The Significance of Research Based Community Practice in Indian Social Work Education

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Abstract
The Social Work profession promotes social change, problem solving in human relationships and the empowerment and liberation of people to enhance wellbeing. Social work as a profession in India is yet to get its due recognition from the government and society. Indian Social work practice and education seeks some kind of constructive changes. This paper explores the importance of community practice in social work education in Indian context. To fulfill a commitment to the community concept, social work students need a well-defined concept of group and community practice in order to provide the range and quality of services that are required for social work practice in the 21st's century global community paradigm.

Social work cannot be done in a mechanical and unthinking way. It is therefore necessary to have a knowledge base for practice. Therefore it is necessary to incorporate research based community practice in social work education. The present study describes two case studies which emphasize the constructive way of dealing with community by Community medicine Department in Kasturba Medical College, Manipal and an International NGO, World Vision.

Key words: Community Practice, Research, Social work Education.

Introduction
Social work grew out of humanitarian and democratic ideals, and its values are based on respect for the equality, worth, and dignity of all people. Since its beginnings over a century ago, social work practice emphasizing the methods process and techniques which helps an individual, a group, a community to aware the problems encountered and work out the modalities in such a way that the potentials and
resources are utilized to remove the causes of the problem and reduce the magnitude of the problem. The first institute for social work education in India started in Mumbai in the year 1936 which is now known as Tata Institute of Social Sciences (TISS). In India social work yet to be accepted and recognized totally as profession. It is really both shocking and astonishing that despite seven decades of its existence in India, social work could not achieve a much desirable professional status.

Indian society is even now basically a rural and agrarian society, social work education must give greater attention to the promotion of the weaker and vulnerable sections in rural areas, closely associated with agriculture and allied occupations with focus on eradication of poverty, promotion of human, social and sustainable development, assurance of human rights, permeation of justice in all walks of life and participation of people through Panchayat Raj Institutions (PRIs) as well as Non-government Organizations (NGOs) and Community Based Organizations(CBOs) in varied kinds of programmes directed towards social transformation.

The core of social work education and practice has to concentrate on understanding of group and community structure and dynamics. This seeks the modification of curriculum by including concepts of sociology and social psychology. Since from beginning Indians have been living in communities and had a strong bias of culture and tradition.

Likewise, methods, and techniques of dealing with groups and communities, such as meeting and greeting people, introducing one’s own self and getting the introduction of others, establishing rapport, probing into the felt-needs and problems, clarifying the causes responsible for people’s present pitiable conditions, generating awareness of the strengths, weaknesses, opportunities and threats among people, making people aware of their duties and rights, conscientising the oppressed, breaking the culture of silence, of depressed, organizing people, mobilizing people and required resources, organizing non-violent protests, Dharnas, relay fasts, hunger strikes, etc., forging new alliances, partnerships and networks networking, with NGOs/VOs/CBOs and their networks, and PRIs/urban local bodies, monitoring and evaluating the progress, etc. will also have to be incorporated within social work curriculum. (Kizhakkedom, )
Review of literature

The social worker seeks to act as a catalyst in helping community groups to address problems and marshal their resources. Social work cannot be done in a mechanical and unthinking way. It is therefore necessary to have a knowledge base for practice. Naugpaul (1986) highlights that, social work education in India become irreverent to the need of Indian society because what is needed in Indian society is a primarily preventive and macro based social work. Social work education requires knowledge-as-action, knowledge that is contextualized culturally and historically and is shaped by the interaction between students and teachers. National Association of Social Workers (NASW) and Council on Social Work Education (CSWE), recognize the importance of community theory and skills for all social work practitioners. Brzuzy and Segal (1996) suggested that "teaching students to understand appreciate, and use research based in the community" is very much needed in social work education. Training students in the theory and methodology of community practice through placements in the community and focused directly on the community is one way of accomplishing this goal, which is also a timely focus for social work researchers. Coulton (1995) stated that "compared to our knowledge of individuals and families, research attention to the functioning of communities has been scant". Because social work has a long-standing relationship with varied community based practices, sociological theories, and principles of group dynamics as they apply to individual functioning in the context of community, the opportunities for research through studying social work students in community placements are vast. India is a developing country and social workers have enormous opportunity to work with community.

A case study from Mangalore

Kasturba Medical College (KMC) is a medical college based in Manipal, Udupi District Karnataka, India. Established by Dr T.M.A. Pai on 30 June 1953, KMC was the first private sector medical college in India. Community Medicine Department (CMD) Established in 1981. CMD standing for Training' research & service programs have collaboration with public health and social work department. Major Service includes, Rural Field Work Practice Area: A network of seven Rural Maternity and Child Welfare
Homes at Alevoor, Kaup, Padubidri, Malpe, Udyawara, Katapady, and Kadekar villeges. These centers provide health care services to women children & elderly. Activities of CMD have been concentrated on the health of rural people such as:

- Training of Medical Undergraduates, Interns and Postgraduate students, students of allied health sciences, paramedical workers and frontline health workers
- Planning, implementation, monitoring and evaluation of various health care programmes and activities in the field practice area
- Handling research projects funded by various national and International agencies
- Assisting Central and State Governments in evaluating national health programmes
- Conducting research in the field of Public Health

The researcher witnessed the accountability of a field research during the field placement in Kasturba Medical College as part of MSW curriculum. During those days the trainee placed in community medicine department. The department has been conducting a longitudinal study on knowledge, attitude & practices regarding smokeless tobacco use among women form last three years in Udyavara village. Every year approximately 1000 women were selected from the village randomly and collecting data by using same structured interview schedule. The students under CMD are being the part of data collection and further analysis procedure. The students are divided into different groups and going to the different areas of the village under the supervision of faculties. Trainee also got the opportunity to be the part of data collection in 2012 January. Analysis of the data provides the status of women regarding knowledge, attitude & practices regarding smokeless tobacco. Every year the department is able to publish the result and planning appropriate intervention strategy for the current year. The comparison of results and the effectiveness of intervention measures can be evaluate by using this data base. Because data base is much important for formulate strategies. As a part of this research trainee experienced with knowledge have learned from research classes.
Case Study: II The development approach of World Vision to community development.

