



NAPSWI Social Work Digest

May 2026

Volume : 01

No: 04



Monthly official Publication by
National Association of Professional Social Workers in India

NAPSWI Social Work Digest

“Social Work Practice in Different Fields.”

Volume 1 - issue 4

May 2026



Editor

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Published by

National Association of Professional Social Workers in India
NAPSWI

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MESSAGE FROM EDITOR

Dear Esteemed Readers,

Greetings from the National Association of Professional Social Workers in India (NAPSWI),

Welcome to the May edition (Issue 4) of the NAPSWI Social Work Digest, where we bring you a dynamic curation of academic insights, policy analysis, and profound grassroots realities. Focused centrally on the power and utility of case studies, this month's collection challenges us to rethink our methodologies and the impact of systemic interventions.

Within these pages, Dr. Mohd Salman examines the transformative power of the case study method in qualitative research, while the don of social workers, Prof. Venkat Rao Pulla, explores how Bronfenbrenner's socio-ecological systems theory can untangle complex school counseling scenarios. Providing a strategic blueprint, Dr. Sherry Joseph guides our community to actively facilitate the incoming School Mental Health Policy, 2026, alongside state education departments. We also tackle critical justice themes with Dr. Pankaj Gupta, analyzing the statutory protections urgently needed for Child Welfare Committees handling sensitive POCSO cases. Highlighting the intersection of youth vulnerabilities and systemic support, Dr. Anish KR details how structured life skills education serves as a proactive, empowerment-driven defense against substance abuse.

Furthermore, we feature poignant field reflections on the silent emotional neglect of children in urban poverty by Shimpi Rai and the interrupted girlhoods of young caregivers in working-class neighborhoods by Ms. Ambareen Anwar. Expanding our professional lens, Ms. Annamma Mathew addresses the heavy psychosocial burdens carried by the Indian diaspora. Deepening this focus on emotional well-being, Dr. Milan Pandit provides a profound exploration of bereavement and grief in India, highlighting the critical necessity of social support systems. Additionally, Dr. Anil Dhaneshwar reviews a transformative decade of Corporate Social Responsibility funding, and Ms. Tripti Pandey alongside Dr. Shailesh Kumar highlight innovative conflict resolution strategies deployed in both industrial and rural marital settings.

Looking ahead, we invite you to contribute to our next month's theme: "Digital Futures and Social Work Practice: Exploring Opportunities, Ethics, and Innovation in a Technology-Driven World". We eagerly welcome your articles, personal field experiences, opinion pieces, case studies, and creative visual mediums like digital cartoons or educational comic strips
Happy reading!

Happy reading!

*Prof. Sanjai Bhatt
Editor
Social Work Digest*

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BEYOND NARRATIVES: CASE STUDY METHOD AS A KNOWLEDGE TOOL IN SOCIAL WORK RESEARCH

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Abstract

The case study method has long occupied a central yet argued position within social work research. Often reduced to descriptive narratives, it is commonly underestimated in an era dominated by quantitative metrics. This article discusses for a reconceptualization of the case study method as a rigorous, critical and epistemologically significant approach capable of producing context-sensitive, practice-relevant and transformative knowledge. Moving beyond procedural descriptions, the paper places case study research within the larger debates on knowledge production in social work, engages with its methodological complexities and proves its importance through practice-based insights, particularly in contexts of marginality, informality and structural inequality. The article contends that when employed reflexively and analytically, case studies not only document social realities but also question power, institutions and policy frameworks, thereby solidify both social work research and practice.

Keywords: *Case study method, social work research, qualitative inquiry, practice-based evidence.*

Introduction

Contemporary social work research operates within this technology-driven environment where “evidence” is often connected with quantification and generalizability. Large sample, large datasets and impact evaluations dominate policy discourse, shaping what counts as real knowledge. Within this order, the case study method is often downgraded to a secondary status, viewed as subjective or inadequately rigorous (Flyvbjerg, 2006; Yin, 2018). This marginalization, however, reflects a major misunderstanding of both the nature of social work and the epistemological prospects of case-based inquiry. Social work does not deal with construct variables alone; it engages with lived experiences rooted in complex socio-economic and cultural frameworks (Healy, 2022; Gray et al., 2012). The realities of a migrant worker navigating urban precarity or a child labourer transitioning into education cannot be profoundly understood through quantitative methodologies alone. The case study method, therefore, is not only a substitute, it is requisite. It allows researchers to enter the “thick” realities of social life, where structure and agency, policy and practice and vulnerability and resilience interconnect (Stake, 1995; Merriam & Tisdell, 2016). This article seeks to reposition the case study method not as a complementary tool, but as a critical mode of inquiry crucial to the scholarly development of social work.

What Kind of Knowledge Do Case Studies Produce?

At its core, the discussion around case studies is not methodological but epistemological. It rises a major question, “*What constitutes valid knowledge in social work?*” Case studies produce **circumstantial, realistic and relational knowledge**. Unlike positivist methodologies that seek universal laws, case studies embrace complexity, contradiction and

specificity (Creswell & Poth, 2018; Ragin, 1992). They align more closely with interpretivist and critical frameworks, where meaning is co-constructed and knowledge is positioned. Importantly, case studies challenge the fabricated dichotomy between “objectivity” and “subjectivity” in research and knowledge. In social work, subjectivity is not a bias to be removed but an element to be understood (Fook, 2016). The stories of clients, the analyses of practitioners and the positionality of researchers all become sources of understanding rather than misrepresentation. Case studies also enable what may be termed “*practice-based evidence*.” While evidence-based practice often prioritises externally produced data, case studies contrary the direction; they produce knowledge from within practice itself (Shaw, 2023; Padgett, 2016). This is mainly important in contexts like India, where standardized models often fail to get insights of indigenous realities of caste, gender, informality and regional diversity.

Scholarly Demands of Case Study Research

One of the major criticisms of case studies is that they remain descriptive (Tellis, 1997; Baxter & Jack, 2008). This critique is not entirely groundless. Many case studies in social work do not go beyond the narrative documentation, failing to engage in greater analytical work. However, this is not a drawback of the method but of its application. A case study moves beyond “*what happened*” to cross-examine “*why it happened, how it is structured and what it discloses about larger systems*” (Gerring, 2006; Yin, 2018). It involves:

- **Analytical notion:** Connecting individual experiences to structural conditions such as labour markets, social institutions or government policies.
- **Theoretical engagement:** Using the case to examine, improve or critic prevailing theories.
- **Comparative reasoning:** Situating the case within broader patterns without losing its specificity (Ragin & Becker, 1992; Thomas, 2011).

For instance, a case study of a domestic worker facing exploitation is not merely a story of individual hardship. When analyzed critically, it reveals intersections of gender, caste, informality and migration, as well as gaps in labour regulation and social protection. Gilgun (2005) Thus, the importance of a case study lies not in the narrative itself, but in the **interpretive work** that developed narrative into knowledge.

Case Studies and Power: Giving Voice or Reproducing Hierarchies?

Case studies are frequently marked as “*giving voice to the voiceless*.” While this is an important function, it also requires serious analysis (Riessman, 2008). “*Whose voice is being represented? Who interprets it? In what language and for what audience?*”

There is always a risk that case studies, particularly when conducted uncritically, may mimic prevailing power hierarchies. The researcher may become the just an imposing narrator that translating lived experiences into academic discourse, sometimes divesting them of their social, psychological and political depth. To address this, case study research in social work must include reflexivity (Fook & Gardner, 2007). Researchers should always question their own positionality such as gender, caste, religion, political affiliation and how these shape the research process. Participatory approaches can also be integrated into case study design, where participants are not merely subjects but co-creators of knowledge. This shifts the case study

from being one-sided to participative, aligning it more closely with the emancipatory objectives of social work.

Case Study in Practice Contexts

One of the most influential contributions of the case study method is its ability to bridge the micro-macro divide in social work (Stake, 2006; Merriam & Tisdell, 2016). At the **micro level**, it captures individual and family experiences such as livelihood struggles, economic and social vulnerabilities, trauma and aspirations. At the **macro level**, it reveals how these experiences are shaped by policies, institutions and structural inequalities.

Consider the case of migrant workers during a crisis. At one level, a case study may document the journey of a single worker; loss of employment, lack of shelter and return migration. At another level, the same case exposes systemic failures, absence of portable social security, exclusion and policy gaps. In this way, case studies work as “**analytical bridges**”, connecting lived experience with structural analysis (Flyvbjerg, 2006). They make evident the often invisible relations between policy design and day to day realities of common people.

Relevance in the Indian Context

The importance of the case study method becomes even higher in the Indian context. Social realities in India are marked by deep diversity and coated inequalities; gender, caste, religion and region intersect in complex ways. Surveys and quantitative studies are important on their place but often flatten this social complexity (Gray et al., 2012; Healy, 2022). They may highlight the prevalence of child labour or informal employment but cannot fully capture the processes, issues and challenges and lived experiences underlying these phenomena. Case studies, on the other hand, can illuminate:

- The lived experiences of informal workers working in hazardous conditions for their survival and livelihoods
- The socio-cultural barriers and dynamics in women’s workforce participation
- The functioning of welfare policies and schemes at the grassroots level

For example, a case study of a woman worker in a rural area can reveal not just economic outcomes, but also shifts in gender relations, decision-making power and social identity dimensions that are difficult to quantify yet central to social transformation.

Methodological Rigor

A common criticism of case study research related to its limited generalizability (Yin, 2018), yet this concern arises from an unnatural understanding of what constitutes validity. Rather than looking for statistical generalization, case studies target for analytical generalization, wherein insights derived from specific cases contribute to broader theoretical understanding (Gerring, 2006; Flyvbjerg, 2006). The objective is not to represent a population but to generate contextually grounded and conceptually rich knowledge. Accordingly, depth and rigor in case study research is established through the systematic triangulation of multiple data sources, the provision of concentrated and comprehensive contextual descriptions (Stake, 1995), transparency in the research process and commitment to reflexivity and positional awareness on the part of the researcher (Denzin & Lincoln, 2018). Rather than asking, “*Can*

this case be generalized?”, a more appropriate question is; “What does this case reveal that is theoretically and practically significant?”

Towards Transformative Research: Reimagining the Case Study

To fully realize its potential, the case study method needs to be reimagined beyond its traditional academic boundaries and positioned as a tool for transformative practice. Rather than remaining confined to documentation, it should actively inform policy advocacy, contribute to the education and capacity-building of practitioners and connect individual experiences to broader processes of collective action and social movements (Fook, 2016; Shaw, 2023). Equally important is the need to document not only problems and vulnerabilities but also cases of innovation and resistance, thereby capturing the dynamic processes of social change. For instance, case studies of successful community interventions can serve as models for replication, while those highlighting systemic failures can inform policy reform.

Conclusion

The case study method, when exposed of its reduction to sheer storytelling, emerges as one of the most intellectually strong and practically appropriate approaches in social work research. It captures the depth, complexity and contradiction inherent in social life and dimensions that are often lost in traditional methodologies (Creswell & Poth, 2018; Yin, 2018). In a discipline committed to social justice, the importance of such an approach cannot be overstated. Case studies do not just describe the world; they help us understand it, question it and eventually change it. Reclaiming the case study method, therefore, is not just a methodological choice, it is an epistemological and ethical commitment to grounding social work in the realities it seeks to transform.

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USING SOCIO-ECOLOGICAL / SYSTEMS THEORY IN SCHOOL COUNSELLING

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Background

Social Workers frequently deal with problems like stress, low self-esteem, bad mood, excessive worrying, thoughts of self-harm, bullying, identity issues, difficulty sleeping, and crisis support in a school social work setting. Mapping out a client's interpersonal, organizational, and social systems through adolescence appears to be the main focus of this case study, which makes use of the systems theory of perceiving the individual in their surroundings.

CASE STUDY: ROHAN (15), CLASS 10, GOVERNMENT SENIOR SECONDARY SCHOOL, DELHI

Presenting Concern

Rohan, a 15-year-old teenager, has been posting upsetting and suicidal messages on Instagram Stories late at night, according to teachers and peers. The school counsellor is made aware of this by a number of classmates.

Initial Counselling Encounter

Reluctantly, Rohan shows up for the session. To lessen the meeting's involuntary aspect, the counsellor employs a non-threatening, choice-giving approach

Eco-Map Findings

MICRO-SYSTEM (Immediate Relationships)

- **Family:**
- Both parents—the father drives an autorickshaw and the mother works as a domestic worker—put in enormous hours in the unorganized sector.
- little oversight at home.
- Rohan says he feels "ignored unless something goes wrong" since his younger sister, who is eight years old, needs attention.
- Financial disputes occur frequently at home.
- **Peers:**
- His friendships are erratic, and he experiences social exclusion.
- history of being teased for being "quiet" and "not sporty" in middle school
- He feels "left behind," reflecting as he sees since many of his classmates are already having a girl friend or two
- **Use of Technology:**
- late-night phone use, including gaming and Instagram surfing till two or three in the morning.

