



# **Doctoral Works in Tata Institute of Social Sciences**

A Contextual Analysis of  
Social Work Theses  
from 1967 to 2014

**Surinder Jaswal and  
Melody Kshetrimayum**

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*Research and Development*  
**Tata Institute of Social Sciences**

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## EXECUTIVE SUMMARY

Social work research in Tata Institute of Social Sciences (TISS) is a complex and multi-dimensional activity where knowledge, perspectives and practices are often interlinked and compared. Being the first School of Social Work in the country, TISS offers a wide range of programmes that responds to the changing social context and emerging needs in the society and have gained more and more recognition in higher education in the last fifty years. The doctoral programme, for the purpose of the study, is divided into three phases: Inception/ Initial phase (1967-1979), the Expansion phase (1980-2005) and the Post Restructuring phase (2006-2014). Having completed nearly fifty years of PhD programmes at the time of the study, research in TISS grew both qualitatively and quantitatively over the years.

A review of literature on social work dissertations revealed that the existing literature overlooked the contribution of the doctoral works to theory building, policy making, social work education and practice, and knowledge development as a whole. In the light of the gaps identified and the restructuring of the PhD programme in 2006, this paper attempted to examine and locate the nature of subject areas, explore the policy relevance and research aspects adopted by the social work doctoral works and finally compare the doctoral works of the three phases.

The key findings explored the changing nature of doctoral works that moves away from institutional to non-institutional issues influenced by the contextual changes in TISS and in India in general. The position of social work research was located by identifying consistent, dominant, missing and emerging subject areas. The various research aspects, namely the methodology adopted, policy relevance, focus on social work implications, ethical considerations and contribution to theory building were examined and discussed.

The paper elaborated on the strengths and weaknesses of social work doctoral research at the institute, can substantively enhance the research capacity of young scholars and add to the knowledge base of social work education. While there is still paucity of critical thinking on implications and ethical issues, the change has begun and there is need to empower research by strengthening these research aspects.

# SECTION I

## INTRODUCTION: DOCTORAL PROGRAMME AT THE TATA INSTITUTE OF SOCIAL SCIENCES

### 1. INTRODUCTION

Doctoral works occupy an integral part of social work education and help the profession to develop as a research-based profession. The purpose of doctoral programs in social work is to prepare research-scientists who contribute to knowledge that guides professional practice, and educators competent to teach new cohorts of social work practitioners (Goodman, 2015). The quality and composition of the research capacity in social work is imperative to the sustainment and advancement of the social work profession, to build our credibility as a profession and to maintain the support of others outside social work (Fanshel, 1980). In social work, the knowledge generated through research informs practice and policy and vice versa. Due to interdisciplinary nature of the profession, research in social work is constantly diversifying and expanding- including changes to epistemology, influence of the wider economic, political theoretical and practice changes occurring in social work itself (Gibbs, 2001). This diversifying and expanding nature of social work research necessitated investigation of its nature, policy relevance, methodology, ethical considerations and its implications.

In India, professional social work began with the establishment of Sir Dorabji Tata Graduate School of Social Work (now known as the Tata Institute of Social Sciences, TISS) in 1936 under the leadership of Clifford Manshardt, an American missionary. During the earlier years of its inception, the Sir Dorabji Tata Graduate School of Social Work offered a two-year course of training in the general field of social work. Alongside practical training through placements in social service organisations, the students were offered courses in basics of social science disciplines, and methods and fields of social work practice. Table 1 highlights the earlier developments that took place since 1947 till 1978. After a modest beginning with a Post Graduate Diploma Course in 1936, TISS had expanded into different departments and units and offered six degrees in higher education and a post graduate certificate course in research methodology.

**Table 1: Significant Developments in TISS During 1947-1978.**

Year	Development
1947	Setting up of Indian Conference of Social Work
1949	Specialisations introduced are Medical and Psychiatric Social Work Family and Child Welfare Labour Welfare
1951	Public Welfare Administration is introduced as a specialisation (later replaced by the specialisation Community Development).
1952	Criminology and Corrections as a specialization, is introduced.
1954	Social Research as a specialisation is introduced.
1957	Department of Tribal Welfare is started (with a request from the Ministry of Home Affairs, Government of India).

Year	Development
1964	TISS became a deemed university, thus the P.G. Diploma Course gets converted to a Masters Degree Programme
1966	Labour welfare specialisation is separated from the Masters Programme in Social Work and is converted to an independent Masters Degree Programme.
1967	Doctoral Programme was introduced.
1978	Social Welfare Administration as a specialisation is introduced.

*Source:* Tata Central Archives, Pune.

In a span of 80 years, social work profession has spread and gained popularity across the country. From a profession that was initially shaped and influenced by American social work, it has grown as a profession that encompasses growth of several thematic areas of practice and knowledge, and indigenous knowledge development. Thus, Indian social work has come a long way despite facing many structural and diversity challenges. Social work education in India is today recognised as a moral and practical activity (Jaswal & Pandya, 2015) and it creates a knowledge base of realities of vulnerabilities, oppression and injustice vis-à-vis poverty, gender, caste, religion, ethnicity, development, conflict, and environment.

Social work research was introduced in India in 1967 with the introduction of the doctoral programme at the Tata Institute of Social Sciences (TISS). Since its inception, the Doctor of Philosophy programme has undergone three major changes, which can be seen through three distinct phases in the nearly fifty-year (1967-2014) time span of the programme at the institute. These are a) Inception/ Initial phase (1967-1979) that prioritised the state and non-state institutions and welfare activities; b) the Expansion phase (1980-2005) that continued the trend of the inception phase as well as showed advent of non-institutional and public issues; and c) the Post Restructuring phase (2006-2014) that focused on creating and promoting development or improvement of various sections of population rather than focusing only on peripheral groups. Social work research in TISS is a complex and multi-dimensional phenomenon where knowledge, perspectives and practices are often interlinked and compared. It encompasses a broad spectrum and types of research.

Tata Institute of Social Sciences underwent a major restructuring in the year 2006 under the leadership of its Director, Prof. Parasuraman. Although TISS started as a School of Social Work, it expanded into health systems studies, media and cultural studies, development studies, management and labour studies and gave emphasis to social research. It offered PhD in social work, social sciences, media and cultural studies, development studies, health system studies, and management and labour studies. Entering its 79th year in 2015, the Tata Institute of Social Sciences has ten Schools at present, namely, the School of Education (three Centres), School of Development Studies (six Centres), School of Habitat Studies (four Centres), School of Health Systems Studies (four Centres), School of Law, Rights and Constitutional Governance (two Centres), School of Management and Labour Studies (five Centres), School of Media and Cultural Studies (three Centres), School of Rural Development, School of Social Work (eight Centres) and School of Vocational Education, and is continuously expanding its PhD programme. Below are the three phases of PhD programme in TISS.

## 1.1 Social Work Research- A Brief Literature Review

The review of doctoral dissertations has been carried out by many authors (Stock 1987, 1988; Gubi et.al 2003; Lekwa and Ysseldyke 2010; Horton and Hawkins 2010) across the globe on aspects such as logistics and supply chain management and school psychology. There were also a few reviews of social work dissertations (Fisher 1981; Dellgran and Hojer 2001; Gibbs 2001; Lyons 2002, 2003; Maynard, Vaughn and Sarteschi 2014) carried out to examine nature, characteristics and trends of social work research. Social work research is a complex and multi-dimensional phenomenon where knowledge, perspectives and practices are often interlinked and compared. It must be viewed as an ongoing exploration, description, analysis, critique and explanation of social work practice, theories, knowledge, relationships, and systems and their impact on the lives of service users, by both researchers and participants (Gibbs 2001).

A few studies (for example, Gibbs 2001) explored the changing nature, including epistemology and practice and the critical influence of the wider economic, political, theoretical, and practice changes occurring to social work itself. Positivist-empiricist and heuristic epistemologies were found to dominate the literature on social work research. But other studies (Dellgran and Hojer 2001) observed that the methodological positions of the dissertations and theses were dominated by qualitative methods. Studies such as (Gibbs 2001) also observed that the focus of social work research has evolved from large-scale descriptive and policy-oriented research to applied practice based research which has qualitative and quantitative elements

Dellgran and Hojer (2001) analysed PhD dissertations in social work between 1980 and 1998, and theses written by Bachelors and Master's level during 1977-97 to describe profiles of topics, research methods, use of theory and to discuss important factors behind the patterns. They found out that both the dissertations and theses addressed a wide range of social problems and interventions. Sociological theories have been most useful in answering the research questions and the dissertations showed a great deal of theoretical pluralism. Horton and Hawkins (2010) examined 252 dissertation abstracts to determine if social work doctoral programs are currently successful in encouraging their doctoral candidates to engage in intervention research. The authors found out that only 13.49 % of the abstracts focused on social work intervention indicating a need for a paradigm shift in social work education and practice.

The above studies of social work research have provided insights on changing nature of social work research, topics, methodological positions, and intervention. However, since the change in nature of social work research is not universal or linear, it is needed to examine the change or developments in different contexts. Besides, the profiles of the topics and the contribution of the doctoral works were not examined well. Dellgran and Hojer (2001) observed that some topics have been treated than others and the interest in social problems and phenomena was quite extensive. The authors had examined only the frequency of the topics and their interest rather than investigating the nature or the change in the type of the topics. In relation to social work intervention aspect, Horton and Hawkins (2010) examined the abstracts and observed that a very few social work dissertations focused on intervention. The study could be investigated in a more comprehensive manner by studying not only the abstracts but the dissertation as a whole, and by examining the capacity of the dissertation in knowledge building and interventions.

Contribution to theory building, focus on social work implications, values and ethical considerations of the theses, and contribution to policy planning and implementation are some of the issues that have

been overlooked by the existing literature. It is observed that there is a need to examine the nature of social work research and the change in the same in relation to the contextual changes. It is also important to examine how social work research is contributing to theory building, policy making, social work education and practice and knowledge development as a whole.

## **1.2 Phases of PhD Programme in TISS**

The Doctor of Philosophy programme in the Tata Institute of Social Sciences have undergone three major phases since its inception in 1967. The nearly fifty-year time span of the PhD programme is divided into the Inception/ Initial phase (1967-1979), the Expansion phase (1980-2005) and the Post Restructuring phase (2006-2014). These phases are divided based on the years when the review committees of TISS assessed the structure and functioning of MPhil/PhD programmes in the institute.

- a) The Inception/ Initial phase (1967-1979): In this phase, scholars selected for admission to the PhD programme worked under the supervision of a guide. All candidates enrolled for the programme have undergone a one-year certificate coursework for a Research Methodology paper and a Statistics paper. The candidates were encouraged to attend seminars conducted by the institute.

At the completion of the one-year certificate-coursework programme, the candidates were asked to study different areas of their interest and submit nine theoretical papers in three areas of their interest. The nine papers were adjudicated by two examiners from outside the institute. These examiners were appointed by the Director from a panel of examiners, proposed by the guide and approved by the Board of Research Studies. If both the examiners appointed to adjudicate the thesis unanimously recommended that the papers be accepted for the award of the pre-doctoral degree, the candidates were asked to defend each paper at an open viva voce examination. The viva voce examinations were held for each paper, that is, nine viva voce examinations for nine papers. After successfully completing the viva, the candidates were awarded the pre-doctoral certificate. Only those candidates who were awarded the pre-doctoral certificate and who were found by the Board of Research Studies to be eligible were asked to submit the PhD thesis. The PhD examination was held in a similar viva voce examination which was held for the nine papers.

- b) The Expansion phase (1980-2005): In this phase, the candidates were asked to study different areas of their interest and submit six theoretical papers. The social work scholars were asked to introduce intervention in their field of study, as part of Social Work Practicum. They were asked to study the change and report the same to the institute by writing papers. The papers were adjudicated by two examiners from outside the institute. These examiners were appointed by the Director from a panel of examiners proposed by the guide and approved by the Board of Research Studies. If both the examiners appointed to adjudicate the papers unanimously recommended that the papers be accepted for the award of the pre-doctoral degree, the candidate was asked to defend each paper at an open viva voce examination. The candidates who are awarded the pre-doctoral certificate and who are found by the Board of Research Studies to be eligible were asked to submit the PhD thesis.
- c) The Post-Restructuring Phase (2006-2014): The third review of the structure and functioning of MPhil and PhD programme by a committee, in the Institute was held in October, 2005. In this phase, an integrated MPhil-PhD programme was introduced, with provision for MPhil as a

terminal degree for those who successfully complete that programme and are either not desirous of pursuing the PhD programme or who are found to be inadequate in terms of their ability and aptitude for pursuing PhD programme. All candidates enrolled for the programme had to undergo a full-time MPhil taught programme. Only those candidates who successfully completed this programme and were found by the Admissions and Monitoring Committee (AMC) to be eligible for pursuing the PhD programme were registered for the same.

A scholar selected for admission into the PhD programme should work under the supervision of a guide or a guide and a co-guide. The scholar is allowed to choose the topic of his/her research in consultation with the guide (and co-guide in case there was one). The candidate had to present the research proposal at a seminar. The scholar is required to submit through his/her guide the report of progress in his/her research work. Within three years from the date of registration for the PhD programme, the scholar was required to submit to the Chairperson, AMC, the thesis embodying the results of his/her research work. However, on the recommendation of the Doctoral Advisory Committee (DAC), the AMC might grant an extension of one year to those candidates who requested for the same.

