

The construction of knowledge and teaching practices about collective health in Social Work

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Abstract

Health is an area of extensive development and professional practice of social work. The article aims to reflect on the production of knowledge in the field of collective health from social work. The interest in this topic arises from teaching practice in the Collective Health subject of the Social Work career at the UNMDP (Argentina).

To carry out this exercise we reviewed bibliographic sources and identified some of the topics investigated from social work in the field of collective health. The main section of the article is structured in three stages. The first exposes the theoretical framework from which we think about collective health as a field of study. The second consists of a description of publications on health and social work. Finally, the third is dedicated to rethinking how collective health training in the social work degree program contributes to the construction of disciplinary knowledge. The conclusions state that the incorporation of issues related to collective health into the social work curriculum is key in the construction of analytical schemes to think about research problems and, thus, to fertilize the investigative attitude of the profession.

Keywords: Social work; Collective health; Knowledge production; Teaching practice.

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La construcción de conocimiento y las prácticas de enseñanza sobre la salud colectiva en Trabajo Social

Resumen

La salud es un ámbito de amplio desarrollo y ejercicio profesional del Trabajo Social. El artículo se propone reflexionar sobre la producción de conocimiento en el campo de la salud colectiva desde el Trabajo Social. El interés por este tema surge a partir de la práctica docente en la asignatura Salud Colectiva de la carrera de Trabajo Social en la UNMDP (Argentina). Para realizar este ejercicio hicimos una revisión de fuentes bibliográficas e identificamos algunos de los temas investigados desde Trabajo Social en el campo de la salud colectiva. El apartado principal del artículo está estructurado en tres momentos. El primero, expone el marco teórico a partir del cual pensamos la salud colectiva como campo de estudio. El segundo, consta de una descripción de publicaciones sobre salud y Trabajo Social. Finalmente, el tercero está dedicado a repensar cómo la formación en salud colectiva en la carrera de grado de Trabajo Social contribuye con la construcción de conocimiento disciplinar. Las conclusiones exponen que la incorporación de temas vinculados a la salud colectiva a la currícula de Trabajo Social es clave en la construcción de esquemas analíticos para pensar problemas de pesquisa y, así, abonar la actitud investigativa de la profesión.

2 **Palabras clave:** Trabajo Social; Salud colectiva; Producción de conocimiento; Práctica docente.

Summary: 1. Introduction, 2. Methodology, 3. Findings, 3.1 Collective health as a field of Study, 3.2 Themes and Perspectives: background on Social Work and Collective Health, 3.3 From Background Analysis to teaching practices on collective Health in Social Work, 4. Conclusions, 5. Bibliographic references.



1. Introduction

Collective Health is one of Latin America's critical health traditions. It is an interdisciplinary field of knowledge production around "health" and practices in which different institutions intervene inside and outside the field of Health. (De Almeida-Filho and Silva-Paim, 1999). Given the trajectory of Social Work in public Health, fruitful contributions can be made through professional practice that contributes to producing scientific knowledge in the professional field and dialogue with areas of Study such as collective Health. The article's objective is to reflect on the production of knowledge in the field of collective Health from Social Work. For this, on the one hand, through the bibliographic review, we identify some of the topics of studies and emerging themes for research in Social Work on collective health problems, and, on the other hand, we reflect on how training in collective Health in the Social Work degree program contributes to the production of disciplinary knowledge.