- exposure to comparison culture and cyberbullying.
- **Personal Factors:**
- poor sleep, low self-esteem, depressed mood, and deteriorating academic performance.
- claims to have "no energy for school."

MESO-SYSTEM (Interactions Between Microsystems)

- **Home-School Disconnect:**
- Due to work schedules, parents never bother to come to school to find out how Rohan is doing at school
- Parents think "school should handle discipline," but teachers think Rohan is "lazy."
- **Peer-School Communication:**
- Teachers are unaware of peer teasing.
- Rohan stays away from group activities.

EXO-SYSTEM (Indirect Influences)

- **Stress at Work for Parents:**
- Emotional availability is diminished by long work hours and unstable finances.
- **Neighbourhood Setting:**
- dense resettlement community with few secure recreational areas.
- **Infrastructure of Schools:**
- Classrooms are overcrowded, and there are no one to counsel at all
- **The digital world**
- exposure to internet harassment, unrealistic lifestyles, and dangerous content.

MACRO-SYSTEM (Cultural, Social, Policy Context)

- Mental health stigma; family opposes "talking to outsiders."
- Gender norms discourage emotional expressiveness and expect boys to be "strong."
- **System of Education:**
- Class 10 board exams are really stressful.
- **Culture of Social Media:**
- normalization of online validation, perfectionism, and comparison.
- **Economic Disparities:**
- restricted availability of private mental health care.

CHRONO-SYSTEM (Changes Over Time)

- Academic pressure grew when students moved from middle to high school.
- Confidence is still impacted by COVID-19 learning gaps.
- Emotional sensitivity increases during puberty and identity formation.

What the Eco-Map Reveals

- The eco-map assists in determining:
- Numerous pressures from various systems (peers, school, family, and the internet environment).

- How interconnected systems lead to distress—in line with the PDF's focus on "equilibrium" and "systems as interrelated"
- The necessity of taking action at a level higher than the individual

Intervention Plan

1. Micro-Level Interventions

- Personal Counselling:
 - Preparing for suicidal thoughts.
 - CBT-based methods for thinking negatively.
 - instruction on good sleep hygiene.
- Peer Assistance:
 - Choose one or two classmates who are encouraging.
 - Promote involvement in school groups (community volunteering, music, and art).

2. Meso-Level Interventions

- Home-School Cooperation:
 - PTM schedules that are flexible for parents who work.
 - When possible, a school social worker will make house calls.
- Educator Sensitization:
 - brief instruction on identifying bullying.
 - Promote feedback based on strengths

3. Exo-Level Interventions

- Connections to Local Resources:
 - referral to regional NGOs (like Sangath and The MINDS Foundation) that provide mental health help for young people.
- Education on Digital Safety:
 - seminars on social media responsibility and cyberbullying.

4. Macro-Level Interventions

- Cultural Awareness:
 - Reduce stigma by using non-pathologizing language.
 - Use metaphors that are familiar to the parents' culture, such as "mind health is like physical health."
- Awareness of Policy:
 - Tell your family about government hotlines, such as KIRAN 1800 599 0019.
 - Use CBSE principles to promote mental health in schools.

5. Chrono-Level Considerations

- Keep track of changes over the course of exam cycles.
- Assist with transitions (Class 10 → Class 11).
- Keep an eye on long-term digital behaviours.

Discussion Questions for Classroom Use

1. What fresh perspectives does the eco-map offer that an individual-focused evaluation might overlook?

2. Which systems—school, family, digital, and community—seem to have the biggest impact on Rohan's suffering?
3. How might Rohan's help-seeking behaviour be influenced by cultural norms surrounding masculinity and mental health?
4. What organizational adjustments should the school make to better assist children like Rohan?
5. In this situation, how can social workers cooperate with educators, parents, and community organizations?
6. What moral issues come up when friends report suicidal posts on social media?

Role Play

Based on the above case study, the full, classroom-ready role-play scenario is shown below. With distinct roles, scripts, learning objectives, and debriefing prompts, it is intended for BSW/MSW instruction. It steers clear of any dangerous guidelines and maintains the emphasis on abilities, morality, and systems thinking.

ROLE-PLAY TRAINING SCENARIO

“Rohan’s Circle of Strain: A School Counsellor Responds”

A socio-ecological/systems theory practice exercise for social work students

1. Purpose of the Role-Play

This scenario helps students practise:

- Building rapport with a reluctant adolescent
- Using a strengths-based, culturally sensitive approach
- Applying socio-ecological/systems theory in assessment
- Identifying risk indicators and safety needs
- Engaging with family and school systems
- Ethical decision-making in school settings

2. Characters

A. School Counsellor / Social Worker (Student Role)

- Warm, non-judgmental, calm
- Uses open-ended questions
- Avoids pathologizing language
- Encourages autonomy and choice

B. Rohan (15-year-old student)

- Quiet, withdrawn
- Reluctant to talk
- Feels overwhelmed by school, peers, and home pressures
- Posts distressing messages online
- Struggles with sleep, mood, and self-esteem

C. Teacher (Optional Third Role)

- Concerned but overworked
- Notices Rohan's declining performance
- Unsure how to support him

D. Parent (Optional Fourth Role)

- Busy, stressed, emotionally unavailable
- Believes “boys should be strong”
- Worries about family finances
- Unsure how to respond to mental health concerns

3. Setting

A tiny free staff room at a Delhi government senior secondary school. After peers pointed up Rohan's upsetting Instagram posts, the counsellor invited him.

4. Role-Play Script (Guided)

This script offers a framework, while students are free to improvise, .

Scene 1: Counsellor Meets Rohan

Counsellor:

“Thanks for coming in, Rohan. You get to decide how we use this time. We can talk, sit quietly, or you can tell me what would feel comfortable for you today.”

Rohan:

“I don't know... I didn't really want to come.”

Counsellor:

“That makes sense. Being asked to meet someone you don't know can feel strange. What would make this feel a bit easier right now?”

Rohan:

“...Maybe just talking about school?”

Counsellor:

“Sure. Tell me what school has been like for you lately.”

Scene 2: Exploring Stressors (Micro & Meso Systems)

Rohan:

“Everything feels too much. Exams... friends... I can't keep up.”

Counsellor:

“It sounds like you're carrying a lot. What's been the hardest part recently?”

Rohan:

“My friends keep changing... sometimes they include me, sometimes they don't. And at home, no one really has time.”

Counsellor:

“That sounds lonely. When friendships go up and down, it can affect how we feel about ourselves.”

Scene 3: Technology and Sleep (Micro System)

Counsellor:

“I heard you've been up late online. What's happening for you at night?”

Rohan:

“I can't sleep. I just scroll... sometimes I post things. I don't know why.”

Counsellor:

“Sometimes when feelings build up, posting online feels like a release. What do you hope people understand when they see your posts?”

Scene 4: Family Context (Exo System)

Rohan:

“My parents are always working. They don’t get it. They think I should just study.”

Counsellor:

“It’s hard when the people you care about are busy trying to manage everything. What do you wish they understood about what you’re going through?”

Scene 5: Cultural Norms (Macro System)

Rohan:

“My dad says boys shouldn’t be emotional. But I can’t help it.”

Counsellor:

“A lot of boys hear that. But feelings are human, not a weakness. You’re not alone in this.”

Scene 6: Safety Check (Ethical Practice)

Counsellor:

“When you posted those messages, were you hoping someone would notice? Or were you feeling unsafe?”

Rohan:

“I wasn’t planning anything... I just felt really low.”

Counsellor:

“Thank you for telling me. We can make a plan together so you’re not alone with those feelings.”

Scene 7: Strengths and Supports

Counsellor:

“Who in your life makes you feel even a little bit supported?”

Rohan:

“My cousin... and one friend in class.”

Counsellor:

“That’s a good start. We can build on that.”

Scene 8: Closing the Session

Counsellor:

“Before we finish, what’s one small thing that might help you get through this week?”

Rohan:

“Maybe... sleeping earlier?”

Counsellor:

“That’s a great goal. Let’s work on a plan together.”

5. Learning Objectives for Students

- After the role-play, students ought to be able to:
- Establish a rapport with a reluctant teenager
- Determine the macro, chrono, exo, meso, and micro components.
- Make a culturally aware evaluation
- Identify risk indications and react morally

- Make use of nonjudgmental, strengths-based language
- Recognize the limitations of school-based organizations
- Consider how help-seeking is influenced by Indian cultural norms.

6. Debrief Questions for Classroom Discussion

1. How did the counsellor strike a balance between safety obligations and empathy?
2. Which systems—peers, family, school, and the internet—had an impact on Rohan's distress?
3. What impact did cultural norms surrounding masculinity have on the discussion?
4. What organizational obstacles are present in government schools in India?
5. How might the counselor engage parents without making things more stigmatized?
6. What would a systems-based intervention plan's next stage or stages be?

7. Optional Extensions for Training

1. Play the roles of a counsellor, student, and spectator in a triad role-play.
2. Eco-Map Drawing Exercise: Following the role-play, students map Rohan's systems.
3. Examine organizational dynamics in the teacher-counsellor meeting.
4. Parent Meeting Simulation: Develop engagement that is sensitive to cultural differences.

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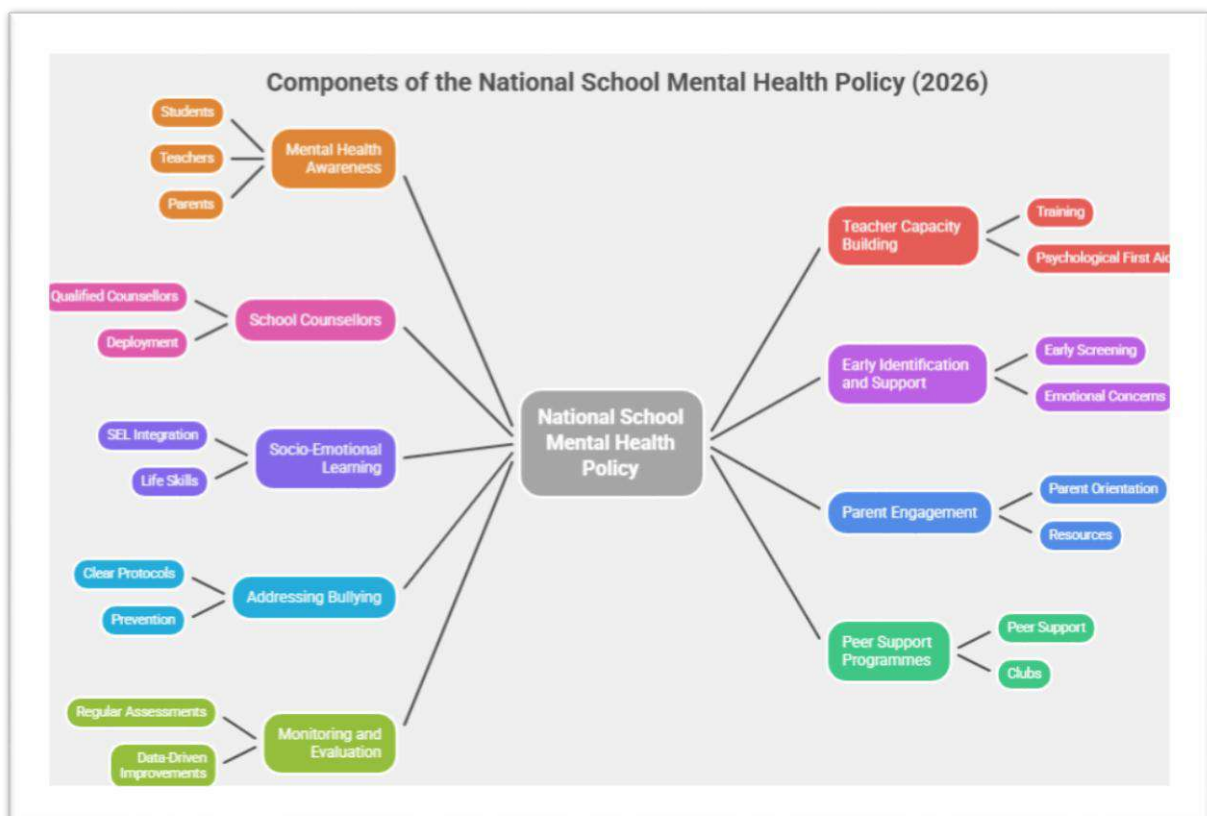
SCHOOL MENTAL HEALTH POLICY, 2026: WHAT CAN PROFESSIONAL SOCIAL WORK ASSOCIATION DO?

