

**Obstacles facing by social workers in the use of modern therapeutic approaches to social work in the medical field**

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## **1. Introduction to the study problem**

As a result of the growing interest in the social aspects of patients, medical social service is now considered one of the areas of professional practice. The medical social service is a collection of medical efforts aimed at assisting doctors in diagnosing mysterious cases and developing treatment plans for them, as well as enabling patients to benefit from the treatment provided to them and restore their social functions by removing the obstacles that impede them. The manner in which they benefit from the therapeutic opportunities made available to them. As a result of its comprehensiveness with all that surrounds the patient's environmental and therapeutic conditions, the social worker takes on the curative and preventive aspect of patients. It assists medical institution sub-systems in achieving therapeutic, preventive, and rehabilitative goals that are compatible with the integration of medical treatment methods (Abu Al-Maati Ali: 2003).

Thus, the medical social worker seeks to provide health care to citizens while also ensuring their safety and protection. It also facilitated patient admission and reception in hospitals, as well as providing suitable conditions for their departure and return to their original environment following their recovery and completion of their health, mental, psychological, and social safety (Badah et al.: 2015, pp. 179-202)

In light of the developments and changes that have occurred in societies, medical socialwork has attempted to respond to the changes that society is undergoing in order to play an effective role alongside other professions in confronting the negative effects of those variables and benefiting from their positivity that affects the lives of individuals on the one hand and society on the other ( Bayoumi Mari: 1996: 33). With the advancement and development of the profession of medical social work, many approaches and therapeutic models have emerged in social work, such as the therapeutic, preventive, developmental, and spiritual approaches. The therapist uses these approaches to assist patients in facing their problems, regaining their self-confidence, developing their abilities, and regaining their balance. Many studies have shown the importance of the social worker using various therapeutic approaches to help clients solve their problems. The study (Nagwi Syed: 2012) used the behavior modification model from the perspective of community service to reduce some aspects of psychological mismatch among children in residential institutions.

A study (Fathiye Al-Qadi: 2011) found that using client-centered therapy within the context of individual service increases self-esteem among children in residential institutions. And Ibrahim Sobeih's (2011) study, which confirmed the effectiveness of using the spiritual approach in serving the individual and alleviating the stress associated with addiction recovery.

Furthermore, Yousry: Saeed (2010) conducted a study to determine the effectiveness of the developmental approach in the method of working with groups in strengthening the culture of citizenship among young people. Strengthening youth culture toward values of belonging.

The findings of Muhammad Essawy's (2009) study revealed the effectiveness of a professional intervention program based on a spiritual approach in dealing with the problem of parental child abuse. And the research of Ragab Abdel-Qawi Ali (2009), which found a link between the spiritual approach to serving the individual and the reduction of death anxiety in patients with chronic renal failure. While the findings of a study (Nourhan Mounir Hassan: 2007): The effectiveness of vocational intervention in community service using the developmental approach in deepening the cognitive, behavioral, and emotional side of university youth towards self-employment.

Despite the importance of the social worker's use of various therapeutic approaches, such as curative, preventive, developmental, and spiritual approaches, the medical social worker may face many difficulties and obstacles that prevent him from providing treatment during his work in hospitals. Specifically, the difficulties associated with the use of social workers in social service entrances in general and in the medical field in particular. In this regard, Chuck Ki-Wong et al. (2000) discovered that the roles of medical social workers are still not clearly defined and that there is overlap between them and other disciplines working in this field. And the study of Magdy Atef Mahfouz (2004): The results of the study confirmed that there are a set of obstacles that impede the practice of collective programs and activities in rural youth centers, such as poor financial capabilities and the absence of these centers to the presence of the leader who understands his role and mission, as well as a lack of diversity and attractiveness in program activities and weak skills of program and activity specialists.

