibadan North L.G.A. in Oyo State is home to UCH Ibadan. The hospital is situated in the centre of Ibadan, the largest city in West Africa and the capital of Oyo state. One of the best tertiary medical facilities in Nigeria and West Africa, UCH treats patients who are referred from Oyo State. At the time this study was undertaken, UCH had 1037 bed spaces with occupancy rates between 55 and 60 percent, 16 outpatient clinic departments, 32 clinical departments, and 17 nonclinical departments. The Department of Medical and Social Services is responsible for medical social work. Nigeria's medical social work profession originated at UCH Ibadan.

## **II. LITERATURE REVIEW**

### **A. Social Work**

The practice-based field of social work advocates for social growth, cohesiveness, and individual and community empowerment. Humanitarian values, theories, and principles form the foundation of the social work profession, which supports social change and development, social cohesion, and the empowerment and liberation of individuals as well as helping families, groups, and communities overcome obstacles and improve well-being (International Federation of Social Workers, 2014). The person-in-environment viewpoint, which is exclusive to the health professions and offers the contextual focus required for client

and family-centered care, is the foundation of social work's strengths (National Association of Social Workers, 2016). A social worker's work can be emotionally taxing as well as fulfilling. Strong interpersonal skills, empathy, good communication, active listening, and critical thinking are all necessary for a social worker. To become a social worker, one must complete training in the field of social work. Social workers assist those in need, but they do much more than that. They address and support social justice and human rights, position research within their field and policy, and advance the fundamental ideals of empathy and compassion. They also strive to make communities and individuals stronger. SocialWorkLicenseMap.com (2024) states. Through their work with families and institutions, social workers have significantly improved society in a number of areas, including civic rights, Medicaid and Medicare, workers' compensation, unemployment insurance, disability benefits, and the prevention of child abuse and neglect. They might not have as much of an influence worldwide. It seems that developing nations are falling behind because people are not aware of their offerings. Sub-specialties including child welfare, aged welfare, behavioural health, administration and management, advocacy and community organisation, ageing, community development, community health, poverty alleviation, correctional field, youth welfare, civil rights, and of course medical social work emerged as the discipline and practice of social work grew over time.

### **B. Medical Social Work**

A subfield of social work known as "medical social work" is focused on helping patients and their families access resources and support services to improve their psychosocial functioning. These interventions may take the form of psychotherapy, supportive or bereavement counselling, or other social work interventions. Although this study focuses on outpatients, medical social work services are available for both in-patients and out-patients. Patients who come to the hospital for treatment but do not stay overnight are known as outpatients. Clinical social work and hospital social work are other terms for medical social work. Practitioners of medical social work are referred to as medical social workers.

### **C. Medical Social Workers**

Social workers that specialise in medical social work can be found in a variety of settings, including primary or community health centres, hospitals of all kinds, hospices, and long-term care homes. Medical social workers support sick patients and their families in managing their conditions. They give patients information about the resources available to them to deal with a diagnosis and assist them in understanding their sickness or condition. A social worker acts as the patient's advocate, making ensuring that the medical therapy they get meets their emotional and social requirements. Medical social workers provide care for patients of all ages, from newborns to the elderly, and their families by collaborating with physicians, nurses, physical therapists, discharge coordinators, and administrative staff. While a medical social worker's responsibilities may vary depending on the situation, some common tasks and duties include reviewing new admissions for any special needs or issues that need to be addressed; helping patients discharged from a hospital, clinic, or nursing home setting so they can return home; coordinating the needs of patients with complex needs that require multiple services over time; managing unexpected crises with counselling or therapy; and assisting patients in understanding the financial and emotional resources available to them. [Mayo Clinic College of Medicine and Science, 2023].

### **D. Medical Social Work and Outpatient Care**

Any medical attention that does not necessitate hospital admission is referred to as outpatient care. Another name for it is ambulatory care. Advanced procedures that don't need hospital equipment or response can be included in outpatient treatment (Staff, 2016). In hospital settings, outpatient services are used to deliver outpatient care. Centralised and decentralised outpatient services are the two categories of outpatient services, according to Tabish (2011). Decentralised outpatient services are offered in many departments, whereas centralised outpatient services are offered in a small area with all therapeutic and diagnostic facilities in one location.