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The Department of School Education under the Ministry of Education, Government of India, has announced that a national School Mental Health Policy (2026) is in its final stage of development and is expected to be implemented across schools nationwide in the upcoming academic year. The policy seeks to prioritise students’ mental health and emotional wellbeing by fostering a supportive and stress-free learning environment. It has been developed in compliance with Supreme Court directives and builds upon existing initiatives such as Manodarpan, the School Health & Wellness Programme, and the social-emotional learning components embedded in the National Curriculum Framework for School Education (2023). The 2026 policy aims to standardise this framework across different school boards and state education systems, as outlined by the Department of Education.



The 2026 School Mental Health Policy proposes a structured support system centred on early identification of concerns, clear referral pathways, and stronger parent–school communication. According to information received from the Ministry, the draft policy is primarily structural rather than clinically oriented, and it does not require schools to appoint psychiatrists. Instead,

it expects schools to establish systems in which staff are trained to recognise signs of distress early, follow a clear referral process when concerns escalate, maintain communication with parents, and create an environment in which students feel safe to seek help without stigma. The effectiveness of the programme will be assessed through improvements in students' emotional wellbeing, a reduction in concerns reported by parents, teachers, and peers, stronger coordination among teachers, parents, and administrators, and the development of a more supportive school environment.

The policy is likely to be implemented more effectively in schools that already have social workers or counsellors, while other schools may require guidance and sustained support to operationalise it successfully. It is in this context that the role of professional social work associations and networks becomes especially important. No explicit funding or budget responsibility is mentioned in the Policy document. Inferring from similar national education programmes in India, the Central Government is likely to play a major role in funding and policy support. State governments and schools may share responsibility for training teachers and other school staff, (hiring social workers) and setting up support systems.

Multiple associations and networks of professional social workers operate in India at both the national and state levels. Prominent national bodies include the India Network of Professional Social Workers Associations (INPSWA), the National Association of Professional Social Workers in India (NAPSWI), the Indian Society of Professional Social Work (ISPSW), and the All India Association of Medical Social Work Professionals (AIAMSWP). At the state level, some associations are federated from district-level bodies, as seen in the Kerala Association of Professional Social Workers (KAPS). Despite their differing structures and areas of focus, these professional social work associations share a common mandate: to strengthen the quality of social work practice and to advocate for greater professional recognition and accreditation in India.

Unlike in the USA and the UK, India does not have a universal mandate requiring every school to appoint a social worker. Although school social work has made progress in some private schools, it is not yet formally integrated into the school system across the country. In most Indian schools, teachers address students' psychosocial concerns and rely on external referrals rather than on in-house school social workers. The 2026 policy therefore presents an important opportunity for associations of professional social workers (ASW) to collaborate with state education departments and schools in supporting the effective roll-out of the policy for students' wellbeing.

Partnership between Education Department and Association of Social Workers

Although the policy is being launched at the national level, its implementation will take time at the state and Union Territory levels because education is a state subject. The first step for associations of social workers (ASW) should be to submit a letter of interest to the State Ministry of Education and begin building a long-term partnership. The responsibility for implementing the School Mental Health Policy will largely rest with school principals and head teachers. In many cases, however, school leaders come from educational backgrounds and may

have limited exposure to the knowledge and skills required to address student mental health concerns effectively. The policy also requires schools to train staff at least twice a year, integrate social and emotional learning into routine teaching, strengthen parent–school communication on emotional and behavioural changes, and address issues such as cyberbullying, gaming addiction, and the safe use of digital media. Against this backdrop, the following table outlines key actions, responsible stakeholders and process to be followed for building an effective partnership between the Department of Education and ASW.

What	Who	How	When
<p>Expression of interest to the State Department of Education. Explore possibility of financial support from Department of Education to ASW</p>	<p>The ASW can decide on the geographical focus and extend of engagement.</p>	<p>Discussed and agreed by the management committee of ASW in a state.</p>	<p>As soon after the official launch at the national level. Exp date 1 June, 2026</p>
<p>In-house preparations in ASW</p>	<p>Appoint a focal person for the state. State level TOT for ASW core team. Organise step-down training for district members/core team</p>	<p>Review the available materials under the Manodarpan programme. Compile data and evidence of mental health issues of youth and adolescence in the state. TOT materials and resource persons</p>	<p>June-July 2026</p>
<p>Capacity building of school staff. Every teaching and non-teaching staff member needs at least two training session.</p>	<p>The ASW can tailor make a training module considering the context of the state and organize a ToT for its members. The step down trainings for school teachers will be certified by the PASW. The State Education Ministry can notify the schools about</p>	<p>The PASW can organize a series of trainings for the schools. The school management can organize the training in the school, and invite the resource persons from ASW. ASW will plan and organize a series of fee-based trainings to train school teachers on mental health.</p>	<p>3-4 times in the 2026-2027 academic year. Dates could coincide with holidays to reduce the loss of class-hours.</p>

	these trainings and encourage participation. The ASW can issue a certificate of participation to the teachers.	Teachers from different schools can register and participate in these fee-based trainings.	
Designated Wellness Coordinator in the school. This need not have to be a new hire.	The school management names a wellness coordinator- a teacher, a vice-principal, school social worker, counsellor where one exists- who owns the referral pathway, the training calendar, and the parent-side communication.	Name the wellness coordinator in the staff roster. Make sure the name appears on the website and the parent handbook.	Beginning of the 2026 academic year.
A referral protocol. Who does a teacher tell when a child shows signs of acute distress. Who tells the parent. What is documented. What is the threshold for an external referral.	The ASW prepare a modal referral portocol; get it vetted by the State Education Ministry. This modal referral portocol can be tailormade to meet the local needs and available services led by the wellness coordinator of the school.	The referral protocol for the school will identify the referal pathways and referal points and contacts, that students can make use of. ASW will assist schools to set up mental health support systems with trained professionals.	Display the protocol in the staffroom noticeboard. Identify mental health issues- Provide appropriate support- Respond effectively to student needs
Monthly wellness agenda For schools that have implemented the new SMC Guidelines 2026, the wellness item is part of the monthly School Management Committee agenda	Principal and School Management Committee SDP is a strategic planning document, covering all the school’s activities over a period of three years. It is the road map that sets	The three-year School Development Plan should explicitly carry a wellness pillar with measurable indicators — teacher training hours completed, referrals made and closed,	Within one month of starting the academic Year or within three months of the expiry of previous SDP.

	out the changes a school needs to make, to improve the level of student’s achievement and shows how and when these changes will be made.	parent meetings conducted with a wellness item, incident log status. The ASW can provide technical support in developing the Plan.	
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School social workers are better placed to perform these roles in a school due to their professional training, skills and systems and community approach. The School Mental Health Policy (2026) may act as a turning point, expanding the role of social workers in schools. Alongside, the Association should convene meetings with social work institutes in the state to strengthen the education curriculum so that the knowledge, attitudes and skills of students can be better moulded for getting place as school social workers. Social Work institutions should introduce elective paper on school social work, which will improve the marketability of the students. In the meanwhile, ASWs can organize focussed training programmes on school social work for those already completed their education and certify the completion of the training to perform the functions of the school worker.

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BEREAVEMENT AND GRIEF IN INDIA: TWO CASE STUDIES

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Bereavement often refers to the state of loss, and grief to the reaction to loss. Losses can range from loss of employment, pets, status, a sense of safety, order or possessions to the loss of the people nearest to us. Our response to loss is varied and researchers have moved away from conventional views of grief (that is, that people move through an orderly and predictable series of responses to loss) to one that considers the wide variety of responses that are influenced by personality, family, culture, and spiritual and religious beliefs and practices. Grief is a multi-faceted response to loss. Although conventionally focused on the emotional response to loss, it also has physical, cognitive, behavioural, social and philosophical dimensions.

Bereavement, while a normal part of life for us all, carries a degree of risk when limited support is available. Severe reactions to loss may carry over into familial relations and cause trauma for children, spouses and any other family members. Issues of personal faith and beliefs may also face challenge, as bereaved persons reassess personal definitions in the face of great pain. While many who grieve are able to work through their loss independently in the process of healing, Grief counselling, professional support groups or educational classes, and peer-led support groups are primary resources available to the bereaved. In the United States, local hospice agencies may be an important first contact for those seeking bereavement supports whereas in Indian context, family member, friends and other social institutions plays a dominant role as there are still dearth of bereavement professionals and not many educational institutions are providing such specialised courses

Differing bereavements along the life cycle may have different manifestations and problems which are age related, mostly because of cognitive and emotional skills along the way. Children will exhibit their mourning very differently in reaction to the loss of a parent than a widow would to the loss of a spouse. Reactions in one type of bereavement may be perfectly normal, but in another the same reaction could be problematic. Although the death of a spouse may be an expected change, particularly as we age, it is a particularly powerful loss of a loved-one. A spouse, though, often becomes part of the other in a unique way: many widows and widowers describe losing 'half' of themselves, and after a long marriage, at older ages, the elderly may find it a very difficult assimilation to begin anew. Further, most couples have a division of 'tasks' or 'labour', e.g. the husband earn livelihood or bread winner for family, the wife works as home maker which in addition to dealing with great grief and life changes means added responsibilities for the bereaved. Social isolation may also become imminent as many groups composed of couples find it difficult adjust to the new identity of the bereaved.

Some researchers such as Dr. Elisabeth Kübler-Ross and others have pointed out sequential stages including denial, anger, bargaining, depression and acceptance, which are commonly referred to as the "grief cycle". As research progressed over the past 40 years, many who worked with the bereaved found stage models too simplistic and instead began to look at processes, dynamics, and experiences common to all. John Bowlby, a noted psychiatrist, outlined the ebb and flow of processes such as shock and numbness, yearning and searching, disorganization and despair, and reorganization. Examples of complicated grief can often be found in those who have survived a suicide attempt. While the experience of grief is a very individual process depending on many factors, certain commonalities are often reported. Nightmares, appetite problems, dryness of mouth, shortness of breath, sleep disorders and repetitive motions to avoid pain are often reported, and are perfectly normal. Even hallucinatory experiences may be normal early in grief, and usual definitions will not suffice, necessitating a lot of grace for the bereaved. The metaphysical has always been an intrinsic part of human existence. Knowledge of corporal existence has in fact been and continues to be underlined by notions of soul and spirit. This has existed virtually in every society throughout history but the questions related to existence of God, life after death, rebirth become more pronounced after bereavement and grief. In such situation, social support turns bereavement and grief coping processes towards more motivated human behaviour and its meaningful relationship with society. Bereavement often refers to the state of loss, and grief is a multi-faceted response to loss. Severe reactions to loss may carry over into familial relations and cause trauma for children, spouses and other family members. In India, bereavement has never been part of professional help due to its cultural richness, and unique characteristics like joint family system, close neighbourhood relations lie in the philosophy *vasudhivakutumbkam*. The purpose of presenting two case studies of bereaved families. The main objective is to understand intra personal and interpersonal process of social support in coping with bereavement and grief. With the help of these two studies, the researcher has made efforts to describe interactional processes and to analyze agencies and their functions of social support in coping with grief.

