



PREVENTION OF LOCAL EPIDEMICS: PUBLIC HEALTH ADVOCACY: A USEFUL TOOL FOR SOCIAL WORKERS

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Abstract:

Public Health Advocacy has been a significant tool used by social workers, and it is crucial in the control of local epidemics cannot be overemphasized as many reports have been made on the impact of different health advocacy strategies on health outcomes in various communities. This article critically reviews how social workers have been judiciously using this great tool in fostering healthy living and practices among people living with their communities. The study will help in developing strong health advocacy structure in Pakistan. Public health advocacy has helped control some diseases and getting desired behavioral changes were also reviewed using different research articles that reported such successes. Despite the great importance of public advocacy carried out by social workers, there are still some limitations and challenges being faced in doing this. Although these challenges varied between communities, this article reviewed them from a generalized perspective. Suggestions were made on possible ways of overcoming such difficulties. It is hoped that if implemented, it will go a long way in improving the current health advocacy done by social workers. The concluding part of this article made some recommendations on ways public health advocacy can be done better, emphasizing the need for evaluation of every health



advocacy program to measure progress made by such program and this can be done if social workers can get themselves involved in researches that critically review such programs. It is also recommended that social workers be integrated into decision-making. This research is targeted at examination the participation of social workers in public health advocacy. A careful literature search was made on some scientific search engines like pub Med, EM Base using a very sensitive search strategy on researches made on participation of social works in public health advocacy either through mass community health campaign or through seeking for public health policy.

Keywords: Public Health Advocacy, Social Workers, Health Promotion, Public Health Awareness, Mass Media, Local Epidemics.

Introduction

Public health advocacy refers to educating, organizing, and mobilizing system change in population health (Galer-Unti, 2012). Public Health Advocacy is a significant tool in the control of disease as it institutes primary prevention of disease outbreak through public enlightenment on ways to live an illness-free life by some modifications in the lifestyles and adoption of a healthy lifestyle. Health advocacy is vital in ensuring the total well-being of the community and is also a “Best buy” disease management tool because it provides more economical gain and reduces the damage the burden of a disease would have cost on the global economy.

Schneider and Lester, in 2001, recommend that the underlying foundations of health advocacy can be followed to the profession's ideal of aiding people, gatherings, and populaces who cannot help themselves (Schneider & Lester, 2001). Jobs that fit better into public health advocacy are those that see to helping people, fostering their health even to the grass root, not just at the clinical setting alone. Social Work fit into these categories of profession, and public health advocacy has been one of the primary functions carried out by health social worker as it is regarded as their response in carrying out social justice (Gilbert & Specht, 1976). Public health advocacy is the hallmark of social work. The different ways in which social workers participate in public health advocacy, and there are two major types of public health advocacy carried out by social workers, case advocacy and cause advocacy. Case advocacy involves families requiring some changes to ensure control of a single case. The main goals of case advocacy are to meet the absolute individual needs and other essential goods and services that support women survivors, such as sanitation, basic medical housing, and others over a short period. An example of case



advocacy include control of tuberculosis among school children, which required a social worker to go to the school with the reported case of tuberculosis and advise, advocate and carry out necessary actions needed to control the disease entity among the school children. Cause advocacy is the advocacy to a larger population that involves systematic efforts in changing; policies, standard practices, way of life, procedures, and laws to ensure a positive outcome in the general health of the entire populations involved. This is done through a series of health campaigns done by social workers, which sees that the goals of the health advocacy, such as impacting and promoting the health and wellness of all the population over a more extended period, are achieved.

The importance of public health advocacy done by social workers to improvement of health cannot be overemphasized. Some research looks into the impact of social workers and their role during the COVID-19 pandemic (Amadasun, 2020; Cifuentes-Faura, 2020; Okafor, 2021) and also during Ebola outbreak (Bess & Collins, 2014). Social work and public health advocacy are needed in any community that take the health of the people important (Loue, 2006) as this goes a long way in curbing and preventing some disease outbreaks, which in the run, has a positive impact on the global economy. Community health advocacy ensures that the community's well-being is taken care of and goes a long way in seeing that primary health care is being achieved. A collaboration between social workers and other public health workers will synergize those aims of public health advocacy and help the government make appropriate health decisions and implement health policies.