At least six months before submission of thesis, the candidate was required to submit through his/her guide the final title and synopsis of the thesis and make a seminar presentation on the major findings of the study. The guide along with the DAC members attend the seminar and the DAC forwards the synopsis to the Chairperson, AMC for necessary administrative action.

The thesis was adjudicated by two examiners from outside the institute. These examiners were appointed by the Director from a panel of examiners proposed by the guide and approved by the DAC. The DAC ensures that the examiners who were empanelled have specialist knowledge in the field of specialisation to which the thesis purports to make contribution. If both the examiners appointed to adjudicate the thesis unanimously recommended that the thesis be accepted for the award of the degree, the candidate was asked to defend his/her thesis at an open viva voce examination. The viva voce examination was convened by the Chairperson, AMC and conducted by the two examiners who have adjudicated the thesis. If both the examiners reject the thesis, the candidate was deemed to have failed.

The restructuring process in 2006 led to a major expansion in the doctoral programme which grew both qualitatively and quantitatively. Having completed more than fifty years of PhD programmes, within which the last ten years saw an even greater diversity in the doctoral research being conducted, it would be interesting to review the nature of doctoral work done in the last five decades. Social work, as an important applied social science discipline, and a professional programme had been understanding and reflecting upon situations with its social science knowledge base and methodology (Sheppard 1995). This understanding and reflection is achieved by conducting research. In the past, social research was used for making a community being aware of its needs, problems and material resources, mobilising a critical protest against the existing social situation and utilizing to serve as the basis for social policies and programmes (Kulkarni 1964). In the light of this understanding, a brief literature review has been carried out to give an overview of the studies on doctoral theses by other universities/institutes across the globe.

The paper is divided into four sections. The first section introduced social work research in TISS, second section presents the objectives of the study and methodology adopted, the third section presents the key findings of the study and the fourth section discusses the findings and arrives at conclusions.

## SECTION II

### 2. OBJECTIVES AND METHODOLOGY

Introduction of doctoral studies in social work and social sciences in TISS was an important development that took place in 1967. Social research has been a significant area in which TISS has contributed over the past many decades and the institute has produced eminent educators, researchers and practitioners in the field of social work and social sciences. Social work research have made efforts to link knowledge, theories and practices based on the complexity of Indian social problems. Research in TISS can be viewed as a combination of reflections of the interests of the research scholars and expertise of the guide and doctoral advisory committee (DAC). Hence, a systematic analysis of the social work doctoral theses produced in TISS can help in understanding the nature and contribution of research undertaken by research scholars from 1967 until 2014. The analysis would also help in filling the gaps identified in the review of literature.

The objectives of this research project were:

- a) To explore the nature of the social work doctoral theses with regard to the subject areas and how they changed over the years,
- b) To locate the changes in subject areas and findings based on the contextual changes (macro changes) that have taken place during that period in India,
- c) To explore the policy relevance of doctoral works produced in TISS and
- d) To carry out a comparative analysis of the PhD theses submitted during the three phases, i.e. in the Initial (1967-1979), the Expansion (1980-2005) and the Post Re-structural (2006-2014).

In TISS, more than 200 theses are awarded by School of Social Work, Social Sciences, Management and Labour Studies, Lifelong Learning and Health Systems Studies in between 1964 and 2014. To review social work doctoral theses, all sixty eight social work doctoral theses awarded by the School of Social Work, Tata Institute of Social Sciences since 1967 were selected for the study. The study was conducted in 2014 and hence, examined the theses which were submitted until May, 2014. Five theses could not be examined due to corrupted/non-availability of the files.

A review matrix that details the names of the author, the guide, title of the thesis, year of enrolment and award, domain of the study, rationale, objectives, theoretical framework, methodology, key findings and contribution of the said study was prepared. The matrix reviewed how the nature of research in the field of social work has changed overtime from 1970's to 2014. The matrix, was then, analysed to understand the key trends regarding topics, dominant methodologies, policy relevance and comparative analysis of the theses submitted during the three phases of the PhD programme in the light of restructuring process at TISS.

## SECTION III

### 3. KEY FINDINGS-ANALYSIS OF DOCTORAL WORKS IN THE THREE PHASES OF PHD PROGRAMME

The section presents the key findings under four sub-headings namely, nature of social work doctoral theses and how they changed over the years; locating the changes in subject areas; policy relevance of the doctoral works; and comparative analysis of the doctoral works in the Inception/Initial phase, Expansion phase and the Post-Restructuring phase.

#### 3.1 Nature of social work doctoral theses and how they changed over the years.

The change in nature of social work doctoral theses from the Initial and Expansion phase to the Post-Restructuring phase is examined in this section. In a time span of nearly fifty years, social work scholars at TISS conducted research covering a variety of subject areas. Table 2, Table 3 and Table 4 shows the subject areas undertaken during the three phases.

The School of Social Work awarded seven PhDs in the Initial Phase (1967-1979), thirty-two in the Expansion phase (1980-2005) and twenty-nine in the Post-Restructuring phase (2006-2014). During these three phases, social work doctoral theses contributed twenty-nine subject areas that encompassed broad parameters and spectrum. The subject areas of doctoral theses in TISS included planning, services, programme, management, perceptions, support systems, politics, development and experiences, investigated in different settings that ranges from rural and urban settings to medical and correctional settings, and from voluntary and government settings to educational and custodial settings. The broad spectrum in social work research could be linked to India's ancient and modern aspects of socio-cultural ethos and political history such as caste-based social hierarchy, experience of colonisation, independence movement, the birth of a new nation, its cultural and linguistic diversity and presence of voluntary social work since ancient times (Kuruvilla 2005). The selection of subject areas by the researchers was influenced by this complexity and diversity in socio-cultural ethos and political history. With the change in India's social, economic, political, cultural conditions and other developments, the nature of the subject areas also changed accordingly. Besides, significant developments that took place in TISS also contributed to the changing nature of subject areas of doctoral works.

**Table 2: Subject Areas of the Social Work Theses during the Initial Phase (1967-1979).**

<b>Subject Areas and Titles of the Studies</b>	
<b>Mental Health</b>	<ul style="list-style-type: none"> <li>• Study on Epileptic Adolescents to identify the Psycho-Social Factors associated with Epilepsy and to identify the Need for Programmes that would contribute to the Adjustment of Adolescent Epilepsy Patients (1975)</li> <li>• Study on the Role of Non-Professionals in the treatment of the Mentally Ill in Mental Hospitals (1979).</li> </ul>
<b>Social Welfare</b>	<ul style="list-style-type: none"> <li>• Study on Current Trends in Operational Planning for Social Welfare (1978).</li> </ul>
<b>Management</b>	<ul style="list-style-type: none"> <li>• Management Process in Voluntary Social Welfare Organisations (1978).</li> </ul>
<b>Social Work Education</b>	<ul style="list-style-type: none"> <li>• Study on the Situation concerning Field Instruction in Post-Graduate Social Work Education in India (1979).</li> </ul>
<b>Health</b>	<ul style="list-style-type: none"> <li>• Study on Health Needs and Services through Professionals (doctors) in Urban and Rural Areas in Maharashtra (1979).</li> <li>• Study on utilization of Health Services in a Metropolitan City (1979).</li> </ul>

**3.1.1 Social Work Theses in the Initial Phase:** In 1970s, that is, in the Initial phase, the subject areas of doctoral works included mental health, health, social welfare, management and social work education that focused mainly on provision of services and programmes. All the seven theses (see Table 2) awarded in 1970s focused on programmes, planning, procedures of institutions and utilization of services. Problems due to unmet needs of people associated with institutions and problems in the delivery of services were emphasised. Herlekar (1964) also observed that different themes of research in social work in India were broadly on needs and services, social welfare administration, evaluative studies or on results of services. Studies on field instruction in post-graduate social work education in India, social adjustment of epileptic adolescents, rural and urban health needs and services, current trends in operational planning for social welfare, role of non-professionals in the treatment of people with mental illness, management process in voluntary organisations, and health services received from different health centres by different social classes to meet their health needs were conducted.

Although the subject areas encompassed different spectrums, one common nature of all the theses was that they were based on specific institutional issues. The foci of the studies were organizational structure of welfare planning; planning, programmes and procedures of schools of social work; treatment in mental hospitals; governmental services, programmes and schemes related to rural and urban health needs; utilisation pattern of health services of different social classes; and management in voluntary organisations. The main foci of the subject areas were issues related to institutions of the state and the non-state. The studies also did engage in drawing suggestions for planning and implementation of services of the institutions for improvement. Thus, the nature of subject areas in 1970s was established on institution-based problems and was institutional in nature. It can be noted that social work education was perceived as education meant for training personnel who would work in welfare agencies of the state and non-state institutions, and their envisaged role was that of professional delivery of services within institutions of the state and philanthropic organisations (Bodhi 2011). The institutional nature of the subject areas of social work research was because of the influence of this perceived meaning of social work education and assumed roles of social workers.

**3.1.2 Social Work Theses in the Expansion Phase:** The Expansion phase extended for two and a half decades from 1980 to 2005. Subject areas in the first decade that is, in 1980s, consisted of women's studies, disability Studies, mental health, management, rural/community development, criminology, health and medical social work (see Table 3). There were eleven theses submitted during this period that focused on problems of women in performing their dual roles, problems in communication with disabled children, situation of prisoners' families, management in hospitals and rural community issues, and mental health status of orphans in an orphanage, role, functions and job satisfaction of medical social workers and perception of people's participation in health programmes. These studies were either based on problems of individuals and groups or based on institutional related issues that impact the individuals associated with institutions. The studies contributed mainly to policy planning and programmes. The nature of these subject areas were either problem-centered or institutional-centred and fairly similar to the nature of subject areas during the first phase.

**Table 3: Subject Areas of the Social Work Theses during the Expansion Phase (1980-2005).**

<b>Subject Areas and Titles of the Studies</b>	
<b>Women's Studies</b>	Study on the Social Background that characterizes the Women-members of Zilla parishad and Panchayat Samitis (1981).
	Study on Women Employees at the Mantralaya to identify both, the stresses and tensions under which women function in their dual roles as Earners and Home-makers (1984).
<b>Management</b>	Management of Indiscipline among Industrial Workers-Study in a Food Processing Factory (1984).
	Study on Power Structure and Management of Rural Community issues in two Karnataka Villages (1985).
	Study on Doctors' Perception of Management issues in a Public Hospital (1989).
	Study on Job Satisfaction of Staff Nurses in Medium-Sized Private and Public Hospitals (2000).
<b>Rural Development</b>	Rural Elites in Bangladesh: Modernity Levels and Development Orientation (1984).
<b>Disability Studies</b>	Study on Communication between the Deaf Child and his Family (1985).
<b>Mental Health</b>	Study on the Mental Health Status of Children in Orphanages (1985).
	Study of Familial and Non-Familial Influences on Aggression among Adolescents (1992).
	Study on Psychiatric Patients and their Social Networks (1993).
	Study on Primary- Caregivers on coping with Schizophrenia in the Family (1995).
<b>Criminology</b>	Study on Situation of Families of Prisoners (1988).
	Study on the Remand and Under Trial Experiences of Women Prisoners (1990).
<b>Health</b>	Study on Perception of People's Participation in Health Programmes in a Voluntary Agency (1989).
	Political and Cultural Context of Primary Health Care Implementation (1992).
	Study on Modernity among Mothers on Child Health (1996).
	Medical Social Work
	Study of Medical Social Workers, their Perception, Characteristics, Role and Job Satisfaction (1989).
<b>Social Legislation</b>	Study on the Influences of the Minimum Wages Act 1948 on the Working Conditions of the Agricultural Labourers (1990).

<b>Subject Areas and Titles of the Studies</b>	
<b>Resource Mobilisation</b>	Study on Organisational Effectiveness for Resource Mobilisation (1990).
<b>Social Legislation</b>	Study on the Influences of the Minimum Wages Act 1948 on the Working Conditions of the Agricultural Labourers (1990).
<b>Child Care</b>	Study on Residential Child Care institutions with special reference to their Organisational Characteristics (1992).
<b>Rural/Community Development</b>	Study on working of Integrated Rural Development Programme (1992).
<b>Social Work Practice</b>	Study on Social Responsibility and Social Work Practice in Industry (1993).
<b>Social Policy</b>	Formulation, Implementation and Evaluation of Social Policy in Sweden (1993).
<b>Substance Use/ Addiction</b>	Study on Approach of an Industrial Organization to combat Alcoholism (1994).
	Study on the Course of Alcoholism (1997).
	Study on the Role of Support Systems in the Pre- addiction, Addiction and Recovery Phases of Substance Use (2003).
<b>Urbanisation</b>	Urbanisation, Slums, the State and Self Help Approach (1995).
<b>Ecology and Environment</b>	A Case Study of Samaj Parivartan Samudaya on Intervention in Environmental Issues (1996).
<b>Adoption</b>	Study on the Adoption of Indian Children by American Families (1997).
<b>Resettlement and Rehabilitation</b>	Study on Socio-Economic and Political Factors determining Resettlement and Rehabilitation Outcome of Dam Displaced People (1999).
<b>Aging</b>	Study on Elderly on Successful Aging and its Determinants (2002).