Case of Mr. Ram Lal whom Bereavement Caused due to Murder of His Wife Mrs. Meenakshi Grover

i) Background :

Mrs. Meenakashi Grover was found dead in her drawing room in the evening of 30th June. Mrs. Meenakashi was working in Ambala in a Government office as a senior clerk and used to travel everyday between Ambala and Chandigarh. Her husband Mr. Ram Lal aged 47 years was working as Head Clerk in a nationalized bank and refused his promotions to avoid transfer from Chandigarh. She was murdered in day hours when Mr. Ram Lal was in his office. Police cracked the case and caught the murderer who was a domestic servant in neighbor's house. He confessed before the police that he has acted on the advice of his lone son of Ram's first wife.

ii) Personal details:

Mrs. Meenakashi was an educated women with lots of suppressed desires. She had a house in Chandigarh and living away from her brother/sister. Her parents died in an accident leaving the responsibility of four siblings on her. Being eldest in the family, she took role of a parent and

brought up her lone brother and three sisters. In the process of making everyone adjusted she postponed her own marriage and studies.

iii) Personal Details of Bereaved spouse/ family:

Mr. Ram aged around 47-50 years has a well built, rather hefty person. He was high school passed and never attended a college. Due to his bitter experience with his wife, he became suspicious and peevish person. Inwardly he has craving for woman's company, but he always portrayed suspectful and anti women attitude. To him, women are non committed, Bewafa, clever like fox, unfaithful and unbelievable. Because of such feelings, he does not earn respect among lady colleagues and otherwise. He is well organized and has a love for home décor. He used to spend two to three hours in his garden. He has not many friends and not many visitors. His gardener, domestic help, milkman are his friends. He has no social life. He has restricted number of relatives. His other company is his tenants, normally a young couple.

iv) Death and Death Rituals:

Mr. Ram performed all rituals as prescribed by Hindu Vedic traditions. Once he was posted in Karnal, so he was aware of place Pehowa. He went to Pehowa and Haridwar to perform desired rituals for such departed souls. He donated money at Gaushala, Orphan Home Panda's while performing rituals. He distributed all clothes of his wife among poor and needy people. He organized a feast on 10th day and offered food to more than 500 persons. The menu of the death feast was quite impressive, Infact, he developed apathy to the money and he spent a good amount of money during mourning period.

v) Family & Social Life Before Bereavement:

Mr. Ram hails from Himachal and joined Punjab National Bank as clerk 25 years ago. He was transferred to number of places in North Region. After his marriage, he settled down in Chandigarh and made a big Bunglaw at the outskirts – Delhi highway. He was married in his own caste group and marriage was arranged by his parents as per local traditions. Two years of his married life passed trouble free and they were blessed with a son. According to family, sources his wife, Ramwati's behavior changed and her life style also changed, often there were visitors from her native place which Ram objected. On one evening when he returned from his office, he found his wife in compromising position with someone else. He threw her out from the house and filed a divorce petition on the basis of bigamy, but it was difficult for him to prove. The court levied the maintenance of wife and his child which amounted 40% of his salary. He agreed to pay maintenance and decided to live all alone. The divorce petition came to an end when he produced the hospital record of birth of another child delivered by Mrs. Ramwati. His 20 years of long life full of mistrust and problems made him a bitter person and his deep rooted anti women attitude confirmed into hostility against the entire women community. For him, every women is liar, cheat, cheap and untrustworthy. As he become aged, he was convinced that he should summary but his dominant brahaviourical convictions that he can have women in his life at his desire, learns and conditions. Through matrimonial advertisement, he found Meenakashi whom he married in a simple function but he could not lead happy married life but he always presented as happy person. On other hand, Mrs. Meenakshi was a nice, simple, decent and clear hearted person without many complexities. Mr.

Ram severed his ties with his brothers and parents. He also had no relations with son of his first wife till he remarried. In fact, Mrs. Meenakshi brought his son back in his normal life.

vi) Spouse and Children after Bereavement:

Mr. Ram was a very reserved person. After the death of his wife, that too by his step son, he lost his mental balance. For first two months, he was busy in performing death rituals and responding to police queries and investigation. After the arrest of his son, he felt guilty not being a good father. He lost his self-esteem. He went in process of self-condemnation, which led him in personal maladjustment. He went on long leave for six months. Once he joined the office, he could not adjust himself with the work environment. He started quarrelling with consumers and used to behave abnormally. Bank has forced him to either go on leave or leave the job. He used to correlate everything with his wife. He has created imaginary relationship with his wife. Incidents like calling her for breakfast or lunch, knocking bathroom to ask her to be ready for office etc. became routine matter. Day by day his behavior was worsening up. Unfortunately there were not many person in the city to look after him. A distant relative came to his house who used to take his care. A social worker from Psychiatric Department came for family visit. He confirmed that he is leading for Obsessive Compulsive Psychosis and may need hospitalization. His six-year married life ended with such grief that he lost his mental balance.

The bereavement or grief is a natural outcome of the loss of loved one and it affects other the person (s). It was really shocking to find out the state of Mr. Ram Lal. The loneliness feeling of alienation and putting himself in self-confined boundaries led to this stage of his mental health. In absence of friends, relatives and colleagues, it was expected outcome in the given circumstances. On the other hand the family members – brother and sister of Ms. Meenakshi were also bereaved. They immediately took possession of Ms. Meenakashi's house. First few days, Meenakshi's brother and sister showed their presence, but soon they started blaming Mr. Ram for everything. Infact, they fought with Mr. Ram and charged that Meenakshi's murder was done on his behest. No one tried to assess the gravity of loss and grief through which Mr. Ram passed. Such allegation has also shaken Mr. Ram and resulted in sorry state of affairs.

vii) Social Support:

Mr. Ram is already a reserved person with limited contacts. He has almost no friends and he does not enjoy positive relationship with colleagues. He does not belong to any sect or religious group. At the time of crisis, he was virtually alone except a few persons who were paid for their services like domestic help, sweeper, milkman or motor mechanic. The gardener comes on Saturday/Sunday for upkeep of the garden, but all such people have limited role. There was hardly anyone who could console him for the loss. Further, his wife's death was unnatural. The involvement of step son also kept people away as no one wants to be figured out in police list. The continuous absence of social support led him to disturbed mental state.

viii) Emerging points for discussion and interventionn:

- 1) The complexities of relationship lead one to new problem. The spoiled relationship with his wife lad to estranged relationship with lady colleagues.

- 2) Mr. Ram passed through neurogenesis. His thoughts against women circulated and rebuild hatred against women which ultimately resulted in estranged relationship.
- 3) The faulty socialization and relationship with his son who has been brought up by his first wife created problems after problem.
- 4) Mr. Ram suffered with hypertension, loneliness, alienation, stress, depression which ultimately clubbed as Obsessive-Compulsive Neurosis (?)
- 5) In absence of social support, any person can't face bereavement. It is difficult to diffuse grief or dilute its intensity in absence of social support.

Case Study II: Death of Swamiji – a Case of Group Bereavement

i) Background :

The researcher got an opportunity to witness the death and bereavement of a saint- Chief of a Big sect of Hindu religion who had mass following in the region and other parts of the country. Popularly known as Swamiji, he had refused to go the hospital and also stopped taking medicines three months before his death. Prior to his death, he was taking *and living on Gangajal* only. A large section of his devotees believed that Swamiji has left his body on his own volition and also announced his departure to the God's heaven a year ago. His death has been treated as a wishful death.

ii) Personal Details:

Swamiji was educated, simple, sober and smart person with conviction and commitments. Swamiji had a routine life, simple life style and devoted to Lord Krishana. Swamiji's day started at 4 A.M. and ended at 9 P.M. The first four hours (4 A.M. to 8 A.M.) were Swamiji's personal timing for his daily routine work and Puja, followed by two hours for public and disciple's interaction. After 10 A.M. Swamiji used to deliver *Prabachan* (Sermon), which was widely telecasted. Afternoon to around 4 P.M., Swamiji was either reading or meeting Ashram officials or dignitaries. He had another two hours of Satsang and *Prabachan* in the evening. In between he is working with gardener and visiting Bal Ashram – residential children home for destitute. In late evening, he spent time with people with problems, teaching Yogic exercises, prescribing Ayurvedic medicines or prescription for betterment of people with complaints or problem. He then took a simple dinner and finally spent time in the reading room before going to the bed. Swamiji had no personal property as he had already donated everything to Ashram and nominated one of his oldest disciple as his heir. This had in fact annoyed his son. Further Swamiji was regarded as a protector, problem solving person, helper, doer, and philanthropist and so on. Swamiji had always a cool mind, smiling face, free from tension.

A strong believer of God, Swamiji knew six sciences of foretelling – astrology, astronomy, palmistry, numerology, tarot reading and forehead telling. Once someone asked about his relationship with his son and wife, Swamiji replied that they are not allowed to live together by our planetary stars. It is better in larger interest of society that we are living apart from each other. Swamiji used to call its around 2500 disciples as committed followers and his extended family.

iii) Personal Details of Bereaved spouse/ family:

Group bereavement has its own style manifestation. The beating chest, mass fasting, group chorus, group discussion, even suicidal attempts were common sight. It was interesting to point

out that Ashram management had announced the construction of Swamiji's memorial and the appeal of contribution proved more appealing than anything in whole episode. People had donated in larger quantity.

iv) Death and Death Rituals:

Swamiji's death brought bereavement and grief to many people. Swamiji's mortal remains were kept for Darshan. Swamiji's disciples made elaborate plans for funeral ceremony. They intended to earn name, fame and money - all in one go. The public Darshan was planned and facilitated by sending buses to the different villages located in adjacent states. Efforts were made to telecast the whole two days long Bidai programme on T.V. channels. The books, cassettes, photographs, posters and other materials were available for sale.

The cremation of Swamiji was organized in a most planned and systematic manner. A team of 21 Pandits came from Varanasi/Allahabad to perform his last rights. A huge podium and Pandal with capacity of 2- 4 lakhs people was installed. After proper ceremonies, Swamiji was kept on sandalwood pyre. The interesting part was that all last rites were performed by his heir not by his son. This led to criticism among a group of people. The environment of celebration was created and many of them described that Swamiji has left to the heaven as he had wished for his death. In smaller group, people were discussing the great good deeds of Swamiji.

v) Family & Social Life before Bereavement:

Swamiji - Mr. Brindavan Behari had a family, his wife and a son, which he left at the age of 35 years. No one knew the real age of Swamiji, but it is believed that he must not be less than 80 years of age though he always appeared not more than 60 years. Swamiji hailed from Pura Dharamshala District. His son Alakh, was also the age of around 60 years. His wife had expired years ago. Interestingly his son was not in his contact and had bitter relations till he joined Ashram.

vi) Spouse and Children after Bereavement:

Life after death of Swamiji in Ashram has marginally changed. The biggest challenge and change came from Swamiji's son who felt cheated, deprived and dejected. He was called from his home town when Swamiji was on his death bed by his closest disciples. He had surrendered before Swamiji and asked to forgive him for his conscious and unconscious sin, mistakes, follies and even misbehaviour. After his unconditional apology, he was told that Swamiji had forgiven him and he had to stay in the Ashram as long as he wishes. Soon after his death, he had been told that Swamiji had deprived him for performing his last rites. It was shocking news in light of his conversation with Swamiji in past one week. He has discovered a father in Swamiji and he tried to understand socio political compulsions of Swamiji to keep his family away from ashram. But he was astonished that his father had never seen too harsh to deprive him performing his last rites. It was only a well planned agenda of a few closed disciples who were afraid that public or general disciples may like to install him on Gaddi as his natural heir. In order to defame and confirm his bad image among public, the Gang of four disciples created this story that Swamiji has expressed his desire to keep his son away from performing his last rites. His son was most bereaved person as he had to face double sided attack on his integrity

and identity, on other hand, there was a mass frenzy of bereavement and grief. Many disciples, especially women had refused to accept that Swamiji is no more. They had denial of death. Their argument was that Swamiji can never be dead. He has left his body, his soul/spirit will come back and he will reincarnate soon.

vii) Social Support:

Faith and belief played a significant role as social support the presence of large number of devotees and followers extended group support to each other. Each one appears to be robbed and followers extended each other support in their own group. Majority of group members believed that in death codevine act that swamiji knew about his death as he has predicted the same. The device songs, bhajan, personal stories, anecdotes extended healing effects. Swamiji's son and other gang both received social support from different quarters. Not many followers were part of politics behaviour two groups.

viii) Emerging points for discussion and intervention:

1. Followers accepted the death of Swamiji as the desire of almighty God some considered that Swamiji has left body. He is immortal, and he will soon take rebirth.
2. There was mass bereavement. Followers have their own way of exposing grief. Many have even refused to accept his death as their denial came an account off his position next to God.
3. In group bereavement, social support appears in different from some what closer to self help group. Followers supported each other to bear the loss of their loved one.
4. Death brings many issues and ownership of the property and Monday benefit is one of the crucial one.
5. Bereavement among masses may appear in more organised form and can also be coped through organised ways.

Conclusion:

The most significant behavioural reactions were denial, helplessness, anger, guilt, self-condemnation resulting in depression. His spouse and family members have deep faith in the God. There is influence of religious and spiritual teachings on the coping process. Mourners also help bereaved families in extending desired support with others just to fill up vacuum. Interestingly, bereaved person felt their deceased spouse's presence in some form imaginable relationship). The bereaved families have mostly received strong social support from the friends in comparison to others like family members and neighbours, probably family and extended family being away in urban areas. Social networks help in fulfilling tasks/needs of the bereaved families. The role of customs and rituals is very much relevant. The issues of personal faith and beliefs also face challenge. In Indian context, family member, friends and other social institutions plays a dominant role as there is still dearth of bereavement professionals. The Bereavement counselling is one of the emerging area of social work intervention and there is no doubt that the Indian knowledge system cannot be ignored any more. There is need to develop practice module for professional social workers.

