

Editor-in-chief: Dr.hc. Mult. Dr. Daniel J. West, Jr. PhD, LFACHE, FACMPE Including: Social Work, Humanitary Health Intervention, Nursing, Missionary Work

CLINICAL SOCIAL WORK

AND HEALTH INTERVENTION

international
scientific
group
of applied
preventive
medicine I - GAP
vienna,
austria



Author: Michal Olal

The impact of the external environment on the social and health aspects of contemporary man in the dynamics of global social changes of the world

Original Articles

✓ THE IMPACT OF THE EXTERNAL ENVIRONMENT ON THE SOCIAL AND HEALTH ASPECTS OF CONTEMPORARY MAN IN THE DYNAMICS OF GLOBAL SOCIAL CHANGES OF THE WORLD

MENTAL HEALTH AND WORK-LIFE BALANCE AMONG WORKERS IN SOCIAL SERVICES

✓ GLOBAL HEALTH IMPACT FROM CLIMATE CHANGE

PERCEPTION OF AGENTS ASSISTING WOMEN EXPERIENCING VIOLENCE IN COUPLE RELATIONS

MARKETPLACES AS DRIVERS OF URBANIZATION AND ALTERNATIVE GOVERNANCE SPACES:
 THE CASE OF BATKHELA BAZAAR, PAKISTAN

THE PATH TO ELIMINATING THE MARGINALIZATION OF THE ROMA COMMUNITY

✓ FOCUS METHOD GROUP AND THE POSSIBILITIES OF ITS USE AS A TOOL FOR RESEARCH IN THE FIELD OF SOCIAL WORK

AESTHETIC NARCISSISM AND ITS DISCONTENTS, A STUDY OF KIERKEGAARD'S "THE DIARY
OF THE SEDUCER" AND ITS RELEVANCE TO CONTEMPORARY CLINICAL PSYCHOLOGY

✓ PARENTA AWARENESS OF CARE FOR A CHILD WITH GASTROENTERITIS

 ASSOCIATION BETWEEN CONCURRENT SUBSTANCE USE AND GENETIC VARIATION IN INDIVIDUALS WITH HEROIN DEPENDENCE

✓ SOCIAL IMPACTS OF STATE SERVICE ELECTRONIZATION

Editors

Editor-in-Chief:

Dr.hc. Mult. Dr. Daniel J. **West**, Jr. PhD, LFACHE, FACMPE

(University of Scranton, Department of Health Administration and Human Resources, USA)

Editorial board and reviewers:

Dr. Andrea **Shahum,** MD (University of North Carolina at Chapel Hill School of Medicine, USA)

Dr. Vlastimil **Kozon,** PhD. (Allgemeines Krankenhaus – Medizinischer Universitätscampus, Vienna, AT)

Dr. Stephen J. **Szydlowski**, MBA, MHA, DHA (University of Scranton School of Education, USA)

Dr. Michael **Costello**, MA, MBA, J.D. (University of Scranton School of Education, USA)

Dr. Roberto **Cauda,** Ph.D. (Institute of Infectious Diseases, Catholic University of the Sacred Heart, Rome, IT)

Dr. Daria **Kimuli**, Ph.D. (Catholic University of Eastern Africa, Nairobi, KE)

Dr. Jirina Kafkova, Ph.D. (MSF, Freetown, SL)

Dr. Gabriela **Lezcano**, Ph.D. (University of California, San Francisco, USA)

Prof. Dr. Arab **Naz,** Ph.D. (University of Malakand Chakdara Khyber Pakhtunkhwa PK)

Dr. Vitalis Okoth **Odero,** Ph.D. (St. Philippe Neri Schools Joshka, KE)

Dr. Johnson **Nzau Mavole**, Ph.D. (Catholic University of Eastern Africa, Nairobi, KE)

Prof. Dr. Selvaraj **Subramanian,** Ph.D. (SAAaRMM, Kuala Lumpur, MY)

Dr. hab. Zofia **Szarota**, Ph.D. (Pedagogical University of Cracow, PL)

Commissioning and language editor:

Prof. Dr. John **Turner** (Amsterdam, NL) Whole-Self@quicknet.nl

Submit manuscript:

cswjournal@gmail.com

Photo:

Nursing assistance to refugees in Greece.

Contact

International Gesellschaft für angewandte Präventionsmedizin i-gap e.V. (International Society of Applied Preventive Medicine i-gap)

> Währinger Str. 63 A-1090 Vienna, Austria Tel.: +49 - 176 - 24215020 Fax: +43 / 1 4083 13 129

Mail : office@i-gap.org
Web : www.i-gap.org

Visiting Editors

Michael Costello

Impact factor

1. november 2019

1,21

(ISIndexing)

Subscription rates 2024, Vol. 15, No.5
Open Access Journal
Additional Information on Internet:

dational information on intern

www.clinicalsocialwork.eu

This journal works on the non-profit basis. For each published article 300 EUR/USD was charged, and there is a standard range which cannot be exceeded.

Table of Contents

Original Articles

Michael Costello The impact of the external environment on the social and health aspects of contemporary man in the dynamics of global social changes of the world
Szilvia Buzalova, Peter Vansac, Pavol Tomanek, Jerzy Rottermund Mental Health and work-life Balance among Workers in Social Services
Michael M. Costello, Daniel West, Steven Szydlowski, Bernardo Ramirez Global Health Impact from Climate Change16
Martina Hrozenska, Luba Pavelova, Jana Gabrielova Perception of Agents Assisting Women Experiencing Violence in Couple Relations2
Muhammad Salman Khan, Arab Naz Marketplaces as Drivers of Urbanization and alternative Governance Spaces: the Case of Batkhela Bazaar, Pakistan29
Lydia Leskova, Daniela Bachyncova Giertliova The Path to eliminating the marginalization of the Roma Community4
Monika Mackinova, Michal Olah, Vera Zamkova, Tomas Planka Focus method Group and the Possibilities of its use as a Tool for Research in the Field of Social Work49
Leo Stan, Martina Pavlikova Aesthetic Narcissism And Its Discontents. A Study of Kierkegaard's "The Diary of the Seducer" and Its Relevance To Contemporary Clinical Psychology60
Andrea Stofilova, Silvia Putekova Parenta Awareness of Care for a Child with Gastroenteritis72
Kadir Uludag, Hang Su, Min Zhao Association between Concurrent Substance Use and Genetic Variation in Individuals with Heroin Dependence8
Jana Vallova, Milos Mrvan

Editorial

The impact of the external environment on the social and health aspects of contemporary man in the dynamics of global social changes of the world

Source: Clinical Social Work and Health Intervention Volume: 15 Issue: 5

Page: 4

CSWHI 2024; 15(5): 4; DOI: 10.22359/cswhi_15_5_01 © Clinical Social Work and Health Intervention

The current issue of the journal features a truly international collection of timely articles. In addition to Slovakia, the authors are based in Pakistan, China and the United States.

Several of the articles have a clinical focus. Buzalova et al write of the importance of work-life balance in an individual's mental health. Uludag and colleagues address implications of substance abuse.

Morton et al focus on spinal manipulation as a treatment modality. Stofilova and Putekova address parental awareness of care for children suffering from gastroenteritis.

Behavioral health care is the focal area of others. Leskova and Giertliova propose a pathway to eliminating the marginalization of the Roma population. Mackinova, Olah et al examine the focus group as a tool for research in social work. Hrozenska, Pavelova and Gabrielova address the perception of those working with women experiencing violence in a couples relationship.

From an environmental perspective, Salman Khan and Naz write of the importance of the marketplace in social and economic development in Pakistan. Valova and Mrvan address the impact of electronization in the provision of governmental services to the public. Costello, West et al focus on climate change and its impact on global health.

All of the authors deserve commendation for their research and writing on these issues which are of importance to both the academic and professional communities.

Michael Costello Professor Emeritus University of Scranton, PA USA

Mental Health and work-life Balance among Workers in Social Services

S. Buzalova (Szilvia Buzalova), P. Vansac (Peter Vansac), P. Tomanek (Pavol Tomanek), J. Rottermund (Jerzy Rottermund)

St. Elizabeth University of Health and Social Work in Bratislava

Original Article

E-mail address:

szilviabu@gmail.com

Reprint address:

Szilvia Buzalova St. Elizabeth University of Health and Social Work in Bratislava Nam. 1. Maja 1 Bratislava Slovakia

Source: Clinical Social Work and Health Intervention Volume: 15 Issue: 5

Pages: 5 – 15 Cited references: 26

Reviewers:

Vlastimil Kozon General Hospital - Medical University Campus, Vienna, AT Steve Szydlowski University of Scranton school of education, USA

Keywords:

Stress. Work life balance. Social services. Mental health.

Publisher:

International Society of Applied Preventive Medicine i-gap

CSWHI 2024; 15(5): 5 - 15; DOI: 10.22359/cswhi_15_5_02 © Clinical Social Work and Health Intervention

Abstract:

Objective: This study investigates the relationship between burnout, overtime work, and psychological resilience in social workers in social care centres. The wellbeing of individuals in helping professions, notably social workers in care services, decreased by 15% last two years. Mental health declined by 23.4%, and 36.2% of workers reported increased mental stress.

Methods: A quantitative cross-sectional study was conducted in 2024 on a sample of 156 social workers. Data were collected using validated instruments assessing burnout, mental stress, resilience, and life satisfaction. Statistical analysis was performed to examine the correlations between burnout levels, overtime hours, and resilience factors, using p-values to assess significance.

Results: Burnout was found to be at 30% among social workers, with a direct correlation to overtime hours, averaging 5-8 hours per week during the pandemic. Workers with higher resilience showed better self-confidence, adaptability, and problem-solving abilities. Resilience was strongly linked to self-acceptance, self-esteem, empathy, and social security. Additionally, the pandemic negatively impacted autonomy (p=0.024), self-acceptance (p=0.016), and purpose in life (p=0.037), as measured by life satisfaction scales. Burnout symptoms were reported by 20% of social workers and 11.5% of caregivers, with caregivers showing a higher burnout rate (33.4%) compared to social workers (31.3%).

Discussion: The findings highlight the critical role of psychological resilience in managing the emotional demands of social work during crises like the COVID-19 pandemic. Higher resilience is associated with improved coping mechanisms and professional growth, while low resilience correlates with increased burnout and difficulties in client management. Workload, financial status, and lack of rest were key predictors of life dissatisfaction, emphasizing the need for systemic interventions to support workers' mental health and reduce burnout. Conclusion: The COVID-19 pandemic has exacerbated burnout and reduced wellbeing among social workers and caregivers. Enhancing psychological resilience through targeted interventions may help mitigate these effects and improve their capacity to adapt to future stressors. Addressing workload management and providing mental health support are crucial for sustaining professional efficacy in social care services.

Introduction

The pressures faced by social care workers during the pandemic have highlighted long-standing issues related to mental health and worklife balance in this profession. Even before the COVID-19 crisis, social care workers were prone to experiencing high levels of stress and burnout due to the emotionally taxing nature of their jobs. A study by the British Association of Social Workers (2018) reported that over 60% of social care workers felt stressed or overworked regularly, while 43% considered leaving the profession due to burnout and poor work-life balance.

The pandemic only intensified these challenges. A survey conducted in 2021 across Europe showed that 70% of social care workers experienced increased workloads during the pandemic, with 45% working extended hours or additional shifts to cover staff shortages or meet the heightened demand for care services (Eurofound, 2021). This increase in workload

has been linked to a rise in mental health issues among care workers, with 41% reporting symptoms of anxiety and 34% experiencing depression at some point during the pandemic (Eurofound, 2021). These statistics underscore the importance of addressing the mental health challenges faced by workers in this sector.

The increasing workload in the social care sector manifests not only on a physical level but also significantly affects the psychological wellbeing of employees (Valachova et al., 2024). Social workers face growing challenges, including a rising number of clients, heightened expectations from families and society, and the need to handle increasingly complex cases (Zenelaga et al., 2024). Burnout syndrome is becoming more prevalent in these professions and is emerging as a crucial factor impacting the quality of services provided.

In fact, research shows that the burnout rate among social care workers is steadily rising, with studies indicating that up to 45% of social

workers experience moderate to severe levels of burnout at some point in their careers (Parker & Slaughter, 2020). The emotional exhaustion associated with this syndrome leads to reduced job satisfaction and impaired capacity to empathize with clients, often resulting in a decline in the quality of care. In addition, burnout affects workers' physical health, increasing the likelihood of chronic conditions such as hypertension, fatigue, and cardiovascular issues.

Theoretical framework

Burnout remains a critical concern, as it directly affects both the personal health of social care professionals and the quality of care provided to clients. The World Health Organization (WHO) has recognized burnout as an occupational phenomenon characterized by emotional exhaustion, cynicism, and reduced professional efficacy. In the context of social care, burnout can lead to emotional detachment from clients, decreased job satisfaction, and a higher risk of errors in care delivery.

Social care workers, in particular, have reported heightened levels of stress, burnout, and mental exhaustion, with studies showing a 23.4% decline in mental health and a 36.2% increase in mental tension among workers in social service institutions (Gaziková, 2023). The mental health challenges faced by these professionals are exacerbated by heavy workloads, long hours, and the emotional demands of caring for vulnerable clients. A 2022 study on 143 social care workers found that 30% experienced high levels of burnout, with a direct correlation to the additional 5-8 hours of overtime per week required during the pandemic.

Work-life balance is a particularly pressing issue in the social care sector, where workers often face challenges in balancing their professional responsibilities with their personal lives. Long hours, shift work, and the emotional intensity of the job contribute to work-life imbalance, which can have detrimental effects on both mental health and job performance. For example, 20% of social workers and 11.5% of caregivers reported experiencing burnout symptoms on a daily basis, while caregivers demonstrated a higher burnout rate (33.4%) compared to social workers (31.3%) (Gaziková, 2023). Additionally, the

lack of sufficient rest, high client-to-worker ratios, and frequent overtime further aggravate the situation, leading to diminished job satisfaction and increased mental health issues.

The link between work-life imbalance and burnout is well-documented. A 2020 meta-analysis found that workers in high-stress professions, such as social care, who lack sufficient time for rest and recovery are 50% more likely to experience burnout compared to those with better worklife balance (Parker & Slaughter, 2020). This imbalance is particularly pronounced in social care services, where staff shortages, night shifts, and emotionally demanding interactions with clients make it difficult for workers to disconnect from their professional responsibilities. Moreover, financial pressures add to the stress, as many workers in this field receive low wages despite the critical nature of their work. In fact, studies show that social care workers often earn significantly less than the national average, further contributing to job dissatisfaction and mental health struggles (Social Care Workforce Report, 2022).

Psychological resilience has emerged as a key factor in mitigating the effects of stress and burnout among social care workers. Research indicates that individuals with higher resilience levels are better equipped to handle work-related stress, adapt to challenging situations, and maintain a sense of professional purpose. In a 2022 study, social workers with greater resilience demonstrated higher levels of self-confidence, adaptability, and emotional regulation, which helped them manage the demands of their job more effectively (Gaziková, 2023). Key predictors of resilience include self-acceptance, self-esteem, and the ability to reflect on experiences and learn from them. Building these traits can be crucial in helping workers in the social care sector navigate the emotional and psychological demands of their profession. There is relationship between burnout at a European country level and a variety of national economic, governmental and cultural indicators (Butzm, Mrazova et al., 2024).

Methodology

The main research objective is to analyse and identify workload factors that affect employees in social welfare services in the area of mental

and physical health using a standardized Worklife balance questionnaire, which was participated by 156 social workers. The research objective of this study is scale development and validation of the work-life balance scale using the three constructs of Work Interference with Personal Life (WIPL). Personal Life Interference with Work (PLIW), and Work Personal Life Enhancement (WPLE). WLB Constructs Hayman (2005) developed a psychometric instrument to measure WLB in organizations. A 15-item scale had been adapted from a 19-item scale originally developed by Fisher-McAuley et al. (2003) that was designed to capture employee perceptions on WLB. The 15-item scale measured Work Interference with Personal Life (WIPL), Personal Life Interference with Work (PLIW), and not including Work Personal Life Enhancement (WPLE) as three constructs of WLB.

Results

For workers in social services, work-life balance (WLB) refers to the degree to which their professional responsibilities and personal life demands interact and affect one another. WLB can be categorized into work interference with personal life (WIPL), where job demands encroach upon personal time and well-being, and personal life interference with work (PLIW), where personal or family obligations affect work performance. This study aimed to explore the longitudinal associations between WIPL, PLIW, and work ability outcomes specifically within the social services sector. Pearson Chi-Square test was used for distributions and ANOVA test was used for mean the experience with social service quality was measured with an index, ranging from 1 to 5. Higher score indicates better experience with social services ($p \le 0.05$).

The study sample consisted of workers from both long-term and short-term care services, with a predominant representation of female employees, particularly in long-term care, where 64% were women, compared to 36% in short-term care. The long-term care group tended to be older, with a median age of 58 years and a mean of 56.2 years (±13.4), whereas short-term care workers had a median age of 52 years and a mean of 51.3 years (±11.2).

In terms of experience, a greater proportion of long-term care workers had more practical experience, with 35% having 5-9 years of experience and 18% with over 9 years, compared to 21% and 10%, respectively, in short-term care. Additionally, only 5% of short-term care workers had up to 5 years of experience, compared to 17% in long-term care.

The distribution of job roles showed that 47% of long-term care workers were caregivers, with 17% in administration and 12% in managerial roles. In short-term care, 22% were caregivers, 10% worked in administration, and only 4% held managerial positions.

Both groups had similar overall experience in social services, with a median of 4 years and a mean of 4.0 years for long-term care workers, and a nearly identical result for short-term care workers.

Regarding work-life balance, long-term care workers reported higher levels of work interference with personal life (WIPL), with a mean score of 4.49 (±1.4), compared to 3.48 (±0.8) for short-term care workers. On the other hand, personal life interference with work (PLIW) was more pronounced among short-term care workers, who scored 4.18 (±0.4), compared to 3.67 (±0.8) for those in long-term care (table 1).

In the context of social service workers, work-life balance (WLB) is achieved when the demands of their job are compatible with those from other life domains, such as family or leisure time. A "balanced" state occurs when the demands from one domain do not adversely impact activities in other areas. In this study, WLB was divided into two distinct dimensions: 'work interference with personal life' (WIPL) and 'personal life interference with work' (PLIW), which were treated as separate predictors. The primary objective of this approach was to investigate which type of role-related balance—whether work or personal life—has a specific influence on various work ability outcomes among social service workers.

The results of our study indicate that worklife balance is a significant concern for workers in social services, with many reporting that their personal lives are negatively affected by work. A notable 36% of participants agreed that their personal life suffers due to work, showing a positive correlation (p = 0.261). Similarly, 34% agreed that work makes their personal life difficult (p = 0.258). A higher percentage, 58%, agreed that they neglect personal needs because of work (p = 0.144), and 61% indicated that they postpone personal life due to work (p = 0.038), reflecting a significant impact

of work on their ability to manage personal commitments. 52% missed engaging in personal life activities due to work (p = 0.049), while 69% had trouble fulfilling both work-related and non-work tasks (p = 0.039), indicating significant interference between work and personal responsibilities.

Table 1 The characteristics of the sample

		Long-them care	Short-term care	
Gender	Gender Female		36%	
Age	Md, Mean (±SD)	58, 56.2 (13.4)	52, 51.3 (11.2)	
D (* 1	Up to 5 years	Up to 5 years 17%		
Practical experiences	5-9 years	35%	21%	
experiences	More than 9 years	18%	10%	
D '''	Care givers 47%		22%	
Position at work, n (%)	Administration	17%	10%	
11 (70)	Manager	12%	4%	
Experience of social services	- MU MESU (=217)		4.0, 3.9 (0.9)	
Work-life balance	WIPL, Mean (±SD)b	4.49 (1.4)	3.48 (0.8)	
work-tire batance	PLIW, Mean (±SD) ^b	3.67 (0.8)	4.18 (0.4)	

Table 2 WILP Scale Results

Statements	Quality of working envi- ronment and relations	Financial situation	working condi- tions overload	Number of care receivers
Mental suffer of social caring	0.024	0.037	0.018	0.154
Physical pain and exhaustion	0.115	0.148	0.062	0.041
Lack of needs satisfaction	0.126	0.033	0.042	0.031
Lack of work life balance	0.050	0.047	0.125	0.089
Lack of personal life out of work	0.105	0.132	0.142	0.135
Lack of variety of free time activities	0.145	0.016	0.036	1.05
I am dissatisfied with the amount of time I have for non-work activities.	0.096	0.045	0.027	0.039
current work ability with respect to the mental demands of your work	3.57 (0.108)	3.37 (0.112)	3.47 (0.106)	4.18 (0.204)
current work ability with respect to the physical demands of your work	4.39 (1.04)	4.19 (0,94)	4.23 (1.04)	3.48 (0.088)
current work ability with respect to the physical demands of your work	3.47 (0.209)	3.71 (0.213)	3.84 (0.209)	4.48 (0.323)

When asked about satisfaction with the amount of time for non-work activities, 48.3% expressed dissatisfaction, while 57.4% found it challenging to balance their non-work time.

In terms of work ability, workers rated their current work ability with respect to mental demands as 4.0 (0.8) and 3.9 (0.9). Similarly, for the physical demands of their work, respondents rated their ability as 4.49 (1.4) and 3.48 (0.8), with some variations between individuals. There was a moderate rating of 3.67 (0.8) and 4.18 (0.4) for work ability concerning the physical demands of their job, reflecting some difficulties in managing the physical aspects of their roles.

Work Interference with Personal Life (WIPL)

The concept of WLB is often drawn from individual's multiple life roles and from the recognition that non-work demands may carry over into the work, and adversely influence the individual in several ways.

The study explored various factors affecting social service workers, focusing on how aspects such as working conditions, financial situation, and the number of care receivers correlate with mental and physical well-being, work-life balance, and overall work ability.

Mental suffering among social care workers showed a weak correlation with the quality of the working environment (0.024), financial situation (0.037), and working conditions overload (0.018). However, the number of care receivers demonstrated a more notable influence, with a moderate correlation of 0.154, suggesting that an increased number of care recipients exacerbates mental suffering.

Physical pain and exhaustion correlated moderately with the quality of the working environment (0.115) and financial situation (0.148), while working conditions overload (0.062) and the number of care receivers (0.041) showed weaker correlations. This indicates that financial and workplace support may play more substantial roles in reducing physical strain than workload intensity or care receiver numbers.

The **lack of needs satisfaction** was more influenced by the quality of the working environment (0.126) compared to financial situation (0.033), working conditions overload (0.042), or

number of care receivers (0.031), emphasizing the importance of a supportive work environment in fulfilling workers' personal needs.

When examining lack of work-life balance, working conditions overload (0.125) and the number of care receivers (0.089) had stronger correlations compared to the quality of the working environment (0.050) and poor financial situation (0.047). IT means social workers has to take more shifts and work longer.

The lack of personal life outside of work was moderately impacted by all factors, with working conditions overload (0.142), financial situation (0.132), number of care receivers (0.135), and the quality of the working environment (0.105) showing similar degrees of correlation. This indicates that multiple dimensions of work, including workload, financial stability, and workplace dynamics, contribute to the erosion of personal life.

The **lack of variety in free-time activities** was strongly influenced by the number of care receivers (1.05), suggesting that handling a high number of care recipients leaves little room for diverse leisure activities. The quality of the working environment also had a moderate correlation (0.145), while financial situation (0.016) and working conditions overload (0.036) played less significant roles.

Dissatisfaction with time for non-work activities showed a moderate correlation with the quality of the working environment (0.096), but financial situation (0.045), working conditions overload (0.027), and number of care receivers (0.039) had lower impacts, highlighting that a better work environment might improve satisfaction with personal time.

In terms of work ability with respect to mental demands, the number of care receivers (4.18) had the strongest correlation, suggesting a significant impact of workload on mental capacity. The quality of the working environment (3.57), working conditions overload (3.47), and financial situation (3.37) also played a role but to a lesser extent. Regarding work ability with respect to physical demands, the quality of the working environment (4.39) and financial situation (4.19) had higher correlations; while working conditions overload (4.23) and the number of care receivers (3.48) had less impact. This

suggests that physical work ability is more reliant on support systems within the work environment and financial stability than on workload intensity.

Personal Life Interference with Work (PLIW)

The results regarding **Personal Life Interference with Work (PLIW)** demonstrate varying degrees of impact that personal life challenges have on work performance across several factors.

For the statement "My personal life takes away my energy for work", the most notable correlation was with the financial situation (0.087), followed by the number of care receivers (0.113), while the correlation with working conditions overload (0.017) and the quality of the working environment and relations (0.024) was lower.

For "I am too tired to be effective at work", the correlations were more evenly distributed. The strongest correlation was with working conditions overload (0.052), followed by the financial situation (0.041), the number of care receivers (0.037), and the quality of the working environment and relations (0.025).

When respondents indicated that "My work suffers because of my personal life problems", the number of care receivers had a significant correlation (0.095), while the working conditions overload (0.046) and financial situation (0.036) showed moderate correlations. The quality of working environment and relations

had a lower correlation (0.026).

Lastly, for the statement "It is difficult to work because of personal matters", the highest correlation was with working conditions overload (0.125), followed by the number of care receivers (0.114). The financial situation (0.027) and quality of working environment and relations (0.030) had the smallest correlations.

These findings suggest that personal life issues, especially those related to financial situation and number of care receivers, can influence fatigue and energy levels, ultimately affecting work performance.

Discussion

The findings from this study resonate with existing literature that emphasizes the significance of work-life balance (WLB) in influencing employee well-being, particularly in high-stress environments such as social services. Research Subramaniam et al. (2018) outlines how role conflict between work and personal life can lead to diminished job satisfaction and increased stress levels. The current study supports these conclusions, demonstrating that personal life challenges significantly interfere with work performance.

Additionally, the high percentage of workers reporting that their personal lives affect their energy and effectiveness at work aligns with findings by Frone (2003), who identified that interference from personal life can exacerbate

Table	3	PLIW	scal	e resul	ιts
-------	---	------	------	---------	-----

Statements	Quality of working environment and relations	Financial situation	working conditions overload	Number of care receivers
My personal life takes away my energy for work	0.024	0.087	0.017	0.113
l am too tired to be effective at work	0.025	0.041	0.052	0.037
My work suffers because of my personal life problems	0.026	0.036	0.046	0.095
It is difficult to work because of personal matters	0.030	0.027	0.125	0.114

feelings of fatigue and reduce productivity. The correlation of financial stress with work-related challenges further underscores the interconnectedness of economic stability and job performance, as highlighted in previous research by Padyab et al. (2016).

Furthermore, the specific differences in WIPL and PLIW between long-term and shortterm care workers offer insights into how job roles can dictate the nature of work-life conflicts. Research by Radková (2020) suggests that the context of work can influence how workers perceive their responsibilities, which may explain why short-term care workers experienced higher PLIW. This could be attributed to the transient nature of short-term care roles, which may demand greater emotional investment without the same level of job security or relationship-building found in long-term care roles. Buzalová, Radková, L. Cintulová (2021) have contributed to the discourse on work-life balance in the social services sector, emphasizing the importance of supportive work environments and effective coping strategies to be able to overcome crises even during pandemic period.

The reported exhaustion and dissatisfaction with time for non-work activities (62% agreement) highlight a critical area for intervention. Studies by McNall et al. (2010) show that organizations that prioritize employee well-being through flexible scheduling, supervision and support programs see improved outcomes in both job satisfaction and employee retention. Implementing strategies such as wellness programs or enhancing communication about workload management could mitigate some of the negative effects reported by workers in this study. Ludvigh Cintulová (2022a) stated that the social system significantly impacts the ability of workers to achieve work-life balance because it encompasses various structural, cultural, and policy-related factors that influence individuals' working conditions and personal lives. The existence of flexible work arrangements, parental leave policies, and support for part-time work can greatly affect employees' ability to balance their professional and personal responsibilities. A supportive social system promotes policies that facilitate work-life integration. Societal attitudes towards work and family life play a crucial role in shaping expectations for employees (Pavlikova et al., 2023b). In cultures where long working hours are valued, individuals may feel pressured to prioritize work over personal life, thereby affecting their work-life balance (Ludvigh Cintulová, 2022b),

In conclusion, the results indicate that personal life challenges significantly interfere with work for social service workers, particularly in areas related to energy, effectiveness, and overall satisfaction. These findings contribute to the broader understanding of WLB in high-stress environments, suggesting that addressing financial and workload-related issues may enhance the well-being of social service professionals. Future research should explore longitudinal studies to evaluate the impact of specific interventions on improving work-life balance and overall job satisfaction in this sector.

The connection between the historical development of senior social services in Slovakia, as discussed by Ludvigh Cintulová et al. (2022; 2023b) the burnout of social workers is multifaceted. Several factors contribute to this relationship. As the population ages, the demand for social services for seniors has risen significantly. This surge can lead to overwhelming workloads for social workers, contributing to stress and burnout. According to a study Ludvigh Cintulová et al. (2023), high caseloads and the emotional toll of caring for vulnerable populations are significant predictors of burnout in social workers. In summary, the interplay between the demands placed on social workers in the context of senior care services, resource limitations, and the emotional labor involved in their roles is significant in understanding burnout.

The connection between work-life balance (WLB) and the challenges faced by social workers in senior social care services, particularly in the context of the pandemic, as outlined in the work of Ludvigh Cintulová et al. (2024), showing that the COVID-19 pandemic significantly heightened the demands placed on social workers in senior care. As outlined in the study, many workers experienced increased caseloads and expectations, which directly impacted their ability to maintain a healthy work-life balance. Research indicates that when work demands exceed an individual's capacity, it leads to stress

and can result in burnout. The study on burnout among social workers in social care centers presents a stark picture of the mental health landscape faced by professionals who support others during these challenging times. The study reveals that burnout rates among social workers are significant, with 30% reporting symptoms linked to increased overtime work and mental stress, which have risen sharply during the pandemic (Pavlikova et al., 2023). Social workers are often tasked with helping both parents and children navigate their emotional turmoil, which can be exacerbated by the increased reliance on social media for grief processing. As social workers report significant burnout, it raises concerns about their capacity to effectively support families, especially when addressing issues of parental issues (Tkacova et al., 2023).

Conclusion

The inability to achieve a proper balance between work and personal life can adversely affect social workers' mental health, leading to higher turnover rates and reduced job performance.

Social workers often face emotional challenges due to the nature of their work, particularly in caring for vulnerable populations such as the elderly. The pandemic intensified these emotional strains, leading to difficulties in separating work from personal life. This phenomenon is known as work-life interference, where work-related stress negatively affects personal life and vice versa. Effective supervision and organizational support are critical in enabling social workers to navigate their responsibilities without compromising their personal lives. Research supports the idea that organizations that foster a supportive environment can help mitigate the adverse effects of work-related stress on employees' personal lives.

In contrast, the quality of the working environment and financial situations, while showing weaker correlations with mental suffering, still play essential roles in shaping overall job satisfaction and worker morale.

Physical pain and exhaustion were found to correlate more closely with financial situations and the quality of the working environment than with working conditions or the number of care receivers. This underscores the importance of financial stability and supportive workplace policies in alleviating physical strain, as noted in studies emphasizing the significance of organizational support. Additionally, the correlation of a lack of needs satisfaction with the quality of the working environment highlights the necessity for a supportive atmosphere that fulfills workers' personal and professional needs.

Regarding work-life balance, the correlations indicate that working conditions overload and the number of care receivers significantly impact social workers' ability to maintain a healthy balance between professional and personal lives. This finding resonates with literature that connects high workload demands to diminished personal time and increased work-related stress. The strong correlation between the lack of variety in free-time activities and the number of care receivers suggests that heavy caseloads severely restrict leisure opportunities, further impacting mental well-being.

Overall, the study reveals that enhancing the quality of the working environment and addressing financial issues could mitigate the adverse effects of workload on social workers. This aligns with recommendations in the field advocating for better work-life balance initiatives and comprehensive support systems to improve the well-being of social care workers (Ludvigh Cintulová et al., 2024). As social care demands continue to grow, it becomes increasingly vital for organizations to implement strategies that promote not only the physical and mental health of their employees but also their overall work-life satisfaction (Hamarová et al., 2024; Kralik et al., 2024).

