

CHAPTER VI
RESEARCH METHODOLOGY

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An attempt has been made in this chapter to explain the scientific research methods adopted for the present study.

1. Statement of the Problem:

Medical Social Work is one of the important areas of the professional social work practiced in India and abroad. The credit goes to the Tata Institute of Social Sciences, Mumbai which has started the Medical and Psychiatric Social Work. More particularly the hard efforts of Mrs. Gauri Rani Benarji strengthened the field of medical and psychiatric social work in India. There after few institutions in India made the efforts to start the Medical and Psychiatric Social Work. NIMHANS, Bangalore is one of the renowned Institutions of the International repute, which is imparting the social work education in the field of Medical and Psychiatric social work. This has led to the growth of medical social work in India. As a result the hospitals and health institutions started appointing the medical social workers to assist the medical and allied professions.

The Medical Council of India's Report (1973) on the minimum standard requirements for Medical Colleges with 100 admissions, had recommended that there should be at least six medical social workers in each of the Preventive and Social Medicine Departments - two at the Colleges, two at the Rural Health Centre and Two at the Urban Training Health Centre. If these recommendations are implemented by all the states in India there would be a requirement of large number of Medical Social Workers only for the Preventive and Social Medicine Departments of Medical Colleges (Anand, S: 2001).

But the development in this regard is meager. The need of the profession is not so seriously felt by all those who are concerned with the health aspect of the society. The policy makers, the planners, the Govt., the health team and the NGOs at large are not yet fully convinced about the importance of medical social work. More particularly the response from the planners is also not encouraging as it is found in many committee reports such as Mudaliar Committee (GOI, 1961), Srivastava Committee (GOI, 1975), etc. There are some reasons behind this slow progress of the

medical social work practice. Particularly in hospital setting in India, the qualifications, functions and duties of Doctors, Nurses and other auxiliary personnel have been clearly defined. But in case of Medical Social Workers, neither the functions are identified nor are the qualifications recognized. Even the social workers themselves and the medical team are unable to identify various roles of social workers in medical setting. As a result in many cases they get low acceptance and enjoy low status in the medical team. In hospital and related health institutions tangible results are of paramount importance where as the results of the work of medical social workers are often invisible as they deal with socio-psychological aspects of the patients. Often their contribution is not perceived properly by the administrators and the medical team. In many hospitals the medical social workers function as a single worker. Very often the medical social workers are engaged in routine and monotonous non-professional duties which hamper their motivation to function effectively. The salaries of the medical social workers are comparatively low among the members of the health team. In addition to these, there are several other problems, which also affect the quality of the services. The future growth and development of the field of Medical Social Work largely depend upon the efforts made by the Medical Social Workers in successfully handling their problems.

Though there is a slow take up of the medical social work as a profession there is a considerable amount of acceptance. It is a requirement on the part of the medical colleges and hospitals to appoint the minimum required number of the Medical Social Workers. As a result the General Hospitals and Medical Colleges are appointing the M.S.W degree holders as Medical Social Workers. Further it is observed that the Blood Banks, Major Health Projects, HIV/AIDS awareness and intervention projects, Leprosy Hospitals have been started appointing the medical social workers with M.S.W. qualifications. But these health institutions do not consider the specializations of these candidates while appointing. This certainly leads to the low performance and yields poorer results. For example, it would be quite odd if an M.S.W. with Personnel Management and Industrial Relations (PMIR) Or Rural and Urban Community Development (URCD) is appointed as a Medical Social Worker. It is a matter of happiness that at least these institutions felt the need of the services of the medical social workers.

For all these practical reasons it was thought of undertaking a research study to know and understand the practice of Medical Social Work in hospitals and

other health institutions. Hence, a study entitled “**Medical Social Work Practices in Hospital Setting in Western Maharashtra**” has been undertaken.