Medical social workers in clinics or outpatient units appear to primarily assist patients who are discharged following treatment, according to the researchers' observations. Medical social workers can provide outpatients with a plethora of additional services. These include making sure patients have a health assistant or make plans for physical therapy; offering counselling to patients and their families when needed; helping outpatients complete paperwork linked to insurance services or hospital regulations; directing patients to social services like support groups and legal counsel; teaching patients and their families on how to avoid reoccurring illnesses; and advocating on behalf of outpatients for the implementation of public resources that can improve their wellbeing, such as the creation of health centres and services.

Medical social workers in different outpatient setting may offer specific services and assume Patients can receive the additional treatment they require to achieve actual health and wellness because social workers frequently pursue their cases for longer than medical professionals can (Staff, 2016). In Nigeria, the public's opinion of medical social workers as having weak or ambiguous professional abilities and a lack of knowledge about their job profile are among the many obstacles that frequently impede their wonderful work.

#### **E. Roles of medical social workers**

Medical social workers' early responsibilities included helping patients with terminal illnesses, mental health concerns, drug and alcohol addiction, physical limitations, chronic disease management, and obtaining extended care services (Cannon, 1913 as quoted by Judd & Sheffield, 2010). Throughout the spectrum of therapeutic services, including outpatient, acute, chronic, crisis intervention, counselling, advocacy, and case management, medical social workers fulfil duties specific to the communities they operate in. The main roles that social workers, especially medical social workers, should play in managing natural catastrophes, addressing national and international health care concerns, and reducing stress for patients and their families (Parast & Allaii, 2014).

Five domains—direct practice activities like counselling and/or crisis intervention, discharge planning, identifying and engaging in bioethical issues, carrying out evidence-based practice activities, and income-producing projects—were identified by Judd and Sheffield (2010) as the roles and activities of medical social workers. Activities related to discharge planning were further separated into groups, such as helping the patient or family comprehend the diagnosis, expected level of functioning, recommended course of treatment, follow-up scheduling, giving them specific instructions on how to take care of themselves after leaving the hospital, arranging for community support services, and moving the patient to another medical facility.

A medical social worker's primary responsibility is to establish a comfortable environment in which their clients feel free to communicate their pain and related psycho-social issues. Second, one of the most crucial responsibilities of a medical social worker is to inform a client and his family of the news (Pandit & Dar 2018). According to Orji, Orji, and Oweibe (2015), the duties of a medical social worker include working with other experts to determine clinical requirements and evaluate patients' physical or medical conditions; supporting patients in resolving crises; directing patients or their families to local resources to aid in the recovery from medical conditions; giving access to services like financial aid, legal counsel, housing, employment placement, or education; looking into allegations of child abuse or neglect and implementing authorised protective measures when required; providing patients with individual and group therapy to assist them in kicking addictions, getting well from disease, and adjusting to life; Plan the patient's discharge from the care facility to their home or another care facility; keep track of, assess, and document the patient's progress in accordance with the quantifiable objectives outlined in the treatment and care plan.; conducting interviews and reviewing medical records to identify environmental barriers to the patient's progress; setting up support groups or providing family members with counselling to help them comprehend, manage, and support the patient.

A medical social worker must manage emergencies as they arise in addition to managing daily tasks. This could entail providing treatment or counselling. In medical contexts, social workers occasionally diagnose or treat psychiatric disorders. (Soumen, 2018).

#### **F. Outpatient Knowledge and Perception of Medical Social Work**

Knowledge lacks any connection to the material world and is therefore an abstract concept. Despite being a very potent idea, it is currently lacking a precise description (Ettore & Constantin, 2018). The way sensory data is arranged, analysed, and consciously experienced is referred to as perception. Both top-down and bottom-up processing are involved in perception (Lumen, n.d.). The definition of perception, as given by the Longman Dictionary of Contemporary English, is the way you think about and perceive something.

The propensity of patients to seek services is significantly influenced by their view and understanding of health professions such as medical social work. Regretfully, there was a dearth of current research on medical social work knowledge and perception at the time this study was conducted, while there is a wealth of literature on social work knowledge and perception. In a study on the public's perception of social work in Turkey, Balogun and Sahin (2018) discovered that while the majority of respondents had never heard of the profession, the most well-known areas of work were child protection and elder care. Despite this, participants had an overall positive attitude about the field. According to Deepthi (2018), while the general public's understanding of social work was mediocre overall, it was comparatively less knowledgeable about the role of social

workers and ambiguous about their opinions of the profession. According to Kagan (2016), there was a dearth of understanding of the functions carried out by social workers.