Public Health Advocacy and Control of Local Epidemic

Public health advocacy is critical to control a local outbreak of diseases by promoting healthy lifestyle access to good health care and improving public health services at the individual and community level. This involves gaining social acceptance, political commitment, system support, and policy support to achieve a specific public health goal which requires the combination of individual and social actions to effect decided change. Public health advocacy controls local epidemics through mass and multi-media, direct political lobbying, and community mobilization ECDC. (2009). Research shows the importance of evidence-based public health advocacy on cholera control in India (Nayyar & Privor-Dumm, 2020). This research carefully analyzed the impact of public health advocacy on the management of cholera and its efficiency. One of the most striking examples of such advocacy the HIV and AIDS control initiative, which includes reducing the cost of antiviral drugs, increasing access to many people, and reducing the stigma and discrimination associated with the disease condition through public enlightenment the burden of disease. Another research evaluates the use of mass media awareness campaigns,



a tool of public health advocacy to prevent the spread of Lassa fever infection in a rural community of Ebonyi State in Nigeria (Wogu, 2018). Similar research shows the effect of mass media campaigns in effecting change in health behaviors (Wakefield, Loken, & Hornik, 2010). Hornik et al. work on the research that reveals the effects of national youth anti-drug media campaign on youth, a cohort study done on US youths ages 9 to 18 between the year of 1999 to 2004 (Hornik, Jacobsohn, Orwin, Piesse, & Kalton, 2008). Similar research also proves the effectiveness of the national control policy's marijuana initiative campaign on high and low-sensation-seeking adolescents (Palmgreen, Lorch, Stephenson, Hoyle, & Donohew, 2007). United States national cancer Institute publishes the role of media in promoting and reducing tobacco use (Davis, Gilpin, Loken, Viswanath, & Wakefield, 2008). Similarly, studies on mass intervention for prevention or cessation of smoking were conducted, revealing a reduction in prevalence due to these interventions (Bala, Strzeszynski, & Topor-Madry, 2017; Carson-Chahhoud et al., 2017; Sowden, 1998). The monthly adult smoking in the United States was evaluated in a study that compares the impacts of tobacco control policies and mass media campaigns on its prevalence (Wakefield et al., 2008). Some studies also look into the consequences of reducing the fund on such media campaigns on tobacco control (Niederdeppe, Farrelly, Hersey, & Davis, 2008; Sly et al., 2005).

Community awareness and participation play a significant role in controlling disease, which serves as a primary prevention method for disease entities. A cross-sectional study was done to assess the level of public awareness on three infectious diseases, HIV, tuberculosis, and hepatitis B infections, among the people of Zhejiang province of China between the period of December 2010 to April 2011 (Liu et al., 2013). Suggested that effective and comprehensive health education campaigns to increase the public health awareness of the diseases should be emphasized in the rural communities of China. Another research shows that the increased incidence of HIV infections among men that have sex with men in China was due largely to a lack of proper health awareness among these sets of people (Choi, Lui, Guo, Han, & Mandel, 2006). A national survey on tuberculosis in China recommended that future programs to increase public awareness on symptoms, control, and free detection/ treatment policy of tuberculosis should target farmers and people with low levels of education (Lu et al., 2009). Literacy and media exposure have been indicated as factors determining the community awareness of HIV infection among youth in India (Yadav, Makwana, Vadera, Dhaduk, & Gandha, 2011). The conclusion drawn from a US national health interview survey on knowledge and risk perception on tuberculosis was that renewed tuberculosis educational efforts are needed for all populations but should be targeted at those disproportionately affected (Marks, Deluca, & Walton, 2008).



From above, we can deduct the importance of public health advocacy in the control of local epidemics and even global pandemic; public health advocacy should be adopted for other health conditions in which behavioral changes are very such as abnormal use of local herbs, effects of working postures and conditions on health and even gaming disorders (Alare, Alare, & Luviano, 2020; Alare, Omoniyo, & Adekanle, 2021). Public health advocacy increases the knowledge of the concerned population on the preventive and control measures of a disease entity which will go a long way in the management of local epidemics and also reducing the endemicity of a disease condition even in its endemic region. This will not help in reducing the incidence but also the prevalence of such disease condition making public health advocacy a vital tool in global disease control. Controlling disease outbreaks at its local level is very crucial as it plays an essential role in reducing the burden of the disease; also, the cost of managing the disease at its local outbreak is relatively cheaper compared to when it's escalated. It also enhances the eradication of such disease conditions and limits the amount of damaged caused by the disease.

Some of these researches reveal that some of the health advocacy does not fully achieve the purpose of enlightening and educating the masses, or some get the groups aware but does not adequately effect the desired changes (Davis et al., 2008; Wogu, 2018) due to inappropriateness in the mode such advocacy was carried out and suggested that people should not only be educated but it must be seen to, that they make the desire behavioral changes.