References

- 1. BRITISH ASSOCIATION OF SOCIAL WORKERS. 2018. State of Social Work 2018: Working Conditions and Wellbeing. Retrieved from https://www.basw.co.uk.
- 2. MUTZ, M, MRAZOVA, M. et al. 2024. Stress and Burnout in the European Workplace and the Role of Resilience. *Clinical Social Work and Health Intervention* CSWHI 2024; 15(3): 6 13; DOI: 10.22359/cswhi 15 3 01.
- 3. EUROFOUND. 2021. Living, working, and COVID-19: Mental health and well-being of

- workers in social care services. European Foundation for the Improvement of Living and Working Conditions. Retrieved from https://www.eurofound.europa.eu
- 4. FRONE, M. R. 2003. Work-family conflict: An overview of the theory, research, and the policy implications. In A. J. C. D. (Ed.), Handbook of Industrial, Work and Organizational Psychology (Vol. 1, pp. 1-40). SAGE Publications.
- GAZIKOVA, S. 2023. The impact of COVID-19 on resilience, burnout, and mental health in social care workers. Journal of Social Work and Wellbeing, 18(2), 234-250.
- GRANT, L., & KINMAN, G. 2012. Enhancing wellbeing in social workers: The role of resilience, emotional intelligence, and mindfulness. *British Journal of Social Work*, 42(4), 733-753. https://doi.org/10.1093/bjsw/bcr116.
- HAMAROVA, M., MATURKANIC, P., GRUBER, J., SVOBODA, M., SURAB, M., HISEM, C., KRALIK, R. 2024. Social (Pastoral) Services and its Impact on the Citizens of the Czech Republic. *Clinical Social Work and Health Intervention*, 15(4), pp. 25-33.
- KRALIK, R., MAHRIK, T., SPUCHLAK, J., MATURKANIC, P., PAVLIKOVA, M. 2024. Narcissistic Privacy as a Barrier to Socialization. *Clinical Social Work and Health Intervention*, 15(4), pp. 44-52.
- HAYMAN, J. 2005. Psychometric assessment of an instrument designed to measure work life balance. Research and Practice in Human Resource Management, 13(1), pp. 85–91.
- LUDVIGH CINTULOVA, L., BUDAYO-VA, Z., BUZALOVA, S. 2022. Historical development and transformation of senior social services in Slovakia. Ireland, Dublin: ISBCRTI, 2022. 266s. ISBN 978-1-9989986-2-3.
- 11. LUDVIGH CINTULOVA, L., BUDAYO-VA, Z., OLAH, M. 2024. Challenges and Changes in Senior Social Care Services during the Pandemic Period. In: The Person and the Challenges / Prof. Dr. hab. Elżbieta Osewska et al. - ISSN 2083-8018. – 14(2), pp. 99-112.
- 12. LUDVIGH CINTULOVA, L. 2022a. Foun-

- dations and introduction to social policy. Bratislava (Slovakia): St. Elizabeth University of Health and Social Work in Bratislava, 2022. 85 p.
- 13. LUDVIGH CINTULOVA L. 2022b. Social security system in the line of social insurance and benefit system in Slovakia. Bratislava (Slovakia): St. Elizabeth University of Health and Social Work in Bratislava, 2022, 90 p.
- 14. LUDVIGH CINTULOVA, L, BUDAYO-VA, Z, JUHASOVA, I. 2023. Health of Roma People living in marginalized Communities in Slovakia. *Clinical Social Work* and Health Intervention, 14(1), pp. 7-15.
- LUDVIGH CINTULOVA L, BENO P, PAV-LOVICOVA, T. 2023b. Aspects of social services and well being in post covid era. *Int J Health New Tech Soc Work*, 18(3), pp. 106-114.
- PADYAB, M., MOGHADDAM A. 2016. Work–Family Conflict and Job Satisfaction among Iranian Employees: The Mediating Role of Psychological Capital. *Journal* of Family and Economic Issues, 37(4), pp. 664-676.
- PAVLIKOVA, M, TKACOVA, H, TIMOR, T. 2023. Grief of the bereaved in a social media environment as one of the prominent consequences of the COVID-19 pandemic. *Acta Missiologica*, 17(2), pp. 75-84.
- PAVLIKOVA, M., MATURKANIC, P., AKIMJAK, A., MAZUR, S., TIMOR, T. 2023b. Social Interventions in the Family in the Post-Covid Pandemic Period. *Journal of Education Culture and Society*, 14(1), pp. 106-123.
- PARKER, J., SLAUGHTER, L. 2020. Burnout and work-life balance in highstress professions: A meta-analysis. Journal of Occupational Health Psychology, 25(3), pp. 415-430. https://doi.org/10.1037/ ocp0000258
- 20. SOVIAL CARE WORKFORCE REPORT. 2022. Challenges and work conditions in the social care sector. Social Care Review, 16(1), pp. 89-102.
- RADKOVA, L, LUDVIGH CINTULOVA, L, BUNDZELOVA, K. 2020. Female genital mutilation and its health, emotional, so-

- cial and ethical consequences. *Acta Missiologica*, 14(1), pp. 153-162.
- 22. SUBRAMANIAM, S., BELOVICOVA, M., VANSAC, P., PALUN, M., RADKOVA, L., OTRUBOVA, J., VLCEK, R., BENCA, J., OLAH, M., 2018. Rehabilitation and Nursing Homes with Elderly and Homeless Population, Lessons not only for Physiotherapy but also for Epidemiology? *Clinical Social Work and Health Intervention*, 9(3), pp. 64-66.
- SVOBODA, M., MEDZIHORSKY, S., GRUBER, J., JANACKOVA, L., SURAB, M., KRALIK, R. 2024. Manipulation as a risk factor for psycho-social health. *Acta Missiologica*, 18(1), pp. 43-54.
- 24. TKACOVA, H., PAVLIKOVA, M., AZIZI, M., SOTIROFSKI, K. 2023. Oversharing of content online by children during the holidays and parental control. *Acta Missiologica*, 17(2), pp. 60-74.
- VALACHOVA, K., SHCHERBIAK, I., PODPERA, R., PAVLIKVOVA, M. 2024. Workload and Stress Experienced by Lawyers and Social Workers in the Working Environment. Stress Management in Social Workers. Acta Missiologica, 18(1), pp. 92-102.
- ZENELAGA, B., GOGA, A., KRALIK, R. 2024. Inclusive Universities. Exploring the well-being of university students with special needs in Albania. *Journal of Education Culture and Society*, 15(2), 373-386.

Global Health Impact from Climate Change

M. M. Costello (Michael M. Costello)¹, D. West (Daniel West)¹, S. Szydlowski (Steven Szydlowski)¹, B. Ramirez (Bernardo Ramirez)²

¹Department of Health Administration and Human Resources, University of Scranton, USA Original Article

E-mail address:

Michael.costello@scranton.edu

Reprint address:

Michael M. Costello Department of Health Administration & Human Resources University of Scranton, USA Room 227 McGurrin Hall Scranton, PA 18510 USA

Source: Clinical Social Work and Health Intervention Volume: 15 Issue: 5

Pages: 16 – 20 Cited references: 19

Reviewers:

Arab Naz University of Malakand Chakdara Khyber Pakhtunkhwa PK Vitalis Okoth Odero Amoud University, Borama, Department of Public Health, KE

Keywords:

Global Health. Climate Change.

Publisher:

International Society of Applied Preventive Medicine i-gap

CSWHI 2024; 15(5): 16 - 20; DOI: 10.22359/cswhi 15 5 03 © Clinical Social Work and Health Intervention

Abstract:

The phenomenon of climate change is impacting the planet with notable effect. Polar ice is melting, ocean levels are rising, daily temperatures are increasing, forest fires are burning longer and destroying more residential areas, and urban air quality levels are deteriorating. At the same time, human health is experiencing the effects of exposure to changing climate. Research has indicated that extreme climactic conditions can shorten life expectancy and impact cardias, respiratory and mental health as well as facilitating the spread of some infectious diseases. The health related impacts of climate change merit serious attention in the patient and provider communities. Opportunities to effectuate meaningful changes are examined.

² School of Global Health Management & Informatics, University of Central Florida, USA

Introduction

Climate change is a global reality. February and March 2024 were the warmest of those months globally. (The Guardian, 2024). The physical evidence is readily apparent and the era of climate change skepticism should be in the past. Along with the physical manifestation of climate change should come the realization that human health is also impacted by climate change.

With climate variability and change, there are increased health risks impacting quality of life at the individual level. Population health is also impacted by weather variability. A wide range of climate-sensitive health outcomes are related to altered weather patterns, heatwaves, wildfires, floods and droughts, water quality and food insecurity. Without proactive outcomes to measure climate change, the burden of disease will increase. Climate change impacts food and water security through its impact on agriculture, food, health, biodiversity loss, soil degradation, land use and fresh water depletion.

Climate change poses a global challenge resulting in increased prevalence of acute and long term diseases. Changing patterns of infectious diseases are noted along with vector borne diseases. Some climate-sensitive infectious diseases include malaria, dengue fever, Lyme disease, West Nile virus and diarrhea diseases.

According to the World Health Organization (n.d.) environmental health "is concerned with preventing disease, death and disability by reducing exposure to adverse environmental conditions and promoting behavior change. It focuses on the direct and indirect causes of disease and injuries and to resources inside and outside the healthcare system to help improve health outcomes." The United Nations (n.d.) has formulated 17 Sustainable Development Goals (SDGs) in working with the global community related to a 2030 global agenda. Some SDGs have a very direct link to climate change and health:

Goal 6: clean water and sanitation

Goal 7: Affordable and clean energy

Goal 13: Climate action

Each of these goals has specific targets and activities. These goals impact health directly. For example, the third leading cause of death

in low and middle income countries is COPD. Climate change has an enhancing effect on the poorest countries in food production and food supply. The effects of climate-sensitive change can be studied by level of impact at three levels: household, the community, or globally. Furthermore, there are cost effective ways of reducing the global burden of environmental health problems.

Discussion

According to the US National Oceanic and Atmospheric Administration (NOAA) (2021), indications of climate change are: an increase in global temperature of 1°c from 1901 to 2020; a rise in sea level of 3.2mm per year since 1993; shrinkage of glaciers depth by more than 60 feet since 1980, a shrinkage of the area covered by Arctic sea ice of approximately 40% since 1979; an increase of atmospheric carbon dioxide of 25% since 1958 and earlier snow melt compared to long-term averages.

The Environmental Protection Agency (EPA) (2019) reports that in the month of July 2019 alone, Greenland lost over 197 billion tons of water from melting ice sheets. In the same report, the agency quoted the New York Times (December 12, 2018) as asserting that extreme rainfall, and the extreme lack of it, affects untold numbers of people, taxing economies, distrupting food production, creating unrest and prompting migrations.

The EPA indicated that "it is extremely likely (>95%) that human activities have been the dominant course of that (global) warming". The EPA claims that "Human activities have contributed substantially to climate change through greenhouse gas emissions and reflexivity or absorption of the sun's energy."

According to the National Institute of Environmental Health Sciences (NIEHS) (2021):

Climate change impacts human health in both direct and indirect ways. Extreme heat waves, rising sea levels, changes in precipitation resulting in flooding and droughts, and intense hurricanes can directly cause injury, illness and even death. The effects of climate change can also indirectly affect health through alterations to the environment. For example, worsening air pollution levels can have negative impacts on respiratory and cardiovascular conditions. Changes in temperature and rainfall can alter the survival, distribution, and behavior of insects and other species that can lead to changes in infectious diseases.

Writing in the open access journal PLOs Climate, Amit Roy claims that "the cost of climate changes may take six months off the average human life span." (Public Library of Science, 2024). According to the World Health Organization (WHO) (2023) approximately 3.6 billion people are residing in areas "highly susceptible to climate change". The WHO also estimates that between 2030 and 2050 climate change will cause an additional 250,000 deaths annually from undernutrition, malaria, diarrhea and heat stress alone. Asia Today (2024) estimates that climate change will cause four million deaths in 2024.

In a report entitled "Addressing climate change and health in the Europe and Central Asia region," the WHO (2024) states:

Climate change is one of the greatest threats to human health worldwide, and the risks are on the rise. It threatens the essential ingredients of good health-clean air, safe drinking water, nutritious food supply and safe shelter- and has the potential to undermine decades of progress in health, globally, regionally, nationally and locally.

In Africa, Opaku, Filho, Hubert et al (2021) surveyed health professionals in six countries (Ghana, Nigeria, South Africa, Namibia, Ethiopia and Kenya) and found that 93 persent of respondents indicated that climate change had been experienced in their country. Respondents indicated their belief that inadequate resources existed to combat climate change and that there was a need to improve the skills of health professionals.

The study pointed to extreme weather events

in Africa which have resulted in an increase in malaria and other "vector-borne" diseases. Drought and its impact on food production and food supply has also been cited (ibid).

Irfan (2012) looked at differences between the ages of death and life expectancy due to temperature extremes in Australia. He cited research by Adrian Barnett of Queensland University of Technology in Australia who looked at temperature-related fatalities in the city of Brisbane over an eight year period. In looking at deaths on days when the temperature dropped to 10 degrees celsius or rose to 30 degrees Celsius, Barnett determined that the deaths in Brisbane resulted in a reduction in expected life years for both men and women.

Peters and Schneider (2020) assessed the impact of cold and heat on myocardial infarctions for two time periods: 1987-2000 and 2001-2014. They noted that in the earlier period, myocardial infarctions were brought on by "cold exposures only". During the second period they observed "significant effects of temperatures less 18°c on the risk of myocardial infarction." They wrote that the increased risk was "attributable to the greater vulnerability to cardiovascular disease of individuals with Type 2 diabetes mellitus or hypertension."

Jacobsen, Khiew, Duffy et al (2022) noted that "climate change-related cardiovascular disease is mediated by air pollution, increased ambient temperatures, vector-borne disease and mental health disorders."

The American Lung Association (n.d) cautions:

Climate change creates conditions, including health and stagnant air, which increase the risk of unhealthful ozone levels. Ground level ozone, often called smog, forms in the atmosphere when gases emitted from sources like smokestacks and tailpipes mix in the air. Hotter weather and stagnant air create conditions that make ozone more likely to form

The association also cautions that climate change can increase the level of allergens:

As temperatures rise, plants produce more pollen, increasing ragweed and other allergens....Warmer temperatures also allow allergens to flourish in new regions and for allergy seasons to last longer.

According to Jacobsen et al, solastalgia "refers to the distress that is produced by environmental change while climate anxiety refers to the typical anxiety symptoms such as obsessive thinking, insomnia and panic attacks related to the global climate crisis and the threat of environmewntal disaster.

In addressing the mental health impact of climate change, the Commonwealth Fund (2023) states that experiencing an extreme weather event can be "traumatizing." The Fund states that:

The destruction, loss and displacement people experience can sometimes lead to an array of mental health problems, from anxiety and feelings of helplessness to depression, post-traumatic stress disorder (PTSD) and suicidal thoughts.

The Fund also states that those at higher risk of experiencing mental health issues resulting from climate change are people of color, the homeless, young children and older adults.

Conclusion

Weather and climate disasters are increasing death rates and impacting all regions of the world. Aside from the actual natural disasters, there are latent implications and effects. Environmental risk impacts occur at different levels and require different adaptive strategies to mitigate adverse effects. The key essential latent health issues are: the lack of safe water and sanitation, poor access to hand washing facilities, household air pollution and ambient particulate matter pollution. Efforts are needed to reduce water disease especially diarrhea and parasitic diseases.

All health systems and organizations have a responsibility to address climate change health related issues by mobilizing the community and implementing sustainable initiatives. The importance of SDGs must be realized and embraced to collectively impact climate-sensitive health problems. Disaster and climate related health have an impact on the economic stability of healthcare providers and systems. There are impacts on workforce employment, ED use, hospitalization rates, length of stay (LOS), supply chain management, drugs, medical devices, ventilator usage, IV bags and microchips. There are opportunities to effect meaningful change in the healthcare system and community through sustainable and resilience interventions. Some examples include increasing the need for accurate information based on science, improved health literacy, addressing concerns over conflicts about resources, and changes in health policy. There is a cost to be paid for inaction and measurable benefits to taking action. There will be interactions between climate and migration patterns, demography, socioeconomic factors and ethical concerns. Health protections are needed along with strong efforts at prevention strategies and preparedness strategies.

When discussing climate related health changes, adaption and mitigation can be transformational. Adaptation "is a process of adjustment to actual or expected climate change and its effects. In human systems, adaption seeks to moderate or avoid human or exploit beneficial opportunities." (Eli & Hess, 2024). Concrete examples include providing the workforce with climate resilience knowledge, health information system, risk management, adequate financing to limit indirect health effects, and mental health services as needed. Adaptation can involve modifying existing systems, creating early warning and response systems, early outbreak detection. As noted by Berry, Enright, Shumake-Guillemat, et.al. (2018) "Key approaches to understanding and managing the health risks of climate change include conducting vulnerability, capacity, and adaptation assessments and developing the health component of national or regional adaptation plans. Increasing public awareness is an essential strategy along with the use of implementation science. Finally, hospitals and health systems are positioned to "effectuate positive and widespread change" to impact the effects of climate change. (Wade, 2023).

References

- AMERICAN LUNG ASSOCIATION. 2024. "Climate Change and Lung Health" www. lung.org Retrieved February 15, 2024.
- ASIA TODAY. 2024. "Impact of Climate Change, 4 Million Human Deaths Predicted to Occur in 2024 www.asiatoday.id Retrieved February 15, 2024.
- BERRY, P., ENRIGHT, PM, SHU-MAKE-GUILLEMAT, J., VILLALOBAS PRATS E., CAMPBELL-LENDRUM, P. 2018. Assessing health vulnerabilities and adaptation to climate change: a review of international progress. Int. J. Environmental Res Public Health, 2018; 15(12): 2626.
- COMMONWEALTH FUND. 2023. "How Climate Change Affects Our Mental Health, and What We Can Do About It" www.commnwealthfund.org Retrieved February 14, 2024.
- ELI, K. & HESS, J. 2020. Health risks due to climate change: Inequity in causes and consequences. Health Affairs, 39(12): 2056-2062.
- ENVIROMENTAL PROTECTION AGEN-CY. 2021 "Causes of Climate Change" www.epa.gov Retrieved February 20, 2024.
- 7. THE GUARDIAN. 2024. "February was warmest on record globally, say scientists" www.theguardian.com Retrieved March 7, 2024.
- IRFAN, U. 2012. "New Study Calculates Years of Life Lost to Extreme Temperature. Scientific American www.scientificamerican.com Retrieved February 15, 2024.
- JACOBSEN, A, KHIEW, Y., DUFFY, E. 2022. "Climate change and the prevention of cardiovascular disease" American Journal of Preventive Cardiology www.ncbi.nim.nih. gov Retrieved February 15, 2024.
- NATIONAL OCEANIC AND ATMO-SPHERIC ADMINISTRATION. 2021.
 "Climate change impacts." www.noaa.gov Retrieved February 20, 2024.
- OPOKZ, S, FILHO, W, HUBER, F et al. 2021. "Climate Change in Health Preparedness in Africa: Analyzing Trends in Six African Countries" International Journal of Environmental Research in Public Health May 2021 18(9): 4672 doi: 10.3390/ ijerph18094672.

- NATIONAL INSTITUTE OF ENVIRO-MENTAL HEALTH SCIENCES. 2022. "Human Health Impacts of Climate Change" www.niehs.nih.gov Retrieved February 20, 2024.
- 13. PETERS, A SCHEIDER, A. 2020. "Cardiovascular risk of climate change" www.nature.com Retrieved February 20, 2024.
- 14. PUBLIC LIBRARY OF SCIENCE. 2024. "Climate change may reduce agerage life expectany by half a year, study: (2024, January 18) https://phys.org Retrieved February 15, 2024.
- 15. UNITED NATIONS (n.d.). Sustainable Development Goals. Retrieved from https://www.un.org/sustainable development/.
- WADW, R. 2023. Climate change and healthcare: creating a sustainable and climate-resilient health delivery system. Journal of Healthcare Management, 68(4), 227-238.
- 17. WORLD HEALTH ORGANIZATION (n.d.). Public Health, environmental and social determinants of health. Retrieved from http://www.who.int/phe/en.
- 18. WORLD HEALTH ORGANIZATION. 2020. "Addressing climate change and health in the Europe and Central Asia region" www.who.int Retrieved February 15, 2024.
- WORLD HEALTH ORGANIZATION. 2023. "Climate change" www.who.int Retrieved February 15, 2024.

Perception of Agents Assisting Women Experiencing Violence in Couple Relations

M. Hrozenska (Martina Hrozenska)¹, L. Pavelova (Luba Pavelova)², J. Gabrielova (Jana Gabrielova)³

Original Article

E-mail address:

martina.hrozenska@uniba.sk

Reprint address:

Martina Hrozenska Department of Social Work, Faculty of Education Comenius University Soltesovej 4 811 08 Bratislava Slovakia

Source: Clinical Social Work and Health Intervention Volume: 15 Issue: 5

Pages: 21 – 28 Cited references: 21

Reviewers:

Gabriela Lezcano University of California, San Francisco, USA Zofia Szarota WSB Academy / WSB University in Dabrowa Górnicza PL

Keywords:

Violence. Women experiencing Violence. Violence in couple Relationships. Formal Actors.

Publisher:

International Society of Applied Preventive Medicine i-gap

CSWHI 2024; 15(5): 21 - 28; DOI: 10.22359/cswhi_15_5_04 © Clinical Social Work and Health Intervention

Abstract:

OBJECTIVES: To provide the perspective on perception of women's NGOs, advocacy and health professionals as formal actors assisting women experiencing violence.

METHODS: Data were collected through a questionnaire and semi-structured interview and processed using the method of qualitative thematic analysis based on a phenomenological approach.

RESULTS: They point to women's experiences with aid actors located in the so-called formal environment and to a fundamental need in educational practice on this topic.

IMPLICATIONS FOR PRACTICE: The approach of the

¹ Department of Social Work, Faculty of Education, Comenius University, Bratislava, SK

²NGO BUDÚCNOSŤ, Nitra, SK

³ Department of Social Work, College of Polytechnics Jihlava, Jihlava, CZ

Police, the Courts and also the Office of Labour, Social Affairs and Family appears to be insufficiently supportive and helpful. Women's experiences with helping organizations that provide specialized assistance to women are positive.

Introduction

Compared to the past, more attention has been paid to the problem of violence against women and violence in couple relationships in Slovakia in recent years. Changes are taking place at the legislative level, and the number of organizations and institutions that provide help and support services to women has also increased. Funds from public sources are allocated to support the solution of this problem. The prosecutor's office also pays increased attention to the topic of violence against women, which significantly affects the perception of violence by the public.

By violence against women, we understand "any act of violence based on gender inequality, the consequence of which is, or tends to be the consequence of, physical, sexual or psychological harm to a woman experiencing violence, including threats of such acts, coercion or any denial of freedom, whether in public or private life..." (Kelly, Dubois, 2008:9). We can talk about the presence of violence in a couple relationship by one partner if there is an unequal distribution of power and its abuse. Using violence against women, men enforce male privilege and control over them, asserting their own moral order. Combinations of a number of power and control tactics form a pattern of abusive behaviour. Most definitions of intimate partner violence and abuse recognize that its essence is coercive control, with physical violence being only one tactic used to achieve control over women.

The World Health Organization estimates that 30% of all women who have been in a relationship have experienced physical and/or sexual violence from an intimate partner (WHO, 2013). In 2014, the FRA (European Union Agency for Fundamental Rights) published a pan-European survey on violence against women. The research is based on data from 42,000 face-to-face interviews with a random sample of women (aged 18 to 74) across 28 EU member states. An estimated 13 million women in the EU experienced physi-

cal violence in the 12 months prior to the survey interviews. In Slovakia, according to research by the European Union Agency for Fundamental Rights, 34% of women will experience physical and/or sexual violence during their lifetime, and every tenth woman will experience a physical and/or sexual attack within 12 months.

Failure to reflect the latest scientific knowledge by law enforcement agencies and courts and experts, however, remains in some cases an obstacle to the effective fight against violence against women and intimate partner violence. The help provided to women must be targeted and must take into account the individual circumstances of a woman's life, focusing especially on her safety (including the safety of her children). Juhásová, Pavelová, Morávková (2021) state that women experiencing violence, have, in addition to other feelings, also intense feelings of guilt and shame, which prevent them from confiding and, therefore, from searching help. The decision to leave an abusive relationship comes slowly, often in stages, and can take several years.

Theoretical Background

The phenomenon of violence in couple relationships can be viewed through the lens of several scientific fields, while different interpretive perspectives are applied, which are primarily focused on certain aspects of this phenomenon. A feminist and gender-sensitive perspective captures the phenomenon of violence in couple relationships in the most comprehensive way, from gender inequalities to issues of justice to individual help for women who have experienced violence. Bosá (2011) considers the feminist approach in social work to be one of its roots. The main feminist principles and goals in cooperation with women experiencing violence are based on support, help and creation of safety for women, on their acceptance and respect, on appreciating the significance of their experiences, on the protection of their rights or on providing information and space to explore available options, risk recognition or updating security plans. According to Janebova (2014), feminist theories of social work include a range of streams of social work, with an emphasis on finding, explaining and solving inequalities between men and women in society. Their common goal is to eliminate the marginalization and oppression of women in society.

In the text of the document, we use terms such as "women experiencing violence" or "survivors", which we consider to be more appropriate and more accurate for the naming of the phenomenon of violence against women, as they do not stigmatize women, do not imply a passive position and, above all, do not silence the active position of women trying to prevent or mitigate violence. Ondrušková (in Ondrušková et al., 2020:12) deals more closely with terminological questions in the field of violence in intimate relationships. We retain the term victim when citing currently effective legislation and in translations of older foreign texts. At the same time, similar to Libáková and Bosá (2018), we replace the phrase "violence in partner relationships" with the phrase "violence in couple relationships", which reflects the fact that violent relationships are not partners or they are not based on partnership and equality.

Methods used in data collection and processing

We collected research data using a demographic data questionnaire and a semi-structured interview, which were strictly anonymized so that women's safety would not be jeopardized. Ethical rules for data acquisition and processing were formulated in an informed consent specified for participants, organization workers and researchers, personally signed by all parties. The data collection was carried out by professional employees of the organizations (only women), who were trained in the research methodology by a personal meeting with the members of the research team, where the training took place, and they had the opportunity to communicate all interview questions. At the same time, they received methodological instructions for filling out the questionnaire and conducting interviews and had the support of the research team. The questionnaire contained questions focused on

basic demographic data: age, size of the place of residence (the current one, the one relevant to the relationship in question), change of the place of residence, stay in safehouse for women, marital status, educational level, employment, number and age of children.

The semi-structured interview consisted of six basic open questions aimed at finding out the experiences and behaviour of women in situations of violence, in a violent relationship and supporting, helping or other actions of actors in the informal and formal environment.

The data obtained in semi-structured interviews were processed by the method of qualitative thematic analysis in the program ATLAS. ti 8 and MS Excel 2013. We applied predominantly the processes of interpretative phenomenological analysis (Willig, 2013), which puts emphasis on the importance of experience for respondents. The qualitative data (transcripts of interviews) were divided into segments according to the research objective and research questions: (1) women and their behaviour, (2) individual factors, (3) men and their behaviour, (4) child/children, (5) informal actors, (6) formal actors. First, the data were arranged to segments/ categories. Categories represented the most general level of data classification, created on the basis of a pre-determined criteria. Encoding was conducted by researchers divided into smaller groups, confronting their procedures, and creating criteria for designing categories. The resulting tables and procedures were discussed by the whole work group.

Characteristics of the research sample

44 women participated in the research, who were approached through organizations providing specialized services to women who experience violence in couple relationships. The condition for approaching a woman (and inclusion in the research sample) was that the woman had been working with the organization for at least two years. This condition was intended to prevent women from being secondarily victimized or repeatedly traumatized.

Participants were ranged between 22 and 65 years of age. The age range was quite wide. Most participants were aged 36-49, with high school education, followed by women with university

education. Almost 60% of them were divorced. Most of the worked full time, two participants were old-age pensioners. Two women (out of 44) were childless.

Research findings – women's experience with formal actors

Situational strategies with the involvement of the formal environment or actors from the formal environment are typical mainly by filing a report with the police, asking the police for help or seeking medical help. Long-term strategies in which women used the help of the formal environment can be understood mainly as: filing a criminal complaint, filing a divorce application, working with psychologists or seeking legal help or contacting workers in the social and legal protection of children and youth and social guardianship.

In the process of analysing the segment: formal environment, categories of formal subjects, actors were created, which were: police, health workers, workers of the Office of Labour, Social Affairs and Family (ÚPSVaR), legal aid providers (lawyers, advocates), judges and non-governmental organizations working with women experiencing violence.

Subcategories were created based on the evaluation of women's experiences with their actions (or inaction) or interventions. As a rule, these are two subgroups of subcategories. Those where the woman expressed a good experience and useful help and support, or interventions shaping the woman's bad experience, rejection or experiencing unprofessionalism. Procedures of formal actors that hindered women in the process of stopping violence, such as failure to act (e.g. trivializing the situation, failure to provide information, discouraging reporting, delays in proceedings) or unprofessional procedures (inappropriate personal approach, mistrust of women). Table 1 illustrates the perception of the approach of formal actors in dealing with violence experienced by women.

Among the supporting factors that defined women experiencing violence in couple relationships, identified by the activity of non-governmental organizations, the following can be included in particular: moral support, acceptance and recognition of the individual, creation of a sense of security and provision of specific legal and psychological assistance. They experienced this type of support and attributed it mainly to cooperation with non-governmental organizations working with women experiencing violence. Some participants reported that they met with understanding for the first time and "finally" someone believed in their story. The experience when a synergistic effect is achieved through the cooperation of several entities is helpful for women. The so-called multidisciplinary approach of formal actors, which is irreplaceable in helping women experiencing violence, was highly appreciated.

"Then I contacted the assistance centre for such women here in XY and they helped me." (ID 48:57)

"I addressed you and the organisation X, they helped me psychologically, and the lawyer from organisation Y helped me in legal issues." (ID 49:09:00)

"I was psychically supported by the centre. The psychologist and all people I came into contact with. Then also the police, during our second interaction, the first one did not go so well. During that second meeting I perceived the officer as the one who will stand for me". (ID 48:109)

"...the judges were full of doubt, because he did not kill me or beat me, and asked why didn't I switch off the phone and ignore him." (ID 48:182)

"So it is going to the district court again, to the higher court, and back, and there is no end to it. And who knows what the end will be? " (ID 48:184)

"Even my lawyer remembers a case where she had a bribed expert." (ID 50:66)

An important professional group that was in direct contact with women experiencing violence were medical professionals (including clinical psychologists). Their approach was perceived positively, while they had sufficient knowledge about helping women experiencing violence and also provided them with psychological support. On the other hand, doctors expressed mistrust towards the group of women and acted against it.

"Then the physician advised me a psychologist, because she thought it was a mental issue.

Table 1 Selected formal actors and their approach

FORMAL ACTORS	CRITERION	SUBCATEGORIES		
	Evaluation and experience of	Approach of formal actors		
NGOs	women with actions of NGOs	Hindering change	Supporting change	
			Encouragement towards emotional opening; Listening to a woman, providing the feeling of understanding; Consultancy; Psychological and moral support; Support for positive qualities; Providing the feeling of safety; Understanding NGOs as "safe islands"; Multidisciplinary approach; Networking of experts;	
ADVOCACY	Evaluation and experience of	Approach of formal actors		
ADVOCACT	women with actions of lawyers	Hindering change	Supporting change	
			Filing a petition with the court; Immediate actions; Specific legal advice; Expert reporting; Assistance of a lawyer; Women's feelings, that finally there is someone on her side; Professional approach of a lawyer; Legal advice regarding the child custody and parental agreement;	
HEALTH	Evaluation and experience of	Approach of formal actors		
SERVICE	women with actions of health service professionals	Hindering change	Supporting change	
		Physician not knowing about violence in family; Physician not willing to believe in violence in family; Actions of health service professionals only in favour of a man;	Psychological or psychiatrical intervention; Physician providing help and support to a woman;	
SOCIETY	Evaluation and experience of	Setup of system measures for assistance and protection		
555.	women with actions of society	Hindering change	Supporting change	
		Unsatisfactory protection against a violent person; Men (father) escaping the liability to pay; Insufficient support for women with financial problems		

Source: own processing, 2023

I don't know when she told me that, but I went and visited the psychologist..." (ID59:55)

"The best of all was the psychologist, who didn't just open my eyes — she talked with me and I was in need of talking. She told me I cannot carry on living like that, I need to do something. She told me: You are a young woman, you need to think about children."(ID59:61)

In today's society, women perceive many reserves and shortcomings, especially in the form of weak support and understanding or protection from violence, as well as in the form of insufficient help for survivors.

" What does our society even want? They do not know, but they are judgmental. "(ID 47:217)

"This is our society, not protecting women. And absolutely not in this town. Unless a woman is dead or has her throat slit, everything is seemingly okay. But then it is already too late. Nobody cares then, there is nothing more to do. They should wake up, in the social office, in the court, because it does not function. I think there are more of women like me. So I beg, if there is a way to help, help the women. And educate and control the office employees, because their decisions are often arbitrary." (ID 47: 224).

Based on the statements of the participants, the fact is that there are still procedures and interventions by formal actors that are part of the so-called helping sphere, which are insufficient or victimizing, influenced by inappropriate gender stereotypes and prejudices. There is also a lack of professional preparation of formal actors who may come into contact with women experiencing violence. The reason for the failures of formal actors can also be found in the low level of awareness of the problem and the underestimation of women's experiences, which results in their stories not being heard.

The importance of the availability of specialized services for women who experience violence in couple relationships is clearly shown. Operating organizations work on the basis of standards and procedures that are sensitive to the protection of women's safety, they have professionals who can provide qualified service and support.

Conclusion

The analysis of the formal environment segment (formal actors) in research aimed at identifying the strategies that women use to prevent, mitigate and stop violence in couple relationships and the factors that influence the choice of these strategies led to the creation of a category of (formal) subjects (actors) who in the women's statements stand as actors from whom they expect help. The categories corresponded to institutions that, directly by law and based on their competences and expertise, have or can provide help or support to women who have experienced violence in couple relationships. Subcategories were created based on the evaluation of women's experiences with their actions or interventions. Findings on formal actors show different experiences of women. A professional multidisciplinary approach, willingness, help and support for women were identified as the so-called supporting factors. The opposite experience of women, associated with the unprofessional approach of formal actors, or the experience of not providing protection led to the identification of the so-called hindering factors.

