

Higher Secondary Course

SOCIAL WORK

Class XII



**Government of Kerala
Department of Education**

**State Council of Educational Research and Training (SCERT), KERALA
2015**

THE NATIONAL ANTHEM

Jana-gana-mana adhinayaka, jaya he
Bharatha-bhagya-vidhata.
Punjab-Sindh-Gujarat-Maratha
Dravida-Utkala-Banga
Vindhya-Himachala-Yamuna-Ganga
Uchchala-Jaladhi-taranga
Tava subha name jage,
Tava subha asisa mage,
Gahe tava jaya gatha.
Jana-gana-mangala-dayaka jaya he
Bharatha-bhagya-vidhata.
Jaya he, jaya he, jaya he,
Jaya jaya jaya, jaya he!

PLEDGE

India is my country. All Indians are my brothers and sisters.

I love my country, and I am proud of its rich and varied heritage. I shall always strive to be worthy of it.

I shall give my parents, teachers and all elders respect, and treat everyone with courtesy.

To my country and my people, I pledge my devotion. In their well-being and prosperity alone lies my happiness.

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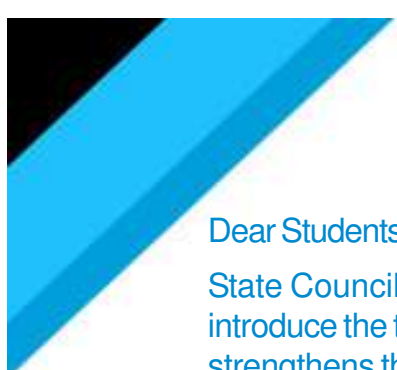
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Dear Students,

State Council of Educational Research and Training is happy to introduce the textbook for Social Work for Class XII this year, which strengthens the foundation of social work as a modern profession.

This book addresses the methods of social work, its relevance and application, leadership and communication, its significance in the practice of social work profession, development and resource mobilization. It emphasizes the approaches of development and preparation of various developmental project plans. The health and family life education discussed in this text book guide adolescents to lead a healthy and successful life. The guidance and counselling, and international social work motivates students towards social work and related career.

The activities included in the book enable the learner to construct knowledge through cooperative and collaborative learning. Hope you make use of them fruitfully to convert your knowledge to vital purposes both for your progress and for the betterment of society at large.

I am quite sure that this textbook can make the learning of Social Work a delightful and enriching experience.

SCERT appreciates the sincere efforts of the Textbook Development Committee and Team.

As an organization committed to systematic reform and continuous improvement in the quality of its products, SCERT welcomes comments and suggestions for further revision and refinement.

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Additional Information



Let Us Do



Check Your Progress

Social Work- Primary Methods

Significant Learning Outcomes

After the completion of this chapter, the learner:

- Appraises the relevance of the primary methods of social work - social case work, social group work, and community organization - as problem solving methods.
- Describes the definitions, characteristics, principles, processes and the relevance of relationship in the practice of social case work.
- Describes the definitions, characteristics, principles, processes and phases of group formation and group dynamics in the practice of social group work.
- Describes the concept, characteristics, principles, and the systematic process in the practice of community organisation.

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Scientific social work today has emerged as a problem solving profession. Compared to other disciplines, professional social work is relatively young. This profession helps individuals, groups and communities to find solutions for their problems. Finding solutions to problems enhances the quality of life and fosters development.

Problems at any level (individual or social) can affect the interactions and relationships of individuals. Thus, the social adjustment and functioning get affected. Hence, social work intervention in solving problems promotes social functioning of individuals.

Social work, over years has evolved a scientific knowledge base, clear skill sets and a strong value system, unique to the profession. Field level experience and research in addressing the problems of various client groups have resulted in developing different strategies and methods. These methods differ in their application of knowledge, skills, and techniques.

The methods of social work are social case work, social group work, community organization, social action, social welfare administration, and social work research. They are broadly classified as primary and secondary methods. Case work, group

work, and community organization which require direct interaction with the client are called the primary or direct methods. The other three, for which face-to-face contact with the client is not essential, are termed as secondary or indirect methods. In this unit, let us discuss the primary methods in detail.

1.1 Working with Individuals- Social Case Work



Let us read the story of Geethu.

Geethu is a 10th standard student. She was good in her studies and very jovial with her friends. She was interested in games, art and literary activities. Recently she lost interest in studies and kept away from extra curricular activities. Her exam scores went down considerably and she became impulsive and easily irritable.

How can we help Geethu to overcome her difficulty?

•

By giving advice to Geethu, warning against her misbehaviour, alienating her from the group, complaining to the class teacher, etc.

Do you think these would help Geethu? Don't we need a more reasonable and systematic approach to help her?

Social case work is the method of social work that offers help to individuals like Geethu to overcome their psycho-social difficulties. Here the case worker establishes a good relationship with Geethu and encourages her to communicate her problems. Through this, the case worker studies her problems and its causes. S/he helps Geethu in understanding the problem she is facing and helps her to identify the ways to overcome it. Further Geethu is enabled to choose a suitable course of action to overcome her problems.

Thus, social case work is a primary method which assists individuals to adjust with his/her environment in a more satisfying way. All human beings are part of society and everyone has different social roles and duties. While performing his/her duties and roles, individual faces many problems in one form or the other. Every individual reacts differently to his/her social, physical and economic environment. In other words, the problems with similar nature affect different individuals differently. Some people are able to manage these problems by their own efforts, while others need external intervention. Social work has developed a method to help individuals with psycho- social problems, in order to enable them to cope more effectively with their problems and to have a better social adjustment with the environment.



List out three problems faced by individuals that can be solved using case work.

It is clear that individuals face numerous problems in their day-to-day life. These problems can be resolved easily if scientific helping process is used. Social case work is the method used by social workers to help such individuals. Let us define social case work:

Social case work can be defined as the method of social work that helps individuals with psycho-social problems to realize and resolve it. It is a scientific process which demands professional relationship to explore the causes of the problem and to develop solutions.

Linton B. Swift defined social case work as “**the art of** assisting the individual in developing and making use of his personal capacity to deal with problems which he faces in his social environment.” According to Perlman, “**social case work** is a process used by certain human welfare agencies to help individuals to cope more effectively with their problems in social functioning.”

Characteristics of Social Case Work

As a problem solving method at individual level, social case work has its unique characteristics:

- i. It helps individuals to solve their psycho-social problems.
- ii. It helps individuals to make better adjustment with the environment.
- iii. It is a progressive process which involves study, diagnosis, treatment, evaluation, etc.
- iv. It requires the knowledge and skill in establishing professional relationship.
- v. It mobilizes the capacities in individuals and resources in the environment.
- vi. It ensures personality development.

Objectives of Social Case Work

The basic purpose of social case work is to enable the clients to function effectively in their social environment and to experience a more satisfying life. Thus, social case work helps an individual client to solve his/her psycho- social problems. The following are the objectives of social case work:

- i. To understand and solve the psycho-social problems of the individual.
- ii. To strengthen the personal efficiency of individuals to handle problem situations.
- iii. To remedy and prevent the problems in social functioning.
- iv. To develop skills and resources to enhance social functioning.

Principles of Social Case Work

The Himalayan mountain ranges attract millions of travellers from the world over. Kailas, Manasa Sarovar, Pangong lake, Khedar, Gangothri, Simla, Kulu, Manali etc. are hill stations on mountain tops visited by many. The travelers to these destinations are given certain directions. For example, persons with heart or lung diseases should not join the team, avoid travel during rainy season, carry warm clothes including thick leather shoes and gloves, carry light food items and emergency medicines, avoid deep relationships or conflicts with strangers, etc.

Why do you think that the travelers must follow these guidelines?

-

It is clear that by following these guidelines, the traveler can successfully complete

the journey avoiding casualties and failures. Similarly for the successful completion of any task we need to follow specific rules or guidelines. These rules or guidelines are generally known as the principles.

Social case work, the method built on one-to-one relationship, has certain specific principles for its effective practice. These principles have evolved mainly from the philosophical value base of the profession and field experiences. Research studies also have contributed in shaping these principles. The social case workers are expected to conform to these guidelines to ensure the success of intervention. Let us examine the major principles of case work.

a. Principle of Individualization

No two persons are alike in qualities and traits. Their problems may be the similar but the cause of the problem and the ability to handle it differs from individual to individual. Therefore, each individual client should be treated as a human being with personal differences. Thus the inherent worth and dignity of the individual must be respected considering his/her uniqueness.

b. Principle of Acceptance

According to the Principle of Acceptance, the worker should receive the client as s/he already is with his/her strengths and weaknesses. Acceptance helps the client to lower his social defense of submission, attack and withdrawal. The ultimate effect of the case worker's accepting approach is the establishment of counter acceptance by the client.

c. Principle of Purposeful Expression of Feelings

Purposeful expression of feelings is the recognition of the client's need to express his feelings freely, especially the negative ones. The case worker should listen purposefully, neither discouraging nor condemning the expression of those feelings. Sometimes, the case worker should even encourage the client to express his feelings since it has a therapeutic value.

d. Principle of Controlled Emotional Involvement

It is the case worker's sensitivity to the client's feelings. It means the capacity of the worker to understand the feelings of the client and to make appropriate responses without losing objectivity. Objectivity is essential for ensuring a balanced helping relationship. Here the case worker should be guided by empathy instead of sympathy.

e. Principle of Non- judgmental Attitude

It is a quality of the case work relationship. The case worker should not blame the client for his behaviour or problems. It is the impartial attitude towards the client without any bias. The worker should not make any subjective judgment based on guilt or innocence of the client. The social case worker should not relate to the client with a pre-judgmental or prejudiced attitude.

f. Principle of Client Self- Determination

It is the practical recognition of the client's freedom to make his own choices and decisions in the case work process. The responsibility of making decision should always rest with the client. The case worker may help the client to explore alternative courses of action and clarify their consequences to enable them to make appropriate decisions.

g. Principle of Confidentiality

It is maintaining the secrecy of information disclosed by the client during the case work process. What the client reveals to the case worker is not to be discussed outside. Client must be always assured about the confidential nature of the interview and the information shared. This ethical responsibility is a key factor in building trust.



Discuss in groups, how the principles of case work can be best used in Geethu's case.

Relationship in Social Case Work

Development of a good relationship between the case worker and the client is an essential element in the helping process. It is one of the most important tools of social case work. The social case work relationship is both professional and helping. The professional aspect demands a mutually agreed purpose, specific time frame, responsibility and authority. The nature of helping relationship includes empathetic



concern, commitment and obligation, genuineness, warmth, and acceptance.

The term 'relationship' was used for the first time in social case work by Virginia Robinson in her book 'A Changing Psychology in Social Case Work' in 1939. The social case work relationship is the dynamic interaction of attitudes and emotions between the social case worker and the client with the purpose of helping the client.

When the worker- client relationship is characterized by mutual acceptance, it is called 'rapport'. It refers to positive relationship which is characterized by accurate empathy, non- possessive warmth, genuineness and therapeutic value. It is also guided by certain principles and are purposive in nature. The purpose of this relationship is to help the client to solve his/her problems.

Transference and Counter- transference

These two terms denote the two subjective possibilities in the case work relationship. We always bring feelings and attitudes of earlier experiences to the new relationships. We are attracted or repelled by persons who consciously remind us of others who have influenced us. These transferred elements of attraction or repulsion, like or dislike, etc. occurs spontaneously at any time in a relationship. When the client relates inappropriately with irrational feelings towards the case worker, it is called transference.

The worker too, is a human being with emotions and feelings. S/he, like the client may consciously transfer positive or negative responses which are not objective towards the client. This deviation from professional relationship is called counter- transference. The social case worker has to direct the client to a realistic stand and must control himself/herself not to deviate from professional roles.

Components of Social Case Work

A person with a problem is helped by a case worker. There are professional agencies offering specialized case work service. Depending on the nature of the problem, the client has to undergo certain specific processes to find a solution. So in general, the case work service takes place when a person with a problem comes to a place offering help and undergoes a definite process. Hence person, problem, place, and process are considered as the components of social case work.

A. The Person

Person can be any individual facing a problem and seeking professional assistance from a case worker. In social work terminology s/he is called 'client'. This can be a man, woman or a child who is in need of some help to overcome the difficulties. The client is always under stress and may have a problem of maladjustment and role conflict. The case worker must accept and understand the client.

B. The Problem

The problem arises from some need, obstacles, frustrations or maladjustments and sometimes all of these together. The problem affects the social functioning of the person making him/her unable to adjust with the social environment.

A problem could be some current need like economic, medical, educational, or recreational, or stress like physical, psychological, or social. For example, alcoholism could be associated with psycho-social, or familial, or economic causes.

C. The Place

The place may be a social service agency, department, or human welfare agency, which provides psycho- social services or any other aid to the client with the help of a social worker. There are primary agencies such as counselling centers and social welfare agencies, and secondary agencies such as hospitals, schools, and industries.

D. The Process

Process in social case work is a progressive transaction between the case worker and the client. It consists of a series of problem solving operations. The phases in the process of social case work are study, diagnosis, treatment, evaluation, termination and follow-up. Though we logically place these stages in this order, these steps are not necessarily performed in sequence. The phases may overlap and may proceed simultaneously. Let us examine these stages:

a. Study (Psycho-social Investigation)

In this phase, information regarding the problem is collected by the case worker with the help of different tools. Study is the foundation upon which the various other helping phases are built. It helps to find out the social realities of the

clients and their environment to identify the problem area and to formulate treatment, rehabilitation, and after care strategies. The study could be done in various ways. They are:

- i. Interview with the client and other related persons,
- ii. Visiting the neighbourhood and the environment in which the client lives.

The social case worker studies the following facts:

- i. Nature of the problem
- ii. Client's feelings and reactions
- iii. Client's efforts to solve particular problems
- iv. Social conditions, and
- v. Personality of the client

Psycho-social Investigation of Geethu's Case

The class teacher referred Geethu to the school social worker. Social worker arranged initial meetings with Geethu and established a good relationship with her. Instead of merely giving advice and warnings, the social worker accepted her with her limitations. The trust and confidence gradually increased and she began to share her problems with the case worker. Besides the interview with Geethu, he collected information from her close friends, class teacher and her mother. The study revealed that she belongs to a lower middle class family with parents and two younger brothers. Her father was a truck driver who lost his job due to alcoholic addiction. Her mother is a submissive housewife and two younger brothers are students. Now the family faces severe financial crisis and finds it difficult to make the both ends meet. Geethu was fairly good in studies up to 10th standard. Her father- owing to a wrong perception regarding the importance of competition and performance in 10th standard examination- started to nag and pressurize her. At the same time a boy from her class began to disturb her and compelled her to maintain an exclusive relation with him. Some of her intimate friends teased her and the class teacher warned her to be more careful.

b. Diagnosis (Assessment)

Social diagnosis is an attempt to arrive at an exact definition of the social situation and behaviour disposition of a client. It is a search to find out the causes of the client's problems. Diagnosis is an explanation formulated in the light of known

facts. It is concerned with understanding the psychological or personality factors which affect the normal social functioning of the client.

There are different types of diagnosis— Dynamic diagnosis, Clinical diagnosis, and Etiological diagnosis.

Dynamic Diagnosis

It gives an understanding of the present problem of the client and the forces currently operating within the client. It answers the questions such as what is the trouble, what are the different factors contributing to it, etc.

Clinical Diagnosis

Under clinical diagnosis the case worker attempts to classify the problem experienced by the client.

Etiological Diagnosis

Etiological diagnosis is concerned with the explanation regarding the beginning and development of the problems of the client.

Diagnosis of Geethu's case

From the information gathered through the study, the case worker defines the problem situation of Geethu as follows: Geethu has lost harmonious relationship with parents, teachers and friends due to the recent developments in her life. She is very much tensed and confused because of the unnecessary compulsion of her father and the disturbance of the boy from her class. The warning of the class teacher made her resent and lose interest in studies. The alcoholism of her father and the resultant disharmony at home made her more depressive. The poor economic condition of the family bears on her affecting the motivation for studies.

c. Treatment (Intervention)

Treatment is the sum total of all activities and services directed towards helping an individual with a problem. Generally interventions are of three types- Direct intervention, Environment modification, and Use of existing services and resources.

Direct Intervention

The therapeutic intervention with the client is known as direct intervention. It is a series of interactions carried out with a purpose of helping the client to make

constructive decisions, maintain an emotional balance and reinforce attitudes favourable for growth and change. Listening the client with empathy and warmth itself is therapeutic in most of the cases. Based on the nature of the problem, intervention techniques such as counselling, acceptance, assurance, ego strengthening, motivation, ventilation, universalisation, etc. are used in direct intervention.

