

Original article

Exploring Healthcare Professionals' Perceptions of the Role of Social Workers in Paediatric Hospitals at Al-Taif City

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Abstract

Aim: To explore Healthcare Professionals' Perceptions of the Role of Social Workers in paediatric Hospitals at Al-Taif city. **Methods:** A questionnaire-based evaluation of stress and other correlating factors on young women of reproductive age. **Results:** From total 171 healthcare workers, the demographic data showed that with 35.1% aged from 36 to 45 years, and about 55% were male with a majority (62.6%) were married, about one third of them (34.5%) had a bachelor's degree, and 47.4% had over 10 years of experience, regarding job titles, the majority (42.1%) were nurses and 53.8% reported having enough to meet basic needs without saving any excess money, the results revealed that healthcare professionals perceive the level of assessment in the social worker's role in paediatric hospitals in Al-Taif City to be at a high level, with a mean score of 3.88, while the responses regarding intervention in the social work, the results revealed that healthcare professionals perceive the level of intervention in the social worker's role in paediatric hospitals in Al-Taif City to be at a high level, with a mean score of 3.92, the overall scale showed significant differences based on gender ($t = 2.272$, $P\text{-value} = 0.027$), education ($F = 3.390$, $P\text{-value} = 0.019$), experience ($F = 6.370$, $P\text{-value} < 0.001$), job title ($F = 4.722$, $P\text{-value} < 0.001$), and income ($F = 7509$, $P\text{-value} < 0.001$). Again, there were no significant differences based on age and marital status. **Discussion:** The study's results revealed that healthcare professionals regard the social worker's position to be of high level, as evidenced by a mean score of 3.92. The assessment level was found to have a high rating, achieving a score of 3.88. Similarly, the intervention level was also assessed as high, with a mean score of 3.93. There existed the assessment level shown notable variations depending on factors such as education, experience, job title, and income. Nevertheless, no statistically significant disparities were observed with regards to age, gender, and marital status. Regarding intervention, there were notable variations observed in relation to gender, marital status, educational attainment, professional experience, job position, and income. However, no significant disparities were found based on age. The observed variations in the overall scale were found to be statistically significant in relation to factors such as sex, education, experience, job title, and salary. However, no statistically significant changes were observed based on age and marital status. **Conclusion:** It was concluded that healthcare professionals perceive the role of the social worker to be highly esteemed. The assessment level was determined to exhibit a high ranking. Likewise, the level of intervention was evaluated to be high.

Keywords: *Healthcare Professionals - Social Workers - paediatric Hospitals - Al-Taif city*



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1. Introduction

There has been a growing resurgence of interest among researchers, health care administrators, and policy makers in examining the influence of the work environment on clinical performance and outcomes^[1,2]. The capacity of a healthcare practice to uphold and increase the quality of care provided to patients is contingent upon its aptitude to adjust to advancing medical knowledge, the imperative for heightened clinical performance, and shifts within the broader healthcare management system^[3,4]. A multitude of theoretical frameworks have been posited with the aim of providing a comprehensive understanding of the phenomena of change.

The provision of social work services within primary healthcare (PHC) settings can manifest in diverse modalities. One instance where healthcare services can be provided is in a clinical setting, when direct interactions take place between healthcare professionals and individuals, couples, or families during consultations [5-7]. Social workers employed in primary healthcare (PHC) settings are assigned the duty of conducting home visits for patients who are incapable of physically departing from their houses [8]. This has notable importance in situations related to palliative and end-of-life care, as well as other intricate biological and psychosocial contexts [9,10].

The function of a social worker at a paediatric hospital is characterized by its distinctiveness, which requires a specialized skill set that distinguishes it from social workers operating in non-hospital environments [11]. The primary aim of this thesis is to conduct a comprehensive analysis of the historical backdrop surrounding hospital social work, the essential competencies required for hospital social workers, the wide range of responsibilities they assume, and the implications of prolonged hospitalization on the developmental aspects of children [12,13].