The decade of 1990s showed the second highest number of doctoral works awarded in TISS (see Table 3). It consisted of eighteen theses with twelve subject areas. Mental health, health, rural development, criminology, social legislation, resource mobilisation, child care, social work practice, substance use, social policy, urbanisation, ecology and environment, adoption and resettlement and rehabilitation were the subject areas investigated during the 1990s. The focus of these subject areas were problems of women prisoners, agricultural labourers, programmes and policy related to alcoholism, families of persons living with schizophrenia, influences in aggression, outcome of resettlement and rehabilitation on displaced people, and working of integrated rural development programme. These subject areas were either problem-centered or institutional in nature. At the same time, there were also subject areas that focused on levels of community participation in resource mobilization, strategies adopted by families of persons with mental illness, knowledge on child health modernity among mothers, factors that favour or hinder the recovery process of alcoholics, social work practice and social responsibility in industry, intervention in environmental issues and socialization and bonding process by families with

adopted children. Thus, the decade had seen the advent of subject areas that were developing in nature in addition to subject areas that were problem-centered.

In 2000-2005, three theses were awarded. The subject areas covered were management, aging and substance use. The subject areas focused on job satisfaction of nurses in hospitals, successful aging and its determinants, and role of support systems in pre-addiction, addiction and recovery phases of substance use. These studies examined aspects that improve the condition of individuals who are the subjects of their studies. The developing nature of the subject areas was evident in these three theses.

**3.1.3 Social Work Theses in the Post-Restructuring Phase:** The Post Restructuring phase started with the second half of the decade of 2000s, that is, 2006-2009. Six theses were awarded during these five years and the subject areas covered were mental health, voluntary organisation, disability studies, power relations. These studies focused on parents' efforts in the development tasks of children with special needs, volunteerism, power relations in villages, promotion of child mental health, and family response to schizophrenic women. The subject areas were based on 'non-institutional issues' that emphasized on efforts in the development tasks, promotion of child mental health and coping strategies adopted by the family members. The main foci of the studies were on development, promotion and understanding. The developing nature of the subject areas evident during the first half of the decade continued in the second half too with more rigour. The ten-year time span of the 2000s constituted by end of the Expansion phase and beginning of the Post Restructuring phase, comprised a mixture of problem-centered and developing natured subject areas thereby showing a transition from problem-centered subject areas to promoting and developing natured subject areas.

In 2010s, there was an enormous increase in the number of PhDs awarded by the School of Social Work. It had the highest number of theses awarded in five years with twenty three theses covering thirteen subject areas and still counting. The subject areas were social movement, criminology, mental health, health, disaster, women's studies, administration, community development, social work education, agriculture, corporate social responsibility, social entrepreneurship and disability studies. The studies focused on social activism, the positive and negative processes that affect youth prisoners' entry and after release, reproductive and sexual health practices, disaster recovery of households, empowerment of women, benefits of school recreation, role of social work educators in developing indigenous knowledge, social value creation, experiences of breast cancer survivors, quality of life of persons living with schizophrenia, sustainable development, perspectives of community health workers and process of changes in the relationship of the women with family, workplace, and community. Very few studies focused on utilization of services and problems related to mental illness. Most of the studies examined factors, aspects, and ways to create and promote development or improvement of various sections of population rather than focusing only on peripheral groups. The nature of the studies became independent of the institutional structures and therefore, developing, promoting and non-institutional in nature.

The review of the subject areas of social work research in TISS highlighted the changing nature of the research areas from 'problem-centred' and 'service-oriented' to 'promoting' and 'developing' ones. In short, subject areas undertaken during the Initial and the Expansion phase were mainly 'problem-centred' and 'service-oriented' while the subject areas of the Post-Restructuring phase were mainly 'promoting' and 'developing' in nature. The end of the Expansion phase marked a transition period of the nature of the subject areas and a shift was observed during this period. This transition was influenced by the contextual changes that took place in TISS and in India in general (which will be discussed later in the next section).

**Table 4: Subject Areas of the Social Work Theses during the Post-Restructuring Phase (2006-2014)**

<b>Subject Areas and Titles of the Studies</b>	
<b>Subject Areas and Titles of the Studies</b>	
Disability Studies	Study on Parental Efforts in the Developmental Tasks of their Adolescents with Hearing Impairment (2006).
	Study on Perceived Benefits of School Recreation on the Development of Students with Hearing Impairment (2014).
Mental Health	Caregivers of Dementia Patients: With Reference to Stress, Coping, Social Support and Caregiver Activities (2006).
	Study on promoting Child Mental Health with families in Jamaica (2008).
	Study on Family Response to Women living with Schizophrenia (2008).
	Study on Stigma, Discrimination and Rights among Persons Living with Mental Illness (2011).
	Study on Participation in the Community and the Quality of Life of People Living with Schizophrenia (2013).
Voluntary Organisation	Study of Volunteerism in Indic faith-based Voluntary Organisations (2007).
Power Relations	Study on the Relations of Power in the Agrarian Sites of Village in a Historical Perspective (2008).
Social Movement	Study on Self-Determination movement in Manipur (2010).
	Study on Zeliangrong Movement in North East India (2014).
Criminology	Study on Youth arrested in Extortion Cases in Mumbai city (2010).
	A Study of Juvenile in Conflict with Law and Rehabilitation (2014).
Health	Study on the Psychological Experiences of Survivors with Breast Cancer (2011).
	Study on Sexual and Reproductive Health Practices (2012).
	Study on Utilization Patterns of Health Services by Widows living with HIV/AIDS (2012).
	Study on Self-Concept of children with HIV and receiving Antiretroviral Therapy (ART) (2013).
	Study on Utilization of Healthcare Services in a Conflict Situation (2013).
Disaster	Study on the disaster recovery of households in the context of vulnerability to floods in Karnataka (2012).
	Study on living with (the politics of) Floods (2014).

<b>Subject Areas and Titles of the Studies</b>	
Women's Studies	Study on migrant single women working in ITES (information technology enabled sectors) in the context of hybrid culture (2012).
	Study on informal credit Institutions and the empowerment of women (2014).
Administration	Study on the politics of land acquisition for development projects under the neoliberal regime in the country (2013).
Community Development	Study on stakeholder's perspectives of the Community Health Worker (2013)
	Social Work Education
	Paradigms of Social Work Praxis with reference to street children (2013).
	Study on Institutions of Social Work Education and the role of social work educators in developing indigenous knowledge (2013).
Agriculture	Study on Karnataka Organic Farming Policy (2014).
Corporate Social Responsibility	Study on role of Corporate Social Responsibility in Sustainable Development (2014).
Social Entrepreneurship	Study on the process of Social Value Creation in the context of social entrepreneurship (2014).
<b>Disability Studies</b>	Study on Parental Efforts in the Developmental Tasks of their Adolescents with Hearing Impairment (2006).
	Study on Perceived Benefits of School Recreation on the Development of Students with Hearing Impairment (2014).
<b>Mental Health</b>	Caregivers of Dementia Patients: With Reference to Stress, Coping, Social Support and Caregiver Activities (2006).
	Study on promoting Child Mental Health with families in Jamaica (2008).
	Study on Family Response to Women living with Schizophrenia (2008).
	Study on Stigma, Discrimination and Rights among Persons Living with Mental Illness (2011).
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<b>Social Entrepreneurship</b>	Study on the process of Social Value Creation in the context of social entrepreneurship (2014).

It will be interesting here to note that A. Desai, a protagonist in social work education in India argued in 1984 that the professional social work needs to move away from too much dependence on provision of service towards organizing people to promote change, from institutional to non-institutional programmes, from remedial to those that confront the cause of poverty, from private concerns to public issues, from research with a problem focus to one of action-oriented research (cited in Bodhi 2011). She observed the beginning of a shift in social work profession way back in 1980s but felt that it was not significant enough. Three decades later, the nature of subject areas in TISS has distinctively made the shift and entered a new phase where the nature of the subject areas is more promoting and developing or evidently, non-institutional, although traces of the old nature could still be seen in a few theses. Taking this observation forward, the next section will locate the changes in subject areas of the doctoral works in relation to the phenomenal changes that have taken place in the TISS and the country at large.

### **3.2 Locating the changes in subject areas**

This section locates the changes in subject areas of the doctoral works in TISS by identifying dominant, consistent, missing and emerging subject areas. There were twenty nine subject areas identified

altogether in the Inception/ Initial, Expansion and the Post-Restructuring phase. The Initial phase covered five subject areas, the Expansion phase had nineteen subject areas whereas the Post Restructuring phase covered fifteen subject areas. Seven subject areas were found common in all the phases. Table 5 shows the frequency and percentage of the subject areas in the Inception/ Initial Phase, Expansion Phase and the Post-Restructuring Phase.

**Table 5: Frequency and Percentage of Subject Areas in the Initial, Expansion and the Post-Restructuring Phase**

Subject Areas	Inception/ Initial Phase		Expansion Phase		Post-Restructuring Phase	
	Freq.	P.c.	Freq.	P.c.	Freq.	P.c.
Mental Health	2	28.5 %	4	12.5 %	5	17.2 %
Health	2	28.5 %	3	9.3 %	5	17.2 %
Social Welfare	1	14.2 %	-	-	-	-
Social Work Education	1	14.2 %	-	-	2	6.8 %
Women's Studies	-	-	2	6.25 %	2	6.8 %
Disability Studies	-	-	1	3.1 %	2	6.8 %
Rural/Community Dev	-	-	2	6.25 %	1	3.4 %
Criminology	-	-	2	6.25 %	2	6.8 %
Management	1	14.2%	4	12.5 %	-	-
Medical Social Work	-	-	1	3.1 %	-	-
Social Legislation	-	-	1	3.1 %	-	-
Resource Mobilization	-	-	1	3.1 %	-	-
Child Care/Welfare	-	-	1	3.1 %	-	-
Social Work Practice	-	-	1	3.1 %	-	-
Social Policy	-	-	1	3.1 %	-	-
Substance Use	-	-	3	9.3 %	-	-
Urbanisation	-	-	1	3.1 %	-	-
Ecology/Environment	-	-	1	3.1 %	-	-
Adoption	-	-	1	3.1 %	-	-
Resettlement and Rehabilitation	-	-	1	3.1 %	-	-
Aging	-	-	1	3.1 %	-	-
Power Relations	-	-	-	-	1	3.4 %
Voluntary Organisations	-	-	-	-	1	3.4 %
Social Movement	-	-	-	-	2	6.8 %
Disaster	-	-	-	-	2	6.8 %
Administration	-	-	-	-	1	3.4 %
Agriculture	-	-	-	-	1	3.4 %
Corporate Social Responsibility	-	-	-	-	1	3.4 %
Social Entrepreneurship	-	-	-	-	1	3.4 %
	Total: 7		Total: 32		Total: 29	

**3.2.1 Consistent subject areas:** The subject areas, mental health and health remained steady throughout all the phases and disability studies, women's studies, community/rural development, management, social work education and criminology had been consistently pursued in two phases. These consistent

subject areas had been integral to social work profession. The school of social work at TISS, extended into eight centres namely, the Centre for Health and Mental Health, the Centre for Criminology and Justice, Centre for Community Organisation and Development Practice, Centre for Disability Studies and Action, Centre for Equity and Justice for Children and Families, Centre for Livelihoods and Social Innovation, Centre for Social Justice and Governance, and Women Centred Social Work and these centres have been instrumental in maintaining their focus areas as the thrust areas for doctoral works. Besides, the contextual conditions in the country also encouraged equally to undertake research for understanding, questioning and examining the phenomenon that occurs in these areas.

a) Mental Health and Health are the much-sought after subject areas (see detail in dominant subject areas) due to the poor health and mental health condition of the Indian population and also due to poor medical facilities and services. Mental health constituted 28.5 % of the total number of theses in the Initial phase, 12.5 % in the Expansion phase and 17.2 % in the Post-Restructuring phase. Various domains that are associated with mental illness and mental health institutions were explored within mental health. Schizophrenia, one of the major mental illnesses with a prevalence rate of 2.3/1000 population in India (Madhav 2001), is the most studied domain in mental health.

Health constituted the subject area of 28.5 % of the total number of theses in the Initial phase, 9.3 % in the Expansion phase and 17.2 % in the Post-Restructuring phase. Utilization of healthcare services is the most studied domain in health followed by HIV related studies. Since India has a pluralistic health system and is having a wide disparity among households and communities, the progress in improving the health status of people has been slow due to the limited achievement of the state in meeting the basic needs of people. Majority of citizens have limited access to basic health services (Gill and Kavadi 1999). This situation motivated researchers to examine repeatedly the utilization of healthcare services repeatedly.

b) Hearing impairment is the only domain studied within the subject area of disability studies. Of all physical disabilities, hearing impairment is the most complex and confusing since it develops into a physical or sensory disability and can become a social, educational and vocational handicap for the afflicted individual. The All India Directory of Welfare Services for the Deaf lists 76 institutions that are able to reach and serve only a portion of the total deaf population in India (Kashyap 1985). Testing clinics were very few and almost non-existent in rural areas. Though India has a long and rich tradition of dedicated and experienced special teachers of the deaf, not much written material has been produced in this field. Thus, lack of medical facilities for the deaf and the lack of literature on them influenced investigation on hearing impairment within the subject area of disability studies.

c) Women, being a vulnerable section, are continuously the centre of discourse in India. Discourses on their vulnerability, empowerment, rights, identity, working conditions, and crimes against women had led to many academic investigations. TISS is no different in encouraging investigations related to women's political participation, dual roles, working conditions and empowerment.

d) Community and rural development have been the main focus of many poverty alleviation programmes and rural development schemes since the 1980s in India. Various schemes launched by the Ministry of Rural Development to improve rural employment, health, education, housing, livelihood, connectivity and food security had motivated scholars and academicians to develop interest in examining the structure, functioning and impacts of these programmes.