Direct Intervention to help Geethu

Social case worker helped Geethu to ventilate her fear, hatred and other feelings. He encouraged her to face the troubles from the boy with courage. Worker clarified her that the pressure on performance by her father is due to his over expectation and explained that the similar problem is faced by many other students in the school (Universalisation). He counselled her to get rid of her fear and instilled confidence (ego strengthening) to have regularity in studies and performance. She was oriented to accept the need to study well and to have a good career to make her family self reliant in future.

Environment Modification

Environment modification refers to all attempts to correct or improve the situation in order to reduce strain and pressure of the client. The emphasis here is on modifying the situation. This method is often referred to as indirect method of intervention as the focus is on the change of physical environment, or an alteration of any of the social systems, which may be essential for the client for better functioning. Any change that we effect in the family relationship, work environment, peer interactions etc. of the client come under environment modification.

Environment Modification to help Geethu

Through collateral contacts with the family members the case worker could convince them how the unnecessary pressure and trouble due to the alcoholism and nagging by the father affected her studies. This awareness helped the father to change his behaviour offering a better environment. The father promised the case worker that he will stop his alcoholism and sought the worker's help for de-addiction. The case worker also contacted her class teacher and friends and asked them to relate towards her with proper understanding. They changed their attitude and extended her the needed support.

c) Use of Services and Resources

This is one of the oldest methods of case work intervention. In this method the worker helps the client to use a social resource or service provided by the agency. Many times the client knows what he wants, but does not know where or how to get it. Helping access to material help, legal aid, medical care etc. are examples. The worker needs to have a thorough knowledge of the available community resources and services.

Use of Services and Resources to help Geethu

The case worker liaised with the school management and made available a monthly scholarship to support Geethu's education. Her father has been referred to a de-addiction centre for treatment.

Evaluation

Assessing the results of the intervention is a part of social case work process. Results are measured for determining the effect of intervention. This helps the case worker to modify the treatment plans and arrange follow-up activities.

Evaluation of Geethu's case

After the required sessions and proper environment modification, the case worker assessed the improvement in Geethu's behaviour. She showed considerable progress in studies and became better at managing relationship with her friends and the opposite sex. Her family relationships also improved considerably.

Termination

Termination as used in social case work means the ending or limiting of the process. Case work as a process can not continue forever and hence should have an end. The terminal plans have to be formulated by the worker and the client, and it should be implemented on time.

Termination of Geethu's case

Since Geethu showed consistency in her performance and behaviour, and is comfortable in her day-to-day functioning, it is time for the case worker to plan the termination phase. So the case worker discussed the matter with Geethu and chalked out a plan to wind up the helping process, leaving space for follow-up.

Follow-up

Case work process does not end with termination. It is very important for the worker to have proper contact with the client in the future and assess his/her improvement. Follow up can be maintained either by personal contact or by house visit or through letters, or phone calls.

Follow-up of Geethu's case

The social case worker after the termination phase, contacted Geethu and inquired about her studies and family environment. She appraised her situations and expressed satisfaction over her achievements and relationships. He contacted her father over phone and inquired about his situation. Case worker motivated him to continue his abstinence from alcohol. He repeated the follow up every three months for one year.



Check Your Progress

1. Why are principles important for the practice of social case work?
2. List out the components of case work.



Interact with a family counsellor and discuss the scope of social case work in solving problems in family setting.

1.2 Working with Groups: Social Group Work

A child is born to a family which is the basic social group. A family consists of father, mother and children. The child with innate faculties grows and develops never alone but with the profound influence of the other members of the family. As the capacity to interact and relate develops, the child associates with the age mates in the neighborhood. The peer group influence affects in moulding and developing his potentials to a greater extent. Further, when the child is taken to a school, the class mates too influence the behaviour and reinforce one's potentials. On assuming a profession, there too the individual's behavioural patterns are influenced by the members of the professional group to which one belongs. Even after



retirement the life gets largely affected by the age mates with whom one associates. Thus, it is true that human beings are influenced by various groups to which one belongs from time to time.

Social work profession, realizing the inevitability of the role of group in one's life has recognized social group work as a method. Here group is used as an essential medium to help individuals to overcome certain problems they face or to accomplish certain goals they cherish.

Let us read the story of Biyas and friends.

Biyas and his friends Sarath and Somu are studying in Plus One class. They did not participate in the seminar presentation, though several opportunities were given to them. The class teacher discussed the matter with them and they confessed that they were scared because of stage fright. To help them out the class teacher directed them to the school social worker. He accepted them and consulted the principal to check whether there are other students with the similar problem. The principal identified thirteen more students from other classes. The social worker formed them as a group and helped them to set the rectification of stage fright and improvement of presentation skills as their purpose. In consultation with the members he helped the group to identify different programmes to achieve the purpose. He motivated the members to participate in those programmes. Through regulating their interactions in groups and ensuring group experiences benefiting each member according to their capacity and needs, he helped them to realize the set goals. Social worker conducted periodic evaluations with members and necessary modifications were effected. At the end, all the members expressed their improvement through the process and majority of them completely overcame the problem.

What did you understand from the story of Biyas and his friends?

●

It is clear from the story that if group is made available to individuals with certain problems or specific needs and their interactions are facilitated, regulated and monitored by a trained social worker, the group will act as a medium to achieve their goals. Thus, social group work is a method of social work which develops the ability of individuals through group activities. The group worker enables the group to function in such a way that group interactions through programme activities contribute to the development of the individual and the achievement of the desired group goals.

According to Trecker, “**social group work** is a method through which individuals in groups, in social agency settings are helped by worker who guides their interaction in programme activities so that they may relate themselves to others and experience growth opportunities in accordance with their needs and capacities”.

In the words of Prof. Hamilton, “**social group work** is a psycho-social process which is concerned no less than with developing leadership ability and cooperation than with building on the interests of the group for a social purpose”.

Characteristics of Social Group Work

- i. Social group work is a democratic method of social work.
- ii. It develops democratic ideals and leadership qualities in group members.
- iii. Constructive relationship is the base for achieving its objectives.
- iv. Individual members are helped through groups to experience growth opportunities and development.
- v. The role of the worker is to facilitate the interaction process.
- vi. The ability and capacity for self direction is developed by the group worker.
- vii. Group activities are directed on the basis of certain skills, principles, and techniques.
- viii. These activities are carried out in social agencies.
- ix. Group work is used for remedial as well as for personality development purpose.

Objectives of Social Group Work

Objectives are the statements of what we are trying to do through social group work. According to H. B. Trecker the purpose of social group work is to bring about the highest development of human personality. Social group work enhances the social functioning of individuals and provides them opportunity to develop leadership skills. The major objectives of social group work are:

- i. To teach the individuals to live and work together and to participate in a group for their intellectual, emotional and physical growth.
- ii. To solve problems of adjustment by the development of individual's personality through group process.
- iii. To prepare the individuals to learn and share the values of democracy.

- iv. To give opportunity to those who have potentialities of leadership.
- v. To make best use of leisure time of the people.
- vi. To learn division of labour and specialization of roles.
- vii. To provide a substitute for family in institutions and in industrial towns to get emotional security and opportunity for adjustment with secondary groups.
- viii. To widen one's horizon of social consciousness, create friendship and hobbies and learn skills.
- ix. To work as a remedial tool to help the social adjustment of persons.

Principles of Social Group Work

Principles of group work are evolved from the field experiences of the profession in different settings and situations. Principles guide the worker to intervene successfully with the group. The major principles of group work are;

a. Principle of Planned Group Formation

In group work, the group is the basic unit through which services are provided to the individuals. The agency and worker has to consider and plan the purpose, nature and opportunities available well before the group is formed.

b. Principle of Specific Objectives

In social group work, specific objectives of individual and group development must be consciously formulated by the worker in harmony with group wishes and capacities and in keeping with agency's functions.

c. Principle of Purposeful Worker Group Relationship.

A consciously effected relationship must be established between the worker and the group members to practice group work.

d. Principle of Continuous Individualization

In social group work, it is recognized that groups are different and that the individuals utilize group experience in a variety of ways to meet their differing needs. Consequently, a continuous individualization must be practiced by the worker. Groups and individuals in the groups must be understood as developing and changing.

e. Principle of Guided Group Interaction

The primary source of energy that propels the group and influences the individual to change is the interaction or reciprocal responses of the members. The group worker influences the interaction by the nature and quality of his facilitation.

f. Principle of Democratic Group Self-determination

The group must be helped to make its own decisions and determine its own activities taking the maximum amount of responsibility in line with its capacity and ability.

g. Principle of Flexible Organisation

The formal organization of the group should be flexible. The members should feel the group climate simple and group leaders approachable.

h. Principle of Progressive Programme Experiences

The programme experiences in which the groups engage should begin at the level of member's interest, needs, and competence and should progress in relation to the developing capacity of the group.

i. Principle of Human Needs

In group work, care must be taken to help the members to fulfill their needs. This should help them to ensure their psycho-social development.

j. Principle of Cultural Setting

Group worker should understand the culture of the community represented by the group. Cultural sensitivity is essential to develop respect and regard among the members. The activities and programmes should be planned and organized in tune with the cultural context of the community.

Social Group Work Process

As in case work, group work too is carried out through various successive and logical phases. Each phase with its distinctive features must be successfully accomplished for fulfilling the objectives of group work. Generally, the stages of group development proposed by B. W. Tuckman- forming, norming, performing and re-forming or dissolving best suits to explain the social group work process.

A. Forming Phase

This phase is concerned with the formation of the group. Deciding the purpose of the group, selection of the potential members, inducting them to the group, contracting, and setting the environment for group work are considered as the stages of group formation. As we set the goals and select the members at this stage, this phase is very crucial in proceeding with group work process.

In the case of Biyas and his friends, the purpose for which group is formed is to work on a psycho-social problem- their stage fright. In order to develop communication and presentation skills, Biyas, Sarath, Somu and thirteen other friends from the school having the same need were identified by the worker. They were intimated and invited to the group. The first meeting was convened and the members were introduced to each other to induce them to the group. A mutual contract was developed among the members and between the worker regarding the purpose and objectives of the group. To set the environment for group meetings, the venue, time, and the frequency were decided.

B. Norming Phase

Once the group is formed and the members inducted the norming phase begins. In this phase, the specific objectives derived from the purpose are set. To facilitate mutual interaction, the roles and responsibilities are shared among the members. An organizational structure ensuring flexible function of the group will be developed. Specific norms of group behaviour are formulated and accepted. Definite plans on various programmes to fulfill the objectives will be made.

In the initial meetings of the group, specific objectives like developing the capacity for public speaking, improving presentation skills, promoting creative writing skills, and installing courage in facing audience etc. were set. Programmes like group song, role play, mime, street play, skit, debate, speech and extempore were chalked out as progressive programmes. Specific responsibilities such as keeping attendance, setting the physical arrangements in the venue, arranging stationary and materials etc. were assigned to various group members. Biyas's friend Sarath was elected as the leader of the group. Norms regarding punctuality, attendance, programme participation, personal conduct etc. were discussed and set.

C. Performing Phase

The previously planned programmes and activities will be implemented during this phase. Care is taken to organize the programmes in a progressive manner

allowing continuous capacity building of the members. Group worker ensures the participation of all the members in various programmes, and makes sure that they gain experiences to fulfill their needs. After each programme participatory evaluation will be conducted and required corrections will be effected in the succeeding programmes.

Biyas and his friends were helped to realize the causes of their problems through an awareness session facilitated by the group worker. In order to overcome the difficulties and to build confidence they started performing various programmes designed earlier. After each programme session, they personally realized the change and betterment within themselves. The evaluation sessions helped them to rectify their shortcomings and to involve with more confidence in the succeeding sessions.

D. Re-forming or Dissolving Phase

After the successful completion of the performing phase, we move on to the re-forming or dissolving stage. This is a terminal stage set for evaluation. A participatory general evaluation will be conducted by the worker using scientific tools. This evaluation is to check whether the set objectives were accomplished or not. On evaluation if it is found that the goals were not fully accomplished the group work may continue with fresh programmes. If the goals were fulfilled, the group may either dissolve or re-form to work on newly decided goals.

Group worker helped Biyas and the group members to have a detailed evaluation of their programmes. It is found that all of them were glad in getting rid of their stage fright and improving their presentation skills. Somu observed that he and many other members have similar fear in facing examination and proposed the possibility of re-forming the group for this new purpose. From the group six of them opted out and group worker identified eight others from the school to join the group. The re-formed group continued with the work.



Check Your Progress

1. What are the different phases of a social group work process?



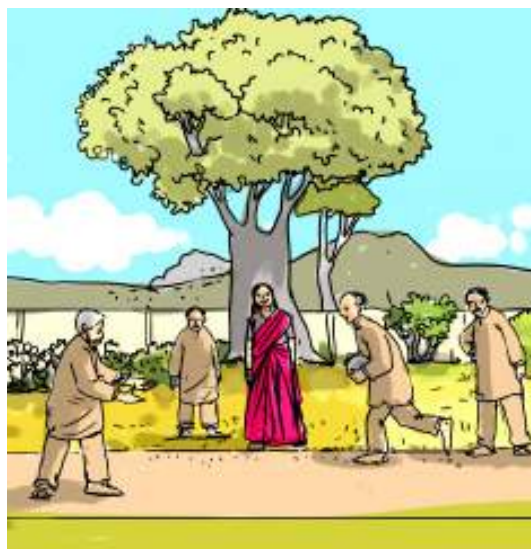
Observing the phases of group work process, organize a social work club and publish a school magazine to promote the creativity of its members.

Group Behaviour and Group Dynamics

We have been members of different social groups like family, peer groups, clubs, class etc. In some of these groups, we are very comfortable and prefer to involve. But in some others the group experiences may not be flexible, encouraging and beneficial. Have you ever reflected on this and understood why?

●

Group experiences become interesting and beneficial to the members due to the behaviour patterns and dynamics.



The forces that result from the interactions of group members are often referred to as group dynamics. The group dynamics influence the behaviour of both individual group members and the group as a whole. They have been of considerable interest to group workers.

One of the workers' most important task is to help groups develop dynamics that promote the satisfaction of members' socio-emotional needs while facilitating the accomplishment of group goals.

The dimensions of group dynamics are of particular importance to group workers in understanding and working effectively with all types of groups. Following are the important elements that influence the dynamics and behaviour of a group.

A. Communication and Interaction patterns

Communication and interaction patterns are basic to the formation of all groups. Through communication and interaction, behaviour of the group as a whole develop and the work of the group is accomplished. A group worker should help to develop suitable communication and-interaction patterns to realise the desired goals of the group. In most situations, the worker should facilitate the group-centered rather than leader - centered interactions. Group worker can

modify the interaction patterns by modifying the subgroup relations like diads, triads, isolates etc.

B. Group cohesion

Group cohesion is the result of all forces acting on members to remain in a group. People are attracted to groups for a variety of reasons. According to Cartwright, interacting sets of variables determine a member's attraction to a group. They are:

- i. The need for affiliation, recognition and security.
- ii. The resources and prestige available through group participation.
- iii. Expectations of the beneficial and limiting aspects of the group.
- iv. The comparison of the group with other group experiences.

C. Control mechanisms- norms, roles and status

Social controls help to maintain a group's equilibrium as it confronts internal and external pressure to change during its development. However social controls can be harmful if they are too rigid or if they foster behaviour, which is contrary to the true value base of the social work profession.

D. Group Culture

Group culture refers to values, beliefs, customs, and traditions held in common among group members. When the membership of a group is diverse, group culture emerges slowly. Each member contributes unique sets of values that originate from their past experience as well as from their ethnic, cultural, and racial heritages. These values are expanded through group communication and interactions. In early meetings, members explore each other's unique value systems and attempt to find common ground on which they can relate to each other. By later meetings, members will have chances to share and understand each other's value systems. As a result a common set of values develops, which becomes the group's culture. The group's culture continues to evolve throughout the life of the group.



Check Your Progress

1. What are the components of group dynamics?

Social Group Work in Modern Times

Today, group life faces several challenges due to the development of technology and materialistic outlook. Many, though live among thousands yet feel alone. Values of happy life such as love, affection, empathy, friendliness etc. are becoming rare commodity today. Social group work, that is based on these values may be of a great help to the modern man.