It has been said that the public has strong, frequently unfavourable opinions about social work despite not having a clear knowledge of what social work is and what social workers perform (Bridget & Julie, 2015). The common public may occasionally become confused regarding the precise job of social work experts due to the roles played by social workers (Deepthi, 2018). Because of this, very few people who need social work services actually visit. The majority of people who are unaware of it and who primarily reside in rural regions rely on the family, the age-grade, and the neighborhood—three pre-colonial social welfare systems that are still in place—for support (Iyidorough, 2013). Patients might not be aware of the whole range of work that social workers conduct because they are unaware of the profession. It's possible that they are unaware that a social worker can assist them with their issue. Undoubtedly, societal norms, financial considerations, and knowledge and information may all have an impact on how healthcare services are used (Ogunlesi & Olanrewaju, 2010).

It's interesting to note that other scholars have also looked at topics connected to this study; they are included below. In a study conducted in 2013, Amann examined how clergy members perceived social work and their willingness to work with clinical social workers. The results showed that clergy members had positive opinions of social workers, had previously collaborated with social workers, and still wanted to work with social workers. "Interdisciplinary Perceptions of the Social Work Role in Hospice: Building upon the Classic Kulys and Davis Study" was the title of the study that Resse (2013) started. The primary goal of the study was to ascertain whether attitudes on social work's role in hospice care have evolved since Kulys and Davis' 1986 study, which employed the same variables but different methods. The survey, which included hospice directors and medical professionals as responders, discovered both conventional and novel perspectives on the role that social work and other disciplines play in hospice care. A research project named Perception of Social Work in Acute Settings was started by Baisa and Tellez (2018). Social workers and other clinical and non-clinical staff members made up the respondents. According to the study, social workers are accepted in multidisciplinary settings to a reasonable extent; nonetheless, a deeper comprehension of the range of social work practice could improve the efficacy of multidisciplinary teams in acute situations. Furthermore, a group's inclination to use service providers' services is predicted by the importance they place on the responsibilities they serve. Therefore, another goal of this study was to find out how outpatients felt about the importance of medical social workers' roles. The opinions of outpatients, which this study examined, were not included by any of the previously mentioned investigations.

### III. RESEARCH METHODOLOGY

The survey design used in the study was descriptive. All 16 outpatient clinic departments at UCH Ibadan, Nigeria's outpatient clinic population comprised the study's target group. The following information was obtained from the hospital regarding the typical daily count of outpatients seen:

**Table 1: Average Number of Patients Seen Daily at Outpatient Clinics in UCH**

S. No	Clinic Departments	No. of Patient Seen Per Day
1	Psychiatry clinic	61
2	Medical Outpatient (MOP) clinic	345
3	Rheumatology	55
4	Hematology clinic	57
5	Trauma clinic	43
6	Surgical Outpatient (SOP) clinic	320
7	Radiation Oncology	103
8	Pediatrics Clinic	86
9	O&G	77
10	Accident and Emergency	56
11	Geriatric Clinic	17
12	Palliative and Hospice Care Clinic	30
13	Family Medicine/General Outpatient Clinic	173
	<b>Total number of patients seen per day in outpatients clinics</b>	<b>1423</b>

Source: UCH Administrative Department

1423 outpatients from 16 outpatient clinic departments at University College Hospital made up the study's population. The study employed a stratified random sampling technique to choose the participants. Taro Yamane's 1967 formula was used to determine sample size. As a result, 312 outpatients from UCH in total were examined.

The researchers created a single questionnaire titled Knowledge and Perception of Medical Social Work (KPMSW) as the research instrument for the study. Writing objects that were rationally keyed both favourably and negatively required the application of the logical building method. The structured questionnaire is divided into two sections: Section B is titled "Outpatients' Perception of Medical Social Workers' Roles," and Section A is titled "Knowledge of Medical Social Work Section." The instrument was constructed with a yes-or-no answer pattern for section A and a four-point Likert scale for section B with equivalent values of 4, 3, 2, 1: Strongly Agreed (SA), Agreed (A), Strongly Disagreed (SD), and Disagreed (D).