Methodology

Literature search of articles on reports and assessment of participation for f social workers in public health advocacy was made on different databases which about 42 articles were collected and about 33 were excluding because they couldn't meet the inclusion criteria. The inclusion criteria included the articles that were carried out solely by social workers or in conjunction with other health workers and also researches that were done to assess the participation of social workers in public health advocacy. The exclusion criteria include articles that were duplicate of others or had similar findings to other selected articles.



The Prisma flow chart showing the analysis of processes of articles selection is shown below.

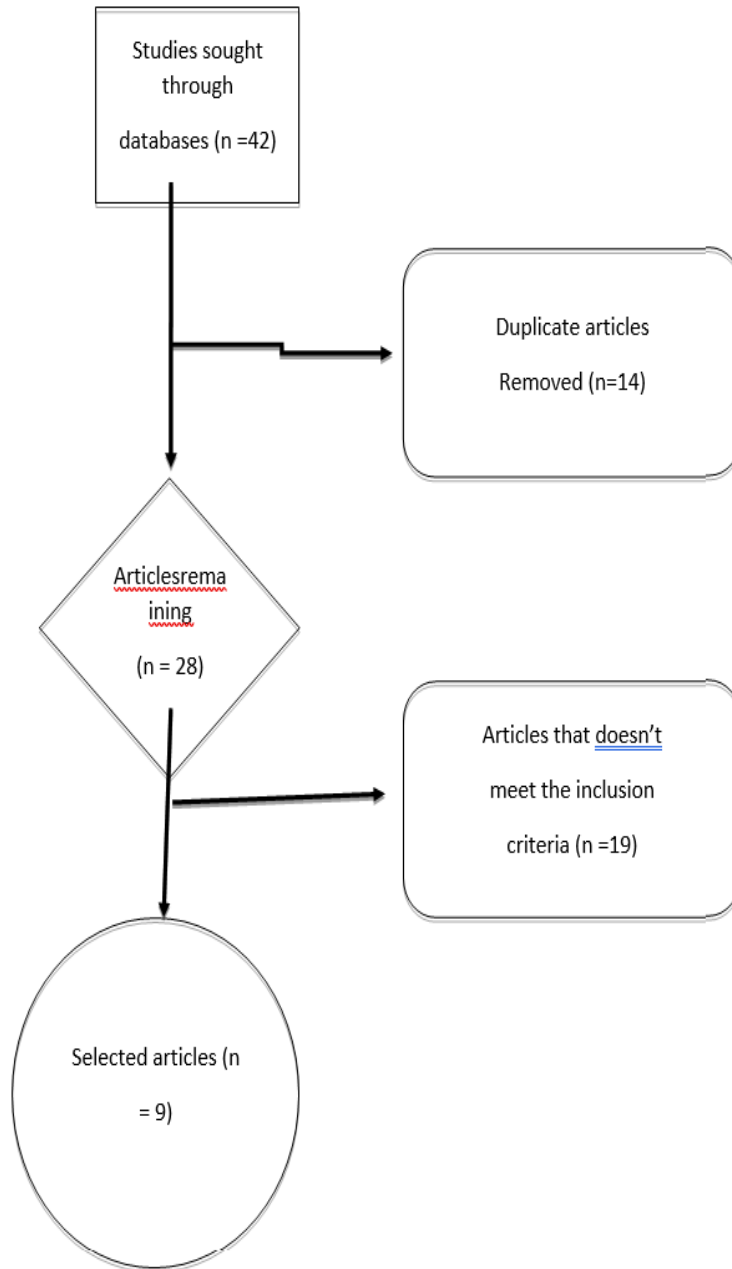


Fig. 1 Prisma flow chart



Result

The result of the analysis of these researches are reported in table below taking into consideration researches that emphasized the importance of social workers in public health advocacy, the role social workers played in the implementation of health advocating policies and others

Table. 1 Contributory Analysis of selected articles.

Article	Author	Year Of Publication	Relationship to the Research
The place of social work in public health. Paper presented at: National Conference of Social Work (Hopkins, 1926)	Harry L. Hopkins	1926	Stated the inseperable role of social work in public health
John D. Stoeckle and the Upstream Vision of Social Determinants in Public Health(Waitzkin, 2016)	H. Waitzkin	2016	Stated the importance of creating synergy between social work and other health work professions in advancing public health advocacy
A History of Social Work in Public Health(B. J. Ruth & Marshall, 2017)	B.J Ruth, J.W Marshall	2017	Importance and roles of social works
Social work roles and health-care settings(Browne, 2019)	Browne T.	2012	Stated the mechanism by which social workers took part public health advocacy