Urbanization has increased the problem of isolation and separation. The feeling of separation is gradually increasing. Many are considering themselves as helpless and are limited to their close circles. Thus its result may be seen in the form of increased mental tension. Social group work attempts to deal with the problem of isolation.

Every human being has the basic desire of having importance, worth, respect and a place in the society. Social group work keeps the members busy by providing them worth, dignity, place, role, and creative participation.

Modern age affects our adaptation abilities. Old techniques are not as suitable as those were in the past. Man has to learn new techniques of behaviour for the proper adjustment and survival in the various fields of life. Social group work provides this knowledge.

Social group work provides a new hope to the physically challenged, differently abled, aged, alcoholics and the chronically ill.

Social group work helps to achieve democratic goals such as liberty, equality, fraternity and social justice.

It provides recreation, the most valuable medicine for keeping oneself mentally healthy.

Human capacities and abilities are strengthened through the group work. Social group work helps in solving psychological problems.

It is evident that no individual can resist the influence of group life on them. The modern day studies reveal the importance of group experience on personality development. Hence in social group work, the method of social work treats group as a client and makes use of group experience as a means to realize social work goals. It can be effectively used for promotive, preventive, therapeutic, and rehabilitative purposes. Accordingly group worker forms growth groups, task groups, and therapeutic groups to help the clients.



Prepare a seminar paper on how social groups influence a person from birth till death.

1.3 Working with Community: Community Organisation



People living in a definite geographic area characterized by social coherence and ‘we feeling’ is known as a community. Due to topographic and socio-cultural factors communities differ as rural, urban, tribal, maritime etc. As a social unit community largely influences the quality of life of its members.

Communities differ tremendously with regard to development. This is due to various reasons such as resource availability, physical characteristics, climate, population, technology, leadership etc.

Fostering development and ensuring the quality of life of the members of a community is a major concern of social work profession. The pace of development is not uniform in all communities and many face several problems limiting the quality of life of its members.

Let us read the case of Kilimala village.

Kilimala is a remote village. There are about 1000 families constituting a population of about 5000. Topographically the village belongs to the middle land with valleys and planes. Agriculture is the major occupation of the people and they cultivate coffee, pepper, sugar cane, paddy, fruits and vegetables. Small and marginalized farmers constitute the majority of the farming population. Many agricultural labourers work in farms within the village and outside. A river flows through the village, which counts for the fertility and water availability of the place. Even then, 20% of the hilly terrains suffer from drinking water shortage. Though grass lands are plenty in the valley, economic backwardness has limited the people not to have livestock as a major occupation. Most of the women in the village are confined to domestic works. There is a primary school, a primary health sub-centre and a co-operative bank in the village. There is a public library and youth club, which is not functional. Though there is no liquor sale outlets, some young men are engaged in the production of country liquor. Hence many of the villagers are alcoholics and some of them are addicts. Higher education facilities are not available in the village and economically backward parents find it very difficult to send their children for high school and college education. Poor price, low productivity and middle men exploitation make agriculture unattractive. People belonging to various religion live harmoniously but political tensions are occasional.

How can we help the people of Kilimala to improve their quality of life?

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Social work profession has a method to work scientifically with the communities to help them out in the process of development. This method is known as community organization. Here a community is treated as the client and organized to identify and fulfill its developmental needs on a priority basis.

According to Murray G Rose, “**Community organization** is a process by which a community identifies its needs or objectives, orders these needs or objectives, develop confidence and will to work at those needs or objectives, find the resources to deal with these needs or objectives, takes action in respect of them and in so doing extends and develops co-operative and collaborative attitudes and practices in the communities”.

In the words of Dunham, “**Community organization** for social welfare means the process of bringing about and maintaining adjustment between social welfare needs and resources in a given geographical area”.

Characteristics of Community Organization

Following are the important features of community organization.

- a. Community organization is a process :

It is a process by which capacity of the community is utilized to achieve community needs. Community organizer follows this process consciously and purposefully.

- b. Identification of needs and resources:

Community organizer helps the community to identify the needs and resources. It tries to bring about harmonious combination between community needs and resources.

- c. Community as a client.

In the process of community organization the entire community is considered as a client. The emphasis is given to the community rather than to individuals.

- d. Involvement of a community organizer.

A community organizer helps the community through his facilitation roles to identify its needs, plan programmes and to evaluate its progress etc.

- e. Community organization is a means not an end.

The end of the community organization is the total welfare of the community. All the programmes should be organized to achieve the well being of the community. Hence the process of community organization is the means to achieve total welfare of the people.

Objectives of Community Organization

Following are the objectives of community organization.

- i. To organize the community scientifically.
- ii. To help the community to identify its needs and to work on it.
- iii. To empower the community to identify the resources within and outside the community for development.
- iv. To facilitate the development of leadership in the community.
- v. To foster social capital generation in the community.
- vi. To equip the community to plan, implement, monitor and evaluate development initiatives.

vii. To enhance self-reliance of the community for sustainable development.



Check Your Progress

1. What are the important activities mentioned in the definition of Murray G. Ross regarding community organization?



List out five community problems that can be addressed through scientific community organization.

Principles of Community Organization

Since community is treated as the client in community organization, care should be taken by the community organizer to strictly observe the specific principles. The principles will help to achieve the objectives of community organization. They are discussed below:

a. Principle of Felt Needs

The community organizer should concentrate on the needs that require immediate intervention. He should facilitate the community to identify and prioritize the needs according to the merit and urgency of intervention.

b. Principle of Resource Mobilization

Resources are essential to solve the problems which are identified by the community. These resources are available within the community or outside. The resources must be mobilized by the community to find solution to the problem. The resources can be in the form of men, material, money, etc.

c. Principle of Local Leadership

Leadership is essential for any developmental initiative. Through community organization process, social worker should help the community to evolve local level leadership that will sustain the developmental changes.

d. Principle of Participation

Every stage of community organization process requires people's participation. It is a basic requirement to realize the goals of Community organization. So the community organizer should motivate the entire community to participate in the developmental activities.

e. Principle of Self Help

Community must be organized to develop maximum level of self initiatives among themselves. People must be empowered to take care of their own developmental needs.

f. Principle of Democracy

Community organization activities must be carried out on a democratic basis. Decisions are to be taken on majority consensus. Planning and implementation of programmes should be carried out through democratically elected people's representatives.

g. Principle of Co-operation

The voluntary co-operation is the key to effective community organization. The spirit of co- operation should be developed and practiced through the entire process of community organization. In the process of community organization the organizer should help the different groups of people to co- operate with each other in the achievement of the goals of the community.

h. Principle of Programme Planning

Planning is the process of designing the future programmes. Planning needs a futuristic vision. Community programmes must be planned in a proper way. The total welfare programmes should be sufficient in quality and quantity to meet the community needs. Community welfare programmes should be made available to the entire population of the community.

i. Principle of Prevention

Prevention is more preferable than cure. Community welfare programmes are intended not only to solve problems but also to prevent its occurrence.

Process of Community Organization

Community organization takes place through a well organized process which has definite phases to follow. The various steps of community organization process are given below.

A. Study

As the first step, the community organizer together with the people should study about the community. It includes the study of the social, economic and cultural

status and the existing problems of the people. This can be done through interviews, observation, surveys, data collection, meetings with group leaders, informal opinions etc. Group opinion can be collected through mass meetings, group meetings, etc. The main aim of the study is to get a clear picture of the community, its interaction patterns, felt needs, and the resources available. This study helps him/her to plan the programmes effectively.

An agency named Rural Empowerment and Development (READ) has delegated Mr. Kishore, a professionally qualified social worker, to work with Kilimala community. He contacted the community leaders and many others who are interested in the development of the community. In order to study the social dynamics existing in the community, its problems and resources he conducted a socio-economic survey. Further, he collected data from the secondary sources such as reports and publications of the institutions connected to the village. He also conducted group meetings with farmers, youth, women etc. A developmental seminar was organized inviting experts and local leaders. A village development committee was constituted from among the participants. He documented all the vital information collected through various methods.



B. Problem Identification and Prioritizing

In this stage the community organizer together with the community people analyze the information collected through various study methods. The problems existing within the community are identified. Analyzing the nature, extent and urgency of the problems, the community organizer helps the community to prioritize their felt needs.

The development committee of Kilimala together with the community organizer identified their existing problems. Low income, alcoholism, unemployment, lack of higher education opportunities, non-functioning of library and youth club, middle men exploitation, scarcity of drinking water, low price of agricultural products etc. were identified as their problems. Mr. Kishore helped the community to analyze each problem to prioritize it. They prioritized scarcity of drinking water, poor income status, and unemployment as the most urgent issues which need immediate intervention.

C. Assessment

At this phase an indepth analysis of the problem for intervention is done by the community with the help of the community organizer. The nature, causes, severity, implication, and magnitude of the problem and the number of people affected will be studied.

Mr. Kishore and the development committee discussed in detail the problem to be considered first for intervention. There was a difference of opinion among them, whether to consider water scarcity or poor income status to be treated first. Though drinking water was scarce, it was available in the valley. The poor income status was considered as the problem to be treated first because of its magnitude. They analyzed the root causes of poor income status, the affected people, its severity etc. The underemployment of the farmers, lack of employment opportunity for women, lack of additional income generation sources etc. were identified as the major causes of poor income status. Their low income level has affected the education of their children, nutritional intake and health care.

D. Strategy Formulation

Based on the causes identified, the organizer together with the community, formulates various strategies to solve the problem. For systematic planning, each proposed strategy will be analyzed regarding its cost-effectiveness, feasibility, sustainability etc. The most suitable strategy will be chosen for implementation. Once it is chosen, the activities required, resources needed, and the time frame will be chalked out as part of the planning.

In order to solve the low income status of the families of Kilimala village, the development committee discussed various strategies. Giving vocational training to enhance the employability of the youth, supporting the farmers to begin small scale industries, and engaging women in groups to organize dairy units were some

of them. Considering the factors such as family labour absorption, availability of grass land and water, women empowerment, and health and nutritional status, it is decided to accept dairy project for women as a suitable strategy for solving low income status. It was decided to organize women in small groups. Milching cows will be given to each group on a subsidized rate at 40:60 subsidy-loan ratio. Such twenty groups were planned to organize and their representatives will constitute the Dairy Management Council at village level. They will be trained for management and marketing tasks.

E. Organization

Organization is the process of relating persons and facilities in a systematic and effective manner. In the organizational system, the roles and responsibilities of the constituting members must be clearly defined. It is essential for the effective implementation of the strategies chosen. The community organizer should include appropriate persons from the community through democratic means.

A five member team from the development committee, three representatives from the women groups and the community organizer will constitute the apex forum for selecting the beneficiaries, fund allocation, monitoring, evaluation, and policy decisions.

F. Action

It is the implementation of strategies and programmes developed through discussion and planning. The action plan evolved on the chosen strategy is implemented through various task groups.

Twenty women groups each comprising 7-15 members were organized in Kilimala village. A five member executive elected from time to time governed the activities of the women group at grass root level. A member from each group elected democratically represented them in the apex dairy management council. This apex committee distributed the cows to the members of the group. With the support of the agency, cattle sheds were constructed. The milk collected at the group level was marketed locally and the excess was pooled at the centre for processing.

G. Evaluation

Evaluation is carried out to assess the effectiveness of the programme and to check whether the intended goal is achieved or not. Evaluation helps to locate the shortcomings and failures of the programme. Evaluation can be internal or

external. Internal evaluation will be conducted by the community organizer and the organizing team. For external evaluation the service of an expert from the agency or outside can be made use.

At Kilimala, internal evaluation by the apex committee was carried out once in three months. An external evaluation was conducted annually by an expert from outside. The periodic evaluation helped them to rectify issues related to repayment, marketing, and the general administration of the project.

H. Modification and Continuation

Based on the evaluation we may have to change some programmes or modify them. We can modify the programme either by mobilizing more resources or by changing the present activities to attend new issues.

After evaluation, realizing the success in repayment, marketing, and income generation, it is decided to extend the project to more beneficiaries. It was also decided to set up a chilling plant in the village.

Thus community organization is a continuous process of learning the community situations and problems and bringing out solutions by the community with the professional facilitation of a social worker. While addressing problems on a priority basis the community gets empowered. Each project management ensures learning, leadership development, and social capital generation. Besides the specific goal attainment through a project, social virtues like co-operative and collaborative spirit, trust, reciprocity and interactions emerges within the community as auxiliary goals. The social capital thus generated will empower the community and instill confidence within them to work on other problems. That is why community organization is treated as a means and not an end.



Check Your Progress

1. Why is evaluation important in community organization?



- a) Conduct a socio-economic survey in your neighborhood and elicit the developmental needs and available resources.
- b) Visit a tribal or rural community and appraise the developmental needs through direct observation or by organizing a developmental seminar.

Summary

In this chapter we have learned the three primary methods of social work, i.e. social case work, social group work, and community organization. These three methods are also referred to as direct methods since there is face to face interaction between the social worker and the client. Social case work as a method is used to help individuals to solve their psycho-social problems and it has unique characteristics too. There are certain principles that govern the practice of social case work. The effectiveness of case work practice depends on the quality of professional relationship established between the case worker and the client. This relationship is known as rapport. The person, problem, place, and process are considered as the components of case work. The different stages of the process include study, diagnosis, treatment, evaluation, termination, and follow-up.

In social group work, group is used as an essential medium to help individuals to overcome their problems. Programmes and activities of the group are used to facilitate interaction and relationship of the members, which in turn will help to fulfill their needs. As a problem solving method, group work also has its peculiar characteristics and objectives. There are specific principles describing how to work with a group for problem solving. The process of group work passes through the phases of forming, norming, performing, and re-forming or dissolving. Understanding and influencing the dynamics and behaviour of the group is very important in practising social group work. The significance of group work as a problem solving method is very relevant in the present day world.

In order to ensure the quality of life of the people and to foster development in the community, social work has developed community organization as a method. The community organizer along with people will identify the needs and resources of the community to solve its problems. This primary method also has its own objectives and characteristics. There are specific principles to guide the community organizer to carry out the community organization. The process of community organization includes study, problem identification and prioritizing, assessment, strategy formulation, organization, action, evaluation, and modification and continuation.

Evaluation Questions

1. Recognizing the client's freedom to make his own choices and decisions is known as the principle of
 - a. Acceptance
 - b. Individualisation
 - c. Non-judgemental attitude
 - d. Decision making
2. 'The quality of relationship decides the effectiveness of case work'. Comment.
3. Describe the problem solving process in social case work.
4. Comment on the relevance of the principles in the practice of group work.
5. 'Knowledge of group dynamics and the ability to influence it are important in group work practice'. Analyze the statement.
6. Prepare a note on the relevance of group work in the contemporary society.
7. Illustrate the process of community organization using appropriate examples.
8. Discuss the importance of social group work in the modern world.
9. Describe the principles of community organization.
10. Write a note on various components of group dynamics.

Social Work – Secondary Methods

Significant Learning Outcomes

After the completion of this chapter, the learner:

- Describes the concept, principles, and elements of social action.
- Appraises the role of social action movements in addressing mass social problems.
- Explains the concept, and process of social welfare administration.
- Analyses the organogram of an organisation.
- Describes the nature and type of social work research
- Identifies the stages of research process.
- Classifies the strategies of social action.
- Lists the social action groups in Kerala.

Content

2.1 Social Action

Characteristics of Social Action
Objectives
Strategies of Social Action
Process of Social Action
Social Policy Formulation
Social Action Groups

2.2 Social Welfare Administration

Process and Functions of Social Welfare Administration
Organogram
Office Management

2.3 Social Work Research

Nature of Social Work Research
Types of Research
Research Process

In the previous chapter, we have learned the primary methods of social work. They directly deal with individuals, groups, and communities to help them to solve their problems. What are the other methods of social work?

.....

Social action, social welfare administration, and social work research are the secondary methods of social work. The body of knowledge, skills and techniques required for the practice of secondary methods differ from that of primary methods.

How does the secondary method differ from primary methods?

.....

In primary methods, there is direct contact between the social worker and the client. But in secondary methods this direct relationship is not essential.



In contemporary social work literature some authors like D. H. Hepworth does not consider secondary methods as distinct and different from the primary methods. Instead, it is treated as supportive to the primary methods. The primary methods are henceforth referred to as 'direct practice methods'.

2.1 Social Action

You may be aware of the Plachimada incident. The coca cola company running a factory at the village extensively exploited the ground water of the place. People suffered miserably for drinking water. The sledge-the industrial waste- a byproduct of the company polluted the soil and the water. The villagers started agitation on the issue.