The face and content validity of the research tool were examined. A pilot test was conducted to verify the instrument's dependability. Using version 21 of the Statistical Package for Social Sciences (SPSS), a reliability coefficient of 0.7 was obtained. The following procedures were used to administer the primary tool. To facilitate simple access and administration of the questionnaire among the UCH outpatients, a letter of introduction was obtained from one of the researcher's departments. Two assistants helped distribute copies of the questionnaire across the hospital while the instrument was being administered. This made it possible to distribute and collect copies of the questionnaire throughout a three-week period at various clinics. The participants were informed not to write their names on the questionnaire for unanimity. To make tracking and retrieval easier, each copy of the questionnaire has a number added to it. One of the researchers and her two assistants collected copies of the questionnaire when it was finished. The information utilised for the study came from the 300 accurately completed and returned copies of the questionnaire.

The Statistical Package for the Social Sciences (SPSS), Version 21 (SPSS Inc. Chicago, IL, USA) was used to analyse the data once it had been coded, verified for accuracy, and input into the computer. The data was presented using descriptive statistics such as means, standard deviations, pie-charts, and percentage frequencies.

**A. Ethical Consideration**

Anonymity and confidentiality were guaranteed while distributing the questionnaire, and the nature and goal of the study were described. The study's participants received neither payment nor incentives for their participation. The University of Ibadan and University College Health Ethics Committees granted their ethical approval, and the moral guidelines governing the use of human subjects were adhered to. Additionally, the committee recommended that the researcher take an ethics course to have a deeper comprehension and application of the ethical principles guiding this research.

**IV. PRESENTATION OF RESULTS AND DISCUSSION OF FINDINGS**

*Research Question 1: What level of knowledge do outpatients have on the roles of medical social workers at University College Hospital, Ibadan?*

**Table 2: Frequency and Percentage table of respondents' knowledge of the roles of medical social workers**

Statements for consideration	Respondents in this study; N=300		Mean(x), Standard Deviation(SD)
	Frequency(n)	Percentage (%)	
Medical social workers' roles are:			
1. Counselling patients on treatment process.	257	85.7	(0.86, 0.35)
2. Assisting patients in getting funds for bills, tests and drugs.	222	74.0	(0.74, 0.44)
3. Carrying out home tracing of abandoned patients.			
4. Contacting relatives and friends of patients that support them.	206	68.7	(0.72, 0.75)
5. Working with doctors and nurses in patient treatment process.			
6. Creating support groups for patients with chronic illnesses.	262	87.3	(0.87, 0.33)
7. Going on ward rounds with medical teams.			
8. Referring patients to agencies outside the hospital where they can get services.	230	76.7	(0.77, 0.42)
9. Resolving issues between patients and their relatives.	224	74.7	(0.75, 0.44)

Level of Knowledge			
Poor	179	59.7	(0.60, 0.50)
Moderate	222	74.0	(0.76, 0.47)
Good	203	67.7	(0.75, 0.59)
	9	3.00	
	114	38.0	
	177	59.0	

Source: Field Survey, 2020

Based on the information presented in the above table, the majority of respondents (85.7%) were aware of the roles played by medical social workers, which include counselling patients on treatment processes, helping patients get access to financial aid, 68.7% tracing patients who have been abandoned to their homes, 87.3% getting in touch with patients' friends and family, 76.7% collaborating with doctors and nurses on patient treatment plans, 74.7% organising support groups for patients with chronic illnesses, 59.7% participating in ward rounds with medical teams, 74% referring patients to organisations outside the hospital, and 67.7% mediating disputes between patients and their relatives.

To determine the respondents' degree of knowledge, a knowledge score was calculated. The following is a breakdown of the 9-point scale: 1-3 is poor, 4-6 is average, and 7-9 is good.

0.3% of the respondents had poor knowledge, 38% had moderate knowledge and 56% of the respondents had good knowledge. Therefore, this study shows that outpatients have a good level of knowledge of the roles of medical social workers at UCH, Ibadan.