References

- 1. ALMEIDA, R.V., DURKIN, T. 1999. The Cultural Context Model: Therapy for couples with domestic violence. *Journal of Marital and Family Therapy*, 1999, Vol.25, Iss.3: 313-324
- BEEMAN, S. K. 2001. Critical issues in research on social networks and social support of children exposed to domestic violence. In Graham-Berman, S. A., Edleson, J. L. (Eds.), *Domestic Violence in the Life of Children*. 2001 (pp. 219-234). Washington, DC: American Psychological Association.
- 3. BOSA, M. 2011. The place of feminism in the social work tradition. [online]. *Gender, equal opportunities, research*. Vol.12, Issue 1/2011 [20.04.2022] Available from: The Place of Feminism in Social Work Tradition (genderonline.cz),
- 4. DOMENECH DEL RIO I, SIRVENT GAR-CIA DEL VALLE E. 2016. Influence of Intimate Partner Violence Severity on the Help-Seeking Strategies of Female Victims and the Influence of Social Reactions to Violence Disclosure on the Process of Leaving a Violent Relationship. *Journal of*

- *Interpersonal Violence* 2016:1-22. DOI: 10.1177/0886260516676473
- GOODMAN LA, BENNET L, DUTTON MA. 1999. Obstacles to domestic violence victims' cooperation with the criminal prosecution of their abusers: The role of social support. Violence and Victims 14(4):427-444. Springer Publishing. DOI: 10.1891/0886-6708.14.4.427.
- 6. BURAJOVA, B., CINCUROVA, S. 2016. Situation of children witnesses of domestic violence, challenges and possibilities of intervention. Guide to the professional seminar for pedagogical and professional staff of schools. [online] Institute for Labour and Family Research. Coordination and Methodology Centre for Gender-based and Domestic Violence. [20.04.2022]. Available from: https://zastavmenasilie.gov.sk/resources/data/Situacia-deti-svedkov-domaceho-nasilia_vyzvy-a-moznosti-intervencie.pdf
- JABLONICKA, ZEZULOVA, J. (Ed.), ME-SOCHORITISOVA, A. (Ed.), et al. 2014. Quality standards for gender education background and challenges. Bratislava.
- JANEBOVA, R. 2014. Feminist theories of social work. Hradec Králové: Gaudeamus. 78s. ISBN 978-80-7435-405-2
- JUHASOVA, A., PAVELOVA, L., MORA-VKOVA, S. Women's strategies in the context of the dynamics of violence in partner relationships. Logos Polytechnikos, Jihlava: Vysoká škola polytechnická Jihlava, 12 (2): 182-195. ISSN 2464-7551.
- KELLY, L., DUBOIS, L. 2008. Combating violence against women: minimum standards for support services, report prepared for the Council of Europe/Gender Equality and Anti-Trafficking Division/Directorate General of Human Rights and Legal Affairs. Strasbourg. [online] Strasbourg: Council of Europe. [22.11.2021] Available from: https://www.coe.int/t/dg2/equality/domesticviolencecampaign/
- KELLY, L., DUBOIS, L. 2008. Setting the standard: A study on and proposals for minimum standards for violence against support services.[online] Strasbourg: Council of Europe.[22.11.2021]Available from: https:// rm.coe.int/1680096e49

- 12. LIBAKOVA, L., BOSA, M. 2018. *The labour market and women experiencing violence in couple relationships*. Prešov: Publishing house of the University of Prešov, 87s. ISBN 978-80-555-1942-5.
- MALIKOVA, D. 2019. Ending a violent relationship and the risks of leaving an abusive partner. Logos Polytechnikos, Jihlava: Vysoká škola polytechnická Jihlava, 10 (2): 120-130. ISSN 2464-7551.
- 14. MESOCHORITISOVA, A. 2015. Draft quality standards for education on violence against women. Continuing education in the prevention and elimination of violence against women. [online] Bratislava: Institute for Labour and Family Research. [12.10.2021]Available from: https://www.gender.gov.sk/zastavmenasilie/files/2016/02/Navrh-standardov-kvality-vzdelavania-v-oblasti-nasilia-pachane-ho-na-zenach-1.pdf
- OCENASOVA, Z., MICHALIK, P. 2017. Sexual violence against women - a report from representative research. Institute for Labour and Family Research. https://www. zastavmenasilie.gov.sk/resources/data/Sexualne-nasilie-na-zenach_sprava-z-reprezentativneho-vyskumu.pdf
- ONDRUSKOVA, E., SMITKOVA, H. 2020. Support and assistance for women experiencing violence in couple relationships. A community perspective. In.: Baránkvoá, M. (Ed.) 2020. Community psychology in Slovakia 2020. Bratislava: UK, pp.103-120, ISBN 978-80-223-5034-1.
- 17. ONDRUSKOVA, E. et al. 2020. Violence against women in intimate partner relationships I. Theories, social and legal context, statistics. Nitra. ISBN 978-80-973648-1-6.
- 18. PRUZINSKA, J. et al. 2020. Violence against women in intimate partner relationships II. Help and support. Nitra: REA. 88 p., ISBN 987-80-973648-2-3.
- 19. SUMMARY REPORT ON THE STATE OF GENDER EQUALITY IN SLOVA-KIA IN 2017. [online]. Slovak Ministry of Labour and Social Affairs. [10.4.2022] Available from: https://www.gender.gov.sk/suhrnna-sprava-o-rodovej-rovnosti-za-rok-2017/

- 20. WILLING, C. (2013). *Introducing qualitative research in psychology*. Third edition. Open University Press. 264p. ISBN 0335244491
- 21. WORLD HEALTH ORGANISATION. 2012. Understanding and addressing violence against women: Intimate partner violence. [online]Geneva: WHO. [28.10.2021]. Available from: https://apps.who.int/iris/bitstream/handle/10665/77432/WHO_RHR_12.36_eng.pdf?sequence=1

Marketplaces as Drivers of Urbanization and alternative Governance Spaces: the Case of Batkhela Bazaar, Pakistan

M. Salman Khan (Muhammad Salman Khan)¹, A. Naz (Arab Naz)²

¹Human Geography, Social Science and Public Policy, Department of Geography, Kings College London, UK

Original Article

Issue: 5

E-mail address:

arab_naz@yahoo.com

Reprint address:

Arab Naz University of Malakand Chakdara, Khyber Pakhtunkhwa Pakistan

Source: Clinical Social Work and Health Intervention Volume: 15

Pages: 29 – 40 Cited references: 34

Reviewers:

Jirina Kafkova MSF, Freetown, SL Roberto Cauda Institute of Infectious Diseases, Catholic University of the Sacred Heart, Rome, IT

Keywords:

Marketplaces. Urbanization. Gavernance Spaces.

Publisher:

International Society of Applied Preventive Medicine i-gap

CSWHI 2024; 15(5): 29 - 40; DOI: 10.22359/cswhi_15_5_05 © Clinical Social Work and Health Intervention

Abstract:

Urbanization in Pakistan is constantly on the rise, both in the form of migration from rural to urban areas and emergence of new urban spaces amid the hart of once agrarian village economies. This paper seeks to examine the latter phenomenon and argues that lack of state's capacity gives rise to new political spaces in these rapidly developing towns in Pakistan. The central premise of this argument is that marketplaces are one such space that has significant implications for local political economy. On one hand, this economic change has implications for traditional political structures based on political exclusivity, while on the other hand, due to increased significance of marketplaces for local governance, the patterns of elite interaction and local administration have also evolved that reflect change in the local governance structure. While reflecting on my case-study of Batkhela bazaar, I highlight

² Faculty of Social Sciences University of Malakand, Chakdara, Khyber Pakhtunkhwa, PK

some of the political and governance challenges which these rapidly growing, unplanned urban spaces might present in the future. In doing so, this paper contributes to the literature on transforming rural economies and emerging urban spaces in the form of small towns in Pakistan.

Abstract

Urbanization in Pakistan is constantly on the rise, both in the form of migration from rural to urban areas and emergence of new urban spaces amid the hart of once agrarian village economies. This paper seeks to examine the latter phenomenon and argues that lack of state's capacity gives rise to new political spaces in these rapidly developing towns in Pakistan. The central premise of this argument is that marketplaces are one such space that has significant implications for local political economy. On one hand, this economic change has implications for traditional political structures based on political exclusivity, while on the other hand, due to increased significance of marketplaces for local governance, the patterns of elite interaction and local administration have also evolved that reflect change in the local governance structure. While reflecting on my case-study of Batkhela bazaar, I highlight some of the political and governance challenges which these rapidly growing, unplanned urban spaces might present in the future. In doing so, this paper contributes to the literature on transforming rural economies and emerging urban spaces in the form of small towns in Pakistan.

Introduction

This paper views emerging urban spaces in the heart of rural-agrarian economy as alternative governance arenas and explores their implications for local governance structure and citizen's access to state institutions. The contribution of this study to the literature is that it empirically traces the development of urban centre in the heart of once agrarian economy. In addition, the major driver of this evolution is an informal marketplace which explains how 'the urbanization of everybody in the socioeconomic sense is well on the way if not almost complete' (Qadeer, 2014:21). This study also found that rising urbanization, as an outcome of economically dynamic marketplace presents new governance challenges, which, if not addressed,

will contribute to the already poor state of governance in the region.

In what follows, section one explores the role of small towns, developed as a consequence of marketplace evolution and the implications of their development for political participation and local governance (or structural transformation). section 3 outlines the methodology along with empirical settings while section four presents empirical findings. Section five concludes with the way forward.

Market towns, urbanization and alternative governance spaces in Pakistan

Marketplaces are embedded within their local governance structure (Monteith, 2015), and through their linkages with multiple spheres of governance they significantly influence local governance processes (Hummely, 2017; Polese et al, 2017). They are not simply the 'subject of governance', due to their fluid power dynamics and influence over political sphere (Lindell, 2010: 1887-8). Pertenance of marketplaces to urban development and governance can be understood from the fact that some scholar regards marketplaces as 'urban development strategy (Janssens and Sezers, 2013:169). This section explores the role of marketplaces not only as the drivers of urbanization, but also looks at the role of these rising urban spaces as alternative governance arenas setting in motion the processes of political inclusion. In doing so, it largely relies on the literature on urbanization and marketplace in Pakistan respectively.

Urbanization in Pakistan is an outcome of two main trends. increased population of the people living in urban towns, metropolitan cities, municipalities. The structure of this transformation is well known. The second process of urbanization is unrecognized and is working its way largely unnoticed. Qadeer (1999) argues that it is building up the momentum for social change that equals, or perhaps accedes, the much discussed urban crises. this is urban-

ization through the densification of rural areas under the population pressure (Qadeer, 1999: 1197). Densification of many such rural areas, coupled with economic developments have resulted in the evolution of villages to urban spaces in both senses of the term. The development and expansion of villages into sizable towns can be observed not only at the peripheries of major cities in Pakistan, or on the highways connecting these major cities (Qadeer, 1999; 2014), but all the way up to the remote districts of Pakistan.¹

The spatial and demographic dimensions of this urbanization in Pakistan are extensively explored in the literature, however, the governance dimension requires a systematic theoretical treatment. The influence of these urbanization processes, on the institutional arrangement of local governance is explained by a complex of factors that include, economic change, changing power relations (social structures), and increase in the choices of means to access state institutions. rising urbanization necessitates new modes of citizen's engagement with state institutions, and increase civil society activities in transforming landscapes. In Pakistan, such organizations in village economies are either non-existent, scarce, or inherently weak (Mohmand, 2008). However, in urban settings, expressions of self-organized arrangements and citizen participation are not an exception (Beal, 1995; 1997). It is not to say that in urban settings class differences and the structures of domination are absent, and participation is inclusive in its ideal sense, but certainly, urbanization offers more opportunities for better life, and comparatively greater chances for upward mobility (Beall, 1995:439-42). re-configuration of the social and political space is also underpinned by various urbanization processes, and unlike village economies where kin and clan networks form the basis of informal support, in the urban economy, neighborhood- based ties, and interest-based networks are a significant source of support.

Writing 18 years ago, Qadeer (1999:1203) notes, effects of urbanization in Pakistan are yet to translate into a mechanism for creating responsive local governance institutions. It is mainly due to hierarchical social structures, and clan-based politics which prevent the development of inclusive local governance spaces. In

unison, he notes that urbanization creates the need for more impersonal forms of local governance arrangements (p.1201). It is argued here, although gradually and quietly, but the process of change is well on its way in Pakistan. evolution of economic structures and development of market towns is also leading to the re-structuring of social structures. People's interactions are extended from class-cast boundaries to occupational and professional ties. The literature on evolution of marketplaces in Pakistan and their transformational effects offers ample evidence in this connection (Jan, 2017; Chaudri, 1999; Ahmed, 1980). Evolution of these new socioeconomic spaces have not only reduced the hold of class-cast boundaries, but have replaced traditional patterns of dependence of dominated on the dominant classes with more complex patterns of interdependencies.

Two distinct but intertwined mechanisms structure this process of transformation. receding reliance on agricultural labour by the poor (Arif et al, 2002), and incentives for the traditional landed class to engage in businesses due to land fragmentation, low productivity of agricultural land, and relatively attractive opportunities in the business sector. Land- fragmentation makes it difficult for a single family or clan to dominate the rest of the population (Mohmand and Ghazdar, 2007:7), whilst development of market towns with related economic opportunities create incentives for the poor to break-away from the traditional patron-client relation characteristic of village/agrarian economy (Martin, 2015:423). Hassan (2009:xvi) regards the development of market (mandi) towns as one of the significant factors that freed the traditional landless classes from the domination of the landed classes. The lower casts/classes were able to setup businesses in these market towns and were able to escape the exploitative relations in the feudal village structures. Similarly, Chaudhri (1999) demonstrates how the Kammis of Misalpur near the textile-producing city of Faisalabad left their traditional occupations to work in the textile industry and latter to set up their own power-looms and even got educated and acquired employments in the government offices (Martin, 2015:423). Junaid (2009) demonstrates how Afghan refugees in Peshawar, due to their

entrepreneurial success achieve upward social mobility. Migration to major cities in Pakistan and oversees have also led to the economic change from reliance on agriculture to development of small businesses in the informal sector (Ahmed, 1981; Jan, 2014; among others).

Marketplaces are the drivers of urbanization. Specially their location at the centres of districts increase their economic and political significance (Qadeer, 2000:1593). Evolution of these market towns have also impacted the value of land, as a consequence, traditional land-owners have also stepped into the field of business. Ahmed (1980:297-302) in his study of a small market town in Mohmand agency in Pakistan found that members of the traditional landed class were involved in businesses in as early as late 1970s. However, they preferred to run their businesses by hiring a member of the occupational casts. Similarly, Lindholm (1982: chapter4) in his anthropology of Swat observed that members of the dominant landed class tended to trade in only luxury goods, and would charge only the lower classes for their goods and services. the agrarian society was stratified not only between landed and landless classes, but the latter were further classified into various occupational classes. With the development of these market places, as Jan (2010; 2014) observes, a new occupational category of business owner emerged which gradually subsumed all the other occupational classes. Javed (2015) in his study of marketplaces in the city of Lahore, and Nankana sahib notes that these marketplaces are numerically dominated by individuals belonging to traditional landless classes. However, he observes developing patterns of cooperation, underpinned by the social structure of the marketplace. Due to increase economic and political power of these spaces, business owners, traditionally excluded from the political sphere are now significant actors in both national and local politics at least in some regions (Javed, 2015; Jan, 2014; Khan, 2017). Thus marketplaces, as Janssens and Sezers (2013:169-70) note, "are flexible spatial and temporal organizations that provide vivid and inclusive public spaces".

The literature on urbanization and traders involvement in democratic politics in Pakistan largely agree on their transformative effects on both national and local politics (Javed, 2017). Increased urbanization and involvement of traders in local politics have significant implications for local governance, the processes of inclusion and their implications are significantly understudied, especially in the case of small towns which host 27% of the total urban population of the country. From literature on large urban centres, We know that at local level, traders influence the state through negotiating taxes (Ahmed, 2010), or influencing spatial and town planning (Zaidi, 2015). in addition, their direct involvement in local politics is also documented in the literature (Javed, 2017). In the small towns, where marketplaces serve as drivers of urbanization, local landed elite also diversify into undocumented trade to supplement their land-income (Javed, 2017). writing in late 1990s, about traders influence on politics, Whilder (1999:131) noted: 'Traders are now on the rise. Every alley, every bazaar is now organized in the shape of some association or the other. These traders have 'shutter power'. If a 2000 worker factory is closed by workers in a rural area, it has no effect. But say the shopkeepers of Anarkali close their shutters for two hours, it will have a much bigger effect in the city.... In sum, Bazaar's economy is the underlying factors in what Javed (2017) calls foundational changes in urban political economy. Javed (2017) notes their transformative potential in eroding the power of traditional landed elite, but argue that bazaars create new intermediary classes that reproduce patronage structures. Nevertheless, this suggest the role of bazaars as alternative governance spaces with implications for local class relations, access to state institutions, and their influence over service provision by state institutions.

This suggests that economic change from agrarian to market economy and development and expansion of market towns generate alternative governance spaces. These spaces, it is argued, generate opportunities for cooperation among what Calhoon (2010) calls 'differentiated publics'. These markets are not mere expressions of change economic order in the heart of once agrarian economy. Instead their evolution as a space populated by counter publics to a gradual immersion in the mainstream local political order explains their potential for

MALAKAND PROTECTED AREA

Kilmetres 5

WER DIR DISTR

Planter State

WER DIR DISTR

Planter State

WER DIR DISTR

Map 1 Malakand Protected Area

Source: Jan 2010

change as an alternative governance space. Perhaps, for this reason, Jan (2017:1) in his study of changing rural labour relation in canal colonies of Punjab argues, It is less helpful if Marxist interpretations of class structures are employed as a soul theoretical reference to explain the context of socioeconomic relations within a specific governance context. Marketplaces in Pakistan, in this process of transformation from agrarian to market economy, and as engines of urbanization have largely remained unnoticed by policy-makers and academics (with few exceptions cited above). The rest of this study empirically explores the role of Batkhela bazaar in urbanization, and its implications for local governance.

Methodology and empirical settings

Batkhela is the Swat Rani zai subdivision of Malakand district (see map1). Batkhela bazaar, a vibrant market town in the heart of rural land-scape of district Malakand is the only officially designated urban area in the entire district. The market is situated on main Mardan-Chitral-Swat road that connects the districts of Swat and beyond, Dir and beyond, and Bonair, to Peshawar (the capital city of the province of Khyber Pa-

khtunkhwa and Islamabad (national capital). the market, locally known as Batkhela bazaar is over 3 KM long, situated along both sides of the main road (see map two). Batkhela is the major centre of retail, and wholesale of goods and services in the district besides district hospital, district secretariat, courts, post office, passport office, and national database and registration centre (NA-DRA), the bazaar hosts branches of 11 private banks, franchises of private telecommunication companies, offices of private courier services, and a number of private hospitals, evolution of Batkhela bazaar, and a number of smaller market towns in the district suggests the quite transformation from village/agrarian economy to urban economy. Currently, informal trade including retail, services, and transport together offers employment to more than 60% of the total labour force in the district (Jan, 2010:63). These statistics apply only to mail population of the district because women are excluded from trading in the markets due to strict obligation of Parda under the Pakhtun culture.

Malakand district or Malakand protected area has a total population of 720295. (PBS, 2017). 98.2% of the population speaks Pashto

Map 2 Bathela Bazaar



Source: Google Maps

whilst 99.6 % of the people practice sunni islam (Jan and Raza, 2015:59). Under special constitutional provisions trade is exempted from taxes, whereas no land revenue is generated by any tier of government from the district (Khan, 2017). The district stands 11th out of 25 districts in the province in terms of the size of its urban population. According to provisional summary of 2017 census, total urban population in the province is 18%, the lowest of all four provinces, whereas urban population of district Malakand is 11% with 8522 urban households. These latter statistics are only for the Batkhela town which is the only officially recognize urban area in the district. In terms of population density criterion, the entire district can be classified as urban due to its population density of () per SQKM. Nevertheless, Batkhela due to its historic economic and political significance is the focus of this study. Its significance lies in its remarkable economic transformation from a cluster of a few shops in 1950s to a vibrant marketplace comprising 5500 fixed shops at present (Khan, 2017).

To understand this transformation and its implications for local governance structure, this study relies on existing literature, census data (table1) and semi-structured interviews with traders, local political actors, and government officials in the district offices. The fieldwork

for this study was conducted in May-September 2016, 80semi-structured qualitative interviews were conducted. the interviews were analysed with the help of Microsoft access (Hans, 2008) using flexible thematic analysis (Broun and Clark, 2006:80). The research was conducted for author's PHD which investigated the role of marketplace in generating social capital and its implications for evolving governance processes in the Malakand region. in this chapter, the findings related to the role of bazaar in the process of economic change and its evolution as an alternative governance space are presented. to understand this process, various processes such as, the size of market town, land-ownership in the market, access to state institutions, involvement of political parties in the marketplace, and evolution of traders association are compared between the year 1970 and 2016. This method of presentation clearly demonstrates the process of evolution of marketplace and its implications for local governance structure.

The empirical context of Malakand region makes this evolution more interesting from governance perspective to explicate the role of Batkhela bazaar as an evolving governance space. Besides legal settings that underpins the interrelation between formal governance structure and Batkhela bazaar (Khan, 2017). the history

of class relations between landed and landless classes, institutionalization of these exploitative class relation in pre- 1970s (Jan, 2010), and contiguous evolution of marketplace with changes in the formal governance structure makes the case of bazaar as an emerging field of power and its embeddedness in the wider political space. Jan (2010:93) offers a detailed historical account of these class relations. building on one of the sections of that account, he provides a historical account of class-struggle between the landed aristocracy of the district and traditional landed class, mainly migrants from surrounding districts who predominantly constituted the traders community. these classes categorize each others as Khanan (resident land-owning class), and 'Ghariban' or 'raghali khalak' (the poor and migrents respectively). the latter category, along with resident occupational classes were denied the right to citizenship up till 1969, and thus denied of any rights to participate in the governance affairs, purchase land, or shop (Jan and Raza, 2015:56). Business in the market offered a major ecological niche and a hope of liberation from exploitative relations in the traditional agrarian economic system.

This exclusion was the outcome of agrarian economy where land-owning class dominated social and political institutions, and this domination was backed by state's coercive power in the form of a quasi-judicial council called Jirga. Jirga, the council of elders rooted in the local cultural norms, was the only medium of interaction with state institutions, and members of the landed class due to their land-ownership were only entitled to its membership. Business owners in the market developed trader's association for not only resolving internal problems of the bazaar, but also to represent them in their interactions with state institutions. Jan (2010) views it as a separate leadership category emerging out of evolving dynamics of the bazaar. The findings of the present study suggest that leadership in the bazaar is no longer the concern of the market traders alone, but it is deeply rooted in the local political structure. doubtless, introduction of participatory politics, replacement of jirga with regular court system, and lately introduction of local government system in the district created opportunities for inclusion. Jan and Raza

(2015: 60-67) attribute this change to the class struggle of the landless against the landed class. that movement certainly played a significant role, but the movement was practically disbanded after the introduction of political reforms in 1970s and the disappointment of its leader with Pakistan People's Party, the only supporter of the trader's struggle for inclusion. A more significant role is played by thriving economy of the marketplace that helps transforming the social and political space through structuring the agent's habitus which in turn structure the governance structure (Bourdieu and Wacquant, 1992; Lizarto, 2004).

Findings and discussion

This section presents findings on the outcomes of rising urbanization for participation and inclusion due to evolution of economically dynamic Batkhela bazaar. the findings are schematically presented in two sub-sections. The first section ties the rise of urbanization to economically thriving Batkhela bazaar. the second section demonstrates some key economic and political changes within the socioeconomic structure of the marketplace which suggests that Batkhela bazaar constitutes a significant governance arena facilitating inclusion in the wider governance structure.

Evolution of Batkhela bazaar and consequent urbanization

As Noted in the previous section, Batkhela bazaar evolved from a cluster of a few shops in the centre of village, to a cluster of 5500 shops. It traverses through three union councils of Batkhela with its edges penetrating into the union councils of surrounding villages namely Alladand and Piran (see map2). Batkhela bazaar, as a trading centre began to thrive in the late 1960 and early 1970s. originally it developed along the roadside in what constitutes the present day union council of middle batkhela. some of the businesses due to density of infrastructure and related traffic problems have began to shift to more open spaces along the main road in the union council of Aladand or a link road that connect the union council of Khar with Batkhela. Originally the migrants and members of the traditional landless community established their businesses in the bazaar which was followed by settlement of migrants in and around Batkhela.

The bazaar serves as a major employment generation machine in the district, and provides employment to approximately 25000 households in and around the district. the market hosts over 5500 fixed shops, 1500 rickshaws, 200 street vendors and 80 cart pushers for porting goods from one shop to another in the bazaar. In addition, 57% of the business owners employ people other than their family ranging from one employee to 29 employees (which are rare). These findings do not include employees of government facilities, private banks, telecommunication companies, schools in the private sector, and private clinics that operate in the batkhela bazaar, evolution of economic activities in the bazaar, increase settlement of individual households in and around batkhela resulted in the rise of urban population in the district, as a consequence, an entirely rural district in 1961 now hosts 10.5% urban population (see table1).

Table 1 Contiguous evolution of bazaar and urban population in Malakand

Contiguous Evolution of Batkhela Bazaar and Urban Population			
Year	Urban population	Number of Shops in the bazaar	
1961	_	20	
2017	68,200	5500	

Batkhela bazaar as a driver of change in the local political economy

Besides its role as an engine of urbanization, Batkhela bazaar has evolved from the margins of local political economy to occupy a centre place within it. This evolution is evident in the changing land-ownership patterns, development of more cross-cutting ties between the traditional landed and landless classes, greater involvement of political parties and actors in the internal dynamics of the bazaar, and Bazaar's increased political embeddedness. Empirical evidence suggest the evolving role of bazaar as an alternative governance space with implications for not only local class relations, but also generat-

ing new patterns of interdependencies between local administration, political sphere, and trader's community. As noted in the previous section, bazaar had generated a separate leadership category in the form of trader's association, however, with the evolution of the bazaar and its increased role in local politics, the configuration of the trader's association and its role in the local politics have evolved considerably. Table 2 summarizes the evolving qualitative and quantitative dimensions of the bazaar and its implications for local political structure. These findings clearly demonstrate the role of bazaar as an alternative governance space generating possibilities for inclusivity, but also as a field of power in a political space traditionally occupied by state authorities and local elite.

These findings suggest that marketplaces are not merely the places for buying and selling as the local state authorities often consider them to be, instead, they have significant implications for local power relations, and by extension for urbanization and local governance (Janssens and Sezers, 2013). The case of batkhela bazaar demonstrates their role in creating upward social mobility and their transformative effect on class relations. Changing patterns of land-ownership, entry of landed class in local businesses to supplement their land income, and increased utility of trader's association for local political actors are the factors explicating the role of Batkhela bazaar in increase political tolerance and inclusivity. Local electoral politics in the Malakand district is still dominated by local landed elite, however, bazaar is an important source of power for these elected representatives, especially in their interactions with local administration (Khan, 2017). Shrinking land-holding patterns, and increase land-ownership by the trader's community inhibits a single party or actor to dominate bazaar politics. For this reason, political actors form alliances for supporting candidates for the leadership of the trader's association. Due to Increased size of the bazaar, and diverse political orientations of the traders. it is unlikely for a single political party to dominate bazaar politics like the past. At the same time, due to its centrality for local politics, political actors cannot leave the field of bazaar politics for their competitors to dominate. Thus,

Table 2 Bazaar as an alternative governance space: Evolving qualitative and quantitative dimensions

Evolving dimensions of Batkhela bazaar	1961	2016
Number of shops	20	5500
Number of business owners from landless class	95%	60%
Number of business owners from landed class	5%	35-40%
Land-ownership by traders of the landless class	0%	35%
Channels of access to state institutions	Elders of landed elite only	Through personal ties, traders association or political parties
Political inclusion of trad- er's community	A marginal element in local politics	A significant element in local politics
The role of bazaar in local economy	negligible	Major centre of economic activities
Business owners ties to landed elite	Landlord-tenant; patron- cliant	Friendship, political, and economic ties, along with landlord-tenant ties.
Followers of political parties in the bazaar	Single party (Pakistan Peoples Party)	Six parties
Leadership of the trader's association (landed or landless?)	Landless class	A mix of members from landless and landed classes
Political affiliation of the leadership of trader's asssociation	Single party	5 political parties

Source: interview data and field notes.

alignment of interests, especially cooperative or conflictive relations with local administration underpins alliances of political actors for collectively backing their candidates in the elections of trader's association.

Interactions within the political sphere are not alone in this power equation, the influence of bazaar as a field of power also structures relation between local administration and political actors. It is not to say that bazaar as a field of pow-

er has evolved in isolation to institutional changes. Rather it is embedded in the wider political processes, and any change in these processes has implications for Bazaar's capacity to influence local governance structure. cognizant of this role of Batkhela bazaar, the newly appointed district administrator (district commissioner) attempts to create goodwill among local political leaders including leaders of the trader's association to avoid disruption to the local order of the district.

Table 3 Increased influence of bazaar over interactions between elected and appointed spheres of government

Pre-1970 and 2016 compared	Political Field	Bureaucratic field	Pattern of interaction between the two	
Before 1970s	Land-holding major determinant of political power; less concern for votes; no decentralized local government	Administrator (political agent) soul representative of central government; less prone to political pressures; interaction with local elite only	Paying allowances to landlords for facilitat- ing governance (state policy)	
In 2016	More followers and better rapport with administration major sources of power; Votes and proximity to voters a major concern; decentralized local governments; Representative of provincial government; prone to political pressures; interactions not limited to landed elite		Patronage relations with local political elite (informal gov- ernance strategy of officials)	
Bazaar in the local governance equation be- fore 1970s	Exclusion from political Limited significance; affairs little consideration		Bureaucracy-local elite nexus working to the detriment of trad- er's community	
Bazaar in local governance equation in 2016	Inclusion in political affairs even remotely related to bazaar related to bazaar sociation with		Local political elite- trader's association nexus (sometimes) to the detriment of local administration's in- terest	

Source: interview data and field notes

the elections of trader's association in 2009-10, 2013 and 2017 respectively has repeatedly demonstrated this attitude of the local bureaucracy. comparing increased political significance of Batkhela bazaar with other bazaars in the district supports Hummely's (2017) argument that greater influence (and disruptive potential) of the trader's association incentivizes the administration to facilitate collective organization of the bazaar. Nonetheless, in the evolved institutional dynamics of Malakand district (and region more broadly), Batkhela bazaar has emerged as an integral element of the local governance. this recognition is absent in the formal governance structure, but informal governance strategies of local administration attest to this point. Table3 summarizes this finding before concluding this chapter.

Conclusion

By situating Batkhela bazaar at the heart of urbanization processes in district Malakand and its transformative potentials for local governance, this chapter has demonstrated how marketplaces as an alternative governance spaces are re-structuring the local political economy of small towns in Pakistan. Small towns in Pakistan, like Batkhela, lack any clear policy focus by the government in terms of their urbanization potential. An outcome of this absence of policy focus is the pragmatic strategies of local administration to deal with governance challenges arising from their increased political and economic embeddedness. Bazaar economy is not only reducing reliance on the agricultural economy in the country, it also plays an important role in causing political inclusion and democratization at both national and local level (Javed, 2017). However, associated challenges and opportunities ahead, for service delivery cannot be left alone to the pragmatism of local bureaucracy. Instead, it is the time to develop a clear policy focus on the role of these small towns in the rapidly urbanizing Pakistan.

References

- 1. AHMAD, N. and ANJUM, G.A. 2012. Legal and institutional perplexities hampering the implementation of urban development plans in Pakistan. Cities, 29(4), 271-277
- 2. AHMED, A. S. (1980). Pukhtun Economy and Society: Traditional Structure and Economic Development in a Tribal Society. London: Routledge and Kegan Paul.
- 3. AHMED, A.S. (1981). The Arab connection: Emergent models of social structure among Pakistani tribesmen, *Asian Affairs*, 12(2), 167-172.
- 4. ARIF, GM, NAZLI, H, & HAQ, R. 2000. Rural non-agricultural employment and poverty in Pakistan. *The Pakistan Development Review*, 39 (4 Part II), 1089-1110.

- 5. BEAL, J. 1995. Social security and social networks among the urban poor in Pakistan. *Habitat International*, 19 (4), 427-455.
- 6. BEALL, J., 1997. POLICY ARENA: Social capital in waste—a solid investment?. *Journal of International Development*, 9 (7), pp.951-961.
- 7. BOURDIEU, P. and WACQUANT, L.J. (1992). An invitation to reflexive sociology. University of Chicago press.
- 8. BRAUN, V & CLARKE, V. 2006. Using thematic analysis in psychology. *Qualitative Research in Psychology*, 3 (2), 77-101.
- 9. CHAUDHARY, M.A. 1999. *Justice and practice: A legal ethnography of a Pakistani Punjabi village*. New York: Oxford University Press.
- 10. HAHN, C. 2008. *Doing Qualitative Research using your computer: A practical guide.* SAGE Publications.
- 11. HANS, Ch. 2008. *Doing Qualitative Research using your computer: a practical guide.* Sage Publications.
- 12. HASAN, A. and RAZA, M. 2009. Migration and small towns in Pakistan. Working paper no.15 from series on rural-urban interaction and livelihood strategies. London: *Interna*tional Institute for Environment and Development.
- 13. HASSAN, A & RAZA, M. 2009. Migration and small towns in Pakistan. Working paper no.15, *Working paper series on rural-urban interaction, and livelihood strategies*.
- HUMMELY, C. 2016. Disobedient markets: Street vendors, state enforcement, and state intervention in collective action. *Compara-tive Politics*, 50(11), 1,524-1,555.
- 15. HUMMELY, C. 2017. Disobedient markets: street vendors, state enforcement, and state intervention in collective action. *Comparative Politics*, 50 (11), 1524-1555.
- JAN, M. A. 2010. Contested and contextual identities: Ethnicity, religion and identity among the Pakhtuns of Malakand Pakistan. PhD Thesis. Department of Politics, University of York.
- 17. JAN, M.A. 2014. The emergence and Transformation of Batkhela (Malakand) Bazaar: ethnic entrepreneurship, social networks and change in disadvantageous society. *PSSP*

- working paper, 21, Washington, D.C., International food Policy Research Institute.
- 18. JAN, M.A. 2017. 'Ideal types' and the diversity of commerce: landlords and labourer in Rural Punjab. The future of food and challenges for agriculture in 21st century, working paper no, 95, . retreaved on September 1, from www.elikadura21.eus/wp-content/uploads/2017/05/95- Muhammad-Ali-Jan. pdfApril
- 19. JAN, M.A. and RAZA, SS. 2015. Socio-economic and political change in the tribal society: Awami-Khel's struggle for equality, emancipation and honor in Batkhela, Malakand. Pakistan *Journal of Historical Society*, 63(3), pp. 55-73.
- 20. JAN, M.A. and ZAIDI, S.S.R. 2015. Socio-economic and political change in the tribal society: AwamiQuarterly Khel's struggle for equality, emancipation and honour in Batkhela, Malakand. *Quarterly Journal of the Pakistan historical Society*, XIII (4), 55-73.
- 21. JAVED, U., 2017. PROFIT, PROTEST AND POWER Bazaar politics in urban Pakistan. *Routledge Handbook of Contemporary Pakistan*, p.135
- 22. JUNAID, M, & NOCKER, N. 2009. Traveling, trading and narratives of entrepreneurial sellers of Afghan migrants in Pakistan. The fourth annual joint University of Liverpool management school and Keele University school of public policy and management symposium on current practices in ethnographic research in the social and management sciences. 23rd-25th August.
- 23. KHAN, M.S. 2017. Legalizing informality: the case of Batkhela Bazaar, Malakand, Pakistan. in eds: Horodnic, I., Rodgers, P., Williams, C. and Momtazian, L. eds., (2017). The Informal Economy: Exploring Drivers and Practices. London: Routledge.
- 24. LINDELL, I. 2008. The multiple sites of urban governance: Insights from an African city. *Urban Studies*, 45(9), pp. 1,879-1,901.
- 25. LINDHOLM, C. 1982. Generosity and Jealousy: the Swat Pukhtuns of Northern Pakistan. New York: Columbia University Press.
- 26. LIZARDO, O. 2004. The cognitive origins of Bourdieu's Habitus. *Journal for the Theo*-

- ry of Social Behaviour, 34 (4),375-401.
- 27. MARTIN, N. 2015. The dark side of political society: patronage and the reproduction of social inequality. *Journal of Agrarian Change*, 14 (3), 419-434.
- 28. MOHMAND, S. K, & GHAZDAR, H. 2007. Social structures in Rural Pakistan. Paper prepared under TA4395-pak, determinents and drivers of poverty reduction and ADBs contribution in rural Pakistan, Islamabad: Asian Development Bank.
- 29. MONTEITH, W. 2015. A "Market for the People"? Changing structures of governance and participation in a Ugandan marketplace. *Development*, 58(1), pp. 58–64.
- POLESE, A., MORRIS, J. and REKHVI-ASHVILI, L. 2017. Informal governance in urban spaces: Power, negotiation and resistance among Georgian street vendors. *Geog*raphy Research Forum, 36, pp. 15-32.
- 31. QADEER, M.A. 1999. 'Urbanization of everybody', institutional imperatives and social transformation in Pakistan. *The Pakistan Development Review*, 38 (4 part II), 1193-1210.
- 32. QADEER, M.A. 2000. Ruralopolises:the spatial organization and residential land economy of high-density rural regions in South Asia. *Urban Studies*, 37 (9), 1583-1603.
- 33. QADEER, M.A. 2014. Do's and don'ts of urban policies in Pakistan. in ed. Kugelman, M. Pakistan runaway urbanization: what can be done? Asia Program, Woodrow Wilson international Centre for Scholars: Washington DC, pp. 21-44.
- 34. WILDER, A.R. (1999). The Pakistani Voter: Electoral Politics and Voter Behaviour in the Punjab. Oxford: Oxford University

The Path to eliminating the marginalization of the Roma Community

L. Leskova (Lydia Leskova)¹, D. Bachyncova Giertliova (Daniela Bachyncova Giertliova)²

Original Article

¹Catholic University in Ružomberok, Faculty of Theology Kosice, SK

² St. Elisabeth University of Health and Social Work in Bratislava, SK

E-mail address:

lydia.leskova@ku.sk

Reprint address:

Lydia Leskova Catholic University in Ruzomberok Faculty of Theology Kosice Slovakia

Source: Clinical Social Work and Health Intervention Volume: 15 Issue: 5

Pages: 41 – 48 Cited references: 27

Reviewers:

Jirina Kafkova MSF, Freetown, SL Roberto Cauda Institute of Infectious Diseases, Catholic University of the Sacred Heart, Rome, IT

Keywords:

Roma Community. Marginalization. Eliminathing.

