

# Disease as a Social Phenomenon. Social Pathology in Institutionalized People

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**Abstract:** Book review of Alina Frunză “Boala ca fenomen social. Patologia socială în cazul persoanelor instituționalizate” [“Disease as a social phenomenon. Social pathology in institutionalized people”], Iasi: Editura Lumen, 2017.

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Our entire life cycle is composed from little parts that determinates us to enjoy small things and make great discoveries, innovative ones. All of these are possible if we have a proper quality life (Paulsen et al., 2013) and we have under control our daily health condition, health equity (Evans, 2020) or, even better, we avoid all types of disease. If all of these are possible. But in the same time we must admit that disease is, randomly, part of our life, gives us many lessons to learn and sometimes even helps us realize that our body speaks with us through its own language. As Alina Frunzã mentions in her book “disease is not our enemy, but, paradoxically, our best friend, because he has the courage to tell us in the face what, where and how we are wrong” (Frunza, 2017).

Alina Frunzã is a social worker for more than 15 years, she is enrolled at the National College of Social Workers in Romania as main social worker rank. During the period of 2010-2019 she was the Coordinator of the Vocational Training Center of the General Directorate of Social Assistance and Child Protection from Iasi.

Since 2009, she excels as an associate lecturer at “Alexandru Ioan Cuza” University from Iasi where she teaches courses related to social work domain of her expertise. In 2011, Alina Frunzã obtained her PhD in Sociology at the same university where she is an associate teacher and also finalized her Bachelor Degree in social work domain. Until present she had a very active scientific activity, publishing papers and participating at international and national conferences, workshops, seminars; receiving different types of awards and distinctions for the professional activity carried out during the years. Her long time experience in social work domain qualifies her to obtain and present to scientific community the image of social and medical perspective of chronic disease patients presented in her PhD thesis published in 2017 at Lumen Publishing House, from Romania.

As the author mentions in the first section of the book:

*“Both health and disease are important indicators of social progress, social well-being and quality of life, which are influenced and, in turn, influence the living standards, culture and civilization of a nation, its structure and character of social organizations or institutions (implicitly, medical ones), value systems, social practices, skills, needs, etc.”* (Frunza, 2017, pp. 13-14).

The book is structured in five chapters and introduction. The total of 401 pages, including annexes and bibliography, are forming a complex study on disease and its social and medical implications for the person, his/her family, specialists and social community and context where they are.

Each chapter focuses on aspects related to “disease as social phenomena” as main issue she analyzes.

In the **introduction section** the author presents the motivation of choosing this scientifically theme, the main objectives, purpose, research hypothesis, research methods that she utilizes for this book, and also mentions the scientific innovation of the topic.

My attention focused on the innovation of the topic the author chose to present:

*“In this volume I conducted a complex study, through quantitative and qualitative research, which allowed the analysis of interconnection and reflection of medical-social and psychological aspects of health and illness of people institutionalized in residential units, which face the phenomenon of disease.*

*The data obtained include information on the stage of illness of the institutionalized persons, the degree of physical autonomy, by age and gender groups, but also on the families that maintain or not the connection with the institutionalized person. Thus, the efficiency of the medico-social services provided in the medico-social units from Iasi county could be evaluated” (Frunza, 2017, p. 23).*

The research methods that the author chose to use contributed to validate or invalidate the hypothesis that she had at the beginning. For the qualitative part of the research she used methods such as: life story interviews, participatory observation, phenomenological and structural analysis, case analysis, focus group. And for the quantitative part of the research focused on three quantitative studies: 1. “Evaluation of the degree of satisfaction of the institutionalized beneficiaries in the medico-social units (Bivolari, Răducăneni, Podu-Iloaie) from Iasi county”; 2. “Diagnosis of the disposition and physical symptoms of the institutionalized persons in the medico-social units (Bivolari, Răducăneni, Podu-Iloaie) from Iasi county”; and, 3. “Quantitative and qualitative analysis of the opinions of specialist practitioners employed in residential units (medical and social units in Iasi County)” (Frunza, 2017, pp. 22-23). The multitude of research methods used by the author emphasizes that the conclusions of the book are relevant and can be a first step to change the actual conditions of institutionalized persons from our country.

The first chapter of the book titled **“The main areas of study and convergence of medical sociology and clinical sociology”** mentions the theoretical background of concepts such as medical sociology and clinical sociology, their particularities and specificity. From the conclusions of the first chapter given by the author it can be identified that also in our country *“in recent decades, the expansion of activity in medical and social units in order to solve*

*both medical and social problems have led to the emergence of new professional groups participating in the medical act, other than traditional ones, including psychologists and sociologists” (Frunza, 2017, p. 48).*

Also, in other countries the well-being and quality life of different categories of patients (Widayati et al., 2016) is one important element of the system. The results of this book may be the base of future social policies for patients from Romania initiated by our government.

