


Social Worker Intervention Methods in Oncology: A Case Study in Sincelejo, Colombia

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Abstract

This article presents social workers' methods, techniques, and strategies in cancer patients treated in public and private health institutions in Sincelejo, Sucre. The study adopted a qualitative approach with a phenomenological design implemented in a case study modality. Ten social workers with at least one year of experience in clinical oncology were selected. The data collection instrument consisted of a face-to-face semi-structured interview and an asynchronous data collection, using a Google Forms form as a guide. The results emphasize preference in the application of individual methods, such as control consultations, psychoemotional follow-up, motivational and care talks; in the family, techniques such as socioeconomic study, visits, and home care stand out, as well as resources management for families in vulnerable conditions, through governmental and non-governmental organizations, are highlighted. Community-based approaches are being used to mitigate risk factors and promote early detection. An active participation of the Social Worker as a member of the health care team is concluded, who provides emotional and social support to the patient and their family, provides detailed information on the treatment process, develops personalized intervention plans, and integrates the family into the patient's treatment and recovery process.

Keywords: Social Work; Methods; Intervention; Intervention; Patient; Cancer; Public sector; Private sector.

Métodos de intervención del Trabajador Social en Oncología: un estudio de caso en Sincelejo, Colombia

Resumen

Este artículo tiene como propósito dar a conocer los métodos, técnicas y estrategias empleados por el Trabajador Social en pacientes con cáncer atendidos en instituciones de salud del sector público y privado en Sincelejo, Sucre. El estudio adoptó un enfoque cualitativo con diseño fenomenológico, implementado en la modalidad de estudio de caso. Se seleccionaron diez trabajadores sociales con mínimo un año de experiencia en Oncología Clínica. El instrumento de recopilación de datos consistió en una entrevista semiestructurada presencial; asimismo, una recolección de información a través de forma asincrónica, utilizando un formulario de Google Forms como guía. Los resultados enfatizan preferencia en la aplicación de métodos individuales, como consultas de control, seguimiento psicoemocional, charlas motivacionales y de cuidado. En lo familiar, destacan técnicas como estudio socioeconómico, visitas y atención domiciliaria, así como gestión de recursos para familias en condición de vulnerabilidad, a través de organizaciones gubernamentales y no gubernamentales y, en cuanto a los métodos comunitarios se realizan campañas destinadas a mitigar factores de riesgo y promover la detección temprana. Se concluye la importancia de una participación activa del Trabajador Social como integrante del equipo de atención médica, quien brinda apoyo emocional y social tanto al paciente como a su familia; suministra información detallada sobre el proceso de tratamiento, elabora planes de intervención personalizada e integra a la familia en el proceso de tratamiento y recuperación del paciente.

Palabras clave: Trabajo Social; Métodos; Intervención; Paciente; Cáncer; Sector público; Sector privado.

Summary: 1. Introduction, 2. Methodology, 3. Findings, 3.1 Intervention Methods with Oncology Patients, 3.2 Methods of Interaction with the Community Environment Related to Risk Factors, Prevention, and Promotion of Self-Care, 4. Conclusions, 5. Bibliographic references.

1. Introduction

Social work is an applied discipline that integrates practice and knowledge production, playing a pivotal role in healthcare, particularly in clinical oncology. Social workers address the needs of individuals, families, and communities across the continuum of care, from diagnosis to post-treatment. Their interventions are informed by theoretical frameworks related to human behavior and social systems, with a focus on promoting human rights and social justice. Among these frameworks is the theory of health, illness, and social work, which underpins their practice in oncological contexts.

In this regard, Gálvez-Langarita (2023) notes that, within the field of social work, the existence of social problems alone is insufficient; instead, effective intervention requires that individuals be guided and supported by the social worker throughout the process. The author further emphasizes that individuals affected by specific illnesses—such as cancer—should develop new skills through intervention and become active agents in their transformation. Consequently, professional intervention must extend beyond a disciplinary approach to embrace an interdisciplinary one, involving coordinated efforts with other fields to achieve a holistic approach to care.

Another theoretical foundation for social work in the field of oncology is presented by Cantos-Mosquera *et al.* (2019), who emphasize that science bears the responsibility of studying cancer as a disease. Within this context, the social worker must integrate their practice into the oncological setting, which is defined by four central objectives: ensuring an accurate diagnosis, implementing effective and appropriate treatment, preventing the emergence or worsening of problems, and promoting the health and well-being of those affected (Alvarado-Cabrero, 2012). In other words, the role of the social work professional in oncology will depend on the specific scope of their practice, which must be grounded in a clear understanding of their responsibilities within the healthcare field.

This study also examines the methods employed by social work professionals, specifically within the field of oncology, with particular emphasis on individual intervention. In this context, their primary role is to provide personalized support to patients and their families, address emotional, social, and economic aspects, manage crises, and mediate conflict resolution.

In this context, the social worker focuses on ensuring diagnosis, treatment, follow-up, and research, contributing to improving the quality of care provided to cancer patients. Their work encompasses the impact of cancer on personal, family, and social levels, providing tools to address the challenges and situations associated with the disease and promoting comprehensive care that optimizes the patient's and their family's quality of life.

Similarly, the study by Silva *et al.* (2017), titled “El papel del Trabajador Social en el Home paciente oncológico” (“The Role of the Social Worker in Oncology Home Care”), aimed to understand the role of social work professionals in caring for oncology patients. The research was conducted at the National Cancer Institute (INCA) in Brazil and followed a descriptive qualitative methodology, including a document review. The findings indicated that cancer is a highly stigmatized disease. Therefore, the support provided by social work professionals contributes to improving patient care by promoting behavioral changes and addressing key needs, ultimately enhancing the patient's quality of life. In addition, the social worker plays a vital role in supporting the patient and their family.

Finally, Coneo-Vega (2019) emphasizes that the social worker in oncology plays a fundamental role in helping patients and their families adapt to the changes a cancer diagnosis brings. Their intervention focuses on identifying and addressing the challenges that arise throughout this process to promote the overall well-being of everyone involved.

2. Methodology

Zabala-Quiñones and Moncada-Santos (2019) define the case study as an in-depth investigation of a current phenomenon within its real-life context, particularly when the boundaries between the phenomenon and its context are closely intertwined. This method is used when there are more questions than answers. It relies on multiple sources of information that complement one another to support well-grounded conclusions guided by existing theoretical frameworks.

In this context, the case study was the primary tool for gaining an in-depth understanding of the phenomenon under investigation. The present research employed the case study method, which is particularly suitable for examining how individuals perceive and experience various phenomena within their everyday reality, as proposed by Salgado-Lévano (2007). The qualitative approach involved gathering information for analysis to understand the concepts, opinions, experiences, emotions, and behaviors of the individuals involved in the phenomenon being studied.

