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Professional profile of social work in thanatology in the health field

Perfil profesional de trabajo social en tanatología en el área de la salud

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ABSTRACT

Introducción: la tanatología aborda el estudio de la muerte, el proceso de morir y las pérdidas significativas. En el ámbito sanitario, el Trabajo Social desempeña un papel clave en el acompañamiento psicosocial de pacientes en etapa terminal y sus familias. El objetivo de este estudio fue describir el perfil profesional del Trabajo Social en tanatología en el área de la salud.

Método: se desarrolló un estudio con enfoque mixto. Se realizaron entrevistas semiestructuradas a trabajadores sociales de hospitales de segundo y tercer nivel y a familiares en proceso de duelo, complementadas con revisión de normativa y literatura científica. El análisis se efectuó mediante codificación temática y triangulación de fuentes.

Resultados: el perfil profesional identificado integra conocimientos sobre modelos de duelo, cuidados paliativos y derechos de pacientes terminales; habilidades en entrevista tanatológica, evaluación psicosocial y coordinación interprofesional; y actitudes de empatía, respeto cultural y defensa de derechos humanos. La intervención se desarrolla en ámbitos hospitalarios, ambulatorios, domiciliarios y de urgencias mediante protocolos de valoración, intervención y seguimiento del duelo.

Conclusiones: el Trabajo Social constituye un actor clave en los equipos de cuidados paliativos, al articular dimensiones clínicas, sociales y culturales. Fortalecer su formación especializada y establecer indicadores de calidad puede mejorar la atención integral y humanizada al final de la vida.

Keywords: Thanatology; Health Social Work; Palliative Care; Grief; Psychosocial Intervention.

RESUMEN

Introduction: thanatology studies death, the dying process, and significant losses. In healthcare settings, Social Work plays a key role in providing psychosocial support to terminally ill patients and their families. This study aimed to describe the professional profile of Social Work in thanatology within the health sector.

Method: a mixed-methods design was employed. Semi-structured interviews were conducted with hospital social workers and bereaved family members, complemented by a review of official regulations and scientific literature. Data were analyzed through thematic coding and source triangulation.

Results: the identified professional profile includes knowledge of grief models, palliative care, and the rights of terminally ill patients; skills in thanatological interviewing, psychosocial assessment, and interdisciplinary coordination; and attitudes based on empathy, cultural respect, and human rights advocacy. Interventions occur in hospital, outpatient, home-care, and emergency settings through protocols for assessment, intervention, and grief follow-up.

Conclusions: Social Work is a key actor within palliative care teams by linking clinical, social,

and cultural dimensions of care. Strengthening specialized training and establishing quality indicators may improve comprehensive and humane end-of-life care.

Palabras clave: Tanatología; Trabajo Social En Salud; Cuidados Paliativos; Duelo; Intervención Psicosocial.

INTRODUCTION

Thanatology, defined as the scientific study of death, the process of death, and significant losses, is an increasingly relevant field in the health sector (Kübler-Ross, 1969). In Mexico, the increase in chronic, degenerative, and terminal illnesses, as well as the increase in violent deaths, has highlighted the need for palliative care and psychosocial support services (Official Mexican Standard NOM-011-SSA3-2014, 2014). Within healthcare teams, social work takes on special relevance, as its professional work focuses on intervention with families and communities, resource management, interprofessional coordination, and support in grieving processes (IMSS, 2024).

The question guiding this research is as follows: What is the professional profile of social work in the health field in the field of thanatology? The overall objective is to describe the competencies, functions, settings, and standards of intervention for social work in this field.

Loss, death, and grief

Psychological models of grief

Kübler-Ross (1969) identified five emotional stages of grief (denial, anger, bargaining, depression, and acceptance). Although it has been criticized for its linearity, it continues to be an initial reference point in thanatology.

Worden (2009) proposes four tasks: accepting the reality of the loss, working through the emotions of grief, adapting to a world without the deceased, and emotionally repositioning the deceased. This model is widely used in clinical and social practice.

Neimeyer (2018) argues that grief involves a reconstruction of meanings that allows the loss to be integrated into the life narrative.

Sociocultural perspective on grief

Grief is not only an individual psychological phenomenon but also a cultural and social phenomenon. Rituals, religious practices, and family structure influence the way losses are experienced (Hernández, 2016). The social work approach recognizes the diversity of experiences and promotes the cultural validation of farewell rituals.

Legal, ethical, and organizational framework in Mexico

The Mexican regulatory framework recognizes the right to palliative care and dignified accompaniment. The General Health Law establishes this right, whereas NOM-011-SSA3-2014 defines criteria for interdisciplinary care for terminally ill people. In addition, institutions such as the IMSS and ISSSTE have incorporated areas of thanatology and psychosocial support services (IMSS, 2024).

In the ethical sphere, social work is governed by principles of confidentiality, autonomy, beneficence, and justice (National Council of Social Work, 2022). These principles guarantee

respectful professional practice focused on human dignity.

METHOD

The research used a mixed approach. Semistructured interviews were conducted with social workers in second- and third-level hospitals, as well as with family members who were going through the grieving process. Official regulations and scientific literature were also reviewed. The analysis was carried out via thematic coding and triangulation of sources (Creswell & Plano Clark, 2017).