The inclusion of social workers in healthcare environments, particularly hospitals, has experienced a notable rise in recent years, despite their previous exclusion in these settings. The inception of social work in the healthcare sector in the Kingdom of Saudi Arabia occurred during the early 1900s, with its earliest introduction being noticed at many Saudi Arabian hospitals [14-17]. This development coincided with the transition of patient care from residential settings to hospital settings. Furthermore, during this particular period, healthcare practitioners started to recognize the significant influence that an individual's living conditions, and personal situations might exert on their overall health and recuperation [18].

The roles and obligations of hospital social workers exhibit variability across a range of patient demographics. Considering the unique circumstances of each patient, healthcare social workers must adapt their approach to effectively meet a diverse range of requirements. Health social workers are actively involved in the provision of their services across a diverse array of contexts. Healthcare professionals are entrusted with a diverse array of duties during the several phases of creating, implementing, and assessing the provision of healthcare services [3,7,19]. Within a professional setting, individuals occupying this particular function play a vital part in the coordination and facilitation of links between various organizational systems and professions [8]. The main goal of their efforts is to enhance healthcare outcomes for both individuals and broader populations [11].

The claim posits that social workers who operate in the healthcare industry possess the capacity to exert a substantial impact [18,19]. The primary duties of social workers in the healthcare sector. These responsibilities include evaluating the physical and psychological needs of patients, addressing inquiries from patients or their families, offering financial planning and support, creating discharge plans, conducting individual and group counselling sessions, handling administrative tasks related to case management, and advocating for patient rights [3,6,11,21]. The present study aims to explore Healthcare Professionals' Perceptions of the Role of Social Workers in paediatric Hospitals at Al-Taif city.

2. Methods

A cross sectional study was conducted at Al- Taif region paediatrics' hospitals, Saudi Arabia, where participants from healthcare workers were chosen according to the inclusion criteria included Both male and female healthcare professionals, all healthcare professionals who are working in Al- Taif paediatrics' hospitals, all healthcare professionals who are working in these hospitals for more than 6 months, and all healthcare professionals who are talking with Arabic or English languages only, they were evaluated by obtaining their demographic based questionnaire and Social working determining which was conducted for 30 days electronically to a sample population of healthcare professionals. This questionnaire items were reviewed from Ohman-Strickland et al. (2007) study and then adapted and translated to be distributed to the study population. The follow-up was established with an evaluation of these healthcare professionals' answers and feedback.

A total of 171 healthcare professionals were enrolled for the present study, after getting the IRB approval, and formulating the survey, an extra approval was obtained from the workplace where leaders included in this study are working in, a personal consent was obtained from each participant in this study to start the questionnaire filling. Demographic data and data of questionnaire were collected in Excel sheet through the study duration and the being analysed according to the suitable tests. The subscale results were analysed used Likert scale 5-points method, after getting the validity and reliability of the study tool using internal consistency and alpha Cronbach methods with results 0.966 and 0.971 of Pearson correlation for both Assessment and intervention subscales, respectively, the reliability results were 0.977 for the social work competency scale, so, these findings indicate that the study's tool, the questionnaire, exhibited a high level of internal consistency and a strong relationship between the scale and its subscale, thus demonstrating the overall validity of the scales well as high reliability.

3. Results

From total 171 healthcare workers, the demographic data showed that with 35.1% aged from 36 to 45 years, 32.7% from 25 to 35 years, 23.4% over 45 years, and 8.8% under 25 years. In terms of gender, 55% were male, and 45% were female. The majority (62.6%) were married, 21.6% were single, 8.8% were divorced, and 7% were widowed. Regarding education, 34.5% had a bachelor's degree, 27.5% had a master's degree, 26.9% had a diploma, and 11.1% had a Ph.D. In terms of experience, the majority (47.4%) had over 10 years of experience, 29.2% had 5 to 10 years, 14% had 2 to 5 years, and 9.4% had 6 months to 2 years. In relation to job titles, the majority (42.1%) were nurses, 14% were physicians, 12.3% were in the laboratory, 7% were in X-ray, 5.3% were in physical therapy, and 19.3% had other job titles. Regarding income, 53.8% reported having enough to meet basic needs, 28.1% reported not having enough to meet basic needs, and 18.1% reported having enough to meet basic needs and save money. (Figure 1, 2 and Table 1).