In this vein, the qualitative approach does not measure through statistical analysis but instead understands the participants' lived experiences deeply, focusing on situations or events they have encountered in the present moment. At the same time, the research was conducted within an interpretive paradigm, which is characterized by its emphasis on describing the unique features of the phenomenon under study (González-Morales, 2003). The study explored the methods, techniques, and intervention strategies used with oncology patients, their families, and their socio-community environment. Another study, conducted by Correa-Arango *et al.* (2018) and titled “Funciones de los Trabajadores Sociales del área de la salud en los hospitales y clínicas de tercero y cuarto nivel de la ciudad de Medellín, Colombia” (“Functions of Social Workers in

the Health Sector in Third- and Fourth-Level Hospitals and Clinics in Medellín, Colombia”), aimed to identify the roles performed by social work professionals in healthcare settings. The study employed a descriptive qualitative methodology with the primary objective of understanding the functions carried out by social workers within the health sector. The research was conducted in third- and fourth-level hospitals and clinics in the city of Medellín. The findings indicated that social workers have a comprehensive view of health, enabling them to define their role in healthcare clearly. Their intervention is primarily focused on providing support to patients and their families.

The study adopted a phenomenological design, as it did not seek to manipulate variables or conduct controlled experiments to produce predetermined results. Instead, it aimed to explore and interpret individuals' lived experiences and diverse perspectives regarding the phenomenon under investigation (Hernández-Sampieri *et al.*, 2010). This phenomenological approach provided a suitable framework for analyzing the information gathered through semi-structured interviews with social work professionals.

Participants

The study was conducted with social workers in the healthcare sector, specifically in oncology, across public and private institutions in Sincelejo. The selection criteria for participants included having at least one year of professional experience in oncology and currently working in Sincelejo. These criteria were established to ensure a homogeneous and representative sample for the case study.

A total of ten social workers participated in the study, seven of whom were employed in the private healthcare sector. Specifically, three were affiliated with Clínica Salud Social, two with the Instituto Cancerológico de Sincelejo, and two with Clínica Especializada La Concepción. The remaining three participants were from public institutions: two from the Hospital Universitario and one from Clínica Niño Jesús. Including these professionals provided valuable insights into the methods, techniques, and strategies used in individual, family, and community-based interventions with oncology patients.

Instruments

Data was collected using two tools: an initial Google Forms questionnaire and in-person semi-structured interviews. According to Folgueiras-Bertomeu (2016), the interview is considered a universal research tool, as it has long been used in academic inquiry due to its flexibility in obtaining detailed and personalized information about individuals' experiences and perspectives.

It is important to note that the interview process was conducted in two stages due to the participants' time constraints. In the first stage, six participants completed the Google Forms questionnaire. In-person semi-structured interviews were subsequently conducted with four participants to enrich and deepen the data, as previously mentioned. These interviews aimed to explore in greater depth their experiences and perspectives regarding social work interventions at the individual, family, and community levels.

To ensure adherence to ethical standards, each participant obtained and signed informed consent. The confidentiality of the information collected was strictly maintained, and all responses were treated with respect. It is worth noting that this study was approved by the Research Committee of the Faculty of Humanities and Education at the Corporación Universitaria del Caribe – CECAR. The in-person semi-structured interviews and the Google Forms questionnaire were employed as data collection instruments, chosen for their accessibility and convenience, allowing participants to respond according to their availability in terms of time and setting.

Data Analysis

This study focused on understanding the methods and strategies employed by social workers in addressing the needs of cancer patients and their families, as well as the self-care processes promoted through cancer prevention programs within the community setting. The findings were derived from the primary analytical category –intervention methods– and its subcategories: individual, family, and community interaction. Additionally, the study explored the role of social work interventions across both the public and private healthcare sectors.

The following presents Figure 1, which outlines the intervention methods broken down into the subcategories of individual, family, and community-level interventions. These are further linked to the intervention processes carried out by social work professionals.

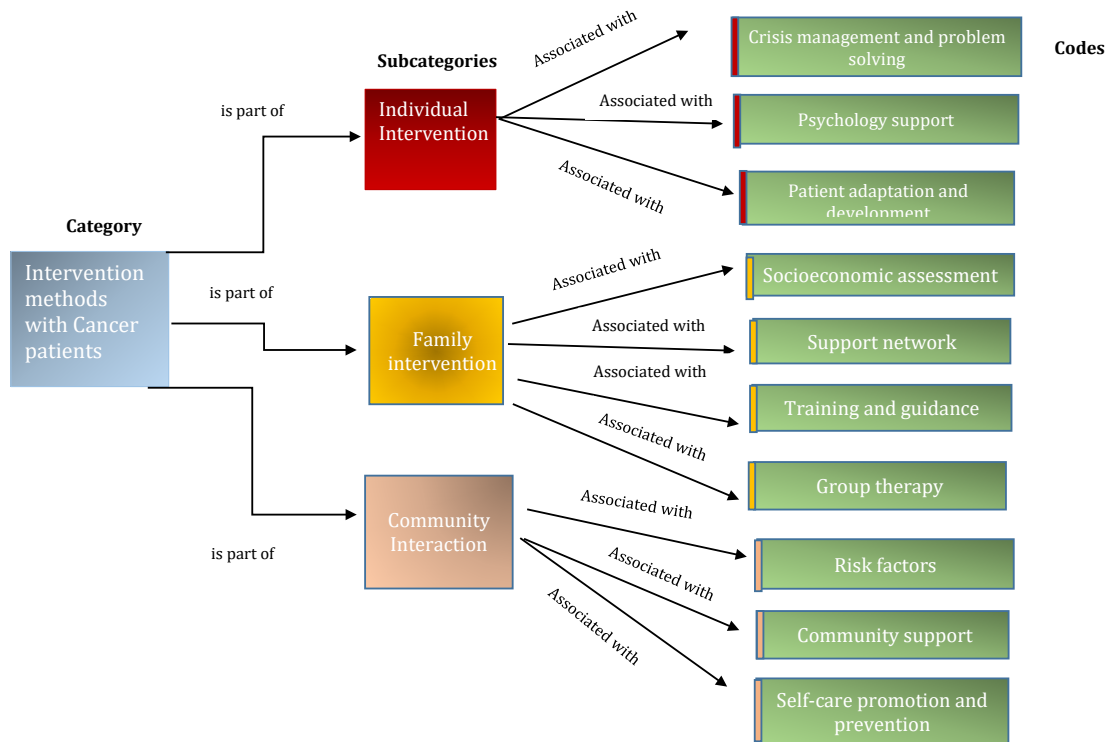
3. Findings

Figure 1 illustrates the macrostructure generated through the use of ATLAS.ti software. This tool facilitated the analysis of narratives collected from semi-structured interviews with six social workers. The main category, "Intervention Methods with Cancer Patients," is divided into three subcategories:

1. Individual Intervention: Associated with codes such as crisis management, psychosocial support, patient adaptation, and progression.
2. Family Intervention: Linked to socioeconomic assessment, development of support networks, training, and guidance, as well as group therapy.

3. Engagement with the Community: Connected to risk factors, community support networks, and the promotion and prevention of self-care.

Figure 1. Intervention Methods.