WHEN PROTECTORS NEED PROTECTION: THE CASE OF CHILD WELFARE COMMITTEE (CWC), PANNA, MADHYA PRADESH

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Abstract

The Child Welfare Committees (CWCs) are constituted in every district across the country for catering to those children who are found in difficult circumstances and need protection. Such children are defined as child in need of care and protection and the CWCs are mandated to provide care and protection to them. The Juvenile Justice (Care and Protection of Children) Act, 2015 conferred the power of metropolitan magistrate or the judicial magistrate of first class to CWC for discharging their duties. However, it remains prone to strange vagaries for performing their duties and passing orders for the best interest of children. One such case is reported from Panna, Madhya Pradesh, wherein the CWC was implicated in a matter related to sexual offence with a child though the CWC has performed its duty. This ordeal raises a pertinent question as to whether the CWCs are themselves protected before providing the same to children. Hence, this paper looks into the case of CWC Panna, Madhya Pradesh, which is a case of miscarriage of justice.

Keywords: Child, Welfare, Panna, CWC, Madhya Pradesh, Justice, Committee

In a recent case of negligence of law and violation of the provisions of Juvenile Justice (JJ) (Care and Protection of Children) Act, 2015 (JJ Act, 2015), the CWC of Panna District, Madhya Pradesh was implicated in a matter of sexual offence with a 15 years old girl child. The Jujharnagar Police Station (Madhya Pradesh) registered an FIR under section 17 of the Protection of Children from Sexual Offences (POCSO) Act against the chairperson and the members of CWC Panna, Madhya Pradesh (Dwary, 2025) because they performed their statutory duties as per JJ Act. Though the provisions of the JJ Act provide for challenging the orders of CWC before Court of Session yet the police registered a case and even arrested one of its members. Subsequently the Department of Women and Child Development, Madhya Pradesh suspended the chairperson and the members of CWC, Panna and gave the charge of CWC Panna to the CWC of the adjoining district.

Order of CWC in POCSO matter

As per the media reports, in the instant matter, the family of a 15 years old girl child filed a missing person report with the local police station in Panna District because the child did not return back from school on 16th January, 2025. The girl was traced from Gurugram on 17th February, 2025 along with a man from different village and caste. The man was arrested under the POCSO Act along with the provisions of kidnapping and rape and sent to jail. The victim was produced before the CWC, Panna, who initially placed the child in One Stop Centre (OSC) at Panna and later restored her to one of her cousins, who happened to be the sister-in-law of the accused. The aggrieved family members filed a complaint in this matter with Panna collectorate office and after the intervention of district collector Panna, the CWC reviewed its

ruling and brought the child back to OSC on April 29, 2025. The child revealed in her counselling sessions at OSC that the physical relations were made between her and the accused on multiple occasions during her stay at her cousin's place and the police filed a case of abetment of sexual offence, under section 17 of POCSO Act, against the chairperson and the members of CWC because they failed to obtain a social investigation report from Department of Women and Child Development of the State and sent the child with her cousin sister (Dwary, 2025).

Whether the police have the power to register a case against CWC

In the instant matter the police officials, who have produced the matter before CWC and those who have registered the case against CWC should have been penalized, as they both have violated the law:

Firstly, the Special Juvenile Police Unit (SJPU) or local police is supposed to produce the child victim of sexual offence only if any of the following three conditions are applicable as per rule 4(4) of POCSO Rules, 2020 viz. the child living in the same or share household with the accused or the child is living without parental support and in a child care institution or the child is found to be without any home and parental support. Also, if any of the above conditions are met, the SJPU or the local police has to make an application to CWC mentioning whether the child is in need of care and protection and request for detailed assessment by CWC (POCSO Rules, 2020). Since, in the present matter the family support was available, the requirement to produce the child before CWC was not mandatory.

Secondly, it is not mandatory to conduct social investigation before placing the child under the care, of a parent or guardian or fit person and the child can be placed with such a parent or guardian or fit person pending enquiry, provided an undertaking on Form 20 is obtained from such a parent or guardian or fit person as per rule 18 (8) of JJ Model Rules, 2016 (JJ Model Rules, 2016). Even if it is accepted that the social investigation is a mandatory provision of the Act before placing the child either with a parent or guardian or fit person and the CWC has not followed the procedure, it does not amount to abetment.

Thirdly, the One Stop Centre (OSC) does not come within the jurisdiction of CWC, as the SOP of Ministry of Women and Child Development, Government of India provides that the OSC shall notify the CWC immediately about the matter and ensure safe placement of the child in a child care institution (MWCD, n.d.). Therefore, the CWC does not have the power to issue any direction to OSC.

Fourthly, the CWC is conferred with the power of metropolitan magistrate or the judicial magistrate of first class as per section 27 of the JJ Act whereas section 101 of the JJ Act provides that any person aggrieved by the order of CWC can appeal to the Children's Court (i.e. Court of Sessions) within 30 days from the date of such order (JJ Act, 2015). Hence, the order of CWC can be challenged in the higher courts and in this case, it is the session court or POCSO court where the order of CWC should have been challenged. Since, the provisions of JJ Act supersede the provisions of any other law as per section 1(4) of the JJ Act (JJ Act, 2015), the police do not have the power to register an FIR against CWC in this matter. The only legal option available with the police is to challenge the order of CWC.

Fifthly, the High Court of Judicature at Allahabad Lucknow in Habeau Corpus Writ. Petition No- 308 of 2025, Mayank Ojha (Minor) Thru. Here Natural Guardian Mother Shaahi Versus State of U.P. Thru. Home Secy. Lko. and 6 others has categorically mentioned that the CWC is conferred with the power of Magistrate and the orders passed by it can be assailed before the appropriate court as mentioned in section 101 & 102 of the JJ Act (Mayank Ojha (Minor) Thru. Here Natural Guardian Mother Shaahi Versus State of U.P. Thru. Home Secy. Lko. and 6 others, 2025).

Sixthly, only the High Court under section 528 of Bharatiya Nagarik Suraksha Sanhita (BNSS) (BNSS, 2023) or the Supreme Court of India under Article 142 of the Constitution (Constitution of India, 2024) has the power to pass any order or direction in the interest of justice even if they are in contrary to the provisions of any law. Therefore, the FIR can be registered against the chairperson and the members only after the order regarding the same should have been issued either by the High Court or the Supreme Court. In the present matter, the police neither approached the High Court of Madhya Pradesh nor the Supreme Court of India to obtain the order to register a FIR and arrest the chairperson and the members of CWC. The police exercised the power, which is available only with the High Court of Madhya Pradesh or the Supreme Court of India and not with the police.

Conclusion

In conclusion, it can be said that the police have violated the statutory as well as constitutional provisions by registering FIR against CWC Panna and arresting one of its members. But it is the travesty of justice that the CWC is implicated though it followed the law but the police officials, who violated the statutory provisions and the constitutional provisions are roaming scot free. Further, the state government has abandoned the CWC and let the chairperson and the members be prosecuted for performing their duties under the provisions of law. Hence, this is a clear case where the protector needs protection.

The only remedy in this matter is that the chairperson and the members of CWC must be reinstated by the state government and compensated by the police as well as the state government. Also, stern legal action must be taken against erring police officials, who have violated statutory and constitutional provisions.

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CHALLENGES AND SUPPORT FOR CHILDREN IN COMMUNITY SETTINGS

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Introduction

Childhood is considered the foundation of a healthy and confident life. However, many children living in urban communities silently struggle with emotional neglect.

While physical needs such as food, clothing, and education may sometimes be fulfilled, emotional care and attention are often missing. Emotional neglect affects children's confidence, behaviour, communication, and mental wellbeing. This issue remains less discussed in society because emotional pain in children is not always visible.

Background of the Case

During fieldwork experience in a community area, interaction was conducted with several children belonging to low-income families. Most parents were engaged in long working hours and had very limited time for communication with their children.

Although children attended school regularly, many of them lacked emotional connection with family members.

One child of approximately 11 years old was observed sitting alone during activities and avoiding interaction with other children. The child appeared quiet, fearful, and emotionally withdrawn. Through continuous rapport building and informal communication, it was understood that the child rarely received appreciation, emotional support, or attention at home. The parents were busy earning income for the family and were unaware of the emotional impact on the child.

Problems Identified

1. Emotional neglect within the family
2. Lack of confidence and social interaction
3. Fear of expressing feelings
4. Poor emotional wellbeing
5. Feeling isolated despite living with family members

Social Work Intervention

The following interventions were carried out during fieldwork:

1. Developing trust through regular interaction
2. Conducting child-friendly activities and group participation
3. Providing emotional support through informal counselling
4. Encouraging creative expression through drawing and storytelling
5. Creating awareness among parents regarding emotional needs of children
6. Motivating parents to spend quality time with their children

Outcome

Gradually, positive behavioural changes were noticed in the child. The child started participating in group discussions, interacting with peers, and expressing thoughts more openly. Parents also became more aware of the importance of emotional bonding and communication with children.

Conclusion

Emotional neglect among children is a hidden social issue that requires greater attention from families, communities, and social workers. Children need emotional care as much as physical support for healthy personality development. Social workers can play a significant role in identifying silent emotional struggles among children and promoting supportive family relationships within communities.

MOTHERED TOO SOON: THE STORY OF NISHA AND THE QUIET REBELLION OF CARE

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I met Nisha (name changed for confidentiality) on a warm afternoon inside the SPYM shelter home in Nizamuddin Basti during my field work, a place where children’s laughter and women’s silences coexist in fragile balance. Her story came not in dramatic confession, but in the quiet absence of a school bag, the practiced way she held her five-year-old sister’s hand, and the way she stood half a step behind adults. Nisha was eleven, but already fluent in the language of sacrifice. She had dropped out after Class V, not because she lacked intelligence or desire, but because she had become a caregiver. Her girlhood had been interrupted and absorbed into the long, invisible work of “m/othering” that society never questions but always demands.

In the vocabulary of development discourse, Nisha would be categorized as a “school dropout.” But categories *flatten people*. What they do not capture is how gender and class quietly conspire to convert girls into caregivers long before they understand what it means to choose. In Nisha’s case, her exit from school was not a moment but a slow erosion, shaped by her family’s migration from Jharkhand to Delhi, the precarity of urban informal work, and the absence of affordable childcare. With her mother working as a domestic helper and her father employed in construction under the PWD, Nisha became the default caretaker of her younger sister, Aisha. Feminist scholars have long noted how girl children are often positioned as “little mothers” in low-income households - assigned responsibilities far beyond their age, and rarely acknowledged as agents whose consent matters (Chopra & Zambelli, 2017). Mothering, in such contexts, is not a choice but a compulsion, internalized through cultural expectation and economic necessity.

To disrupt a cycle, one must first recognize it and then *be willing to sit with its discomforts*. As I listened to Nisha’s story, it became clear that the problem was not just her absence from school, but the unspoken assumption that her absence was inevitable. Her parents, both uneducated and overworked, viewed education not as a right but a luxury they could not afford, especially for a girl. Her father’s skepticism was rooted in survival: what would schooling offer that labour couldn’t? These were not irrational fears, but symptoms of a system that had failed them repeatedly. As a student social worker, I knew that pushing too hard would alienate them, and yet saying nothing would betray Nisha’s future. The intervention began with a series of slow conversations, not about school at first, *but about possibilities*. About how education could help Nisha become employable, independent, even help her contribute to the family’s future income. It was not a lecture, but a dialogue. Feminist praxis, I’ve come to believe, often looks like this: patient, relational, grounded in mutual trust. It is not about rescuing the vulnerable; it is about *repositioning them as decision-makers in their own lives*.

Finding a suitable educational pathway for Nisha proved to be more complicated than anticipated. After years of absence from formal learning, her academic levels had significantly

regressed. A basic trial test revealed that reintegrating her into an age-appropriate class would be setting her up to fail. Eventually, we explored the National Institute of Open Schooling (NIOS) through The Hope Project NGO, where she could begin from the foundational level, despite her age. It felt like a paradox, placing an eleven-year-old in a kindergarten curriculum, but this was the only model that acknowledged her gap without dismissing her potential. Around this time, I began to understand how educational systems, even well-intentioned ones, often reinforce exclusion by demanding rigid conformity from those least equipped to offer it. Institutions ask children like Nisha to fit in, instead of adapting to fit them. It was here that the ideological began to feel deeply personal. The question was no longer just how to educate Nisha, but how to *uphold her dignity* in the process. Education, as Freire reminds us, *must begin not with curriculum, but with context*.