What are the means used to solve this issue?

-
- Awareness building
- Propaganda
- Mass protest
- Representation
- Satyagraha
- Strikes, etc.

Social work makes use of this kind of activities in a systematic manner to solve mass social problems. This method is known as social action. It is used when there is a need to bring about



a positive change in the social structure or to prevent the occurrence of a negative change. Now, can you define the concept social action?

Social action is considered as a secondary method of professional social work. It is an organised effort to change or improve social and economic institutions. Some of the social problems like dowry system, destruction of natural resources, alcoholism, labour exploitation, human rights violations, etc. can be tackled through social action. Mary Richmond defines social action as “**mass betterment through propaganda and social legislation**”. According to H.L. Witmer “**Social action** refers to organized and legally permitted activities designed to mobilize public opinion, legislation, and public administration in favour of objectives believed to be socially desirable.” In short, social action is used to deal with mass social issues and problems.

Characteristics of Social Action

Now can you identify the characteristics of social action from the definitions?

-
- Social action is a method of social work.
- It attempts to change the social environment.
- It effects changes in attitude and practices of individuals and communities.
- It is legally permissible and democratic.
- It is an attempt to modify social policies and social legislations.
- It aims at restructuring social institutions.
- Social action is confrontational in nature, but non-violent.

Objectives

The general purpose of social action is the proper shaping and development of socio-cultural environment in which a richer and fuller life may be possible for all the citizens. The specific objectives of social action are:

- To solve mass social problems
- To improve the quality of life of people
- To influence and improve institutions, policies, legislations and administrative practices
- To reallocate power and resources in a judicious manner
- To influence decision-making process
- To influence the attitude, values and behaviour of the people

Principles of Social Action

Principles are the guidelines or directions to be practiced to ensure the success of any endeavor. The following principles are helpful in carrying out social action effectively:



a. The Principle of Credibility Building

Credibility is the trust and general acceptance by the public. In social action movements the leader, the organization, and the followers should gain credibility as champions of justice and truth. Credibility can be built through respect and goodwill towards the opponent, assuming model behaviour, upholding moral values, addressing the felt needs of the people, etc. Success in various stages of social action process will enhance the credibility of the movement.

b. Principle of Legitimation

Legitimation is the process of convincing the target group and the general public that the objectives of the movement are morally right. Leaders of the movement might use moral, philosophical, legal, technical and public opinion paths to establish the relevance of the objectives of the movement.

c. Principle of Dramatisation

Dramatisation is the principle of mass mobilisation by using sensational

demonstrations for evoking emotional sentiments towards an issue. Some of the strategies of dramatisation are, use of songs, street plays, powerful speeches, boycott, slogans, etc.

d. Principle of Dual Approach

Social action focuses simultaneously on challenging the existing social systems and developing alternative practices. For example, while fighting against the middle-men exploitation of farmers at one side, INFARM, a social action movement in Kerala organizes weekly markets and farmer cooperative societies to promote the sale of agricultural products.

e. Principle of Multiple Strategies and Programmes

There are different approaches and strategies to social action. The movement should make use of various strategies and programmes for realizing the objectives of social action.

Strategies of Social Action

Can you list out certain programmes used by the social action groups you are familiar with?

-

Propaganda, strikes, boycotts, effigy burning, etc. are some of the strategies used by certain social action groups to realise their goals.

Lee suggested three types of social action strategies - collaboration, competition, and confrontation. In collaboration, the social worker associates with the authorities or agencies in order to bring about changes in social policies. In competition, the struggling groups utilize the commonly used strategies like negotiation, bargaining, persuasion, etc. to arrive at a working agreement. Confrontation is a more militant approach which includes strikes, boycotts, fasts, sit-ins, etc. Richard Bryant suggests two sets of strategies namely bargaining and confrontation. Bargaining includes lobbying, submitting petition, providing information, publicity campaigns etc. Confrontation consists of strikes, sit-ins, etc.

Process of Social Action

Social action proceeds through various distinctive stages for realising its goals. These specific stages are common to all social action movements and are known as the process of social action.

Are you familiar with the social action conducted by the INFARM or Fisher men's movement? How did they originate and develop through different stages?

-

The diagram shows the different stages in the process of social action.



According to Lee, there are five stages in the process of social action. They are:

a. Developing Awareness

Sensing the issue, problem identification, information gathering, problem diagnosis followed by social education and conscientization come under awareness building.

b. Organisation

Eliciting public support, setting action goals, and identifying appropriate persons to lead the movement are the organizational tasks.

c. Planning Strategies

The third phase of social action is the planning of strategies. The type of strategies are determined by the nature of the problem, the intensity of the problem, the level of resistance, the level of people's participation etc. It can be collaborative, competitive, or conflicting.

d. Implementation of Social Action Strategies

It is the actual implementation of planned strategies in a systematic manner. Care should be taken to ensure that the programmes and actions are democratic and legitimate. Intrusion of anti-social or violent forces are to be checked.

e. Evaluation

In this stage the group assesses the performance and effectiveness of the action. Based on the evaluation, changes are effected to the strategies or even to the goals.

Social Policy Formulation

Social action is a major tool to influence social policy. Social policies are general approaches and guidelines accepted by the government in deciding and disbursing their programmes. It is concerned with the need prioritization and resource allocation. Social policy reflects the needs and concerns of the marginalized and vulnerable in a democratic society. It covers policies for health, housing, income generation, education, poverty eradication, old age care, etc. It largely decides the delivery of welfare programmes. Social action is effectively used to formulate social policies in favour of the disadvantaged people and to make enactment for enforcing the policies. A number of incidences can be cited where social action is used to change social policy. The efforts of well known activist Medha Patkar compelled the government to change its policy regarding the construction of big dams across Narmada river. Due to the efforts of social action groups against alcoholism, the government has accepted the policy to prohibit alcohol in different states.

Scope of Social Action in India

The social action method aims at solving social issues and making welfare and development programmes more functional and effective for respective target groups.

Social action method could solve a wide array of social issues with lasting impacts. Some of the problems which can be solved through social action are dowry problem, child marriage, the issues of the landlessness, illiteracy, human right violations, child labour, superstitions, problems of tribes, women, farmers, and dalits. Environment issues like excessive mining of sand, laterite and granite, pollution, deforestation, etc. require social action interventions.

Social Action Groups

Can you list out various action groups working on different issues?

-

The emergence of large number of action groups which have been trying to educate, conscientize, and mobilize different marginalized sections, particularly the oppressed poor, are there in India since 1960's. These social action groups are working mostly at the micro-level associating and identifying themselves with the weaker sections and are contributing in their own way in the process of social transformation. These action groups work at the grass root level among tribes, rural and urban poor, dalits, women and so on.

A. Environment Action Groups

Environment protection is a practice of preserving the natural environment for the benefit of man and other living organisms. Due to the pressures of population and technology, the biophysical environment is getting degraded. This has been recognized and environmental action movements have emerged



to work on various issues. Narmada Bachao Andolan, Chipko Movement, Silent Valley Protection Movement, Anti-Endosulfan movement, Mullaperiyar Samrakshana Samithi, Anti-cola Movement at Plachimada, Wayanad Prakrithi Samrakshana Samithi, Anti-Sand Mining Movement (Karimanal), Society for Environment Education in Kerala (SEEK), etc. are some of the social action groups working for the protection of environment.

B. Adivasi Dalit Action Groups

Dalits are the oppressed classes who were traditionally subjected to various discriminations on grounds of caste, class, and untouchability. They are categorized as the oppressed, marginalized or downtrodden. The organizational

efforts made by Dalit leaders for the liberation of the downtrodden masses could be termed as Dalit movement. The Adivasis are the indigenous people of India. They are highly exploited by the migrants and the bureaucracy. Dalit and



Adivasi action groups concentrate on issues connected with atrocities against them and other issues like exclusion, landlessness, reservation, etc. Adivasi Dalit Samara Samithi, Adivasi Ghotra Maha Sabha, etc. are action groups working for the upliftment of adivasis and dalits.

C. Women Action Groups

Women action groups are organisations working for the empowerment of women to protect their rights for a violence free and just society. They believe that discrimination and violence against women is a impediment to women's economic and social rights. The programmes of women



action groups focus on empowerment of women against discrimination and violence. Sakhi, Sahaja, Anweshi, Sthree vedi, etc. are some of the women action groups working in Kerala.

D. Farmer Action Groups

A farmer is a person engaged in agriculture, raising living organisms for food or raw materials. A farmer might own the farming land or might work as a labourer on other's land. Today the farmers face numerous problems and they

struggle hard for their existence. Low productivity, price, and income are the challenges they face. Unpredictable climate changes, increased cost of production and middle men exploitation adds to their misery. The Farmers Relief Forum, INFARM, Karshaka Raksha Samithi, Kuttanad Karshaka Samithi, Malayora Karshaka Samithi, etc. work with the issues of farmers.



D. Fishermen Action Groups



Fisher men folk are all those men, women and children who earn a livelihood by involving in the harvesting, handling, processing and marketing of fish and fish products. Insufficient catch, excessive trolling, turbulent seasonal variations, middle men exploitation, etc. are issues faced by them. Swathandra Malsya Thozhilali Federation, National Fishermen's Action Council, National Fish Workers Forum, etc. are social action groups working with fishermen.

E. Action Group against Alcohol and Drugs

The consequences of alcoholism and drug dependence place an enormous burden on Indian society. As the most important health problem, addiction affects the economy, the health care system and the criminal justice system. It threatens job security and public safety, marital and family life. There are social action groups working



towards prohibition and abstinence of drug and alcohol. Madhya Virudha samithi, and Madhya Varjana Samithi are two such social action movements in the state.



Check Your Progress

1. Collaboration and competition are the strategies of.....
2. Identify an environment action group in your locality and list out their objectives.
3. It has been observed that there is illicit liquor in your village. Which method of social work is most suitable to intervene in the problem? Describe your strategies to tackle the problem effectively.
4. Prepare a pledge against alcoholism to take on world health day at the school assembly.



1. Interact with a social activist on a specific issue and study the strategies applied by him/her.
2. Organise a social action programme in order to solve an issue of your locality.

2.1 Social Welfare Administration

Before discussing the meaning of social welfare administration, it is necessary to know the meaning of the term administration. Administration is a cooperative human effort towards achieving some common goals. Thus every group activity involves administration, whether in a family, factory, hospital, university, or a

government department. In simple language, it means the 'management of affairs' or 'looking after the people'. To administer is to manage, direct and serve. L.D. White views that "the art of administration is the direction, coordination and control of many persons to achieve some purpose or objective." Thus, it is clear that administration is concerned with proper organization of men and material to achieve the desired ends.



What are the problems or needs faced by the marginalized and disadvantaged sections in the society?

-
- Housing problems
- Safe drinking water
- Low income, etc.

What are the programmes required to meet these needs?

-
- Housing Programmes,
- Income generation programmes,
- Employment generation programmes, etc.

Social welfare services are a set of enabling services intended to meet the special needs of the disadvantaged individuals and groups. It includes projects and programmes for tribal development, women's welfare, welfare of the handicapped, fishermen, scheduled castes, etc.

How do we implement these programmes in an effective manner?

-

Social work profession gives due importance to the administration of social welfare programmes in an effective manner by identifying the felt needs of the target group, extending the services to the eligible beneficiaries and implementing the programme in the stipulated time frame based on the budgetary provisions. John C. Kidneigh defines **social welfare administration** as “the process of transforming social policy into social services”. This definition encompasses the idea that administration is the process of transforming policies into action programmes. Social welfare administration as a method of social work looks for administrative and managerial skills among the practitioners for carrying out specialized welfare services. The skills in planning, staffing, directing, delegating, monitoring, budgeting, reporting, evaluating etc. are essential for social workers while administering welfare services.

Process and Functions of Social Welfare Administration

The development of scientific management concept and need for administrative planning can be traced back to early 1900s in the works of Frederick Taylor. Luther Gulick has given an acronym 'POSDCoRB' to represent the administrative functions. Here P stands for Planning, O - Organising, S- Staffing, D- Directing,

Co - Coordinating, R – Reporting, and B - Budgeting. Let us discuss each function briefly:

Planning: Planning means working out broad outline of the activities that need to be done and the method to be adopted to accomplish the purpose.

Organisation: It is the establishment of formal positions and authority through which the work is sub-divided, and coordinated.

Staffing: Staffing is the process of filling all positions in the organisation with adequate and qualified personnel. Thus, it means the selection and recruitment of the personnel, bringing in and training them.

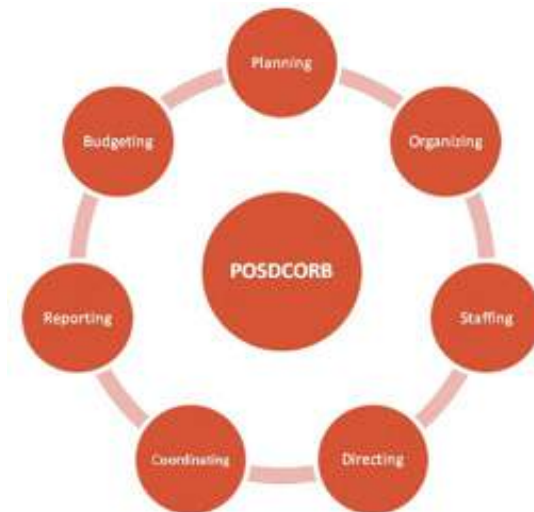
Directing: It is the continuous task of making decisions and issuing them specific and general orders as instructions to guide the progress of the work.

Coordinating: It means integration of several parts into an orderly whole to achieve the purpose of the agency. In other words, coordinating means the important duty of inter-relating the work of various divisions, sections and other parts of the agency.

Reporting: It is keeping the responsible people informed about what is going on. In other words, reporting means keeping both the supervisors and subordinates informed of what is going on and is arranging for collection of such information through inspection, research and records.

Budgeting: It includes all activities related to fiscal planning, accounting and control.

POSDCoRB activities are common to all large scale organisations. They are the common functions of management found in the different agencies.

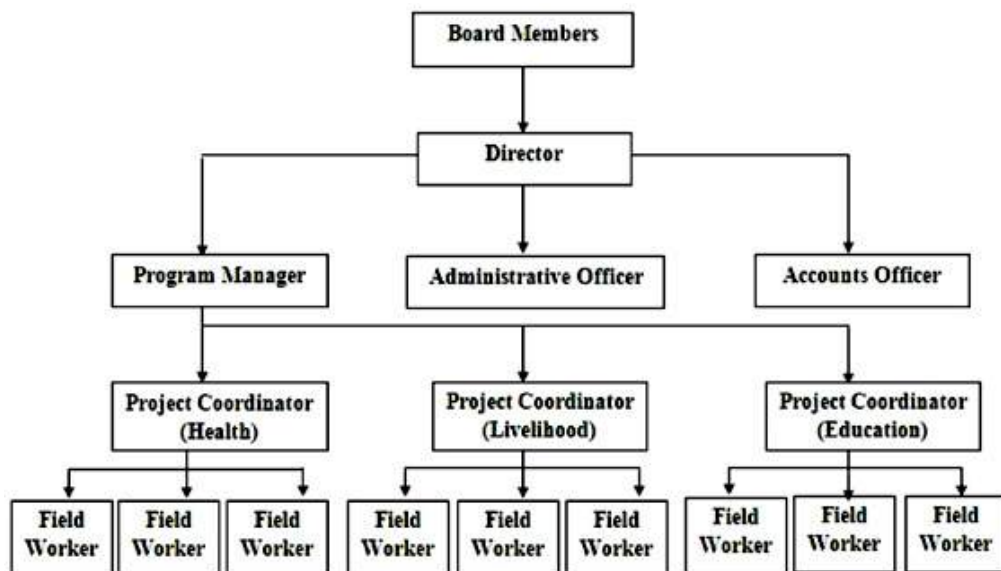


Organogram

Any social work agency will have an administrative structure. The authorities and responsibilities are arranged in a hierarchy. The diagrammatic presentation of this hierarchical arrangement is known as organogram. Let us discuss it in detail:

Most of the organizations, whether small or big, function as a dynamic social system through mutual interaction of interdependent components. In social work agencies, these interacting components include the funding sources, board of directors, management, staff and the client groups. The staff positions include a number of roles which are arranged in a hierarchical structure. The purpose of the structure is to ensure the successful accomplishment of objectives of the organization.