FINDINGS AND RESULTS

Knowledge

- Models of grief (Kübler-Ross, Worden, Neimeyer).
- Rights of terminally ill patients (NOM-011-SSA3-2014, 2014).
- Palliative care processes (WHO, 2018).

Skills

- Thanatological interviewing and active listening.
- Psychosocial assessment and detection of complicated grief risk.
- Interprofessional coordination in healthcare teams.

Attitudes

- Respect for cultural and spiritual diversity.
- Empathy and compassionate support.
- Defense of human rights.

Functions and practice settings

Social work in thanatology operates at different levels:

- Hospital: support in communicating bad news and guidance for families in administrative procedures.
- Outpatient: coordination of bereavement support groups.
- Home care: visits to patients in palliative care and strengthening of support networks.
- Emergency: Care for sudden losses with immediate support (Hernández, 2016).

Social work intervention protocol

- Receipt of interconsultation.
- Initial interview and psychosocial assessment.
- Development of an intervention plan with clear objectives.
- Implementation (support, mediation, resource management).
- Close and follow-up the grieving process.

This protocol is aligned with NOM-011-SSA3-2014 (2014) and WHO recommendations (2018).

Assessment tools

Complicated grief risk scales, thanatological interview guides, and psychosocial checklists are used (Worden, 2009; Neimeyer, 2018).

Quality standards and indicators

Indicators such as response time to consultations, grief follow-up plans, and family satisfaction

are used to evaluate the quality of the intervention (IMSS, 2024).

Interprofessional coordination

Social work coordinates actions with medicine, nursing, psychology, and spiritual agents, promoting a comprehensive approach that respects cultural diversity (WHO, 2018).

Ethics, risks, and professional self-care

Constant exposure to suffering can lead to compassion fatigue and secondary stress. Therefore, regular supervision and self-care strategies are recommended (Figley, 1995).

Training and graduate profile

Training requires courses in thanatology, palliative care, clinical communication, and professional ethics. The graduate profile must guarantee competencies to assess, intervene, and coordinate support in situations of grief (National Council of Social Work, 2022).

Illustrative case study

A patient with terminal cancer received support from the social work department to manage legal procedures and coordinate a farewell ritual with her family. This support reduces family anxiety and facilitates a less complicated grieving process (Neimeyer, 2018).

The results confirm that social work is a key player in palliative care teams, linking the clinic with society and culture. However, there is a need to strengthen training and standardize quality indicators (Hernández, 2016; WHO, 2018).

Final considerations

Professional profile

Reflecting on the professional profile leads us to question what kind of social worker contemporary society requires. It is not enough to have someone who manages resources or coordinates programs: we need a sensitive, critical, and resilient professional who dares to work on the borderline between life and death. This profile is not defined solely by what they know but also by their ability to support others in their vulnerability.

Social Work

Social work, as a discipline, brings a social and community perspective to the process of dying. From reflection, we can say that social work in thanatology invites us to vindicate human dignity in the final moments, to break the isolation that many families experience, and to demonstrate that even in the face of loss, solidarity and professional intervention can transform the experience of pain into an opportunity for reframing.

Thanatology

Thanatology, understood not only as a science but also as a humanistic practice, offers a profound lesson: death is not the end but rather a transition that calls for accompaniment and care. Reflecting on this implies that, as professionals, we will never have all the answers, but we do have the possibility of accompanying without judgment, with respect and active presence.

Health

In the field of health, this reflection takes on an ethical and practical character. Healthcare systems tend to prioritize the technical and curative, but the integration of thanatology and social work reminds us that health also includes the right to a dignified death, accompanied mourning,

and a compassionate environment. Here, the thanatology social worker becomes a reminder that the human aspect cannot be left out of public policies, hospitals, or multidisciplinary teams.

The professional profile of social work in thanatology within the health field is an emerging, necessary, and socially impactful field.

The integration of knowledge about grief, death, and loss, combined with the social and community perspective of social work, allows for comprehensive support to be provided to both terminally ill patients and their families.

Furthermore, this professional profile not only contributes to direct care but also strengthens management processes, program design, and the construction of institutional support networks, which broadens the scope and relevance of social work in the healthcare field.

Recommendations

- Implement institutional thanatology programs with the formal inclusion of social work.
- Expand palliative care coverage in marginalized communities.
- Establish professional self-care protocols.

Limitations and future directions

The study has limitations in terms of sample size and geographic scope. It is recommended that the research be expanded with longitudinal and comparative studies.

CONCLUSIONS

The professional profile of social work in thanatology is based on comprehensive competencies, specific functions, and an ethically and culturally relevant approach. Strengthening this profile leads to more humane, dignified, and effective care at the end of life.

The professional profile of social work in thanatology in the health field encouraged us to recognize that death is not only a biological phenomenon but also a social, cultural, and emotional phenomenon.

This profile is not built solely on technical skills but also on the ability to empathize, accompany, and humanize the processes of loss.

In a context such as Mexico, which is characterized by violence, chronic disease, and collective grieving processes, this specialty has become indispensable for public health and social welfare.

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CONFLICT OF INTEREST

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