World Vision is an international humanitarian organization working for community development through children. The focus of the World Vision (WV) organization is divided into five major areas: emergency relief, education, health care, economic development, and promotion of justice. World Vision activities include transformational development, emergency relief, strategic initiatives, public awareness campaigns and promoting Christianity. Though World Vision has consultative status with UNESCO and partnerships with UN agencies like UNICEF, WHO, UNHCR and ILO. World Vision's approach to aid is to first help people and their communities recognize the resources that lie within them. With support from World Vision, it claims communities transform themselves by carrying out their own development projects in health care, agriculture production, water projects, education, micro-enterprise development, advocacy and other community programs.

Area Development Programmes (ADPs) are integrated development programmes that help communities by assisting the children, families and the community block as a whole achieve the basic standards of the four 'well-beings', physical, intellectual, socio-economic and moral well-being. World Vision's community workers facilitate this by living in the communities, learning their problems and helping them find their own solutions. Rather than treat the effects of poverty, World Vision's Area Development Programmes (ADPs) help communities find ways to confront the root causes of poverty and help people in the ADP improve their livelihood.

The trainee placed Kottayam ADP, Kerala for one month field work. The NGO's activity is focused on three areas such as Education, Economic Development activities (EDA) and water and sanitation. Economic Development Activity (EDA) aim at achieving economic development through the provision of self employment schemes to the poorest of the poor. The major provisions are country boat and net, Coir Ratt and Shed, cow rearing and petty shop. The trainee asked to assess the progress of EDA through a small study and adopt a strategy in order to amplify the effectiveness of EDA. Areas of study have included level of satisfaction, time using or EDA, income from EDA, other means of livelihood despite
of EDA and saving habits. The data collection and analysis of beneficiaries by interview schedule found that attitude determines the success of EDA.

The major findings from the study are as follows:

- 58.33% respondents are spending more than 8 hour for EDA and 33.33% and 8.34% are spending 5-8 hour, 2-4 hour respectively.
- The (67%), majority are living from the income generated through EDA.
- Majority of the beneficiaries earning between 2000-8000 per month.
- Half (50%) of the respondents spend this income for household purpose and remaining 33% use equally for education and households.
- Majority (92%) respondents agreed that EDA could boost their saving habit.
- EDA is efficient to make internal changes; the additional income generated through EDA is heightening their self-confidence and happiness.
- The (66.66%) respondents are planning to expand the EDA by investing money from hand.

The research enables the trainee to decide the appropriate group intervention in order to change their unconstructive attitude towards the programme. Because beneficiary who sees EDA as means for livelihood, able to save sufficient money from the programme while some beneficiaries views EDA as source for supplementary income were not able to make use of the EDA effectively. Without this small study the researcher never found that the attitude of beneficiaries causes difficulty to reach the expected income from EDA. By this study trainee argued for the change in the selection criteria of beneficiaries. Therefore we should give prominence to the process of identification of beneficiaries. The need should be real or felt. It is not fair to consider the vulnerability score as the basis of the selection of beneficiaries also contemplate the factors like experience, availability of supporting resources, interest, skill and need.

**Discussions and suggestions**

Based on these two case studies in addition with the experience of from field work practices during MSW, I would like supplement some ideas in order to redefine the social work education prevailing in India.
If the Indian social work education gives more emphasis to community organization, social action and social work research that would be advantage for the development of our rural and urban community settings. The integration of these methods is also practical.

Adoption of a village for research and community practices is possible in social work education. Usually students are familiarizing data collection and analyze procedure during the time of their final semester project or dissertation work. If they are experienced with research methodology in the first year itself, that would be a boon for their academic results.

India lives in villages therefore our social work practices also be root in the lives of village people. Then why don't we think for this kind of community research and community practice in social work education. Knowledge is the basic element lead to practice. It is hopeless going for community practice without knowing the heart beat of the community. Their culture, beliefs, peculiarities problems and felt needs can be elucidate through social work research. In India community organization and social action have better opportunities for practice. In addition, the experience of data collection, analysis, interpretation and all related procedure help the students to get pre acquaintance with research before their project or dissertation coming in final semester.

**Figure 1:**
A model to makes change in field work practice
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On the basis of figure I, (a model to makes change in field work practice) my argument is that in social work education, we have to more concentrate on community organization in integration with research. If research is there before community practice, a thorough data base is forming which is enough to determine the felt needs of people and mode of intervention

Conclusion

Social work is yet to be recognized as a discipline independent of sociology. In order to develop as an independent discipline in its own right, social work educators need to come together and examine the need to set standard for social work education and practice appropriate to their cultural contexts (Albrithen, 2012). In brief, community practice is much relevant in Indian context and essential in making the community living more meaningful. Research based community practice enable the student
to understand the community thoroughly as well as this improve the research quality of the students. We
must be clear in our mind that in India, we must plan and organize future social work education in such a
manner that our professionals should have full commitment to providing sincere and dedicated service to
the suffering humanity.

References

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