Publisher:

International Society of Applied Preventive Medicine i-gap

CSWHI 2024; 15(5): 41 – 48; DOI: 10.22359/cswhi_15_5_06 © Clinical Social Work and Health Intervention

Abstract:

Objective: The paper examines selected indicators declaring the validity of the implementation of field social work in marginalized communities.

Methods: Selection of conceptual documents related to field social work with marginalized groups, analysis of secondary quantitative data using descriptive statistics and systematization of qualitative data.

Results: The results show that the Roma community is experiencing marginalization as a result of which countries, not excluding Slovakia, are adopting strategies to reduce the gap between the minority and the majority. One of the implemented strategies is the National Project focused on field social work, which contributes to the elimination of social exclusion through competently equipped workers.

Conclusion: The article concludes that field social work is one of the possibilities of working with marginalized communities, which is of fundamental importance for alleviating their marginalization.

Introduction

Solving the problems of the marginalized Roma community is of a supra-departmental and horizontal nature, for which countries adopt strategies with the aim of reducing the often significant cultural and social differences compared to the majority society. Despite the fact that the Roma community is the largest ethnic minority in Europe, as reported by international organizations (WHO, 2021) [1] it continues to face inequality and exclusion in all social areas, [2] including healthcare. [3] The Roma community consists of heterogeneous groups with diverse cultural, linguistic and territorial identities (Bereményi, 2023) [4] which are often characterized by vulnerability in social inclusion (Melotti et al., 2023) [5]. It is often the result of otherness, which is not well accepted by the majority population, which makes the Roma an excluded group closed to the margins of society. [6]

According to research and strategic documents, the Roma in Slovakia regularly appear among the groups most at risk of poverty, social exclusion and discrimination, while the situation of the part of the Roma population that lives in segregated settlements is described as the worst. [7] In the context of these claims, as well as the results of the last census of inhabitants, houses and dwellings in the Slovak Republic 2021, [8] where 1,23% of the population (67 179 out of 5 449 270 inhabitants) officially registered as a Roma minority (designation of the first nationality). The Government of the Slovak Republic approved the Strategy of Roma Equality, Inclusion and Participation until 2030, [9] which aims to achieve visible changes in the field of Roma equality and inclusion.

Theoretical Framework

Stopping the segregation of Roma communities and their gradual integration into society is a space for quality social work that can draw attention to the emergence of problems, mobilize forces to solve them, and reveal the possibilities of help already at the root of the problem. Espe-

cially social work carried out by field and outreach social workers is indispensable for effective assistance to people, as it offers support in the natural environment of the clients. This form of social work in Slovakia is defined by Act No. 448/2008 Coll. on Social Services [10] as social work that is provided to an individual in his/her natural social environment or home environment [23]. Several authors (Samyn 2024) [11], (Filčák, Polačková and Dokupilová, 2019) [12] describe it as a supra-ministerial program aimed at marginalized Roma communities aimed at activating people's potential, supporting positive changes in housing, education, employment and social inclusion. Field social work has its principles and specifics typical for it, e.g. low threshold, Harm reduction (Vakharia, Little, 2017), [13] screening, [14] utekontakt (Dynamo International, 2020) [15]. Its main contribution is to increase the level of the quality of human life, to help fulfill the basic needs of people who are vulnerable, oppressed, living in poverty and in difficult social conditions (Ondrušková, Kulifaj, 2023). [16] The priority of field social work is primarily the establishment of an informal therapeutic relationship with the client in non-traditional conditions (Pružinská, Labáth, 2021), [17] which can often be a specific intervention on the street in the form of streetwork (Hill, Laredo, 2019). [18]

The National Strategy for Roma Equality, Inclusion and Participation until 2030 [9] represents a set of starting points and goals aimed at stopping the segregation of Roma communities, strengthening the social inclusion of Roma, non-discrimination and improving coexistence. It is defined in four priority areas, namely: employment, education, health, housing, which are also the starting point for defining the specific goals of several national projects. One of the projects that is currently being implemented is the National Field Social Work and Community Centers project - "NP Together for Communities", [19] the aim of which is the individualized provision of support to people in solving difficult life situations and their activation with the aim of improving social inclusion.

Methodology

The basic method applied in the present paper is the systematic selection of relevant documents related to social work with marginalized groups and the subsequent selection of secondary data. The choice and selection of data was aimed at selected indicators declaring the justification of the implementation of social work.

In the context of the defined objective, we focused on three basic levels, namely:

- the initial situation underlying the need for projects aimed at reducing social exclusion of marginalized groups,
- the involvement of subjects in a national project promoting the social inclusion of marginalised groups,
- the social work methods applied in the work in marginalized communities within the framework of the national project implemented.

At the first level within the selection, we chose the basic conceptual documents, namely the Atlas of Roma Communities 2019 [20]

Table 1 Number of settlements and number of dwellings according to the Atlas of Roma communities 2019

	Number of settlements				Number of dwellings			
		From that			From that			
Region	Together	Inside	On the edge	Outside the village	Together	Unimo cells	Shacks	Caravans, mobile homes
Banskobystrický	209	77	83	49	5505	124	385	19
%	-	36,84	39,71	23,45	-	2,25	6,99	0,35
Bratislavský	24	7	15	2	1158	6	12	2
%	-	29,17	62,50	8,33	1	0,52	1,04	0,17
Košický	291	61	177	53	11478	175	1918	48
%	-	20,96	60,83	18,21	-	1,52	16,71	0,42
Nitriansky	118	75	25	18	2119	61	49	4
%	-	63,56	21,19	15,25	-	2,88	2,31	0,19
Prešovský	309	82	162	65	14113	334	2583	18
%	-	26,54	52,43	21,03	-	2,36	18,30	0,13
Trenčiansky	28	15	12	1	1200	14	55	0
%	-	53,57	42,86	3,57	-	1,17	4,58	0,00
Trnavský	50	28	17	5	1457	67	40	6
%	-	56,00	34,00	10,00	-	4,60	2,75	0,41
Žilinský	23	11	11	1	925	77	46	3
%	-	47,83	47,83	4,34	-	8,32	4,97	0,32
Together	1052	356	502	194	37955	858	5088	100
%	-	33,84	47,72	18,44	-	2,26	13,41	0,26

Source: own processing

	Number	Project workers (number)						
Region	of subjects involved	TSP	Ø / subject	TP	Ø / subject	OP	Ø/ subject	Together
Banskobystrický	66	78	2,33	79	2,36	0	0,00	157
Bratislavský	2	4	2,67	0	0,00	0	0,00	4
Košický	67	98	2,88	108	3,18	0	0,00	206
Nitriansky	26	33	2,44	26	1,93	0	0,00	59
Prešovský	117	166	2,81	152	2,58	4	0,07	322
Trenčiansky	3	5	2,50	2	1,00	0	0,00	7
Trnavský	6	8	2,29	5	1,43	0	0,00	13
Žilinský	7	9	2,25	6	1,50	0	0,00	15
Together	294	401	-	378	-	4	-	783
%	-	51,21	-	48,28	-	0,51	-	100,00

Table 2 Approved applications for inclusion in the project Together for communities by region

Source: own processing according to the evaluation of the requests of the National Project

and 2013 [7]. By selecting secondary data, we specified the basic categories, namely the number of settlements and the number of dwellings. The basic documents in the second level of examination were the results of the evaluation of applications for participation in the national project of field social work and community centres (NP Together for Communities). In the third examined level, a systematic review and synthesis of information from selected documents of the national project was carried out: the Manual for the subjects involved in the national project and the Standards for field social work and field work in social exclusion.

Quantitative data were analysed descriptively, while qualitative data, such as standards, methods of social work, were systematized thematically. The aim of the synthesis of findings was to provide an understanding of the current focus of social work in marginalized communities.

Results

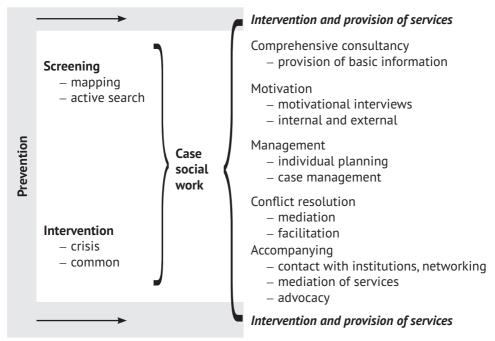
The basic starting situation, which clearly indicates the possibility of the involvement of subjects in the National Project Together for Communities, is the inclusion of a settlement in the Atlas of Roma Communities 2019. The decisive condition for inclusion of a municipality in

the Atlas of Roma Communities is the presence of a Roma settlement with more than 30 inhabitants or more than 30% share of Roma in the total population if there is no Roma settlement in the municipality. By processing secondary data from the Atlas of Roma communities 2019 [20], Table 1 is created, which presents selected areas by region that strongly indicate the urgency of applying social work and the application of its methods in marginalized communities.

According to the Atlas of Roma communities 2019 [20] there are 1052 settlements registered in Slovakia, of which 502 (47,72%) are on the outskirts of the village and 194 settlements (18,44%) are located outside the village. When compared with the Atlas of Roma communities 2013 [7] there was an increase in registered settlements by 31,01% (from 803 settlements to 1052 settlements), while from the point of view of localization, the most numerous type of settlement on the outskirts of the village also increased from 40,34% representation to 47,72% representation (an increase of 7,38 %). From the point of view of the number of dwellings, 5188 shacks, caravans and mobile homes represent 13,67% of the total number of dwellings.

In the new program period to address the situation of marginalized groups, new project calls

Table 3 Intervention in field social work



Source: own processing

are implemented aimed at providing individualized support to people in solving difficult life situations and at activating people at risk of poverty and social exclusion with the aim of improving their social inclusion. A cardinal role is played by staffing, which consists of the positions of field social worker, field worker, professional worker, coordinator at the local or supra-regional level. Among the basic prerequisites for all positions is the fulfillment of the condition of professional competence. Table 2 points to the fact that 294 subjects participated in the national project, with the highest representation in the Prešov region, which is also related to the concentration of marginalized communities and the number of their settlements. The second most represented region is the Košice region - 67 subjects, and only one subject less (66 subjects) is involved in the Banská Bystrica region. From the point of view of the ratio of representation of individual positions in the project, the subjects filled the positions of field social workers (TSP – 51,21%) and field workers (TP - 48,28%) as a priority.

The key factor for fulfilling the project's goals is the use and support of human capital of indi-

vidual, family, group and community. The intervention is consistent with field social work and field work standards, which are focused on four areas: procedural standards, ethical standards, personnel standards, and operational standards. These are in line with the definition of social work adopted by the International Federation of Social Workers (IFSW). There are three basic areas of work performance: search and contact work, intervention and provision of services, other activities - work that goes beyond.

Table 3 shows the primacy of prevention in social work. When meeting the goals, the intervention is focused on active mapping and searching in the target community with the gradual implementation of crisis and regular intervention. The primary focus is on individual planning and case-based social work with the use of comprehensive consultancy, in which the client's motives for positive change are essential.

Discussion

The 2021 Census of Inhabitants, Houses, and Dwellings revealed that 67 179 inhabitants officially declared themselves to be of the Roma minority [8], however, this figure needs to be supplemented by the 88 985 inhabitants who stated Roma as their additional nationality, which together represents a 2,86% share in the total census. Experts [21] estimate that this proportion is significantly underestimated and represents only about a quarter of the actual number. Such a situation is recorded in every national census.

If we base on the Atlases of Roma Communities 2013 [7] and 2019 [20], we can state that the number of registered settlements displaced to the outskirts of the village and even to the extra-village, where people often live in undignified living conditions in the form of shacks, is increasing.

As a consequence of the Roma being different from the majority population, the risk of deepening inequality and social exclusion of the minority increases, as pointed out by several authors [4, 6]. Also, the European Parliament has drawn attention to the need for more intensive implementation of national Roma integration strategies [22,24]. In Slovakia, one of the implemented projects is the National Project "Together for Communities", where one part involves the implementation of outreach and field social work. The project currently involves 294 subjects, with 783 workers, of which 401 are field social workers meeting the qualification prerequisite of completing a second-level university degree in social work. Together with the field workers, they carry out field interventions, focusing primarily on prevention as a basic principle of social work. An integral part of the intervention is mapping the area, screening through active searching for at-risk individuals, and, if necessary, implementing crisis and routine interventions.

Case-based social work in marginalized communities is implemented in a holistic manner while adhering to the basic ethical principles of social work [25].

Conclusion

The number of settlements and the number of dwellings that were identified within the processing of the Atlas of Roma Communities 2019 in Slovakia clearly declare the necessity to address the problem of marginalization. The displacement of Roma dwellings to the outskirts

of the village or even outside the village widens the gap between the majority and the minority, while at the same time pushing them into ever-increasing marginalization, which also opens up space for the implementation of social work.

The work of a social worker is not measured in terms of working hours and tasks completed as defined in standards, but in terms of changing the lives of people who are in need of help. It is the greater intensity of social workers in the field that can help to break down barriers that are often the result of strong prejudices against difference. Only by starting up the clients' internal resources, by increasing their motivation for positive change, can field social work experience a positive shift [26, 27]. Projects aimed at marginalized communities and the active involvement of subjects in their implementation is a way to contribute to mitigating the effects of poverty and social exclusion on the lives of people who have limited access to the resources and services of the majority society [28].

References

- 1. WORLD HEALTH ORGANIZATION. 2021. *Roma health*. https://www.euro.who.int/en/health-topic s/healt h-determinants/roma-health.
- VALERO, D., ELBOJ, C., PLAJA, T., MUNTE PASCUAL., A. 2021. Social work and the Roma community: elements to improve current practices. European Journal of Social Work, 24(6), pp. 978-989.
- 3. ORTON, L., FUSEINI, O., KOCZE, A., ROVID, M., SALVAY, S. 2022. Researching the health and social inequalities experienced by European Roma populations: Complicity, oppression and resistance. Sociology of Health & Illness, 44(S1), pp. 73-89. https://doi.org/10.1111/1467-9566.13411.
- BEREMENYI, B. A. 2023. Between choices and "going with the flow:" Career guidance and Roma young people in Hungary. International Journal for Educational and Vocational Guidance, 23, pp. 555-575. https:// doi.org/10.1007/s10775-022-09536-0.
- MELOTTI, G., BONOMO, M., BRASIL, J. A., VILLANO, P. 2023. Social invisibility and discrimination of Roma people in Italy

- and Brazil. Journal of Social and Political Psychology, 11(1), pp. 25-44. https://doi.org/10.5964/jspp.6453.
- BACIU, L. 2020. Reading beyond the Label Implications of the Critical Race Theory for the Social Work Practice with Roma People. Revista de Asistență Socială, XIX(3), pp. 79-98.
- UNDP. 2013. Atlas rómskych komunít na Slovensku 2013. https://www.employment. gov.sk/files/slovensky/rodina-socialna-pomoc/socialne-sluzby/atlas rom-kom.pdf.
- 8. STATISTICAL OFFICE OF SLOVAK RE-PUBLIC. 2021. Population, Houses and Flats Census in the Slovak Republic 2021. https://www.scitanie.sk/obyvatelia/zakladne-vysledky/struktura-obyvatelstva-podla-narodnosti/SR/SK0/SR.
- GOVERNMENT OF THE SLOVAK RE-PUBLIC. 2021. Strategy for Equality, Inclusion and Participation of Roma by 2030. https://www.romovia.vlada.gov.sk/site/ assets/files/1113/strategia_2030.pdf?csrt=17923756323925799914.
- 10. NATIONAL COUNCIL OF THE SLOVAK REPUBLIC. 2008. Act No. 448/2008 Coll. on Social Services and on Amendments to Act No. 455/1991 Coll. on Trade Enterprise (Trade Licensing Act), as amended. https://www.slov-lex.sk/pravne-predpisy/SK/ZZ/2008/448/20090101.html
- 11. SAMYN, S., CIOARTA, I., WAGENER, M., HERMANS, K., ROETS, G. 2024. 'We Reach out but we Also Expect Something in Return': Social Work Engaging with Roma People in Temporary Container Homes at the Edge of the City. *The British Journal of Social Work*, 54(2), pp. 741-761. https://doi.org/10.1093/bjsw/bcad253.
- 12. FILCAK, R., POLACKOVA, Z., DOKUPI-LOVA, Z. 2019. *Contextual evaluation of outreach social work*. Bittner print.
- 13. VAKHARIA, S. P., LITTLE, J. 2017. Starting where the client is: Harm reduction guidelines for clinical social work practice. *Clinical Social Work Journal*, 45 (1), pp. 65-76. https://doi.org/10.1007/s10615-016-0584-3>.
- RAUWERDINK-NIJLAND, E., DRIES, L., METZ, J., VERHOEFF, A., WOLF, J. 2022.

- Lessons from the Field. Caregivers supporting marginalized people receiving social service support from street outreach workers. *Family Relations*, 72(4), pp. 1397-2269. https://doi.org/10.1111/fare.12744.
- 15. DYNAMO INTERNATIONAL. 2020. The Oslostandard for Outreach Work with Vulnerable Young People: A part of the City Government's prevention campaign in the field of substances and addiction. Rådhuset. https://dynamointernational.org/wpcontent/uploads/2021/02/The-Oslostandard-for-Outreach-Work-with-VulnerableYoung-People.pdf.
- 16. ONDRUSKOVA, E., KULIFA, J. P. 2023. Standards for outreach social work and outreach work in social exclusion. Implementing Agency of the Ministry of Labour and Social Affairs of the Slovak Republic.
- 17. PRUZINSKA, J., LABATH, V. 2021. Handbook of field social work. Implementing Agency of the Ministry of Labour and Social Affairs of the Slovak Republic.
- 18. HILL, D. J., LAREDO, E. 2019. First and last and always: streetwork as a methodology for radical community social work practice. *Critical and Radical Social Work*, 7(1), pp. 25-39. doi:10.1332/204986019x1.
- 19. IMPLEA. IA MoLPRS. 2023. Together for Communities. National project Field social work and community centres. https://ia.gov.sk/narodny-projekt-terenna-socialna-praca-a-komunitne-centra/index.html?cs-rt=16988913405410175960.
- 20. OFFICE OF THE GOVERNMENT OF THE SLOVAK REPUBLIC. 2019. *Atlas of Roma Communities in Slovakia 2019*. https://www.romovia.vlada.gov.sk/atlas-romskych-komunit/atlas-romskych-komunit-2019/?cs-rt=17923756323925799914.
- 21. KOREC, P., DURCEK, P., BACIK, V. 2022. Roma have been in Slovakia for 700 years; their number, distribution and relationship to selected social phenomena. *Acta Geographica Universitatis Comenianae*, 66(2), pp. 125-163. European Parliament (2020) *Report on the implementation of National Roma Integration Strategies: Combating negative attitudes towards people with Romani background in Europe*. 2020/2011(INI).

- PAVLIKOVA, M., TKACOVA, H., TIMOR, T. 2023. Grief of the bereaved in a social media environment as one of the prominent consequences of the Covid-19 pandemic. *Acta Missiologica*, 17(2), pp. 75-84.
- 23. CINTULOVA, L. L., BUDAYOVA, Z., JU-HASOVA, I. 2023. Health of Roma People living in marginalized Communities in Slovakia. *Clinical Social Work and Health Intervention*, 14(1), pp. 7-15.
- 24. HAMAROVA, M., MATURKANIC, P., GRUBER, J., SVOBODA, M., SURAB, M., HISEM, C., KRALIK, R. 2024. Social (Pastoral) Services and its Impact on the Citizens of the Czech Republic. *Clinical Social Work and Health Intervention*, 15(4), pp. 25-33
- KRALIK, R., MAHRIK, T., SPUCHLAK, J., MATURKANIC, P., PAVLIKOVA, M. 2024. Narcissistic Privacy as a Barrier to Socialization. *Clinical Social Work and Health Intervention*, 15(4), pp. 44-52.
- SVOBODA, M., MEDZIHORSKY, S., GRUBER, J., JANACKOVA, L., SURAB, M., KRALIK, R. 2024. Manipulation as a risk factor for psycho-social health. *Acta Missiologica*, 18(1), pp. 43-54.
- 27. BURSOVA, J., CHERKOWSKA, J., BU-DAYOVA, Z., MATURKANIC, P. 2024. Educational Activity and Life Satisfaction of People in Senior Age. *Journal of Education Culture and Society*, 15(2), pp. 249-264.

Focus method Group and the Possibilities of its use as a Tool for Research in the Field of Social Work

M. Mackinova (Monika Mackinova)¹, M. Olah (Michal Olah)², V. Zamkova (Vera Zamkova)¹, T. Planka (Tomas Planka)¹

Original Article

² St. Elizabeth University of Health and Social Work in Bratislava, SK

E-mail address:

planka3@uniba.sk

Reprint address:

Tomas Planka
Department of Social Work,
Faculty of Education
Comenius University in Bratislava
Soltesova 4
811 08 Bratislava
Slovakia

Source: Clinical Social Work and Health Intervention Volume: 15 Issue: 5

Pages: 49 – 59 Cited references: 29

Reviewers:

Michael Costello University of Scranton school of education, USA Selvaraj Subramanian SAAaRMM, Kuala Lumpur, MY

Keywords:

Focus group. Social work. Syndrome burnout. Research.

Publisher:

International Society of Applied Preventive Medicine i-gap

CSWHI 2024; 15(5): 49 - 59; DOI: 10.22359/cswhi_15_5_07 © Clinical Social Work and Health Intervention

Abstract:

The Focus Group method is one of the few traditional methods used in qualitative research. There has been much debate in scientific circles about its suitability and the validity of the data it produces. This method was often seen as more of a complementary one. Currently, according to Miovský (2006), this research method is used in sociology and marketing research. The popularity of this method has increased in recent years, and when chosen for the right purpose, it can also bring good results.

¹ Department of Social Work, Faculty of Education, Comenius University in Bratislava. SK

The focus method group

In the late 1930s, researchers began to discover the advantages of indirect, i.e. non-directive, interviews. Morgan (2001) further describes that researchers began to have some doubts about the suitability of traditional techniques such as methods of obtaining information through questionnaire surveys. These were tools that would limit the respondent's answers. Thanks to this, science became interested in methods in which the researcher has a less directive and dominant role and the respondent has the opportunity to comment on individual topics more comprehensively. He further states that the earliest account of group interviews is Bogardus' 1926 article " The Groups Interview" published in the Journal of Applied Sociology.

The Focus Group technique as we know it today was developed in more detail in Merton and Kendall's (1946) study "The Focused Interview", when they used this method in researching the influence of the media on people's attitudes towards the participation of the United States in World War II. The method consisted in the gradual connection of stimuli during the conversation to topics and questions that interested the researcher. The researcher rarely asked the respondents direct and pre-prepared questions as characterized by Conradson (2005), who further states that he rather tried to direct the research participants to share their thoughts, feelings and experiences while listening to the radio inputs. Originally, participants in this research were asked to use buttons that reflected their responses to radio programs. They either responded positively or negatively by pressing the appropriate button. However, this type of data collection did not answer the questions of why the participants reacted negatively or positively to the given programs. It was therefore clear that this method was not sufficiently understood by the research participants. Public attention in the field of research has focused more on the unstructured and qualitative aspects of the participants and on the opinions expressed in their own words. In this way, as emphasized by Hendl (2023), the validity of the research results was ensured.

Interest in the use of these groups in the social-scientific field reappears at the beginning of the eighties. According to Bloor and Wood (2006), the method began to be used in the field of marketing, market research strategies, advertising testing, consumer behavior and the commercial world. Various large companies have applied this method to improve their products. In recent years, researchers have begun to realize the possibilities of using the Focus Group method in academic research. Currently, we encounter two currents of using this method, namely academic and applied research.

Focus group as a qualitative research method

Focus Group is often cited as one of the most progressive qualitative methods for obtaining data (Miovský, 2006). It is a research tool for obtaining information on a chosen topic from groups that are characterized by shared characteristics or interests. A Focus Group focuses insight into the attitudes and beliefs that are the source of behavior. It is suitable for studying complex topics involving many levels of feeling and experience (Morgan, 2001). Focus Group is a qualitative research technique. It is based on group discussion, moderated by the researcher and uses group interaction. It is important to obtain data and insights from participants on a certain topic, which would be difficult to access outside the group. Hendl (1997) states that the Focus Group method is also referred to as a group interview, focus group or organized group discussion.

On the other hand, Hughes and Lang (2004) characterize that group interviews differ from focus groups in the form of discussion and specification and greater concreteness of the data obtained. Focus Group helps researchers gain knowledge about the perspectives and attitudes of people who have social problems.

Hague (2003) mentions the difference in the use of discussion groups in the USA and in Europe, where they primarily serve to get to the bottom of the matter and to understand the problem. Foret and Stávková (2003) are inclined to believe that the method is more suitable for preliminary research or for the final stage of interpretation and answering the question "why". Bers (1994) emphasizes that the method is relatively cheap, but not simple. But if it is implemented correctly, it is a powerful tool and supplement even for quantitative studies. To this,

Kotler and Keller (2007) add a warning about the necessary and thorough interpretation of the opinions of the group.

Use of the focus technique group in research in social work

Social work offers a wide scope for using the Focus Group technique. It is specific to social work that researchers orient and focus on determining the quality of the phenomenon under investigation, but also on what motivates respondents to use or not use social services. The goals of research in social work relate to the improvement of people's conditions. The purpose of research is to create applied knowledge, and research is used to develop knowledge and is used in practice (Krysik, Finn, 2010).

Research in social work, according to Rubin and Babbie (2010), focuses on providing scientifically based knowledge, evaluating or improving social services, social programs, procedures, interventions, assessing the needs of clients or a group of clients, evaluating the effects of social policy or solving specific social problems.

Hendl and Remr (2017) point out that we must not forget the immense help and effectiveness this method provides in obtaining opinions and feedback from clients, from professionals in the helping professions in social service facilities and from organizations. The Focus Group method helps to improve the services provided to clients and brings new innovations and modifications that respond to the needs of clients. Focus Group is currently used as a complementary method to help validate research data and interpret it. It is mainly used in combination with interviews with an individual, observation, or with a questionnaire technique.

A related technique, as stated by Chrástka (2016), is the so-called Delphi Group (a panel of experts), who repeatedly meet and discuss in order to create a common and authoritative opinion on a common topic. The authors Švaříček and Šedová (2014) state that the function of the Focus Group technique allows a detailed discussion of the problem and has a relatively small number of people. It focuses on specific areas of interest and allows participants to discuss the topic in a larger and more specific way.

Kostrub (2016) talks about the fact that Focus Groups have their own specific feature, which is the interaction of respondents in the group and the use of group dynamics. Some authors call this effect that occurs within the Focus Group as the snowball effect. This group interaction is commonly called the group effect. Group participants usually have common social experiences, age, social class, gender, ethnic origin, religion. Participants may also have a common area of interest such as motherhood, divorce, autism, abuse, mobbing, burnout.

Reasons for conducting a Focus Group

With techniques such as questionnaire surveys or face-to-face interviews, there is a basic assumption that the respondent really presents what he feels. However, people actually need to hear the opinions of other people in order to confirm their positions and thus be able to formulate their opinions. And this kind of interaction occurs when using a Focus Group (Chrástka, 2016).

The role of the Focus Group moderator is not dominant, on the contrary, the moderator makes it possible to promote both types of opinion, i.e. positive and negative. Conversely, negative opinions are often the most beneficial for the researcher. Disman (2021) further states that Focus Group participants are people who do not know each other, or do not know each other very well, but have some characteristics in common. They can be university students, professionals in helping professions, nurses, managers, IT specialists, librarians, etc.

However, these common characteristics, as argued by Eger and Egerová (2017, In: Gavora , 2010), do not oblige them to have the same opinions. In contrast, Kajanová et al. (2017, In: Švaříček, Šeďová , 2014) states that there should not be people in the group who stand out in any way, for example in terms of education, age, etc. The moderator should always emphasize that the participants were invited based on the same experience to share their opinions on a certain matter and problem. The aim of the Focus Group is to reveal the attitudes and opinions of people who ideally do not know each other and at the same time, in one place, discuss the presented topic together.

Advantages and Disadvantages of Focus Group

Sedova (2007, In: Patton, 2002) summarized some of the often mentioned advantages and limits of Focus Group use as follows:

Focus Group benefits include:

- Focus Group is a socially focused research technique. Humans are social creatures who interact and interact with other humans. They are influenced by the opinions of others and draw their own conclusions based on other opinions. Focus Groups take place in a natural environment, in real situations as opposed to controlled experimental situations, typical for quantitative studies.
- The Focus Group technique allows the moderator to experiment and observe unexpected situations, topics that would not appear in a questionnaire survey.
- Focus groups have high face validity, as this technique is easy to grasp and the results are understandable for those who use them. It also allows you to use quotes from respondents.
- The cost of a Focus Group is not very high.
- The Focus Group technique makes it possible to quickly achieve research results. In urgent cases, a trained moderator can conduct 3-4 group discussions, analyze them and write a research report within one week.

Disadvantages of Focus Group include:

- The researcher -moderator has less control in a group interview than in an individual interview. Participants can influence the focus of the discussion, so it is important for the moderator to keep a focused direction.
- Data taken with this technique are more demanding to analyze. Interactions in groups mean mutual influences. This must be taken into account in the interpretation.
- The Focus Group technique requires a very good and trained moderator who can recognize situations where it is necessary to move from one topic to another.
- Individual groups within one research may differ from each other. Each Focus Group may have different characteristics overall. One can be lethargic - boring, on the other hand, another can be energetic, where there can be ten-

- sion. Because of these differences, we need to secure enough groups for research to maintain a balance of individual differences.
- It is challenging to form a group, invite participants, choose a suitable place for discussions, choose a time that will suit all participants.
- The discussion must take place in a place that is a good environment for conversations and discussions about the issue at hand.

Online Focus Group

Kotler et al (2007) states that the use and acceptance of modern information and communication technology in research is inevitable. Research in social work, whether qualitative or quantitative, discussions, solutions to social problems, will in the future be more confronted with the use of knowledge and the implementation of research using Internet technologies. Virtual discussions mainly support aspects of reducing the costs of transport, accommodation, catering and spaces for research participants. For many companies, organizations, researchers in the academic environment, using an online Focus Group is a less expensive method that would otherwise be impossible to implement from the financial point of view.

On the other hand, Hughes and Lang (2004) claim that researchers strongly oppose the introduction of the online Focus Group method in qualitative research, because they believe that in this form the dynamics of the group disappear, and the influence and quality of the moderator's discussion are limited. However, these authors think that the moderator does not lose his influence in the group, because his abilities to lead the group and direct the discussion are not significantly limited by technology. The moderator should not perceive the distance of research participants and impersonal contact during an online Focus Group as a barrier. Furthermore, the authors claim that online video interviews can be of the same quality as faceto-face meetings with research participants. The moderator must be an expert on the given topic, know his limits know and be able to use modern technologies and use them for the benefit of the group. For them, online focus groups are more of a challenge than an obstacle in obtaining information for the implementation of research.

Chrastina (2019) points out that the use of this method provides immense help and efficiency in the field of obtaining the opinions of clients, professionals in social service facilities and organizations. The method helps to improve the services provided, brings new innovations and modifications that respond to the needs of clients. In this way, social services, social assistance and social work become better quality, more targeted and adequately responsive to changes in clients, their needs and changes taking place in society.

Implementation of focus group

On the issue of focus group preparation and their incorporation into research design, Morgan (2001) states that "one of the things we are trying to convey is the importance of thinking about focus groups in relation to research design. In fact, the success of the project as a whole depends on a combination of thoughtfully defined research objectives, systematic choice of questions to be asked, careful selection of participants, the manner in which these people will be selected and thorough analysis of the data, together with skillful group moderation" (Morgan, 2001, p.91).

The role of the moderator is important for the realization of the Focus Group itself, who leads the entire discussion and constantly focuses (focus) and returns to the main topic. If there is stagnation in the group, they have to engage the participants again, and all in a very sensitive and non-violent way. Each moderator has an assistant available during the discussion, who takes care of recording, providing technical things, refreshments, lighting, notes from the discussions. It also monitors whether any topic has been omitted and records the non-verbal expressions of the participants. The role of this assistant is important in the analysis of research findings.

Preparing and starting a Focus Group

The Focus Group method is described by Hair et al. (2000) in the following three stages.

- Planning a study using the Focus Group research method.
- Implementation of own group discussion.
- Analyzing the results and creating a research report.

Moderator's opening remarks. First of all, it is important to welcome and register the par-

ticipants and thank them for being willing to participate in the Focus Group. Respondents are invited to sit comfortably and are offered refreshments, coffee, tea, mineral water, etc. Then there is a mutual introduction of the moderator and the assistant who will implement the Focus Group. In our case, the moderator's assistant was an IT worker - network administrator, which also had its advantages if there were technical problems in the room. This is followed by a mutual introduction of the present participants and information about the method and the topic that will be discussed during the Focus Group. Respondents are given cards on which they write their first names and attach them to their clothes so that they can be addressed well. Respondents are also given pre-filled questionnaires in which they anonymously fill in their profession, age and length of experience in the field.

However, for the purpose of research, we must also consider possible problems. Because we get a real picture if we create the trust of the participants and preserve their anonymity. The results, and especially the initially unexpected results, can be very serious and it will depend on how they are interpreted and used in a qualified manner.

The research set of the Focus Group was 6 respondents, of which 4 women and 2 men aged between 29 and 51 years, who work as professional workers in helping professions in social service facilities and have 5 to 15 years of professional experience. There were 2 general nurses, including 1 practical nurse and 4 workers in direct care (caregivers).

Basic rules of the Focus Group

It is very important to acquaint the participants with the ethical rules of the Focus Group. The most basic ones include:

- Trust and anonymity.
- Collected data will remain securely stored.
- The information provided will remain confidential and the participants anonymous.
- The respondent has the right to terminate the research at any time without the stated reason.
- Respondents can be offered a summary of the results after the end of the project.
- Complicated relationships of trust with other group members may arise.