Organogram is the diagrammatic representation of the distribution of the power and responsibilities within an organization. The organogram reflects the nature of work and communication that each position is expected to receive from others. The organogram reflects a great deal of division of labour. It illustrates who is responsible for what and who is to report to whom in a vivid manner. An example of an organogram of a social welfare agency is given below.



Office Management

Office management is important in administrative task. It ensures the procedural support and data backing for administration. Decision making, planning, resource management, etc. are facilitated through proper office management. Recording, minuting, budgeting, filing, etc. are its components. The details of the office management are given in the box.



Recording

One of the important functions of social work agency is to document the work they have done. Similarly the effective secretarial services in a social work agency are very important in the social welfare administration perspective. It includes collecting and keeping the evidence of the work done. The minutes of the planning meeting, process of organization, implementation, evaluation etc. are documented in the form of reports, photographs and in multimedia form.

Minutes

Minutes are the tangible record of the procedures and happenings of the meeting. It is a source of information for members who were unable to attend the meeting and a source of reference to those who attended the meeting. Thus minutes of the meetings are important. They capture the essential information of a meeting – decisions and assigned actions. They keep attendees on track by reminding them of their role in a project and clearly define what happened in a group session. Everything that happened during a meeting need not be recorded. Minutes are meant to record basic information such as the actions assigned and decisions made. Then, they can be recorded and used for reference or can be used as a background material for future meetings relating to the same topic.

Filing

Filing is the systematic arrangement and keeping of correspondence, reports and other documents in an agency. The method of classifying and arranging files would vary from office to office depending upon the particular purpose in which the agency is engaged. Whatever may be the methods applied, the files could be made easy to find out even by an outsider without confusion. Every office must have an Index Register indicating the number and subject of the file with broad and minor classifications.



Check Your Progress

1. Expand POSDCoRB.
2. Describe office management.



1. Visit your *Panchayath* office, interact with the officials and prepare its organogram.
2. Visit a social welfare agency or an NGO in your area and examine their activities based on their objectives.

2.3 Social Work Research

Can you make a study on the attitude of higher secondary students towards smoking? How will you go about it? The following steps will help you.



- a. **Select a problem:** It is the area you want to study. Eg, Smoking.
- b. **Define the problem:** Define it properly to decide what you want to know and what you don't want to? Eg. If you have selected the problem "smoking", specify the problem as "Attitude of higher secondary students towards smoking."
- c. **Objectives of the study:** It means the various aspects you want to study regarding the selected problem.
- d. **Design of the study:** It means to decide how to collect data, where to collect data, whether to collect it from all the members or from samples, the size of the sample, the type of the study group, selection of tools and preparation of tools for data collection like interview schedule, questionnaire etc. For the present study the population is higher secondary students. Since it is not possible to see all the students, we select the sample as the higher secondary school students of corresponding district/school. Since the present study deals with the attitude of higher secondary school students, an attitude scale may be used.
- e. **Data collection:** It is done by applying the tools for data collection.
- f. **Data analysis and interpretation:** It is the process of examining data in as many ways as possible and as meaningful as possible based on the objectives. In the present study we can analyse the data to find the percentage of students who have favourable attitude towards smoking and who are against the habit of smoking.

- g. Recording and reporting:** It is the process of writing the reports in a systematic manner.

Here we have discussed the various steps followed for studying the attitude of students towards smoking. It is relatively a small or micro study. Similar steps are followed in studying various social problems and phenomena. This procedure of conducting a systematic study is known as research. Social work research promotes social work profession with scientific knowledge base for practice. It helps to understand the various problems in the society, its magnitude, and causative factors. It also produces data for planning and problem solving.

Research is the scientific and systematic enquiry for relevant information on a specific topic. It is the art of scientific investigation. It is the journey from known to the unknown. When the unknown make discomfort within us, our inquisitiveness makes us search to gain an understanding of it. This inquisitiveness is the mother of all knowledge.

According to G. W. Cater, “**Social work research** is the systematic, critical investigation of questions in the social welfare field with the purpose of yielding answers to problems of social work and extending and generalizing social work knowledge and concepts.”

Nature of Social Work Research

Thomas Alva Edison has conducted research in physics and invented electric bulb. Sir Isaac Newton discovered gravitational force and developed the theory of gravitation. In the case of Thomas Alva Edison, the research was to invent something new. However, Sir Isaac Newton discovered the gravitational force already existing in the universe. Thus research in physical science or natural science is intended to invent something new or to develop a scientific explanation to the natural phenomenon already existing in the universe.

However in social sciences especially in social work, the purpose of research is not to invent something new, but to describe the existing social phenomenon in a systematic and verifiable manner.

Types of Research

Research can be classified in many ways. Based on the purpose or objective of the study, research is classified as basic research and applied research. Basic research is designed to add to an organized body of social work knowledge and

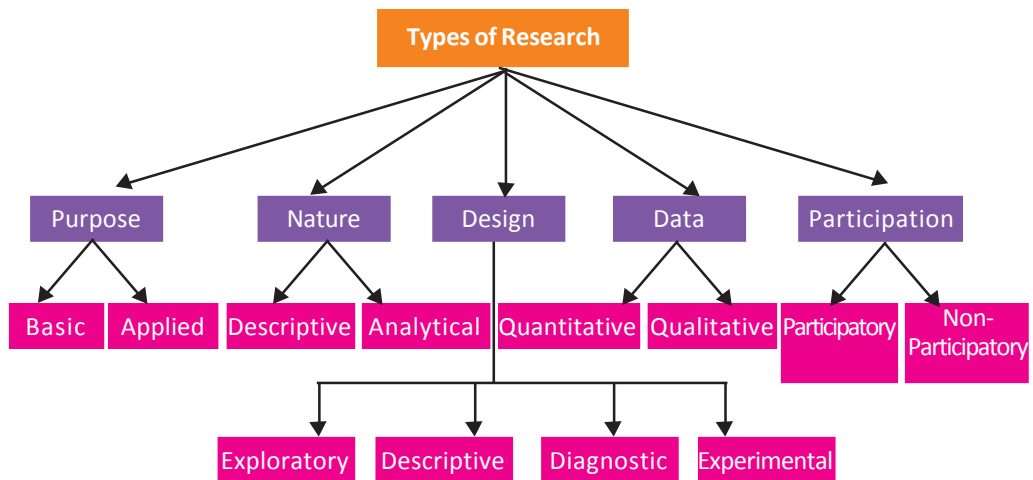
does not necessarily produce practical solution to social or psycho social problems. Basic research is also known as fundamental research or pure research. 'A study on the causes of student's unrest' is an example of basic research. On the other hand applied research is undertaken to solve one or more of the social or psychological problems. Applied research is also known as action research. 'An experiment on reward and punishment as motivational factor for learning' is an example of applied research. It not only generates theory or knowledge, but allows us to develop models to solve problems.

Based on the nature of study, research can be classified into descriptive and analytical. Descriptive research systematically explains social phenomenon as it exists. Surveys and fact finding enquiries are used in descriptive research. 'Study on cultural assimilation of migrant workers' is an example of descriptive research. Analytical research is used to assess or evaluate a fact or information already exists. It is used to verify the existing theories of social work. 'Impact of life skill training on the behaviour pattern of adolescence' is an example of analytical research.

Research can be classified into quantitative and qualitative based on the type of data used in a research. Quantitative research is based on quantitative measurement of characteristics of a social phenomenon. For example, 'a study on the status of body mass index among higher secondary school students'. Qualitative research is concerned with studying qualitative aspect of a social phenomenon. For example, 'motivating factors of learning among higher secondary students'.

Based on research design research can be classified in to explorative, descriptive, diagnostic and experimental. An exploratory research is used to get familiarized with a social phenomenon. Descriptive research is used to describe the different aspect of a social phenomenon in detail. Diagnostic research studies the cause and effect of a social phenomenon. Experimental research is used to test the hypothesis and to generate theories.

Based on the involvement of people in the research process, research can be classified as participatory and non participatory. In participatory research, people are involved in the process of study. PRA is a tool applied in participatory study. In non participatory research, the person who conducts the research alone involves in the study process.



Research Process

The research process is a step-by-step progress of a research study. The research process involves identifying, locating, assessing, and analyzing a problem under study and then developing and expressing facts about it. The research process has the following steps.

Selection, Formulation, and Statement of Research Problem

Research problem is an intellectual discomfort that prompts a researcher to investigate. Choosing good problems is essential for being a good scientist. The problem statement consists of sentences which would make it clear what the researcher wanted to investigate in the study. But the process of problem formulation involves originating the research questions, rationale or the need for studying the research problem and specifying the research problem. Thus problem formulation and problem statement are the core of our study which direct us further in the research process.

Conducting Pilot Study

A pilot study is a small scale preliminary study conducted in order to evaluate the feasibility, time, cost and adverse effect, if any. It is an attempt to predict an appropriate sample size and improve upon the study design prior to the original research project. It is an attempt to avoid wastage of time and money on an inadequately designed project.

Setting Objectives

The objectives provide an accurate description of the specific statement of what is going to be studied in the research. Research objectives guide us in the research process and help us to reach pertinent conclusions.

Proposing Hypothesis

The word hypothesis comes from the Greek word "*hypothesis*," meaning "to suppose". Thus hypothesis refers to a provisional idea whose merit requires evaluation. A hypothesis can be defined as a tentative statement about the relationship between two or more variables, which could be proved or disproved through the study. Proven hypothesis may become part of theory.

Universe and Sampling

In research, universe represents the total number of individuals, events or observations under study. It is also known as population. However in most of the cases it is not possible to study the entire population or universe. In such cases we select some representatives from the universe and investigate in detail. The selected observant from the universe is called sample. The method of selecting a sample from the universe is known as sampling.

Pretest

Pretest is the application of data collection tool before a few respondents and get it tested before it is actually applied. It helps the researcher to identify the mistakes of the tool and to make modifications.

Tools of Data Collection

Data collection is the process of gathering and measuring information on variables of interest, in a systematic manner that enables one to answer stated research questions, test hypotheses, and evaluate outcomes. Inaccurate data collection can affect the results of a study and ultimately lead to invalid results.

The various methods of data collection involve the use of appropriate recording forms. These are called tools or instruments of data collection. They consist of:

- Observation schedule,
- Interview guide,
- Interview schedule,
- Questionnaire,
- Rating scale,
- Checklist, etc.

The selection and application of above tools depend on the nature and method of data required for the study. The tools of data collection translate the research objectives into specific questions. The responses to the questions will provide the data required for the research objectives.

Analysis and Interpretations

Data analysis consists of examining, categorizing, tabulating or otherwise re-combining the data collected to verify the initial propositions of a study. The purpose of the data analysis and interpretation is to transform the data into a credible evidence of the study. It is important to interpret the data to establish the relationship between the variables.

Findings and suggestions

In findings, the investigator draws certain conclusions based on the analysis. The findings are made relevant when it is based on the objectives and hypothesis. The investigator makes suggestions based on these findings.

Reporting

Reporting is the process of documenting the research in a communicable manner. The entire report is divided into different chapters. The process and findings of the research work is presented in a simple language so that others could easily understand it.

The report will usually contain a statement of the problem, the methodology of the study, data analysis and interpretation, and findings and suggestions.



Chapters of a research report

- Title
- Dedication
- Certificate
- Preface
- Acknowledgement
- Table of Contents
- List of Tables
- List of Figures
- 1. Chapter 1 Introduction
- 2. Chapter 2 Review of literature
- 3. Chapter 3 Objectives of the study
- 4. Chapter 4 Methodology
- 5. Chapter 5 Analysis and Interpretations
- 6. Chapter 6 Major Findings and Suggestions
- 7. Chapter 7 Summary and Conclusion
- Bibliography
- Appendices



Check Your Progress

1. What are the different types of social work research?
2. What are the steps involved in social work research?



1. Design a mini-research proposal on problems among Plus Two students, such as smoking, substance abuse, truancy, mobile misuse, etc.
2. Conduct a research, prepare a research report, and publish the major findings on your school notice board with the guidance of your teacher.

Summary

This chapter helped us to learn the secondary methods of social work. Secondary methods are the auxiliary methods used to support the primary methods and makes indirect intervention with the clients. The secondary methods of social work are Social Action, Social Welfare Administration and Social Work Research. Social action is the organised effort to change or improve social and economic institutions. Some of the social problems like dowry system, destruction of natural resources, alcoholism, labour exploitation, human rights violations, etc. can be tackled through social action. Social Action method has unique characteristics and principles which help the practitioners to apply the methods in an accurate manner. Social welfare administration as a method of social work looks for administrative and managerial skills among the practitioners for carrying out specialized welfare services. The skills in planning, staffing, directing, delegating, monitoring, budgeting, reporting, evaluating etc. are essential for social workers while administering welfare services. Social work research is the systematic and critical investigation of questions in the social welfare field with the purpose of yielding answers to problems. Generalization of these findings builds the scientific knowledge base for social work practice. It helps to understand the various problems in the society, its magnitude, and causative factors. It also produces data for planning and problem solving.

Evaluation Questions

1. Analyse the importance of social action to address mass social problems.
2. Describe the process of social action.
3. Prepare social action strategies to mobilise public opinion against dowry.
4. 'Social welfare administration is essential for the effective implementation of welfare programmes'. Comment.
5. Describe the important functions of social welfare administration.
6. Prepare a note on the relevance of research in social work practice.
7. Develop a questionnaire to study the mobile phone usage among adolescents.
8. Principles are the guidelines to ensure success in any endeavor. List out the principles of social action.
9. The diagrammatic representation of distribution of power and responsibilities within an organization is known as
10. What is the use of pretest in social work research?

Leadership and Communication

Significant Learning Outcomes

After the completion of this chapter, the learner:

- Appraises skills and qualities of effective leadership.
- Identifies the types of leadership.
- Chooses appropriate communication skills in accordance with the situation.
- Describes the process of communication and classify the types of communication.
- Identifies the relevance of Public Relations in an organisation.
- Recognizes the tools used in public relations.

Content

3.1 Leadership

Characteristics of Leadership
Functions of a Leader
Qualities of a leader
Types of leadership
Leadership in Social Work

3.2 Communication

Process of Communication
Types of communication
Barriers of Communication
Effective Communication
Communication and Social Work

3.3 Public Relation

Characteristics of Public Relation
Functions of Public Relations
Public Relation Tools and Techniques



3.1 Leadership



"I am a success today because I had a friend who believed in me and I didn't have the heart to let him down." **Abraham Lincoln**

India launched the satellite SLV-3 Rohini in 1979. Even though, everything was checked before launching, the satellite crashed down soon after the take off. After the incident, ISRO Chairman, Dr. Satish Dhavan met the media and took the entire responsibility of failure and congratulated his colleagues for their great effort.



In the following year ISRO successfully launched SLV-3 Rohini. Dr. Satish Dhavan gave all credit of this success to his colleagues and asked A.P.J. Abdul Kalam to address the media on behalf of ISRO.

What quality of Dr. Satish Dhavan is seen here?

-

Dr. Dhavan as a leader gives credit of this great success to his team members. Sharing the credit of victory with the followers is a quality of a good leader.

India is blessed with eminent leaders like Mahatma Gandhi, Jawaharlal Nehru, Dr. B.R. Ambedkar, Moulana Abdul Kalam Azad etc. Why do we consider them as great leaders?

-

India is the largest democratic country in the world. We go to polling booths to elect our representatives. What qualities we look for in selecting them?

-

We look for the leadership qualities in them. A democratic country needs effective leadership to lead its citizens to new heights and horizons. Effective

leadership helps our nation during times of difficulties. It makes a business organization successful. It enables a nongovernmental organization to fulfil its mission. It fulfils the goal of social work. The effective leadership and guidance from parents enable children to develop their personality. Can you imagine the condition of a nation/organisation/family without leadership?

The absence of leadership affects the functioning of any organisation. Without proper leadership, organizations move slowly, stagnate, and lose their way. The absence or failure of leadership may lead to ineffective decision making. A social worker can't perform effectively without leadership skills.

Do you want to be a leader? Or, if you're already a leader, do you want to improve your leadership qualities? Do you want to influence others in achieving goals? Do you want to be a guiding force in your organisation? Do you want to climb the ladder to positions of higher authority? Leadership will make these things possible. So what do you understand by leadership?

●

“**Leadership** is a process whereby an individual influences a group of individuals to achieve a common goal.” (Peter G. Nothouse 2013) It is a process by which a person influences the thoughts, attitudes, and behaviour of others. According to John Newstrom and Keith Davis **leadership** is “the process of influencing and supporting others to work enthusiastically towards achieving objectives.” It is a process whereby one individual influences other group members toward the attainment of defined group or organizational goals.