The interest in this topic arises from teaching practice in the Collective Health subject of the Social Work career at the Universidad Nacional de Mar del Plata (Argentina). The Curriculum of the Bachelor's Degree in Social Work taught at the Universidad Nacional de Mar del Plata establishes a set of degree training instances per the current conceptions and current disciplinary challenges of Social Work appropriate to the framework granted by the Ley Federal de Trabajo Social N.27072/14¹ In Argentina. Collective Health is taken in the fourth year of the Bachelor's degree in Social Work. It is precisely part of the Psychosocial curricular area that, together with other subjects, includes a set of inputs for professional training based on a conceptual framework of reference, following the objectives and responsibilities of Social Work and interdisciplinary content for the professional intervention process. In recent years, university training in social work has been rethought by contemporary social transformations, and this process has concluded with establishing a new study plan for the career. Among many other consequential modifications, it changed the subject's name - now Collective Health - previously called Preventive and Social Medicine. In this line, the subject is guided by the minimum curricular contents that ascribe to the current transformations in the field of Health and especially to the current training guidelines in Social Work. This modification brought with it epistemological and political implications in line with the multiple possibilities of professional insertion, with the transformations in the field of Health and the specificities that it acquires in Argentina (Spinelli, 2010).

The development of the article has three moments. The first is in which the central aspects of collective Health as a field of Study are described. Its main contributions have been to

¹ "La presente ley tiene por objeto establecer el marco general para el ejercicio profesional de Trabajo Social en todo el territorio nacional, sin perjuicio de la aplicación de las normas locales dictadas por las provincias y la ciudad autónoma de Buenos Aires" Article 1 of the Ley Federal de Trabajo Social N. 27072/14.

demonstrate that health-disease processes have a historical and social character (Laurell, 1982) and conceptualize their determination instead of seeking causality (Silva-Paim, 2021). In the second section, we review some publications on collective Health and Social Work to know what topics are addressed, what methodologies are used, and from what perspectives. The journey through different articles shows that Health has been an area of extensive development and professional practice in social work. Intervention practices have been addressed with different approaches and around different problems, and knowledge on the most varied objects of health studies has been produced. However, the results are more limited when narrowing the search to bibliographic references focused on the field of collective Health and Social Work. The third moment describes how the analytical intersections of collective Health and Social Work are expressed in teaching practices on collective Health in the social work career. Throughout the subject, topics such as the social determinants of Health, some current problematizations in the health-society relationship, discussions around primary health care, the gender perspective in Health, and finally and transversally, the professional implications of Social Work in this area.

2. Methodology

Within the framework of this work, a bibliographic search was carried out in the Scielo and Lilacs databases on research in Social Work in the field of collective Health to detect the topics that have been addressed and in what way. The search used the keywords collective Health, Health, and Social Work. This exercise yielded productions from other disciplines that exceeded the topic of interest, so a preliminary reading of the titles allowed the exclusion of articles that did not come from Social Work. The background review allowed us to systematize the scientific production of Social Work in collective Health, describing the topics and problems addressed and the theoretical perspectives and methodologies used.

3. Findings

3.1 Collective Health as a Field of Study

Collective Health constitutes an interdisciplinary field of knowledge production around Health and practices in which different institutions intervene within and outside the field of Health (De Almeida-Filho & Silva-Paim, 1999). Since the 1970s, it has begun to be recognized, on the one hand, as a scientific field being established in Latin America (Silva-Paim, 2021), achieving an inevitable institutionalization in the academic field under the name collective health (Spinelli *et al.*, 2017). On the other hand, collective Health emerges as a form of struggle. It is built as a movement that reflects on the contradictions and agreements with institutionalized public Health both in the technical-scientific field and in practice. In that sense, it is consolidated as a project to counteract social inequalities in Latin America.

A set of distinctive aspects has been fundamental in its process of academic institutionalization. Firstly, the criticism of traditional public Health is defined as a functionalist structural theoretical matrix with a technocratic vision of state intervention in Health. Secondly, the progressive construction of institutional spaces for collective Health in different areas, such as creating magazines, postgraduate courses, and conferences, accompanied by consolidating references in different places in Latin America. And finally, the definition of central discussion and research topics within the field (Spinelli *et al.*, 2017). The constitution of Collective Health is the product of dialogues with the social sciences, public Health, and social medicine (Breilh, 2006), which has strongly developed in Latin America (Jarillo-Soto & Ginsberg, 2007). Starting from health studies focused on the social sciences, in the sixties, local advances were systematized on the interpretation of the determinants and social response of the health-disease process, evidencing the need to solve health problems from the improvement of all of life social (Rosen, 1985, cited in Jarillo-Soto and Guinsberg, 2007).