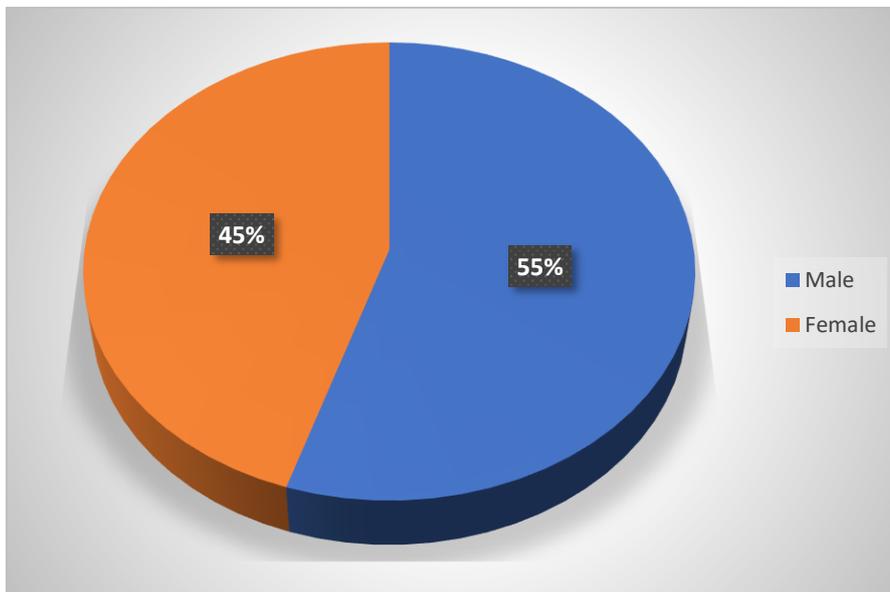


Figure 1: The gender distribution among the study participants (n=171)

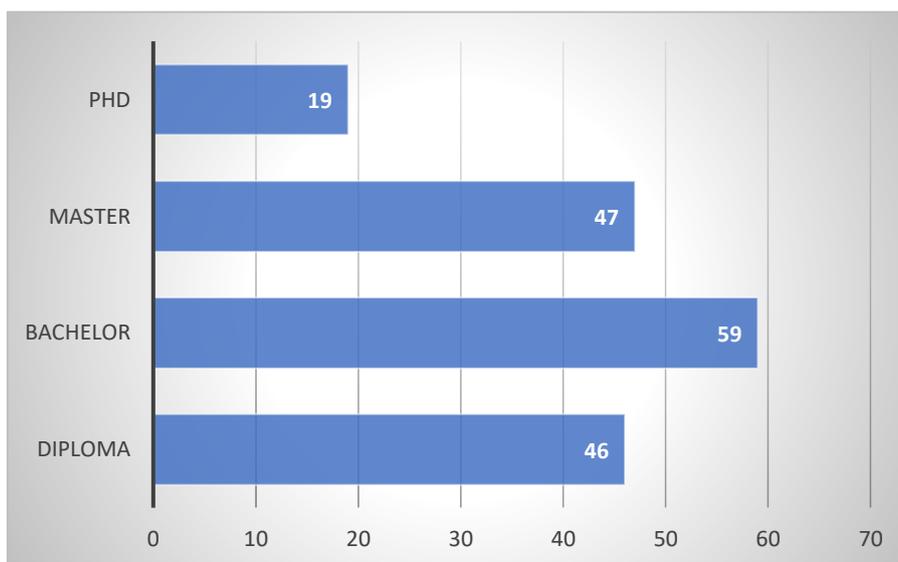


Figure 2: The level of education among the study participants (n=171)

Table 1: The overall demographic characteristics among the study participants (n=171)

Variables	Categories	N	%
Age	Less than 25 years	15	8.8
	From 25 to 35 years	56	32.7
	From 36 to 45 years	60	35.1
	More than 45 years	40	23.4
Marital Status	Single	37	21.6
	Married	107	62.6
	Divorced	15	8.8
	Widowed	12	7
Number of Experience Years	From 6 months to 2 years	16	9.4
	From 2 to 5 years	24	14
	From 5 to 10 years	50	29.2
	More than 10 years	81	47.4
Job Title	Physician	24	14
	Nurse	72	42.1
	Physical therapy	9	5.3
	X - Ray	12	7
	Laboratory	21	12.3
	Other	33	19.3
Income	Not enough to meet basic needs	48	28.1
	Enough to meet basic needs	92	53.8
	Enough to meet basic needs and save money	31	18.1