- e) Social Work education contributed 14.2 % and 6.8 % respectively in the Initial phase and the Post-Restructuring phase while the Expansion phase did not have any study on this subject area. It reflects the lack of interest or knowledge of scholars to investigate social work profession as the subject area of their doctoral works despite the fact that they are affiliated to the School of Social Work. This lack of interest or knowledge is possibly due to the situation of social work in India. In India, there is lack of uniformity in curriculum, lack of consistent and coordinated efforts to establish a national council, lack of system for accrediting social work establishments and lack of practices and licensing of social work practitioners (Ilango 2012). As such, there is very little discussion on these issues and challenges.
- f) Interest on studies on criminology were consistent in the Expansion phase (6.25 %) and the Post-Restructuring Phase (6.8 %). Although in small percentage, doctoral activity in this subject area remained constant in the two phases and this consistency in the academic interest was influenced not only by the increasing crime rates but also by having a Centre for Criminology in TISS to study these aspects. With the crime rates increasing in India, Centre for Criminology and Justice in TISS was started in as early as 1952. It promoted studies on criminology by focusing on social construction of crime, social pathology and issues of prevention and access to justice.
- g) Management remained consistent in the Inception and the Expansion phase by contributing 14.2 % and 12.5 % respectively. The functioning of organisations, institutes and social structures in community drew academic interest among research scholars. Management of formal and informal organisations emerged as a new subject area during the period when many researchers were interested in studying problems in implementation of programmes and services.

**3.2.2 Dominant Subject Areas:** Mental health and health were the dominant subject areas in the Initial and the Expansion phases. The introduction of medical and psychiatric social work in TISS as early as 1949 had a major influence on the scholars to undertake their doctoral works in health and mental health. Furthermore, the professional ideas and necessity that cropped up in 1970s for making mental health as an integral part of the total health programme (Murthy 2014) and setting up of the National Mental Health Programme (NMHP) in India in 1982 had possibly influenced the interest of the research scholars and their advisors equally. The studies attempted to examine the institution-related variables in the treatment of person with mental illness. The focus was mainly on the functioning and functionalities of mental health institutions.

On the other hand, public health remained a low priority in India's successive five-year plans resulting in the slow and inadequate improvement in health of the population in between 1950s and 1970s. Even after the expansion of healthcare infrastructure due to setting up of the National Health Policy in 1982-83, healthcare services remained grossly underutilized (National Coordination Committee 2006). As a result, health became the focus of professional talks, ideas and planning. The research scholars in TISS also contributed to the discourses by examining the health programmes and services. Thus, influenced by the mental health and health situations in India, mental health dominated over other subject areas by contributing 28.5 % and 12.5 % of the theses submitted respectively during the Initial and Expansion phase and health contributed 28.5 % and 9.3 % of the total theses in the Initial, and the Expansion phases respectively.

Interestingly, these two subject areas continued to dominate in the Post-restructuring phase too. The Centre for Health and Mental Health at TISS placed health within the development and rights dis-

course to understand various domains of descriptive and analytical epidemiology and social work intervention therein. Both the subject areas were broad in spectrum and the new phase has seen more diverse studies as compared to the earlier phases. Health and Mental Health constituted 17.2 % each of the total theses. HIV/AIDS and reproductive health practices are the new entrants under the subject area of Health. However, schizophrenia emerged as the new domain in mental health. This changing domain in the doctoral works in TISS could be explained by the change in the health and mental health scenario in India.

According to World Health Statistics 2010 (cited in George 2011), India is home to 23% of the tuberculosis patients, 86% of diphtheria patients, 29% of the pertussis patients, 54% of the leprosy patients, 42% of the polio victims, 55% of the malaria patients and the country also has the highest underweight children (43.5%) below the age of five years. This poor health condition of the Indian population was mainly due to the inability of the government to translate the funds into public health facilities and services. This became a major concern for many professionals, academics and service users. Consequently, the inaccessibility to health facilities and services influenced several researchers in TISS to examine the healthcare services and practices that people adopted to maintain good health. In addition, the number of HIV-infected adults and children in India in the year 2006 was 2.5 million (Pandey, Reddy and Thomas 2008) and still continuing to home 2.1 million people with HIV/AIDS at the end of 2013 (The Hindu 2014). Now, India has the third highest number of people living with HIV in the world. This dreadful scenario of HIV has emerged as one of the salient domains in health for scholarly investigation.

**3.2.3 Subject Areas that are missing in the New Phase:** Management, social welfare, medical social work, social legislation, resource mobilization, child care/welfare, urbanisation, social work practice, substance use/addictions, ecology/environment, adoption, aging, resettlement and rehabilitation, and power relations are the subject areas that are missing in the Post-restructuring phase. Although these subject areas are still relevant, doctoral works in the Post-Restructuring phase have not explored further in these areas. Although power relations is one of the rarely studied subject areas submitted in 2008, it is considered as a subject area that is missing in the new phase since the study was conducted during the 1980s and 1990s.

**3.2.4 Emerging Subject Areas:** Subject areas of social movement, disaster, voluntary organisation, administration, agriculture, corporate social responsibility and social entrepreneurship have emerged during the Post-Restructuring phase. These subject areas were studied based on circumstances or facts that surrounds a particular phenomenon, movement, event or situation in a region.

Majority of the emerging themes were investigated based on contextual conditions and changes in a particular region. Disaster studies were undertaken in 2012 and 2014 with special reference to flood politics in Dhemaji District, Assam and disaster recovery of households in three villages of Karnataka. Similarly, social movement studies undertaken in 2010 and 2014 were based on the ongoing self-determination and Zeliangrong movements in Manipur. Administration study undertaken in 2013 also remained context-specific by investigating the land acquisition politics for development projects. Study on corporate social responsibility investigated a case study of a social project in 2014 on solid waste management in Lucknow. Agriculture study (2014) was carried out in the context of Karnataka Organic Farming Policy 2004 in Dakshina Kannada. Study on voluntary organization (2007) was carried out to examine multiple nuances of the volunteerism in Indic-based voluntary organisations. The investigations were carried out based on the local and regional knowledge specific to its context. The studies under the emerging themes examined the complexity of interaction between individuals,

groups or community of a region and their environment. Context-specific realities were the main focus of the emerging themes.

**3.2.5 Missing Subject Areas in Social Work Research:** Given the rise in violence against women in India, violence/crimes against women is one important domain that is missing within the subject area of women's studies. Domains of socio-economic conditions like poverty and unemployment were also missing. Furthermore, the most important subject area which is missing is the social work practice in the new phase. Social work profession is entering its 80th year in India but the profession, as the subject area, is much less emphasised in the theses by limiting its potential to social work implications at the end of the theses. There is much on this subject area to explore, such as, curriculum, pedagogy, fieldwork, research, ethics, response to emerging realities, and linking its research and practice.

While previously studied subject areas like medical social work, child care/welfare, substance use, ecology and environment and aging are still relevant in the present context, researchers showed little or no interest in these subject areas in the new phase and hence disappeared during this period. However, the new phase has also seen emerging subject areas like social movement, disaster, voluntary organisation, administration, agriculture, corporate social responsibility and social entrepreneurship. However, in spite of this emergence of new subject areas, many significant areas of social problems were missing. Historically, social work has not seen itself as centrally involved with such matters as poverty, prostitution, family maladjustment, beggar problem, unemployment, issues of war and peace, degradation of the environment, the spread of the diseases, social phenomena such as child labour and crime, the basic plight of asylum seekers, the decline of rural areas and the range of urbanization-related problems (Kumarappa 1952 and Cox 2000). Thus, in spite of this identification by many authors in the past, these have not been tackled.

To conclude, while exploring the consistent subject areas, dominant subject areas, and missing subject areas in the new phase, emerging subject areas in social work research signify a dynamic change in the nature of subject areas of doctoral works. This change in subject areas was influenced by the contextual changes occurring in India and with more emphasis on contextual social work, researchers have undertaken investigations that are context-specific lately. The need for and importance of social work education to focus on indigenisation of social work education and practice with respect to local context had been emphasised by many. In the light of quality enhancement of Social Work Education in India, The Tata Institute of Social Sciences formed a national steering committee of social work educators in 2005 to review the status of social work education in the country. Although the process got stalled for few years, the concern it had raised had enlightened the professionals and students alike to highlight issues, challenges and strategies for enhancing quality of social work by giving importance to regional and local context.

### **3.3 Policy Relevance of the Doctoral Works**

Social work research has an important role to play in offering knowledge to policy planning and implementation for the betterment of individuals, groups and communities. There were numerous doctoral works carried out at TISS on various specialisations of social work namely, medical and psychiatric social work, family and child welfare, criminology, group work and community organisation, labour welfare and industrial relations, health and mental health, disability studies and action and social welfare administration. It is required to examine whether the doctoral works have made clear recommendations from its findings to existing programs and policies to effect change. Table 6 illustrates the policy recommendations of the doctoral works in the three phases of PhD programme at TISS.

**Table 6. Policy Recommendations of the Doctoral Works**

<b>Phases</b>	<b>Areas of Policy Recommendation</b>
Inception/Initial Phase	Mental health practice; field instructions; budget planning; health services planning and monitoring.
Expansion Phase	Planning and strategies in relation to aging, job satisfaction, dam displaced people, alcoholism, child care and health, rural development, minimum wages, hospital management, orphanages, working women, social policy, utilization of health services.
Post-Restructuring Phase	Policy planning in relation to disaster, informal credit institutions, social projects, special schools, agriculture, healthcare, crimes, mental health ; education (Social work, social entrepreneurship);

**3.3.1 Policy Relevance of Doctoral Works in the Inception/Initial Phase:** The Initial phase had seven doctoral works on mental health, social welfare, social work education and health. Out of these, six theses had provided recommendations and suggestions based on their findings on their respective areas. One thesis could not be examined due to non-availability.

In mental health research, the main concern was on disease and physical disorder. The study on social adjustment of the adolescents with epilepsy (1975) had recommended for an integrated rehabilitation programme which took into consideration medical details such as the type of epilepsy, the frequency and severity of attacks, for which a collaboration with the medical specialist treating the patient would be needed. The second study on the role of non-professionals in the treatment of the patients in mental hospitals (1979) suggested that there was ample scope for attendants to become therapeutic agents, and recommend adequate orientation for the job, and using on-going staff development methods in order that the latent potentialities might be released and effectively utilized for patient care. Both the studies made recommendations for a better care and rehabilitation of persons with mental illness. The recommendations were made for mental health policy planners to plan policies for actively involving the primary attendants (both family and hospital attendants) to take personal care of the patients.

In Social Work Education, there existed a strain in the relationship between class and field instruction and absence of methods in field instruction programmes. The study on field instruction in social work education (1979) suggested planning for field instruction that requires the involvement of persons who are directly connected with the practice of social work or else run the risk of having impressive plans without much relevance to current reality and needs. The author suggested that agency personnel and other persons active in social welfare programmes should form part of the planning group for field instruction.

The study on welfare planning in a state in India (1978) examined that the structure of the planning and budget planning unit does not provide an arrangement whereby this unit cannot draw up operational plans, though it has been assigned this function. To overcome this, the study suggested that the unit be trifurcated covering the three areas i. e, a) application of planning as a science, a tool and an art, b) training and experience in social science administration, and c) understanding of the welfare needs and related problems along with some training in research and evaluation.

Due to the wide gap in the utilisation of health services between various sections of the community, certain sections of the population were deprived of a fair share in the existing medical care facilities.

The study on differential utilization of health services in a metropolitan city (1979) suggested that the government should make arrangements for people to make use of the already available government and other public resources to the maximum extent and suggested for an integrated comprehensive health service programme for the poor to meet their health needs effectively. Another study on health needs and services in urban and rural areas of Maharashtra (1979) revealed lack of democratic processes in health service monitoring and suggested to involve the block development officer in the affairs of PHC by increasing visits to sub-centers and by checking sub-center records to improve the delivery of medical care in rural areas.

Social work research during the Initial phase was engaged in establishing policy implications based on their findings relevant to mental health policies, planning and implementation of the process of field instruction, budget planning and health policies and monitoring. All the studies provided recommendations related to public welfare in order to improve well-being of individuals and communities. The authors identified drawbacks in the planning and utilisation of mental health policies, health services, field instruction, and budget planning unit. They sought attention from the state and local government and institutions to bring change to the existing policies for the welfare of people including people living with mental illness and their caregivers, students and general population.