As we worked to reintroduce Nisha into education, another reality emerged, the presence of her five-year-old sister, Aisha. In the quiet equation of poverty, one child's care often becomes another's unpaid work. Nisha had dropped out not because she lacked potential, but because no one else was available to watch her sibling. It became evident that without addressing Aisha's schooling or day care, Nisha's return would remain fragile. We explored possibilities within the Hope Project's crèche, but its age cap excluded Aisha. The pre-entry level at the Hope school had criteria that Aisha narrowly missed. Even well-meaning institutions seemed to speak in a language of regulations that didn't understand the lived chaos of working-class families. Eventually, with persistent coordination and advocacy, we secured her admission to a nearby MCD school, supplemented with evening tuition at Hope. The process demanded more than logistics; it required gentle confrontation with a deeply embedded belief in the family that girls, especially younger ones, did not require formal education. This shift did not happen through theory, but through storytelling, listening, and multiple cups of tea across doorways. Social work, I was learning, *often advances through such small acts of relational labour*, not grand policy moves.

Before she was a student, *Nisha was a caregiver*. The mornings that should have been filled with school uniforms and notebooks were instead marked by feeding her sister, tidying up the home, and waiting by the door until her parents returned. *No one had called her a mother, but she had lived the role* - attentive, self-sacrificing, and quiet. What struck me most was not just the loss of education, but the *loss of childhood*. Feminist thinkers have long argued that mothering is not biologically determined; it is assigned, often through invisible expectations shaped by gender and class. In Nisha's case, "mothering" was a role scripted into her life before she had the language to refuse it. My role as a student social worker, then, was not simply to facilitate admission paperwork. It was to disrupt a narrative that had taught her to erase herself. Helping her return to school was not a bureaucratic intervention, it was an act of feminist restoration. It was a way of saying, "You do not owe the world your girlhood." What began as an individual intervention gradually unfolded into a quiet disruption across the community. Word spread that Nisha had returned to school. That her sister too had been admitted. For many families in the neighbourhood, this was not just news — it was an unsettling and liberating signal. Conversations began to surface: Could other girls go back too? Would someone help them navigate the system? Perhaps most importantly, it opened a space where caregivers, especially mothers themselves, began to question the roles assigned to their daughters. In this slow transformation, I began to see the possibility of **collective mothering**

— not in the traditional sense of women tending to children, but as a feminist act of reshaping the structures that had once kept them silent. Hope Project teachers, community workers, and even neighbours played their part. Together, we were not just helping girls access classrooms; we were redrawing the boundaries of who gets to care, who gets cared for, and whose childhoods are allowed to remain their own.

In the weeks that followed, I kept returning to a quiet realisation — that feminist work is often about creating the conditions for someone else to reclaim what they were told to give up. Nisha’s story is not one of rescue, but of reclamation. She did not need permission to dream, but she needed someone to tell her that her dreams were valid. In that moment, social work and feminist mothering became indistinguishable. Both required presence, patience, and a refusal to accept that this — this poverty, this gendered fate, this truncated girlhood — was all she could have. I did not mother Nisha in any traditional sense. But perhaps I stood, momentarily, in the place of a world that should have — one that should have protected her, nurtured her, and insisted she was worth the future she now dares to build.

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FAR FROM HOME, CLOSE TO RESPONSIBILITY

The Role of Professional Social Workers in Empowering the India Diaspora

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Working with expatriate employees, many of whom belong to the Indian diaspora, has given me a deeper understanding of the emotional realities they live with every day. While they may appear to be managing well on the surface—going to work, fulfilling responsibilities, and staying in touch with their families—there is often a quieter, more complex emotional experience beneath it. For many Indian expatriate workers, stress is not limited to the workplace. A significant part of their emotional burden is connected to their families back home in India—aging parents, children’s education, financial responsibilities, and relationship concerns. Being physically distant while emotionally involved creates constant inner conflict. They often feel responsible, yet unable to be present when their family needs them the most. In the current context, uncertainties in the Middle East—whether related to regional tensions, economic changes, or job security—have added another layer of concern. For the Indian diaspora, this uncertainty is not just about themselves, but about the well-being of their families in India who depend on them. This dual responsibility can intensify anxiety and make even routine challenges feel overwhelming.

One of the most striking observations in my interactions is the silence around emotional struggles. Many individuals do not openly share what they are going through. Cultural values, a sense of duty, and the need to “stay strong” for their families often prevent them from expressing vulnerability. As a result, stress is carried internally and may appear indirectly through irritability, withdrawal, or reduced focus. There have been moments where a simple, genuine question has opened the door to deeper conversations. When given a safe and respectful space, individuals gradually begin to share their concerns—sometimes for the first time. These interactions highlight the importance of presence, patience, and non-judgmental listening.

At an individual level, counselling interventions such as active listening, emotional validation, and simple stress management techniques have proven helpful. Group sessions, where workers come together to discuss shared challenges, often create a sense of connection and mutual support. Realizing that others are facing similar struggles can reduce feelings of isolation. At the same time, there is a strong and meaningful role that professional bodies like the National Association of Professional Social Workers in India can play. Through its wide network of members, NAPSWI has the potential to actively contribute to the empowerment of the Indian diasporic community. By creating awareness, facilitating support systems, and encouraging dialogue between expatriates and their families, such professional platforms can extend their impact beyond geographical boundaries.

Equally important is the need to focus on the empowerment of returned Pravasi workers. Many individuals, especially from low-income groups, come back to India after years of working abroad, often without adequate preparation for reintegration. They may face financial instability, lack of employment opportunities, and emotional adjustment challenges. This transition phase is critical and requires structured support. NAPSWI and similar professional networks can play a vital role here by promoting community-based rehabilitation, skill-building initiatives, counselling support, and awareness programs tailored for returnees. Supporting this group is not only a social responsibility but also an opportunity to help them rebuild their lives with dignity and stability.

From my experience, supporting expatriate workers is not just about addressing stress – it is about understanding their journey of responsibility, sacrifice, and resilience. As professionals connected to the field of social work in India, we have an opportunity to extend our role in a more inclusive and impactful way. In conclusion, a connected approach – supporting expatriates abroad while also strengthening systems for families and returnees in India – can create a more holistic framework of care. With the collective efforts of professionals, organizations like NAPSWI, and community networks, we can move towards a more supportive and responsive system for our diaspora.

LIFE SKILLS ARE KEY TO DRUG PREVENTION

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Each year on June 26, World Drug Day turns the global spotlight on the drug crisis. This year's theme — *"World drug problem: persisting issues, new challenges, innovative responses"* — reflects both the stubbornness of the problem and the growing sophistication of efforts to address it.

The campaign brings together international bodies, national governments, and local communities around a shared agenda. At its core are six priorities: shielding vulnerable young people from exploitation by criminal networks; reinforcing security at ports, airports, and borders to choke off trafficking routes; harnessing data to design sharper, evidence-based drug policies; safely locating and neutralizing illicit chemical stockpiles; and fortifying the justice system at every stage — from investigation through prosecution.

For communities closest to the crisis, the initiative also offers a way forward for farmers trapped in the illegal drug trade, supporting their transition to legal, sustainable livelihoods. Several recent studies have established the need for concerted efforts to combat substance abuse in our country. In recent years, the central and state governments in India have taken significant steps to strengthen preventive efforts through coordinated initiatives, awareness campaigns, community engagement programmes, and rehabilitation services. The National Action Plan for Drug Demand Reduction (NAPDDR), an initiative of the Ministry of Social Justice and Empowerment, Government of India, focuses on curbing substance abuse across the country using a multipronged strategy encompassing prevention, education, awareness campaigns, capacity building, and the treatment and rehabilitation of affected persons. Programmes such as *Nasha Mukta Bharat Abhiyaan*, *Community-based Peer-Linked Intervention (CPLI)*, and *Outreach and Drop-in Centres (ODIC)* have been developed based on the principles of prevention at the primary, secondary, and tertiary levels. The interventions highlight the importance of prevention, early intervention and psychosocial support. The effectiveness of demand reduction strategies depends on strengthening protective factors to prevent both the initiation and early identification of substance abuse. Life skills-based interventions, grounded in the World Health Organization's ten core life skills—self-awareness, empathy, critical thinking, creative thinking, decision-making, problem-solving, effective communication, interpersonal relationship skills, coping with stress, and coping with emotions—constitute a vital component of preventive efforts in India. These competencies are particularly relevant to drug prevention.

Self-awareness enables young individuals to recognize their emotions, strengths, limitations, and personal values. Enhanced self-understanding increases the likelihood of making

responsible decisions and adopting healthy coping strategies during challenging situations. Empathy fosters the development of positive relationships and sensitivity toward others, thereby strengthening social connectedness and reducing isolation. Cultivating empathy also supports resistance to peer pressure. Critical and creative thinking skills enable young individuals to analyze situations, question harmful influences, and identify constructive alternatives. Critical thinking, in particular, supports informed decision-making in contexts where peer pressure and social modeling may contribute to the initiation of substance use.

Decision-making and problem-solving skills are essential for adolescents and youth to respond effectively to real-life challenges and avoid turning to substances for relief. Effective communication and interpersonal relationship skills facilitate clear self-expression, the ability to seek support, the maintenance of healthy relationships, and the assertive and respectful resistance of negative influences. Equally important are the skills of coping with stress and coping with emotions. Life skills help youth and adolescents manage peer pressure, academic stress, family conflicts, and emotional struggles.

India's drug prevention initiatives are increasingly integrating life skills education into major programs. The *Nasha Mukta Bharat Abhiyaan* (NMBA) prioritizes community and school-based awareness. Under NMBA, the Ministry of Social Justice has introduced *Navchetna* life skills modules for students in grades 6 to 11 and their parents. The teacher-led *Navchetna* program is currently being piloted in 300 districts, delivered in regional languages, to develop core life skills such as decision-making and refusal strategies among students. The program aims to delay substance initiation and connect at-risk children with early counseling services.

Beyond educational settings, NMBA has established *Community-based Peer-Led Interventions* (CPLI) and *Outreach and Drop-In Centres* (ODIC) to engage vulnerable youth outside of school environments. Through CPLI, local non-governmental organisations recruit and train adolescent peer educators who conduct numerous weekly sessions on life skills and healthy living for neighbourhood youth, reaching hundreds each year. Official CPLI guidelines stipulate that each peer educator must deliver a minimum of 240 hours of life skills training per year, with at least two hours per day dedicated to youth volunteers.

The ODIC scheme targets adolescents and young adults who are either using substances or are at high risk. ODICs function as community drop-in centers located near identified drug-use hotspots. Staffed by counselors and outreach workers, these centers offer non-judgmental support, including basic health screenings, group therapy, and life skills activities. The integration of life skills training within ODICs is intended to facilitate more rapid recovery.

The *Rajagiri Community-based Prevention of Drug Abuse* (RCOMBAT), funded by the Ministry of Social Justice and Empowerment, and the *Udhayam Project* of Kochi City Police have used a life skills model in their targeted intervention programs to build psychological resilience among high-risk youth and children in vulnerable urban and rural communities through interventions in schools and communities. The programmes incorporated interactions with parents, teachers, and other stakeholders, including *anganwadi* workers, ASHA workers, and Local Self Government representatives, as collaborators in drug prevention. By integrating these evidence-based life skills frameworks, both initiatives have moved beyond traditional

policing and awareness campaigns. Instead, they actively equip participants with essential coping mechanisms, peer-refusal strategies, and emotional regulation techniques, effectively addressing the root psychosocial triggers of substance abuse at the grassroots level. Professionals such as social workers and psychologists were trained to implement the programme using a scientifically developed curriculum and a life-skills-based manual for drug prevention. This specialised training and the standardised manual helped maintain consistency, enabling professionals to accurately measure behavioural outcomes and scale the intervention across diverse community demographics.

All drug prevention interventions can benefit from fostering participants' life skills, as effective prevention focuses on strengthening personal protective factors rather than solely discussing substances. These internal buffers encompass core cognitive and emotional competencies such as self-awareness, critical thinking, problem-solving, and decision-making, which enable individuals to assess risks objectively and manage psychological distress constructively. Additionally, nurturing essential social and self-management skills—including effective communication, interpersonal relationship skills, empathy, coping with stress, and coping with emotions—empowers individuals to regulate intense emotions and navigate complex social environments without resorting to substance use.

Integrating the ten WHO core life skills transforms the prevention paradigm from a reactive, fear-based approach to a proactive, empowerment-driven strategy. Equipping youth with psychological tools to establish healthy boundaries, resist negative peer pressure, and manage daily anxieties creates a sustainable defense against substance abuse. Investment in life skills education extends beyond preventing drug initiation; it fosters resilient, self-reliant individuals with the autonomy to choose a healthy, drug-free lifestyle.

