

MENTAL HEALTH SERVICES AND SOCIAL WORK AT UNIVERSITY HEALTH CENTRES IN NIGERIA

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Abstract

This paper is a position paper to examine the roles of Medical Social Workers in University Health Centres in Nigeria. This paper also examined the challenges, needs, and benefits of establishing the Medical Social Services Department in the Nigerian University Health Centre. The paper concluded that the role of Medical Social Workers is the sine qua non to effective and efficient health care service delivery in Nigerian Universities. The paper recommended a structured implementation guide for the Medical Social Services Department in Nigerian University Health Centres.

Keywords: *Mental Health Services, Social Work, University Health Centres*

Introduction

Undergraduates are at the crossroads of transitions in their personal, family, social and academic life and this period is characterised by a passage from youth into adulthood and they often grapple with physical, social, and, emotional changes and or pressures such as freedom from constant parental presence and influence; unbridled access to social media platforms; adjustment to campus life; forming/maintaining relationships, including sexual relations; pressure to succeed academically; anxiety

over future prospects and opportunities; and the pressure to conform to parental expectations (WHO, 2019; World Youth Report, 2003; National School Climate Council, 2007). These factors increase university students' vulnerability to mental health challenges, hence, the very high prevalence of mental health problems among university students as established by the literature (Dachew, Azale & Berhe, 2015; Sadia & Zahid, 2013; Rodgers & Tennison, 2009; Eisenberg, Gollust, Golberstein, &

Hefner, 2007; Benton, Robertson, Tseng, Newton & Benton, 2003). Amawuli and Prosper (2018) and Karl, Limpopo, Supa (2013) similarly found that mental illness is pervasive among students of tertiary institutions in Nigeria.

Adewuya (2006); Nerdrum, Rustoen, and, Ronnestad (2006); Ovuga, Boardman, and Wasserman (2006); and, Stewart-Brown, Evans, Patterson, Petersen, Doll, Balding, and Regls (2000) found that university students are more vulnerable to various kinds of health problems; ranging from increased stress to unhealthy lifestyle. The major health challenges identified among students in tertiary institutions are mental, psychological problems, infectious disease, and emotional disorder (Tomoda, Mori, Kimura, Takahashi & Kitamura, 2000). Mental health challenges have, however, been more associated with adolescence. The World Health Organisation (2019) found that mental health conditions accounted for 16% of the global disease and injury burden in adolescents. According to Dabana and Gabir (2018), psychological morbidity in undergraduate students is a neglected public health problem that holds major implications for campus health services and mental health policymaking.

Social Work is a profession that is traditionally concerned with helping individuals, families, groups, and communities to enhance their individual and collective well-being. It helps people to develop and enhance their innate skills and ability to use their individual and community resources to resolve problems and empower them to find solutions to life's challenges. There are various areas of specializations and practice settings within which social workers function and these include: Medical/Health Social Work, Social Welfare, Industrial Social Work, Community

Social Work, etc. The settings within which the social workers can function are as varied as they are diverse and one such setting is the University Health Centre which has been referenced to provide secondary health services for students and staff of the university community.

Social workers have a crucial part to play in improving Mental Health Services and Mental Health Outcomes for citizens. They bring a distinctive social and rights-based perspective to their work. Their advanced relationship-based skills, and their focus on personalisation and recovery, can support clients to make positive, self-directed change (Allen, 2014). Despite this, the role and priorities of social workers in Mental Health in recent years have often not been well defined. Their status and authority within multidisciplinary settings have sometimes been undermined, and opportunities to realise professional potential have been underdeveloped (Allen, 2014). There is also a paucity of research on the role of social workers on university campuses, especially, as it pertains to improving the availability and acceptability of Mental Health Services. This could be a result of many reasons ranging from lack of knowledge, awareness, and recognition of the profession as well as the benefits that could be derived from social work services amongst others.

This paper aims to explore the role of social work in improving Mental Health Services in University Health Centres in Nigeria. Highlighting the need for Medical Social Services in these facilities is aimed at Social Workers, Advanced Social Work Practitioners, Social Work Leaders and Educators, Medical Directors, managers and members of Hospitals Management Boards, University Management organs, policy-makers at the Federal and State Ministries of Health and Education and other professions

and students and their families. The role of social work in mental health articulated in this paper has implications for these stakeholders. It is particularly important for the government because it highlights how social work enhances mental health care provision; positioning it to become more preventive, client-focused, and physiological healthcare.