- Ask everyone to keep the discussion confidential (some topics are only suitable for one-on-one conversations)
- Make sure that there are no racist, sexist or otherwise offensive insinuations.
- Make sure that different cultural contexts are not legitimized within the group.

One person always speaks. It is not advisable to interrupt conversations and run other side conversations. All present participants take part in the discussion. No one has a dominant role. Everyone has the right to say their opinion. Everyone has the right to comment on the opinion of another, but they do not have the right to condemn or otherwise dishonor them. Everyone has the right to refuse to testify if the questions are unpleasant or unacceptable. The respondent must not be forced to answer. Everyone has the right to stop their answer if they don't want to continue. Everyone has the right to end their participation in the group if necessary. The information that participants learn about each other belongs only to them and to no other person. Participants address each other by name and do not use profanity. The recording and other data from the course of the group are used exclusively for research purposes and the protection of personal data is ensured.

Introductory discussion and motivational work

At the beginning of the discussion, the moderator, as we have already described in the previous subsection 1.3.1, introduces the participants, introduces himself, communicates the purpose of the research and the basic rules of the discussion. He points out that no answer is right or wrong - it's just different opinions. They must not forget to inform the discussants that their names will not be published anywhere and that the discussion is being recorded. It will also announce the expected duration of the discussion. This is usually 2.5 hours.

Focus Group discussion core

This is authentic communication. The role of the moderator is important, gradually drawing all participants into the discussion and emphasizing that everything is consistent and unbiased. The discussion is maintained as long as it brings relevant information. It is important to work with time, the correct schedule and information for participants - how much time is left, etc.

End of discussion

In the final phase, no further discussion is initiated, nor is another topic developed. Partial currents that have started are allowed to run out. It is appropriate to give the participants time to comment on anything they missed during the discussion, but in such a way as not to open up another discussion. It is possible to perform a so-called short round, which allows feedback for the moderator. At the end of the Focus Group, the moderator thanks the participants and asks a final question. Did we forget something important? He will reward the participants financially, or hand over gifts.

Empirical realization of focus group

Our decision to conduct a Focus Group began with a general interest in obtaining information regarding the effects of burnout among professionals working in social service settings. Before starting the research, we needed to answer basic questions.

• Why should the study be carried out?

To obtain information for a qualitative study and the creation of a dissertation on the topic: Impacts of the burnout syndrome of professional workers in selected social service facilities

What type of information do we get with this method?

Information and experiences of professional workers in the helping professions with burnout syndrome.

What kind of information is most important to us?

Personal contacts with respondents. Semi--structured interviews with open questions, standardized questionnaires, statements of respondents.

• How will this information be used?

For the creation of a dissertation in the form of a qualitative study. The outputs of the respondents on preventive measures at the individual and organizational level will be used for further study and social work students.

Who is requesting this information?

External student of the Charles University in

Bratislava, Department of Social Work. The statements of the respondents will of course be anonymous and will be used for the creation of the dissertation.

We personally addressed the respondents during a workshop at the Gerontological Days held in June 2023 in Ústí nad Labem. These interviewed respondents worked in 3 residential services in a social service facility in the Karlovy Vary region. The respondents were professionals in helping professions. These were general nurses and direct care workers. We approached the Focus Group participants in person, in writing and by e-mail. Out of 12 respondents, only 6 respondents agreed to participate. The reason for disagreement among the other respondents was a time deficit and a sensitive topic that they refused to talk about. 6 respondents participated in the Focus Group, including 4 women and 2 men aged between 29 and 51 years old, who work as professional workers in helping professions in social service facilities and have 5 to 15 years of professional experience. There were 2 general nurses, including 1 practical nurse and 4 workers in direct care (caregivers).

An important part of the preparation was the selection of the location where the Focus Group will take place. The training rooms of the Karlovy Vary Regional Library in Karlovy Vary were a suitable choice for our research. We secured these spaces in advance with the director of the organization. First of all, we introduced the organization's management to the project. We have shared the date and time of the Focus Group and the size of the research set. It is important to emphasize that the following factors apply to the selection. In the room, a round table and chairs should be arranged so that the participants can see each other and have eye contact with each other. For recording reasons, the room should not be near busy streets and other sources of noise, which the training room in the Karlovy Vary regional library fulfilled. The room was in neutral territory. There was a oneway mirror in the room, which made it possible to watch the entire discussion. Snacks and drinks for Focus Group participants must not be forgotten. An audio and video recording was made of the discussions. Among other technical aids, we used a flipchart and markers, cards with the first

names of the participants. It was important to create a time and financial plan for discussions.

We were interested in interactions in which professionals in the helping professions are able to share their experiences with the issue of burnout. We asked the respondents 5 questions related to the problems of burnout syndrome.

Ouestions about burnout:

- What is the level of awareness of the burnout syndrome among professionals in ZSS?
- What are the causes and risk factors of burnout?
- What do professionals consider the most challenging in the performance of their profession?
- What are the possibilities of prevention against the possible effects of burnout syndrome used by professionals from ZSS?
- What solutions would they propose in the situation if they found out that there is a person suffering from burnout syndrome in their environment?

Respondents described risk factors, causes of burnout syndrome. They discussed the possibilities of preventive measures. Unfortunately, most of them encounter the most common risk factors at their workplaces, which have an adverse effect on work and personal life.

We have listed these factors and causes in the following tables.

A look at the causes of the burnout syndrome

There are common signs, according to which we can have a generalized view of the causes of burnout syndrome. Part of it may be related to the nature of the work, others to coping and solving problem situations. Other signs may relate to a person's personality traits. For workers in the helping professions, it is mainly a lack of social recognition from colleagues and management. A demanding workload. Critical clients. The profession is psychologically exhausting for permanent communication and engagement. Consequences of chronic stress. Very bad relationships and conflicts in the workplace. The main triggers of burnout syndrome are chronic stress, permanent time pressure and high emotional tension. It is a reaction of the body and above all of the mind to long-term mental exhaustion, intense preoccupation with a certain task and everyday stress.

Classification	of risk factors
External factors	
Employment and work organization	Long-term and repeated dealings with people. Lack of personnel, time, funds and professional experience. Work overload and lack of rest. Work performance is not sufficiently appreciated. Too demanding working conditions. Long-term duration of unfavorable conditions. Too demanding work deadlines or work qualitative and quantitative requirements. Existence of demanding competitive conditions and high performance requirements in the workplace. Work routine. Reduced possibility of self-realization. Rejection from clients, others and superiors. Striving for advancement on the professional ladder. Bad organization of work.
Family	Excessive attention to the problems of others. Dismal housing and financial conditions. Illness or other long-term burden in the family. Partner relationship problems and conflicts.
Company	The competitive nature of our company. Gradation of setting goals beyond the limit exceeding the physical or emotional capabilities of individuals. A false image of success. The pace of society. Acceleration of social time. The effort not to be behind others in terms of performance and finances.
Internal factors	
	Too much enthusiasm for work. Internal tendency towards competitiveness and comparison with others. Poor internal self-esteem. Strong perception of failure. Subjective perception of the difficulties of one's own living conditions. Poor physical condition. Irregular daily biorhythm. Trying to do everything alone. Low level of assertiveness. The inability to say no. Not managing conflicts. Trying to control everything. Inability of active and passive rest and realxation . Excessive responsibility. High demands on yourself.

We have discussed about preventive measures and here we have given a brief description of preventive measures. It is necessary to reduce excessively high demands. Avoid the helper syndrome (exaggerated sensitivity to other people's needs and requests). The art of learning to say NO - healthy assertiveness. Moving between

compassion and emotional detachment. Focus on more important activities and setting priorities. Time your work. Develop a good plan for solving tasks and divide larger tasks into sum stages. Set aside time for breaks when completing tasks. Seek emotional support and express your feelings openly, tactfully and sensitively.

Causes of burnout syndrome						
Personal	Working	Private				
Behavior type A	Lack of recognition	Partnership deficit				
Perfectionism	Workaholism	Conflicts in relationships				
Emotional deficit	Work load	High demands from the partner				
Cumulative stress, psychological burden	Inability to work independently	Competitiveness in privacy				
Negative evaluation of one's own person	Lack of support and appreciation from colleagues and superiors	Exclusion from friendly relationships				
Above average empathic skills	Deficit of experiences and achievements	Interest activities are pushed aside				
Excessive euphoria and enthusiasm when starting work	Insufficient financial evaluation	Loss of interest in body care				
High ambitions	Inadequate organization of work	Failure to follow eating habits				
Conflicts of values	Unfair conditions	High scores on difficult life events				
Suppression of emotions	Stereotyping and performing meaningless tasks	Dissatisfaction in the conditions of existence				
Inability to relax	Onerous work with problem clients					
Low assertiveness	Absence of quality supervision and further education					
Excessive need to please others	Lack of professional perspective					
Deficit of rational time planning	Failure to use qualification					
Low self-reflection	Changes on the side of the organization are not feasible					

Look for support in solving tasks, ask for advice from colleagues, or look for suggestions for solutions. Avoid negative thoughts - categorically stop these thoughts. Prevent communication problems in the form of open communication. Avoid hasty decisions and promises that cannot be fulfilled. Maintain balance in critical situations. Choose an appropriate method of conflict resolution. Balance the workload with the necessary amount of rest and replenishment of energy. Choose an appropriate selection of ac-

tivities and a circle of relationships with positive charge and energy. Learn relaxation techniques. Be more interested in your health and monitor the body's warning signals. Choose from suitable training options. Take advantage of the supervision offer.

Focus Group Analysis

Focus Group research provides a large amount of data. During the analysis, it is necessary to emphasize the key questions and fo-

cus on the research project. Unlike quantitative research, the analysis of data from a Focus Group can begin almost immediately after the discussions, but at the same time it takes much longer. During the analysis, we must observe in particular those moments in which it is possible to find a change in the respondent's opinions and the cause that caused the change. When did the change in opinion occur, when did the respondent become aware of it and why did this change happen. The moderator should follow the mentioned facts already during the discussion. In the analysis, the notes of the non-verbal behavior of the participants, the so-called observation notes, are important. And it is also a good idea to draw a diagram of how the respondents were distributed in the room. In conclusion the Focus Group moderator will end and thank the respondents for their participation and provide all participants with financial rewards and gifts.

References

- BERS, T., H. 1994. Exploring Institutional Image Through Focus Groups Interwiews.
 In: BENNETT, N., GLATTER, R., LE-VAČIC, R. Improving educational management through research and consultancy. London: Paul Chapman Publishing. 1994. ISBN 1-85396-277-5.
- BLOOR, M., WOOD, F. 2006. Keywords in Qualitative Methods. London: SAGEPublications. 2006. 195 p. ISBN 978-07-61943-30-7.
- CONRADSON, D. 2005. Methods in Human Geography: a guide for students doing a research project Focus Groups. In: FLOW-ERDEW, R., MARTIN, D. (eds.) London UK: Pearson. 2005. 392 p. ISBN 978-13-15837-27-7. Dostupné [on line].[2024-03-25] https://doi.org/10.4324/9781315837277.
- 4. DISMAN, M. 2021. *How sociological knowledge is produced: a user's guide*. Fifth, unaltered edition. Prague: UK Karolinum. 2021. 374 pp. ISBN 978-80-2465-053-1.
- EGER, L., EGEROVA, D. 2017. Basics of research methodology. Pilsen: University of West Bohemia. 2017. 184 pp. ISBN 978-80-261-0735-4.
- 6. FORET, M., STAVKOVA, J. 2003. Marketing research: how to know your customers.

- Prague: Grada. 2003. 160 pp. ISBN 978-80-2470-385-8.
- GAVORA, P. 2010. Introduction to pedagogical research. 2nd expanded edition. Brno: Paido . 2010. 261 pp. ISBN 978-80-7315-185-0.
- 8. HAGUE, P. 2003. *Průzkum trhu. Brno: Computer Press.* 2003.234 s. ISBN 978-80-7226-917-8.
- HAIR, J. F., BUSH, P. R., ORTINAU, J. D. 2000. Marketing research: a practical approach for the new milénium. McGraw-Hill Higher Education. 2000. 682 s. ISBN 0-256-19555-2.
- HENDL, J. 1997. *Introduction to qualitative research*. First edition. Prague: Karolinum. 1997. 243 pp. ISBN 978-80-7184-549-3.
- 11. HENDL, J. 2023. *Qualitative research: basic theory, methods and applications*. Fifth, revised edition. Prague: Portal. 2024. 494 pp. ISBN 978-80-262-1968-2.
- 12. HENDL, J., REMR, J. 2017. *Research and evaluation methods*. Prague: Portal. 2017. 372 pp. ISBN 978-80-262-1192-1.
- 13. HUGHES, J., LANG, K., R. 2004. Issues in Online Focus Groups: Lessons Learned from an Empirical Study of Peer-to-Peer Filesharing System Users. Journal of Business Research Methods. 2004. Volume. 2. Issue 2. pp. 95-110. ISSN 1477 7029.
- CHRASKA, M. 2016. Methods of pedagogical research: fundamentals of quantitative research. 2nd updated edition. Prague: Grada. 2016. 256 pp. ISBN 978-80-247-5326-3.
- 15. CHRASTINA, J. 2019. Case study a method of qualitative research strategy and research design: Case study a method of qualitatively research strategy and research design. Olomouc: Palacký University in Olomouc. 2019. 289 pp. ISBN 978-80-244-5373-6. Available [online].[2024-03-24] at https://www.researchgate.net/publication/331618757_Pripadova_studie__metoda_kvalitativni_vyzkumne_strategie_a_designovani_vyzkumu_Case_Study_a_Method_of_Qualitative_Research_Strategy_and_Research_Design, DOI:10.5507/pdf.19.24453736
- KAJANOVA, A., DVORACKOVA, O., STRANSKY, P. 2017. Research method-

- ology in the field of social sciences. České Budějovice: Faculty of Health and Social Sciences. 2017. 106 pp. ISBN 978-80-7394-639-5.
- 17. KOTLER, P., WONG, V., SAUNDERS, J., AMSTRONG, G. 2007. *Modern Marketing*. 4th European Edition. Prague: Grada. 2007. 1048 pp. ISBN 978-80-247-1545-2.
- KOTLER, P., KELLER, K., L. 2007. *Mar-keting management*. Prague: Grada. 2007. 792 pp. ISBN 978-80-247-1359-5.
- 19. KOSTRUB, D. 2016. Fundamentals of qualitative methodologies: when interpreted meanings mean more as a high number. Bratislava: UK In Bratislava.2016.162 p. ISBN 978-80-223-4166-0.
- KRYSIK, J., L., FINN, J. 2010. Research for Effective Social Work Practice 2nd ed New York: Routledge. 2010. 456 p. ISBN 978-0415805063.
- 21. MERTON, R., K., KENDALL, P., L. 1946. Focused Interview. American Journal of Sociology: 51. 541–557. http://www.jstor.org/stable/2770681.
- 22. MIOVSKY, M. 2006. *Qualitative approach* and methods in psychological research. Prague: Grada. 2006. 332 pp. ISBN 978-80-2471-362-4.
- 23. MORGAN, D., L. 2001. Focus groups as a qualitative research method. Methodology. Tišnov: SCAN Association. 2001. 99 pp. ISBN 978-80-85834-77-4.
- 24. PATTON, M., Q. 2002. *Qualitative Research & Evaluation.* 3rd ed. SAGE Publications. International Educational and Professional Publisher Thousand Oaks: London. NewDelhi. 2002. 574 s. ISBN 07619-1971-6.
- RUBIN, A., BABBIE, E. 2010. Essential Research Methods for Social Work. 2nd ed
 Belmont (Calif.): Brooks /Cole: Cengage Learning. 416 p. ISBN 0495811718.
- SEDLACEK, M. 2007. Case study. In: ŠVAŘÍČEK, R., ŠEĎOVÁ, K. 2014. Qualitative research in pedagogical sciences. Prague: Portal. 2007. pp. 96-112. ISBN 978-80-7367-313-0.
- SVARICEK, R., SEDOVA, K. 2014. *Qualitative research in pedagogical sciences*. Ed.
 Prague: Portal. 2014. 384 pp. ISBN 978-80-262-0644-6.

28. SVARICEK, R., SEDOVA, K. 2007. *Qualitative research in pedagogical sciences*. Prague: Portal. 2007. 384 pp. ISBN 978-80-7367-313-0.

Aesthetic Narcissism And Its Discontents. A Study of Kierkegaard's "The Diary of the Seducer" and Its Relevance To Contemporary Clinical Psychology

L. Stan (Leo Stan)¹, M. Pavlikova (Martina Pavlikova)²

¹ Faculty of Theology, The Catholic University in Ruzomberok, Ruzomberok, SK

Original Article

E-mail address:

stan.leo@gmail.com

Reprint address:

Leo Stan Theological Institute KU in Spisske Podhradie Spisska Kapitula 12 053 04 Spisske Podhradie Slovakia

² Constantine the Philosopher in Nitra, Nitra, SK

Source: Clinical Social Work and Health Intervention Volume: 15 Issue: 5

Pages: 60 – 71 Cited references: 39

Reviewers:

Roberto Cauda

Institute of Infectious Diseases, Catholic University of the Sacred Heart, Rome, IT

Daria Kimuli

Catholic university of Eastern Africa, Nairobi, KE

Keywords:

Kierkegaard, Narcissism, Seduction, Existentialism, Aesthetics, Sexuality, Psychopathology,

Publisher:

International Society of Applied Preventive Medicine i-gap

CSWHI 2024; 15(5): 60 - 71; DOI: 10.22359/cswhi 15 5 08 © Clinical Social Work and Health Intervention

Abstract:

The present study seeks to reveal several ways in which clinical psychologists might enrich their understanding of the narcissistic phenomenon by means of Søren Kierkegaard's "The Diary of the Seducer." The study also shows how Kierkegaard scholars will benefit from a novel outlook on the Kierkegaardian concept of "reflective seduction" which, we claim, is essentially narcissistic. Divided into three parts, the article seeks to identify the nature of Johannes the Seducer's narcissism by analyzing its eclectic manifestations, both in terms of internal psychological processes and intersubjective relations. We conclude with several lessons that Kierkegaard bequeaths to contemporary psychopathology, which deserve further and more rigorous investigations.

Introduction

Since the late 1970s scholars have raised repeated alarms regarding the narcissistic proclivities of Western culture as a whole. Some went as far as equating the Western way of life (including many of its institutions) with an unbridled, unabashed narcissism (1,2). We know for quite some time now that narcissism flourishes amongst positions of authority, celebrities, and even religious leaders (3). And yet, psychologists, psychiatrists, sociologists, and even theologians (4) are far from being in full agreement about the nature, structure, scope, and conceptualization of this particular phenomenon. The present study does not aim to bring any conceptual clarifications to this debate. Rather, while using a philosophical-literary text - namely, Søren Kierkegaard's novelette, "The Diary of the Seducer" (from his classic, 2-volume work, Either/Or) (5) – it intends to reveal several ways in which the aforementioned parties might enrich their understanding of the narcissistic phenomenon, as far as both the narcissist's self- and others-relation is concerned. Kierkegaard scholarship, on the other hand, will also benefit from our conclusions regarding the existential profile and dangers of aesthetic seduction which, we claim, is fundamentally narcissistic.

Concerning the current state of theoretical and scientific research, we rely on Elsa Ronningstam's exhaustive overview of the narcissistic personality (6). Ronningstam differentiates between a "healthy," an "extraordinary," and a "pathological" form of narcissism, the latter being further divided into "arrogant," "shy," and "psychopathic." Below, while uncritically adopting Ronningstam's terminology and classification, we address three particular issues: (i) whether the (in)famous protagonist of Kierkegaard's "The Diary of the Seducer" - Johannes - qualifies as a narcissist; (ii) if so, what kind of narcissism he embodies; and (iii) what contemporary (clinical) psychology could learn from his self-centered personality and its interaction with others. We analyze in detail what we believe to be Johannes's narcissistic features, ranging from personal charisma, going through grandiosity, and ending with a potentially sadistic aggressiveness. We suggest that via Johannes - also referred to as "the Seducer" - Kierkegaard

expressed, albeit in a literary-philosophical fashion, many of our current scientific hypotheses on narcissism and even managed to open new vistas worthy of exploring in a more rigorous fashion.

I. The extraordinary narcissist

A. Irresistible charisma and authentic creativity

Although they insist on its broad, variegated spectrum and nefarious effects, specialists warn that narcissism is not always negative. They claim that there exists a "healthy" narcissism which may be fundamental to our survival. Regarding the "extraordinary" version of narcissism, although not fully auspicious, it is not as ominous as it may sound. In what follows, we will see why, when asking whether the protagonist of "The Diary of the Seducer" is in any way narcissistic, the answer should start from the "extraordinary" manifestations of this psychological phenomenon. Because Johannes is anything but ordinary, we will show that he is the living embodiment of something that researchers are increasingly interested in: the irresistible charisma of narcissists. Specialists also tell us that "extraordinary" narcissists can be extremely creative; this, too, flawlessly captures part of Johannes's personality.

Let us start with the Seducer's formidable intellectual capacities. Johannes is a redoubtable polymath. He is well versed in poetry, philosophy, and Greco-Roman mythology. He knows French and is able to read Latin authors in the original language. Agronomy, engraving, and the Judeo-Christian Scripture are other fields he frequently dabbles in. Then, there's his deep interest in the paleontology of Georges Cuvier, an interest which made an author compare Johannes's diaristic jottings with "a scientific journal" (7).

Johannes's capacious intellect is doubled by equally impressive observational skills. Moreover, his experience of reality is continually filtered by what he has read and so, the results of his observations are recorded in high quality prose. To be sure, his depictions of the splendor of nature seem penned by a Romantic genius. The way he enchants women and writes letters to them appears "artistically" consummate even to

the victims. As to the domestic settings he gains access to, his meticulous attention to detail rivals that of the expert interior designer able to authoritatively assess the arrangement of furniture and the quality of light. A comparable expertise shines through his comments on the appearance of people walking on the road, travelling in a carriage, or attending a wedding ceremony. In short, everything he lives, sees, does, or writes, is imbued with aesthetic refinement.

Such aesthetically sophisticated behavior requires, however, a robust volition which the Seducer possesses to an impressive degree. Priding himself of being a literary – not mediocre – lover, Johannes feels constantly compelled to turn every moment into poetry. This urge demands self-discipline, self-limitation, and even self-denial. That explains why the Seducer is a strong advocate of both patience and temperance, praising himself for lacking the "anxiety and trembling of infatuation" or the "sweet disquietude of impatient longing." It is thus fair to say that he possesses an "objective mastery of himself," a quality so compelling that those around him also notice it.

Altogether, these qualities force us to agree with Bradley Dewey that Johannes "leads a fascinating exterior and interior life full of high-level challenge, drama, human encounters, daily testing of his commitment, talent, discipline" (8). If this is true, who could resist his charisma and extraordinary gifts?

B. The risky side of seduction

Without a doubt, the first to be fully aware of such extraordinary gifts is Johannes himself. However, below we will see how, as his self-importance increases, the Seducer showcases an almost inhuman invulnerability, by virtue of which he engages in highly questionable, risk-taking behaviors. And if we keep in mind that narcissistic personality disorder patients, too, "may be involved in risk-taking behavior due to their belief in their own indestructibility," we understand why Johannes's self-image takes on evident narcissistic overtones.

With respect to Johannes's risk-friendly nature, we should begin with his sharp wit, ruthless irony, and sardonic humor. At first sight, these attributes reflect an attractive, multifaceted

intelligence. But they can also be seen as signs of condescension, especially, if, as will be the case, Johannes does possess an inflated sense of self. Equally revealing is that the Seducer unapologetically cultivates an aesthetic existence, thereby rejecting all ethical considerations in interpersonal affairs. It is thanks to this radical aestheticism that he engages in two of the riskiest and most morally compromising behaviors: voyeurism and stalking.

Johannes's voyeuristic tendencies stem from a deep desire to look at, analyze, and appraise his victims without being seen at all. Relevant here is the Seducer's preference for streets when looking for victims. More pertinent still is his habit of randomly spying on women from a spot where he could never be discovered, which prompted a commentator to christen him an "invisible, voyeuristic observer and recorder."

A comparable fascination with disguises and invisibility fuels Johannes's recurring staking patterns. Given his proficient observational skills, he is most adept at meticulously mapping locations, following girls without being detected, and even eavesdropping on them. To give just one example, as regards the main feminine character of The Diary – a girl by the name of Cordelia Wahl – Johannes confesses that he "met her three times" in a single day. Moreover, every single time he knew "about her every little outing, when and where [he] shall come across her," not to mention the particularly chilling detail that this "has cost [him] several hours of waiting."

II. The arrogant, domineering narcissist

When experienced by a narcissist, invulnerability, argue clinical psychologists, is inseparable from an inflated self-importance. If there is a common thread that brings together every single manifestation of narcissism, that is by far an inward sense of superiority and uniqueness, on which the narcissistic person conceitedly insists both in their self-perception and intersubjective relations. Despite their frequent disagreements, psychologists and psychopathologists have reached a relative consensus that narcissism represents a kind of self-esteem dysregulation which expresses itself through grandiosity

(9,10). Among the indisputable signs of narcissistic grandiosity, they include "[a] self-centered and self-referential behavior, a boastful or pretentious attitude, or the exaggeration of talents and achievements." Of course, this ostentatiously arrogant attitude can be best seen in the narcissist's interaction with others, especially via an overwhelmingly entitled behavior (11,12). In this section, we discuss four distinct traits that render Johannes a good candidate for "arrogant narcissism:" (a) an inflated sense of superiority, which triggers exhibitionism and grandiose fantasies; (b) a grandiosity that invariably and unequivocally seeks confirmation via serial erotic encounters; (c) a constant use of deceitfulness and lies to attain one's goals; (d) a controlling and manipulative behavior towards others, which evinces a crippling incapacity for any ethical commitments.

A. The Seducer's delusional, exhibitionistic arrogance

From the foundational, ancient Greek myth of Narcissus to every single psychology dictionary today, the term "narcissistic" has been explained in terms of self-centeredness. Narcissistic is that individual who is, not simply self-loving, but also self-obsessed and, of course, condescending in all encounters with others.

Tellingly enough, whenever he talks about himself, the words Johannes chooses are always positive, superlative, lacking every trace of doubt. He is utterly amazed by his own "brilliance, wit, esthetic objectivity." Concerning his actions, he admits that "at the bottom of what I am doing there is truth." Furthermore, this inner sense of superior uniqueness fuels delusional fantasies of grandeur. For how else can we interpret statements like, "I...can regard myself as a favorite of the gods;" or, "How vigorous, sound, and happy is my soul, as present as a god"?

Based on such self-representations as either elect or divine, Johannes insists that the ultimate aim of his seduction is not to possess a woman physically. Instead, he wants to transfigure her *interiority*, to elevate her self-consciousness to a higher plane. This means that Johannes's grandiosity is never self-sufficient. It continually needs the rapturous affirmation and confirmation of other individuals, be they strangers, friends, or

seduced victims. This constitutes yet another narcissistic feature since "[admiring] attention from others serves to enhance the [narcissist's] grandiose self-experience." Johannes openly recognizes he cares for others' view of him and, if he is not getting enough attention from them, he will forcefully seek it. His favorite means in this regard is chasing young women.

Yet, once again, here his tactics are never simple, consisting of incredibly elaborate courtship maneuvers. Sometimes these simultaneously involve several people, e.g. acquaintances and relatives. Other times, Johannes's enchantment entails a very intricate interaction between seducer and seduced, which presupposes an esoteric foreknowledge of body language, wherein the eyes take center stage. Johannes also uses elegantly written letters to communicate feelings and hopes, and by virtue of his self-infatuation, he expects victims to fully understand his literary allusions. The same applies to the meaning of his actions which involve carefully chosen backgrounds, intricate placements of bodies or furniture within rooms, speechless visual exchanges replete with innuendoes and hidden messages.

Following Louis Mackey, it is thus safe to assume that what he does around others is intended as full of "tact, diplomacy, and skill" (13). Equally obvious is that the Seducer's *modus operandi* makes the most of his authentic charisma. However, as we interpret them, these outstanding social skills possess an unmistakably *exhibitionistic* flavor, albeit of a first-class order. To boot, we hold that Johannes needs such exhibitionistic features to ensure the success of his *erotic* exploits.

B. A self-centered and pleasure-driven eroticism

The hard narcissistic core of the Seducer's personality issues from the fact that none of his exploits are fundamentally about the other person. Instead, they are to fuel his grandiosity and an incredibly efficient, hedonistic machinery. Concerning hedonism, we should first give credence to the testimony of a friend named A. (the alleged pseudonymous editor of The Diarry), who states that Johannes's "whole life was intended for enjoyment." A. also clarifies that

"[as] soon as actuality had lost its significance as stimulation, [Johannes] was disarmed;" which is probably why boredom is his sole enemy.

At the same time, the enjoyment Johannes is avidly pursuing does not have a purely ethereal quality. After all, his last name is replaced by Kierkegaard with the suggestive title, "the Seducer," which accurately captures the essence of his life. From the very first pages of The Diary the reader realizes that, as practiced by Johannes, seduction revolves around the opposite sex. Johannes unambiguously informs us that "the only thing that has amazed me in the world, a young girl is the first and will be the last." Equally telling are the attributes he is drawn to in girls: virgin, healthy, blooming, cheerful, happy, burgeoning. Note that in the case of such persons – i.e., young, inexperienced, and probably vulnerable - the success of his seduction is almost always guaranteed.

As to the exact intentions of seduction, Johannes's own testimony leaves much room for interpretation. We already alluded to his stated goal: to enlarge the inner world of the seduced, to engender in her that capacity for reflection and that self-awareness which will allow her to lead a more existentially fulfilled life. This sounds abstract and rather unconvincing, which is probably why the reader suspects that something much darker may be at play here. Indeed, should we conclude that the unstated aim of Johannes's seductive games, elaborate and inscrutable though they may be, is *sexual* gratification, we would not completely miss the mark.

On the contrary, that Johannes's seduction must have included a sexual dimension is confirmed, we argue, in four different ways. First, we have his own, carefully veiled, confessions which do suggest the narcissistic-hedonistic use of women for carnal gratification. In a rather melancholy vein, Johannes asks himself: "Why does a young girl have such beauty, and why does it last such a short time?" His answer speaks volumes: "it is really none of my business. Enjoy-do not chatter." He also declares that "When a girl has given away everything, she is weak, she has lost everything." Were we to read the Seducer's last two diary entries with this belief in mind, we could safely assume that the loss of Cordelia's appeal, too, occurred due to the physical consummation of their affair (14). Next, there is the Seducer's lewdness. Note-worthy here is that Johannes conceives himself as "sheer sensuousness." More often than not, he acts, thinks, and fantasizes like the Freudian id, as it were. When looking at a woman's clothes, for example, he seems fond of divining the bodily forms that hide behind them. In this respect, he appears particularly attracted to small waists, prominent bosoms, and bent-over bodies. In Cordelia's case, he speaks freely about the physical attraction between them and even muses on the quality of her kisses.

Thirdly, the supposition that Johannes's perception of womanhood may be primarily carnal, did not escape those around him, either. To return to A., he says that Johannes knew "how to bring a girl to the high point where he was sure that she would offer everything. When the affair had gone so far, he broke off." Here, A.'s view is confirmed by Cordelia's own letters which strengthen the longstanding suspicion that her relation to Johannes culminated in physical intercourse. Should we need a third opinion, Victor Eremita (the supposed editor of *Either-Or* as a whole) may offer it when he alludes to possible parallels between Johannes and Don Giovanni.

Fourthly and finally, many Kierkegaard students are convinced that the Seducer's declared idealism was but a thinly veiled ruse to possess his victims. To give just a few examples, John Elrod states that Johannes was not shy to envision "sexual conquest" (15), while Kresten Nordentoft takes note of Johannes's success in transforming Cordelia into "an erotically charged beauty" (16). In his turn, Louis Mackey holds that the Seducer's behavior is driven by "carnal climax," a peremptory example of which being the "enthusiastic defloration of Cordelia." Referring to Johannes's sexual penchants, Bradley Dewey adds that the Seducer "no doubt got what he wanted." Last but not least, George Connell goes so far as comparing Johannes to a sex-dependent vampire, for whom "seduction is the only activity that can rejuvenate [his] soul" (17).

C. The "slippery" side of seduction

However, one of the key reasons why we cannot identify the exact intentions behind Johannes's seduction is his deployment of stealthy, untrustworthy poses. To put it bluntly, deceitfulness and mendaciousness are fundamental to Johannes's pursuits, whatever those may be. In our estimation, these are additional traits of his narcissistic personality.

Starting with the seemingly endless capacity to deceive, we should mention that Johannes masters to perfection the art of secrecy and cunningness, be it in daily conduct or verbal communication. His refined taste demands cleverly constructed dramas which, in turn, force him to interact with his victims as a masterful deceiver. This aligns with his overall principle that the aesthetic interaction with any girl inevitably ends with her being deceived, and Cordelia is no exception. That is why the engagement with her remains "merely a simulated move," and so, any trace of earnestness therein must be carefully avoided.

But deception is not the only tool in Johannes's kit. The Seducer will not hesitate to resort to outright lies to fulfill his hidden agenda. Amongst the most egregious instances of lying, we count his statements about being "honest and reliable," and having "never deceived anyone who has confided in me." In contrast, his diary represents an open, huge, and unapologetic testimony of the ruthless deception of several people who have sincerely trusted and confided in him. Vis-à-vis Cordelia, he claims to be madly in love, whereas his diary abounds in confessions about being tempted by other girls. The same applies to one of his closest friends, Edward, to whom we shall soon return. Lastly, we have the issue of the Seducer's wealth. On the one hand, he claims to "own nothing" and even to "desire to own nothing." On the other hand, he admits he owns a "country house," sparing no expense to refurbish it just "to set the proper mood" of a date with Cordelia. No less important is that Johannes affords a personal servant, who deeply reveres his employer and, interestingly enough, is "a perfect virtuoso" in following instructions.

D. A controlling, manipulative and exploitative seduction

The deceitful and cunning behavior takes center stage in any scientific discussion of narcissism (18). Moreover, from the lack of any guilt or regret for such behavior, scholars infer an impaired capacity for empathy, more exactly, the absence of a respectful, responsible, and sustained commitment to other people (19). Part of this absent empathy is yet another, crucial manifestation of narcissistic cold-heartedness: the obsessive desire for control and manipulation (20.21.22).

The existence of controlling tendencies in Johannes did not escape the attention of interpreters who presume a direct connection between the Seducer's cavalier experimental psychology and his manipulative egotism. However, the argument we wish to put forward here is that Johannes's manipulations: (i) represent the most convincing proof of "arrogant narcissism" in Johannes's personality; (ii) have a bewildering variety of expressions (not all captured by contemporary psychological science); and (iii) foreshadow the pathological or "psychopathic" side of Johannes's overall narcissism.