**3.3.2 Policy Relevance of Doctoral Works in the Expansion Phase:** The Expansion had thirty-two theses covering studies on women's studies, mental health, management, social legislation, child care/welfare, rural development, health, substance use, resettlement and rehabilitation, and aging and provided recommendations and suggestions for policies related to their respective subject areas.

The study on women-members of zilla parishads/ panchayats samitis (1981) observed that women in India were showing signs of political awakening but their progress was hindered by social handicaps such as illiteracy, cultural norms, domestic pressures, and dependency on men. It found out that women's ability to participate actively was influenced by her own educational level as well as the educational status of the family. Thus, the author suggested that educational opportunities must be made available closer to the residence of village women, and to accelerate the process of social development among them, and special facilities need to be provided to enable them effectively give expression to the potential that lies within them. Another study on women at work (1984) observed that the domestic tensions of women employees followed them even while they were at work. Some women coped by using varied strategies, for e.g. lowering expectations about work promotions, compartmentalizing their roles, etc. while others seemed on the brink or in the throes of a major conflict situation, possibly because they did not enjoy help, encouragement from the family, or because they were over-burdened with domestic responsibilities. The author suggested that workers' union can work in a variety of ways such as providing, crèches, information center for domestic servants, recreation, financial support for taking higher or technical education, etc. It can bargain with the management for the provision of rearrangements and special services for women.

The study on the mental health status of children in orphanages (1985) observed that there were multiple factors that affected the development of child during formative years. When basic needs such as emotional relationship with a parent-figure in the family were not met, their mental health was affected. To tackle children's mental health needs at the orphanage, the researcher suggested that mental health personnel should give training to the caretakers so as to enable them to deal with the children's needs and problems successfully. The study also suggested the content of the training programmes such as include knowledge on mental health needs of different age groups and types of children, identification of the emotional problems of children, and doing follow-ups.

The study on doctor's perception of management issues in a public hospital (1989) found out various aspects of hospital management functions that led to job dissatisfaction, poor working conditions, poor delivery of services, and utilization problems. To improve the hospital management, the researcher suggested training hospital administrators in organizational behavior and give a humane touch to training programmes in hospital management. Another study on job satisfaction of staff nurses in medium-sized private and public hospitals (2000) found out various determinants which affect job satisfaction of nurses and also areas of dissatisfaction. The chief area of dissatisfaction at the public hospital was having to work on a shift duty pattern; especially night shift. At the private hospital, it was shortage of needed supplies and demands from relatives of patients. Based on the findings, the study made some recommendations for improving job satisfaction of the nurses as follows a) public hospital: management of the hospital to interact with the nurses and to make every effort to examine the workload of the staff nurses; b) private hospital: hospital management needs to make policies which will encourage nurses to stay, and initiate systematic induction and orientation training for new entrants.

Lack of awareness about welfare schemes and legal provisions, absence of political power, unorganized nature, and low social status were found to be inhibiting the agricultural labourers to participate in the development programmes, as observed by the study on Influences of social legislation on the working conditions of agricultural labourers (1990). The author thus, recommended that the change agents, be it voluntary or governmental, ought to have multifarious programmes like imparting knowledge of the Wages Acts, creating alternative supporting system to make the labourers independent, providing income, organizing unions and persuading the labourers to become its members, and initiating them to organize efforts to attain their rights. Imparting knowledge of the social legislations should be preceded by creating an atmosphere of confidence and faith in the minds of rural labourers.

The study on residential child care institutions in Kerala (1992) observed that the residential child care institutions were highly formalised and centralised structures through well-defined work procedures, rule observation, and closeness of supervision. Supervisors and house parents had minimum opportunities and freedom in decision making with regard to long range administrative issues. The author suggested non-formalisation and decentralisation of the organisational structure to permit scope for family atmosphere. Revamping was suggested to foster an informal atmosphere with regard a to large number of children, and the large physical structure of the organisations.

Although the integrated approaches to rural development was seen as a panacea to solve all the problems of the rural people and areas, the study on rural development (1992) found out that seventy percent of families of the studied population did not know anything about the Integrated Rural Development Programme (IRDP) programme and have not made use of any schemes under it. Therefore, the study recommended steps in policy planning of IRDP to provide education about the programme and the opportunities available under this especially to the deserving people, to make them use of such programmes while implementing them.

The main cause of low health status of infants and children under five years of age in India was due to dearth of knowledge, attitude and practices of mothers with reference to various aspects/dimensions of child health, as observed by the study on child health modernity (1996). The study found out that there was a need for enhancement of child health modernity of mothers to improve health status of under-five children. The study recommended universal primary education, and adult education/non-formal education to assimilate child health knowledge from different sources; low cost nutrition programmes, and enlisting and training of community health volunteers so that they can work as an effective link between people, the government and the NGOs operating in the field of child health.

The study on the course of alcoholism (1997) reported that a yawning gap was evident in knowledge with regard to determinants of alcoholism recovery in the event of contact with treatment. For effective treatment and rehabilitation, the author recommended different steps like a) client motivation: Dealing with ambivalence to reinforce the thrust towards health and well-being is a central goal of treatment. Motivational strategies include de-emphasis on labelling, removal of significant barriers to change, increasing dissonance, the use of principle of self-determination, use of external contingencies and clear goal setting. b) formulation of Treatment Policy: Diagnosis and management of alcohol problem needs clarifying treatment goals, the distinction between primary and secondary alcoholism, and the need for caution in prescribing drugs since alcoholics have a tendency to abuse and get addicted.

The study on resettlement and rehabilitation outcome of dam displaced people (1999), had shown that the projects have not taken consideration of the problems of displaced people while planning. This adversely affected the social, economic and political conditions of the displaced people, particularly those from the weaker section. The author by emphasizing on the problems of displaced people, sought attention to include expected consequences of the dam projects while planning policies.

The study on successful aging and its determinants (2002) found out the main determinants of successful aging as age, marital status, type of family, educational attainment, work and health status, involvement in family activities, and awareness of support systems. For successful aging, the researcher recommended development programmes that aim at lifelong preparation for old age to help individuals take initiatives in their younger years to maintain good health, save money, and manages their finances wisely and create social networks so as to lead a contented life.

The recommendations and suggestions made by the authors in the Expansion phase involved creating awareness, providing opportunities and training and welfare of the staff of institutions. Although the main aim of the recommendations was welfare for the people, the foci of the studies were specific and aimed at improving educational opportunities and special services for women, creating awareness about government schemes and Acts and involving lower staffs in management and so on. Majority of the studies provided recommendations that aimed at specific sections of people who required awareness, opportunities, participation, and preparation for their own welfare rather than aiming at the governance of the institutions and programmes.

**3.3.3 Policy Relevance of Doctoral Works in the Post-Restructuring Phase:** During the Post-Restructuring phase, twenty-nine theses were awarded PhDs and studies on mental health, disaster, health, agriculture, corporate social responsibility and women's studies provided recommendations and suggestions for effective policy planning and implementation.

Study on promotion of child mental health in Jamaica (2008) indicated that single-parent female-headed families, absent fathers, parental migration and separation, adolescent parents and violence within the family and communities create not so conducive environments for nurturing children's mental health. Risks for child mental health in Jamaica emerged across contexts with violence, poverty, materialism, etc. For a better promotion of child mental health, the author suggested that a) stakeholders in conjunction with communities, families and children need to advocate and lobby for their space in the policy agenda. Policy needs to be guided by research in order that it addresses the existing concerns, and b) it is important for the policy makers to address realities that the social contexts impose on parenting.

Study on disaster recovery in Karnataka (2012) found that the social vulnerability seen in the post-flood situation was mirroring the social structures in the pre-flood phase where one's caste, gender and

landholding determined access to resources because of the power structures in the village. The pre-existing vulnerability continued even when disaster took place. Therefore, the author suggested to identify the power relations between the key stakeholders for factoring the power dynamics of the disaster context to help to plan for interventions for effective recovery of households. Another study on living with floods in Assam (2014) identified two major gaps in policy planning for flood management, that is, isolation of indigenous knowledge and opinions of local community in flood management that is critical to development since they lived with nature at its closest forms. Second gap is the indifference of the government in addressing the issue of floods. The loss of humans, flora and fauna was not taken seriously which would have to major catastrophe. In order to tackle the problem, the author suggested to understand floods as a governance issue with ramifications on ecology as well as the socio-economic and political aspects of the state.

The study on utilization patterns of health services by widows living with HIV/AIDS in Manipur (2012) found out the weaknesses of planning, financing and evaluation in providing support to widows living with HIV/AIDS in Manipur. Non-availability of ART facilities in some areas, lack of access to counselling, absence of infrastructure, health professionals, and other support services were some of the weaknesses in healthcare delivery services. The researcher suggested incorporation of opinions and services of the government officials, social workers, counsellors and members of HIV positive person's networks to improve health services. Another study on self concept of children receiving ART (2013) recommended to include child-centered services in policy planning especially that of counselling with a focus on issues pertaining to body image disturbances occurring among these children as a result of delayed physical development and also as a side effect of ART; also the issues related to their social and psychological self.

Study on Karnataka's organic farming policy (2014) observed that although the state government introduced value additional programmes such as honeybee farming, and animal husbandry, it did not pass any policy or programmes within the honeybee sector which would be beneficial to the organic farmers. The study suggested to include farmer's perspectives and their way of farming in the planning of organic farming policies which will benefit the farmers.

The study on role of corporate social responsibility in sustainable development (2014) explored various systems and processes that have contributed to accomplish the goal of sustainability in long run. The author recommended steps for policy planning for social projects. The project must design systems for every minor and major activity in it for its operational sustainability so that even when the people handling the project change, the project would continue to operate on the basis of systems, independent of any individual. Further, it was recommended that for institutional sustainability, the capacity building of the team handling the project and community mobilization should be an integral parts of the project so as to ensure that after the NGO's withdrawal, the community must be able to take the project ahead and instead of push, the pull factor from the community runs the project. Also the project must involve all important stakeholders from the beginning of the project and for financial sustainability of the project, systems for generating funds may be designed for revenue stabilisation.

The study on informal credit institutions and the empowerment of women (2014) found out the potential of an indigenous informal credit institution to become a viable and sustainable tool of women empowerment and their financial inclusion. The researcher suggested that the institution can be a catalyst in enhancing women participation in the financial development with efforts from government and local institutions.

The recommendations and suggestions made by the authors in the Post-Restructuring phase involved promotion of child mental health, indigenous knowledge, planning interventions, improving child-centered services and coordination of institutions that worked on similar issues. Majority of the recommendations made aimed at planning policies that address the realities and social context where the phenomenon occurred while a few recommendations were aimed at modifying policy planning with regard to services and programmes.

The doctoral works produced in TISS during the Inception/ Initial, Expansion and the Post-Restructuring phase had insightful suggestions and recommendations based on findings of the studies. While some studies arrived at their recommendations from the theoretical developments, others arrived at the suggestions from drawbacks identified during analysis. The recommendations made during the Initial phase contributed to the act of governing. The studies suggested steps related to public welfare and sought attention from the state and local government and institutions to bring change in the existing policies for improving the well-being of individuals and communities. Unlike during the Initial Phase, the recommendations made by the studies in Expansion phase aimed at specific sections of people who needed awareness, opportunities, participation and preparation for their own benefits rather than aiming at the governance of institutions and programmes. In the Post-Restructuring phase, the studies made recommendations that aimed at addressing realities and social context of the studied phenomenon while planning policies. The three phases contributed different recommendations in relation to the existing policies. Thus, the recommendations of social work research in TISS highlighted the positioning of the policies responsively to India's reality.

### 3.4 Comparative Analysis of the doctoral works in the Initial, Expansion and the Post-Restructuring Phase.

Doctoral works produced in TISS, influenced by education and contextual conditions, exhibited different patterns of methodology, ethical considerations, focus on social work implications and contributions to knowledge building. Table 7 highlights these aspects as indicated during the Inception/Initial, Expansion and Post-Restructuring phases.

**Table 7: Comparative Analysis of the PhD theses in the Inception/Initial phase (1964-1979), the Expansion phase (1980-2005) and the Post Re-structuring phase (2006-2014).**

Particulars	Inception/Initial Phase	Expansion Phase	Post-Restructuring Phase
Methodology	Mainly Quantitative (5 Quantitative 1 Qualitative)		
Ethical Considerations	Not emphasised	Not emphasised	Majority of the studies (24 out of 29) had taken ethical decisions before and after entering the field.
Focus on Social Work Implications	Not emphasised.	Half of the studies (16 out of 32) had social work implications.	Nearly half of the studies (14 out of 29) had social work implications.
Contribution to Theory Building	Not emphasised.	Only one thesis engaged in theory building	Nearly half of the studies engaged in theory building (12 out of 29).