2. Scope of the study:

- 1) The Bhore committee was the first committee that recommends the appointment of medical social workers in the hospital setting. The study on “Medical social work practices in hospital setting in western Maharashtra” and the premises on which the work was viewed by subsequent committee is taken as significant to the processes of the evolution. The growth of medical social work in Abroad is also reviewed. Also the professional education for the Medical Social work is reviewed in the study.
- 2) Geographical scope: The study covers total 67 hospitals employing Medical Social Workers in 12 districts in western Maharashtra.
- 3) The study provides an opportunity to examine the demographic profile of medical social workers in hospital setting in western Maharashtra.
- 4) The study provides subject wise scope
 - a) To understand the social work method used, role played in teaching and professional training of medical, nursing, social work students and administrative responsibilities of the medical social workers in hospital settings in western Maharashtra. The study also throws light on understanding the authority, this group of professionals enjoy, in the area of Social work interventions, Use of organizational resources and Planning of policies and programme within there organization.
 - b) The study aims at understanding the type of problems encountered, the job content and salaries of the group and promotions and organizational climate, level of job satisfaction and the professional needs of the medical social workers in hospital settings in western Maharashtra.
 - c)It is important to identify the significant factors affecting medical social work practices, examine the physical conditions and how social worker operate, assistance available, clerical help, type of work under taken, including professional and non professional, work load, availability of resources, professional orientation and opportunities for participation in conferences, seminars, work shops and in short term training programme, also evaluation of

work and its methods, examining the degree of professional sharing within their group.

- 5) The functional scope would be confined to rendering a set of appropriate suggestions, recommendations and advice in relation to medical social work practice to the medical social workers, hospitals, schools of social work, professional organizations of medical social workers and the government.

3. Objectives of the Study:

The study is guided by the following main objectives:

1. To throw light on the evolution of the Medical Social Work practice and its professional education in India and Abroad.
2. To know and understand the demographic characteristics and the job profile of the Medical Social Workers working in hospital setting in Western Maharashtra.
3. To explore the overall professional role, functions and responsibilities of the Medical Social Workers in hospital setting.
4. To understand the application of Social work methods by the Medical Social Workers while discharging their duties in hospitals.
5. To probe into the problems encountered by the Medical Social Workers while working in hospital setting.
6. To know the professional needs and requirements of the Medical Social Workers.
7. To explore the working conditions and job satisfaction of the Medical Social Workers working in hospital setting in Western Maharashtra.
8. To find out the factors affecting the Medical Social Work practice in hospital setting and thereby to devise a scientific model of practice.
9. To highlight the professional strengths and weaknesses of the Medical Social Workers in terms of Medical Social Work Practices.
10. To record some practical suggestions to the Medical Social Workers, Schools of Social Work, Hospitals, Professional Organisation of Medical Social Workers and the Government regarding the theory and practice of Medical Social Work.

*- Basic Research Question
- Hypothesis
- Research Design
- Variables*

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4. Research Methodology:

Following is the research methodology adopted for the present study:

a) Locale of the Study:

The entire region consisting of twelve districts in western Maharashtra have been covered under the present study.

1. Mumbai
2. Thane
3. Nashik
4. Pune
5. Ahmednager
6. Raigarh
7. Satara
8. Solapur
9. Sangli
10. Kolhapur
11. Ratnagiri
12. Sindhudurg

b) Selection of the Hospitals:

All the District Government and Private hospitals employing the medical social workers from the 12 districts of western Maharashtra were selected for the purpose of the study. A total 67 hospitals were covered under the study.

c) Sampling Method:

After compiling the list of hospitals employing Medical Social Workers the second step covered the task of preparing the list of Medical Social Workers, as there was no ready list available, at the time of research, the list was prepared by contacting various hospitals over telephone, internet surfing, by writing letters and by paying personal visits to the hospitals and approaching the known Medical Social Worker working in the hospital. Since the total population of Medical Social Workers in Hospitals in Maharashtra is limited all of them were covered under the study i.e. **Census method was adopted.** After compiling the list of Medical Social Workers, letters were written to the concerned authorities seeking permission to collect the data.