Azza Abdel-Jalil Abdel-Aziz (2006) also conducted research: The study's findings confirmed that the professional role of practitioners working with youth groups is still limited in terms of commitment to the basic operations of serving the group, and that work must be done to activate and develop this role, which will only come about through the activation of training programs. For these practitioners to train them on how to adhere to the basic operations, as there is a lack of adherence to the principles of program development and design, as well as the fundamental skills of group work. And the Rosalie Bouquet (2006) study, which confirmed a lack of sufficient experience among social workers to use modern model methods and a lack of familiarity with the knowledge, values, and principles of social work in hospitals to develop the social worker's professional performance. Hanan Ashry's (2009) research: The study's findings confirmed that there are numerous challenges

due to some social workers' limited experience with vanguard group programs, as well as the specialist's interest in administrative aspects and neglect of professional practice with vanguard groups. And the study of Muhammad Awad, (2011), whose findings confirmed that social workers in the medical field suffer from not defining therapeutic methods with the necessary efficiency and relying on a specific treatment method, regardless of the different cases, as well as a lack of developing and implementing a treatment plan.

Furthermore, Shehata (2012) discovered that there are gaps in theoretical knowledge, professional skills, and modern therapeutic models when working with individuals. In addition, Al-Qarni (2013) found that role ambiguity and conflict had an effect on the level of professional practice of social workers. The study (Strauss & Northcut, 2014) confirmed that one of the most significant issues confronting social workers is their inability to deal with patients' physical, psychological, and social pressures, so the study emphasized the importance of developing social workers' skills to use non-traditional methods and models in working with patients.

## **2. The study Problem**

According to the previous presentation of theoretical opinions and previous studies, the use of therapeutic approaches with patients in hospitals increases the role of the social worker and helps the patient to recover faster in addition to the medical care provided in the hospital. Despite the importance of using these approaches in the medical field, there are some challenges in using them for reasons unique to the specialist or hospital administration. As a result, the purpose of this research is to identify the barriers that prevent social workers from using therapeutic approaches in medical social work

## **3. Study goals:**

### **The current study aims to achieve the following goals:**

- A- Identifying the obstacles that the medical social worker faces during his practice in the medical field, which limit his use of medical social service therapeutic approaches.
- b- Identifying the obstacles that the medical social worker faces during his professional practice due to the patient's pattern, which limits his use of medical social work therapeutic approaches.
- C - Identifying the obstacles that the medical social worker faces during their professional practice due to the institution's format, which limits his use of medical social work therapeutic approaches.
- D- Create proposals from the standpoint of medical social work to overcome the obstacles that limit the use of therapeutic approaches in medical social work.

**4. Study questions** The current study aims to provide answers to the following major questions

A - What are the obstacles that the medical social worker faces during his medical practice that limit his use of medical social service therapeutic approaches

b- What are the obstacles that the medical social worker faces as a result of the patient's pattern during his professional practice that limit his use of medical social service therapeutic approaches

C- What are the obstacles that the medical social worker faces during their professional practice due to the institution's format, which limits his use of therapeutic approaches to medical social work.

D- What are the most important proposals put in place to overcome the barriers to the use of therapeutic approaches to medical social work by social workers

Concepts:

## **5. Concepts:**

### **5.1 Medical social work is a concept**

(Parker:2003) defines medical social work as the practice of social work in hospitals and health care institutions to help provide a good health condition for people, in addition to preventing diseases and assisting patients and their families in solving social and psychological problems associated with their diseases, by providing caregivers with health services that help them provide appropriate treatment for patients. Medical social work is considered one of the branches of social work in general, with its field of specialization being work in medical institutions, and its foundation being collaborative work between medical, nursing, and social workers.

Others define it as one of the areas of professional practice of social work that assists medical institutions' sub-formats in achieving preventive, therapeutic, developmental, and rehabilitative goals that are compatible with the integration of medical treatment methods (Al-Suruji, Ta'at: 2008).