Given the substantial evidence supporting its efficacy, practitioners and policymakers should prioritize the expansion of life skills education across India through a multi-tiered approach. In educational settings, this entails moving beyond tokenistic, one-off lectures and embedding structured life skills instruction into the national curriculum, with an emphasis on professionally led workshops in addition to teacher-led models. Experts trained in experiential pedagogy, including role-plays and group dynamics, should facilitate these sessions to promote active personal development. Concurrently, community interventions should empower non-governmental organizations to implement evidence-based programs that integrate life skills with positive youth engagement activities, such as sports and the arts. Institutional frameworks like CPLIs and ODICs must also mandate standardized life skills curricula, supported by rigorous, localised research and regular outcome assessments.

Eventually, this structural pivot redefines the frontline of drug demand reduction from a message of forced restriction to one of informed decision-making to prevent drug use. By prioritising cognitive and emotional competencies, public health strategies address the root vulnerabilities of substance initiation rather than merely policing its availability. True primary prevention does not rely on a young person's fear of a substance, but on their belief in their own potential and their capacity to navigate life's inevitable challenges with clarity and

confidence. Through this systemic empowerment, India can transcend reactive crisis management and foster a generation inherently insulated against the allure of addiction.

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CONFLICT RESOLUTION IN MARITAL DISPUTES: A CASE STUDY ON MISUNDERSTANDINGS AS A SOURCE OF DISAGREEMENT

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Introduction

Marital misunderstandings frequently lead to family disputes in rural areas, affecting the emotional, social, and financial well-being of the household, including the future of off-springs. A breakdown in communication, financial strain, conventional gender expectations, the involvement of extended family, and inadequate emotional intelligence can all contribute to marital discord. Social work intervention is crucial in resolving such conflicts by employing methods like counselling, mediation, fostering trust, and improving communication.

This case study details a conflict resolution process conducted in two villages in the Bulandshahr district of Uttar Pradesh. One village was located Dibai Block and the second village was in Anupshahr block. The social worker who facilitated this process was also serving as a Cluster Coordinator for the Pardada Pardadi Educational Society (PPES). PPES is a non-governmental organisation working for rural development and the promotion of girl child education in that locality. Formation and promotion of self-help groups (SHGs) of rural women was the backbone of rural development. To maintain confidentiality and ethical standards of social work practice, the names and identities of individuals and the village have not been disclosed.

An overview of the case

During regular SHG gatherings and community/family welfare field activities, village women associated with SHGs shared details about frequent arguments between a local married couple. Further, they stated that her *bahu* (wife of her son: daughter-in-law) has been living in her *pihar* (parental home) since nine years. The members of SHG mentioned that the couple often argued verbally, which sometimes disturbed the neighborhood's peace. The problem was also starting to impact the children's education and emotional health.

The family comprised seven members: the husband, wife, three children, and the husband's elderly mother and father. Farming was the primary occupation of the 36-year-old husband, with seasonal construction work being an occasional supplement. The 31-year-old wife, a homemaker, was responsible for livestock and domestic duties. The family came from a poor socio-economic background, and their income was not stable. Financial worries, societal expectations, and household duties contributed to stress within the family.

Nature of the Problem

The argument mainly stemmed from the couple's misinterpretations and lack of effective communication. During preliminary interaction, it was observed that the spouse suspected her husband of sharing family matters with neighbour's wife and making decisions independently without consulting him. She also had doubts about her husband about the extra-marital affairs with the neighbour's wife. On the other hand, her elderly mother-in-law expressed emotional distress because her grandsons and daughters were not going to school. Grandmother was worried about the future of the children. So, she was in favour of settling the conflict between husband and wife.

The following factors exacerbated the conflict:

1. The couple experiences suspicion and struggles with communicating with each other.
2. The impact of gossip from neighbours and extended family.
3. Gender roles influenced by patriarchal traditions.
4. Not understanding emotions and lacking trust in each other are the issues.

Their constant arguments caused emotional distance to develop between them. Whenever conflicts arose, the children exhibited fear and emotional unease.

Role of the Social Worker

As a Cluster Coordinator at Pardada Pardadi Educational Society, my responsibilities included community engagement, awareness generation, but family counselling was not part of my job. After obtaining informal consent from the PPES and both spouses, a casework-based intervention process was initiated. The best thing was that the family members of both spouses were associated with SHGs. So, it was easy to start this process. But the village of wife was under the supervision of another coordinator. The coordinator received a request to initiate this process. And conflict resolution through participatory methods with the help of office bearers and senior members of SHG.

Rather than pointing fingers, the intervention's primary goal was to reduce conflict. The cluster coordinator's intention was to get communication back on track, rebuild confidence, and make family connections better.

Evaluating the circumstances

The assessment involved home visits, one-on-one conversations, observation, and informal counselling. The focus was on establishing a good relationship so that each person felt respected and that their views were understood.

Husband's Perspective

The husband stated during the discussion that he was willing to talk to improve the current circumstances for his children's future. He explained that his wife was having unnecessary suspicions about him. Despite working long hours, the family struggled to meet expenses; it was not possible for him to engage in extramarital affairs. He also said that he belongs to a lower caste, and it was not possible for him in such a type of relationship because that was an upper caste dominated village. He expressed that his wife's criticism and her sharing of domestic disputes with her family left him feeling disrespected. This perspective provides a liberal approach to social worker to talk with other sides.

Wife's Perspective

Wife was also worried about the future of her children. She mentioned that she frequently experienced emotional isolation and a lack of support. She mentioned that she talked about her issues with her relatives solely for emotional support, not to show disrespect to her husband. In addition to that, she shared that she felt unheard during the decision-making and worried about constant arguments. She was still rigid about his extramarital affairs. But she expressed emotional distress and worry regarding how the conflict was impacting their children.

The process of intervention

In line with social casework principles, the intervention incorporated acceptance, confidentiality, empathy, individualization, and participation.

1. Rapport Building and Trust Development

The initial phase centered on developing a trusting relationship with the husband and wife. Several visits were made to foster a supportive atmosphere. The aim was to remain neutral so that neither spouse experienced judgment. They were both guaranteed that their information would be kept secret and told that the aim was to improve the family's welfare, not to find fault.

2. Individual counselling sessions

Individual counselling sessions were conducted with each spouse to explore their emotions and viewpoints.

The husband was advised to channel his anger and stress productively. Rather than resorting to suspicion and accusations, the counselling highlighted the significance of emotional regulation, patience, and effective communication. She (wife) received counselling and emotional support addressing self-expression, stress reduction, and healthy communication. It was suggested that she communicate her worries respectfully and keep private family matters out of neighbourly discussions whenever workable.

The purpose of these sessions was to allow for emotional release and to decrease anger.

3. Integrated Counselling and Issue Resolution

After rapport and trust were established, joint sessions were started. The following ground rules were put forward:

- Speak respectfully.
- Avoid blame and insults.
- Listen without interruption.
- Prioritize finding solutions over assigning blame.

They received advice to have an open dialogue about their matters. The conversation, once facilitated, led to a better understanding of the confusion. For example, the husband realized that his wife's conversations with her family members were not acts of disrespect but attempts to seek emotional support. Similarly, the wife understood that her suspicion contributed significantly to her husband's irritability. Now she was more concerned about the lives and education of her children.

By reducing assumptions, this session helped them to develop more mutual empathy towards each other.

4. Building Effective Communication Skills

Daily conversations lasting 15–20 minutes, free from arguments, were among the simple exercises introduced. The couple was guided on healthy communication practices:

- Discuss the life and education of children.
- It's important to talk about family issues without getting upset.
- Communicate openly about responsibilities and expectations.
- Use respectful language during disagreements.

5. Family Involvement

The elderly mother had strong feelings about the importance of neutrality and emotional backing. It was recommended that she avoid partiality and support harmonious dialogue. The emotional welfare of children was also indirectly addressed with parents to raise awareness about the outcomes of conflict.

6. Informal support networks within the community

Broader awareness of family harmony, communication, and mutual respect was fostered among women of SHG and in village interactions, without compromising confidentiality, through the coordinator of PPES. This contributed to lowering gossip and making help-seeking behaviour more accepted.

Difficulties encountered during intervention

There were a few difficulties that arose while we were working through it. First, the coordinator relied heavily on the office-bearers and senior members of SHGs. But their unskilled approach and judgmental attitude stopped the process for months. Also, patriarchal beliefs of these women influenced attitudes regarding authority within marriage.

Second, the husband was initially hesitant to attend counselling because of social stigma and traditional masculine expectations. In his opinion, familial concerns should not be disclosed publicly. But he was the only son of his parents and no one in his family was there to care for his aged parents.

Third, interference from neighbours occasionally reignited old disputes. Fourth, financial hardship remained a continuing stress factor because there was no financial support from the organisation. Also, out of these two villages, the village of Anupshahr was not under the supervision of the coordinator. In this way, time was also a limiting factor for the coordinator to visit the home of the wife under this study. To address these impediments, one needed to exercise patience, undergo repeated counselling, and maintain consistent follow-up.

Result of the Action

Over about four months of infrequent visits and therapy, a slow but steady improvement began to be seen. The wife returned to her husband's home. The husband and wife had fewer verbal disagreements. They started communicating better and felt they understood each other's emotional issues more.

Husband began discussing financial issues openly with his wife, and the wife reduced suspicion regarding her husband. The wife expressed feeling a greater sense of respect and emotional safety. She also tried to talk to her husband about her worries instead of telling others.

The home setting made the children feel more relaxed and comfortable. They were admitted to the school of PPES with the help of PPES school staff and SHG members. With less intervention, the elderly mother fostered a more supportive environment for peaceful interactions.

Techniques in Social Work Practice

The social work strategies employed were:

- Casework intervention
- Counselling and emotional support
- Mediation and conflict mitigation
- Rapport building
- Active listening and empathy
- Problem-solving approach
- Family-centered intervention
- Follow-up and monitoring

These strategies helped restore faith and clear up confusion between them.

Reflections and Learning for the Social Worker

The case revealed that domestic conflicts in rural settings are often caused by a lack of understanding, poor communication, economic hardship, emotional neglect, and social factors, rather than intentional harm. This experience highlighted how crucial patience, impartiality, understanding, and culturally aware interventions are. Addressing family problems effectively means acknowledging and understanding both the feelings and the underlying structures that contribute to them. This case reinforced my belief, as a social worker and Cluster Coordinator at Pardada Pardadi Educational Society, that lasting solutions arise from family members actively engaging and improving their communication, rather than relying entirely on outside help.

Conclusion

Addressing disputes in marital relationships necessitates timely intervention, empathetic listening, counselling, and the development of trust. This instance of marital misunderstanding resulted in emotional distress and a destabilized family environment. Social workers intervened with counselling, mediation, communication training, and follow-up, leading to the family's gradual return to harmony.

The case highlights the importance of community-based social work in the rural areas of Anupshahr and Dibai Block, Bulandshahr district, where NGOs and social workers can effectively contribute to strengthening family bonds and preventing the escalation of domestic conflicts. Furthermore, it illustrates that effective resolution of misunderstandings is possible when both parties engage in open dialogue and cooperate to enhance their collective well-being.

REVIEW OF FIRST DECADE OF CSR (2014-15 TO 2024-25)

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The concept of Corporate Social Responsibility (CSR) was formally introduced in 1953 by the American economist Mr. Howard Bowen in his book "Social Responsibilities of the Businessman", making him widely known as the "Father of CSR". The concept of CSR is voluntary in almost all countries of the world but India is the only country in the world where it is mandatory for profitable companies to contribute 2% of the net profit before tax towards CSR.

It has been 11 years since the concept of CSR concept is introduced in the year 2014. As our economy is growing at the rate of 6.5%, the amount of CSR available is increasing every year at almost the same rate. In the financial year 2014-15 an amount of Rs 10,066 crore was spent by 16,785 profit-making companies which would have reached an estimated Rs 35,000 crore for the financial year 2024-25. Looking at this, it is estimated that this amount will go up to approximately Rs 50,000 crore in the financial year 2029-30 and approximately Rs 1,50,000 crore in the centenary financial year 2046-47. Maharashtra, Gujarat, Karnataka, Uttar Pradesh, Tamil Nadu are the first 5 states where maximum CSR funding is available. Most part of the CSR funding is being provided in education, health, environment, skill development, employment generation. An account of how much funding has been made available through CSR channels in the past decade is as follows:-

Financial Year	No. of Companies	CSR Amount Expenditure (Rs. Cr.)
2014-15	16,785	10,066
2015-16	21,498	14,366
2016-17	19,933	13,465
2017-18	21,525	17,100
2018-19	25,181	20,218
2019-20	22,985	24,965
2020-21	20,240	26,211
2021-22	18,623	25,933
2022-23	24,392	29,986
2023-24 (Estimated)	25,000	32,500 (Estimated)
2024-25	35,000 (Estimated)	26,000 (Estimated)
2025-26	40,000 (Estimated)	27,000 (Estimated)

Source: National CSR Portal

To begin with CSR guidelines were issued in April 2010 to introduce the concept of CSR in India and mandated for-profit public sector enterprises to spend 2% of their net profits on CSR. The then Director General of Indian Institute of Corporate Affairs Dr. Bhaskar Chatterjee, who is known as the father of CSR in India, first formulated these guidelines starting with PSUs. On the recommendations of Dr. Chatterjee, Section 135 Schedule VII was inserted in the Companies Act, 2013 which governs CSR activities in India. From the financial year 2014-15 all private sector companies with a minimum average net profit of Rs. 5 crores or more, has a net worth of 500 crores or more or Rs. 1,000 crore in turnover, they were directed to spend 2% of average profit before tax on CSR. All companies were advised to follow and implement the social projects listed in Schedule VII. Anything spent on social projects beyond this Schedule VII will not count as CSR.