Out of 227 Medical Social Workers 27 were deleted. Of these twenty seven medical social workers ten were covered in the Pilot Study, the data of which is not included and remaining seventeen were not available for responding to the

interview. Hence, a total of 200 Medical social workers were finally selected for the current study.

d) Sources of Data:

Both the primary and secondary data were collected for the proposed study.

i) Primary Data:

The primary data were collected directly from the respondents concerned with the help of the structured Interview Schedule, which was specially designed for the study. Each and every respondent was personally interviewed, observed and discussed in detail.

ii) Secondary Data:

The secondary data were collected from the various Libraries especially library of Tata Institute of Social Science, Mumbai and National Institute of Mental Health and Neuro Sciences(NIMHANS) at Bangalore, Documentation Centers, Web sites, National Information Centers and Annual Reports of the various hospitals. An effort has also made to refer the study reports related to the subject.

e) Tools of Data Collection:

Following are the tools of the data collection used for the study:

i) Interview Schedule:

A Structured Interview Schedule has been designed for the purpose of collecting the primary data from the selected respondents. While preparing the exhaustive frame of the interview schedule, sufficient care was taken to cover all the factors covered in the objectives of the study.

ii) Interview Guide:

An Interview guide was also prepared and used for collecting the information from the Members of the Management, Academicians, Medical Officers and Govt. Officials working in the field.

f) Methods of Data Collection:

Following methods were adopted for the data collection:

i) Interview Method:

Personal Interview Method was found as the most suitable method for the data collection. Because while collecting the data personally the researcher gets an opportunity to observe the work atmosphere, the feelings and attitudes of the

respondents. Therefore, the researcher has collected the data personally of the Structured Interview Schedule that was designed for the study.

ii) Observation Method:

The researcher has also adopted the observation method for c data. Both participative and non-participative observation methods were adopted.

iii) Discussion Method:

In addition to the personal interview and the observation method the discussion method was also followed for collection of the data. The researcher had discussed with other social workers, doctors, nurses, administrators, social work teachers, and such other persons concerned with the medical social work practice.

g) Pilot Study:

The interview schedule was framed on the basis of the objectives of the study. After framing the interview schedule and before finalizing it the interviews of ten medical social workers sampled out for the study were conducted to examine whether the questions set in the schedule were relevant and appropriate and whether their meanings were clear and understandable to the respondents.

The filled in interview schedules were than scrutinized and the data were processed. The required changes were made accordingly in the interview schedule. The data collected for the pilot study has not used for the final study.

5. Limitations of the Study:

The study has the following limitations:

1. The study has covered only the Medical Social Workers from hospital setting for the purpose of the study.
2. The study was also limited only to those selected hospitals and medical colleges in Western Maharashtra.

6. Operational Definitions:

- i) **Medical Social Worker:** For the purpose of the present study the term Medical Social worker is referred to the persons employed in the hospital setting and designated as Medical Social Worker in the hospitals and Medical Colleges.

- ii) **Hospital Setting:** is the organization or units of organization services are provided for the treatment, care and rehabilitation of sick and disabled and the prevention of diseases. The setting provides one or more of the services: a) Treatment and care b) Rehabilitation c) Prevention for the benefit of the sick and disabled is considered as a 'Hospital setting' in this study.

7. Field Work:

The researcher required sufficient time to meet the Medical Social Workers personally and collect the primary data. The data were collected during June 2004 to May 2006

8. Data Processing:

The filled in Interview Schedules were edited properly and processed accordingly. The data were processed with SPSS package and was analyzed using appropriate statistical and non-statistical methods under the sponsorship of Indian Council of Social Science Research, New Delhi at one of its centres viz; Tata Institute of Social Sciences, Deonar, Mumbai and then interpreted.

9. Report Writing:

After processing the data and obtaining the results thereby the Report Writing Work had undertaken. The report is organized as per the objectives that were designed for the study.

Scheme of Chapters:

1. Introduction to Medical Social Work
2. Emergence of Medical Social Work in India and Abroad
3. Professional Education For Medical Social Workers
4. Introduction to Study Region
5. Profile of Hospitals Under Study
6. Research Methodology
7. Review of Literature
8. Profile of Medical Social Workers

9. **Functions, Roles and Responsibilities of Medical Social Workers**
10. **Professional Growth and Contribution of Medical Social Workers**
11. **Job Profile and Job Satisfaction of the Medical Social Workers**
12. **Problems and Professional Needs of Medical Social Workers**
13. **Findings, Conclusions and Suggestions**