What is missing from most scientific accounts of narcissism (and plays a central role in Kierkegaard's portrait of Johannes) is that to gain control over others, the Seducer must exercise strict control over himself by suppressing any spontaneity or natural reaction. Otherwise stated, he must approach what is traditionally considered impulsive or natural as a calculated, carefully crafted endeavor. As as we see it, self-control represents both an offshoot of the Seducer's strong will and an indispensable condition for manipulating his victims.

Fundamentally striking about Johannes's manipulative behavior is his irrepressible need to control the external environment - which is another feature ignored in narcissism scholarship. Here, we should return to the fact that Johannes filters absolutely everything through the lens of aesthetic enjoyment. For him, the real world is just a reservoir to exploit at will, the source of aesthetic stimuli for enjoyment. Consequently, Johannes reduces the external world to an endless occasion for egotistic (or narcissistic) manipulation. As he cannot leave anything to chance, the outer environment is a good place to start (a possible sign of narcissistic hyperreactivity). Relevant in this regard are the Seducer's voyeurism and stalking habit, both related to the meticulous mapping - and whenever possible, deliberate manipulation – of the victim's surroundings, be they a street, a house, an apartment, or a parlor.

At the same time, Johannes achieves the greatest successes when he tries to control his fellow humans. Psychopathologists would be very familiar with his initial tactic. They call it, idealization which is arguably an unerring means to make victims surrender completely to the narcissist's will. Surprisingly or not, psychological studies have shown that narcissism – especially in its "extraordinary" expression – and idealism are not necessary opposed to one another. Here, again, Johannes does not disappoint. Words like "idea" or "image" surface in a positive manner throughout the entire Diary; so much so that Johannes appears unable to survive without "the joy that is in the idea."

Nonetheless, what is unique about Johannes - a feature clinical psychologists should pay more attention to - is that, albeit mediated by his idealism, the process of idealization starts with himself. That is to say, before placing the objects of his seduction on an unworldly pedestal, the Seducer wishes to turn his own self first into an ideal, literary figure. Eric Downing has documented the multiple and incredibly complicated ways in which Johannes adapts his personal experiences to literary models and language. As he explains, Johannes "deliberately strives to live his life as literature, to realize a peculiarly literary existence in the course of his erotic pursuits." In the final analysis, the Seducer's hope is "to fashion a literary artwork out of himself, to regulate his erotic activity by the rules and ratio [method] of ars" (23).

Johannes's tendency to present himself as a literary artwork which replaces his immediate self, is intimately tied to the desire to transform his victims into literary masterpieces, as well. This process is obvious in the case of Cordelia, who suffers a "mythification" of sorts at the hands of her seducer. According to Downing, she becomes "the prime example of [Johannes's] idealizing artefaction, as he skillfully labors to fashion or counterfeit her into the image of the "picture" he secretly cherishes." Hence Downing's dual conclusion that "the desire in Johannes' seductive scheme [is] not for a woman, even for a composite woman, but for a picture, an artwork;" and that the Seducer's

overarching goal is "to implant within [Cordelia] a specific literary ideal of love and of him as lover."

Inevitably, the process of idealization ends up in disappointment, whose direct consequence is known to students of narcissism as devaluation. For Johannes, the particularity and concrete imperfections of actual women are no match to the perfection of the ideal. No woman, Cordelia included, is sufficient on her own to embody an ideal content. However, the dangerous game - which Johannes plays remorselessly - is to shape an aesthetic artwork out of a living human being. The disturbing consequence of the fact that the Seducer prefers ideal images to concrete, living individuals is that he has to treat others as if they were dead. In this regard, the Seducer may be a diabolical version of Pygmalion: someone who disregards the ineradicable uniqueness of the particular person in order to preserve her mythical, narcissistically generated image.

Integral to everyone's unrepeatable individuality are their vulnerabilities, flaws, fears, concerns, insecurities, etc. These are Johannes's preferred target because, as any experienced narcissist knows, only defenseless people are guaranteed prey. Therefore, from the very beginning Johannes will employ a very effective, clinical expertise to uncover the other's personal history and weaknesses. This will allow him, not just to charm the victim, but also to subtly infiltrate their entire being. Despite his claims to the contrary, the Seducer never really loves his conquests, nor does he care to help them overcome psychological difficulties. Instead, the latter are used as a means to satisfy his needs, namely, to extract from the victim the satisfaction of carnal desire or to pedestalize her for aesthetic contemplation. Occasionally, given his matchless cunning, Johannes even resorts to self-debasement in order to gain a woman's trust. Yet, once past the entry to their soul, he is in full possession of the victim. Here, his psychological manipulation proves so adroit that the victim does not even suspect she's completely lost her freedom and identity. This existential vampirism leads us straight into the dungeons of Johannes's world, which is where we will turn our attention next.

III. The aggressive-psychopathic narcissist

A. The other's alienation and commodification

So far, we have only hinted at Johannes's immorality. It is now time to confront it head-on by addressing two of the most destructive effects Johannes has on others: the loss of their distinct selves and their instrumentalization. Scholars have amply documented the psychological damage narcissists inflict on whomever they run into: relatives, children, parents, partners, friends, coworkers, and oftentimes, mere strangers. Victims complain, amongst others, that no mater how short or long, the interaction with a narcissist culminates in a complete loss of identity by having been transmogrified into "narcissistic supply." The existential harm victims describe resembles psychic death, while their emotions range from disbelief and random bouts of rage to feelings of unforgivable shame, isolation, and (suicidal) depression (24,25,26,27,28,29).

At this point, it may not surprise anybody that almost every one of these symptoms can be detected in Johannes's victims. Other symptoms are unknown even to clinical psychologists, which is why they should find them within the pages of The Diary. To begin with, Johannes infantilizes Cordelia. Claiming to be charmed by her youth, innocence, and naivete, he treats her like a child to be initiated into erotic matters for the sake of a putative expansion of her self-awareness. Equally grave is her privation of personal freedom. Cordelia is sometimes depicted as completely fenced in by Johannes's seductive words, acts, or strategies, while her seducer is utterly intoxicated with such domination. The Diary abounds in entries which detail his arresting gaze or irresistible presence. By consequence, in his presence everyone without exception - Cordelia's aunt included - behaves as if "bewitched."

As a matter of fact, anyone coming into contact with Johannes feels as if possessed by an alien entity. Cordelia admits she "always...was enraptured by him," but his hold on her became so profound that, when he wanted to break up the engagement, he made *her* take the initiative, after persuading her that marriage is not as ex-

hilarating as unconventional sex. Even when painfully aware of her self-alienation, Cordelia remains hopelessly attached to him. "Flee where you will," she exclaims vehemently, "I am still yours; ... in the hour of death, I am yours." In the end, Cordelia's entire being merges with an all-encompassing love for the very person who has seduced, betrayed, and abandoned her. Her loss of self is so profound that in a letter to A., she writes: "every thought I think is only through him."

Things can take an even more sinister form inasmuch as the inner turmoil induced by the Seducer leads to self-denigration. Cordelia is again a case in point. She openly confesses to Johannes: "you have become everything to me, so that I would rejoice solely in being your slave." A similar self-debasement prompts her to ask for forgiveness "for continuing to love [him];" or to promise to keep her affection intact until he'll be "tired of loving others." Cordelia's mental degradation reaches such heights that A. cannot help but notice it and starts pitying her.

Here it should be emphatically stated that Johannes pursues a democratic stance when it comes to choosing his victims and enablers. Kierkegaard scholars tend to downplay, if not completely ignore, the fact that the Seducer alienates and manipulates, not only women (i.e., the primary object of his interest), but also men, if these happen to serve his overall purpose or help him bring about the realization of his strategies. Thus, Johannes's seduction corrupts everybody's mind. He breaks the spirit of women and men alike. This self-estrangement happens through the commodification or instrumentalization of human alterity. We have said that, due to his unconditional commitment to a hedonistic. erotic aestheticism, Johannes is not interested in the uniqueness and existential dignity of the other. He constantly treats others as mere means to either follow an ideal goal (i.e., turning his life into an authentic artwork) or to satisfy his secret carnal desires.

In short, Johannes approaches the other as a mere object, as someone completely devoid of autonomy, agency, and moral worthiness. Needless to add, the primordial and perennial target of Johannes's seduction is and remains the *feminine* other. In this regard, almost every page of

The Diary is an irrefutable proof of the commodification and objectification of women. Understandably enough, this reality prompted feminist scholars to use terms like "thievery," "shallow [and parasitic] desire," and the "continuum of vice" (30) to characterize Johannes's personality, philosophy, and actions.

But no less evident, though equally degrading, is Johannes's commodification of the male other. Edward Baxter's example is paramount in this regard. Edward is a naïve young man who falls in love with Cordelia. However, his sincere affection becomes a mere cog in Johannes's intricate machinery built to seduce, control, possess, and finally discard Cordelia. Consider Johannes's plan to have Edward propose to Cordelia, to then approach Cordelia's aunt and ask for her niece's hand, after which he tells Edward it was the aunt's idea that he marry the girl. Consider also Johannes's equation of Edward with a child: or his derisive remarks about Edward's awkwardness and embarrassment in Cordelia's presence, despite claiming to be his "mentor;" or his caricature of Edward who is compared with a famous comic character at the time, named Fritz. Taken together, these attitudes and behaviors denote a *universal* instrumentalization of the other, confirming once again that any contact with a narcissist of Johannes's caliber is, for both women and men, the royal way to perdition.

But who else than a narcissist with potentially psychopathic tendencies would have such an effect on others? Specialists argue that in its most extreme forms, narcissism can become aggressive either in a passive way or through an explosive behavior (30,31). At this juncture, the question becomes: what kind of aggression does our protagonist display?

B. Seducer's carefully designed aggression

Were we to ask Johannes himself, what he would have to say would not be very reassuring. "I might think of myself as Mephistopheles," he confesses without any hesitation or care. Somewhere else, while imagining himself speaking to a potential victim, he exclaims: "Watch out; the monster is approaching." If the same question were posed to his friend, A., he would readily agree that Johannes is a "corrupt man." As to his most famous victim, Cordelia, she would use

such words as "my enemy, my murderer, [...] the tomb of my joy, the abyss of my unhappiness," with reference to her seducer. The verdict of scrupulous Kierkegaard commentators would also be unambiguously negative. By far, the vast majority use such labels as "evil," "a complete scoundrel," "a social deviant," a "lifeless parasite," a "criminal," to capture his nature.

At the same time, our judgment of Johannes's aggression should be more nuanced. After all, he does possess commendable qualities, some of which have already been mentioned, while others did not escape scholars' attention. Moreover, despite his truly detestable personality, worldview, and habits, the Seducer's influence on others might not be completely negative or destructive (32). Notwithstanding, granted that unethical aestheticism, lack of empathy, and cruel instrumentalization of others remain the defining features of his personality, what can we say for sure about his hostility and how does that reflect on his narcissism?

Let us note first that Johannes does not ever manifest himself violently in the physical sense. We never see him being resentful, furious, or hateful, either. Given his powerful self-control and aristocratic airs, all of these reactions would be unthinkable. Rather, it is our argument that the Seducer's cruelty is of a primarily psychological nature, which, of course, does not make it less threatening. The psychopathic dimension of his narcissism consists, not so much in possessing bodies - although we saw that the Seducer does not shy away from doing that, too - but rather, in controlling, manipulating, and reshaping his victims' interiority in the image of his aesthetic ideals. However, in so doing, the Seducer ends up defiling or even crushing the other's *spirit*. Even more, knowing that suffering (or the "dark side" of life) often tears an individual apart, and still continuing to do what he does, makes us wonder whether his cruelty does not have a sadistic tinge to it.

Two distinct metaphors emerge when envisaging the "violent" side of seduction. The first one is that of war. When he is by himself, Johannes does not conceive the seductive undertaking like a dance, wherein both partners enjoy an equal share of grace, control, and submission. Rather, he imagines his affair with Cordelia as a kind of

war, wherein, predictably enough, he has the upper hand and is the guaranteed victor. The second metaphor – which is much more apposite – is that of hunting. Johannes loves to hunt, which is why treating women as a kind of aesthetic prey comes naturally to him. It also seems that his preferred method is that of ambush through disorientation. He seeds chaos wherever his prowls take him, inducing, as already noted, exasperation, alienation, and self-denigration in his victims. To use Dewey's wonderful wording, "Johannes can be seen as ... as a professional hunter. The aesthete must constantly keep himself at the ready-weapons primed, skills hone[d], reflexes sharp. He must gather needed intelligence about his next quarry, design campaigns, execute plans with precision and stealth, make the kill, then cover his tracks expertly as he withdraws." Were we ever to suspect that these might be exaggerations, consider Johannes's realization that the sexual enjoyment obtained by tricking a woman into thinking she has fallen in love with her seducer, can be thought as a psychological rape; and yet that is exactly what he is doing all along.

Conclusions

Suggesting that there is something narcissistic about Johannes is not completely new. Eric Downing, for instance, noted that overall, the Seducer's "relationship with Cordelia is only a complexly narcissistic conversation with himself." However, despite a high interest in the self-other dynamic (33,34,35), no commentator has shown whether Johannes suffers from what contemporary psychopathology calls narcissism, and if so, what kind. We argued that Kierkegaard's "reflective seducer" displays several, unambiguous symptoms of narcissism, some of which are essentially pathological. We showed why, following Elsa Ronningstam's terminology, Johannes is an "extraordinary and arrogant" narcissist with some psychopathic traits. More to the point, the "extraordinary" side of Johannes's personality consists of genuine charisma based on his exceptional, intellectual-artistic capacities, as well as aesthetic idealism. Inasmuch as he swears by an inflated sense of superiority and entitlement; condescension and exhibitionism in interpersonal relations; grandiose fantasies; and a controlling behavior vis-àvis others; it is safe to assume that the core of the Seducer's narcissism is "arrogant." Finally, since guilt and remorse remain completely foreign to his nature and given his exploitative-aggressive stance towards other people's sense of self (possibly hiding some sadistic tendencies), Johannes's narcissism undoubtedly extends into "psychopathic" territory.

Now, concerning the possible lessons that "The Diary of the Seducer" has to offer vis-à-vis the narcissistic phenomenon, we claim that these are:

- (1) Narcissism should be understood on a rather large and multilayered continuum.
- (2) Johannes's personality shows that it is possible that the same individual has symptoms typical of divergent forms of narcissism, and not all of them are absolutely detrimental to oneself.
- (3) However, in relation to human alterity, the narcissistic behavior is almost always harmful, if not downright abominable.
- (4) The narcissist targets the other's psychology. He violates the victim's inner life (especially, one's identity and self-esteem) instead of their body or physical integrity. That is why the narcissistic trauma is of an existential, if not spiritual, nature.
- (5) Once it takes on pathological valences, narcissism may prove incurable. (The Diary shows no sign of Johannes starting to take responsibility for his actions, express shame for their destructive repercussions, or seek any cure for his obsessive hedonism.)
- (6) Narcissism could be a defensive mechanism meant to carefully hide certain vulnerabilities which one is incapable to come to terms with. In this respect, we could only speculate that Johannes's unavowable vulnerabilities might come from: emotional dysregulation (36,37); a fragmented or no self; isolation (seen as an immediate consequence of his antisocial behavior): not being in full control (neither of the environment, nor his victims, nor even himself); enjoying a prudently veiled masochism; having to face the mere passage of time and succumbing to the bodily indignities of old age; or even struggling, as some scholars surmise, with impotence or compulsive onanism (38,39).
- (7) There exists a purely pathological type of narcissism, which contemporary psychiatry calls,

the narcissistic personality syndrome. Considering the key thesis of this study, the question becomes whether Johannes is afflicted by this particular syndrome. Many scholars would answer in the affirmative, especially those who claim that the Seducer suffers from "a pathological masculine heterosexuality," or "an *exacerbatio cerebri*," or a "conscious madness," or even "schizophrenia." At the same time, one still has to explain how it is possible that such an individual is incredibly intelligent, charming, urbane, composed, not to mention his literary accomplishments. Perhaps, both the Seducer and the narcissistic phenomenon are ultimately an enigma which continues to haunt scientists and hermeneuts alike.

Acknowledgement

This article was supported by The Research and Development Agency (APVV-22-0204 Religiosity and Values of Permanent Sustainability) as well as the EU NextGenerationEU through the Recovery and Resilience Plan for Slovakia under the project: Søren Kierkegaard within the East-European Context, No. 09IXX-03-V04-00594 and by Research and Development Agency (APVV-22-0204 Religiosity and Values of Permanent Sustainability).

References

- 1. KRALIK, R. et al. 2024. Narcissistic Privacy as a Barrier to Socialization. In: *Clinical Social Work and Health Intervention*, vol. 15, no. 4, pp. 44 52.
- 2. DURVASULA, R. 2019. Don't You Know Who I Am? How to Stay Sane in an Era of Narcissism, Entitlement, and Incivility, New York/Nashville: Post Hill Press.
- 3. VAKNIN, S. 1999. *Malignant Self-love:* Narcissism Revisited, Skopje: Narcissus Publications.
- KRALIK, R. 2024. Narcissistic Call for Metaphysics. In: European Journal of Science and Theology, vol. 20, no. 6, pp. 1-10.
- KIERKEGAARD, S. 1987. The Seducer's Diary. In: Kierkegaard, *Either/Or*. Part 1, tr. Howard V. Hong and Edna H. Hong. Princeton: Princeton University Press, pp. 301-445.
- 6. RONNINGSTAM, E. 2005. *Identifying and Understanding the Narcissistic Personality*,

- Oxford: Oxford University Press, pp. 69-112.
- 7. GARFF, J. 2005. *Søren Kierkegaard: A Biography*. tr. by Bruce Kirmmse, Princeton: Princeton University Press.
- DEWEY, B. 1995. Seven Seducers: A Typology of Interpretations of the Aesthetic Stage in Kierkegaard's The Seducer's Diary. In: *International Kierkegaard Commentary. Either/Or* Part I, ed. by Robert L. Perkins, Macon: Mercer University Press, pp. 159-199.
- RHODEWALT, F., MORF, C. C. 1998. On self-aggrandizement and anger: A temporal analysis of narcissism and affective reactions to success and failure. In: *Journal of Personality and Social Psychology*, vol. 74, pp. 672–685.
- RONNINGSTAM, E., GUNDERSON, J. 1990. Identifying criteria for narcissistic personality disorder. In: *American Journal* of *Psychiatry*, vol. 147, pp. 918–922.
- COOPER, A. M. 1998. Further developments of the diagnosis of narcissistic personality disorder. In: *Disorders of narcissism: Diagnostic, clinical, and empirical implications*, ed by E. Ronningstam, Washington: American Psychiatric Press, pp. 53–74.
- 12. DOWSON, J. H. 1992. DSM-III-R narcissistic personality disorder evaluated by patients' and informants' self-report questionnaires: Relationship with other personality disorders and a sense of entitlement as an indicator of narcissism." In: *Comprehensive Psychiatry*, vol. 33, no. 6, pp. 397–406.
- MACKEY, L. 1971. Kierkegaard. A Kind of Poet, Philadelphia: University of Pennsylvania Press.
- 14. BERRY, W. 1995. The Heterosexual Imagination and Aesthetic Existence in Kierkegaard's Either/Or, Part One. In: *International Kierkegaard Commentary*. Either/Or Part I, ed. by Robert L. Perkins, Macon: Mercer University Press, pp. 201-228.
- 15. ELROD, J. 1975. Being and Existence in Kierkegaard's Pseudonymous Works, Princeton: Princeton University Press.
- 16. NORDENTOFT, K. 1978. *Kierkegaard's Psychology*, tr. Bruce Kirmmse, Pittsburgh: Dusquense University Press.

- 17. CONNELL, G. 1985. To Be One Thing: Personal Unity in Kierkegaard's Thought, Macon: Mercer University Press.
- 18. HARPUR, T. J. et al. 1988. Factor structure of the psychopathy checklist. In: *Journal of Consulting and Clinical Psychology*, vol. 56, pp. 741–747.
- RONNINGSTAM, E. et al. 1995. Changes in pathological narcissism In: *American Jour*nal of Psychiatry, vol. 152, pp, 253–257.
- MOREY, L. C., JONES J. K. 1998. Empirical studies of the construct validity of narcissistic personality disorder In: *Disorders of narcissism: Diagnostic, clinical and empirical implications*, ed. by E. Ronningstam, Washington, DC: American Psychiatric Press, pp. 351–374.
- 21. SVODOBA, M. et al. 2024. Manipulation as a risk factor for psycho-social health In: *Acta Missiologica*, vol. 18, no, 1, pp. 43-54.
- 22. TKACOVA, H. et al. 2024. Where there is smoke, there must (not) be fire: An analysis of the effects of Fake News on recipients in the online environment. In: Świat I Slowo / World and Word, vol. 43, no. 2, pp. 159-176.
- 23. DOWNING, E. 1993. Artificial I's. The Self as Artwork in Ovid, Kierkegaard, and Thomas Mann, Tübingen: Max Niemeyer Verlag, pp. 75-127.
- 24. DURVASULA, R. 2015. Should I Stay or Should I Go? Surviving a Relationship with a Narcissist, New York/Nashville: Post Hill Press.
- 25. DURVASULA, R. 2024. *It's Not You: Identifying and Healing from Narcissistic People*, New York: The Open Field.
- BARTOSKOVA, M. 2015. Depression as an Escape from Burden of Life. In: *Journal of Education Culture and Society*, vol. 6, no. 1, pp. 101-107.
- 27. KOCHERHINA, I. 2018. Types of emotional self-regulation of women who have suffered from psychological abuse in the family. In: *Journal of Education Culture and Society*, vol. 9, no. 2, pp. 81-92.
- NIGAM, S., SOPERNA, N. 2017. A Study of the Understated Violence Within Social Contexts Against Adolescent Girls, In: *Jour*nal of Education Culture and Society, vol. 8, no. 2, pp. 29-41.

- 29. SANECKA, E. 2017. The dark side of social media: Associations between the Dark Triad of personality, self-disclosure online and selfie-related behaviours. In: *Journal of Education Culture and Society*, vol. 8, no. 2, pp. 71-88.
- HALL, A. L. 2002. Kierkegaard and The Treachery of Love, Cambridge: Cambridge University Press.
- 31. KEMBERG, O. F. 1998. Pathological narcissism and narcissistic personality disorder. Theoretical background and diagnostic classifications. In: *Disorders of narcissism: Diagnostic, clinical and empirical implications*, ed. by E. Ronningstam. Washington, DC: American Psychiatric Press, pp. 29–51.
- 32. STAN, L. 2016. Fertile Contradictions. A Reconsideration of The Seducer's Diary. In: *Kierkegaard Studies. Yearbook*, Berlin: De Gruyter, pp. 75-97.
- 33. MAHRIK, T. KRALIK, R. 2024. Divine Command Theory Potentiality and Limits. In: *Journal of Education Culture and Society*, vol. 15, no. 1, pp. 19-28.
- 34. MARTIN, J. G. et al. 2021. The Kantian Ethical Perspective Seen From The Existential Philosophy Of Søren Kierkegaard's Victor Eremita. In: *Ethics & Bioethics (in Central Europe)*, vol. 11, no. 1–2, pp. 48–57.
- 35. BINETTI, M. et al. 2021. Same and Other: from Plato to Kierkegaard. In: *Journal of Education Culture and Society*, vol. 12, no. 1, pp. 15-31.
- COOPER, A. M., RONNINGSTAM, E.1992. Narcissistic personality disorder. In: A. Tasman & M. Riba (Eds.), In: American Psychiatric Press review of psychiatry, vol. 11, pp. 80–97. Washington, DC: American Psychiatric Press.
- 37. KLYMENKO, M. 2019. Types of narcissistic self-regulation in the context of personal fulfillment. In *Journal of Education Culture and Society*, vol. 10, no. 2, pp. 85-102.
- 38. LEON, C. 1995. The No Woman's Land of Kierkegaardian Seduction." *International Kierkegaard Commentary. Either/Or* Part I, ed. by Robert L. Perkins, Macon: Mercer University Press, pp. 229-250.
- 39. EATSON, R. 1985. The Seducer and the Seduced. In: *Georgia Review*, vol. 39, pp. 353-366.

Parenta Awareness of Care for a Child with Gastroenteritis

A. Stofilova (Andrea Stofilova), S. Putekova (Silvia Putekova)

University Hospital Trnava, SK

Original Article

University of Trnava, Faculty of Health and Social Work, SK

St. Elizabeth University of Health and Social Work, Bratislava, Faculty of Health and Social Work St. Ladislav in Nove Zamky, SK

E-mail address:

andreastofilova@gmail.com

Reprint address:

Andrea Stofilova University of Trnava, Faculty of Health and Social Work Univerzitne namestie 1 918 43 Trnava Slovakia

Source: Clinical Social Work and Health Intervention Volume: 15 Issue: 5

Pages: 72 – 80 Cited references: 14

Reviewers:

Michael Costello University of scranton school of education, USA Selvaraj Subramanian SAAaRMM, Kuala Lumpur, MY

Keywords:

Gastroenteritis in children. Specifics of caring for a child with gastroenteritis.

Publisher:

International Society of Applied Preventive Medicine i-gap

CSWHI 2024; 15(5): 72 - 80; DOI: 10.22359/cswhi_15_5_09 © Clinical Social Work and Health Intervention

Abstract:

Objective: Gastroenteritis is a common illness affecting children and requires proper care to prevent complications. This study aimed to determine the level of parental awareness about caring for a child with gastroenteritis.

Methodology: We conducted the research using a quantitative method in the form of a self-constructed questionnaire. A total of 52 respondents participated in the study, with a purposive sample consisting of parents of hospitalized children at the pediatrics clinic of the Faculty Hospital in Trnava. The questionnaire was distributed between October and December 2023. The return rate of the questionnaire was 100%. We evaluated the questionnaire using Student's t-test and One-Way ANOVA test.

Results: Our findings indicate that most parents have knowledge about gastroenteritis, recognize its symptoms, and

understand the nursing care procedures for a child with this condition. However, despite these findings, we identified deficiencies in the awareness of nursing care procedures for a child with gastroenteritis.

Conclusion: Our research found no significant differences in parental awareness regarding place of residence, number of children in the household, level of education, and field of work.

Introduction

Acute gastroenteritis is a common illness that occurs in people of all age groups and can have potentially serious complications in young children and the elderly, who are susceptible to dehydration. Since its identification in the early 1970s, it has become a leading cause of gastroenteritis worldwide. Among the main enteric viruses, rotaviruses tend to affect young children, while noroviruses are problematic for people of all ages (Bánayai, Estes et al., 2018).

Gastroenteritis (GE) is defined as a condition associated with symptoms of diarrhea or vomiting resulting from a non-inflammatory infection in the upper small intestine or an inflammatory infection in the large intestine. These infections can be caused by bacteria, viruses, or parasites; however, in many cases, no specific pathogen has been identified (Barrett and Fhogartaigh, 2017).

Acute gastroenteritis remains a major cause of morbidity and mortality in children, especially in resource-limited countries. Although it is often a mild and temporary illness, GE is one of the leading causes of hospitalization and is associated with a significant disease burden. Each year, approximately 10.6 million children worldwide die before reaching the age of five, with gastroenteritis alone responsible for nearly 20% of these deaths (Ciccarelli, Stolfi et al., 2013).

The most common cause of dehydrating GE in children under five years of age worldwide is the rotavirus, which belongs to the group of double-stranded RNA viruses from the Reoviridae family. Children infected with this virus often suffer from severe watery diarrhea, vomiting, mild to moderate fever, and abdominal pain. GE symptoms usually resolve within 3 to 7 days, with a relatively short incubation period of 1 to 3 days (Hsing-Chen, Meng-Tsen et al., 2019).

In Slovakia, 10,153 cases of gastroenteritis were reported in 2022, with rotavirus being the most common cause, followed by norovirus and adenovirus. The highest morbidity was recorded in the Prešov region with 269.92 cases per 100,000 inhabitants, and the lowest morbidity was in the Trnava region with 144.17 cases



Question	n	%		
When did you first encounter the term gastroenteritis?				
– From a pediatrician	12	23.1		
 From social networks 	10	19.2		
 When your child first encountered this illness 	30	57.7		
Did your pediatrician inform you that it is possible to vaccinate?				
– Yes	13	25.0		
Did your pediatrician inform you that despite vaccination?				
– (No response)	22	42.3		
– Yes	13	25.0		
– No	12	23.1		
– Don't know	5	9.6		
– No	31	59.6		
– Don't know	8	15.4		
Total	52	100.0		

Table 1 Frequency Analysis Results of Awareness about Gastroenteritis

per 100,000 inhabitants. Gastroenteritis affected all age groups, but the most frequently affected group was infants and toddlers. Morbidity among infants was 1576.31 cases per 100,000 inhabitants, and for children aged 1-4 years, it was 641.21 cases per 100,000 inhabitants. The incidence of this disease increased by 79.2% over the past year and by 49% compared to the average of the last five years (Epis, 2023).

Research Methodology

Data Collection: The data for this study were obtained through an anonymous questionnaire distributed to parents of children hospitalized at the Pediatrics Clinic of the Faculty Hospital in Trnava. The questionnaire consisted of 30 questions focusing on demographic data, knowledge about gastroenteritis, and procedures for caring for a sick child. The questionnaires were distributed between October and December 2023, and the response rate was 100%.

Results

The study focused on analyzing parents' knowledge about gastroenteritis (GE) and evalu-

ating their responses to various situations related to this illness. The results are presented in the following sections: frequency analysis, descriptive statistics, and inferential statistics.

Frequency Analysis

First Encounter with the Term Gastroenteritis:

- The majority of respondents (57.7%) first encountered the term "gastroenteritis" when their child fell ill.
- Only 23.1% of respondents received information about GE from a pediatrician.
- Other sources of information included the internet (11.5%) and family or friends (7.7%).

Awareness of Vaccination Against GE:

- Only 25% of respondents stated that their pediatrician informed them about the possibility of vaccination against GE.
- The majority (59.6%) were not informed about this option.
- The remaining 15.4% of respondents were unsure or did not remember.

Table 2 Results of Frequency Analysis

Question	n	%
Did you give your child fluids immediately after repeated vomiti	ng?	
– Yes	23	44.2
Were you concerned about dehydration?		
– (No response)	23	44.2
– Yes	23	44.2
– No	5	9.6
– Don't know	1	1.9
– No	29	55.8
Did you give your child food after repeated vomiting?		
– Yes	9	17.3
If you answered "yes" to question 22, was it because:		
– (No response)	43	82.7
– The child was hungry	2	3.8
– To maintain energy intake	7	13.5
– No	43	82.7
What type of food did you give your child during this illness?		
– Dry food (dry rice, potatoes, biscuits)	40	76.9
– Biscuits	5	9.6
– Broth	2	3.8
– We did not modify the diet, he ate regular food	5	9.6
Do you think it is necessary to follow dietary measures during th	nis illness?	
– Yes	48	92.3
– No	2	3.8
– Don't know	2	3.8
How many days do you think a child should follow dietary meas	ures?	
- 2-3	19	36.5
– 3-5	19	36.5
– 5-7	14	26.9
What is the correct procedure for following dietary measures fo	r a child with (SE?
 Immediate offering of fluids, dry food, rest for the child 	2	3.8
 Offering fluids by spoonfuls, rest for the child, dry food 	16	30.8
 Pause with fluids for at least 3 hours after vomiting, offering fluids by spoonfuls, dry food 	34	65.4
Do you know how many stools can lead to dehydration in a child	! ?	
- 2-3	5	9.6
– 3-5	19	36.5
– 5 or more	28	53.8
Total	52	100.0

Signs of Dehydration: How do you know if your child is dehydrated and needs hospitalization? As shown, correct answers (highlighted in red on the graph) were given by respondents: dark urine -65.4% (n = 34); headache -44.2% (n = 23); drowsiness -61.5% (n = 31); and dry lips -86.5% (n = 45).

Measures for Vomiting and Diarrhea:

- 55.8% of parents stated that they do not give fluids immediately after repeated vomiting.
- The remaining 44.2% of parents provided fluids out of concern for dehydration.

Descriptive Statistics

Awareness of Dietary Measures:

- The majority of parents (73.1%) knew that it is necessary to provide dry food during GE.
- 26.9% of respondents answered incorrectly or did not know.

Duration of Dietary Measures:

- Only 29.6% of respondents knew that dietary measures should last 5-7 days.
- 70.4% of respondents answered incorrectly or did not know

Identification of GE Symptoms: Most respondents correctly identified GE symptoms:

- Weakness correctly indicated by 78.8% (n = 41);
- Abdominal pain -92.3% (n = 48);
- Fever -65.4% (n = 34);
- Numerous loose stools -90.4% (n = 47);
- Vomiting -98.1% (n = 51).

Number of Stools Leading to Dehydration:

- 53.9% of respondents knew that 5 or more stools could lead to dehydration.
- 46.1% of respondents answered incorrectly or did not know

Inferential Statistics

Impact of Place of Residence on Knowledge Level:

 Testing the hypothesis regarding differences in parental knowledge based on place of residence (urban vs. rural) showed no significant differences (p > 0.05). This suggests that the level of knowledge about GE is not influenced by place of residence.

Impact of Number of Children in Household on Knowledge Level:

• Testing the hypothesis that the number of children in the household affects parental knowledge about GE also showed no significant differences (p > 0.05). This result indicates that parents with different numbers of children have similar knowledge about GE.

Impact of Education Level on Knowledge Level:

 The hypothesis that parents' education level influences their knowledge about GE was not confirmed (p > 0.05). Parents with different levels of education demonstrated similar knowledge about GE

Summary of Results

The results of this study indicate that parental awareness of gastroenteritis (GE) and the appropriate care procedures for this illness is insufficient. Most parents first encountered the term GE when their child became ill, highlighting the need for improved preventive education. Communication between pediatricians and parents about vaccination options is also inadequate, as most parents were not informed about this possibility.

Parents demonstrated relatively good knowledge of dietary measures for GE; however, their awareness of the correct duration for these dietary measures was low. While parents mostly identified the symptoms of GE correctly, their knowledge about the proper procedures for dealing with dehydration was incomplete.

Inferential statistics showed that the level of parental knowledge about GE is not influenced by place of residence, the number of children in the household, or the level of education. This suggests that the need for improved awareness is universal across different social and demographic groups.

Discussion

The research focused on the level of parental awareness regarding the illness and nursing care for a child with gastroenteritis. Our study included 52 respondents, of which 82.7% were women and 17.3% were men. The most numerous age group in our study was 31-40 years old (both men and women). The second most numerous group was 21-30 years old (only women), followed by 41 and older (16.3% women and 33.3% men), and one respondent (a woman) represented the 15-20 age group.

From an educational perspective, 53.8% of respondents had a high school education with a diploma, making it the largest group (including both men and women). The second largest group by education was respondents with a university degree, who accounted for 26.9% (with 23.3% women and 44.4% men). Among women, we also noted representation with primary education (4.7%) and high school education without a diploma (14%). A total of 59.6% of respondents came from rural areas, and 40.4% came from cities.