Regarding the responses of the participants about assessment in the social work, the results revealed that healthcare professionals perceive the level of assessment in the social worker's role in paediatric hospitals in Al-Taif City to be at a high level, with a mean score of 3.88. Among the various assessment aspects, the highest-rated role, according to healthcare professionals, is "Administer standard assessment tools," with a mean score of 3.98. This is followed by "Ascertain health status-functioning" with a mean score of 3.95, and "Reevaluate and adjust plans" with a mean score of 3.92. Subsequently, "Assess cognitive functioning" is rated at 3.88, and three roles - "Assess social support and functioning," "Develop measurable plans," and "Assess caregivers' needs" - all received a mean score of 3.87. Additionally, "Conduct paediatric assessment" is rated at 3.86, followed by "Use empathy to engage" with a mean score of 3.82, and "Adapt interviewing for limitations" with a mean score of 3.81 (Table 2), while the responses regarding intervention in the social work, the results revealed that healthcare professionals perceive the level of intervention in the social worker's role in paediatric hospitals in Al-Taif City to be at a high level, with a mean score of 3.92. Among the various aspects of the social worker's role, the highest-rated role, according to healthcare professionals, is "Adhere to laws (i.e., advance directives)" with a mean score of 4.01. This is followed by "Utilize group interventions (i.e., self-help)" and "Establish rapport and relationship," both receiving mean scores of 3.98. Subsequently, "Use education to provide information" is rated at 3.96, and "Enhance coping and mental health" and "Advocate to obtain quality services" both received a mean score of 3.95.

Additionally, "Assist to reduce stress-promote health" is rated at 3.91, followed by "Apply skills in termination" with a mean score of 3.89, "Mediate situations with angry client" with a mean score of 3.87, and finally, "Provide management to link to services" with a mean score of 3.82 (Table 3). The level of the social worker's role from the perspective of healthcare professionals was high, with a mean score of 3.92. The assessment level also received a high rating, with a mean score of 3.88, and the intervention level was rated as high, with a mean score of 3.93.

Also, the difference in the perception of healthcare professionals about the social work according to the demographic characteristics showed that there are significant differences in the level of assessment based on education ($F= 2.695$, $P\text{-value} = 0.048$), experience ($F= 5.232$, $P\text{-value} = 0.002$), job title ($F= 4.239$, $P\text{-value} = 0.001$), and income ($F= 7.496$, $P\text{-value} < 0.001$). However, there were no significant differences based on age, gender, and marital status. Similarly, there were significant differences in the level of intervention based on gender ($t = 2.706$, $P\text{-value} = 0.013$), marital status ($F= 2.766$, $P\text{-value} = 0.044$), education ($F= 3.676$, $P\text{-value} = 0.013$), experience ($F= 6.651$, $P\text{-value} < 0.001$), job title ($F= 4.632$, $P\text{-value} < 0.001$), and income ($F= 6.583$, $P\text{-value} = 0.002$). However, there was no significant difference based on age. Furthermore, the overall scale showed significant differences based on gender ($t = 2.272$, $P\text{-value} = 0.027$), education ($F= 3.390$, $P\text{-value} = 0.019$), experience ($F= 6.370$, $P\text{-value} < 0.001$), job title ($F= 4.722$, $P\text{-value} < 0.001$), and income ($F= 7509$, $P\text{-value} < 0.001$). Again, there were no significant differences based on age and marital status (Table 4).