Leaders set a direction for the rest of the people; they help others see what lies ahead; visualize what to achieve; encourage and inspire others. Leadership is the ability to get other people to do something significant and energize people towards a goal. So let us see the characteristics of leadership.

Characteristics of Leadership:

- It influences a group of individuals to achieve a common goal
- It contributes for the success of an individual, group or organization.
- It transforms policies into action.
- It utilizes the potential in an organization and its people.

So we can see that leadership is a major way in which people change the minds of others and move organizations forward to accomplish identified goals.

We have already discussed the concept of leadership. Now can you answer the question who is a leader?

A leader can be defined as a person who is able to get others to follow willingly. Leader is a person committed to the organization and the people who work together to accomplish the organization's vision and mission.

Functions of a Leader:

A leader has to perform many functions. The functions or the different roles that a leader has to perform depend on the type, structure and goal of the group. The functions that a General of the Army has to perform are quite different from the functions that a political, social, or religious leader has to perform. Let us discuss some functions of a leader.

- a. **Policy Maker:** An important function of the leader of any group is to set the group's goals, objectives and policies. He has to lay down specific policies and objectives and inspire the followers to work towards the attainment of the goal.
- b. **Planner:** The leader plans the ways and means that are to be adopted for the achievement of the objective of the group. The leader designs long-term and short-term objectives.
- c. **Executive:** In his executive function, the leader has to ensure that the plans and policies are executed. The leader has to coordinate the activities of the group.
- d. **Group Representative:** The leader represents the group in its external relations. He is the official spokesperson of the group.
- e. **Controller of Internal Group Relationship:** The leader controls the internal relations among the members of the group. He tries to promote good relationship among the group members. He encourages team spirit and tries to develop the group into a cohesive unit.
- f. **Controller of Reward and Punishment:** The leader gives rewards and punishments to motivate, discipline and control the group members. He rewards the members who contribute and work towards the attainment of group goals and punishes those who obstruct the group's progress.
- g. **Arbitrator and Mediator:** The leader acts as an arbitrator and mediator when there are conflicts or differences among the group members. He must resolve disputes in a fair and just manner. He tries to establish good inter-group relationships, reduce tensions in the group and establish harmony.

- h. **Exemplar:** The leader serves as a role model to the members of the group. He must serve a model for others to follow and set high standards.
- i. **Father Figure:** The leader plays the emotional role of a father figure of the group. He has to be a source of psychological and moral support to the followers at the time of crisis. He guides his followers not only in work related issues but also helps in their personal life.
- j. **Scapegoat:** The leader is accountable for the performance of the group. Hence when the group does well the leader gets a lot of credit for it. However, when the group performs poorly or fails the leader is held responsible for it even though the leader did everything possible. Thus he has to play the role of a scapegoat.

Qualities of a leader

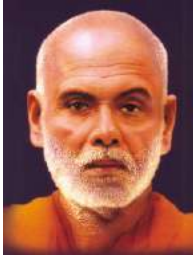
How often have you heard the comment, “He or she is a born leader?” There are some people with certain characteristics that can help them to become leaders.

Whether a person is a born leader or he develops skills and abilities to become a leader is open for debate.

There are some clear aspects that are found in good leaders. These qualities can be naturally a part of their personality or it can be developed in them in course of time. The following diagram shows the major qualities of a leader.



Types of leadership



You know these leaders! Mahatma Gandhi, Nelson Mandela, Abraham Lincoln, A.P.J. Abdul Kalam, Sree Narayana Guru, Lal Bahadur Shastri, Henry Ford, Napoleon Bonaparte. Each of them has their own style of leadership. List out their peculiarities and identify their leadership style.

●

Leadership style is closely related to the leadership skill of the individual. The leadership style embodies the values, beliefs and traits of the leader. Different styles are needed to handle different situations and a leader should know which style best suits his situation. The leadership strategy determines the leadership style.

So, let us overview some of the popular leadership styles.

a. Autocratic Leadership Style:

In Autocratic leadership, leader retains as much power as possible. It involves decision making and passing them to the subordinates. Employees are expected to follow the orders without any explanation. Followers have little opportunity to give suggestions.



b. Bureaucratic Leadership Style:

In bureaucratic leadership, leaders are governed by the “rule book”. They strictly abide by the rules, policies and procedures. Leaders expect the same from their followers. The control and discipline enforced in this style limit follower’s freedom and creativity. However, this style of leadership proves to be effective for employees working on routine tasks, handling sophisticated items etc.

c. Democratic Leadership Style:

Democratic leadership style or participative style is the most popular leadership style from the perspective of a team member. The participants enjoy the confidence of their leaders and are invited to contribute to the decision making process. It increases their satisfaction and provides room for personal growth and development. It also yields high quality of work and boosts the participant’s morale by allowing them to accomplish their goals. For democratic leadership style the only drawback lies in the fact that it is a time consuming affair.

d. Laissez-Faire Leadership Style:

Laissez-Faire literally means “leave alone to act freely”. In this style of leadership, the leader provides little or no direction to the members. In fact the authority to determine the goals, making decisions and resolving problems are vested with the team members and they enjoy the maximum freedom. This sort of leadership style is applicable for highly experienced members working in a creative organization.

e. Charismatic Leadership Style:

Charismatic leaders gather followers by virtue of their personality and charm. They do not use authority or force over followers to obey their orders. They make the best use of their body language and persuasive skills to stir up a sense of enthusiasm in the minds of their followers. In the eyes of the followers, success is directly linked to the presence of the leader. Thus a charismatic leader carries a lot of responsibility to satisfy the demands of his followers.

There are certain other leadership styles too and let us look at some of them:

f. Situational Leadership Style:

As the name implies, situational leadership focuses on leadership in situations. This theory believes that different situations demand different kinds of leadership.

From this perspective, to be an effective leader, a person is required to adapt his or her style to the demand of different situations. Situational leadership stresses that leadership has directive and supportive dimension and each has to be applied appropriately in a given situation. Hence the strength of the Leadership lies in the ability of the leader to switch between different leadership styles depending on the nature of the situation and the people they lead. In the long run, leaders are recognized and remembered by their capacity to care their followers, their communication skills and commitment to the cause.



More Styles

- a. **Transformational Leadership Style:** In this leadership style, the leaders instill a lot of enthusiasm in their teams by adding values with positive contribution and focuses on transforming an organisation.
- b. **Transactional Leadership Style:** This type of leadership style largely involves implementing managerial activities, as it starts with the idea that team members will abide by the leader. In this type, the leader follows “reward for better work” policy.
- c. **Servant Leadership Style:** According to this style of leadership, the leaders achieve results by focusing on the needs of their peers and their bosses.
- d. **Paternalistic Leadership Style:** The way a Paternalistic leader works is by acting as a father figure by taking care of the group members. In this style of leadership, the leader shows complete concern for his followers or workers.

Leadership in Social Work

The social workers take pride in themselves for helping the helpless. The core values like code of ethics, social justice, worth and dignity etc encourage social workers to practice their profession with full competency. Therefore leadership qualities are essential for social workers to excel in their practice.

The social workers correct injustice and find ways to care for the poor and disadvantaged. In this lead role social workers get ample opportunity to serve the humanity.

The social worker and leaders intervene in crises, mediate conflict, advocate on behalf of clients, and identify resources. We apply leadership ability in the

methods of social work especially in social group work, community organisation, social action and social welfare administration.

In social group work, the social workers intervene and guide in each stage of group formation and also promote leadership among the group members. In community organisation, the social worker initiates the community to identify the resources for meeting their needs. Being a facilitator in community organisation, the social worker enables community to prioritize their identified needs through local leadership. Each stage of community organisation promotes local leadership.

In social action, social worker triggers the people against injustice, atrocities and social evils. The success of these actions totally depends on effective leadership. In social welfare administration social worker acts as a manager, coordinator, administrator, community organiser, project manager etc. These roles can be performed only through successful leadership. So leadership qualities are essential to practice social work.



Check Your Progress

1. Define leadership.
2. List out the essential skills required for a good leader.
3. Identify the characteristics of an effective leader.



1. Collect the pictures of various leaders and prepare an album indicating their qualities.
2. Prepare a power point presentation on a leader you like and present it in your class.

3.2 Communication



“ The eyes of men converse as much as their tongue,
with the advantage that the ocular dialect needs no dictionary,
but is understood the world over.” -

Ralph Waldo Emerson

Rabeem is a star among his classmates; wherever he goes he gets friends there. Everyone likes to interact with him. Whenever a programme takes place in the class or school, his speech is the centre of attraction.

Can you identify the quality that makes him distinct?

-

Of course, he has a special skill, that is communication. Communication skill is an important aspect in everyone's life. The success of an endeavour depends on the ability to communicate effectively. Effective communication includes the usage of words, fluency of language, voice modulation and body language.



Using the right tools to communicate the right messages at the right time helps to overcome crisis situations and motivate people to work towards success. So the social workers should be good in communication. Communication skills are important in all spheres of life, especially in social work scenario.

Communication skill means the abilities required to receive and express oneself both verbally and non- verbally in ways that are appropriate to one's culture and situations. In fact, communication is successful only when both the sender and the receiver reach a common understanding on the information as a result of the communication process. Now can you define communication?

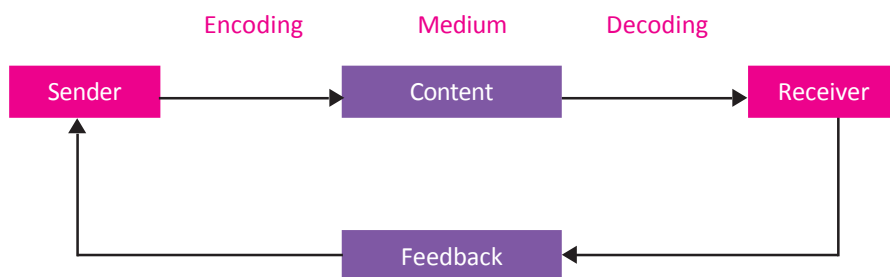
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Communication can be defined as the process of transmitting information and common understanding from one person to another (Keyton, 2011). The word 'communication' is derived from the Latin word 'Communicare' which means 'to share.' It is the process of transmitting information and understanding. Skill to communicate depends on the capacity of an individual to convey ideas and feelings to another to evolve a desired response. Let us discuss the process of communication.

Process of Communication



Communication is a process that involves certain distinct steps. Communication is not complete till the message conveyed by the sender is properly understood by the receiver. Any communication process should necessarily have the following elements.



The process of communication is illustrated below:

- a. **Sender (Encoder):** Communication process begins with the sender who wishes to send a message to the receiver. The sender is also called the 'encoder' because to encode is to put the message into a medium. Sender is also termed as the source from where the message originates.
- b. **Message:** The message is what the sender wants to convey to the receiver. It can be an idea, feeling, or a piece of information. Generally every message has a purpose or objective.
- c. **Medium or Channel:** It is the medium of transmission from one person to another. For communication to be efficient and effective, the channel must be appropriate for the message.
- d. **Receiver (Decoder):** Receiver is the person or group for whom the communication is intended. If the message does not reach the receiver, communication has not happened. Receiver decodes the message thereby interpreting and translating it into meaningful information. Hence a receiver is also known as a decoder.
- e. **Feedback:** It is the reaction on receiving the message. Without it the sender cannot know whether the receiver has received or grasped the message or not.

Thus, in the process of communication the sender encodes the message and transmits it through the most appropriate channel to the receiver who decodes it and sends the corresponding feedback.

There are so many ways to communicate. Now let us see various types of communication.

Types of communication

Based on the communication channels or medium used, communication can be divided into:

- A. Verbal Communication
- B. Nonverbal Communication

A. Verbal Communication

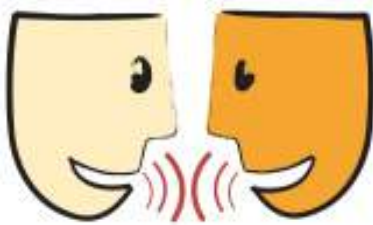
The term 'verbal' denotes the use of words. When words are used in communication-be it spoken or written it is termed as verbal communication.



Verbal Communication is further divided into:

- a. Oral Communication
- b. Written Communication

a. Oral Communication



In oral communication, spoken words are used. It includes face-to-face conversations, speech, telephonic conversation, audio, video, voice over internet etc. In **oral communication**, communication is influenced by pitch, volume, speed and clarity of speaking.



Advantages of Oral communication:

- It is a speedy and fast way of communication.
- The speaker is able to get the personal attention of the receiver.
- It allows instant feedback.
- It is supplemented by non verbal signals.

Disadvantages of oral communication:

- It is not suitable in complex and controversial messages.
- It is expensive and time consuming when distant locations are involved.
- It leaves no documentary proof.
- It is more prone to physical noise.

b. Written Communication

In written communication, written signs or symbols are used to communicate. A written message may be printed or handwritten. In written communication,

message can be transmitted via email, letter, report, memo etc. Message, in written communication, is influenced by the vocabulary and grammar, writing style, precision and clarity of the language etc.



Advantages of written communication:

- It is permanent and can be used for future reference.
- It can be composed in advance and less prone to errors.
- It can address many people at a time.
- Messages can be edited and revised many times before it is actually sent.

Disadvantages of written communication:

- It is time consuming.
- Immediate feedback is not possible.
- Certain messages cannot be put in writing.
- Interpretation may vary.
- It is not possible to see nonverbal signs.

B. Nonverbal Communication

Nonverbal communication is the sending or receiving of wordless messages. We can say that communication other than oral and written, such as gesture, body language, sign language, posture, facial expression, are called nonverbal communication. Nonverbal communication is all about the body language of the speaker.

Nonverbal communication helps receiver in interpreting the message received. Often, nonverbal signals reflect the situation more accurately than verbal messages. Most of us fail to realise that a great deal of our communication is in a non verbal form as opposed to the oral and written forms.

Types of Communication Based on Purpose and Style

Based on style and purpose, there are two main categories of communication and both of them bear their own characteristics. Types of communication based on style and purpose are:

- a. Formal Communication
- b. Informal Communication

a. Formal Communication

Certain rules, conventions and principles are followed in formal communication. Formal communication occurs in formal and official style. Usually professional settings, corporate meetings, organisations and conferences follow the formal pattern. Hierarchy has a very important role here. Formal communication is effected in vertical - upward (subordinate to superior), downward (superior to subordinate) and horizontal (between same levels) directions. Authority lines are needed to be followed in formal communication.



For example, the principal communicating with the teachers in a staff meeting is formal, vertical, downward communication, whereas students communicating with a teacher is an example of vertical upward communication. Teachers discussing about the youth festival is an example of horizontal communication.

b. Informal Communication

Informal communication is different from formal communication. It is just a casual talk. It happens among friends and family. In informal communication, we may use slangs and local dialects. Usually, informal communication is done orally along with gestures. Informal communication, unlike formal communication, doesn't follow authority lines. Informal communication helps in building relationships.



Barriers of Communication

'In a school tour, Jindo a plus one student was found missing from the team and he was stranded in Kolkatta. He asked a shop keeper, in his mother tongue, how he can find his group. The shopkeeper couldn't understand anything. As he was afraid, he did not approach the police officer. Immediately he saw their bus moving faraway, he shouted but nobody heard it'.....



- What are the crises faced by Jindo?
-

Can you identify various obstacles faced by Jindo in his communication?

-

Jindo faced different barriers in his communication process like language, fear, distance etc. Like this, barriers of communication occur at any stage of communication process. These barriers may lead to message distortion and lead to wastage of both time and money. It results in confusion and misunderstanding. The following are the barriers of communication.

a. Language Barriers

Language and linguistic ability may act as a barrier to communication. However, even when communicating in the same language, the terminology used in a message may act as a barrier if it is not fully understood by the receiver.

For example, a message that includes a lot of specialist jargon and abbreviations will not be understood by a receiver who is not familiar with the terminology.

b. Psychological Barriers

The psychological state of the communicators will influence how the message is sent, received and perceived.

For example, if someone is under stress, they may be preoccupied with personal concerns. They will not be able to receive the message correctly. Anger is another example of a psychological barrier to communication. When we are angry, there can be flaws in our communication. It is easy to say things that we may regret later and to misinterpret what others say.

c. Physiological Barriers

Physiological barriers may result from the receiver's physical state.