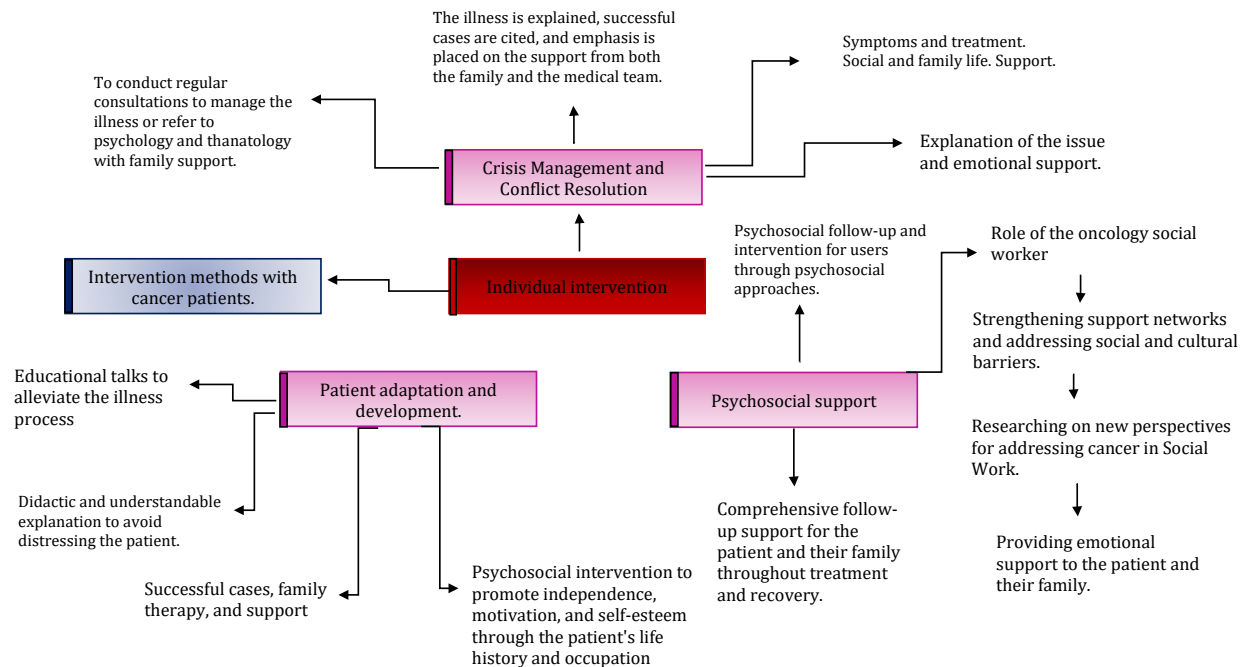


Source: Own elaboration (2024).

3.1 Intervention Methods with Oncology Patients

Regarding the subcategory of individual intervention, Figure 2 outlines the intervention methods social workers employ when supporting oncology patients in palliative care. These approaches aim to strengthen individual achievements and contribute to maintaining an optimal state of health.

Figure 2 presents the category of individual intervention, highlighting key codes such as psychosocial support, patient adaptation and development, crisis management, and conflict resolution.

Figure 2. Individual Intervention.

Source: Own elaboration (2024).

Based on the data presented in Figure 2, the social worker's role in delivering individualized and timely support to oncology patients is delineated. This role involves facilitating internal resources, such as self-determination and problem recognition, while providing emotional support, accurate information, and guidance concerning the diagnosis and treatment processes to patients and their families. Additionally, social workers contribute to managing crises and complex situations, as well as planning and coordinating the patient's post-discharge care. Consistent with the framework proposed by Rodríguez Burbano and Ibarra Caipe (2021), individual social work interventions address each patient's unique needs to enhance emotional resilience and physical well-being throughout the cancer treatment continuum.

In examining the concept of individual intervention, particular attention was given to analyzing the code “crisis management and problem-solving” based on the perspectives shared by the six participants. This code explores the psychosocial sensitization and intervention process about the type of support provided to patients, enabling them to recognize their condition and respond to it with greater autonomy and independence.

The individual intervention carried out by the participants within the healthcare institutions where they are employed provides suitable spaces for follow-up consultations, ongoing monitoring of psychological, therapeutic, and thanatological aspects, and continuous reflection on the patient's daily lived experience. These sessions foster emotional and psychosocial support and create opportunities for patients to express their emotions and

perceptions regarding their condition. The testimonies shared by the participants in this study substantiate these observations.

- Participant 1 (personal communication, March 27, 2023): "...To conduct regular consultations with the patient to monitor the progression of the illness and the treatment process, or with the support of a psychologist, refer them to a thanatology group accompanied by their family members..."
- Participant 2 (personal communication, March 28, 2023): "...Ongoing dialogue and reflection on the current reality faced by the patient and their family..."
- Participant 3 (personal communication, March 29, 2023): "...Explaining the issue and providing emotional support..."
- Participant 4 (personal communication, April 7, 2023): "...A brief explanation is provided to the patient and their family about the illness, including success stories of individuals who overcame cancer, and the importance of family support and the contributions of the institution's interdisciplinary team..."
- Participant 5 (personal communication, April 11, 2023): "...Awareness-building and psychosocial intervention..."
- Participant 6 (personal communication, April 17, 2023): "...Understanding of their diagnosis, symptoms, and treatment; their social, personal, and family living conditions; support in occupational life; their sources of motivation; their family context; and their economic situation..."
- Participant 7 (personal communication, January 8, 2025): "The patient needs to understand that cancer is a chronic illness and can be managed through appropriate treatments".
- Participant 8 (personal communication, January 10, 2025): "Family support is essential throughout the care and treatment process, as it contributes to greater efficiency".
- Participant 9 (personal communication, January 11, 2025): "Patients are informed that groups of successful cases serve as support networks, so they feel motivated during treatment sessions. In the private sector, cutting-edge treatments, specialized doctors, and rigorous therapeutic approaches are also provided".
- Participant 10 (personal communication, January 13, 2025): "In the private sector, specialists are trained specifically in personalized care. We always inform the patient and their family that the private sector offers an added benefit in patient intervention and family guidance".

On the other hand, the code "psychosocial support" seeks to examine and address the emotional, cognitive, and social dimensions experienced by individuals facing challenging or stressful situations. It offers a safe space where individuals can express their emotions, explore their thoughts, and identify strategies for coping and adaptation (Bedoya-Correa *et al.*, 2018).

Concerning this code, the participants' responses highlighted the diverse roles performed by social workers within interdisciplinary teams that provide care to patients affected by cancer.

In line with the aforementioned, the social workers participating in this study implement individualized methods supported by an interdisciplinary team to fulfill their roles effectively. Their objective is to provide patients with the appropriate support to help them confront the reality of their condition. The participants' responses are closely interrelated, emphasizing the individual's holistic well-being as a central priority. Previous research underscores social workers' critical role and meaningful contributions to the well-being of cancer patients and their families. This is particularly evident through accompaniment carried out collaboratively and within an interdisciplinary framework, guiding efforts toward comprehensive care and patient well-being (Cortés-Sarralde *et al.*, 2017).

