Chapter 4
The Matrix of Complexity Associated With the Process of Social Intervention With Chronic Kidney Disease Patients

Marta Freitas Olim
https://orcid.org/0000-0001-5151-9425
Diaverum, Portugal

Sónia Guadalupe
https://orcid.org/0000-0003-4898-3942
University Coimbra, Portugal

Fernanda da Conceição Bento Daniel
https://orcid.org/0000-0002-2202-1123
University Coimbra, Portugal

Joana Pimenta
https://orcid.org/0000-0002-7617-7270
Diaverum, Portugal

Luís Carrasco
https://orcid.org/0000-0002-7835-5296
Diaverum, Portugal

Alexandre Gomes da Silva
https://orcid.org/0000-0001-5163-9670
University of Coimbra, Portugal

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ABSTRACT

This chapter discusses the standardization of instruments and typologies in social work assessment and introduces, from a multidimensional perspective, a new standardized instrument evaluating the level of complexity associated with the social intervention process in a sample of chronic kidney disease (CKD) patients. The authors evaluated the matrix’s metric properties by internal consistency and defined a rating index through the best cutoff points, using receiver operator curve and Youden Index. Matrix construction and validation used focus groups of experts in blinded classification of 100 CKD patients and indicator weighting. The matrix shows good internal consistency and reliability (Cronbach’s alpha = .742). Cutoff points indicate three levels of complexity classification. The matrix is a good instrument to identify the complexity associated with the social intervention process in the area of Nephrology, and is a relevant contribution to the social information management of social workers, the health teams and the administration of health units.

INTRODUCTION

The computerization of social assessment in the context of health organizations poses enormous challenges. The complexity of patients’ social situations rarely emerges from linear and fragmented statistics derived from records based on isolated variables. Understanding Social Work’s intervention process, the actions it entails and the time involved are often difficult to justify to management departments because they arise from a complex set of interlocking factors that are difficult to quantify. In close complementarity with the clinical diagnosis and prognosis, the social diagnosis must be expressed through methods that recognize this complexity.

In a society dominated by technology, the pressure to record social information related to the processes of study, diagnosis, planning and social intervention has increased sharply to quantify this information, as well as the evaluation of professionals’ workloads. Scientificity, instrumental rationality and technicality cannot, however, overshadow the values of the profession and its humanistic realm, under penalty of realizing the risks of de-professionalization associated with fragmentation and over-bureaucratization emphasized by managerialism and social technology (Amaro, 2014). Despite of the McDonaldization of the social care and care management in Social Work, the “adherence to professional values, supported by professional registration, and an awareness of power, both instrumental and normative, can promote good practice” (Dustin, 2007, p. 164). Opting for a scientific-humanist profile, Amaro (2012) mentions that the instruments are defined and mobilized based on the analysis of a given situation, requiring a reflexive and critical position.
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