Points of Contact Between the Health Officer and the Social Workers (Folks, 1912)	HolmerFolks	1912	Stated the importance of creating synergy between social work and other health work professions in advancing public health advocacy
The Legacy of Hull House and the Children's Bureau in the American Mortality Transition(Almgren, Kemp, & Eisinger, 2000)	G Almgren, S. P. Kemp, A Eisinger	2000	Stated example of how social workers were involved in the advocacy and implementation of important health policy
National Health Line(Leukefeld, 1989)	C. G Leukefeld	1989	Stated the role of public health social workers
Public health social work(B. Ruth, Sisco, & Marshall, 2016)	Ruth BJ, Sisco S, Marshall JW	1985	Integration of public health into social work
Professional imperialism	Midgley J	1981	Limitations to participation of social workers in public health m

Discussion

The table above reveals that older articles were advocating for participation in public health advocacy while newer articles measures the impact and roles of social workers in public health advocacy which shows that social workers have been engaging public health advocacy.



Roles of Social Workers in Public Health Advocacy

Social workers play significant roles in public health advocacy. Public health social workers are social workers that focus on the prevention and identification of children, adults, families, and communities with needs; and the provision of intervention services that help these people identify ways of meeting their needs and prevention of future problems. They do this by helping individuals and families make some behavioral, situational life changes to improve their overall health and well-being. A public health social worker helps in dealing with health-related issues among people living within a community through identification of people within the community where who have a problem with health, assessment of health needs of the people in the community, working with government authorities to improve access to health facility and evaluating health care services to ensure it is sufficient to cater for the needs of the people within that community.

Harry L. Hopkins, a former director of the New York Tuberculosis Society, wrote, "The fields of social work and public health are inseparable, and no artificial boundaries can separate them. Social work is interwoven in the whole fabric of the public health movement and has directly influenced it at every point." in his report in 1926 (Hopkins, 1926). This shows the interconnection between social work and public health advocacy.

John D Stoeckle influenced social work, creating a synergy between social workers and other health workers in advocating public health (Waitzkin, 2016). Social work is dedicated to improving human well-being using Quantico ecological and bio-psychological approaches (B. J. Ruth & Marshall, 2017). Health administration, prevention, promotion, research, advocacy, and policy are part of the practices of social workers carried out at the macro level (Browne, 2019).

In Homer Folks presentation to the American Public Health Association in 1912, he noted that collaboration between public health and social work would help improve public health advocacy in areas such as infectious disease control, maternal and child health, and prevention of poverty (Folks, 1912). The establishment of the federal Children's Bureau in the United States advocated by Lillian Wald and Florence Kelley; both social workers, to draw attention to issues affecting children and women such as increased maternal and infant mortality rate, orphaning of children, widespread child labor, and lack of birth registration system (Almgren et al., 2000) is an excellent example of how social workers impacted on public health advocacy. Social work grew more into public health when it was integrated into the United States Public Health Service (USPHS) in 1920, giving birth to today's public health social worker capable of carrying out case finding, clinical service, consultation, training, prevention, and research in the public health field; which has



expanded the cope In the control of infectious diseases, venereal diseases, mental illness and others(Leukefeld, 1989).

A study emphasized that social workers shifted focus from secondary prevention to primary prevention through public health advocacy (Rice, 1959). Another called for the development of preventive social work that seeks to prevent diseases in society using the skills of social workers (Wittman, 1961). In 1985, a conference on Public Health Social Work was held by USPHS's Division of Maternal and Child Health to facilitate the integration of public health into social work (B. Ruth et al., 2016). Moreover, the Master of Social Work - Master of Public Health (MSW-MPH) program was introduced to build a synergistic relationship between public health advocates and social workers. Community prevention through community outreaches, cultural responsiveness, and capacity development led to the emergence of prevention researches (Marshall et al., 2011; B. J. Ruth, Velásquez, Marshall, & Ziperstein, 2015). Social workers can ensure primary prevention of disease in the community as it is of great importance over secondary prevention both economically and health-wise.

Limitations and Challenges of Public Health Advocacy by Social Workers

There are limitations to the full participation of social workers in public health advocacy as listed in research which includes lack of health policy training in social work education curriculum, lack of visibility and clarity are the roles of social workers and their potential impact and insufficiency of resources within the social workers professional organizations(Holtzman, 2017). Another challenge is the confusion or lack of understanding of social worker role by other public health professionals (Agwu & Okoye, 2021; Ashcroft, McMillan, Ambrose-Miller, McKee, & Brown, 2018; Johnson, 2009). In Africa, the lack of organization to oversee the training of social work professionals has been one of the most indicated challenges (Mwansa, 2010). Midgley et al. in 1981 identified that the limitations of social workers in so e regions such as Africa compared to the gravity of public health issues cause a significant drawback in the realization of public health advocacy (Midgley, 1981).