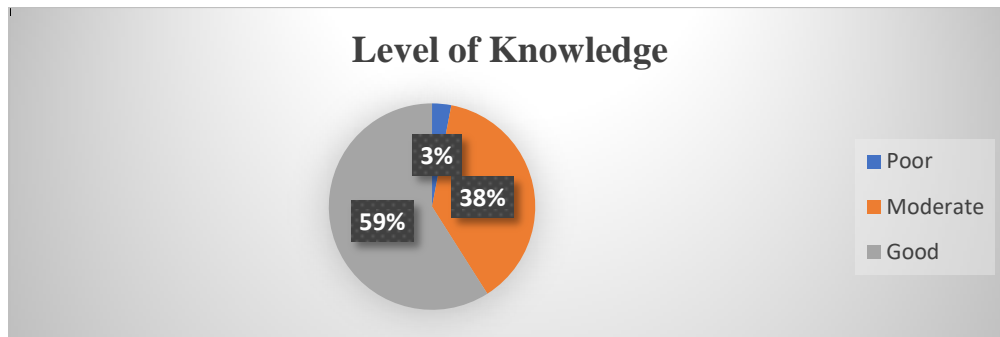


Figure 1: Pie Chart Showing Outpatients Levels of Knowledge of Medical Social Workers' Roles

Research Question 2: What are the perceptions of medical social workers' relevance and roles among outpatients at University College Hospital, Ibadan?

Table 3: Perception of Medical Social Workers and their Roles

S. No	Statement for consideration	Respondents in this study; N=300				Mean(x) Standard deviation (SD)
		SD f/%	D f/%	A f/%	SA f/%	
1	Medical social workers help in reduction of hospital bills	11/3.7%	49/16.3%	126/42%	114/38%	2.1 0.82
2	Medical social workers are counsellors that work in hospital	9/3%	42/14%	110/36.7	139/46.3%	2.3 0.81
3	Medical social workers must receive letters from doctors before they help patients	15/5%	80/26.7%	90/30%	115/38.3%	2.0 0.92
4	Medical social workers are useful to patients	11/3.7%	27/9%	86/28.7%	176/58.7%	2.0 0.82
5	Medical social workers are only contacted when patients need help with money	34/11.3%	96/32%	68/22.7%	102/34%	1.8 1.03

6	Medical social workers work under NGOs and not the hospital	42/14%	78/26%	106/35.3%	74/24.7%	1.7 0.99
7	Medical social workers are just good Samaritan that help patients	26/8.7%	96/32%	70/23.3	108/36%	1.9 1.01
8	Medical social workers do not undergo professional training like other health workers e.g. doctors, nurses and lab scientists	62/20.7%	58/19.3%	86/28.7%	94/31.3%	1.7 1.12
9	Medical social workers can help families that cannot take care of children to process adoption	23/7.7%	68/22.7%	102/34%	107/35.7%	1.9 0.95
10	Medical social workers assist patients in getting their medical records	57/19%	48/16.0%	95/31.7%	100/33.3%	1.7 1.01

Source: Field survey, 2020

Note: The agree responses are the sum of strongly agree (SA) and agree (A) responses from the instrument, this is also applicable to the disagree responses.

According to the study, the majority of participants (80%) concur that medical social workers assist in lowering patients' medical expenses, and the majority of respondents (83%) say that medical social workers are hospital-employed counsellors. More specifically, slightly above average (68.3%) of respondents thought that a medical social worker needed a doctor's referral letter before being allowed to see patients; roughly 56.7% thought that patients only called medical social workers when they needed financial assistance; the majority of respondents (87.4%) agreed that medical social workers are helpful to patients; and 69.7% thought that medical social workers could assist families who couldn't care for their children with the adoption process. Consequently, a majority of the respondents—60%—hold the incorrect belief that medical social workers are employed by non-governmental organisations (NGOs) rather than by hospitals; 61% think that medical social workers lack professional training; 59.3% regard medical social workers as good samaritans; and 65% think that medical social workers help patients obtain their medical records.

To determine how positively and negatively respondents' perceptions were measured, a perception score was calculated. A 24-point rating system was employed, with 0–12 denoting unfavourable assessment and 13–24 denoting favourable perception. Respondents' favourable perception was 72%, while their unfavourable perception was 28%. Thus, this study demonstrates that outpatients at UCH, Ibadan, have a positive opinion of the importance and functions of medical social workers.