Table 2: The total responses of the participants about assessment in the social work

No	Items	Mean	SD
1	Reevaluate and adjust plans	3.92	0.99
2	Ascertain health status-functioning	3.95	1.01
3	Use empathy to engage	3.82	1.04
4	Assess social support and functioning	3.87	1.07
5	Develop measurable plan	3.87	1.04
6	Assess caregivers' needs	3.87	1.09
7	Adapt interviewing for limitations	3.81	1.12
8	Assess cognitive functioning	3.88	1.03
9	Conduct pediatric assessment	3.86	1.04
10	Administer standard assessment tools	3.98	0.98
	Total subscale	3.88	0.88

Table 3: The total responses of the participants about intervention in the social work

No	Items	Mean	SD
1	Provide management to link to services	3.82	1.12
2	Establish rapport and relationship	3.98	0.97
3	Advocate to obtain quality services	3.95	1.02
4	Adhere to laws (i.e., advance directives)	4.01	1.03
5	Assist to reduce stress-promote health	3.91	1.13
6	Use education to provide information	3.96	1.11
7	Mediate situations with angry client	3.87	1.10
8	Apply skills in termination	3.89	1.05
9	Enhance coping and mental health	3.95	1.13
10	Utilize group interventions (i.e., self-help)	3.98	1.02
	Total subscale	3.93	1.02

Table 4: The differences in the perception of healthcare professionals about the social work according to the demographic characteristics.

No	Variables	Categories	Assessment	Intervention	Total scale
1	Age	Less than 25 years	3.75	3.76	3.76
		From 25 to 35 years	3.78	3.79	3.78
		From 36 to 45 years	3.83	3.89	3.86
		More than 45 years	4.15	4.26	4.21
		F	1.707	2.314	2.140
		P-value	0.097	0.078	0.168
2	Sex	Male	3.98	4.11	4.04
		Female	3.76	3.72	3.74

		T	1.664	2.706*	2.272*
		P-value	0.098	0.008*	0.027*
3	Marital status	Single	3.73	3.8	3.77
		Married	3.96	4.04	4
		Divorced	4.11	4.01	4.06
		Widowed	3.43	3.28	3.35
		F	2.082	2.766*	2.503
		P-value	0.105	0.044*	0.061
4	Education	Diploma	4.03	4.08	4.06
		Bachelor	3.66	3.64	3.65
		Master	3.89	3.98	3.93
		PhD	4.21	4.35	4.28
		F	2.695*	3.676*	3.390*
		P-value	0.048*	0.013*	0.019*
5	Experience	From 6 months to 2 years	3.99	4.08	4.04
		From 2 to 5 years	3.32	3.28	3.3
		From 5 to 10 years	3.8	3.81	3.81
		More than 10 years	4.08	4.17	4.13
		F	5.232*	6.651*	6.370*
		P-value	0.002*	< 0.001*	< 0.001*
6	Job title	Physician	3.75	3.87	3.81
		Nurse	3.92	3.97	3.95
		Physical therapy	3.6	3.71	3.66
		X - Ray	3.08	2.91	3
		Laboratory	3.81	3.92	3.87
		Other	4.3	4.33	4.32
		F	4.239*	4.632*	4.722*
		P-value	0.001*	< 0.001*	< 0.001*
7	Income	Not enough to meet basic needs	3.6	3.66	3.63
		Enough to meet basic needs	3.87	3.91	3.89
		Enough to meet basic needs and save money	4.35	4.42	4.39
		F	7.496*	6.583*	7.509*
		P-value	< 0.001*	0.002*	< 0.001*

*A significant difference.

4. Discussion

After congregating and analysing the above data, this study aimed to explore Healthcare Professionals' Perceptions of the Role of Social Workers in paediatric Hospitals at Al-Taif city, from total 171 healthcare professionals with a majority of males in gender with wide age range from 36 to 45 years old and near of half of them had over 10 years of experience to support the study relevance and findings ^[22].

Regarding the level of assessment, the level of assessment in the social worker's role in paediatric hospitals in Al-Taif City to be at a high level, it agrees with Nowaskie et al. (2020), who reported that the participants in the study exhibited a significantly elevated level of Attitudinal Awareness, with a mean score of 6.48 and a standard deviation of 0.92. In terms of Basic Knowledge, they displayed a moderate level of endorsement, with a mean score of 5.54 and a standard deviation of 1.16. However, their level of Clinical Preparedness was relatively low, as indicated by a mean score of 3.78 and a standard deviation of 1.28. After accounting for various demographic and contextual factors, notable variations were observed among healthcare fields in relation to LGBT-DOCSS scores. Notably, social work students had the highest scores across all dimensions ^[23].