Collective Health as a scientific field develops both a field of knowledge and a field of practice (Silva-Paim, 2021). Therefore, it is possible to find empirical and reflective contributions from different perspectives regarding the object that represents Health and illness and how society understands and copes with it (Jarillo-Soto & Guinsberg, 2007). It covers a field of knowledge, practices, and action whose initial conceptual framework recovered the critical knowledge of social medicine and social movements that sought the democratization of Health (Silva-Paim, 2021). One of the central issues of this tradition is to propose collective action as a commitment to solving health problems, as opposed to formulas focused on individualism and the commercialization of Health (Paiva *et al.*, 2018). For this reason, it is considered part of the critical traditions of Health thought in Latin America.

Its main contributions have been demonstrating that health/disease processes have a historical and social character and conceptualizing their determination instead of seeking causality (Silva-Paim, 2021). The range of topics addressed from collective Health includes the Study of the health/disease phenomenon in populations in its nature as a social process (Laurell, 1982); the production and distribution of diseases in society as processes of production and social reproduction; and how society identifies its health needs and problems, seeks their explanation and organizes to face them. Among the most exciting contributions are understanding the determinants of health disease processes, defining intervention alternatives against health problems, and developing public policies (Jarillo-Soto & Guinsberg, 2007).

Epidemiology, health planning/administration, and social sciences in Health are some of the essential disciplines for constructing knowledge in this field. The critical or social epidemiology developments are an exciting example of collective Health's contribution to knowledge production. It is presented as an alternative to positivist epidemiology based on causal risk factors. They understand it as a distinctive epistemological, ontological, and methodological position (Breilh, 2006). Hernández outlines some of their differences and, in

conversation with Breilh, analyzes the critical epidemiology proposed by De Almeida-Filho (Hernández, 2009). Critical epidemiology expresses a Latin American proposal compared to the classical epidemiology of the Anglo-Saxon tradition. The same part of the historical-social paradigm defines the objective of StudyStudy as the health-disease process of the groups. In addition, it has a position against inequality, emphasizing that the primary determinant of getting sick and dying is the socioeconomic conditions of the population groups. Among other issues, it makes the political commitment of epidemiology explicit and how socioeconomic structural determinants can be transformed. Their conclusions include that:

La Epidemiología Crítica como fenómeno latinoamericano, no cuestiona la cientificidad de la instrumentación de la Epidemiología Convencional, ni la subvalora. Solo que los considera insuficientes para explicar el proceso salud/enfermedad. Reconoce que la Epidemiología Convencional tiene un alcance muy limitado en cuanto a la “causalidad social”. El cuestionamiento de la Epidemiología Crítica es reconocer la “politicidad” de la Epidemiología, y su vocación de discurso contra-hegemónico frente a una Epidemiología Convencional que califica como institucional, estatal, para la cual la comunidad es solo generadora pasiva de datos. (Hernández, 2009, p. 26)

Taking this tradition as a starting point, some research proposes the vulnerability approach in dialogue with Human Rights to reflect on health practices (Paiva *et al.*, 2018). They understand that,

The vulnerability framework shows us that there is not a natural history of illness but a social history of illness, not only because the content of that history is social and historical but also because the way it is told is social and historical. (Paiva *et al.*, 2018, p. 48)

This point of view assumes that there are different ways of telling and intervening around a health-illness-care phenomenon, depending on the perspective of the person who narrates it. Therefore, identifying the social history of diseases implies recognizing the social actors responsible for acting on these phenomena and the interests at stake.

3.2 Topics and perspectives: background on Social Work and Collective Health

From the perspective of collective Health, problematizations were produced around different phenomena linked to health-disease processes that are a fundamental contribution to the construction of knowledge in Social Work. This is due to the inclusion of categories that challenge professional and pre-professional intervention and research practices.