General limitations to public holiday promotion or advocacy may also apply to social workers, which include: the lack of consensus on public health, describes the decision-making without necessary data to backup, inadequate capacity to carry out some essential public health functions, iniquity, and inequitable distribution of public health services and others which generally affect public health advocacy done by any public health professionals not excluding the social workers. Collected below are some challenges facing public health advocacy in Africa: underdeveloped sectoral collaboration, the ambiguity of health promotions policy, inadequate resources and capacity to develop and evaluate health



promotion programs, lousy investment in public health advocacy, lack of or no political ways to wash public health advocacy programs (Anugwom, 2020). Also, these factors may contribute to the propagation of health advocacy, especially in rural communities, which are language barriers, harmful cultural beliefs and practices, high poverty rate, low health literacy level, lack of basic social amenities, and others.

The limitations and challenges highlighted above have a much-hindering effect on the effectiveness of public health advocacy carried out by social workers. Social workers should be trained to overcome these challenges in carrying out their duties, and effort should be made in ensuring that this training caters for it's needed for the social worker to thrive in that particular community. And another way forward is when policymakers give enough support needed to foster the work of social workers and when required. Also, a proper and well-established structure should be made stating clearly the role of each health worker involved in public health advocacy to reduce the rate of clashes between the different sectors of health workers and to Foster intersectoral collaboration to improve the quality of health services delivery. The populace should be enlightened on ways by which they can corporate with the social workers and see them as people in health services saddle with the responsibilities of fostering healthy living and maintenance of abstinence from ill-health. Also, Social workers should be trained to at least communicate in the language of the locality they find themselves in to ease the relationship between them and the community members to achieve the goals of public health advocacy. The community should provide essential social amenities such as electricity supply, portable water, mass media, and others.

Social workers should try following up with the community on the initial campaign made to see to it that the desired change in lifestyle was achieved and adequately maintained. A long-term evaluation of the impact of any public health advocacy program should be done to measure progress made and determine if there will be a need to readdress the strategies used if the desired result is not gotten. Social workers will achieve a positive outcome and more remarkable improvement in public health advocacy, with everything being set.

Conclusion

This work systematically reviews the role of public health advocacy as an essential tool of a social of a social worker, although there is a subfield of social work the public health social work, I believe that public health advocacy should be a function of every social worker because it's a very significant impact on the control of disease outbreaks to refrain it to the local epidemics and also to eradicate it. In the management of some



diseases such as tuberculosis, the social worker shouldn't only focus on the contact tracing alone but should advocate for societal change in the way people live their life's to reduce the incidence of such diseases through appropriate education given to the public on ways such disease condition could be presented. The impact of such advocacy during the COVID-19 pandemic can not be over-emphasized. The entire populace was adequately informed on preventive measures such as watching of handing, usage of face mask, and social distancing help in a long way in curbing the damage done by the pandemic.

The social workers should be careful on the way they address the people and the kind of information they give out during their health advocacy programs as every misinformation given out goes s long way in disrupting the actualization of the goals of public health advocacy and also may instigate some false beliefs in people which may take serious and prompt action on the erasing the incorrect information from people's mind. Social Workers should help in policies and appropriate decision making through accurate and proficient data gotten from disease surveillance, registration of vital details and researches carried out to ensure the appropriateness of the procedure, equity in the allocation of resources, and to make sure that every health needs of all population including the minority or the disproportionately neglected ones are taking care of.

This research also critically examines how diseases are controlled through public health advocacy and how specific behavioral changes are being made, showing the importance of public health awareness. This is to encourage every country to adopt and promote appropriate public health advocacy to meet the needs of their people and also to promote many social workers to see public health advocacy as part of their primary responsibilities and way of giving back to the community and also see to it that conclusions drawn from such programs get to appropriate decision-making quarters and are being adopted to make the purpose of such programs effective.

Social workers should also engage themselves in researches that look into the beneficial impact of any public health advocacy program being instituted and those that measure the rate at which such programs are achieving their purpose. This will help in the evaluation of the program and in knowing the appropriate steps to take in improving the program, and in making sure that the entire target population benefitted from it.

Social workers should be included in decision-making as this will facilitate proper integration of social work into public health and improve the decision-making process and allow the interest of people in the grass root to be included and considered when making any decision as social workers are closer to the communities. They interact more with people in the community than most other health care workers, so it will be appropriate that



these set of individuals knowing the needs and wishes of the people are included at that decision making level; this will give room for the actual representation and reflection of people's health needs in the decision made.

Conflict of Interests.

The authors declared no conflict of interest.



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