Particulars	Inception/Initial Phase	Expansion Phase	Post-Restructuring Phase
Contribution to Policy Planning and others.	Mental health practice; field instructions; budget planning; integrated rehabilitation programme.	Planning and strategies in relation to aging, job satisfaction, dam displaced people, alcoholism, child care and health, rural development, resource mobilisation, minimum wages, hospital management, orphanages, working women, social policy, utilization of health services.	Policy planning in relation to disaster, informal credit institutions, social projects, special schools, agriculture, health-care, crimes, mental health ; Education (Social work, social entrepreneurship);

**3.4.1 Methodology of the Doctoral Works:** Quantitative and Qualitative are the two main methodological approaches adopted by researchers in social work research. “Historically, social work, like the various social science disciplines, has relied on structured, pre-determined research designs, which are today classified as belonging to the ‘quantitative methodology of research” (Mahtani 2004: 52). However, over the past four decades, non-positivist constructivist epistemologies (qualitative methodology) have taken strong roots in social science research (Nakkeeran 2006). While quantitative methodology tends to view social reality as external to social actors viewing it as the object of the study, qualitative methodology discovers the processes, by which social actors perceive, give meaning to and enact social phenomena (Mahtani 2004). In addition to quantitative or qualitative approaches, researchers also utilized mixed methods research by combining these two methodologies. Researchers choose their methodology in accordance with the ways they look at social reality. The methodology cell in the above table illustrated the methodology adopted by the social work researchers in three different phases of the PhD programme. The Inception/Initial phase (1964-1979) was dominated by the quantitative methodology, the Expansion phase by quantitative methodology again and the Post Restructuring phase by qualitative methodology (see Table 8).

- a) Research methodology in the Inception/Initial phase (1964-1979): The research methodology of the doctoral theses in the Inception/Initial phase (1964-1979) was dominated by quantitative methodology over qualitative methodology. Five out of seven theses adopted quantitative methodology. The main purposes of the theses were to discover new facts, to gather data and to provide a factual descriptive picture of the situation, problems and their incidence. Majority of them were descriptive in nature. “Quantitative-descriptive studies are defined as those studies having as their purpose, through the systematic collection of data from populations, programs, or samples of populations or programs, simple delineation or assessment of characteristics of phenomena, evaluation, or isolation of key variables” (Weinberger and Tripodi 1969: 441). Describing characteristics of population, seeking variable relations, testing hypothesis and studying of impacts were the main objectives of the theses during this period.

The theses used probability sampling methods that included random, stratified random, quota and disproportionate sampling to select the respondents of the studies. The researchers used these sampling methods to identify representative samples from a larger population (or programs) and from whom they could collect data that generalize the characteristics of the population. Researchers employed such sampling methods to claim representativeness and contain a relatively large number of variables (Weinberger and Tripodi 1969). Since these sampling

methods provided the most valid and credible results for describing the characteristics of the population, researchers who adopted quantitative methodology used these sampling methods.

Quantitative research methodology calls for methods which can be used to collect information systematically and in an orderly manner. The researchers used structured interviews consisting of interview schedules and questionnaires to collect information from the respondents. These methods tend to be more number-driven when the researcher wishes to know how often or how much of a phenomenon is present (Stanley 2004). These methods helped the researchers to achieve their goal of testing hypothesis, describing variables and their interrelationships. Descriptive analysis was the main data analysis carried out by the researchers.

Only one thesis adopted qualitative methodology during the Inception phase. Exploring trends in welfare planning was the main objective of the study. The study used individual interviews, group interviews and participant observation to collect information from the participants.

**Table 8. Methodology of the Doctoral Works**

Phase	Approach	Sampling	Methods	Analysis
Inception/ Initial Phase	Mainly Quantitative	<b>Probability sampling:</b> Random; stratified random; quota; disproportionate sampling.	<b>Quantitative methods</b> Structured Interviews. <b>Qualitative methods</b> Individual and group interviews and participant observation.	<b>Quantitative Analysis:</b> Descriptive Analysis.
Expansion Phase	Mainly Quantitative	<b>Probability sampling:</b> Stratified random; random; cluster; stratified random; systematic; quota sampling; multi-staged stratified. <b>Sampling used in Mixed Methods Research:</b> Cluster sampling, stratified random sampling <b>Non-Probability Sampling:</b> Purposive.	<b>Quantitative methods:</b> Structured interviews (questionnaire, interview schedules, household schedule); survey. <b>Methods used in Mixed Methods Research:</b> Interviews (key person, FGDs, households); direct observation, participant observation; unstructured interviews; household schedule. <b>Qualitative methods:</b> Unstructured interviews; case study; non-participant observation; Focus group interviews; participant observation.	<b>Quantitative Analysis:</b> Descriptive; discriminant analysis; survey analysis; statistical tests (chi-square, gamma, corrected contingency coefficient). <b>Analysis in Mixed Methods Research:</b> Descriptive analysis, case study analysis. <b>Qualitative Analysis:</b> Cross case analysis; thematic analysis.

Phase	Approach	Sampling	Methods	Analysis
Post-Restructuring Phase	Mainly Qualitative	<p><b>Non-Probability Sampling:</b> Theoretical; snowball; purposive; key informant; convenience; expert sampling.</p> <p><b>Sampling used in Mixed Methods Research:</b> Purposive, key informant; simple random; systematic; convenience; theoretical.</p> <p><b>Probability sampling:</b> Simple random.</p>	<p><b>Qualitative methods</b> Unstructured interviews; oral history; observation; focus group interviews; group interviews; case studies; life history.</p> <p><b>Methods used in Mixed Methods Research:</b> In-depth interviews; questionnaires; structured interviews; observation; household survey.</p> <p><b>Quantitative methods:</b> Structured interviews; semi-structured interviews; survey.</p>	<p><b>Qualitative Analysis:</b> Thematic; content; narrative; case; comparative; cross-organisational; cross case; historiography.</p> <p><b>Analysis in Mixed Methods Research:</b> Thematic; descriptive; content.</p> <p><b>Quantitative Analysis:</b> Descriptive.</p>

b) Research methodology in the Expansion Phase: The research methodology of the doctoral theses in the Expansion Phase (1980-2005) was still dominated by quantitative methodology over qualitative and mixed methods research. Out of thirty two theses, twenty one theses adopted quantitative methodology, five adopted mixed methods research and four theses adopted qualitative methodology. Two theses could not be examined due to non-availability. The main purposes of the quantitative research were similar to that of the quantitative research in the Initial phase, i.e, to discover new facts, to gather data and to provide a factual descriptive picture of the situation, and problems. The theses aimed at describing characteristics of population, seeking variable relations, testing hypothesis and studying of impacts. Authors like Maynard et al. (2014) also reported predominant use of quantitative methods in social work research (submitted during the time span of 1998-2008) at the University of Texas.

In the Expansion phase, the researchers used varied sampling techniques to select respondents. Random, stratified random, cluster, stratified random, systematic, quota sampling and multi-staged stratified sampling methods were used by the researchers. These probability sampling methods were used in order to produce a representative and unbiased measurement.

Methods of collecting quantitative data used by the researchers in the Expansion phase included questionnaires, interview schedules, household schedules and survey methods. The researchers had pre-determined set of questions for all the respondents to collect information systematically and in an orderly manner. Use of such structured interviews helped them to understand the frequency of a phenomenon. Analysis of the data collected through structured interviews needed steps that could find variations in the responses and explain those variations. Since the main purpose of any research using quantitative data is to find out the variations in resultant responses and try to explain these variations by reference to the characteristics of respondents, researchers can use a repertoire of statistical techniques namely, t-test, Pearson chi-square, Pearson or Spearman Rank Correlation Coefficient, Phi, regression analysis and discriminant analysis (Singh 2006). Thus, descriptive, discriminant analysis, survey analysis and various statistical tests that included chi-square, gamma, corrected contingency coefficient were used to analyse quantitative data.

Although quantitative methodology was the predominant methodology used, the Expansion phase also showed an increased use of mixed methods research and qualitative methodology. In simple terms, mixed methods research is the use of combination of quantitative and qualitative procedures or methods. In a predominantly quantitative study briefed by positivistic ontology and epistemology, one could use qualitative data to illustrate the statistical results and similarly, in a predominantly qualitative study briefed by non-positivistic ontology and epistemology, one could use quantitative data to enrich the descriptive understanding of the phenomenon (Jayaram 2006). Thus, five studies adopted mixed methods research to illustrate the statistical results and enrich the descriptive understanding of the phenomenon they were studying. The main objectives of the studies were to describe, explain or assess the population, program or phenomenon. Interviews (key person, focus group discussions, household), direct observation, participant observation, unstructured interviews and household schedule were the methods used to collect data. Descriptive analysis and case study analysis were used to analyse the data. Methodology in social work research does not limit to either qualitative or quantitative but is represented both by qualitative and quantitative paradigms. Gibbs (2001) also observed both qualitative and quantitative elements in doctoral dissertations.

Four theses adopted qualitative methodology in the Expansion phase. The objectives of the studies were to understand the process of phenomenon or contextual factors that influenced those phenomena. Purposive and systematic sampling techniques were used to identify participants. Unstructured interviews, case study, non-participant observation, focus group discussions and participant observation were used by qualitative researchers to collect information. Cross case analysis and thematic analysis were carried out to analyse the data.

- c) Research methodology in the Post-Restructuring Phase: In Post-restructuring phase, qualitative methodology was found to dominate over mixed methods research and quantitative methodology to capture multiple realities that are socially constructed by individuals from within their own contextual interpretation. Out of twenty nine theses, nineteen studies undertook qualitative research methodology, seven studies adopted mixed methods research and one study adopted quantitative research methodology. Two theses could not be examined due to lack of information. The growth of qualitative research methodology in various social science disciplines including allied field, social work (Mahtani 2004) had a late impact on social work research at TISS. Qualitative methodology started to dominate in 2000s. It might be because in social work culture, any quantification appears to limit the interpretation possibilities and reduce complex situations and multifaceted problems and the importance of the relation between social worker and the client (Camilleri 1996).

During this phase, the studies focused on small-scale research where personal experiences of a small number of participants were analysed. The motive to use qualitative methodology may be that it allows social work research to describe the phenomena in rich detail, gives meaning to multi-faceted problems and begins a process of giving a voice to recipients of social work services (Gibbs 2001). The focus of the doctoral research on context-specific realities provided the rationale behind adopting the qualitative methodology.

Theoretical, purposive and snowball sampling methods were dominantly used by the researchers to identify research participants upon saturation. The very nature of theoretical, purposive and snowball sampling methods to remain context-specific and the strength to ensure that the concepts discovered completely represent the context of the phenomenon studied (Mahtani 2004) provided the rationale for using them to identify participants.

Underpinned by the methodology used, the doctoral research showed distinct use of multiple methods across all themes. Unstructured interviews and observation were the main methods adopted to inquire about the phenomenon of context-specific realities. Other methods used were focus group discussion, group interviews, oral history and structured interviews. These methods provided rich descriptive and documentary information about a topic or phenomenon (Stanley 2004) that gave importance to the social context in which the events occur and gave emphasis to its meaning as interpreted by the participants. Use of multiple methods not only enabled the researchers to capture multiple perspectives but also established validity of the studies. Since analysis of non-standardised, open ended data calls for procedures which are in accordance with the assumptions and characteristics of qualitative methodology and which permits exploration of meaning in their context (ibid), the data analysis of the doctoral research was dominated by thematic analysis. However, researchers also used diverse methods of data analysis namely content, narrative, case, comparative, cross-organisational, cross case and historiography. These procedures of data analysis helped the researchers to disclose concepts and their complex patterns of interrelationships.

Seven studies adopted mixed methods research. The main objectives of the studies were to examine the characteristics of a population and explore or understand the factors of phenomenon that influence the population. Researchers used a combination of both probability and non-probability sampling techniques to select and identify the participants of their research. Purposive, key informant, simple random, systematic, convenience, theoretical sampling were used. They also used a combination of qualitative and quantitative methods of data collection. Structured and unstructured interviews that included in-depth interviews, questionnaires, structured schedules and household survey were employed to collect information. In addition, observation was also used. Thematic, and content analyses were carried out to analyse qualitative data and descriptive analysis was carried out to analyse quantitative data. The use of a combination of quantitative and qualitative techniques and methods enabled the researchers to illustrate their statistical results and at the same time, enrich the descriptive understanding of the phenomenon. While some studies used qualitative methods as the dominant approach, some others used quantitative method as its dominant approach while attempting to answer their research questions.

Only one thesis adopted quantitative research methodology in the Post-Restructuring phase. The main objective of the study was to draw a profile of the population and describe the impacts of the phenomenon on the population and significant others. Simple random sampling was used to select respondents of the research. Structured interviews, semi-structured interviews and survey were used to collect data and descriptive analysis was carried out to analyse the same.

The Post-Restructuring phase showed an increased use of qualitative and mixed methods research and a decline of quantitative research methodology. With the rise in qualitative methodology, focus of the studies was context-specific realities. Thus, the non-positivist epistemology that could capture the reality that is attributed to human mind and actions had been the dominant epistemological foundation of social work research lately.