Among the background, we find research on professional practices that address the intervention models of Social Work in the health sector (Vázquez-González and Cid de León-

Bujanos, 2015) and observe that there is a practice aimed at making effective the right to Health through the different services of the policy established in national and international regulations and permanent interrelation with other intervention sectors such as healthcare, legal, school and municipal services. We also find works that have systematized professional practice in specific institutional spaces, such as the approach in primary health care and the challenges and difficulties at this level of care (Abreu-Velázquez, 2009). Other articles explore the scope of professional practice in more limited topics, such as the StudyStudy on the intervention of Social Work in palliative care (Vanzini, 2010) and mental health (Carballeda, 2012).

Reading these articles affirms that the field of Health has been an area of extensive development and professional practice in social work. With different approaches and around different problems, intervention practices have been developed, as well as the production of knowledge on the most varied objects of health studies. Now, when limiting the search to bibliographic references focused on the field of collective Health and Social Work, the results are more limited. One of the topics addressed in the bibliography is related to professional practice in Public Health. For example, returning to the perspective of professionals in the United States (Ruth *et al.*, 2020), research has been carried out on very particular issues of the country in which the research is located, such as the impact of postgraduate training programs in Social Work and Public Health (Ruth *et al.*, 2008). This Study explored the experiences of graduates of Master of Social Work/Master of Public Health programs. Some issues that mediated their interests had to do with ethics and the need to establish the responsibilities of Social Work in public Health as a workplace.

In Brazil, we also find jobs related to professional practice in public Health, for example, on the perception of social workers about the demands assigned to Social Work in the work teams of the Community Health Service (Machado *et al.*, 2013) to deepen the identity of the social WorkWork in primary health care. The exciting thing about this WorkWork is that it uses qualitative methodology to access testimonies from professionals through the development of focus groups. It also identifies aspects that impact the construction of professional identity and highlights how the profession is seen, relating it to a coercive practice and a historically constructed welfare vision, as well as the need for ongoing training as a fundamental aspect to counteract these initial ideas.

The search yielded results that exceeded the topic of interest, such as the discussion about scientific production in collective Health. Specifically, works were found that addressed, for example, subareas within the field of collective Health (Iriart *et al.*, 2015), experiences in postgraduate training spaces in collective Health with health sciences students (Brandão, 2022) or the analysis of the areas of knowledge within collective Health where some areas predominate over others (Barata, 2023). The research was also found about the processes of institutionalization of collective Health: studies that have attempted to build a typology of studies on collective Health (Nunes, 2016), explicitly analyzing the process of its professionalization in Brazil and other

works that have analyzed the institutionalization of collective Health in Argentina through the analysis of scientific production in the area (Spinelli *et al.*, 2017).

Some findings are linked to the teaching of collective Health in the Social Work degree (López & Michelli, 2016) and address, on the one hand, conceptual aspects of the consolidation of collective Health, and on the other hand, they describe their teaching experience. as teachers of the subject. On the other hand, we find productions that reflect on the professional practice of Social Work in the field of Health, taking aspects from the perspective of collective Health. For example, we find reflections on professional practice in a hospital (Balbis-Rodríguez *et al.*, 2019) around specific problems, such as WorkWork in diabetes, and delving into the proposed intervention strategies. Finally, works were presented that delve more specifically into some topics, such as the new modalities of Social Work care around psychological suffering from the paradigm of collective mental Health (Serrano-Miguel, 2022).

Professional and pre-professional practices are crucial in constructing collective health approaches. The multiplicity and diversity of topics addressed within the framework of professional social work residencies in the health system shows that this constitutes a key area for reflecting on social work. For example, the particularities of carrying out investigative fieldwork in the field of Residency have been analyzed as postgraduate training in health services (Bottaro, 2019). The practices of professional health intervention have been explored in specific spaces such as care due to spontaneous demand (Liñan-Vila & Bottaro, 2016), in primary health care (Cuesta, 2021), and the work of interdisciplinary health teams in the territory (Canali, 2017).