The following excerpts illustrate the points discussed:

- Participant 1 (personal communication, March 27, 2023): "...Providing support to the patient throughout their treatment and recovery process, as well as maintaining contact with their family so they can be part of that process..."
- Participant 2 (personal communication, March 28, 2023): "...My role was as a social worker in the public sector. I was responsible for many patients, which made immediate attention difficult, as there were only two social workers for a significant number of patients. ... support, guidance, and continuous development of family and community support networks, all aimed at helping cancer patients avoid emotional collapse. I also conducted social and cultural diagnoses to determine conditions and potential barriers the patient might face in undergoing cancer treatment. Furthermore, I investigated new ways of understanding cancer from a social work perspective..."
- Participant 3 (personal communication, March 29, 2023): "...Supervisor..."
- Participant 4 (personal communication, April 7, 2023): "...Providing support to the patient and their family nucleus, if required..."
- Participant 5 (personal communication, April 11, 2023): "...Psychosocial follow-up and support for users through differential and rights-based approaches..."
- Participant 6 (personal communication, April 17, 2023): "... intervention. Educational and family guidance in both group and individual formats. Acting as a facilitator and trainer to address patients' comprehensive needs for improved overall well-being..."
- Participant 7 (personal communication, January 8, 2025): "Psychosocial intervention to boost self-esteem by highlighting successful cases of patients who overcame cancer".
- Participant 8 (personal communication, January 10, 2025): "Emphasis on follow-up and advisory support from the responsible medical team".

- Participant 9 (personal communication, January 11, 2025): "Psychosocial support provided during educational sessions, focused on individual and family aspects if needed".
- Participant 10 (personal communication, January 13, 2025): "Guidance in resource-related processes for patients and their families".

In summary, the social worker employs a range of techniques to foster adaptation and support the development of the cancer patient, thereby facilitating the recovery process. These techniques include educational sessions, sharing successful experiences, transparent and accessible explanations, family therapy, life project guidance, exploration of personal history, and promoting independence, motivation, and self-esteem.

Below are excerpts from the participants' statements:

- Participant 1 (personal communication, March 27, 2023): "...Through various educational sessions involving interactive activities and techniques, we aim to make the illness process less painful for the patient and their family..."
- Participant 2 (personal communication, March 28, 2023): "...Sharing successful life stories of other patients, as well as encouraging writing and ongoing dialogue to help them understand and accept their new reality..."
- Participant 3 (personal communication, March 29, 2023): "...Providing clear and accessible explanations to avoid causing distress to the patient..."
- Participant 4 (personal communication, April 7, 2023): "...Success stories of patients who overcame cancer, family therapy, and above all, we conduct sessions focused on mutual support..."
- Participant 5 (personal communication, April 11, 2023): "...Guidance on shaping their life project..."
- Participant 6 (personal communication, April 17, 2023): "...Guidance through life story exploration. Focus on the patient's occupation, fostering independence, motivation, and self-esteem through individual and family psychosocial intervention..."
- Participant 7 (personal communication, January 8, 2025): "Coping techniques such as the 'Empty Chair' method are used to strengthen self-esteem and resilience in the face of illness."
- Participant 8 (personal communication, January 10, 2025): "We organize talks, workshops, and reflective sessions about the illness".
- Participant 9 (personal communication, January 11, 2025): "Mutual support is essential in the recovery process before and after chemotherapy treatments".
- Participant 10 (personal communication, January 13, 2025): "They are encouraged to engage in simple crafts that do not require much effort, as this promotes greater independence and helps them feel useful".

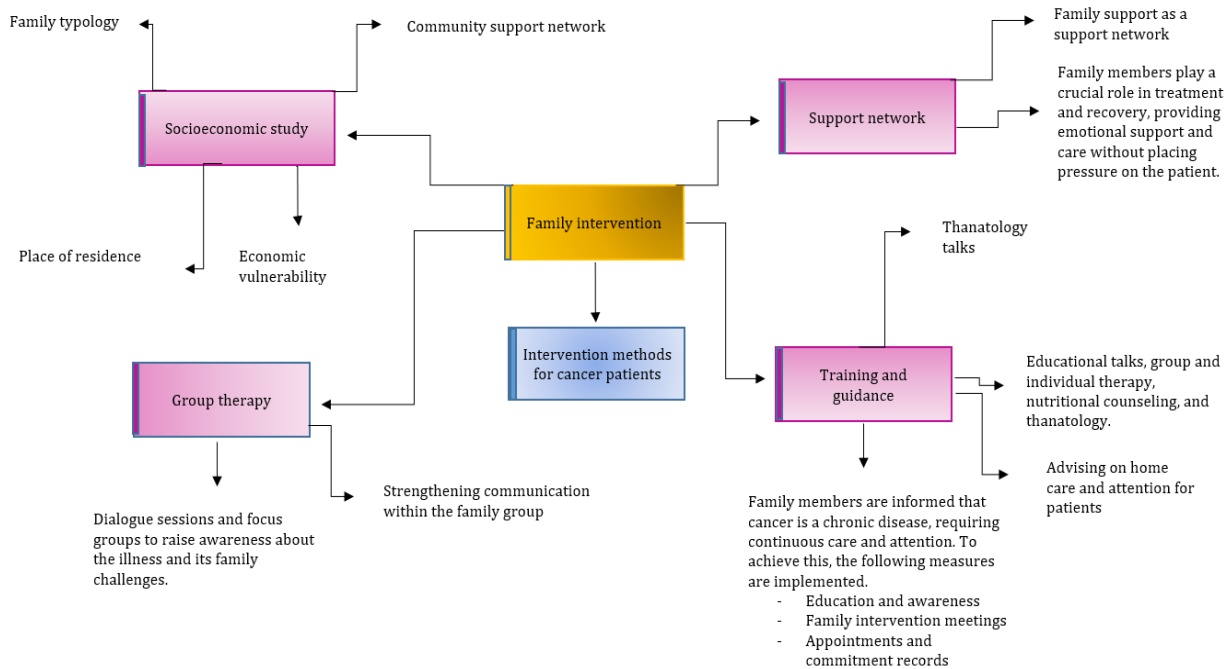
The intervention carried out by social workers with cancer patients is truly commendable. These professionals serve as agents of change and transformation, consistently dedicated to promoting the well-being of those in need. They contribute meaningfully to the pursuit of life, health, and a sense of fulfillment through structured methods and strategies. Their work is expressed through educational talks, training sessions, mutual support, support networks, and the cultivation of optimism. The narratives shared highlight the ongoing efforts of these practitioners to support and enhance the life projects of their patients.

It is important to emphasize the strengthening and development of social skills such as communication, empathy, assertiveness, and others that allow patients to feel fulfilled and engaged in these processes of self-discovery. Despite the illness, these experiences should not be seen as limitations but rather as opportunities to learn, unlearn, and contribute to change—to embrace second chances and continue building a meaningful life.