For example, a hearing impaired receiver may not grasp the spoken conversation especially if there is significant background noise.

d. Physical Barriers

An example of a physical barrier to communication is geographic distance between the sender and receiver(s).

For example, distance, noise, walls

Communication is generally easier over shorter distances. Although modern technology often serves to reduce the impact of physical barriers, the advantages and disadvantages of each communication channel should be understood so that an appropriate channel can be used to overcome the physical barriers.

e. Attitudinal Barriers

Attitudinal barriers are behaviours or perceptions that prevent people from communicating effectively.

Attitudinal barriers to communication may result from personality conflicts, personal bias, poor management, and resistance to change or lack of motivation. Receivers should attempt to overcome their own attitudinal barriers to facilitate effective communication.

Communication is not a one-way street. To have others open up to us, we must be open ourselves. By overcoming the barriers to communication, we can ensure that the statement we are making is not just heard, but also understood, by the person we are speaking with. In this way, we can be sure that our point has been expressed and effectively communicated. Now let us see how we can make communication effective.

Effective Communication

Vinod is highly intelligent and completed his MBA with first rank. He attended many competitive exams and scored high marks. Even now he remains jobless because he couldn't perform well in group discussion and interviews.



Why is he poor in group discussion and interview?

-

Vinod lacks effective communication skills. How can we help Vinod?

-

Of course Vinod can be helped to overcome barriers in communication

-

Effective communication helps us to understand a person and situation better and enables us to lead a successful life. Effective communication is more than just exchanging information; it is about understanding the purpose and emotion behind the information.

Effective communication can:

- improve relationships at home, work place, and in social situations.
- improve teamwork, decision-making, and problem solving.
- enable us to communicate even negative or difficult messages without creating conflict or destroying our confidence level.

Effective communication combines a set of skills including nonverbal cues besides verbal, attentive listening, emotional sensitivity etc.

The following will make communication more effective:

- Use concrete words wherever possible.
- The content should be easily understandable to the receiver
- Consider the capability of the receiver.
- There should be a proper blend of verbal and non-verbal communication
- Eye contact should be maintained
- Speak at a moderate speed
- Create rapport with the receiver
- Select appropriate medium
- Encourage listening and feedback
- Avoid communication during an emotionally agitated state.
- Make the message attractive, brief and clear.

Communication involves a number of skills. Everybody can improve communication skill through learning and practice.

Communication and Social Work

Effective communication skills are required to practice all methods of social work. The case work process involves the transmission, reception and interpretation of verbal and nonverbal messages in order to communicate the nature of experiences. Skill in receiving, understanding and sending verbal and nonverbal communications are regarded as really important in the interaction between the social worker and the client.

In the group work process patterns of interaction and the methods of communication are complex and not easily understood. Social workers are involved in improving the situations where problems of interaction exist among group members. They have to make decisions for modifying communication patterns.

Community organisation involves a set of people collaborating and communicating with each other in a systematic and continuing fashion for the performance of a common task.

In social action communication is the tool with which the mass support is gained against issues concerning them. Only a social worker with good communication skill can convince the authorities the need for new social legislations.

In social welfare administration, the social worker makes the social welfare needs of the people met, for which effective communication is a must. POSDCORB necessitates the use of effective communication in social welfare administration.

Social work research largely depends on the communication skill of the researcher to conduct the survey, to gather information, to interpret data, to analyse the data, to prepare report, etc.

In short, social work cannot go without communication.



Check Your Progress

1. Define Communication.
2. Draw the diagram showing the process of communication.
3. Identify the components of communication.



1. Conduct a role play which illustrates various forms of communication

3.3 Public Relations

Our government implements lots of welfare programmes and projects all over the country.

How do we come to know about such programmes?

●



You may know, government has a particular department to deal with such communication.

Which is that department?

●

Yes, the Public Relation Department. This department communicates with public through mass media such as news paper, radio, television, brochures, notices, etc.

Mutual dependence of people and government or social organisations has created the need for a new philosophy, which we refer to as public relations. Public relations (PR) is the way governments, organisations, companies and individuals communicate with the public and media. A public relation specialist communicates with the target audience directly or indirectly through media with a view to creating and maintaining a positive image. Examples of public relation include press releases, newsletters, public appearances, etc. as well as utilisation of the websites.

So what do you mean by public relation?

●

“**Public relation** practice is the deliberate, planned and sustained effort to establish and maintain mutual understanding between an organisation and its public”- Council of the Institute of Public Relations (1948).

‘Public relation is a social philosophy of management expressed in policies and practices, which through sensitive interpretation of events based upon two way communication with its public, strives to secure mutual understanding and goodwill.’

Public relation is the professional attempt to establish better relationships to

promote success or welfare of the government, organisation, or institution. A large number of social workers are appointed in Government sector, NGO level, and in private institutions as public relation officers and managers.

Characteristics of Public Relation

- i. Public relation is a two way communication.
- ii. Public relation is action resulting from policies.
- iii. It is a planned effort or a management function.
- iv. It is the relationship between an organisation and its public.
- v. It is the evaluation of public attitudes and opinions.
- vi. It shares the programmes and activities of an organization among public.
- vii. The result of public relation activities are development of rapport, goodwill, understanding and acceptance of the public.

Functions of Public Relations

- Anticipating, analyzing and interpreting public opinion, attitudes and issues that might affect the operations and plans of the organization.
- Provide support to management at all levels in the organization with regard to policy decisions, course of action and communication, taking into account the organization's social or citizenship responsibilities.
- Conducting research and evaluation, programs of action and communication.
- Planning and implementing the organization's efforts to influence or change public policy.

Public Relation Tools and Techniques

Public relation specialists and firms use a number of tools and techniques to boost their clients. Public image help them to form a meaningful relationship with

the target audience. To achieve this, they use tools such as news releases, statements for media, newsletters, organising and participating in public events or conferences, conventions, awards, etc. Public relation specialists also utilise the internet tools such as social media networks and blogs. These tools generally



come under the category of advertising, lobbying, press agency and publicity. Through the above mentioned tools, Public relation specialists give the target audience a better insight into their activities and products/services and thus increase its publicity.

Who Can Work as a Public Relations Specialist

A public relation specialist is usually required to have a relevant type and level of education such as a Bachelor's degree in Social Work, Communications or Journalism. Educational qualification alone however, is not enough to become a public relation specialist. A public relation specialist needs certain skills (which can be acquired through additional education and training). The prime requirement is excellent oral and written communication skills. But a public relation specialist also should be able to work under pressure and answer a variety of questions. For example, if the organization is under a public “attack”, a public relation specialist needs to establish a control over the situation and protect its reputation. A professional social worker can handle the public relation role successfully.



Check Your Progress

1. What do you mean by public relation?
2. Identify the functions of public relations.



1. Collect various types of notices, brochures, newsletters, etc. of various organisations and prepare a collage.

Summary

This chapter introduces the concept of leadership, which is evolved from innate abilities and learned skills. It comprise of skills and abilities. In simple terms, leadership is a process whereby an individual influences a group of individuals to achieve a common goal. Recently, theorists and practitioners have identified core elements of leadership for social work organisations. Hence social work students and leaders can follow these leadership qualities in social work programmes. In the second part of this chapter we studied communication as a complex process of interaction between thought, language, and action. Whenever a person communicates with another, s/he communicates something through a particular medium and for a particular purpose. A message establishes a relationship between transmitter and receiver. Communication is a two way affair

and feedback plays an important part in affecting subsequent communication. A professional social worker requires better communication skill in order to practice different methods of social work. Communication is an important channel for diagnosis and treatment in social work. In the last part, we learned that public relation is the management function that identifies, establishes and maintains mutually beneficial relationships between an organisation and public on whom its success or failure depends. Public relation is an inseparable part of social work profession. Social workers have an important role in promoting public relations in government as well as in various organisations.

Evaluation Questions

1. Leadership is the key to success in an organization. Do you agree? Why?
2. Hitler is an example ofleader.
 - a. Democratic
 - b. Autocratic
 - c. Laissez-faire
 - d. Bureaucratic
3. Inleadership style leader take decision on the basis of law and procedures.
 - a. Buerocratic
 - b. Transactional
 - c. Transformational
 - d. Laissez-faire
4. Leaders are not born, but made'-Comment.
5. 'Leader may be a scapegoat in a crisis'. Explain?
6. Communication process starts from.....
 - a. Decoder
 - b. Encoder
 - c. Messenger
 - d. Mediator
7. Sign language forms.....type of communication.
 - a. Oral
 - b. Written
 - c. Verbal
 - d. Nonverbal
8.is a deliberate and planned effort to establish a relationship between an organisation and the public.
9. What are the barriers of communication?
10. How can you make communication more effective?
11. Prepare a flow chart showing various types of communication.
12. If you are distracted by the noise of the students while you are presenting a paper, how will you tackle it?
13. 'Lack of public relation destructs the organisation and its programs'. Do you agree? Why?
14. If you are appointed as a PRO in a hospital, what are the functions you have to perform?

Development and Resource Mobilization

Significant Learning Outcomes

After the completion of this chapter, the learner:

- Recognises the concept of development, and examine the various approaches to development.
- Recognises the concept of community development, and list out the various Community Development Programmes.
- Appraises the concept of need assessment and describe strategies, including PRA to assess community needs.
- Describes and categorise various resources and methods of resource mobilization.
- Describes the concept of project planning and formulate a project proposal.

Content

4.1 Development

Development Objectives
Dimensions of development
Approaches to development

4.2 Community Development

Community Development
Objectives of Community Development
The Community Development Programmes in India

4.3 Need Assessment

4.4 Participatory Rural Appraisal (PRA)

The PRA Methods
Methods Supportive of PRA
Methods with direct participation
Resource Map

4.5 Resource Mobilization

Objectives of resource mobilization
Methods of resource mobilization

4.6 Project Planning

Characteristics of a Project
The Project Planning Process

4.1 Development

Have a look at this dialogue:

Sonu: Raju, how lucky we are to have good schools and other facilities nearby.

Raju: Sonu, why do you say so now?

Sonu: It is only yesterday my grandpa told us about his childhood in our family get together.

Raju: What is so special about it? Tell me.

Sonu: During their childhood, my grandpa used to walk three hours barefoot to attend the school 8 kms away. They had to cross a river in a 'thoni'. The bridge we see was not built then. They used to have rice gruel in the morning before they went to school, and most of the days they had no lunch. My grandfather had six siblings - two of them died immediately after birth, and one of them died very young due to cholera. Healthcare facilities were rare during those days. Most of the children in the locality died very young, and most of the villagers had no education at all. The only bus they depended on came to a place 12kms away from our village. Their condition was miserable. Yet, as grandpa lamented, there was plenty of space to play, clear river water to swim in, clean air to breath and pure water to drink...

Do you know anything about the living conditions of your parents during their childhood?

●



When we look around us, we see a lot of changes taking place everywhere. What changes do you observe over the last five years in your community?

●

Bridges, schools, large number of vehicles, roads, rails, huge buildings, hospitals, mobile phone and internet, etc. are very common now.

What can we call these changes?

●



These types of advancements and positive changes can be considered as signs of development.

Development is a term that has received great significance today. Development has always been there in every society. Development is viewed differently as improvement, economic growth, modernization, industrialization, social change, etc. In other words, development is the improvement in the standard of living of the people.

Development is the process of economic and social transformation.

Can you define development?

●

The concept of development has many perspectives.

The Webster's Dictionary defines development as "causing something to unfold, to grow, to change for the better, to be realized. It regards a certain entity as being endowed with certain potentials which society should discover and maximize".

Development is a planned social change in a direction which is considered desirable by the members of the society. Changes that qualitatively affect the day to day lives of members of the society are generally termed as development.

Development is the evolutionary process of creating the conditions necessary to achieve favourable conditions of life. Development takes place at multiple levels: within individuals, families, communities and nations. Development is also deeply linked to values as well as basic freedom, economic justice, transparency, security and political expression.

Development is the need and the means to provide better lives for people. It includes not only economic growth, but involves social, cultural and environmental betterment. Ideally, development should be accessible to one and all.

Development Objectives

The improvement of human well-being is the basic objective of any developmental initiative. Based on this, let us list out the objectives of development as follows:

- Improvement of Economic Capabilities:-includes improvement of agricultural and non-agricultural income, improvement of industries, and development of infrastructures, improvement in service sector, etc.
- Improvement of Human Capabilities:- includes general health improvement and development of educational standards and personal potentials.
- Improvement of Protective Capabilities :-includes conservation of natural environment and natural disaster prevention measures.
- Improvement of Political Capabilities:- it includes empowerment, decentralization and improvement of policy-making capabilities.

Dimensions of development

Development is a multidimensional phenomenon associated with a variety of social, economic and political factors. High per capita income, high human development, effectiveness in governance, significant reduction of inequalities, large social transformations, corruption free political system, etc. are some of the accepted indicators of development.

The major dimensions of development are:

- **Economic** : Higher rate GDP, per capita income, employment rate, standard of living
- **Social**: Equity and equality in the distribution of income and wealth, health and health care services, education, human development, etc.
- **Political**: Participation in decision making, transparency in governance, effectiveness of government machinery, quality of political system, etc.



- **Cultural:** cultural freedom, creative empowerment, belief system, values, etc.
- **Environmental:** conservation, sustainability, pollution-control, green initiatives, judicious and optimal use of natural resource, etc.



Check Your Progress

1. Define development in your own words.
2. Identify the dimensions of development.

Approaches to development

Different approaches have been used to discuss the concept of development from time to time. We cannot put forward an ideal approach to development at all times because each one has its own merits and demerits. The suitability of the approach depends on different factors. Let us discuss a few approaches of development.

A. Charity Based Approach

In plus one, we have learnt about '*punya*,' '*dana*' etc. which form part of charity.

Charity based approach is one of the earliest approaches to development. It can go as far back as medieval times where, for instance, religious groups helped people in many ways. The word charity means 'benevolent giving by those who have more to those who have less'.



Limitations of the charity approach

- It makes the receiver dependent and inferior.
- There is no role for recipients in decision making.
- It does not address the root cause of the situation.

B. Basic Needs Approach

You have studied about needs in your plus one class. Can you identify what are the basic needs of human beings?

-

Food, shelter, clothing, primary education, etc. are needs basic to everyone. It is important to ensure and satisfy the basic needs of the citizens, through development initiatives.

Do you think everyone is able to satisfy their basic needs?

-

There are many around us who are denied even the basic needs. For promoting this type of development, we use basic needs approach.

The basic needs approach was suggested by the International Labour Organization in 1976 when the poverty alleviation programs were not creating the desired results in developing countries. It tried to define an absolute minimum of resources necessary for long-term physical well-being. The basic-needs approach argues that development need to be humanized and focused not on economic wealth, but on basic facilities such as housing, education, health care, and food supply.

The approach tries to determine what a society needs for survival, and for poor people to rise above the poverty line. Basic needs approach does not focus on investing in economically productive activities.

Limitations

- It lacks adequate theoretical support.
- It is in conflict with growth promotion policies.
- It leave the developing countries in permanent backwardness.

C. Rights Based approach

The rights-based approach is founded on the belief that every human being, by virtue of being human, is a holder of many rights. A rights-based approach to development involves a process of enabling and empowering those not enjoying their rights to 'claim' their rights. When individuals or people cannot exercise what they understand and believe to be their right, activists can encourage and help them to claim the right through various means - democratic, judicial and administrative and also through policy formulation. Raising the claim of one's right not only asserts an individual's ownership of her/his entitlement, but also helps to define the right as well as raises awareness that it is not a privilege, but a right.

D. Participatory Approach

Have you ever observed a *Gramasabha*?

Who are the members of it?

-

What are the issues discussed in a *Gramasabha*?

-



Gramasabha is the grass root level forum to address the concerns of people. It is the lowest level legal, democratic entity. The participants are given opportunities to take part in decision making on matters concerning them.

Development requires active participation of the people. If the local people participate passively in development projects, it might not be sustainable. Local participation in decision-making, project planning and implementation is essential. In other words, a project that the local people themselves plan and implement will address their felt needs and utilise local resources. Such participatory approaches attempt to introduce a bottom-up style to development, when compared to a centralised approach.

Merits

- It promotes democratic values.
- It locates and addresses felt-needs.
- It ensures participation in decision making.
- It fosters ownership and accountability.
- It develops local leadership.
- It ensures cost-effectiveness.
- It promotes sustainability.
- It envisages transparency.
- It ensures decentralisation of power and resources.
- It generates social capital.