One of the topics addressed in the bibliography is related to professional practice in Public Health. This is a recurring topic with different approaches. We find systematizations² About the tasks and scope of professional practice at the different levels of public health care (Ávila-Cedillo, 2020), the discourses about their professional and institutional practices (Nucci *et al.*, 2018), the inter-institutional networks of professional practices in a hospital (Amelotti & Ventura-Fernández, 2012) and the institutional circuits in which the different public health policies are materialized (Barbero, 2022). The conceptualization of Health in these works is interesting because they reflect on the strategic place of Social Work in public Health as part of the State's mechanisms to minimize the effects of social inequalities.

² Systematization consists of an exercise of reflection and interpretation of professional practice or an aspect of it (Bernaldo de Quirós and Rodríguez, 2004). It can be applied to WorkWork with data and information and analyze experiences in a specific institutional context and moment (Jara-Holliday, 2018). It is a participatory process that allows the experiences lived from the design, elaboration, management, execution, and evaluation of a project to be organized (Castro-Guzmán, 2016) and to make explicit the theoretical and methodological perspective from which the intervention is carried out and reflection.

On the other hand, it is observed that qualitative methodological-epistemological perspectives are the most predominant in these publications. If we look for antecedents in Argentina, we find illustrative examples of productions carried out by Social Work in Health using qualitative methods, such as the Study on social representations around access to the health system (Álvarez, 2018) and research on the accessibility conditions of public health benefits and services aimed at women with disabilities (Povedano, 2022). It is also possible to mention another work that, through an ethnographic approach, has addressed the system of interpersonal relationships between the health team and the Roma users of health services (Vincenzino, 2023). This set of research allows us to appreciate qualitative methodologies as appropriate strategies, on the one hand, to address social representations and experiences in the field and, on the other, to identify the local peculiarities that broader processes acquire and contribute to the development of social security policies: assertive Health.

The broad spectrum of topics addressed in Social Work concerning Health has contributed to constructing a critical view of health-disease processes in the social sciences and Public Health. From the professional field, it is possible to produce knowledge and carry out intervention practices considering the social determinants of Health. An example is the approach to healthcare practices that constitute a problematic field widely addressed by social workers in Argentina. We find reflections on the organization of care with a gender perspective. Such as the Study of the care practices carried out by users of specific services and the place of public policies around their organization (Duré *et al.*, 2023). In the same vein, within the framework of the Social Work residency and through an ethnographic approach, an analysis of the meanings surrounding the care practices of the health team of the Neonatology service of a Public Hospital was addressed (Lescano *et al.*, 2020). Focusing on the issue of disability, we find an article that, from professional practice in the public sphere, reflects on the care provided to users with disabilities (Furno *et al.*, 2022) and the social representations of health teams regarding the organization of care in early childhood that (Teveles *et al.*, 2021), all through semi-structured interviews and field notes.

3.3 From background analysis to teaching practices on collective Health in Social Work

Social work as a professional field comprises research and intervention practices, and each involves different logic and objectives (Aquin, 2006; Del Valle-Cazzaniga, 2015). That is why it is essential to incorporate topics linked to collective Health into the Social Work curriculum to contribute with analytical schemes that often become a starting point for thinking about research topics and problems from Social Work and thus support attitude research (Grassi, 2011) of the profession. This term refers to recognizing the need to resort to different sources of information, listen to informants, reflect on practice, and propose what could be done better.