Also, the healthcare professionals perceived a high level of intervention in the social worker's role in paediatric hospitals in Al-Taif City, it is agreed with Lawrence et al. (2016), who found that the trained professionals exhibited a notably higher intervention of social work for client-centered skills in facilitating behaviour change as compared to their untrained counterparts for a duration of up to one year following the completion of their training ^[24].

Finding the difference between the study variables and the overall perception of healthcare professionals to social work, the study revealed that the overall scale showed significant differences based on gender, education, experience, job title, and income (P-value < 0.05), it is agreed with Pakkanen et al. (2023), who reported findings indicated a common set of professional values among diverse health and social care practitioners and students. The findings of this study hold significance in the context of integrated care and social work services for who had more experience years and male in gender and had diploma in social working than others ^[25].

While the study finding reported that there were no significant differences based on age and marital status ($p > 0.05$), it is in contrast to Garzaro et al. (2022), who reported that the workability of physicians was shown to be higher compared to that of nursing aides. Nevertheless, there was a significant statistical difference in the distribution ($\chi^2 = 24.03$, $p = 0.00$) of workability values among physicians, nursing aides, and nurses and who are older than other too, so this study elucidates the salient challenges encountered by healthcare workers in the process of aging ^[26].

5. Conclusion

Our study demonstrated that healthcare professionals see the role of the social worker to hold a significant level of importance, as demonstrated by a mean score of 3.92. The assessment level demonstrated a significantly high rating, attaining a score of 3.88. In a similar vein, the level of intervention was also evaluated to be high, exhibiting a mean score of 3.93. There was an existence of the evaluation level shown significant variances based on criteria such as educational attainment, professional experience, occupational

designation, and income level. However, there were no statistically significant differences identified in relation to age, gender, and marital status. Significant disparities were identified with respect to gender, marital status, educational achievement, professional background, employment role, and income in connection to intervention. Nevertheless, there were no notable discrepancies seen with respect to age. The statistical analysis revealed that there were considerable variances in the overall scale when considering parameters such as sex, education, experience, job title, and remuneration. Nevertheless, there were no statistically significant differences observed in relation to age and marital status.

List of abbreviations

PHC: Primary healthcare

Ethics approval and consent to participate

This research was reviewed and approved by the institutional review board of IRB (registration number: 868). Informed consent was obtained from all participants before conducting the study too.

Conflict of interest

The authors declare that they have no conflicts of interest.

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Data availability

The data that support the findings of this study are available from the first author upon reasonable request.