### **5.2 The concept of preventive entry**

Prevention is a science based on the assumption that predicting problems and their factors prevents their emergence, and that health and behavioral problems can be avoided by reducing the factors that cause them and strengthening the factors that prevent them. (H. David 2006)

Prevention is used in social services in a variety of ways, as it refers to the procedure that prevents something from happening, and positively, it is the process

that is based on acting in order to reduce the lowest possible level of social behavior or personal problems (Rex A. Skidmore and Milton)

Preventive social work is defined as "the set of professional activities carried out by social workers with the goal of avoiding or averting predicted social problems among people, particularly those at higher risk than others, and instilling desirable social goals." It is also defined as "professional assistance provided to people to avoid potential social problems." in particular, and providing them with a reasonable amount of knowledge, attitudes, and skills to deal with situations of distress, anxiety, pressures, and crises (Abu Al-Nasr, 101, 2008).

### **5.2.1 The pillars upon which the preventive approach is built:**

1- The pressures and problems to which the drug user is subjected include a wide range of factors relating to the individual, family, friends, the neighborhood community, and society as a whole. As a result, the preventive approach seeks to identify and confront the sources of pressures to which a person may be exposed.

2- The nature of the programs and services available. It includes the preventive approach, which focuses on improving one's ability to deal with a problem before it occurs.

3- The preventive approach is based on teaching individuals new skills that allow them to achieve their goals and protect themselves, which entails affecting the environment as a whole rather than treating a specific group.

4- The preventive approach is dependent on the intervention's appropriate timing (early intervention), which identifies problems before they occur.

5- The preventive approach is founded on a set of values that affirm the human ability to confront and participate in decision-making that achieves goals (Abdul Latif, Rashad: 2007, 43).

### **5.3 The concept of developmental entrance:**

One of the professional entrances that allows the group's specialist to employ the capabilities of the members, develop their abilities, and increase their professional performance is the developmental approach. Furthermore, it is simple for the specialist to use in the group's study, analysis, and planning processes (Muhammad Al-Jundi: 2002).

The developmental approach is also regarded as one of the forms of practice in the method of working with groups, which contributes to the group members' access to experiences and self-development, and works to achieve growth, take responsibility, and develop mutual culture between them and the group's specialist, and increases the effectiveness of group members, which is reflected in the achievement of collective goals, and aids in the discovery of a dynamic effective medium for group work, And from its influence on its members' behavior,

liberating and supporting them, achieving their adaptation to reality, and criticizing the self of each member of it (Bayoumi: 2004).

### **5.3.1 Characteristics of the developmental approach:**

The developmental approach has many characteristics, the most important of which are:

- 1- Helps individuals gain access to collective experiences and self-development
- 2- It works to achieve growth, assume responsibility, and build mutual trust between them and the social worker (Preston, 2006).
- 3- It increases group members' effectiveness, which is reflected in the achievement of collective goals.
- 4- It supports the group's status as a tool for member change and growth by influencing member behavior, liberating and strengthening them, achieving their adaptation to reality, and appreciating the self of each member in it.
- 5- It contributes to the creation of an effective, dynamic environment in which members of the group can build relationships and develop and strengthen aspects of strength (Abdul Mohsen: 1993).

### **5.4 The spiritual approach**

The spiritual approach, according to Othman, is "a therapeutic approach that relies on the effectiveness of spiritual and religious values in modifying the client's attitudes, delinquent patterns, and negative behavior to achieve maximum maturity and growth" (Othman: 219,2002)

He also defined spiritual entry. It is a type of religious counseling in which religious and spiritual values are used to guide individuals. (5, Qudiri Al-Akhdar, .2011)

According to Robert Parker: 2003), the spiritual is the direction of people's religious, moral, or emotional aspects of the spiritual by focusing on human nature rather than material aspects

Bukaita emphasizes the importance of spiritual factors in serving the individual, believing that true service to the individual is spiritual or concerned with the spirit, and that the spirit is the essence and raw material of serving the individual (Pocket, Rosalie:2006).

## **6. the study's methodological procedures**

### **6.1 – Study Type:**

The type of the current study was determined in the descriptive analytical study, which is consistent with the nature of the study and is consistent with its objectives, which were represented in the difficulties that social workers face when using modern therapeutic approaches to social work with patients in hospitals.