**3.4.2 Ethical Considerations of the Doctoral Works:** Social work profession maintained a set of values and ethical guidelines to follow either conducting research or practicing in the field. A Declaration of Ethics for Professional Social Workers was prepared by the Social Work Educator's Forum (SWEF) of the Tata Institute of Social Sciences in Mumbai in 1997 (Fernandes and Dass 2000). Later, the Bombay Association of Trained Social Workers laid down ethical responsibilities for professional social workers

in 2002 as follows to a) carefully select the topic of research considering its possible consequences for those studied, b) not cause the respondents any physical or mental discomfort or harm, c) consider the informants of research as co-partners, d) share objectives with them and get their informed and voluntary consent, e) protect the confidentiality of the information shared by them, f) dissociate from manipulation, distortion or falsification of data or findings, g) acknowledge in their written work, the published and the unpublished materials and discussions (Desai 2004). It is needed to articulate the ethical aspects in knowledge development such as authorship norms, researchers and the researched to associate as partners at all stages, ethical aspects within the research project such as not harming clients, taking their consent, sharing findings with the researched, and the institution/ management/ administration/ education to be transparent in terms of policies/ procedures (Desai, Jaswal and Ganapathi 2004). Interactions with informants or participants of a research are guided by these set of values and ethics. However, specific values to be followed and ethical decisions to be taken during the research were conveyed by the context of research.

The studies in the Initial/Inception and Expansion phase did not articulate the ethical aspects that they have addressed. The guiding ethical principles were not mentioned. The ethical guidelines or responsibilities that were to be followed by social workers in the field were formulated in 1997 and later in 2002 which was much later than most studies were submitted. Thus, only those theses that were submitted in the Post-Restructuring phase had guidance towards addressing the values and ethical principles of their research (see Table 9).

**Table 9. Values and Ethics of Social Work Research**

<b>Subject Areas</b>	<b>Values and Ethics of Social Work Research</b>
Disaster	Not given false promises, informed consent, autonomy, confidentiality.
Social Movement	Revealing identity of the researcher, use of dialect that is familiar with participants, informed consent; autonomy.
Agriculture	Farmers were not looked as the 'object' of the study.
Corporate Social Responsibility	Informed consent, anonymity maintained.
Social Entrepreneurship	Anonymity, confidentiality, informed consent.
Administration	Informed (oral) consent, autonomy, confidentiality.
Voluntary Organisation	Confidentiality.
Social Work Education	Non-judgmental approach, confidentiality, anonymity.
Women's Studies	Confidentiality; informed consent.
Disability Studies and Action	Informed consent, transparency, anonymity.
Health	Informed consent; confidentiality, non-judgmental attitude, approval of the research proposal by the Institutional Ethics Committee/ Institutional Review Board, right to withdrawal, anonymity.
Mental Health	Informed consent; autonomy; confidentiality, the questionnaires, research proposal, abstract of the study and consent forms were sent for approval to the Research Ethics Committee of the University of West Indies.
Community Development	Confidentiality; autonomy.
Criminology	Confidentiality.
Power Relations	Ethical consideration is not discussed in the study

The theses in the Post-Restructuring phase had distinctively addressed ethical aspects and issues. Coincidentally, the formulation of ethical guidelines for social workers in India came during the period when qualitative research methodology started dominating over quantitative methodology at TISS. Following the formulation of guidelines, the researchers had addressed ethical issues prior and during their fieldwork. In addition, qualitative research methods invariably rest on a value framework which demands that the research should be transparent and that research ethics and accountability shall be two of its most important issues (Desai, Jaswal and Ganapathi 2004). Informed consent, confidentiality, anonymity and autonomy were the ethical aspects that the researchers most emphasised during their interaction with the participants.

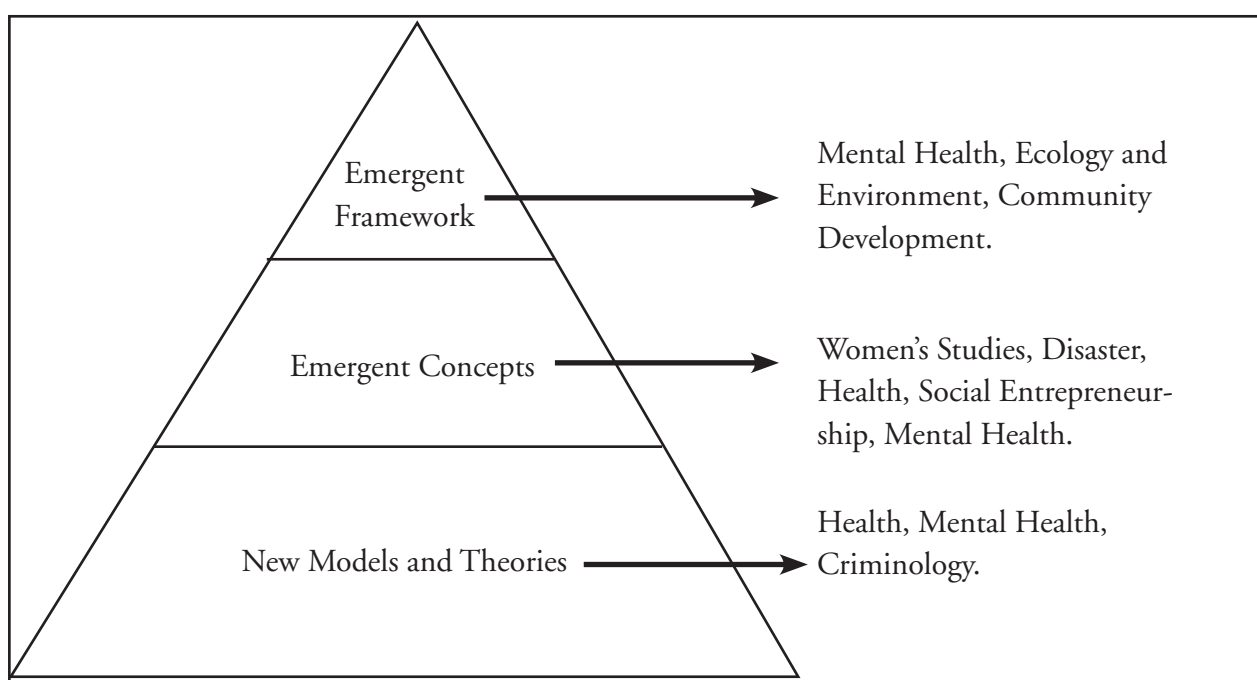
- a) Confidentiality and anonymity: Confidentiality is one of the main ethical responsibilities that down to protect the information shared by participants and to use the findings for their benefit, by revising policies and programmes concerning them (TISS Social Work Educator's Forum 1997). Seventeen studies protected the participants' personal information by adhering to the principle of confidentiality. The personal information of the participants namely, name, age, gender, religion, problems and caste were kept confidential by the researchers. Researchers adhered to the principle of confidentiality due to the fact that they were well-informed about the harm and ethical issues that are associated with disclosure of the identity of participants. The ethical issue of confidentiality was discussed and planned before conducting research rather than taking the decision to tackle it in the midst of research.
- b) Informed Consent and Autonomy: Informed consent is considered as the cornerstone of social work practice, derived from the profession's historical commitment to client's self-determination, and it has been appreciated as a risk management tool (Goswami 2012). Having informed and voluntary consent from the participants was one of the main ethical responsibilities laid down by the Social Work Educator's Forum and the Bombay Association of Trained Social Workers. Fifteen researchers, well-informed about the ethical responsibilities to respect participants' decision, took informed consent from the participants before they start conducting their research. The researchers sought willingness of the participants to take part in the research activity and provided the details (purposes) of the research. Interaction with the participants proceeded with their willingness to participate. Participants were also given the freedom to withdraw from the research anytime when they felt so. They were not forced to participate again after withdrawal.
- c) Not giving false promises: Two researchers of disaster studies maintained unique ethical consideration by not giving false promises. Since the expectation of the persons affected by disaster was help from people, it was important to inform the participants about the real purpose of research. The researchers did not promise anything to the participants and rather candid being blunt that they could offer nothing to the participants in return for their time and participation in the research study.
- d) Approval by the Concerned Ethics Committee: Two doctoral students had approached the Ethics Committee of the concerned institutes where the research was carried out. The Ethics committee had laid down their own ethical principles to be followed by outsiders while approaching their clients or patients. The questionnaires, research proposal, abstract of the study, and consent forms were sent for approval to the Research Ethics Committee of the institutes. The researchers proceeded with their research after the approval by the ethics committee.

- e) Non-judgemental attitude: Non-judgemental attitude was followed by three doctoral students. These researchers approached the participants with non-judgmental attitude and by staying ideologically neutral. They refrained from making judgements based on the participants' status and opinions.
- f) Transparency: Although researchers made sure to explain their research and its purposes to their participants, transparency is one of the least discussed ethical responsibilities in the theses. Only one researcher discussed that his identity was not concealed or made ambiguous while approaching the participants. The purpose of the visits and objectives of the research were explained to the participants. Research activities were taken up when the participants understood the identity of the researcher and his research.

It can be concluded that ethical responsibilities taken up by the researchers were generic in nature. While the Initial and the Expansion phases did not articulate on ethical issues, the theses in the Expansion phase had taken ethical decisions guided by social work profession. Confidentiality and informed consent were the most used ethical considerations as they were given more importance in the set of guidelines. Although ethical guidelines are necessary, it is even more important to be responsive to the cultural and social sensitivities of the society where they are taking up the study. To the extent that social researchers are creatures of their culture, an ethical code of conduct has to factor in value dilemmas arising from the researcher's enmeshment with the particular sets of institutional or structural arrangements and the national or cultural set of values (Thakur 2006). It was observed that while a few researchers attempted to take ethical decisions based on the social context, majority of them had taken a more generic way to consider ethical responsibilities.

**3.4.3 Theoretical Contribution of the Doctoral Works:** In the Inception/Initial phase, none of the studies did engage in theory building. Only one thesis in the Expansion phase engaged in theory building and approximately half (twelve out of twenty nine) of the studies in the Post-Restructuring phase engaged in theory building (see Figure 1).

**FIGURE 1: TYPES OF THEORETICAL CONTRIBUTION IN THE EXPANSION AND POST-RESTRUCTURING PHASES**



Depending on their contribution to knowledge, the theoretical contributions of the theses could be arranged in the following types:

- a) **Emergent Frameworks:** In this type, the findings of the studies suggested frameworks and recommendations for intervention or analysis of services. One study (1996) from the Expansion phase illustrated an integrated practice framework of intervention in environmental issues. It illustrated an integrated practice framework of intervention in environmental issues wherein the change agent system evolved as a result of an environment issue and its characteristics influenced the constituents of the intervention which, in turn helped to further clarify the goals and structure. One study (2008) on mental health suggested that initiatives essentially should be need-based, with these needs coming from families and communities. Initiatives should address the contextual and socio-cultural realities of childrearing. It further suggested that networking and collaboration are crucial and effective for the developing countries and for larger population. The theoretical framework of the study on (2013) community development identified, gender-hierarchy as the critical frameworks within the over-arching rights framework. This framework was suggested for analysis of health service systems across social work and related disciplines.

The theoretical contributions of the theses towards emergent frameworks were established to suggest or recommend for better intervention and services. The frameworks were built based on interventions implemented by the researchers or the existing services being implemented by government.

- b) **Emergent Concepts:** In this type of theoretical contribution, the studies constructed and identified concepts from the findings of their study to contribute to the existing theories. Two theses (2014) on women's studies constructed concepts, namely, women collectives and agency as important factor of women empowerment and essential component of public discourse or public representation respectively. One study (2013) on health identified that cultural beliefs and health practices acted as important predisposing factor in influencing the healthcare seeking behavior of people in conflict situation. One study (2012) on disaster developed a model in which individual characteristics of members of households (age profile, health and disability, and ability and willingness of members to contribute to the household tasks) and structural determinants (gender, caste and poverty) were identified as key factors of the household vulnerability. Study on (2014) social entrepreneurship found that social entrepreneurs mobilised resources only after identifying opportunities, whereas, the effectuation theory of Sarasvathy (2001) suggests that most entrepreneurs first formed primary set of means, exploited the contingencies, and then selected between many possible effects on the criteria of a predetermined level of affordable loss or acceptable risk related to the given means in the process of social value creation. Study (2013) on mental health established that the hierarchy of human needs such as the physiological needs, safety needs, belongingness and love needs, esteem needs, and needs for self-actualization of the participants are taken care of in continuum that determines the quality of life.

The studies developed the concepts through thematic analysis. The emergent concepts were either added to the existing theories or modified the theories, thereby creating a new interaction with other concepts of the existing theories. The resulting new interrelationships of concepts provided directions for looking the studied phenomenon in a different way or suggested further testing of the existing theories.

- c) New models/theories: Some of the studies developed an altogether a new model or theory from their findings. Four studies engaged in developing new models or theories from their findings. One study (2013) on health identified that the self-concept of children receiving ART is constructed by the influences of various processes that included active role played by the child herself/himself, family and social actors like schools, health care providers and law and policy makers. Another study (2011) on the experiences of survivors with breast cancer offered a new contextual understanding of the coping mechanism of women in dealing with the perception of threat in their experience with breast cancer in the socio-cultural context of Kerala, India. The theory sheds light on the phenomenon of amputated femininity of Indian breast cancer survivors of India, thus signifying the importance of contextualizing the socio-cultural influence on women's breast cancer experience. One study (2011) on mental health developed a complex relationship wherein caregiver's perception of illness stigma and various profile related factors like illness duration, severity and visibility of illness, functionality of the employment, gender and family setting influenced the participants' experiences of stigma and discrimination. These three studies adopted Grounded Theory to develop new theories. The concepts that the researchers grouped during the analysis were organized into categories. The categories formed the basis of the new theories which explain the interlinking of the concepts.