Pressures faced by Students

While it could be assumed that university students have nothing to worry about, especially, because they have no job, they are free from constant parental supervision, as all they have to do is focus on their academics; in reality, university life is full of stressors that could have a negative impact on a student's mental well-being. Studies have shown some of the most common stressors experienced by students to be multiple assignments, competition with peers, project or fieldwork stress, lack of pocket money, poor relationships with other students or lecturers, failures, family problems, over-crowded lecture halls, and hostels, and inadequate resources to perform academic work (Oduwaiye, Yahaya, Amadi & Tihamiyu, 2017; Agolla and Ongori, 2009). Many university students encounter hardship which ranges from meeting basic needs such as food, shelter, healthcare, to issues such as finding childcare, financial assistance, adjusting to living away from home - their comfort zone, and familiar support systems. What a student needs can sometimes be so great that hardships turn into crises.

Tensions suffered by students can be attributed to a variety of factors. According to Frankel (2007), these problems can be divided into four categories: normal developmental issues, stresses of student life, individual challenges and vulnerabilities, and crises.

Normal Developmental Issues: Developing a realistic career goal, clarifying values and priorities, balancing connection to family and culture with growing individuality, developing intimate relationships, and exploring sexuality, adapting to differences between secondary school and university, often including greater anonymity and less individual attention in college.

The Stress of Student Life: Multiple assignments, exams, and expectations; academic pressure, need for higher grades, and more credentials; financial pressure such as student debt; juggling being a student with working and/or raising a family and/or extra curricular activities (e.g., sports, clubs, volunteer work, social life.); social and cultural isolation, for the many students living far away from their home communities; pressure from peers, family, culture, and self to "keep up"; fears related to personal safety—traditionally, this means fears related to, for example, assault or sexually transmitted disease.

Individual Challenges and Vulnerabilities: History of moderate to severe depression or anxiety disorders, or other mental disorders; past or current abuse, loss, trauma, coping with mental health issues or problem behaviours of others (e.g., a chronically depressed parent, addicted sibling or abusive partner); negative associations and low self-esteem based on experience with schools, learning, teachers; ineffective or risky coping behaviours (e.g., disordered eating, addictions, self-harm, and suicidal thinking).

Crises: A serious health problem or injury; illness or death of a family member or close friend; relationship breakup; assault; parental divorce.

Students' Stress exists on campus, even though differences in the university environment, impact how those psycho-

social problems manifest in a variety of psychiatric illnesses, including but not limited to depression, schizophrenia, drug abuse, and alcoholism. These illnesses are subsequently presented at the health care facilities of universities. The above demonstrates that it is essential for medical social workers to be available in the Healthcare of a University environment. Not all the doctors or nurses will be available to help the students to manage these pressures; their huge caseloads will not permit them to treat non-physiological conditions and they are often not trained in the tradition of psycho-social interventions.

Medical Social Work in Nigeria

Medical social work, also known as hospital social work, is a sub-discipline of social work. In this field, social workers typically work in facilities that provide care to patients, including hospitals, emergency rooms, hospices, nursing homes, rehabilitation centres, assisted living facilities, and home health agencies. They work with patients to ensure they are being properly cared for; facilitate communication between them and their caregivers; assist with paperwork and decision-making; etc. Medical/Health social workers are also advocates for patient rights and a source of comfort during difficult times. Social workers in hospitals and medical centers provide frontline services to patients with conditions spanning the entire health care continuum. Medical social workers typically work on an interdisciplinary team with professionals of other disciplines (such as medicine, nursing, physical, occupational, speech, and recreational therapy, etc.)