### **6.2- The research population and methodology:**

All social workers working in hospitals in Makkah Al-Mukarramah who meet the criteria and agree to participate in the study comprise the study population. To achieve the study's objectives and answer its questions, a comprehensive social survey approach was used.

3- Study tools: The study relied on a questionnaire tool developed for the study sample after reviewing the literature and previous studies on the subject of the current study. The questionnaire is regarded as one of the most preferred and appropriate tools for answering study questions and achieving the study's objectives.

### 6.3- Fields of study

- The current study was conducted on working social workers in Makkah Al-Mukarramah (Al-Noor Hospital, King Abdulaziz Hospital, King Faisal Hospital, and Hira Hospital).
- The human field consisted of (85) social workers with a social service qualification who agreed to participate in the study.
- Time span: from January 9, 2022 to January 11, 2022.
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## 7. Results study

### 7.1. Specific obstacles to the social worker format.

**Table (1)**

**describes the obstacles to the social worker's work in the use of therapeutic approaches related to the social worker format.**

s	Ferries	response (number)			total weights	Average
		yes	To some extent	no		
1	Inadequate social worker qualification to use modern therapeutic approaches	49	23	13	2.6	2.42
2	I'm not well-versed in contemporary therapeutic approaches.	16	16	53	133	1.56
3	Patients' misconception that the social worker's role is limited to providing material assistance	51	18	16	2.5	2.41
4	The social worker is not given adequate training in the application of modern therapeutic approaches.	21	12	52	139	1.64
5	Social workers' inability to use modern therapeutic approaches with patients.	30	24	31	169	1.99
6	Difficulty in implementing therapeutic approaches in hospitals because it is dependent on selecting the appropriate methods and therapeutic strategies.	38	26	21	187	2.21
7	Personal unwillingness of the social worker to use modern therapeutic approaches	36	30	19	187	2.20
8	The social worker's role in the use of modern therapeutic	57	14	14	213	2.51

	<b>approaches is unclear.</b>					
9	<b>Difficulty in implementing therapeutic approaches with patients to achieve therapeutic goals</b>	11	40	34	147	1.73
10	<b>The difficulty of employing contemporary therapeutic approaches in teamwork situations</b>	29	30	21	178	2.09
11	<b>Difficulty communicating my thoughts to patients during professional practice</b>	18	31	36	102	1.79
	<b>Total</b>				1916	
	<b>Average</b>				147.2	2.05
	<b>The ratio</b>					
	<b>relative degree</b>				<b>68.</b>	<b>3</b>

According to the previous table, the level of obstacles confronting the social worker's work in the use of modern therapeutic approaches with patients in hospitals and related to the social worker's own system is moderate, with a relative degree of measuring the obstacles reaching 68.3%, with a weighted average of 147.2 and a weighted average of 2.05. This is supported by the fact that the percentage of those who responded to these phrases was always 38.1%, sometimes 28.8%, and only rarely 33.1%.

The most powerful impediments were those mentioned in phrases Nos. (8, 1, 6, 7), which are related to: 1- A weighted average of 2.51 for the lack of clarity in the role of the sociologist in using modern and contemporary therapeutic approaches.

2- A weighted average of 2.42 for the lack of appropriate qualification for the social worker to use contemporary therapeutic approaches.

3- The difficulty of implementing therapeutic approaches in the hospital, with a weighted average of 2.21, because it is dependent on the selection of terminating methods and appropriate therapeutic strategies.

4- The social worker has no personal willingness to use modern therapeutic approaches, with a weighted average of 2.20.