Strategies and Techniques Implemented with the Patient's Family During Diagnosis and Treatment

Regarding the process of analysis and discussion, the second subcategory—family intervention—was addressed. This involved examining the codes of socioeconomic assessment, support networks, group therapy, and training and guidance, all developed using the ATLAS.ti software. The study was grounded in the social workers' statements concerning their interventions with the families of cancer patients. Their approach focuses on providing support and assistance, primarily promoting the affected family's emotional, social, and practical well-being in their daily lives. Experts emphasize the importance of emotional support, education, care coordination, practical assistance, and guidance in decision-making, as noted by Rodríguez-Burbano and Ibarra-Caipe (2021).

Figure 3. Family Intervention details key codes such as support network, socioeconomic assessment, group therapy, and training and guidance.

Figure 3. Family Intervention.

Source: Own elaboration (2024).

In line with this premise and the narratives shared by the social workers participating in the study, the involvement of professionals in conducting socioeconomic assessments at the family level is particularly noteworthy, along with the actions and strategies implemented in collaboration with caregivers and the patients' support networks. This process provides detailed insight into the patient's socioeconomic status, household composition, and the individuals contributing to their personal, emotional, and health-related development. Such an approach facilitates the construction of a comprehensive perspective regarding the patient's living conditions, family typology, and other critical aspects essential for effective intervention.

The participants' responses converge in highlighting the importance of diagnostic information and the verification of family structure, underscoring the relevance of the social worker's role in caring for patients affected by cancer. Their responses also reflect a consistent understanding of the social worker's function in coordinating care in collaboration with the medical team and other healthcare professionals. This includes providing essential services and resources such as scheduling medical appointments, arranging home care, and managing benefits and insurance coverage.

Furthermore, the participants argue that the socioeconomic assessment enables patients to address daily challenges such as financial difficulties, employment issues, transportation barriers, or housing needs. Based on the information gathered, the social worker facilitates appropriate

management and inclusion of patients in financial assistance programs and community resources, as needed. The narratives shared by the participants support these claims.

- Participant 1 (personal communication, March 27, 2023): “All aspects are considered to understand the situation of the patient and their family members. One can learn about the economic, social, cultural, and even religious aspects through the socioeconomic assessment”.
- Participant 2 (personal communication, March 28, 2023): “The community, territorial, and cultural dimensions of the patient’s family”.
- Participant 3 (personal communication, March 29, 2023): “It is important to understand the patient’s current situation—what resources they have and who supports them during the accompaniment process. A thorough inquiry is conducted, including socioeconomic status, place of residence, family typology, and other relevant aspects for the intervention”.
- Participant 4 (personal communication, April 7, 2023): “Analysis of the family context and support network”.
- Participant 5 (personal communication, April 11, 2023): “They are informed that cancer, in general, is a chronic illness requiring the attention and care of family members, caregivers, and professionals overseeing the process”.
- Participant 6 (personal communication, April 17, 2023): “Family meetings. Family intervention. Summons and commitment agreements”.
- Participant 7 (personal communication, January 8, 2025): “Guidance on areas that need reinforcement”.
- Participant 8 (personal communication, January 10, 2025): “Socioeconomic analyses to determine their current situation”.
- Participant 9 (personal communication, January 11, 2025): “Discussion sessions through focus groups”.
- Participant 10 (personal communication, January 13, 2025): “Strengthening of family communication”.

The “support network” code refers to the resources, services, and individuals that can assist people, families, or communities. These networks serve as a vital support system, offering emotional backing, practical help, and access to positive resources during difficult times—specific excerpts from the interviews conducted to support this assertion.

- Participant 1 (personal communication, March 27, 2023): “...I considered aspects of family support—whether the person with such a condition had the backing of their relatives and friends...”
- Participant 2 (personal communication, March 28, 2023): “...Family support, support network...”

- Participant 3 (personal communication, March 29, 2023): "...Support strategies during the rehabilitation process..."
- Participant 4 (personal communication, April 7, 2023): "... The psychologist usually does this, but when it was my responsibility, I asked the family members to write letters addressing unresolved matters with the deceased—whether secrets or unresolved conflicts— which were later shared with the entire family. This, in some way, lightened the emotional burden of the relatives. Afterward, the letters were either kept or burned at home..."
- Participant 5 (personal communication, April 11, 2023): "...Emotional support, trying to accompany them as they cope with the situation..."
- Participant 6 (personal communication, April 17, 2023): "...Psychosocial support, and in some cases, referral to specialized areas such as psychological care..."
- Participant 7 (personal communication, January 8, 2025): "...Conducting group therapy sessions where participants can express gratitude or write down any unresolved matters with the deceased on a piece of paper, which is then burned— this helps ease the pain of their loved one's passing..."
- Participant 8 (personal communication, January 10, 2025): "...Psychosocial support to face the grieving process..."
- Participant 9 (personal communication, January 11, 2025): "...Emotional support for patients to provide them with tools to manage depression, stress, and anxiety..."
- Participant 10 (personal communication, January 13, 2025): "...Ensuring a connection with other patients to provide mutual support during the illness..."

The code "Psychoeducation and Guidance" refers to providing information and education on various aspects of the illness and its impact on the patient's life and immediate environment. From this perspective, psychoeducation empowers patients and their families by fostering understanding, promoting effective management, and supporting informed decision-making regarding cancer (Navas *et al.*, 2007).

- FEP9: "Group therapy is conducted with them in order to address important topics such as depression, anxiety, and various situations that affect their lives about pain management".
- FEP10: "They are informed that they must maintain constant contact with the interdisciplinary team, especially with the oncologist, nutritionist, and psychologist".

Through these methods, social workers aim to help families understand the illness and its impact on daily life by providing information about treatments, community resources, support services, and legal rights, enabling them to make informed decisions and access the necessary services.

- Participant 1 (personal communication, March 27, 2023): "...Guidance on the care that should be provided at home for the patient, educational talks, group, and individual therapy, as well as nutritional and thanatological counseling..."
- Participant 2 (personal communication, March 28, 2023): "...Support strategies throughout the rehabilitation process and thanatology talks..."
- Participant 3 (personal communication, March 29, 2023): "...Support during the grieving process, with monitoring and follow-up of the patient to ensure proper care and attention to the illness, through dialogue with the family member in charge..."
- Participant 4 (personal communication, April 8, 2023): "...Making them aware that cancer is a chronic illness that requires a collective effort from family, friends, and the oncology institution..."
- Participant 5 (personal communication, April 11, 2023): "...They are told that cancer, in general, is a chronic disease that requires the attention and care of family members, caregivers, and professionals involved in the process..."
- Participant 6 (personal communication, April 17, 2023): "...Mediation must arise from the phenomenology of being, that is, from a full understanding of the pain and uncertainty the family is experiencing, avoiding bias and value judgments that may disrupt the family's social and emotional balance..."
- Participant 7 (personal communication, January 8, 2025): "Various activities are carried out with them, which we believe greatly benefit the patient—such as the deep breathing technique, which involves breathing in as deeply as possible and then exhaling slowly, releasing negative thoughts, worries, and sadness".
- Participant 8 (personal communication, January 10, 2025): "Family members responsible for the patient are always advised on the necessary care, the importance of accompanying them during chemotherapy, and the commitment to bringing them to their scheduled sessions".
- Participant 9 (personal communication, January 11, 2025): "Family members are reminded about the concept of cancer, the types of treatments, and the potential effects it may have on different aspects of the patient's life".
- Participant 10 (personal communication, January 13, 2025): "Guidance for both the patient and their family is important: many times, I have had to assist families who are unaware that cancer is a chronic illness requiring immediate treatment alongside specialized professionals such as the oncologist, nutritionist, psychologist, and social worker".