Now, it is possible to return and also see the possibility that social work, in general, opens up for the production of knowledge: this casuistry, this immense and privileged fieldwork, can



return as new knowledge about the various problems and institutions. Therefore, with the possibility of influencing the transformation of institutions in favor of those who generally know the darker side of the State and institutions. An investigative attitude can be the tool that enables Social Work to contribute to unraveling those connections that are so little evident in the composition of social problems. (Grassi, 2011, p. 138)

The Collective Health subject proposes an approach to the health field from different dimensions. On the one hand, it covers the epistemological dimension by identifying the conceptual matrices of the field and historically reviewing the social, cultural, and political transformations of Health. This way, knowledge of Health is reconstructed as a historical concept, a product of a specific society and political and cultural transformations (Menéndez, 2012; Nunes, 2014; Laurell, 1982). On the other hand, the institutional dimension is discussed, which involves recognizing the structure of the field and the systems that organize it, as well as the divergent discourses in the institutions and effectors in charge of offering the health care service (Spinelli, 2010). Likewise, and in a transversal way, the subject proposes to bring closer a health model based on respect for Human Rights (Paiva *et al.*, 2018), thinking about the establishment of mechanisms so that users and communities can effectively exercise the right to Health and reflecting on the role of the State in guaranteeing health equity (Testa, 2007).

Throughout the different thematic axes addressed in the subject, the analysis of Health as a field is cultivated, and an attempt is made to promote spaces for the recognition of the complexity of health/disease processes. Collective Health is characterized by the interaction of interdisciplinary fields (Nunes, 2014; Granda, 2004) in which we perform our professional practice from different angles, such as intervention, management, research, and teaching. Therefore, throughout the course, we cover the social determinants of Health and epidemiology and some current problematizations in the health-society relationship. We delve into primary health care as an area of excellence for our practice. Moreover, there is a hotbed of practices for exercising rights, and we delve into the professional implications of Social Work in this area.

Furthermore, collective Health incorporates knowledge and practices, scientific and cultural, ideological, political, and economic techniques into the field of Health (De Almeida-Filho, 1992, 2000; De Almeida-Filho & Rouquayrol, 2008) and in a broad sense proposes to look at approach health/disease phenomena from a historical and social perspective, from an intersectoral and intersectional perspective and keeping in mind the social determination in these processes (Barreto, 1998; Breilh, 2006, 2010). The Human Rights approach constitutes the backbone of the approach to topics on the subject of Collective Health as part of the foundations of the practice of Social Work as indicated by the Ley Federal de Trabajo Social N 27072/14. This means emphasizing the social history of health-disease processes and considering that the actions of governments and health programs are contextual determinants (Paiva *et al.*, 2018).

The health field is one of the areas of professional insertion in Social Work in Argentina. According to the characteristics of the training profile established by the Curriculum, it is expected that [...] the graduate of the Bachelor's Degree in Social Work of the UNMDP becomes a critical professional, understood as one who can question, to put in permanent tension what is presented as naturalized, articulating the analytical sphere in social practices, debating, acting and confronting with argumentative solidity, having human emancipation as a horizon (Ordenanza de Consejo Superior 856, 2019, p. 2). For this reason, dynamic classroom activities are developed in the subject that promotes discussion and reflection around the thematic cores and that, ultimately, promote powerful teaching scenarios that “se destacan por lo que crean en clase y por lo que dejan de manera perdurable en aquellos que las viven como docentes y como estudiantes” (Maggio, 2012, p. 46). With this idea as a beacon, the teaching practices in the subject aim to contribute to the construction of the students' toolbox for the theoretical, political, and instrumental understanding of the approach to different historical and contemporary expressions of the social issue and in its different aspects of action: its analysis, the development of appropriate responses, the production of scientific knowledge and intervention in different scenarios; and promote pedagogical spaces conducive to rethinking the production of scientific knowledge from Social Work, from the Social Sciences and in an interdisciplinary manner.