## 7.2 : Obstacles that are unique to the patient's pattern: table (2)

explains the obstacles to the social worker's work in using therapeutic approaches related to the patient's pattern.

s	ferries	response (number)			total weights	Average
		yes	To some extent	no		
1	<b>The patient's failure to recognize that his health issue</b>	02	18	10	207	2.44

	<b>has social, psychological, and spiritual dimensions</b>					
2	<b>Patients' lack of understanding of the significance of modern therapeutic approaches in treatment.</b>	٦٢	١٢	١١	٢٢١	٢.٦٠
٣	<b>The patient's belief that the social worker's role is limited to material assistance</b>	٥٣	١٩	١٣	٢١٠	٢.٤٧
٤	<b>Patients' lack of belief in therapeutic approaches used with them in treatment</b>	٣٥	٢٨	٢٢	١٨٣	٢.١٥
٥	<b>The patient's ignorance of the social worker's role in the hospital</b>	٢٧	٤٠	١٨	١٧٩	٢.١١
٦	<b>Patients' failure to respond to the social worker's efforts to engage them in modern therapeutic approaches.</b>	٥٠	٢١	١٤	٢٠٦	٢.٤٢
٧	<b>Patients' lack of trust in the social worker's ability to treat them using modern therapeutic methods</b>	٣٤	٣٣	١٨	١٨٦	٢.١٩
8	<b>Difficulty scheduling treatment sessions that are convenient for hospital patients</b>	٢٤	٣٣	٢٨	١٦٦	١.٩٥
9	<b>Patients did not show up for interviews with the hospital social worker.</b>	٣٠	٣٠	٢٥	١٧٥	٢.٠٦
	<b>Total</b>	٣٦٧	٢٣٤	١٦٤	١٧٣٣	
	<b>Average</b>	٤٠.٨	٢٦	١٨.٢	١٩٢.٦	٢.٢٧
	<b>The ratio</b>	٤٨	٣٠.٦	٢١		
	<b>relative degree</b>		<b>75.5</b>			

According to the previous table, the level of obstacles confronting the social worker's work in the use of therapeutic approaches with patients in hospitals and due to the patient's pattern is high, with a relative degree of measuring the obstacles reaching 75.5%, with a weighted average of 192.6 and a weighted average of 2.27. This is supported by the fact that the percentage of respondents to this dimension's statements is always 40.8%, sometimes 26%, and only rarely 18.2%.

The most powerful barriers were those mentioned in phrases (2, 3, 1, and 6), which are related to:

- 1- Patients' awareness of the importance of modern therapeutic approaches in treatment is low, with a weighted average of 2.60.
- 2- The patient's belief that the role of the social worker is limited to material assistance, with a weighted average of 2.47.
- 3- The patient's failure to recognize that his health problem has social, psychological, and spiritual dimensions, with a weighted average of 2.44.
- 4- Patients' responses to the social worker's efforts with them using modern therapeutic approaches, with a weighted average of 2.42.

#### 7.4 Institutional-specific challenges:

**Table (3)**

**Describe the challenges that the social worker faces in using therapeutic approaches due to the institution's format.**

s	Ferries	response (number)			total weights	Average
		yes	To some extent	no		
1	a lack of a suitable location for therapeutic approaches	37	24	24	183	2.10
2	The hospital administration's lack of understanding of therapeutic approaches	73	4	8	230	2.76
3	The management is not convinced of the significance of the social worker's role in the use of modern therapeutic approaches.	40	10	20	190	2.31
4	Inadequate funding for training social workers to use modern therapeutic approaches.	40	27	18	192	1.67
5	The hospital's lack of technical personnel capable of using modern therapeutic approaches.	36	31	18	188	2.21
6	The hospital does not attend non-medical conferences concerning therapeutic approaches.	43	19	23	190	2.24
7	The hospital has a shortage of specialists, making it difficult to use modern therapeutic approaches.	40	21	19	196	2.31
8	a lack of collaboration between hospital administration and social workers	43	28	14	199	2.19
9	Assigning administrative duties to the social worker in charge of the institution, which has an impact on his professional role	73	4	8	230	2.76
10	The hospital does not give the social worker enough authority to practice her profession.	39	23	23	186	2.26
11	Increasing the number of cases that the social worker handles	61	14	10	221	2.60
	<b>Total</b>	<b>530</b>	<b>210</b>	<b>190</b>	<b>2110</b>	
	<b>Average</b>	<b>48.6</b>	<b>19</b>	<b>17.2</b>	<b>192.3</b>	<b>2.30</b>
	<b>The ratio</b>	<b>57</b>	<b>22.4</b>	<b>20.3</b>		
	<b>relative degree</b>	<b>75</b>				

According to the previous table, the level of obstacles confronting the social worker's work in the use of therapeutic approaches with patients in hospitals and related to the institution's system is high, as the relative degree for measuring the obstacles reached 75%, with a weighted average of 192.3 and a weighted average of 2.3. This is supported by the fact that 57% of those polled answered yes to this dimension's statements, while 22.4% said no and 20.3% said yes.