Social workers employ effective intervention methods to identify situations, challenges, and needs within the family environment. It is worth emphasizing that various techniques—particularly group therapy—offer a safe, practical, and therapeutic space to foster healthy relationships among family members. In the healthcare setting, specifically with individuals

diagnosed with cancer, participants highlighted that group therapy provides strategies to strengthen social skills such as communication.

Likewise, they note that group therapy facilitates and promotes empathy and understanding across different areas of their lives.

- Participant 1 (personal communication, March 27, 2023): “Usually, family members in this type of treatment and patient recovery are actively involved in supporting the patient emotionally, helping them cope with the situation. There is no pressure placed on them”.
- Participant 2 (personal communication, March 28, 2023): “We carry out group integration activities in case we do not get a response from the patient's family or if they do not have one. We ensure they still receive some form of support in the patient groups”.
- Participant 3 (personal communication, March 29, 2023): “Group therapy is done with individual and collective goals – to understand how people think on their own and as a group”.
- Participant 4 (personal communication, April 7, 2023): “We carry out both interventions since the illness affects not only the patient but also their families and caregivers”.
- Participant 5 (personal communication, April 11, 2023): “We use dialogue and focus groups to help them become aware of the illness and the challenges it brings for family members”.
- Participant 6 (personal communication, April 17, 2023): “One of the strategies we use is family therapy, aimed at improving and strengthening communication within the family”.
- Participant 7 (personal communication, January 8, 2025): “We do a visualization strategy with them, which consists of imagining a place, object, or situation that makes them happy, focusing on the small details of that experience”.
- Participant 8 (personal communication, January 10, 2025): “We do many activities with patients; participation is active individually and in groups. One of the techniques they like the most is yoga because it helps relax their mind and body”.
- Participant 9 (personal communication, January 11, 2025): “Family members are very cooperative. We use many techniques that promote well-being and quality of life. Music is used to connect – it helps reduce anxiety and stress”.
- Participant 10 (personal communication, January 13, 2025): “In the activities, we work a lot on reducing stress and anxiety, promoting quality of life, using essential oils as a means of relaxation”.

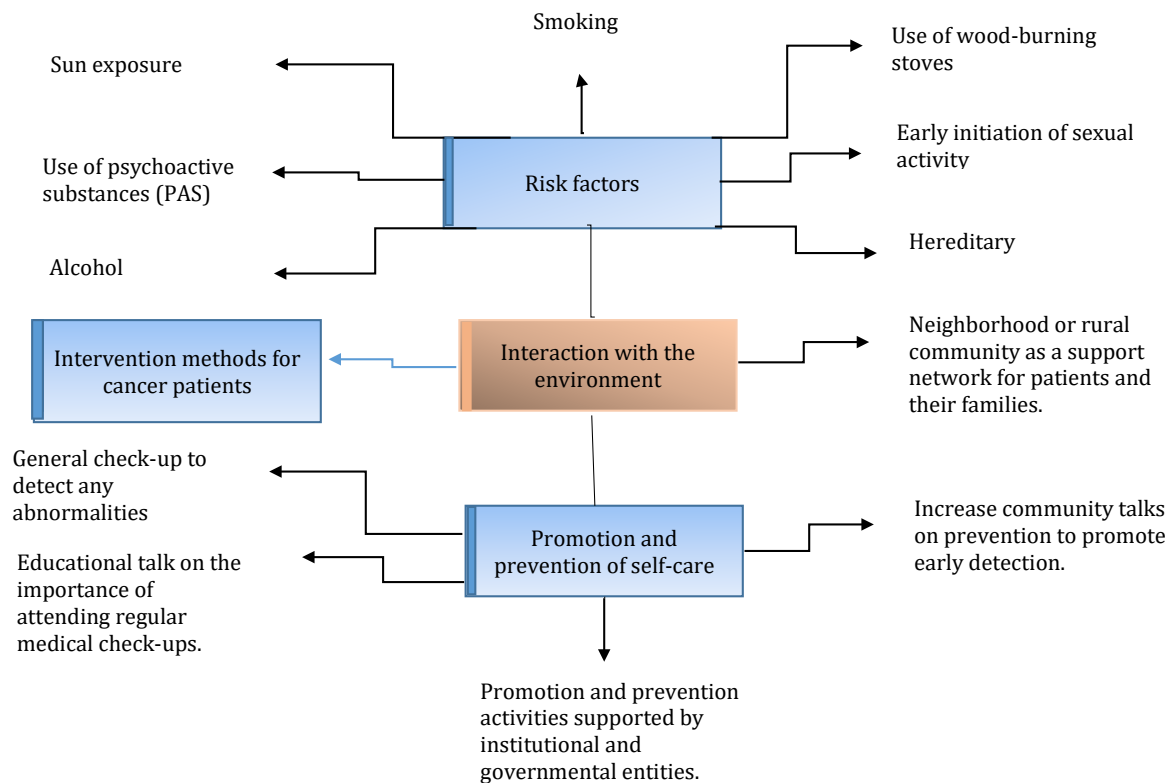
Social workers are consistently committed to creating opportunities for education, promotion, awareness, and prevention through strategies that foster the well-being of oncology patients and their families. As evidenced in participants' narratives, they constantly innovate, create, and contribute to improving quality of life.

3.2 Community interaction methods addressing risk factors, prevention, and self-care promotion

The final subcategory, which focuses on the social worker's interaction with the community environment and its impact on promoting and preventing self-care, emphasizes the crucial importance of this connection for cancer patients. (Del Castillo *et al.*, 2017) Point out that cultivating meaningful bonds with one's surroundings can be essential for facing challenges and fostering well-being throughout the illness.

Figure 4 presents a semantic network illustrating the relationship between the social worker, the community, and key elements in promoting self-care and risk management. It also highlights associated codes such as risk factors, promotion, and prevention related to self-care.

Figure 4. Interaction with the environment.



Source: Own elaboration (2024).

Furthermore, the need to raise community awareness about the signs and symptoms of cancer is emphasized, with a focus on educating the public to recognize early indicators such as skin changes, lumps, abnormal bleeding, and alterations in bowel or urinary habits. Social workers also highlight the essential role of emotional and psychosocial support in promoting self-care by creating groups that offer training and connect patients with community resources such as psychologists and local organizations. This comprehensive approach aims to reduce risk factors and facilitate early cancer detection.