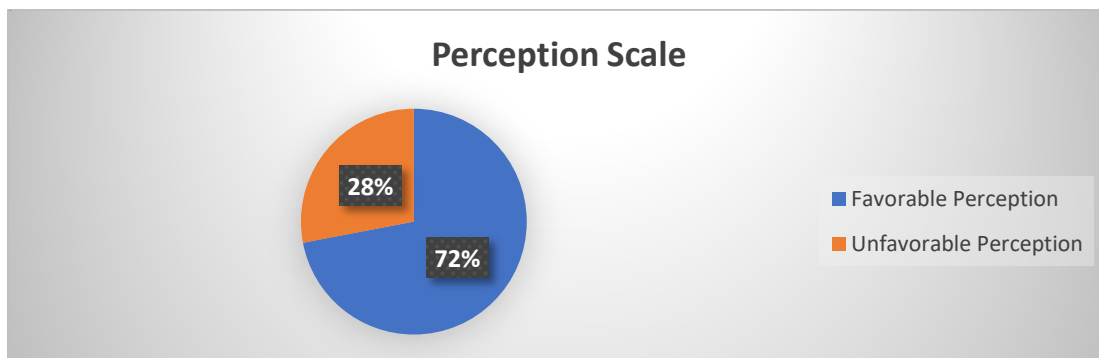


Figure 9: Pie-chart Showing Perception Scale of Respondents

## V. DISCUSSION OF FINDINGS, CONCLUSION AND RECCOMENDATIONS

### A. Discussion of Findings

According to the first research question, 59% of the participants generally possessed a good understanding of the responsibilities of medical social workers at University College Hospital in Ibadan. The findings align with a study by Kagan (2016) that, when concentrating explicitly on the responsibilities of medical social workers, reveals that the majority of respondents had a fair understanding of the field. According to Deepthi (2018), 38% of respondents had a moderate level of professional knowledge, which is consistent with the study's findings indicating respondents had an average level of professional



knowledge. The majority of respondents correctly selected "yes" responses for each of the nine statements in the knowledge category, indicating that they are aware of the specific tasks played by medical social workers despite having a generally good level of knowledge. It is understandable that the lowest response rates were 59.7% for the role of accompanying medical teams on ward visits and 68.7% for tracing abandoned patients' homes. Since many of the study participants were outpatients, it's possible that many of them were not exposed to medical social workers performing home tracing for patients who had been left behind in the wards or going on ward rounds in other hospital wards.

The majority of respondents (72%) to the second research question expressed a positive opinion of medical social workers and their roles. The majority of study participants (80%) concur that medical social workers assist in lowering patients' out-of-pocket medical expenses, whereas 83% believed that medical social workers were counsellors employed by hospitals. This contrasts with Deepthi (2018), who found that respondents' opinions of the profession were either neutral or unfavourable. The results also support the findings of Amann's (2013) study, since respondents in Amann's study similarly expressed good opinions about clinical social workers. Even while respondents' perceptions of medical social workers were generally positive, there were still false beliefs about the field. For example, 59.3% of respondents thought of medical social workers as good Samaritans, and 61% thought they had no professional training. These findings support the findings of Raiz and Safaraz (2015), who claimed that medical social work is perceived as a charitable or altruistic endeavour motivated by basic piety or religious obligation. Additionally, they mentioned that most people thought social workers didn't need to have a professional degree, set of skills, or area of specialisation in order to practise; instead, they saw social workers as anyone with a decent heart who wanted to help the underprivileged and distressed.

#### A. Conclusion

The outpatient community at UCH Ibadan has a positive opinion of medical social work and a good degree of knowledge about it, according to the study's findings. The report goes on to say that if medical social workers' functions and significance to the medical services and care outpatients at UCH Ibadan are understood, then the outpatient population there will be eager to seek out and utilise their services.

#### B. Recommendations

This study makes the following recommendations.

1. Through enlightenment initiatives, relevant government agencies and medical social work practitioners themselves can improve the perceptions and understanding of the profession among patients and the general public.
2. Medical social workers can collaborate with the media to raise awareness of the functions and applicability of medical social work. This can be accomplished through features in journals and newspapers about the functions and importance of social work in healthcare, as well as radio and television programmes and shows.
3. The formulation of a clear vision and policy by the Nigerian government on the hiring of medical social workers in medical social services departments of all public and private health care settings is advised. This will enhance outpatients' and the public's current understanding and perception of medical social work.
4. Medical social work ought to be covered by the national healthcare budgets. This will enhance the way in which medical social work services are provided to patients and increase the perception of their relevance to their needs.

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