Medical social work started in Nigeria at the University College Hospital (UCH), Ibadan with Late Mrs. Mary Modupeoluwa Omitowaju (Nee Noonoo) as the first Medical Social Worker (Medical Social

Services Department, UCH, 2010). The University College Hospital, Ibadan maintains its position as the pacesetter in Clinical Social Services delivery in the country and collaborates with other health professionals in highlighting the psychosocial components of health care. It enables prompt and effective alleviation of the psychosocial problems of needy patients in a conducive environment that ensures life is not lost due to lack of care whilst actively playing the role of 'professional friend in need' to the patient (MSSD, UCH 2010). Medical social services have since expanded to other healthcare settings in Nigeria. In particular, there is currently a policy that healthcare settings owned by the federal government should have departments of social work or social welfare or public health social work manned by social workers to provide pre-marital counselling, HIV/AIDS, and family planning counselling (Federal Ministry of Health, 2014). There are, however, no corresponding requirements for state-owned health care services and most do not employ social workers (Okoye, 2019).

Medical social workers assess the psychosocial functioning of patients and families and intervene where necessary. Interventions may include connecting patients, patients' support systems, and families to necessary resources and supports in the community; providing psychotherapy, supportive counselling, and grief counselling; and helping patients to expand and strengthen their network of social support (Nigeria Association Social Workers, 2020).

In the hospital setting, medical social services include a wide range of activities that medical social workers perform to help patients solve identified social problems around an existing clinical condition. Social

work operates at differing levels of health care, such as preventive care; primary care (ongoing care for patients before the onset of disease symptoms or care for those experiencing early symptoms); secondary care (treatment of full-blown illness); tertiary care (treatment of illness seriously endangering a person's health); restoration care (help during recovery from illness); and, continuing care. Depending on the major purposes and functions of each health care setting, their roles are varied, requiring differing professional skills and knowledge. Medical social workers perform many functions in solving patients' pressing social problems, using professional skills, knowledge, and available resources which can either be tangible or intangible whilst working in micro, mezzo, and macro practice settings (Oyinlola & Adeleke, 2014).

Medical Social Work in the Healthcare Setting of a University

According to the National Universities Commission (2020), Nigeria has over a hundred universities and the following are those with Medical Social Services Department/Unit: Jaja Clinic, University of Ibadan Health Services; Obafemi Awolowo University Health Centre, Ile-Ife; Ladoke Akintola University Technology Health Centre, Ogbomosho; University of Ilorin Health Centre, Ilorin; University of Nigeria Health Centre, Enugu; Babcock University Health Centre, Ilisan, Remo; Adeleke University Health Centre, Ede; University of Jos University

Health Centre, Jos; Bowen University Health Centre, Ogbomosho; Joseph Ayodele Babalola University Health Centre, Ilesa and University of Port-Harcourt Health Centre, Port-Harcourt.

Roles and Benefits

The roles of a social worker in a university healthcare centre and the benefits to be derived by a university include the performance of administrative roles such as programme planning and management for health promotion and disease prevention. They also provide Psychological Support, Crisis Intervention, Psycho-Education, and Referral to other services. These services include: assessing the strength and resilience of the patient, family, and social support systems to help the student function within the community; providing medical crises counselling to students who suffer poor mental health states (depression, anxiety, etc.), and coping and, or adjustment difficulties (loss of a limb, loss of vision or hearing, loss of a family member, etc.); assessing students' risk of self-harm (suicide) and harm to others; identifying, assessing, and referring cases for financial assistance; educating the student's family on his/her physical and psychosocial needs, mediating conflicts, and ways they can access internal and external resources (Ministry of Health Singapore, 2019).

Furthermore, the roles of medical social workers in university healthcare centres include providing emotional support to students and his/her support system that might become scared and disoriented on receiving a medical diagnosis. The social worker supports them emotionally by helping to look more objectively at health conditions and understand realistic expectations and potential consequences of each treatment option. They also consult with multi-disciplinary team members (medical, nursing, and other allied health staff) about how to interact most effectively with the student and family. Serving as brokers who link patients with support resources and services post-discharge, the

social worker makes a comprehensive assessment of a student's abilities and needs, develops a plan to facilitate the student's transition out of the hospital and back into a community or university setting (MHS, 2019).

Medical Social Work and Mental Health Services in University Health Centres

As referenced above, Medical Social Work services are *sine qua non* to qualitative health care and the role social work plays in providing mental health services generally and in the university health centre cannot be overemphasized. Social workers are involved at the micro, mezzo, and macro levels in all sectors. At the micro and mezzo levels, social workers are primarily concerned with "the social well-being of individual clients and their families are equally valued with the importance of their physical, mental and spiritual well-being." At the macro-level, social workers generally demonstrate a greater capacity to look beyond the illness and treatment issues, to consider the broader human, social and political issues in mental health (Canadian Association of Social Workers, 2000).