Next chapter of the book entitled **“Analysis of the social aspects of the level of health and disease of the institutionalized population and of their influencing factors”** focuses on the elements of disease and health of persons, reactions towards disease. Also are presented the social implications of the family members and different groups from which the patient was an active member until that moment. The author mentions that

*“From the point of view of the groups to which the patient belongs, the disease is seen as a brake factor in fulfilling the obligations associated with its normal roles, determining a new distribution of the roles of other individuals, who, at least for a certain period of time, must fulfill both their obligations as well as those of the patient” (Frunza, 2017, pp. 103-104).*

This element is identified also in different other papers published by other authors who also presented the social implication and the evolution of members of the families with patients with disease diagnoses (Trandafir, 2010) and elements to make all this stage pass easier.

The third chapter of the book titled **“Presentation of the research field and of the target groups investigated in the multiple researches”** presents the characteristics of the groups that will be analyzed, particularities of the institutions; also of the specialists that work there and their work ethic and deontology. As a main conclusion of this chapter the author mentions that:

*“The most important variables related to the social identity of individuals and their lifestyle and which influence the differential distribution of morbidity and mortality are gender, age, belonging to a certain ethnic group and socio-economic status” (Frunza, 2017, p. 160).*

Taking into consideration the variable of individuals, we consider that a very important element for improving the life quality of patients may be also “conversation circle as an educational strategy in patients” (Mantovani et al., 2011) as mentioned by Mantovani in her paper.

The fourth chapter of the book aims the presentation of the **“Methodology applied in clinical sociology”**. The author continues to

explore the theoretical background of the research part and mentions significant and relevant information for the theme. Also in this chapter, from page 165 to 356, namely 191 pages the author presents the entire research elements and the main conclusions resulted that

*“Mutual respect between team members and loyalty are impossible without mutual trust and sincerity. It happens to each of us to make certain mistakes in work in healthy teams help us more experienced colleagues and leaders so that mistakes can be corrected without detrimental consequences for patients”* (Frunza, 2017, p. 352).

In this chapter also is presented an example of good practice that can be used in this type of institutions. A very good and productive work relationship among specialists from residential centers contributes also to a strong relationship of quality of life and the complications that can appear during treatment (Van Heck & De Vries, 1998).

The final chapter of the book entitled **“Public health and social development services”** summarizes the relevant results of the studies and presents recommendations for a more efficient communication among specialists from the system having as their main purpose the patient and his health. Also there are made some suggestions that can be used for future public policies for increasing the conditions from this types of institutions

*“One of the objectives of sustainable social development could be to increase the financing of preventive and curative health services and a more efficient management of existing resources, given that social development is directly influenced by investment in human capital”* (Frunza, 2017, p. 357).

Another important element brought in our attention is the fact that as a result of the presented studies the sociologist and/or social worker as specialists are even needed (in case they lack from the members of interdisciplinary team), or have a very important role in the process of recovery and maintain stability and equity for member families of the patients with different types of disease as the author mentions:

*“On the contrary, a certain degree of specialization is inevitable for the sociologist or social worker in the medical and social unit and depends both on the type of social problems the patient is facing and on the ability to find the most appropriate solutions to accelerate the recovery process. For the sociologist, the main area of professional competence is the psycho-sociological dimensions of the disease and the evaluation of those factors of a personal, family or social nature that can stop the evolution of the disease and restore the patient's abilities”* (Frunza, 2017, p. 357).

Quality of life is a very important indicator for people individually, family and it is the main variable for a society to be able to develop and step to the next stage of their evolution. The book of Alina Frunza presents a clear image of the present problems identified in the system at national level and also sustainable solutions for solving them. The recommendations presented by the author at the end of each chapter and at the end of the book are relevant for possible initiative of social policies that can be initiated by Romania governmental institutions.

As the globalization is even more present each day in our life the multidisciplinary and interdisciplinary teams have a very important role. Specialists from different areas, and even countries all over the world, such as: doctors, nurses, social workers, sociologists, psychologists all need to have in their main goal the well-being of the patient and quality of life. In this instance, this book is relevant for this topic and deserves to be read and cited in different scientifically papers regarding theme of disease and social pathology in institutionalized people in Romania and all over the world.

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