In terms of occupation, about a third of respondents (34.6%) worked in manual labor and services, similarly for both men and women. Another 28.8% worked in culture, education, and administration, with women comprising 30.2% and men 22.2%. In healthcare and social work, 21.2% of respondents worked, with women representing 23.3% and men 11.1%. In the public sector, 15.4% of respondents worked, with more men (33.3%) than women (11.6%).

We investigated parents' knowledge about GE. When asked when they first encountered the term gastroenteritis, 30 respondents answered that it was when their child first became ill. We then asked if their pediatrician informed them about the possibility of vaccination against rotaviruses. Only 13 respondents answered positively, while 31 respondents answered negatively. This finding is concerning as pediatricians should inform parents about vaccination options to reduce the incidence of gastroenteritis.

Šimurka (2012) notes in his study that vaccination is the only means to impact the occurrence of rotavirus-caused gastroenteritis. He further recommends vaccinating not only high-risk but also all healthy children. There is ample evidence of both medical and economic benefits of rotavirus vaccination. Leshem, Tate et al. (2018) found in their study that the introduction of routine rotavirus vaccination in 2006 significantly reduced the number of hospitalizations related

to acute gastroenteritis. It is estimated that since the introduction of rotavirus vaccines in the United States in 2006, 382,000 hospitalizations in children under five have been prevented, saving \$1.228 billion in direct hospitalization costs. Marchetti, Vetter, et al. (2017) found that 90% of hospitalized children were not vaccinated, and most of them (74.5%) were not informed about the possibility of vaccination against rotaviruses.

Gastroenteritis (an illness affecting the stomach and intestines) is considered a serious illness by 37 respondents, which is incorrect, while only 15 respondents correctly identified it as a less serious illness. This statement is confirmed by Frühauf (2013), who states that acute gastroenteritis is a frequent but not serious problem in childhood, particularly in the first three years of life. It usually, but not always, runs mildly and deaths are rare. However, it is often associated with hospitalization. Forty-four respondents believe that GE is an infectious disease, which is the correct answer. In the case of a positive response, respondents were asked when they believe a child can return to a group setting. Forty-five respondents indicated that a child can return when no longer showing any signs of illness, such as vomiting and having loose stools. We found that one respondent does not think GE is an infectious disease but still indicated that a child can return to a group setting only when showing no signs of illness.

Twenty-two respondents indicated that upon detecting the illness, they try to manage the situation at home. Although most parents try to handle the situation at home, they also stated in another question that immediate medical help is necessary for GE, which is incorrect. When asked if immediate hospitalization is necessary, 20 respondents answered correctly, 19 indicated hospitalization is necessary, and 13 did not know. Corcoran, Well et al. (2014) confirm in their study that hospitalization can be avoided by following treatment procedures, stating that children admitted to the hospital mainly suffer from severe GE requiring rehydration therapy. Most children do not require examination or admission to the hospital and can be treated at home.

Dobiáš and Podhoranský (2022) state that visiting a doctor for GE in a small child should occur within 12 hours and within 24 hours for

older children if fluids are not gradually tolerated. They also note that in case of any doubts about the child's condition, including changes in consciousness, mood, abdominal pain, or frequent vomiting, it is important to seek immediate medical help. It is known from practice that parents often get scared when their child vomits, especially if it is the first time, which is a common reason for seeking immediate medical help. Albrecht, Hartlingová et al. (2016) confirm this in their study, stating that when the first symptoms of GE appear, parents report feeling fear and concern for their child and are unsure how to proceed to help their child recover.

When investigating the correct nursing care procedures for a child, we asked parents if it is correct to give fluids immediately after repeated vomiting. Twenty-nine respondents correctly answered no. However, 23 respondents still think it is correct to give fluids immediately after vomiting due to fear of dehydration. Regarding giving food after repeated vomiting, 43 respondents correctly answered that they did not provide food. Nine respondents provided food despite vomiting to maintain energy intake, which is incorrect. When asked what food they provided to their child during GE, 40 respondents correctly indicated dry food. When asked if it is necessary to follow dietary measures, 48 respondents correctly answered yes. We then asked how long they believe these dietary measures should be followed. Nineteen respondents indicated 2-3 days, another 19 indicated 3-5 days, which is incorrect. Only 14 respondents correctly indicated 5-7 days. Thirty-four respondents follow the correct dietary measures by pausing fluids for at least three hours after the last vomiting, offering fluids by spoonfuls, and then dry food.

Klíma et al. (2016) state that the first step in therapy is maintaining a diet and carefully ensuring hydration and nutrition. After restoring the loss of fluids, minerals, and energy, a diet that helps soothe the intestinal mucosa and contains easily digestible components can begin. Such dietary foods include rice broth, carrot broth, and certain fruits.

When investigating parents' knowledge of GE symptoms, we found that most respondents correctly identified the symptoms. In our study, parents indicated vomiting as the most frequent

symptom, followed by abdominal pain, loose stools, weakness, fever, and breathing problems as the last possibility. Gabor and Grimwood (2019) found that the most common symptom of GE was loose stools and vomiting. When asked how they determine if their child is dehydrated and needs hospitalization, respondents most frequently indicated dry lips (86.5%). This was followed by dark urine, drowsiness, headache, and the least indicated was a high fever. When asked when they believe medical help is necessary, the most common reason was when the child does not accept fluids, which is correct as the child can quickly dehydrate. Dehydration associated with electrolyte imbalance and metabolic acidosis is the most common and risky complication, as confirmed by Leung and Hon (2021).

Conclusion

The results of our study suggest that parents' knowledge of gastroenteritis and its management is insufficient, which can negatively impact their children's health. Most parents encounter the term gastroenteritis only when their child becomes ill, with information primarily obtained from informal sources such as the internet or personal experiences, rather than professional sources. This lack of preventive education points to the need to improve parental awareness of GE during regular preventive check-ups with pediatricians.

Another important finding is that communication between pediatricians and parents about vaccination options against GE is inadequate. Most parents were not informed about this preventive measure, leading to unnecessary health complications in children.

While parents show relatively good knowledge of dietary measures for GE, their awareness of the correct duration of these measures and the steps to prevent dehydration is insufficient. This can lead to incorrect practices that can worsen the child's condition and prolong recovery time.

Statistical analysis did not show significant differences in parental knowledge based on place of residence, number of children in the household, or education level. This suggests that the problem of low awareness is present across various social and demographic groups, requiring

a universal approach to improving awareness and education.

Based on these findings, we recommend increasing activities in educating parents about gastroenteritis and its management, focusing on preventive measures, proper dietary habits, and recognizing signs of dehydration. Pediatricians should actively inform parents about vaccination options and provide clear guidelines for managing GE. This way, we can improve children's health and reduce the incidence of complications associated with gastroenteritis.

Ethical Aspects and Conflict of Interest

We declare that there were no conflicts of interest related to the study, and ethical aspects were considered in processing the results. All literary sources were properly cited

References

- 1. ALBRECHT, L., HARTLING, L. et al. 2016. Pediatric acute gastroenteritis: understanding caregivers' experiences and information needs. In *Cambridge University Press* [online]. 2016, vol. 19, No. 3 [cited 8-3-2024], pp. 198-206. Available from: https://www.cambridge.org/core/journals/canadian-journal-of-emergency-medicine/article/pediatric-acute-gastroenteritis-understanding-caregivers-experiences-and-information-needs/6797B9B60A-BAFC7698F647A9DC550852
- BONAYAI, E. et al. 2018. Viral gastroenteritis. In *The Lancet* [online]. 2018, vol. 392, no. 10142 [cited 8-3-2024], pp. 175-186. Available from: https://www.sciencedirect.com/science/article/abs/pii/S0140673618311280
- BARRET, J., FHOGARTAIGH, C. 2017. Bacterial gastroenteritis. In *Medicine* [online]. 2017, vol. 45, No. 11 [cited 18-1-2024], pp. 683-689. Available from: https://www.sciencedirect.com/science/article/abs/pii/S1357303917302177.
- CICCARELLI, S., STOLFI, I., et al. 2013. Management strategies in the treatment of neonatal and pediatric gastroenteritis. In *Infection and Drug Resistance* [online]. 2013, vol. 6 [cited 10-2-2024], pp. 133-161. Available from: https://www.tandfonline.com/doi/full/10.2147/IDR.S12718.

- CORCORAN, M., WELL, V. et al. 2014. Diagnosis of viral gastroenteritis in children: interpretation of real-time PCR results and relationship to clinical signs. In *European Journal of Clinical Microbiology and Infectious Diseases* [online]. 2014, vol. 33 [cited 5-3-2024], pp. 1663-1673. Available at: https://link.springer.com/article/10.1007/s10096-014-2135-6
- 6. DOBIAS, V., PODHORANSKY, B. 2022. How not to lose a child. In: *SAV Publishing*. 2nd ed. Dixit Ltd, 2022. 211 pages. ISBN 978-80-89662-44-9.
- 7. FRUHAUF, P. 2013. Acute gastroenteritis in infants and infants. In *Pediatrics for practice* [online]. 2013, vol. 14, No. 1 [cited 8-3-2024]. Available from: https://www.pediatriepropraxi.cz/artkey/ped-201301-0003_Akutni_gastroenteritida_u_kojencu_a_batolat.php?back=%2Fsearch.php%3Fquery%3Dgastroenterit%25ED-da%26sfrom%3D0%26spage%3D30
- 8. GABOR, M., GRIMWOOD, K. 2019. Effect of Definitions of Acute Gastroenteritis Episodes Using Symptom Diaries in Paediatric Cohorts: A systematic review. *In Journal of Pediatric Gastroenterology and Nutrition* [online]. 2019, vol. 70, no. 3 [cited 4-3-2024], pp. e54-e58. Available from: https://journals.lww.com/jpgn/fulltext/2020/03000/effect_of_definitions_of_acute_gastroenteritis.16.aspx
- 9. HSING-CHEN, T., MENG-TSEN, T., et al. 2019. Rotavirus gastroenteritis outbreak in a neonatal intermediate care unit: Direct detection of rotavirus from a computer keyboard and mouse. In *Journal of Microbiology, Immunology and Infection* [online]. 2019, vol. 52, no. 6 [cited 10-2-2024], pp. 888-892. Available from: https://www.sciencedirect.com/science/article/pii/S1684118218304924
- KLIMA, J., et al. 2016. Pediatrics for non-medical health professions. 1st ed. Prague: Grada Publishing, 2016. 328 p. ISBN 978-80-247-5014-9.
- 11. LEUNG, A., HON, K. 2021. Pediatrics: how to manage viral gastroenteritis. In Drug Context [online]. 2021, vol. 10 [cited 4-3-2024], pp. 1-11. Available from: https://www.ncbi.

- nlm.nih.gov/pmc/articles/PMC8007205/PMID: 33828604
- 12. LESHEM, E., TATE, J., et al. 2018. National Estimates of Reductions in Acute Gastroenteritis-Related Hospitalizations and Associated Costs in US Children After Implementation of Rotavirus Vaccines. In *Journal of the Pediatric Infectious Diseases Society* [online]. 2018, vol. 7, no. 3 [cited 8-3-2024], pp. 1-11. Available from: https://academic.oup.com/jpids/article/7/3/257/4063213.
- MARCHETTI, F., VETTER, V., et al. 2017. Parents' perspectives after hospitalization of children due to rotavirus gastroenteritis in Italy. In *Human Vaccines & Immunotherapeutics* [online]. 2017, vol. 13, no. 9 [cited 9-3-2024], pp. 2155-2159. Available from: https://pubmed.ncbi.nlm.nih.gov/28609219/ PMID: 28609219
- 14. SHIMURKA, P. 2012. Prevalence of rotavirus infections in a general practitioner's outpatient clinic for children and adolescents. In *Pediatrics for practice* [online]. 2012, vol. 13, No. 51 [cited 4-3-2024]. Available from: https://www.solen.sk/sk/vyhladavanie?phrase=acute%20gastroenteritis%20 (AGE).

Association between Concurrent Substance Use and Genetic Variation in Individuals with Heroin Dependence

K. Uludag (Kadir Uludag), H. Su (Hang Su), M. Zhao (Min Zhao)

Shanghai Mental Health Center, Shanghai Jiao Tong University, School of Medicine, China Original Article

E-mail address:

kadiruludag233@gmail.com

Reprint address:

Kadir Uludag Shanghai Mental Health Center Shanghai Jiao Tong University China Shanghai China

Source: Clinical Social Work and Health Intervention Volume: 15 Issue: 5

Pages: 81 – 90 Cited references: 47

Reviewers:

Steve Szydlowski University of Scranton school of education, USA Andrea Shahum University of North Carolina at Chapel Hill School of Medicine, USA

Keywords:

Heroin dependence. Drug addiction. Genetics. COMT. Polymorphism. Polydrug use. Methamphetamine, tranquilizer, amphetamine, marijuana, stress.

Publisher:

International Society of Applied Preventive Medicine i-gap

CSWHI 2024; 15(5): 81 – 90; DOI: 10.22359/cswhi_15_5_10 © Clinical Social Work and Health Intervention

Abstract:

Background: Heroin dependence is a condition where an individual develops a compulsive reliance on heroin. It is characterized by various symptoms, including intense drug cravings, inability to control heroin use, tolerance, and withdrawal symptoms when drug use is discontinued. Earlier research has examined the relations between genetics and the subject at hand, but it remains uncertain whether the simultaneous use of drugs is connected to certain genetic factors. To comprehend the potential genetic elements linked to the concurrent use of multiple drugs, further investigation is required. This is crucial because such co-occurrence has the potential to elevate the risk of overdose.

Goal of Study: Our goal of the study was to find an association between polydrug use and genetic factors among individuals with heroin dependence.

Methods: Female individuals with heroin dependence were recruited (n=263). Genetic factors related to Catechol-O-methyltransferase (COMT), and stress were included in the study (rs174696, rs174699, rs4680, rs4818, rs737866, rs933271, rs12953076, and rs44458044).

Results: According to the main results, we found that certain genetic factors are related to amphetamine use (rs174696, rs174699, rs1544325, rs4680, rs4818, rs737866, and rs933271). Furthermore, marijuana use was only associated with CRHBP polymorphism (rs1875999).

Conclusion: In conclusion, amphetamine and heroin comorbidity may be associated with certain genetic factors related to COMT.

Highlights

Certain genetic factors (rs174696, rs174699, rs1544325, rs4680, rs4818, rs737866, and rs933271) are found to be linked to amphetamine use.

Marijuana use is specifically associated with the CRHBP polymorphism (rs1875999).

The comorbidity of amphetamine and heroin may be connected to genetic factors related to COMT.

The most substantial effect size was observed in the relationship between amphetamine use and rs174699.

1. Introduction

Heroin use is related to certain psychiatric and health problems such as structural and cognitive impairments (1), anxiety (2), suicide (3, 4), and certain personality disorders (5). Furthermore, long-term heroin use has detrimental effects on cognitive functioning (6, 7). Decline in cognitive abilities can also result in decreased levels of general well-being.

Moreover, the current policies are inadequate in curbing the issue, as demonstrated by the ongoing epidemic of illicit drug overdose deaths (8). Furthermore, epigenetic and genetic studies have been made to demonstrate the relationship between genetic parameters and heroin use (9). Genetic diversity could potentially contribute to shaping intricate personality traits, such as impulsiveness and sensitivity to stress (10). Multiple studies provide evidence that addiction is influenced by moderate to high genetic factors (11). Nonetheless, individuals who misuse heroin may also engage in the consumption of other substances, and the co-occurrence of polydrug use could be linked to genetic influences. Limited research has thoroughly investigated potential factors that can predict polydrug use (12). Polydrug consumption contributes to fatal overdose in more than half of all polydrug users (13). Moreover, it is common to use it in conjunction with other substances, such as alcohol or additional drugs, which increases the risk of overdose (14). Moreover, given the finding that increased drug usage is associated with heightened mental distress (15), it is crucial to comprehend how genetic risk factors may be connected to the occurrence of polydrug use. In conclusion, the presence of moderate to high genetic factors in addiction, the co-occurrence of polydrug use with heroin misuse, and the increased risk of fatal overdose and mental distress highlight the importance of understanding the genetic influences on polydrug use.

The objective of our study was to establish a connection between the simultaneous use of multiple drugs and genetic factors (e.g., COMT) in individuals with heroin dependence.

2. Methods

The collected demographic data included age, gender, educational attainment (classified as completion of secondary school or not), marital status, and employment status. To minimize the influence of potential confounding variables, the study enrolled only female participants (n=263). The average age of the participants was

51% of the participants finished secondary education, while 4.6% of them attained a higher education level.

	Amphetamine Use	Marijuana Use	Tranquilizer Use	Inhalation Use	Cocaine Use
rs174696	p<0.05, χ2:11.296	p>0.05	p>0.05	P>0.05	P>0.05
rs174699	p<0.05, χ2:17.791	p>0.05	p>0.05	P>0.05	P>0.05
rs1544325	p<0.05, χ2:10.375	p>0.05	p>0.05	P>0.05	P>0.05
rs4680	p<0.05, χ2:17.214	p>0.05	p>0.05	P>0.05	P>0.05
rs4818	p<0.05, χ2:15.192	p>0.05	p>0.05	P>0.05	P>0.05
rs737866	p<0.05, χ2:16.036	p>0.05	p>0.05	P>0.05	P>0.05
rs933271	p<0.05, χ2:15.176	p>0.05	p>0.05	P>0.05	P>0.05
rs12953076	p>0.05	p>0.05	p>0.05	P>0.05	P>0.05
rs242924	p>0.05	p>0.05	p>0.05	P>0.05	P>0.05
rs4458044	p>0.05	p>0.05	p>0.05	P>0.05	P>0.05
rs17689966	p>0.05	p>0.05	p>0.05	P>0.05	P>0.05
rs1715751	p>0.05	p>0.05	p>0.05	P>0.05	P>0.05
rs3792738	p>0.05	p>0.05	p>0.05	P>0.05	P>0.05

Table 1 Polydrug Use in individuals with Heroin Dependence

The study participants consisted of individuals who met the criteria for drug dependence, meaning they had previously relapsed to drug use after being identified as drug users by the public local security system. Therefore, all participants had experienced at least one relapse prior to their enrollment in the compulsory rehabilitation centers at the start of the study. At the time of their participation, the individuals were in a state of abstinence.

p>0.05

p>0.05

p>0.05

p>0.05

p>0.05

P<0.05,

 $\chi 2:11.503$

p>0.05

p>0.05

p>0.05

rs32897

rs10062367

rs1875999

The study protocol received approval from the review boards of the Shanghai Jiao Tong University, School of Medicine, Mental Health Center. The research strictly followed the principles stated in the Declaration of Helsinki. Informed consent obtained from the study participants prior to study commencement. Most study participants were of Han Chinese ethnicity. Each subject was interviewed by one psychiatrist.

P>0.05

P>0.05

P>0.05

P>0.05

P>0.05

P>0.05

Participants with a prior history of significant medical conditions that could potentially influence the results of the study, such as neurological disorders or traumatic brain injury, were not included. Moreover, patients who were unable to fulfill the study's demands, such as attending scheduled appointments or completing necessary assessments, were also excluded.

Polymerase chain reaction (PCR) was employed to amplify specific DNA sequences. A thorough investigation was undertaken to explore the genetic factors associated with COMT and stress, specifically examining the parameters of rs174696, rs174699, rs4680, rs4818, rs737866, rs933271, rs12953076b, and rs44458044b.

In detail, lymphocytes were employed for the extraction of genomic DNA. Analyzing data from the HAPMAP database for Beijing Han Chinese revealed a conserved pattern without polymorphic distribution in the Chinese population for the CRH genes. Consequently, the research focus shifted towards investigating the CRH receptor 1 (CRHR1) and CRH-binding protein (CRHBP). By screening the CRHR1 and CRHBP genes, along with the upstream region within a range of 10 KB that met the criteria of r2 > 0.8 and MAF > 10%, specific SNPs (CRHR1 rs12953076, rs4458044, rs242924, rs17689966; CRHBP rs1715751, rs3792738, rs32897, rs10062367, rs1875999) were selected. The genotyping of these SNPs was carried out using the ABI Prism 7900 sequence detection system. The stress-related gene genotyping was conducted through the TaqMan SNP genotyping assay, a commonly used and dependable technique in genetic studies.

2.2. Statistical Analysis

Each participant was required to participate in a compulsory, standardized rehabilitation program lasting two years. This program included daily physical exercise and educational sessions aimed at relapse prevention. After successfully completing the program, the patients were reintegrated into their respective communities. Statistical analysis was performed using SPSS version 24. Two alleles and both alleles were coded as categoric value, and a chi-square test was conducted to test if there is a significant relationship between categoric parameters.

3. Results

Based on our primary findings, we observed a significant association between amphet-

amine use and specific genetic variants, including rs174696, rs174699, rs1544325, rs4680, rs4818, rs737866, rs933271, rs12953076, and rs44458044. Additionally, we found that marijuana consumption was associated with the CRHBP polymorphism (rs1875999). Figure 1 includes graphical abstract that summarizes the study. Polydrug use among individuals diagnosed with heroin dependence is presented in Table 1.

Table 2 displays a table indicating the frequencies of alleles. Based on the data presented in the table, it can be observed that the percentage of missing values for all the investigated allele parameters was below 10%. Moreover, to provide information regarding the effect size, the study reported the chi-square value for the significant results.

4. Discussion

According to main findings of our study, we found association between amphetamine use and certain genetic factors such as rs174696, rs174699, rs1544325, rs4680, rs4818, rs737866, rs933271, rs12953076, and rs44458044). The most substantial effect size was observed in the relationship between amphetamine use and rs174699. In addition, the utilization of marijuana was only linked to the CRHBP polymorphism (rs1875999). There was no notable association found between the consumption of heroin and the usage of tranquilizers or cocaine.

A significant number of individuals remain dependent on heroin, facing challenges in regulating their consumption. Hence, it is crucial to explore the genetic factors contributing to individuals' inclination towards drug consumption such as heroin use and cocaine use. Furthermore, the chronic relapse nature of heroin dependence is gaining recognition, yet there remains limited knowledge regarding the recovery journey of individuals who achieve prolonged abstinence (Hser, 2007).

Moreover, using genetic factors can enable the provision of tailored treatment for individuals with heroin dependence. Nevertheless, it is crucial to consider the influence of polydrug use in this context. Due to the potential confounding effects associated with polydrug use, it is imperative to acknowledge its impact on research outcomes.

Table 2 Allele Frequency Table

	Parameter 1	Parameter 2	Parameter 3
rs174696	24%	22.4%	45.6%
rs174699	31.9%	17.9%	42.2%
rs1544325	9.1%	42.2%	40.7%
rs4680	4.2%	44.1%	43.7%
rs4818	37.6%	11%	43.3%
rs737866	8.7%	41.8%	41.4%
rs933271	40.3%	14.1%	37.6%
rs12953076	76.4%	17.5%	N/A
rs242924	0.4%	14.4%	79.1%
rs4458044	9.1%	35.4%	49.8%
rs17689966	62.7%	28.1%	3%
rs1715751	4.9%	41.1%	48.3%
rs3792738	2.7%	30%	61.2%
rs32897	3.4%	30.8%	59.7%
rs10062367	3%	28.9% 61.2%	
rs1875999	33.1%	45.6%	15.6%

Psychologically, genetic factors have the potential to influence individuals, impacting various aspects of their mental and emotional well-being. The occurrence of polydrug use, which can signal a higher inclination for risk-taking when compared to using a single drug, implies that genetic factors might play a role in explaining the inclination towards consuming multiple substances. Additionally, polydrug use may be indicative of higher levels of impulsivity, as individuals engaging in such behavior may struggle with self-control.

Moreover, the utilization of a single substance can result in alterations in impulsivity and subsequently lead individuals to engage in the consumption of other drugs. This phenomenon can also be associated with certain genetic factors related to addiction. Additionally, this phenomenon can be associated with stress, as individuals may turn to other substances when one substance alone does not alleviate their stress levels.

4.1. Genetics and Heroin Dependence

Heroin dependence is a chronic complex disease with a genetic contribution (Levran et al.,

2008). Previous studies have shown that there is a relationship between heroin dependence and genetic factors such as BDNF (16-18), Furthermore, addiction mechanism involves pathways mediated by the dopamine D3 receptor (19). In addition, the findings from one study mentioned an interaction between the ALDH2 gene and novelty seeking in individuals who are dependent on heroin (20). In addition, heroin-dependent patients and controls have demonstrated an association between the COMT and the temperament scale (21). Stress fuels the start and reoccurrence of addiction: it drives drug craving and overconsumption, while withdrawal ramps up stress (22). Among all drug users, those who use multiple drugs showed the strongest link to psychological distress (23). Hence, it is reasonable to infer that genetic polymorphisms linked to stress response may be associated with addiction process. Furthermore novelty seeking and antisocial behavior related genetic factors may be related to heroin dependence.

Moreover, variances were observed in the distribution of genotype and allele frequencies of the PDYN gene 68-bp VNTR between indi-

viduals with heroin dependence and in a healthy control). In detail, the prevalence of the H allele among heroin-dependent subjects was notably higher when compared to the control group (24).

Previous study presents evidence suggesting that three specific genetic variants (rs696522, rs1381376, and rs3778151) are linked to an elevated susceptibility to experiencing positive responses upon initial heroin use (25). Consequently, these positive responses could contribute to the development of dependence, and future studies should also investigate the precise relationship between these factors. Other findings support a contribution of the 5-HT2A gene to susceptibility to heroin dependence (26). Nevertheless, our study did not incorporate the analysis of the 5-HT2A gene, which would have enabled us to make comparisons with other studies. While various gene variants have been discovered, there is ongoing debate about how specific alleles and combinations of alleles contribute to the risk of psychiatric diseases such as schizophrenia (27).

Overall, our investigation revealed a connection between amphetamine use and genetic factors associated with COMT. Moreover, our study included stress and COMT related genetic parameters. Furthermore, there is a limited literature on polydrug use and genetic factors. When exploring the association between genetics and heroin, it is essential for studies to consider the influence of comorbid amphetamine use.

4.1.1. Catechol-O-methyltransferase and Heroin Use

COMT is an enzyme responsible for the metabolism of catecholamines (28). The *COMT gene* has been found to be associated with various factors relevant to addiction (29). Certain studies specifically focused on examining the correlation between the *COMT gene* and heroin dependence.

For example, a previous study found that individuals carrying the C allele of ADRA1A rs3808585 are more susceptible to memory impairment after heroin use and subjects with G allele of COMT rs769224 are more likely to take a higher dose of heroin (30). Furthermore, a previous study found no association between heroin dependence and the 108 val/met poly-

morphism or the 900 Ins C/Del C polymorphism of the *COMT gene* (31). In an animal study, modulations in COMT affect dopamine metabolism (32) and therefore COMT may be related to heroin dependence related factors since heroin dependence is associated with genes related to the dopaminergic system (33). Furthermore, other studies also investigated the relationship between dopamine and addiction (34, 35).

In a different study, the presence of the A allele in ADRA1A rs1048101 is linked to a reduced duration of transition from initial drug use to addiction. Individuals with the C allele of ADRA1A rs3808585 exhibit increased vulnerability to memory impairment following heroin use disorder (30). The severity of dependence may be associated with memory impairment. In conclusion, the *COMT gene*, responsible for catecholamine metabolism, has been found to be associated with various addiction-related factors, including heroin dependence.

4.1.2. Catechol-O-methyltransferase and Amphetamine Use

Amphetamine was first identified more than a century ago (36). Amphetamine triggers a cascade of biochemical changes (37). There are a few studies made on amphetamine and heroin use comorbidity.

COMT is an enzyme involved in the breakdown of neurotransmitters such as dopamine and norepinephrine. Variations in the *COMT gene* can lead to differences in COMT enzyme activity, affecting the levels of these neurotransmitters in the brain. The *COMT gene* has been associated with a range of human characteristics, such as cognition, anxiety, pain sensitivity, and psychosis (38).

Research has indicated that certain genetic variations in the *COMT gene* may influence an individual's response to amphetamine use. For example a previous study showed that, people who possess the met/met COMT genotype seem to have a higher likelihood of experiencing a negative reaction to amphetamine (39). However, a previous study showed that the COMT val158met polymorphism did not show any association with initial performance or the impact of d-amphetamine on two executive functioning tasks (40).

There is a significant body of evidence indicating that malfunctioning of the dopamine transporter could play a role in the development of amphetamine dependence (41). Furthermore, distinct categories were established for individuals who inject heroin based on their patterns of methamphetamine and cocaine use (42).

In conclusion, the *COMT gene* has been found to be associated with various addiction-related factors, including amphetamine usage, in individuals with heroin dependence.

4.2. Confounding Factors in Heroin Dependence literature

There are numerous confounding factors associated with heroin dependence. For example, age is one of the main confounding factors. In a previous study, older individuals who use substances at a young age and continue to do so as they get older, along with the natural effects of aging on health conditions, are susceptible to experiencing negative substance use outcomes (43). Furthermore, Gender disparity persists in heroin use, with men roughly twice as likely to be affected (44). Epigenetic mechanisms play a role in governing gene expression (6) and thus one of the potential confounding factors in addiction studies. Other study found proof of structural irregularities in individuals dependent on heroin, indicating that the length of heroin use plays a crucial role in causing harm to the brain (45). Therefore, length of heroin use is one of the confounding factors of the study.

Numerous confounding factors are associated with heroin dependence, including age, with older individuals who initiate substance use at a young age being susceptible to negative outcomes, gender disparity, epigenetic mechanisms influencing gene expression, and the length of heroin use contributing to structural harm in the brain.

4.3. Polydrug Use and Heroin Use

Polydrug use refers to the simultaneous or concurrent use of multiple drugs by an individual. This practice is commonly observed among substance users and can involve a combination of illicit drugs, prescription medications, and/or alcohol. One specific form of polydrug use that poses significant risks and challenges is the co-occurring use of multiple substances alongside heroin such as cocaine use and marijuana use.

4.4. Marijuana Use and Heroin Use

Marijuana use disorder, the leading illegal drug misuse issue, casts a growing shadow of psychiatric concerns (46). There is a limited amount of available literature regarding the co-occurrence or simultaneous use of marijuana and heroin. In this study, we found that marijuana use was only associated with CRHBP polymorphism (rs1875999). Genetic variation is linked to stress. The strongest association with psychological distress was found among individuals who use multiple drugs, indicating that genetic variations associated with stress response may play a role in the addiction process.

Hence, the use of marijuana could potentially be connected to genetic factors related to stress.

4.5. Suggestions for Further Studies

As mentioned in the previous study, preventive measures should consider the patterns of polysubstance use among adolescents who use heroin (47). Furthermore, in the future, researchers can explore multiple novel genes that might play a role in determining a person's susceptibility to developing heroin dependence, particularly when considering the concurrent use of multiple drugs.

Moreover, additional research can consider the influence of the method of heroin administration

4.6. Limitations:

Some studies depended on clinical diagnoses assigned by healthcare providers (46). Our research does not include information on smoking habits, which could potentially be a confounding variable. Additionally, both age and the extent of exposure to heroin represent confounding factors in our study. Extended exposure to heroin has the potential to influence genetic alterations. Furthermore, our study lacks smoking data which may affect individuals with heroin dependence. Moreover, the route of administration is also one of the major confounding factors in our study. Also, cross sectional design may limit the generalizability of the study.

Competing Interests

None.

Polydrug use may affect individuals with heroin dependence and may be related to genetic factors.

Theme 1 Description certain genetic factors are related to amphetamine use.

Methodology
Female individuals with heroin dependence were recruited. Genetic factors related to COMT, and stress were included in the study

Theme 3 Description
Furthermore, marijuana use was only associated with CRHBP polymorphism (rs1875999).

Concluding statement
In conclusion, amphetamine and heroin comorbidity may be associated with

certain genetic factors related to COMT.

Figure 1 Graphical Abstract

References

- TOLOMEO, S., STEELE, JD., EKHTIARI, H., BALDACCHINO, A. 2020. Chronic heroin use disorder and the brain: Current evidence and future implications. Progress in Neuro-Psychopharmacology and Biological Psychiatry. 2020:110148.
- HURD, YL., SPRIGGS, S., ALISHAYEV, J., WINKEL, G., GURGOV, K., KUDRICH, C., et al. 2019. Cannabidiol for the reduction of cue-induced craving and anxiety in drug-abstinent individuals with heroin use disorder: a double-blind randomized placebo-controlled trial. American Journal of Psychiatry. 2019;176(11):911-22.
- DARKE, S., ROSS, J. 2002. Suicide among heroin users: rates, risk factors and methods. Addiction. 2002;97(11):1383-94.
- CHEN, W-T., WANG, S-C., WANG, IA., TSAY, J-H., CHEN C-Y. 2020. Suicide attempts and death among heroin-involved women seeking methadone treatment in Taiwan. Drug and Alcohol Dependence. 2020;217:108277.
- FASSINO, S., ABBATE, DAGA, G., DELSEDDIME, N., ROGMA, L., BOG-GIO, S. 2004. Quality of life and personality disorders in heroin abusers. Drug and Alcohol Dependence. 2004;76(1):73-80.
- MA, B., MEI, D., WANG, F., LIU, Y., ZHOU, W. 2019. Cognitive enhancers as a treatment for heroin relapse and addiction. Pharmacological Research. 2019;141:378-83.
- 7. GHOSH, A., SHAKTAN, A., NEHRA, R.,

- BASU, D., VERMA, A., RANA, DK., et al. 2023 Heroin use and neuropsychological impairments: comparison of intravenous and inhalational use. Psychopharmacology. 2023;240(4):909-20.
- 8. BOYD, S. 2021. Heroin and the illegal drug overdose death epidemic: A history of missed opportunities and resistance. International Journal of Drug Policy. 2021;91:102938.
- 9. NAZMARA, Z., SHIRINBAYAN, P., REZA ASGARI, H., AHADI, R., ASGARI, F., MAKI, CB., et al. 2021. The epigenetic alterations of human sperm cells caused by heroin use disorder. Andrologia. 2021;53(1):e13799.
- KREEK, MJ., NIELSEN, DA., BUTEL-MAN, ER., LAFORGE, KS. 2005. Genetic influences on impulsivity, risk taking, stress responsivity and vulnerability to drug abuse and addiction. Nature Neuroscience. 2005;8(11):1450-7.
- AGRAWAL, A. (2008) Lynskey MT. Are there genetic influences on addiction: evidence from family, adoption and twin studies. Addiction. 2008;103(7):1069-81.
- JONGENELIS, M., PETTIGREW, S., LAW-RENCE, D., RIKKERS, W. 2019. Factors Associated with Poly Drug Use in Adolescents. Prevention Science. 2019;20(5):695-704.
- 13. LOGANATHAN, K, LV, J., CROPLEY, V., ZALESKY, A., HO, ETW. 2021. Valuation system connectivity is correlated with poly-drug use in young adults. Neuroscience Research. 2021;173:114-20.