Study on (2010) criminology developed a theory on factors leading to crime causation and rehabilitation. The context where the interplay between manifest factors and one or more sites of criminalization sites takes place, plays an influencing role in male youth's entry into crime. However, while making attempts to get out of the crime, it is the manifest factors which became primary and significant compared to the criminalizing sites. This study adopted qualitative methodology in which emerging themes were identified during the analysis.

In the Initial and the Expansion phases, the studies mainly adopted quantitative methodology that engaged in testing of hypothesis or finding drawbacks in programmes and services. In contrast, the Post-Restructuring phase witnessed an increased use of qualitative research methodology that enabled the researchers to establish linkages between various concepts to identify patterns of relationships between the concepts or the themes (Mahtani 2004). The emergent themes were refined and bounded to establish a theory. The theoretical contributions of the theses were towards suggesting new frameworks for intervention and services, constructing new concepts to contribute to existing theories and developing a new theory from their findings. The increased engagement in theory building in the Post-Restructuring phase rests on the predominant use of qualitative research methodology.

**3.4.4 Social Work Implications of the Doctoral Works:** The social work implications arrived at by the doctoral works recommended involvement of social workers in all aspects of intervention in various disciplines. The doctoral works identified lack of awareness, problems of people and families, need of education and need of assistance for improvement and growth of individuals, groups and communities based on the findings of the studies. While the theses in the Inception/Initial phase did not give emphasis to social work implications, theses in the Expansion and the Post-Restructuring phase arrived at social work implications that provided a range of opportunities and scope for social work practice.

Based on social work implications arrived at by the doctoral studies, the areas of social work implications could be divided into counselling, guiding and training, mediating and field action.

- a) **Counselling:** Counselling forms an important component of social work practice. It is a development process in which one individual (the social work counsellor) provides to another individual or group (the client/s), guidance and encouragement, as well as challenge and inspiration, in creatively managing and resolving practical, personal and relationship issues, in achieving goals, and in self-realisation (Rowland 1993). Providing counselling service to individuals, families and groups was one of the important social work implications arrived at by the doctoral studies in the Expansion phase and the Post-Restructuring phase.

In the Expansion phase, the authors arrived at social work implications that aimed at counselling individuals and groups consisted of working women, families of prisoners, adopted children, employees (alcoholics and non-alcoholics), people living with schizophrenia and their primary caregivers. The researchers who worked with women employees, deaf children, families of prisoners, adopted children, employees (alcoholics and non-alcoholics), people living with schizophrenia and their primary caregivers had identified their participants' problems and realised that they needed counselling to tackle their professional, household, caregiving and adjustment problems. Family and social work therapy for alcoholics and families; and supervising residential child care institutions were also suggested by authors on substance use and child care/welfare. While some researchers found out that there was conspicuous absence of verbal communication and counselling from professionals in some cases, others found that existing counselling techniques needed to be upgraded. The potential of counselling sessions in stress-related work, adoption, criminology, alcoholism, mental health and disability had been acknowledged by the authors.

In the Post-Restructuring phase, authors who worked with deaf adolescents, families of women with schizophrenia, and persons living with mental illness arrived at social work implications with focus on counselling sessions. The researchers explored that discrimination, stigma and difficulties faced by people with mental illness, HIV, and disability affect the individuals and their families. Sex education and pre-marital counselling for deaf adolescents, psycho educational group for families of women living with schizophrenia and counselling for life skill training which would facilitate to regain and enhance self-esteem of persons living with mental illness were suggested by the authors. The need for professional help for the immediate caretakers was also identified since they had only partial understanding of the problems. The potential of counselling to facilitate growth, enhanced ability for decision-making, coping mechanism and problem resolution abilities were recognised and suggested to those who needed such services. Counselling is a complex and demanding activity that demands knowledge, experience and skills, as well as compassion, empathy and understanding to influence over the understanding and decisions of the service users (UK Essays nd). Therefore, the researchers also sought attention of the concerned institutes and agencies to provide professional help to people and families of people with mental illness, poor health and disability.

- b) **Guiding and Training:** Guiding and training can be with regard to any form of educating or instructing people on a particular skill, programme or service and then, influencing them to make decisions to act. In the Expansion phase, researchers who studied people's participation and substance use had arrived at the implications of guiding and training the families and communities in their areas of research. After interacting with people, they recognised that guiding people regarding the meaning and objectives of the health programmes was necessary in order to enhance people's participation in those programmes, and similarly, found that training in social

competence skills like skills in social interaction, anger management and healthy emotional expression to children of alcoholics was needed. Therefore, the researchers in their theses implied the need for trained social workers to guide and train families and communities to enhance their participation and social skills.

In the Post-Restructuring phase, implications for guidance and training were suggested in two theses that studied social entrepreneurship, and people living with schizophrenia. The author suggested to develop entrepreneurial and management skills and abilities of social work students to make them competent and capable to deal with social challenges in a more effective and innovative way. The study on people living with schizophrenia suggested social work implications in terms of providing support and guidance to enhance the quality of life of these people.

- c) **Imparting knowledge and skills:** It involves creating awareness, and enhancing knowledge and skills among people. It usually engages a large population who has no or little understanding of rural development, health, education, mental health, impact of substance use, and related programmes. It can use various methods such as meetings, street plays, songs, and house visits.

In the Expansion phase, the study on Integrated Rural Development Programme found out that awareness of people on the programme was very low and they have not made use of any schemes. The researcher suggested the trained social workers to provide information about rural development programmes, and also to impart the skills needed to the people so that they can make use of the programmes for their own development. The researcher added further that social workers can disseminate information systematically through formal and informal ways such as organising meetings and cultural programmes at local level. Similarly, the study (year) on psychiatric patients and their social networks suggested the social workers to initiate a lobby to reduce the stigma attached to mental illness and enlighten the economically well-off people so as to change their attitude, and provide support to those who are recovering from this illness. Another study on substance use also suggested social workers to enhance family life education and communication skills of employees (alcoholics and non-alcoholics) through sessions to produce a better functioning individual both as an employee and as a family member, by ensuring coping capacities on both fronts.

In the Post-Restructuring phase, imparting and enhancing knowledge was suggested by studies on survivors of breast cancer, reproductive health practices and social work education. The researchers suggested social workers to impart knowledge and help survivors of breast cancer in dealing with concerns such as loss of breast, femininity, sexual changes and physical as well as sexual intimacy between partners, concerns as a mother, economic consequences of the treatment and fear of recurrence; ethno-medicine and their reproductive health practices and improve indigenous knowledge base for social work training and practice.

- d) **Mediating:** Mediating is establishing links or coordinating between people and organisations or between organisations to effect change. One study on medical social workers in the Expansion phase identified that medical social workers were the link between patient, doctor and the community resources. The researcher arrived at implications that require the workers to develop links with professional organisations of social work and other organisations working in the area of medical related issues and play different roles other than resource builders and finders.

e) **Field Action:** In field action, social workers play an active role by participating and assisting people to effect change and growth. In the Expansion phase, study on intervention in environmental issues raised the need for social workers to play a more active role in supporting social and ecological movements to prevent and control environmental degradation. Study on substance use also raised the need for social workers to shift from the individualistic and medical reductionist paradigm currently popular amongst treatment professionals to adopting a systems perspective, which is rooted in the bio psychosocial/ ecological model of vulnerability to substance use. Study on disability suggested social work interventions at three major stages of the child's life, namely the crisis intervention following diagnosis of the impairment, intervention during the child's infancy and pre-school years, and intervention during the child's school years.

In the Post-Restructuring phase, implications for field action were suggested by studies on criminology, disaster, disability, and health. Preventing the entry of young men into crimes of serious nature, and the rehabilitation of those entrenched in crime but desirous of getting out; engaging and influencing the larger structures and processes to affect the household and community vulnerability and aid community recovery; planning and implementing school recreational activities and raising funds for the activities for students with hearing impairment; designing effective interventions that would assist children living with HIV and receiving ART in coping better in the purview of causes and consequences of perception of self were suggested by the researchers for social workers to initiate field action.

In both the phases, the doctoral works arrived at social work implications based on the problems identified during the fieldwork. The implications consisted of counseling, guiding and training, imparting knowledge and skills, mediating and field action. Except mediating, the doctoral works in both the phases arrived at similar implications. The service users consisted of children, women, people living with poor health and mental illness and youth. However, only sixteen out of thirty-two in the Expansion phase and fourteen out of twenty-nine theses in the Post-Restructuring phase had arrived at social work implications. Although many theses had a range of opportunities and scope for social change and development that could be assisted by social workers, the role of social workers in bringing social, economic, political and cultural change has been overlooked by the studies.

Lack of emphasis on social work implications in the doctoral research is one of the major challenges identified in social work research. The lack of emphasis on social work education and implications in the doctoral works was evident not only in TISS, but across the globe. Limited number of dissertations using rigorous outcome studies or even research synthesis of outcome research that can directly inform practice and policy suggests that social work needs to take stock of, critically evaluate the goal of research, and research training of doctoral students (Maynard et al. 2014). The lack of emphasis on social work education and implications in the theses also stems from lack of integration between education and practice and between research and education. Similar observation was made by Dellgran and Hojer (2003) and they opined that this situation is due to the fact that the research departments have been fully occupied with constructing and consolidating a new activity. Linking social work education and implications/intervention in social work research is the main challenge that both the educators and students have to undertake.

## SECTION IV

### 4. CONCLUSION

This study explored the trends in social work research in TISS nearly a fifty-year time span that was divided into three phases. The findings of this research project provided insights on changing nature of subject areas, dominant methodologies, policy relevance, focus on social work implications, and contribution to theory-building and ethical considerations of social work research. The strengths and weaknesses of the doctoral works identified in the analysis can substantively enhance the research capacity of young scholars and add to the knowledge base of social work education.

The diversities and changes in subject areas occurred in response to the phenomena of external (social, economic and political aspects of the country) and internal environment (training and nurturing, faculty and peer pressure, values and thrust areas promoted by schools of social work). As mentioned earlier, the different themes of research in social work in 1960s were broadly on needs and services, social welfare administration, evaluative studies or in results of services (Herlekar 1964). Nature of subject areas in the Initial and most of Expansion Phase was influenced by the country's interests in welfare activities and insertion of justice and rights discourses during the 1960s and 1970s. Similarly, dynamics in subject areas in the Expansion and Post-Restructuring Phases occurred in response to the demands for having a non-state voluntary actor in Indian civil society in post liberalisation in the 1990s and the withdrawal of state actors from several welfare activities. State withdrawal, global political economy dynamics and market dynamics spearheaded several people's struggles and structural issues (Jaswal and Pandya, 2015). The nature of subject areas changed with more interest towards social structures, traditional practices, forms of injustice and discriminations, people's struggles, and deviants behaviours in the Post-Restructuring Phase.

The present review of social work research at the TISS indicates that positivism and non-positivism (constructivism, phenomenology, and constructivist grounded theory) methodologies have dominated social work research. Influenced by the philosophical assumptions and the research culture of a given time, social work research had relied on quantitative methodology, however, social work research at the TISS is going beyond the traditional quantitative nature of investigation. The non-positivistic epistemologies have started to influence social work investigations. The changing nature of subject areas focusing on people's struggles and structural issues influenced the growth of non-positivistic epistemologies that are closely connected with the ground realities of people. The trends of social work research in TISS is evolving from service-oriented into context-specific research which is impacted by the changing contextual changes that took place in TISS and in India. Efforts to insert liberatory and emancipatory elements into Indian social work education, are now visible and being articulated in the public domain (Bodhi 2011).

The methodologies adopted by social work research in different periods of time have evolved from positivist epistemology to non-positivist epistemology that could capture the reality that is attributed to human mind and actions. Over the last few years, the situation is changing and qualitative research is gradually acquiring a new respectability in social work research (Stanley 2004). This change in epistemology further influenced other aspects of research. It influenced the ethical decisions taken, focus on social work implications, contribution to theory-building and policy planning. Majority of studies (with non-positivist epistemology) in the new phase maintained these research aspects so as to be responsive to social realities and contexts where the phenomena occurs. In addition, it was observed

within social work education that there was very little done to document and disseminate indigenous knowledge and presumed that such indigenous knowledge will be lost without which knowledge production and development is not possible (Desai, Jaswal, and Ganapathi, 2004). But a few studies have shown interest in studying the emic perspective by examining indigenous knowledge and institutions. There were recommendations to include indigenous knowledge while planning policies. Recommendations need to be disseminated to contribute to social work knowledge, development and practice.

To conclude, social work research in TISS is evolving continuously in terms of its subject areas, epistemology, policy relevance, social work implications and ethical considerations. While there is still paucity of critical thinking on implications and ethical issues, and theory building, the change has begun and there is a need to empower social work research by strengthening these aspects. There is a need to educate the young researchers on how to get access to local knowledge, resources and practice and intervene accordingly. Professional social workers and representatives of social work institutes need to work in solidarity for a common platform to orient researchers on field education and social research.

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