Services in mental health are usually at three broad levels of health care application: prevention, treatment, and rehabilitation. Social workers may practice within one setting exclusively or practice across all three in response to the diverse client, family, and community needs. Regardless of their places of employment, social workers in mental health deliver the following professional services:

Direct Services: Mental Health Services are rendered to individuals, couples, families, and groups in the form of counselling, crisis intervention, therapy, advocacy, coordination of resources, etc., (CASW, 2019). For example, some previous studies at the university level identified

psychotherapy as the means for practice for clinical social workers, noting that "majority of time was spent seeing students for individual psychotherapy" (Sheats, 2017; Davenport, 2017 & Lin, 2014). Depending on the university, many of these psychotherapists carried out brief counseling either in individual or group settings (Davenport, 2017 & Lin, 2014; **Case Management:** The medical social worker also coordinates inter-disciplinary services to a specified client, group, or population. Heitzmann, (2011) and also Shelesky, Weatherfort, and Silbert (2016), specifically discussed the social workers' case management role on university campuses. For example, Heitzmann (2011) observed that case managers 'connect the dots' for students that might be more at risk for mental health challenges when multiple areas of their lives may be pushed to the edge.

Community Development: At the mezzo or macro practice level, social workers work with the university community to facilitate the identification of mental health issues and developmental health resources which the community needs. Parcover, Mays, and McCarthy (2015) highlighted the importance of a public health perspective in a university. The study revealed how the counselling centre branched off into a Public Health Team with the goal of drawing attention to the underlying causes of mental health problems (Parcover et al., 2015). Other services include clinical supervision/consultation; maintaining quality and management audits and reviews of other social workers involved in mental health services; overseeing mental health programmes and/or service delivery systems; organizational development (workshops, conferences, and professional update

courses); programme, policy and resource development (CASW, 2019).

Challenges of setting up Medical Social Services in the University Health Centres

There are various factors at the societal and government levels that can hinder the establishment of, and or the efficiency and effectiveness of medical social work units in hospitals. There is generally a lack of awareness of the social work profession and understanding of the roles and services of the Social Work Professional in Nigerian socio-political space (Okoye, 2013)

Medical Social Work like the wider social work profession is neither accorded the respect it deserves nor considered a priority by all levels of the Nigerian government and consequently by the populace. Until recently, there was no requirement mandating the presence of social workers in health centres in Nigeria (Okoye, 2019; Idyorough, 2013). The introduction of the 'National Strategic Health Development Plan (2010–2015) and the 'Task-Shifting and Task-Sharing Policy for Essential Health Care Services in Nigeria' (2014) by the Federal Ministry of Health which recommended that social workers work in collaboration with medical personnel to provide family planning, pre-marital counselling, HIV/AIDS counselling and care, community extension services, psychotherapeutic services, and other services (Federal Ministry of Health, 2014; Okoye, 2006) means that social workers are now generally employed, in principle, in federal owned health institutions. With the exception of a few tertiary health facilities owned by the state governments of Lagos, Ekiti, and Kaduna States, this is not the case for state-owned health facilities. Moreover, it is a rarity for social workers to be employed by privately owned health institutions (Bichi, 2015). This recommendation is also not

sufficient because it is merely a policy and not binding legislation (Idyorough, 2013).

Limited resources and funds also negatively impact medical social services. The Nigerian health care system is market-driven and cost-sensitive, rather than its focus being the provision of holistic quality services (Asakitikpi, 2019). Therefore, allocations for many public health programmes hardly support social work services both at state and local levels. Medical social workers are also confronted with the changing reimbursement and financing plans of structured health care services in Nigeria (Oyinola & Adeleke, 2014). According to Ahmed, Alhassan, and Alshammari (2017), social welfare activities in Nigeria are underdeveloped and poorly funded. It is unavailable to the majority of those who need them. This could pose a threat to public health in the face of dwindling economy occasioned by poor budgeting and funding.