Collective Health is fundamental in constructing pre-professional and professional health practices to address different community problems. This is observed in the participation of students in pre-professional and university extension practices in spaces linked not only to the field of Health but also to community-based devices in which the perspective of collective Health can facilitate intervention processes. In our university environment, we find a variety and quantity of works that problematize practices. The systematization of the practices presented in the degree theses is an example of how critical perspectives from collective health perspectives are present in pre-professional practices to reflect on the intervention of Social Work in the processes of health/illness/care. Reviewing the repository of social work degree theses of the Universidad Nacional de Mar del Plata allowed us to identify the topics worked on in collective Health within our university's career. We find degree theses that propose the implementation of systematizations in the hospital setting and specific areas. For example, they delve into the role of Social Work in the hospital ward (Escoda *et al.*, 2013), the intervention models presented therein (Aguilá, 2017), or the positioning of Social Work about the other disciplines that coexist in the hospital (Bíscaro *et al.*, 2015) and the intervention of Social Work in intensive care (Pollini & Puente, 2012). In addition, the field of primary health care has also been the setting for the local Social Work thesis. Different aspects were analyzed in this area: from the Study of the formation of work teams and the actors involved in the primary health care strategy (Pérez, 2015) to the social representations of the health professionals who work there (Galassi & Iparraquirre, 2016) and the deepening of some specific aspect such as the analysis of the intervention of the health team in problems linked to childhood (Aranda & Quintana, 2017).

We find theses that address specific topics within pre-professional practice. For example, the intervention carried out by social workers in palliative care. This work addresses the professional role within the team by conducting interviews with those involved in the area (Fava & Rípoli, 2017). Another thesis addresses the care of Social Service professionals in cases of HIV/AIDS and the perception they have about the quality of life of those people who are treated in the health system in the city using as a qualitative instrument for the collection of interview data (Souza dos Santos, 2014). Among the works presented as a systematization, we find a thesis that addresses an analysis of pre-professional practice within the framework of a specific health program, revealing the social representations of women and the variables that condition their Health from a gender perspective (Falcón, 2013).

These are some examples of the broad spectrum of works where research and health systematizations are presented at the local level on topics that arise from the pre-professional practice developed within the framework of the supervision subject corresponding to the fifth year of the degree. Among some general characteristics, qualitative methodologies are usually used, highlighting the interpretive approach and the intention to understand the meanings of relevant contemporary problems. Furthermore, the theses explore the theoretical, political, and instrumental understanding of professional performance; they propose its analysis, the development of appropriate responses, the production of scientific knowledge, and intervention in different scenarios.

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4. Conclusions

The Ley Federal de Trabajo Social introduces research as part of professional practice in different dimensions: in the performance of teaching, extension, and research functions in Social Work and social sciences, in the production of knowledge both about professional specificity as well as addressing research topics and social problems. At the local level, this translates into the professional profile of the career at the Universidad Nacional de Mar del Plata, which, among other duties, graduates with the ability to research and build scientific knowledge from the discipline and interdisciplinary in the context of the social sciences. Likewise, the production of knowledge constitutes an act of professional intervention. Social WorkWork intervenes in different dimensions: in the construction of knowledge, for example, through teaching, and in the transformation of daily life situations of the subordinate sectors through the provision of services (Aquin, 2006). In this aspect lies another confluence point with collective health references that view it as a field of practice and knowledge construction.

By writing this WorkWork, we verified that the objects of StudyStudy that Social Work addresses as a research practice are the most varied. Sometimes, it is related to intervention through proposals that reflect on one's professional practice but also construct broader problems that dialogue with other fields of social science research. Social WorkWork is located in strategic spaces for the development of research in collective Health due to its vital place in Public Health.



However, the scientific production surveyed needs to reflect the exhaustive professional practice, and the material found is relatively scarce concerning the territorial development of the profession in Health. Strengthening spaces for research, analysis, and writing would allow for expanding written and available developments, thus systematizing the extensive professional development that Social Work has carried out in Health. Including collective health paradigms in the Social Work career curriculum is critical to constructing future research that contributes to this field from the professional field.

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Gabriela Silvina-Bru: conceptualization, data curation, formal analysis, resource acquisition, research, methodology, writing (original draft), writing (review of the draft and revision/correction).

Conflicts of interest

The author unequivocally states that there is no conflict of interest in the writing or publishing of this article, reinforcing the integrity and impartiality of the research.

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