- 14. KHAN, A., ZAMAN, G., ULLAH, R., NAV-EED, N. 2021. Optimal control strategies for a heroin epidemic model with age-dependent susceptibility and recovery-age. AIMS Math. 2021;6(2):1377-94.
- BURDOVICZ, A. J., LAURITZEN, G., NORDFJAERN, T. 2015. Co-occurrence between mental distress and poly-drug use: A ten year prospective study of patients from substance abuse treatment. Addictive behaviors. 2015;48:71-8.
- JIA, W., SHI, JG., WU, B., AO, L., ZHANG, R., ZHU, YS. 2011. Polymorphisms of brain-derived neurotrophic factor associated with heroin dependence. Neuroscience Letters. 2011;495(3):221-4.
- 17. CHEN, S-L., LEE, S-Y., CHANG, Y-H., WANG, T-Y., CHEN S-H., CHU, C-H., et al. 2015. The BDNF Val66Met polymorphism and plasma brain-derived neurotrophic factor levels in Han Chinese heroin-dependent patients. Scientific Reports. 2015;5(1):8148.
- 18. GREENWALD, MK., STEINMILLER, CL., SLIWERSKA, E., LUNDAHL, L., BURMEISTER, M. 2013. BDNF Val66Met genotype is associated with drug-seeking phenotypes in heroin-dependent individuals: a pilot study. Addiction biology. 2013;18(5):836-45.
- 19. KUO, S-C., YEH, Y-W., CHEN, C-Y., HUANG, C-C., CHANG, H-A., YEN, C-H., et al. 2014. DRD3 variation associates with early-onset heroin dependence, but not specific personality traits. Progress in Neuro-Psychopharmacology and Biological Psychiatry. 2014;51:1-8.
- 20. LEE, S-Y., WANG, T-Y., CHEN, S-L., HUANG, S-Y., TZENG, N-S., CHANG, Y-H., et al. 2013. Interaction between novelty seeking and the aldehyde dehydrogenase 2 gene in heroin-dependent patients. Journal of clinical psychopharmacology. 2013;33(3):386-90.
- 21. MEDETROVICS, Z., VARGA, G., SZE-KELY, A., VERECZKEI, A., CSORBA, J., BALASZ, H., et al. 2010. Association between Novelty Seeking of opiate-dependent patients and the catechol-O-methyltransferase Val158Met polymorphism. Comprehensive Psychiatry. 2010;51(5):510-5.

- 22. LEVRAN, O., PELES, E., RANDESI, M., LI, Y., ROTROSEN, J., OTT, J., et al. 2014. Stress-related genes and heroin addiction: A role for a functional FKBP5 haplotype. Psychoneuroendocrinology. 2014;45:67-76.
- KELLY, AB., CHAN, GC., MASON, WA., WILLIAMS, JW. 2015. The relationship between psychological distress and adolescent polydrug use. Psychology of Addictive Behaviors. 2015;29(3):787.
- WEI, S., ZHU, Y., LAI, J., XUE, H., CHAI, Z., LI, S. 2011. Association between heroin dependence and prodynorphin gene polymorphisms. Brain research bulletin. 2011;85(3-4):238-42.
- 25. ZHANG, D., SHAO, C., SHAO, M., YAN, P., WANG, Y., LIU, Y., et al. 2007. Effect of μ-Opioid Receptor Gene Polymorphisms on Heroin-Induced Subjective Responses in a Chinese Population. Biological Psychiatry. 2007;61(11):1244-51.
- SAIZ, PA., GARCIA-PORTILLA, MP., ARANGO, C., MORALES, B., MARTI-NEZ-BARRONDO, S., ALVAREZ, C., et al. 2008. Association between Heroin Dependence and 5-HT2A Receptor Gene Polymorphisms. European Addiction Research. 2008;14(1):47-52.
- 27. MEYER-LINDENBERG, A, NICHOLS, T., CALLICOTT, JH., DING, J., KOLACHA-NA, B., BUCKHOLTZ, J., et al. 2006. Impact of complex genetic variation in COMT on human brain function. Molecular Psychiatry. 2006;11(9):867-77.
- 28. HAMIDOVIC, A., DLUGOS, A., PALMER, AA., DE WIT, H. 2010. Catechol-O-methyltransferase val158met genotype modulates sustained attention in both the drug-free state and in response to amphetamine. Psychiatr Genet. 2010;20(3):85-92.
- TAMMIMAKI, AE., MANNISTO, PT. 2010. Are genetic variants of COMT associated with addiction? Pharmacogenetics and genomics. 2010;20(12):717-41.
- DEJI, C., LI, Y., CHEN, Y., LAI, J., WEI, S. 2021. Association study of Catechol-o-methyltransferase and Alpha-1-adrenergic receptor gene polymorphisms with multiple phenotypes of heroin use disorder. Neuroscience Letters. 2021;748:135677.

- 31. CAO, L., LI, T., LIU, X. 2003. [Association study of heroin dependence and cate-chol-O-methyltransferase gene]. Zhonghua yi xue yi chuan xue za zhi = Zhonghua yixue yichuanxue zazhi = Chinese journal of medical genetics. 2003;20(2):127-30.
- HUOTARI, M., GARCIA-HORSMAN, JA., KARAYIORGOU, M., GOGOS, JA., MANNISTO, PT. 2004. d-Amphetamine responses in catechol-O-methyltransferase (COMT) disrupted mice. Psychopharmacology. 2004;172(1):1-10.
- 33. LEVRAN, O., PELES, E., RANDESI, M., CORREA, DA ROSA, J., OTT, J., ROTROSNE, J. et al. 2014. Dopaminergic pathway polymorphisms and heroin addiction: further support for association of CSNK1E variants. Pharmacogenomics. 2014;15(16):2001-9.
- WISE, RA., ROBBLE, MA. 2020. Dopamine and Addiction. Annual Review of Psychology. 2020;71(1):79-106.
- SAMAHA, A-N., KHOO, SYS., FER-RARIO, CR., ROBONSON, TE. 2021. Dopamine 'ups and downs' in addiction revisited. Trends in Neurosciences. 2021;44(7):516-26.
- HEAL, DJ., SMITH, SL., GOSDEN, J., NUTT, DJ. 2013. Amphetamine, past and present – a pharmacological and clinical perspective. Journal of Psychopharmacology. 2013;27(6):479-96.
- HAYLEY, AC, SHIFERAW, B., DOWNEY, LA. 2021. Amphetamine-induced alteration to gaze parameters: A novel conceptual pathway and implications for naturalistic behavior. Progress in Neurobiology. 2021;199:101929.
- PAPALEO, F., CRAWLEY, JN., SONG, J., LIPSKA, BK., PICKEL, J., WEINBERG-ER, DR., et al. 2008. Genetic dissection of the role of catechol-O-methyltransferase in cognition and stress reactivity in mice. Journal of Neuroscience. 2008;28(35):8709-23.
- 39. MATTAY, VS., GOLDBERG, TE., FERA, F., HARIRI, AR., TESSITORE, A. TESSITORE, A., EGAN, MF., et al. 2003. Catechol O-methyltransferase val 158-met genotype and individual variation in the brain response to amphetamine. Proceed-

- ings of the National Academy of Sciences. 2003;100(10):6186-91.
- 40. WARDLE, MC., HART, AB., PALMER, AA., DE WIT, H. 2013. Does COMT genotype influence the effects of d-amphetamine on executive functioning? Genes, Brain and Behavior. 2013;12(1):13-20.
- 41. TZENG, N-S., LU, R-B., YEH, H-W., YEH, Y-W., HUANG, C-C., YEN, C-H., et al. 2015. The dopamine transporter gene may not contribute to susceptibility and the specific personality traits of amphetamine dependence. Drug and Alcohol Dependence. 2015;149:100-7.
- 42. MEACHAM, MC., RUDOLPH, AE., STRATHDEE, SA., RUSCH, ML, BROU-WER, KC., PATTERSON, TL, et al. 2015. Polydrug Use and HIV Risk Among People Who Inject Heroin in Tijuana, Mexico: A Latent Class Analysis. Substance Use & Misuse. 2015;50(10):1351-9.
- 43. WU, L-T., BLAZER, DG. 2013. Substance use disorders and psychiatric comorbidity in mid and later life: a review. International journal of epidemiology. 2013;43(2):304-17.
- 44. MCHUGH, RK., NGUYEN, MD., CHARTOFF, EH., SUGARMANN, DE., GREENFIELD, SF. 2015. Gender differences in the prevalence of heroin and opioid analgesic misuse in the United States, 2015–2019. Drug and Alcohol Dependence. 2021;227:108978.
- 45. YUAN, Y., ZHU, Z., SHI, J., ZOU, Z., YUAN, F., LIU, Y. et al. 2009. Gray matter density negatively correlates with duration of heroin use in young lifetime heroin-dependent individuals. Brain and Cognition. 2009;71(3):223-8.
- 46. CAMPBELL, CI., BAHORIK, AL., KLINE-SIMON, AH., SATRE, DD. 2017. The role of marijuana use disorder in predicting emergency department and inpatient encounters: A retrospective cohort study. Drug and Alcohol Dependence. 2017;178:170-5.
- 47. PALAMAR, J.J, LE, A., MATEU-GE-LABERT, P. 2018. Not just heroin: Extensive polysubstance use among US high school seniors who currently use heroin. Drug and Alcohol Dependence. 2018;188:377-84.

Social Impacts of State Service Electronization

J. Vallova (Jana Vallova), M. Mrvan (Milos Mrvan)

St. Elizabeth University of Health and Social Sciences Faculty of Health and Social Work, Bratislava, SK

Original Article

Issue: 5

E-mail address:

jana.vallova2@minv.sk

Reprint address:

Jana Vallova

St. Elizabeth University of Health and Social Sciences, Bratislava

Faculty of Health and Social Work

Nam. 1. Maia c. 1 810 00 Bratislava

Slovakia

Source: Clinical Social Work and Health Intervention

Cited references: 15

Volume: 15 Pages: 91 – 100

Reviewers:

Gabriela Lezcano University of California, San Francisco, USA Daniel West University of Scranton school of education, USA

Keywords:

Digitalization. Impact. Public administration. Electronic service.

Publisher:

International Society of Applied Preventive Medicine i-gap

CSWHI 2024; 15(5): 91 – 100; DOI: 10.22359/cswhi_15_5_11 © Clinical Social Work and Health Intervention

Abstract:

The aim of this scientific article is to analyze the current state of digitization of public administration in the social sector in Slovakia in the context of the social impacts of the digital transformation of our society. The article discusses the results of our research activities, generalizes the acquired knowledge, and proposes specific measures and requirements for improving electronic services of public administration in the social sector.

Introduction

Public authorities provide services to citizens in various areas to address different life situations. Documentation, files, and records of clients are gradually shifting from simple paper-based files to complex information systems that exchange data

through interoperability. Instead of paper files, officials and social workers now use computers and electronic files, while ordinary people access information through laptops and smartphones. Internet connectivity should practically be available everywhere in today's world. (Matel, A. 2019)

For many individuals, information technology is still shrouded in a "veil of secrecy," and their use of it is limited or completely avoided. However, well-used technologies can be invaluable tools, saving human labor, time, and financial resources. (Samalova, K., Vojtisek, P. 2021) On the other hand, poorly implemented technologies can complicate work and become a burden for users. All institutions gradually adopting modern information and communication technologies in their processes must always define the requirements for implementing a new system to make its use efficient and straightforward for employees and citizens. (Berthotyova, E. 2014)

Digitization and progress in innovations are becoming an integral part of social welfare and public administration services. Sustainable and effective implementation of modern technologies can help save work, gather information about clients, allowing institutions to provide better and more efficient services. (Ondrusova, Z., Olah, M., Vavreckova, V. 2019) Our population is gradually aging, consuming more natural resources, but also investing more effort in developing new information and communication technologies to make life easier.

Within the EU, countries have relatively advanced social systems and healthcare, so modern nations face the question of how to maintain or enhance these standards, especially in the context of the current energy crisis, war, inflation, and the lingering pandemic. (Olah, M. 2020) Technologies are constantly penetrating into the realm of public administration and social services. The current trend of digitization not only affects the way clients communicate but also how documentation is managed and data exchanged.

"Modern communication technologies improve service and processing of various client requests while enabling customization to meet their needs. Contemporary conveniences can send information about a user's health, determine their location, and simplify the work of emergency services." (Mason, D. 2019) Portal solutions for public administration services provide various reports for public and individuals, and personalized online accounts help users access crucial information needed for social or other services provided by public or private institutions.

"The growing demand for social services on one hand and the lack of public financial resources on the other increase the pressure on the cost-effectiveness of providing these services. One tool for improving cost-effectiveness is the deinstitutionalization of social services provided in institutional facilities in cases where the health of the service recipient allows it." (Repa, V. 2014) Providing social services in institutional care facilities is being supplemented by the activities of field care services, including monitoring and signaling the need for support and delivering crisis assistance through telecommunications technologies. Innovative concepts of social services using telecommunications technologies have the potential to significantly reduce the costs of providing social services, benefiting not only service providers and guarantors but also service recipients in terms of affordability. (Mikusova Merickova, B. 2013)

"The relevance of implementing digital communication tools into our daily lives must be perceived in various dimensions and levels of society. Informationization tools of society and public administration must be capable of responding flexibly, rapidly, and effectively to continually changing societal conditions." (Jaskyte, K. 2010) The bureaucratic apparatus should not hinder the provision of social services and social assistance using modern electronic communication tools but should constitute a process-driven coherent complex enabling individuals or groups to assert their social rights and ensuring the protection of the social status of all citizens of the state.

Current societal crises serve as a mirror for the functioning of state and local authorities specializing in the social sphere. Their evolution must be guided by these experiences and expertise to continually develop and improve their functioning in the context of international cooperation and coordination among European states. (Thijs, N et al. 2010)

Description of the Research Problem

The informatization and electronization of public administration services are current and important topics in the digital world, requiring the implementation of new innovations in the public sector. This process involves transforming traditional administrative processes into digital form with the aim of simplifying and streamlining service provision to citizens and improving the public sector's agenda. (Vallova, J. 2010) These efforts are also present at the European level, where the priority is to achieve a "Digital Europe" to promote digital transformation throughout Europe and ensure that all citizens can access digital services. (Bisman, C. 2014)

In our research, we focused on investigating the issues of informatization and electronization of public administration services. The primary scientific problem was to analyze the social impacts and influences of electronization and digitalization of the information held by public authorities in fulfilling their duties and providing services to citizens. In this context, we also describe other socio-societal consequences resulting from the use of information and communication technologies. The benefits of implementing new modern elements into citizens' daily lives should always outweigh the risks and negative impacts, including the informatization and digitalization of society, which negatively affects primarily groups of citizens with lower education and social status, who do not have sufficiently developed hard and soft skills. Therefore, it is crucial to ensure the proper and adequate introduction of electronic communication means into the activities of public authorities, especially in the fields of healthcare, social services, and social care, so that they can be used and accessible to all citizens equally.

Such an approach has the potential to increase the efficiency and transparency of public administration. Informatization and electronization pose numerous challenges for public authorities to address. Some of the most important tasks include data security, accessibility of e-services, system interoperability, and ensuring the quality of services provided. In this context, it is also important to remember that not all citizens have access to the internet, so there should still be the option to provide services in traditional form, especially for disadvantaged citizens. At the same time, it is necessary to gradually teach them to use ICT tools to address life situations.

"The state must focus its efforts on creating and operating services that are accessible to citizens and user-friendly so that handling matters is simple for people." (Elichova, M. 2017) Slovakia has embarked on the path of building customer service centers in various areas of state administration and, in cooperation with local self-government, seeks synergistic effects in integrating services into one system and location. Through legislative and technical tools, information systems of the state are gradually integrated, administrative burdens of public administration are reduced, and efficiency is improved. However, this requires further investments in innovation and sustainability support. A significant challenge in providing state services is catching up with advanced European countries, but the processes established provide a good starting point for building modern, citizen-centric public administration in Slovakia.

The research was oriented towards a comprehensive assessment of the social aspects of electronization in public administration, with a focus on the social status of citizens. It provides insights into the perception of electronic services from the perspective of their users and defines the extent of time and cost savings when using them. The research results also include universal guidelines for the development of public administration information systems in the form of recommendations for practice to meet the needs and expectations of citizens and contribute to improving the quality of electronic public services.

We defined the research goals as follows:

To analyze the impacts of the informatization and electronization of public administration services from the perspective of citizens.

To examine the relationship between the level of digital literacy and the use of electronic public administration services from the perspective of citizens.

To investigate the factors influencing citizens' experiences and opinions on electronic services, such as age, gender, and education.

To determine the subjective perceived advantages and disadvantages of electronic services for citizens and how this affects their satisfaction with public service provision or their use in everyday life.

To evaluate the impact and effectiveness of the electronization of public services, especially in terms of speed and efficiency in service provision and time and cost savings for citizens.

To examine the challenges and obstacles in the implementation and development of electronic services, analyze the reasons why citizens do not use them adequately.

To propose recommendations for improving electronic services that take into account the needs and expectations of citizens and contribute to the improvement of the quality of electronic public services.

The primary research tool we used for data collection was a questionnaire, which we consider as the fundamental quantitative research method used to obtain structured and measurable data about the opinions, attitudes, and behaviors of respondents. When using the questionnaire, we created a set of questions that have a specific purpose and are logically organized in relation to the research objectives.

The questionnaire used for the research on the impacts of the electronization of public administration services examined various questions related to citizens' perspectives on electronic services and their use in specific areas: Demographic data.

Level of digital literacy.

Internet availability and knowledge of e-services. Use of electronic services in everyday life.

Attitudes and effectiveness of the introduction of electronic services by public administration bodies.

Assessment of the advantages and disadvantages of informatization and electronization in public administration.

Identification of barriers and problems that hinder respondents from fully utilizing electronic services.

Evaluation of respondents' expectations of electronic services that could be improved or expanded.

Examination of respondents' attitudes toward privacy and security when using electronic services.

The research sample consisted of citizens who, at the time of data collection, used customer services of public administration bodies as part of the services provided by labor offices, social affairs and family offices, and branches of the Social Insurance Agency in the Bratislava

region from September to November 2022. This was the period when data collection was carried out in the field, and during this period, we came into contact with the research sample, which was selected based on specific selection criteria:

- a) Gender.
- b) Age over 18 years.
- c) Education.
- d) Experience with e-services and the ability to form an opinion on e-services provided by public administration.
- e) Use of customer services of labor offices, social affairs and family offices, and the Social Insurance Agency over the past 6 months.

(Note: The translation provided is a comprehensive summary of the original Slovak text, aiming to convey the content and key points of the scientific article. If you require a more detailed translation or have specific questions regarding certain sections, please let me know.)

Statistics

		Sex	Age	Education	Experience
N	Valid	125	125	125	125
IN	Missing	0	0	0	0
Std. Deviati	on	,501	1,245	1,014	,501
Kurtosis		-2,011	-1,023	-1,016	-2,011
Std. Error of	Kurtosis	,430	,430	,430	,430
	25	1,00	2,00	2,00	1,00
Percentiles	50	1,00	3,00	2,00	2,00
	75	2,00	4,00	3,00	2,00

A total of 125 respondents were involved in the research, of which 53.6% were women and 46.4% were men.

Sex

	Frequency	Percent	Valid Percent	Cumulative Percent
Women	67	53,6	53,6	53,6
Men	58	46,4	46,4	100,0
Total	125	100,0	100,0	

The age structure of the respondents was from 18 years, while the youngest group of respondents in the 18-24 years category was 19.2% of respondents. 20.8% of respondents aged 25-34 participated. The middle age category consisted of respondents aged 35-44, who represented 27.2%. The older age group included 24% of people aged 45-54, and 8.8% were involved in those aged 55 and over.

Age structure of respondents

	Frequency	Percent	Valid Percent	Cumulative Percent
18-24 years	24	19,2	19,2	19,2
25-34 years	26	20,8	20,8	40,0
35-44 years	34	27,2	27,2	67,2
45-54 years	30	24,0	24,0	91,2
55 and more years	11	8,8	8,8	100,0
Total	125	100,0	100,0	

20.8% of respondents achieved primary education, 38.4% of respondents completed secondary education, and from the total sample, 22.4% of respondents stated that they had completed first-level university education. 18.4% of respondents indicated that their completed education was a second-level university education.

Education

	Frequency	Percent	Valid Percent	Cumulative Percent
Basic	26	20,8	20,8	20,8
High school	48	38,4	38,4	59,2
University – degree 1	28	22,4	22,4	81,6
University – degree 2	23	18,4	18,4	100,0
Total	125	100,0	100,0	

44% stated that they have some experience in using e-services of public administration bodies, and on the contrary, 56% of respondents have no experience.

Experience with the use of e-services in public administration

	Frequency	Percent	Valid Percent	Cumulative Percent
No experience	70	56,0	56,0	45,4
With experience	55	44,0	44,0	100,0
Total	125	100,0	100,0	

In the research, we dealt with the social aspects of the implementation of e-Government at the level of public administration, which includes the provision of electronic services within the framework of its client workplaces of labour, social affairs and family offices, as well as branches of the Social Insurance Company, which we analysed at the following levels:

- 1. availability;
- 2. understanding and knowledge of e-services;
- 3 use of e-services:
- 4. support and quality of e-services;
- 5. organization and provision of e-services, including protection.

Chart 1 Dimensions of inquiry in research

E-services of public administration bodies – areas of investigation

	Frequency	Percent	Valid Percent	Cumulative Percent
Availability	21	16,8	16,8	16,8
Understanding and knowledge of e-systems	28	22,4	22,4	39,2
Use of e-services	33	26,4	26,4	65,6
Support and quality of e-services	23	18,4	18,4	84,0
Organization and provision of e-services, including protection	20	16,0	16,0	100,0
Total	125	100,0	100,0	

The authors pay attention to the quality of electronic services (e-services) and the search for criteria for satisfaction with these services in connection with the increasing rate of acceptance of electronic technologies by citizens compared to the previous period. The development of methods for measuring the quality of e-services and user satisfaction with e-services is at an insufficient level, as it contains a number of determining factors and influences.

16.8% of respondents identified the availability of e-services as a key element that has an impact on the low use of electronic services in public administration, while 16.8% identified the problem of internet inaccessibility, weak internet coverage or unstable internet connection as an obstacle for them to the use of e-services in general. 24.0% indicated the systemic unavailability of e-services, which are not technically well secured and are difficult to use in practical life. 25.6% of respondents perceive content accessibility as a problem, pointing to the lack of transparency of information, its complexity, and low practicality. 16.8% of respondents answered that many systems are not comprehensive. Likewise, 16.8% of respondents stated that the electronic services of public authorities are not effective, which increases their inaccessibility for most citizens in everyday life when handling the services of public administration authorities using modern means of communication.

Chart 2 Evaluation of the dimension of availability of public administration e-services

Availability

	Frequency	Percent	Valid Percent	Cumulative Percent
Internet availability	21	16,8	16,8	16,8
System availability	30	24,0	24,0	40,8
Content availability – transparency of information	32	25,6	25,6	66,4
Lack of complexity	21	16,8	16,8	83,2
Effective availability	21	16,8	16,8	100,0
Total	125	100,0	100,0	

Chart 3 expresses the reasons why public administration e-services are insufficiently used by citizens based on the "understanding" dimension. 19.2% of respondents stated that they do not understand the entire digitalization of services, they cannot adapt to new innovations in the virtual space and they do not know them well enough. 16.8% do not use these services because they do not meet their real needs. 32.0% have low digital literacy and cannot practically use these tools. 19.2% have no information that these tools exist; they expressed that there is a low awareness of citizens. 12.8% of respondents said that the guides, instructions and procedures for using electronic services, published on the websites of public administration bodies, are not sufficient and do not solve the problems that citizens encounter when using e-services.

Chart 3 Evaluation of the dimension of understanding of public administration e-services

Understanding

	Frequency	Percent	Valid Percent	Cumulative Percent
Lack of understanding of innovations and the e-services system	24	19,2	19,2	19,2
Usability for needs	21	16,8	16,8	36,0
Low literacy	40	32,0	32,0	68,0
Ignorance and low knowledge	24	19,2	19,2	87,2
Instructions, instructions and procedures	16	12,8	12,8	100,0
Total	125	100,0	100,0	

In the research, we investigated what factors influence the use of e-services provided by public administration bodies. The results of the research showed (chart 4) that the low digital thinking of the respondents increases the inability to know and use these tools in the "virtual world" for

20.0% of them. 18.4% of respondents have low digital literacy, which may be caused by the digital divide in society, but also by a low ability to adapt to digital changes and use digital tools to handle official matters online. 29.6% answered that they do not use e-services because if a technical problem occurs, they do not know how to solve it, and this subsequently discourages them from working independently in a virtual environment and using e-services of public administration bodies. 15.2% of respondents do not have time to keep up with innovations and new information and communication technologies. 16.8% presented the opinion that they are discouraged from using e-services by the duplication of filling in personal data and data held by the state, and the related disconnection of e-systems within the public administration.

Chart 4 Evaluation of the dimension of the utilization of public administration e-services

Utilization

	Frequency	Percent	Valid Percent	Cumulative Percent
Low digital thinking	25	20,0	20,0	20,0
Low digital skills	23	18,4	18,4	38,4
Inability to solve technical problems	37	29,6	29,6	68,0
ICT and innovation	19	15,2	15,2	83,2
Duplication and disconnection of systems	21	16,8	16,8	100,0
Total	125	100,0	100,0	

In the questionnaire, we analysed how citizens evaluate the organization of public administration e-services and what negative aspects

of digitalization they encounter. 21.6% of respondents mentioned the requirement to fill in repetitive information and criticized the speed of the system for providing what they need. 20.0% confirmed their experience that e-services took more time for them to fill in forms and requests than for personal handling, because they first had to familiarize themselves with the e-system in order to use it, or they did not find all the necessary information to use the e- services on the website of the given public administration body, whether they were unable to solve technical problems. 19.2% could not assess the adequacy of the required information within the e-services and this system seemed to them to be imperfect, the information was provided in duplicate and unclear. 17.6% consider the overall coordination of activities, whose quality is low, to be negative aspects of the digitalization of services.

Chart 5 Evaluation of the dimension of the establishment of public administration e-services

Establishment of public administration e-services

	Frequency	Percent	Valid Percent	Cumulative Percent
Coordination of activities	22	17,6	17,6	17,6
Adequacy of documentation	24	19,2	19,2	36,8
Repetition of info	27	21,6	21,6	58,4
System speed for equipment	27	21,6	21,6	80,0
Low cost savings	25	20,0	20,0	100,0
Total	125	100,0	100,0	

Chart 6 presents the attitudes of citizen-respondents towards the digitalization of public administration, which also express negative aspects. The main negative impact of the digitalization and computerization of public administration is the low adaptability of respondents to e-services, who do not have sufficient competence to adapt to new innovations and digital tools (30.4%).

17.6% are not interested in learning something new, and for 14.4%, public administration e-services are not attractive enough for them to use them regularly and realistically in everyday life. 16.0% of respondents do not trust electronic services and prefer personal contact with an official, because they do not know where the provided information ends up and how it is processed. 21.6% confirmed that electronic services and the computerization of public administration are not flexible enough and are not adapted to the needs of citizens so that they are efficient, fast and accessible enough.

Chart 6 Evaluation of the dimension of attitudes towards public administration e-services

Attitudes towards public administration e-services

	Frequency	Percent	Valid Percent	Cumulative Percent
Low attractiveness of e-services	18	14,4	14,4	14,4
Low adaptability to e-services	38	30,4	30,4	44,8
Not interested in learning something new	22	17,6	17,6	62,4
Failure to adapt to the needs of citizens	27	21,6	21,6	84,0
Mistrust and personal contact	20	16,0	16,0	100,0
Total	125	100,0	100,0	

Through research, we found that the quality of the support system of electronic services for citizens is a key factor in order for them to actually start using it. An insufficient helpdesk support system, or low trust, reduce the readiness of citizens to use electronic services regularly and in the long term.

Chart 7 expresses the statements of respondents to the question of how they evaluate public administration support in e-services. 20.0% expressed that the helpdesk support of public administration bodies is very low or insufficient, and they also considered the stability and functionality of e-services insufficient, which was noted by 27.2% of them. 26.4% of the respondents confirmed that, according to personal experience, these services are poorly addressed, they are not adapted to the adequate needs of citizens. 16.0% expressed the belief that the speed of equipment is not significantly different from personal contact at the office. 10.4% answered that these services are completely unavailable to them, either because of unstable Internet and system coverage or because of low digital literacy and the ability to use these e-services.

Chart 7 Evaluation of the dimension of support for e-services

Support for e-services

	Frequency	Percent	Valid ercent	Cumulative Percent
Quality of helpdesk support	25	20,0	20,0	20,0
Stability and functionality	34	27,2	27,2	47,2
Addressability and suitability	33	26,4	26,4	73,6
Equipment speed	20	16,0	16,0	89,6
Accessibility	13	10,4	10,4	100,0
Total	125	100,0	100,0	

Conclusion

The future of electronic services holds the potential to become a suitable tool for streamlining public administration, reflecting in the resolution of real-life situations for citizens, and unifying, simplifying, and enhancing the e-systems of public administration after meeting the required criteria. (Munday, B. 2018) With the rapid advancement of technology and the increasing number of devices connected to the internet, electronic services will increasingly become a part of everyday life. With the rise of intelligent mobile devices and tablets, most electronic services will also be accessible from smartphones. Mobile applications and websites are already important components of electronic services and will continue to evolve. (Wortmann, F. et al. 2011)

Based on the conducted research, the following conclusions can be drawn:

- Electronic services should further adapt to the specific needs and preferences of users.
- It is necessary to increase the internet, content, and technical accessibility of electronic services provided by public authorities to make them accessible to disadvantaged groups of citizens.
- Users of e-services require them to become faster and more efficient, so it is necessary to add features such as chatbots and voice assistants to automate customer support and user communication, thereby enhancing the attractiveness and support of e-services.
- Security remains an increasingly important part of electronic services. With the increasing number of cyber threats and attacks and the growing amount of sensitive data transmitted over the internet, service providers must invest more in securing their e-systems.

The introduction of e-services should be designed and implemented to improve the quality of life for citizens and make their use convenient and straightforward. Based on the above-mentioned requirements, we have formulated several recommendations to ensure that the introduction of e-services does not lead to a deterioration in the lives of citizens:

Ensure that all citizens have access to e-services and that they are also available to those who do not have internet access or digital

- skills. This may involve creating basic e-services accessible via phone or at local offices through kiosks.
- Provide citizens with education and training on the use of e-services and digital technologies. Education should be tailored to individual needs to ensure that they can successfully use e-services and enhance their digital literacy, making electronic services less intimidating for them.
- Improve the protection of personal data, security, and support to increase the credibility and reliability of electronic public services.
- Collect feedback from citizens and use insights to improve and optimize e-services based on the needs of citizens in different areas of public administration.
- Ensure that e-services are updated and improved to be as useful as possible for citizens, thereby improving their usability. It is also important to promote the unification of e-systems.
- Provide equal access to ensure that e-services are provided to all citizens equally, regardless of their gender, age, ethnic background, health status, or digital literacy. It is essential to ensure equal opportunities for all to access e-services.

References

1. Books and Monographies

- Bisman, C. 2014. Social Work: Value-Guided Practice for a Global Society. New York
 Columbia University Press, 2014. 252 s. ISBN 978-0231-536-88-2.
- Elichova, M. 2017. Social work: current issues. Praha: Grada Publishing a.s., 2017. 198 s. ISBN 978-8027-198-03-0.
- Jaskyte, K. 2010. Management and Administration in Social Work: Oxford Bibliographies Online Research Guide. Oxford:

 Oxford University Press, 2010. 421 s. ISBN 978-0199-802-48-7.
- Mason, D. 2019. Exam Prep for: Research Methods in Public Administration. Washington: Rico Publications, 2019. 398 s. ISBN 978-451-25652-0.
- 5. Matel, A. 2019. Social Work Theory I: Social Work as a Profession, an Academic Disci-

- *pline and discipline*. Praha: Grada Publishing a.s., 2019. 261 s. ISBN 978-8027-122-20-2.
- Munday, B. 2018. *Integrated social services in Europe*. Strasbourg: Council of Europe Publishing, 2018. 84 s. ISBN 978-92-871-6208-3.
- 7. Olah, M. 2020. Social work in practice: The most common problems in social work practice. Bratislava: IRIS Vydavateľstvo a tlač, s.r.o., 2020. 127 s. ISBN 978-80-8972-658-5.
- Ondrusova, Z., Olah, M., Vavreckova, V. 2019. Development trends in social work. Brno: Institut vzdělávání Sokrates, 2019. 294 s. ISBN 978-80-87291-22-1.
- 9. Samalova, K., Vojtisek, P. 2021. Social Administration: Organization and management of social systems. Praha: Grada Publishing a.s., 2021. 324 s. ISBN 978-80-2712-195-3.
- Vallova, J. 2010. Administrative procedure for social workers. Bratislava: University of Health Sciences and Social Work of St. Elizabeth. 2010. 219 s. ISBN 978-80-8927-186-3.
- 11. Wortmann, F. et al. 2011. Service-Oriented Perspectives in Design Science Research. 6th ed. Milwaukee: Spring, 2011, p. 476. ISBN-13: 978-3642206320

2. Articles

12. Berthotyova, E. 2014. Good governance - a principle of modern public administration. In: *Bulletin of the Slovak Bar Association*. roč. 19, č. 12, s. 6 - 12. ISSN 1335-1079.

3. Electronic documents - monographies

13. Mikusova Merickova, B. 2013. SOCIAL SER-VICES USING TELECOMMUNICATIONS TECHNOLOGIES IN SLOVAK REPUBLIC [online]. 2013. [cit. 2023-01-15]. Available online: <https://www.ef.umb.sk/dsr_2013/pdf/Miku%C5%A1ov%C3%A1,%20Mi-ku%C5%A1.pdf>.

4. Articles in e-journals and other articles

14. Repa, V. 2014. *Process management of public administration*. [online]. [cit. 2023-01-15]. Available from: <https://www.isss.cz/archiv/2014/download/prezentace/vse_repa.pdf>.

15. Thijs, N et al. 2010. Measure to Improve. Improving public sector performance by using citizen – user satisfaction information. European Institute of Public Administration [online], 2011. 108 s. [citované 2023-02-18]. Available from: https://www.eupan.eu/wpcontent/uploads/2019/02/2010_2_BE_Measure_to_Improve_Improving_Public_Sector_Performance_by_Using_Citizen_User_Satisfaction_Information.pdf.

No. 5, Vol. 15, 2024

Editor-in-chief: Dr.hc. Mult. Dr. Daniel J. West, Jr. PhD, LFACHE, FACMPE

CLINICAL SOCIAL WORK

AND HEALTH INTERVENTION

Indexed by:

Web of Science/ESCI

ERIH

Alexander Street

ProQuest

ScienceOpen

Ulrich's

CrossRef Similarity Check Powered by iThenticate

Journal DOI 10.22359/cswhi Issue DOI 10.22359/cswhi_15_5