- Participant 1 (personal communication, March 27, 2023): "...Mainly, to increase community talks about prevention, and if necessary, conduct screenings to detect certain types of cancer early. Community outreach is nearly non-existent in Mexico due to security issues..."
- Participant 2 (personal communication, March 28, 2023): "...Understanding that the neighborhood or the local village are key actors in the support network for patients and their families, so they should be involved from the beginning of the intervention process..."
- Participant 3 (personal communication, March 29, 2023): "...The most important thing is to get regular check-ups so that cancer can be detected early..."
- Participant 4 (personal communication, April 7, 2023): "...Talks about how important it is to go for regular medical check-ups, and for women, breast self-examinations to prevent breast cancer – because touching yourself can save your life..."
- Participant 5 (personal communication, April 11, 2023): "...Health promotion and prevention activities with the support of institutional and governmental networks..."
- Participant 6 (personal communication, April 17, 2023): "...Educational campaigns for self-care. Sharing information within institutions about comprehensive care management..."
- Participant 7 (personal communication, January 8, 2025): "Many factors can trigger cancer. A clear example is the excessive use of wood-burning stoves. Inhaling the smoke gradually damages the lungs, eventually leading to respiratory failure and potentially cancer..."
- Participant 8 (personal communication, January 10, 2025): "Running prevention campaigns is important. It may sound unbelievable, but many people have come up to me and asked what cancer is – if it kills – and so many other questions. That is when, as a change agent, you see the need to contribute more to promoting and preventing this chronic disease..."
- Participant 9 (personal communication, January 11, 2025): "Our interdisciplinary group is in charge of promoting educational talks to raise awareness about warning signs and thereby lower mortality rates..."
- Participant 10 (personal communication, January 13, 2025): "Promotion and prevention campaigns on cancer are conducted, and people are advised to get annual check-ups..."

The code for risk factors is defined as conditions, characteristics, or behaviors that increase the likelihood of developing cancer, according to Navas *et al.* (2007). Although the presence of one or more risk factors does not guarantee the onset of the disease, it is emphasized that those related to lifestyle, environmental exposure, and genetics are associated with a heightened probability of its development.

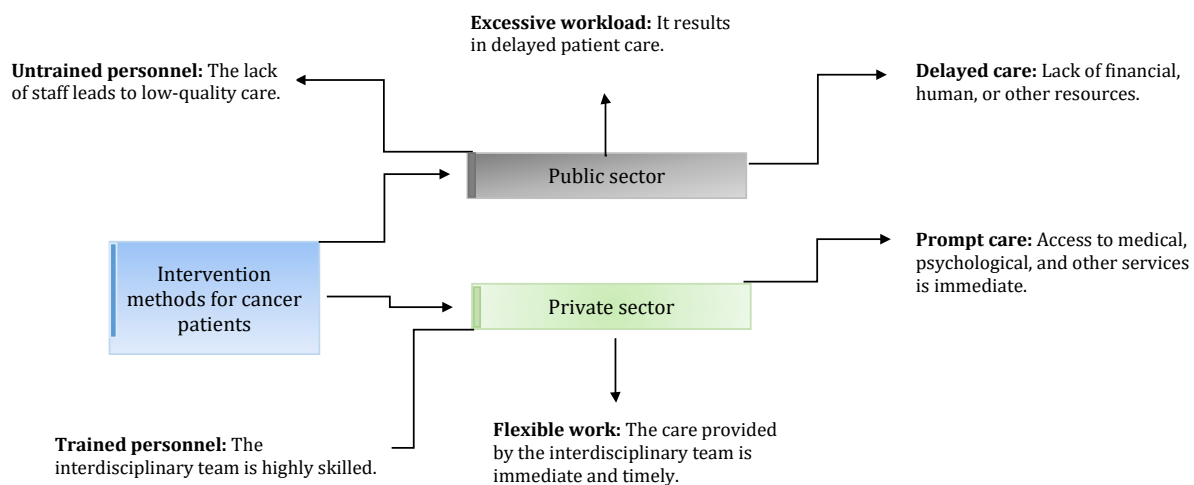
It is essential to note that the presence of risk factors does not guarantee the development of cancer, as there are cases in which the disease appears in individuals with no known risk factors. Moreover, some risk factors are modifiable and can be controlled or reduced, such as tobacco and alcohol consumption, diet, and physical activity. In contrast, elements such as age and genetics are non-modifiable; however, early detection and regular medical follow-up are crucial for identifying and treating cancer in its early stages.

- Participant 1 (personal communication, March 27, 2023): "...Alcoholism, smoking, early sexual activity, and not having that culture of prevention..."
- Participant 2 (personal communication, March 28, 2023): "...I believe none because the disease is not environmental, it is internal. However, the social, cultural, and political conditions of the families and communities they live could have some influence..."
- Participant 3 (personal communication, March 29, 2023): "...No one is exempt from developing this disease; what matters is that it is detected early..."
- Participant 4 (personal communication, April 7, 2023): "...Factors that can influence the onset of cancer: smoking, alcohol, and psychoactive substance use. In other cases, there are hereditary factors..."
- Participant 5 (personal communication, April 11, 2023): "...Pollution..."
- Participant 6 (personal communication, April 17, 2023): "...Smoking, use of wood-burning stoves, alcohol, sun exposure..."
- Participant 7 (personal communication, January 8, 2025): "The use of psychoactive substances is an indicator for the development of cancer, which is why early detection is important".
- Participant 8 (personal communication, January 10, 2025): "From what is known, cancer is a chronic disease that is not easily detectable, and there are risk factors that influence its appearance: alcohol, and it can be genetic or environmental".
- Participant 9 (personal communication, January 11, 2025): "A variety of factors have been identified, but they are not definitive. Among them are obesity, age, family history, etc. Nothing can be said with certainty".
- Participant 10 (personal communication, January 13, 2025): "Among the risk factors, there are countless ones that can trigger any type of cancer, from the use of psychoactive substances to water pollution, exposure to chemicals, and radiation".

In general terms, some participants demonstrated a greater level of expressiveness than others during the interviews; however, all of them, without exception, showed collaboration and attentiveness. Their perspectives were consistent with each question, and there was complete agreement across all responses, providing concise information about the disease, risk factors, and familial and professional support.

Figure 5 below presents the public and private sectors, addressing timely care and deficits or growth within service-providing institutions.

Figure 5. Public sector and private sector.



Source: Own elaboration (2024).

Social workers face strict institutional regulations daily, which limit the possibility of providing comprehensive and adequate care to cancer patients and their families. Additionally, the lack of resources in the public sector often results in substandard care when offering guidance, information, educational talks, therapy sessions, and more. This is mainly due to the shortage of trained personnel available to provide immediate support. As a result, many families choose to turn to the high-cost services of the private sector, which offers access to qualified professionals who provide individualized care and a range of other services. In the private system, patients typically do not have to wait long for information about the disease, appointments are scheduled more quickly, and the guidance and follow-up are perceived as more encouraging.