References

- [1] Pavli A, Theodoridou M, Maltezos HC. Post-COVID syndrome: Incidence, clinical spectrum, and challenges for primary healthcare professionals. *Archives of medical research*. 2021 Aug 1;52(6):575-81.
- [2] Çelmeçe N, Menekay M. The effect of stress, anxiety and burnout levels of healthcare professionals caring for COVID-19 patients on their quality of life. *Frontiers in psychology*. 2020 Nov 23;11:597624.
- [3] Berg-Weger M, Morley JE. Loneliness and social isolation in older adults during the COVID-19 pandemic: Implications for gerontological social work. *The journal of nutrition, health & aging*. 2020 May;24:456-8.
- [4] Wang H, Li T, Gauthier S, Yu E, Tang Y, Barbarino P, Yu X. Coronavirus epidemic and geriatric mental healthcare in China: how a coordinated response by professional organizations helped older adults during an unprecedented crisis. *International Psychogeriatrics*. 2020 Oct;32(10):1117-20.
- [5] Zerbini G, Ebigbo A, Reicherts P, Kunz M, Messman H. Psychosocial burden of healthcare professionals in times of COVID-19—a survey conducted at the University Hospital Augsburg. *GMS German Medical Science*. 2020;18.
- [6] Bland R, Drake G, Drayton J. Social work practice in mental health: An introduction. Routledge; 2021 Mar 16.
- [7] Bogiatzaki V, Frengidou E, Savakis E, Trigoni M, Galanis P, Anagnostopoulos F. Empathy and burnout of healthcare professionals in public hospitals of Greece. *Int J Caring Sci*. 2019 May 1;12(2):611-26.
- [8] Abendstern M, Hughes J, Wilberforce M, Davies K, Pitts R, Batool S, Robinson C, Challis D. Perceptions of the social worker role in adult community mental health teams in England. *Qualitative Social Work*. 2021 May;20(3):773-91.
- [9] Hughes J, Challis D. Perceptions of the social worker role in adult community mental health teams in England.
- [10] Berg-Weger M, Morley JE. Loneliness and social isolation in older adults during the COVID-19 pandemic: Implications for gerontological social work. *The journal of nutrition, health & aging*. 2020 May;24:456-8.
- [11] Bland R, Drake G, Drayton J. Social work practice in mental health: An introduction. Routledge; 2021 Mar 16.
- [12] Goldberg EM, Warburton RW. Ends and Means in Social Work: the development and outcome of a case review system for social workers. Routledge; 2021 Nov 7.
- [13] Kaviarasu SJ. Perception of Frontline Social Workers' Role in Healthcare Sector Combating COVID-19 in Tamil Nadu: A Phenomenological Study. *Journal of Human Rights and Social Work*. 2023 May 5:1-1.
- [14] Notaras S, Lambert K, Perz J, Makris A. Diet in the management of non-dialysis dependent chronic kidney disease: perceptions and practices of health professionals. *BMC nephrology*. 2022 Dec;23(1):1-1.
- [15] Moro T, Brashler R. Social work practice and disability issues. *Handbook of health social work*. 2019 Aug 13:209-28.
- [16] Lombardi BM, Zerden LD, Thyberg C. Social work answers the (video) call: Tele-behavioral health use during COVID-19. *Journal of the Society for Social Work and Research*. 2022 Mar 1;13(1):67-87.
- [17] Dhar S, Agarwal S. Disputes at Work and the Perceived Effects of Social Assistance on Worker Health. *Journal for ReAttach Therapy and Developmental Diversities*. 2023 Aug 7;6(9s):455-63.
- [18] Moudatsou M, Stavropoulou A, Philalithis A, Koukouli S. The role of empathy in health and social care professionals. *InHealthcare 2020 Jan 30 (Vol. 8, No. 1, p. 26)*. MDPI.
- [19] Schot E, Tummers L, Noordegraaf M. Working on working together. A systematic review on how healthcare professionals contribute to interprofessional collaboration. *Journal of interprofessional care*. 2020 May 3;34(3):332-42.
- [20] Amadasun S. Social work and COVID-19 pandemic: An action call. *International Social Work*. 2020 Nov;63(6):753-6.
- [21] Pavli A, Theodoridou M, Maltezos HC. Post-COVID syndrome: Incidence, clinical spectrum, and challenges for primary healthcare professionals. *Archives of medical research*. 2021 Aug 1;52(6):575-81.
- [22] Shires DA, Jaffee K. Factors associated with health care discrimination experiences among a national sample of female-to-male transgender individuals. *Health & social work*. 2015 May 1;40(2):134-41.
- [23] Nowaskie DZ, Patel AU, Fang RC. A multicenter, multidisciplinary evaluation of 1701 healthcare professional students' LGBT cultural competency: Comparisons between dental, medical, occupational therapy, pharmacy, physical therapy, physician assistant, and social work students. *PLoS One*. 2020 Aug 13;15(8):e0237670.
- [24] Lawrence W, Black C, Tinati T, Cradock S, Begum R, Jarman M, Pease A, Margetts B, Davies J, Inskip H, Cooper C. 'Making every contact count': evaluation of the impact of an intervention to train health and social care practitioners in skills to support health behaviour change. *Journal of health psychology*. 2016 Feb;21(2):138-51.

[25] Pakkanen P, Häggman-Laitila A, Pasanen M, Kangasniemi M. Health and social care workers' professional values: A cross-sectional study. *Nursing Ethics*. 2023 Sep 30:09697330231200569.

[26] Garzaro G, Clari M, Ciocan C, Albanesi B, Guidetti G, Dimonte V, Sottimano I. Physical Health and Work Ability among Healthcare Workers. A Cross-Sectional Study. *Nursing Reports*. 2022 Apr 5;12(2):259-69.