CSR officers of social service organizations and companies also need training for planning, regulating and controlling CSR. So all CSR projects can be effective. The first few years were spent learning what CSR is and how to implement it. There were many mistakes as well as financial scams in the first 5 years but now the situation is improving. There have been many changes in the CSR guidelines and norms from time to time, apart from donations to PM Care, Swachh Ganga Abhiyan, all IITs, ICMR, DRDO, CSIR and Autonomous Institutions, all CSR expenditure on promotion of R&D and 17 Sustainable Development Goals (SDGs) qualify for CSR. The UN launched 17 sustainable development values in 2015 which include water, healthcare, sanitation, education, skills development, hunger, gender equality etc. By the year 2023, countries were required to fulfill this. But as no satisfactory progress has been made, this period has been postponed till December 2030. Except for about 40 developed countries in the world, the situation is not satisfactory in rest of the countries. By the end of 2024, India's rank in this regard is 134 out of 193 countries. A lot of work needs to be done on this.

The revised CSR guidelines allow undertaking CSR initiatives anywhere in India independently or in collaboration with other companies. With effect from April 1, 2021, all NGOs and implementing agencies seeking CSR funding must have a CSR 1 number unless they can be awarded CSR funding. In addition, CSR spending has been further regulated by placing more responsibilities of disclosure, transparency, documentation and compliance on the company's board and CSR committee in the public domain on CSR reports on the company's website. It is very important to keep track of changes in CSR guidelines from time to time. From February 2022, companies are required to obtain CSR 2 registration certificate. After the initial first 2-3 years of experience CSR delivery and implementation has improved a lot and has had a very positive impact on the community to improve people's livelihood on a sustainable basis. In the early years, companies faced problems such as lack of good CSR projects, lack of credible NGOs or implementation partners, lack of knowledge and experience in the social sector. The essential CSR is going to revolutionize human life in India towards the social sector and sustainable development goals. The NSE Social Stock Exchange, started from the 22nd February, 2023, The Unnati Foundation, Bangalore was the first NGO who were successful in raising Rs.1.80 crores in December 2023 for the skill development of 10,000 youths and the second listing was done in March 2025 raising Rs.39.80 lakhs in March, 2025 for the skill development of 3,000 youths. Thus SSE will bring sufficient financial capital to

the social sector for the expected social sector reforms. This will transform the social sector into social entrepreneurship and provide many more opportunities for social workers, professionals, academics, philanthropists and charitable organizations to make a huge difference in the lives of the needy and the poor. CSR will complement the efforts of central and state governments to achieve greater heights in the UN Sustainable Development Goals. It will also significantly improve the Human Development Index which stands at 140 out of 189 countries today which will be in the top 100 in the year 2030. India will be a ray of hope for the world by 2060 as it will have the largest youth and population in the working age group of 20-60 years. By 2050 we may reach zero population growth.

There are many successful CSR projects that have changed the lives of people living in the respective project areas. For example, GAIL Ghantagadi project in Chirle village, Tal. Uran, Dist. Raigad, Water ATM Project by Jalduoot Foundation at Purandar, Dist. Pune, Bosch Limited's Skill Development (Setu) Project, Hindustan Zinc Limited's Shiksha Sambal Project and many more. The success ratio of CSR implementation has increased from 50% in the initial years to almost 80 to 90% now, which is a remarkable achievement in the first 10 years of CSR. For planning, regulation and control of CSR there is a great need of training for CSR officers of social service organizations as well as companies. So all CSR projects can be effective. Social service organizations only expect funding from CSR channels but do not have the basic knowledge required. Viz. How to write a proposal, required documents and CSR 1 registration certificate are required, what is Schedule VII or Social Return, how much it should be. For this, training should be made mandatory for the NGOs to get CSR funding so that the charitable projects of CSR are very effective.

In this way most of the projects are implemented with excellence resulting in short term improvement on a sustainable basis. It will further improve with stricter rules and guidelines on monitoring and evaluation issued by the Ministry of Corporate Affairs. What is needed now is more CSR projects focusing more on people living in remote, hilly terrains and rural areas. Many such areas lack basic infrastructure like water, health care, sanitation, education etc. In addition to employment in the informal sector, bringing back children who have been out of school due to Covid-19 restrictions is another challenge. Corporates are being encouraged to spend more of their CSR budgets in 117 aspirational districts across India.

If we look at the performance of CSR projects compared to social projects implemented by central or state government, it proves that CSR projects are very good and efficient in showing very effective results. If the government spends Rs. 100, the actual benefit is Rs. 40 or 50 and if the same amount is spent by the corporate under CSR, the benefit would be in the range of Rs. 80 to Rs.90 with some projects even more. It is also mandatory to ensure that the Social Return on Investment (SROI) is at least 1 in all CSR projects otherwise they will be declared as failed projects and the concerned CSR officers of the company will be held accountable. SROI 1 means that the benefit to society must be equal to or greater than the amount spent on CSR. This means Rs. If you spend 100 the benefit should be at least 100 or more. Such provisions should apply to all government sponsored social projects. Bringing private sector expertise into the social sector was the sole objective of the government while launching CSR

in India and it has been largely achieved. It may be a good idea to hand over some government-run projects to corporate CSR teams in collaboration with NGOs. This will have a high success rate in less time as they will be implemented without any fear or bias, commercial and without any political influence. The government or the municipal corporation should also seriously consider doing some pilot projects along these lines. I am sure this will change the picture of social sector in India through CSR. Corporate CSR support is essential to create a bright future for the social sector in India.

Rajya Sabha has recently on 5th December 2025 has passed a resolution whereby the CSR eligibility of companies has been brought down from Rs.5 Cr. Net profit to Rs.3 crores. This will increase availability of CSR funding. In addition appointment of an Independent Director with over 10 years' experience in CSR is also made mandatory. While the Loksabha propose to increase this limit of Rs.5 cr. Net profit to Rs.10 cr. Which would be substantially reduce availability of CSR funding. This would affect working of NGOs who are doing various CSR projects across India. The final decision will be taken in the Winter Session of the Parliament. Let us wait & watch.

A SOCIAL WORKER ROLE AT INDUSTRY: PRACTICAL EXPERIENCE

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A role of a social worker is perceived as being limited to working with marginalized and deprived sections of society—children, women, the elderly, transgender, SC, ST, persons with disabilities, and other vulnerable Sections of the society. Earlier, even I thought that social work practice is primarily confined to these sectors where direct attention and intervention are most visibly required.

After successfully completing my Master of Social Work, I entered unexpected sector the industrial setting. I was appointed as a role for a Social **Welfare Officer** in an industry where most professionals came from management backgrounds such as MBA or engineering. Initially, the role of a welfare officer did not align fully with the theories and frameworks I had studied during my academic training tenure. The on-going work appeared similar to routine administrative or HR-related activities. Being a passionate social worker, I consciously chose to integrate **social work values, principles, and professional ethics** into my role in Industry. Over time, I realized that industrial social work carries immense scope for welfare practice, especially in maintaining **harmonious industrial relations and employee well-being**.

Impact of social workers across Industrial Relations

The role of a social welfare officer in Industrial Setting is dynamic. It begins with knowing C Understanding employees as individual with their needs, Problems, challenges, personal circumstances, and workplace related issues—particularly those on the shop floor. The aim is to ensure a **safe, secure, supportive, and harmonious work environment**, enabling smooth organizational functioning.

At workplace, I observed that many female operators lacked confidence in openly sharing their issues, concerns. It was observed that due to the Production pressures opportunities often reduced for interaction, which used to create barriers for meaningful engagement between both workers and management. Such challenges highlighted the need for a unique, innovative approach to connect with employees beyond the shop floor.

Home Visit Programme: Key Welfare Initiative

To address this big gap, a key initiative called the **Home Visit Programme** was introduced. As a social welfare officer, I personally participated in conducting home visits for female operators. Operator's visit was planned systematically. This experience was unique and significantly different from routine workplace practices. After shift hours over, female operators from shopfloor were taken to their homes in company-arranged cars instead of regular routine buses and were presented with tokens of appreciation, such as mugs. The

gestures made all of them respected and valued. The operators welcomed expressed happiness and excitement warmly, which helped develop trust and a sense of belongingness. The objective of the home visit was not merely social interaction, but to understand their **real-life conditions**, challenges, and workplace experiences in a neutral and comfortable environment. During Home Visits visits, operators used to share their thoughts regarding all operational activities, workplace arrangements, facilities, training needs, engagement initiatives, and behavioural concerns. These discussions helped to identify short-term improvements for example skill development training, wellbeing- activities, and infrastructural changes at workplace.

Incident: At Home Visit

As usual practice of Home Visit, I visited the home of an operator (name confidential). On proceedings it was found that the living conditions were congested C unhygienic, which reflected the daily struggles faced by many workers. The Operator greeted me warmly and offered me a place to sit on a mattress on the floor since there was no bed there. As a social worker, with empathy I accepted the situation with, maintaining the principles of **acceptance and non-judgmental attitude**. We discussed on personal background, family, career goals, and workplace experiences. I noted few improvement points suggested by her, such as the need for additional fans in her warehouse section due to discomfort. At that moment, another young woman entered in the same room. I got to know that she was the operator's roommate and even had worked in our company for only three days.

Sexual Harassment Uncovered

Through trust-based conversation, that young woman gradually revealed her experience at the company. She discussed about her supervisor, that he began behaving overly friendly on her first day. Soon after, he used to send inappropriate personal messages, including questions about dinner, lunch, heart and hug emojis, and later he continued with unnecessary C unwanted personal Life communication. He stood too close at her workstation and called her after shifts hours unnecessarily, which caused her significant discomfort. She felt unsafe, she chose to leave the company quietly. This information which was disclosed by her was needed immediate action as it was alarming. I assured her that her complaint against the supervisor would be taken seriously C appropriate action would be taken to ensure safety. I motivated C encouraged her to rejoin the organization with the assurance of a harassment-free and harmonious work environment. The Intervention with Outcome On next day, a formal investigation was started. On the supervisor's part, all the Call logs and message records were clearly established all misconduct. After following the company's policy and POSH guidelines, **disciplinary action** was taken against supervisor. After final investigation completion C when disciplinary action was taken against supervisor, that young woman rejoined the organization back and was given the reassurance regarding safe and respectful workplace. Young women's confidence was restored back, and then she continued her employment back with dignity.

The Impact

The Home Visit Programme Initiative by a Social Welfare officer proved to be a powerful intervention. It was a platform where employees expressed problems freely, away from workplace pressure. In this mentioned case, it resulted in justice for an employee who had left silently and helped prevent further harassment of other female operators at the workplace. By this experience my belief that **social workers can create meaningful impact in any sector**, including the industries. Professional Social workers need to identify the hidden problems, create safe spaces for open dialogue.

Conclusion

Impact of Social workers across the country, across the different sectors are huge. Rather than being limited to specific sectors, social workers are fundamentally defined by its commitment to ethics, dignity C Social Justice. For Fostering inclusive workplace at industrial setting, Professional Social Workers play key roles with their respective responsibilities. They do welfare interventions, ensures safety, protects workers' rights, ensures harmonious environment by acting as a catalyst.

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Social Work Digest is a thematic publication of the National Association of Professional Social Workers in India (NAPSWI), created to provide a dedicated platform for scholarly and reflective articles by social work professionals and members across the country. It focuses on critical discussions, professional experiences, and emerging perspectives within the field of social work in India. Each issue highlights a specific theme to encourage meaningful academic dialogue and knowledge sharing. The Digest complements NAPSWI's newsletter and supports the growth of professional learning, collaboration, and documentation of best practices, helping strengthen the social work community and guide the future development of the profession.

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