- Participant 1 (personal communication, March 27, 2023): "Here, care in the public sector is complicated—it is exhausting because the patient demand is overwhelming, and only two social workers are responsible for providing guidance and implementing techniques".

- Participant 2 (personal communication, March 28, 2023): “Economic and material resources are scarce when requested by the patient or the family caregiver”.
- Participant 3 (personal communication, March 29, 2023): “Interdisciplinary care is carried out collaboratively, but greater commitment is needed at the individual, family, and community levels”.
- Participant 4 (personal communication, April 7, 2023): “The care provided to patients is of high quality, offering state-of-the-art technology and well-trained professionals in individualized, family, and community-oriented care. In the private sector, our main objective is to ensure quality of life for patients through efficient treatments supported by successful case outcomes”.
- Participant 5 (personal communication, April 11, 2023): “In the private sector, we work closely with professionals to offer techniques that strengthen patients' capacities and social skills, enabling them to recognize their potential to manage and overcome challenges. Patients are the protagonists in this process, supported by strong networks—particularly the family- which serves as a fundamental pillar”.
- Participant 6 (personal communication, April 17, 2023): “When we provide services, we clarify that any resource—whether human, financial, or material—is included within the service package. It is worth noting that even after a patient passes away, we offer therapy to those involved in the initial care to support the family through the grieving process”.
- Participant 7 (personal communication, January 8, 2025): “The responsibility of implementing techniques and strategies is highly demanding, and we need more support from the medical team, who should also be actively involved in all the processes”.
- Participant 8 (personal communication, January 10, 2025): “In the private sector, patient flow is smooth because more trained staff are available to attend to patients without delays such as long wait times”.
- Participant 9 (personal communication, January 11, 2025): “Any resources the patient may need, including payment for services, are always available whenever the patient or their family requests them”.
- Participant 10 (personal communication, January 13, 2025): “As the Social Worker responsible for the oncology program, more support from other professionals is needed, as I am alone in carrying out activities that require collaborative efforts for effective intervention”.

The statements of social workers reveal a significant gap in the quality and accessibility of oncological care between the public and private sectors. In the public sector, the high demand for services and limited resources results in work overload for professionals, hindering their ability to provide individualized and personalized care. The lack of coordination and commitment within the interdisciplinary team further delays timely responses to the needs of cancer patients

and their families. Nevertheless, social work professionals remain committed to their role, demonstrating dedication and professionalism despite institutional challenges.

By contrast, the private sector is widely recognized for delivering high-quality care, offering guidance, counseling, educational sessions, personalized treatments, and professionals trained to address all the needs of individuals diagnosed with cancer. Services aim to enhance the quality of life for patients and their families. As such, targeted techniques are implemented to help individuals cope with difficult situations, manage emotional responses, and navigate life events associated with the illness.

4. Conclusions

Social workers specializing in clinical oncology are essential to the healthcare team, working closely with physicians, oncologists, and other healthcare professionals. Their role primarily focuses on providing emotional and social support to patients and their families, offering detailed information about the treatment process, and addressing practical and financial concerns related to the illness. These professionals are vital in coordinating resources and services to ensure comprehensive, patient-centered care, as highlighted by (Gilbert *et al.*, 2012). Additionally, during their intervention, social workers conduct assessments to identify the needs and available resources of the patient and their families. Based on these evaluations, they develop personalized intervention plans that cover areas such as emotional support, guidance on financial and assistance resources, discharge planning, facilitating group support, and promoting self-care, as noted by Duque-Delgado *et al.* (2021).

Various methodologies and strategies were identified individually, with psychosocial support as a key approach. This involves assisting the oncology patient during treatment and recovery while actively integrating the family into the process. Furthermore, follow-up is conducted through differential and rights-based approaches. The patient's adaptation and development are closely monitored, highlighting successful cases, family therapy interventions, and the implementation of educational mutual support sessions. A playful, recreational, and educational explanation is also used to ensure the patient is not overwhelmed by the cancer diagnosis. Another significant aspect is crisis management and conflict resolution, which includes clearly understanding symptoms and treatments and considering the quality of life in social, familial, and personal contexts. The importance of support networks, such as family and the interdisciplinary team within the institution, is also emphasized.

Regarding the affected individual's family, techniques and strategies used by social work professionals were recognized, spanning from diagnosis to treatment. These approaches focus on strengthening support networks, with the family as the central axis. Additionally, orientation techniques were implemented, providing information on the care and attention required, alongside counseling sessions on thanatology. The family is informed that cancer is a chronic

illness, necessitating care and attention from both caregivers and the professionals overseeing the process through education and awareness efforts. Moreover, group therapy was conducted, involving discussions and interventions with focus groups to address the challenges and difficulties the illness presents in individual, familial, and community contexts.

At the community level, social workers implement strategies aimed at cancer prevention by addressing risk factors such as substance use, unhealthy habits, sun exposure, and genetic predisposition. Self-care promotion includes encouraging regular medical check-ups and providing institutional guidance. Educational initiatives are conducted, emphasizing the importance of medical screenings, particularly for women, to ensure early detection of breast cancer. Campaigns with messages like 'touch yourself so it does not touch you' are employed, alongside informational sessions that address the signs, causes, and consequences of chronic diseases to enable timely detection of the illness.

In conclusion, this exploratory study highlights the diverse and significant role of social workers in the field of oncology, revealing a wide range of opportunities to support patients diagnosed with cancer. Their work extends beyond individual care to include coordinated interventions with families and communities, enabling a holistic approach to case management—particularly within healthcare institutions in Sincelejo, Sucre. The findings also underscore the critical role of social workers and the ongoing advancements in this area of practice, especially in their contributions as integral members of interdisciplinary healthcare teams.

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It is important to highlight that the intervention of social workers in both public and private sectors is in high demand, particularly regarding their work in individual, family, and community settings. However, it is concerning that the public sector often lacks a thorough commitment to providing patients with the information they need about their illnesses. Despite the availability of psychosocial support techniques, training and guidance, group therapy, and self-care promotion and prevention strategies, the required services are not always delivered promptly or efficiently due to the constant influx of patients needing intervention across various domains.

In contrast, the private sector generally provides timely and adequate care to patients and their families. Nevertheless, there is a noticeable lack of engagement with the broader community, especially regarding early detection through awareness campaigns. Both sectors must collaborate to ensure fair and equitable access to quality care.

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Authors' Contribution statement

Blanca Pérez-Contreras: Investigation, methodology, data curation, validation, formal analysis, writing (review and editing). Rubiela Godin-Díaz: Review and editing, data curation, and draft review. Andrea Pérez-Basilio: Conceptualization, investigation, methodology, project administration, writing (original draft), and writing (review and editing). Juan Carlos Valdelamar-Nadaff: Methodology, investigation, project administration, supervision, validation, writing (original draft), and writing (review and editing).

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The authors declare that there are no conflicts of interest related to the publication of this article.

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