The most powerful impediments were those mentioned in phrases Nos. (1, 9, 3, 72), which are related to:

- 1- A lack of clarity in the concept of therapeutic approaches to hospital management, with a weighted average of 2.76.
- 2- Assigning the institution's management to the social worker with administrative work, which affects his professional role, with a weighted average of 2.76.
- 3- With a weighted average of 2.31, management is not convinced of the importance of the role of the social worker in the use of modern therapeutic approaches.
- 4- A lack of specialists in the hospital makes it difficult to use modern therapeutic approaches, with a weighted average of 2.31.

**Table (5)**  
**Explain the obstacles to the social worker's practice of therapeutic interventions with patients**

Obstacles	relative degree	total weights	Average	Arrangement
Obstacles related to the social worker	٦٨.٣	١٤٧.٢	٢.٠٥	3
Obstacles due to the patient's	٧٥.٥	١٩٢.٦	٢.٢٧	2
Obstacles related to the institutional	٧٥	١٩٢.٣	٢.٣	1
Total	٩٢.٩	١٧٧	٢.٢١	

The relative score for measuring the obstacles was 92.9, with a weighted average of 177 and a weighted average of 2.21 in the previous table, indicating that the level of obstacles confronting the social worker in the practice of therapeutic approaches in the medical field is average.

The obstacles related to the institutional system came first, followed by the obstacles related to the patient system, and finally the obstacles related to the social worker system.

#### **8.4 proposals to activate the role of the social worker in the medical field by using therapeutic approaches with patients.**

**table (5)**  
**demonstrates proposals to activate the role of the social worker in spiritual approach practice in the medical field**

S	proposals	number	%
1	Holding training courses for social workers to help them improve their abilities to use modern therapeutic approaches	٨٥	١٠٠
2	assisting social workers in enrolling in postgraduate studies, such as a master's degree	٧٧	٩٠.٦
3	The hospital's appreciation and management of the social worker, as well as their collaboration with him	٧٧	٩٠.٦
4	Determine a clear role for the social worker in medical teamwork.	٧٧	٩٠.٦
5	In hospitals, increasing the number of social workers in proportion to the workload	٨٠	٩٤.١
6	Facilitate the use of modern technology by social workers.	٧٨	٩١.٨
7	Educating social workers to investigate societal health needs	٧٦	٨٩.٤
8	Creating a work environment for the social worker that includes his responsibilities in the medical field	٧٠	٨٢.٤

9	Belief in the principle of the social worker's continuous self-education	٨٠	٩٤.١
10	Apply the self-evaluation principle to the social worker's work in the medical field.	٧٨	٩١.٨
11	Increasing social workers' material and moral incentives	٧٥	٨٨.٢
12	The use of the spiritual approach in the hospital is dependent on the ability to choose appropriate methods and therapeutic strategies.	٥٥	٦٤.٧
13	Participating in non-medical conferences such as spiritual, preventive, and therapeutic approaches to educate patients about the importance of the spiritual approach in treatment	٦٤	٧٥.٣
14	To participate in non-medical conferences such as spiritual, preventive and therapeutic approaches	٦٤	٧٥.٣

According to the previous table, the most important suggestions made by respondents to activate the role of the social worker are:1- Conducting training courses for social workers to improve their ability to use modern therapeutic approaches.

- 2- Increasing the number of social workers in hospitals in proportion to their workload.
- 3- Belief in the social worker's continuous self-education principle
- 4 - Making it easier for social workers to enroll in postgraduate studies, such as a master's degree.
- 5- Establish a clear role for the social worker in medical teamwork.

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