Another factor that potentially makes the setting up of medical social work services in university health centres difficult is the strong likelihood that some university authorities will be unreceptive to the idea. This is because they may not be unaware of the importance of social workers and most public universities grapple with the problem of underfunding and are already struggling with how best to deploy scarce resources. According to Ekpoh, Ukpong, and Edet (2009) "university education in Nigeria ... has been facing a declining Government budgetary allocation in the face of increased student enrolment, ageing, and dilapidating infrastructural facilities, and increase staff emolument".

As Nigerian Medical Social Workers often deal with highly complex cases involving students and staff that come into the health centres, they often have large case-loads and

have to meet tight deadlines for arranging necessary services for staff and students. This could impact on service delivery, making follow-up of patients weak, and family counselling improperly conducted. Moreover, services in the Nigerian medical centres are demanding and requiring social workers to be extremely competent and knowledgeable of the values and principles of the profession (Okoye, 2019). It is not uncommon for medical social workers to treat cases involving homelessness among students, lack of health insurance coverage, history of incarceration, and substance abuse problems. Any of these problems, individually and collectively, can impede timely discharge. Sometimes, situations as seemingly mundane as the patient needing bus fare or decent pairs of shoes can lead to delays in discharge, especially if these needs are not identified quickly and early. This is why a complete and timely assessment of the patient's psychosocial needs is critical (Oyinlola & Adeleke, 2014). Furthermore, medical social workers though possessing the training and clinical skills to work with patients who have psychosocial problems, are often not expected by other members of the medical team to function as clinicians, but as functionaries who carry out a variety of tasks that have only relationships with socio-clinical care. These myriads of challenges cascade into ineffective and inefficient service delivery.

Conclusion

The medical social worker can help students utilize resources available to them in their respective university centres to promote good health. The medical social worker can also design and plan events and programmes that can help students acquire knowledge and skills that will inform lifestyle choices that can enhance health and quality of life to enable them cope with the demands of

university life. They can also assist students to develop adjustment mechanisms; analyzing students' learning challenges that promote unhealthy behaviours and recommending appropriate actions. They work together with staff from different departments to assess emotional and psychological issues such as substance abuse, depression, anxiety that can affect a healthy lifestyle; home visits where necessary; advocating on students' behalf; creating health clinics or wellness programmes and also collaborating with Dean of Student Affairs.

Regardless of the size of the institution or its location, University students deal with stress that can lead to unhealthy outcomes. Social Workers are helping professionals trained to provide a comfortable and conducive environment where these kinds of problems are not just isolated but rather recognized and adequate solutions in the form of projects, policies and resource development are put in place.

Social workers in university settings play critical roles in the lives of students. Their specific roles notwithstanding, social workers support students' personal and academic growth during this important phase of their lives.

Recommendations

It is recommended that Non-Governmental Organisations, the National Association of Social Workers (NASOW), and the Association of Medical Social Workers of Nigeria (AMSWON) collaborate to lobby for a national policy framework to mandate the establishment of Medical Social Work Units across University Health Services. This advocacy campaign must necessarily involve pressurising the National Assembly and the Office of the President of the Federal Republic of Nigeria to sign the Professionalisation of Social Work and other

Related Matters Bill which was denied assent by the President. Assenting to the bill will no doubt solve most of the problems confronting the Social Work Profession in Nigeria.

It is also recommended that the administration of the various public institutions through the Medical Social Work Department in collaboration with the office of the Dean of Students Affairs should embark on the design and implementation of campus-wide initiatives targeted at preventing and mitigating mental health distress among undergraduates. These interventions should be strategic enough to capture freshmen during their orientation week while at the same time being a sustainable one which would provide a supportive and nurturing environment throughout the undergraduate studies. The intervention must also be able to identify the most vulnerable population of students and prioritise services to them.

There is a need for effective medical social work protocols and guidelines, incorporating social work case management processes, principles, and values to be developed by AMSWON. This will serve as the basis for preventing and responding to patients with mental health issues across University Health Services and indeed all health care institutions. Health outcomes are considerably effective in countries where there are protocols and guidelines for managing cases and rehabilitating patients. It is also important to extend the provisions of the 'Task-Shifting and Task-sharing Policy for Essential Health Care Services in Nigeria' policy of the Federal Ministry of Health which mandates the employment of social workers in federal health facilities to cover state-owned, and privately-owned health institutions.

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