Limitations

- It is time consuming.
- It may induce conflicts in the absence of consensus.
- Its success depends on the ability of participants.

E. Sustainable Approach

Sustainable development is, “development that meets the needs of the present, without compromising the ability of future generations, to meet their own needs.” (World Commission on Environment and Development, 1987). In other words, sustainable development is a comprehensive approach to promote development in ways that do not harm the environment, or deplete natural resources, so that they still will be available in the future. This allows time for the regeneration and replenishment of natural resources. In short, sustainable development is eco-friendly, cost-effective and ensures inter-generational justice.



F. Gandhian Approach: Mahatma Gandhi was a charismatic leader and a visionary who understood the importance of self reliance to bring the country on the path of development. He envisioned the village as central to development.



He initiated programmes such as Sarvodaya, Swadeshi- promotion of small scale and cottage industries, basic education (nayithalim), Anthyodaya, etc. According to him, India can develop only by making its villages self-reliant, which he termed ‘Grama Swaraj’. Gandhian approach continues to be relevant; we can see that the decentralised planning and people’s participation has its base in Gandhian philosophy.

G. Nehruvian Approach: Nehruvian approach is a unique Indian model which emerged during post-independence in India. As a great visionary of India, Nehru integrated the best part of the Western model of capitalism and Russian model of socialism; economists refer to the same as ‘mixed economy’. According to him, for development to happen, it should follow a definite pattern and for this he advocated the five year plans. In this approach, the public sector should concentrate in providing basic infrastructure through large scale industries, and at the same time ensure adequate agricultural production, and social welfare.



Kerala Model

Kerala shows high material quality-of-life indicators in spite of low per-capita income. The state exhibits significant improvements in standards of living, reflected in indicators of social development such as health, literacy, housing, people's participation, at par with many developed countries. Achievements such as low levels of infant mortality and population growth, high levels of literacy and life expectancy, along with the factors responsible for such achievements are important elements of the Kerala model. Kerala model development is one of the most debated models of development.

Kerala shows unique literacy and educational standard, standard of living, socio-economic standards, health services, and social welfare schemes. Social reforms and upheaval in educational standard help Kerala to make use of its greatest asset- well educated human resource that is largely responsible for this improved standard of life.

The Kerala Model suffers from certain limitations such as excessive consumerism, sectoral imbalance, and low productivity that limits GDP.



Check Your Progress

1. Define sustainable development.
2. Identify the merits of participatory development.
3. List out the limitations of charity approach.



- Prepare a power point presentation on various approaches to development and present it in your class.

People's Planning

The village level Panchayath is popularly known as the Gramapanchayath. Today the Panchayatiraj system offers opportunities for people to actively take part in decision making concerning matters related to them. This decentralised system ensures people's participation at all levels such as planning, organising, implementing, monitoring and evaluating all development



programmes undertaken by the gramapanchayath. The Government of Kerala has developed it into a massive movement; the program is popularly known as People's Planning.

The other initiatives such as *Gramasabha*, *Ayalkoottam*, *Vikasanasamithis*, *Vikasana seminars* and *Kudumbashree* were eventually emulated by various governments in the subsequent years.



Three-tier Panchayathiraj System

The Balwant Rai Mehta Committee was appointed by the Government of India in 1957 to examine the working of the Community Development Programme initiated in 1952. The committee recommended the establishment of a three-tier system of Panchayathi Raj institutions. Panchayati Raj made it mandatory for all States having a population of over 2 million, to hold Panchayat elections regularly every 5 years, and to provide seat reservations for scheduled castes, scheduled tribes and women. The 3-tier system of Panchayati Raj consists of:

1. Village-level Panchayats
2. Block-level Panchayats
3. District-level Panchayats.

Powers and responsibilities delegated to panchayats at the appropriate levels include:

- Preparation of the economic development plan and social justice plan.
- Implementation of schemes for economic development and social justice in relation to 29 subjects given in the Eleventh Schedule of the Constitution.
- Collection of appropriate taxes, duties, tolls, fees, etc.

4.2 Community Development

Observe the following report of the proceedings of a *Gramasabha*.

The convenor of the Gramasabha announced that this year they would consider Rani and Sobhana as beneficiaries of the Indira Awas Yojana. Lekshmiamma who is 83 years of age, was nominated as a beneficiary for the Old Age Pension Scheme. 6 families who belonged to the SC/ST category were found to qualify for the Annapoorna Scheme. Two workers, Shalini and Rabia, were felicitated on being awarded for their performance in the employment

guarantee programme. The convenor further announced the inauguration of the road constructed under the Pradhan Mantri Gram Sadak Yojana (PMGSY) scheme, and called upon all the members of the gramasabha to cooperate with them.

Like this, thousands of household all around the country underwent tremendous improvement in every aspect of life.

Did you observe the Panchayath member announcing many schemes/ programmes? Have you heard of any other programmes similar to this? What are these programmes together called?

●

They are called community development programmes. They bring in positive changes to the life of the people. Community development brings about the potential abilities of people for their own welfare. The UN Economic and Social Council observe that the term ‘community development’ has come into international usage to connote the progress by which the efforts of the people themselves are united with their governmental authorities to improve their economic, social and cultural aspects of life. It is an active attempt to integrate communities into the life of nation and enable its citizens to contribute fully to the national progress. The community development programmes aims at a comprehensive and all round development of rural people.

Frank and Smith (1999) has defined community development as “**The** planned evolution of all aspects of community well-being (economic, social, environmental, and cultural) process, whereby community members come together to take collective action and generate solution to common problems”.

The concept of community development is determined by the needs and demands of the community and brings about self-reliance. These needs and demands are dynamic and keep changing over a period of time.

The community development programme was started in India just after independence (1952). It was a multi project programme with the aim of an overall development of rural people. This programme consisted of agriculture, animal husbandry, irrigation, cooperation, public health, education, social education, communication, village industries etc.

Community Development Programme promotes self-confidence and develops self-reliance in the community. It is people-oriented; community thinking and

collective action are encouraged through people's institutions like the *Panchayaths*, co-operative societies, etc.

Objectives of Community Development

Let us discuss the major objectives of community development.

- To motivate the people to achieve better standard of living.
- To address the felt needs of the people.
- To develop responsible and responsive local leadership.
- To increase food and agricultural production, both quantitatively and qualitatively.
- To solve the problem of unemployment.
- To promote primary education, and public health.
- To set up and encourage cottage industries and indigenous handicrafts.
- To bring about an attitudinal change and encourage people's participation.
- To promote self-help and mutual aid.

Role of social worker

Social workers who practice as community developers or organisers are guided by the ethics and standards of profession and by principles of sustainability and co-operation. Social workers have an important role to play in the development initiatives of an area/community. They make development reach to the grass root level by effective information transmission, capacity building and proper monitoring and evaluation. In the case of policies which are against their wellbeing, social workers can make effective intervention. In short, we can say that social workers have an immense role in getting the benefits of development reach to the most deserving.

The Community Development Programmes in India

The Community Development Programme has been the biggest reconstruction scheme undertaken by the government after independence. It has been variously described as the *magnacarta* of hope and happiness for two-thirds of India's population, the declaration of war on poverty, ignorance, under which millions have been living.

The Planning Commission has defined the Community Development Programme as follows: “**Community** development is an attempt to bring about

a social and economic transformation of village life through the efforts of the people themselves.”

The community development programmes in India can be broadly divided into:

- i. Employment and Income Generation Programmes/Poverty Alleviation Programmes
- ii. Housing Programmes
- iii. Drinking Water Programmes
- iv. Infrastructure Development Programmes
- v. Social Assistance Programmes

Let us discuss the major programmes in detail.

i. Employment and Income Generation Programmes

a) Swarnajayanti Gram Swarosgar Yojana (SGSY)

This programme was launched in April, 1999. This is a holistic programme covering all aspects of self employment such as organisation of the poor into self help groups, training, credit, technology transfer, infrastructure development and marketing.

Objectives

- To ensure sustainable income to the rural poor.
- To lift the beneficiaries above the poverty-line.
- To establish large number of micro-enterprises in the rural areas, based upon the potential of the rural poor.

SGSY is a Credit-cum-Subsidy programme. Women members are formed into self-help groups. SGSY lays emphasis on activity clusters. The beneficiaries are selected by the *gramasabha*. Identification of individual families suitable for each key activity will be made through a participatory process. It focuses on skill development of the beneficiaries, known as '*swarozgaris*'.

Target group

- 50% for SCs/STs, 40% for women and 3% for physically handicapped.

SGSY is a Centrally Sponsored Scheme and funding is shared by the Central and State Governments in the ratio of 75:25.

b) **Mahatma Gandhi National Rural Employment Guarantee Programme (MGNREGP)**



MGNREGP is introduced as part of Mahatma Gandhi National Rural Employment Guarantee Act 2005. It aims at enhancing the livelihood security of people in rural areas. It provides hundred days of wage-employment in a financial year to a rural household whose adult members volunteer to do unskilled manual work. It is implemented through Gramapanchayath.

Unique features of MGNREGP

- Work in 5 km radius
- Equal wage for men and women
- Preference to women and SC/ST

MGNREGP checks unemployment and poverty. It helps in protecting environment, reduce rural-urban migration and promotes women empowerment.

ii Housing Programmes

a) **Indira Awas Yojana (IAY)**

IAY is the flagship rural housing scheme of Government of India with an aim of providing shelter to people below poverty line (BPL). The allocation of funds under IAY (Indira Awas Yojna) will be on the basis of poverty ratio and housing shortage.



Objective:

- To help construction of new dwelling units and conversion of unserviceable kutchha houses into pucca/semi-pucca houses.

Target group

- SC/STs, freed bonded labourers, non-SC/ST rural poor below the poverty line.

Special features

- Financial assistance is provided to build or upgrade the houses.
- Sanitary latrines and *smokeless choolahs* are made compulsory.
- Cost effective and environment friendly technologies.
- The household is allotted in the name of a female member.

Funding

The funds are shared by the Centre and the State in the ratio of 75:25.

iii. Drinking Water Programmes**a. Rajiv Gandhi National Drinking Water Mission**

Government has launched National Drinking Water Mission in 1986, later renamed as Rajiv Gandhi National Drinking Water Mission (RGNDWM) to provide safe drinking water to the rural masses.



The project envisages provision for sustainable water supply and sanitation facilities to the inhabitants of the project area.

As objective of supplying safe water would not be achieved unless the sanitary aspect of water and the issue of sanitation are addressed together, Accelerated Rural Water Supply program and centrally sponsored Rural Sanitation programme has been introduced.

In 2005 all the drinking water programmes are included in this mission.

b. Jalanidhi Project

It is a drinking water project ensuring people's participation. Beneficiary involvement is an essential component in identifying the water source, implementation of the project, operationalization, and maintenance of the same.

The central government funds almost 75% of the cost involved.

The state government is to mobilise 15% and the remaining

10% is raised through beneficiary contribution. A voluntary organisation approved by the government act as Support Organisation (SO) to coordinate the implementation at Panchayath level.



iv. Infrastructure Development Programme

a) Jawahar Grama Samridhi Yojana (JGSY)

Jawahar Gram SamridhiYojna (JGSY) is the restructured, streamlined and comprehensive version of Jawahar Rozagar Yojana. JGSY has been launched on 1st April, 1999 to improve the quality of life of the poor. This is a programme initiated by the Central and State Governments for developing the rural infrastructure. Village panchayath implements this program with the approval of gramasabha.

Objectives:

- to create necessary community village infrastructure.
- to enable the rural poor to increase the opportunities for sustained employment and to generate supplementary employment for the unemployed poor in the rural areas.

Target group

- Below Poverty Line (BPL) families.

Funding:

Cost is shared by the centre and state in the ratio of 75:25. The funds to the Village Panchayats will be allocated on the basis of the population.

b) Pradhan Manthri Gram Sadak Yojana (PMGSY)

Pradhan Mantri Gram SadakYojana (PMGSY) was launched on 25th December 2000 as a fully funded Centrally sponsored scheme to provide all weather road connectivity in rural and remote areas of the country. The programme envisages connecting all habitations with a population of 500 persons and above in the plain areas and 250 persons and above in hill States, the tribal and the desert areas. This programme helps the rural poor to have proper transportation and access to towns and other facilities.

c) Bharat Nirman

Bharat Nirman is an infrastructure development programme started in 2005 to rebuild rural India. Developing rural roads is identified as one of the six components of Bharat Nirman. This aimed to provide connectivity to all habitations with a population of 1000 persons and above (500 persons and above in the case of hilly or tribal areas) with an all-weather road. Construction of new roads and up-gradation of existing rural roads come under this category. This comprises 60% up gradation from Government of India and 40% renewal by the State Governments.

v. National Social Assistance Programme

National Social Assistance Programme came into effect from 15th August 1995 represents a significant step towards the fulfilment of the directive principles in Article 41 of Indian constitution. The programme introduced a national policy for social assistance for the poor and aims at ensuring minimum national standard for social assistance in addition to the benefits that states are currently providing or might provide in future.



NSAP at present comprises of national old age pension scheme, widow pension scheme, disability pension scheme, family benefit scheme, maternity benefit Scheme and the food aid programme for BPL families.

We can see tremendous change in our country in the development scenario today. Community Development Programs played a vital role in this. Professional social workers can effectively channelize the programs to the right beneficiaries by providing the necessary information and in empowering them to assert their rights.



Check Your Progress

1. Define community development.
2. List out major social security programmes of government of India.
3. Identify the unique features of MGNREGP.



- Visit the panchayth / block office in your area and prepare a report of the ongoing community development programmes.
- Conduct a group quiz on various community development programmes.

4.3 Need Assessment

'Thenpuzha' is a remote village with abundant resources such as fertile land, river, conducive climate, greenery, fresh air,..... and what not! Yet most of the villagers have even their basic needs unmet. There is no school, health centre, or industries. Most of the cultivable land is left unused but most of the people are unemployed. The villagers do not know what to do. This was the condition when Mr Shaji, a professional social worker happened to visit the village as part of his research on rural life. He asked the villagers about their needs. The innocent villagers replied they want TV, stadium, cinema theatre, etc.

Are these the real needs of the people of Thenpuzha?

Why did they identify such needs instead of basic needs?

●

From the illustration of the Thenpuzha village, the people are not able to identify their actual needs at present. Actually this is a common problem found in many sections of the society.



What is a need?

●

Needs are the lack of something which is necessary. There are uncountable needs in our life. Here the villagers are not able to identify their needs. From the development perspective, there are different types of needs- apparent need, projected need, felt need or real need.

An apparent need is a need that is manifested, and evident to others. Whereas, projected need is what the people themselves try to express to others as their need. Felt need is the real need faced by the members of the society.

Anyway the villagers do not have an idea of what they really need. Here comes the relevance of need assessment. Need assessment helps the people to identify the needs and prioritize them. Need assessment helps us to plan suitable developmental programme.

Need assessment can be done through observation, survey, interview, questionnaire and case studies. Participatory Rural Appraisal (PRA) is an important tool for need assessment involving the people. Let us discuss PRA in detail.

4.4 Participatory Rural Appraisal (PRA)

In traditional rural societies, the village people played a pivotal role in the processes of identifying community problems, formulating their own strategies for tackling those problems, generating resources by way of contribution from the community and executing such programmes with their own involvement to a large extent. The community therefore performed a vital role in problem identification, programme planning, implementation, monitoring and evaluation as well. Outsiders do not know these facts. Villagers can help the outsiders to gain an insight about the local conditions.



In Thenpuzha, though they have ample resources to meet their needs, they find it difficult to identify their needs or work for it. Shaji called a meeting of the villagers and with the help of community leaders facilitated them to express their needs and problems, identify the resource potential in the community. A detailed discussion on development potential took place followed by project planning. This was followed by project implementation, monitoring and evaluation. Within years, 'Thenpuzha' changed a lot.

As seen in Thenpuzha, Participatory Rural Appraisal is a methodology which helps in interacting with local communities, understanding them and learning from them. It is a process with the participation of local communities. It is a way of learning from and with community members to investigate, analyze and evaluate constraints and opportunities, and making informed for timely decisions regarding their needs.

PRA involves a set of principles and process of communication expressing their views on issues. PRA is “an approach and method for learning about rural life and conditions from, with and by rural people...it extends into analysis, planning and actions”. PRA is a group of approaches and methods to enable rural people to share, enhance and analyze their knowledge of life and conditions to plan and act.

PRA is the modified form of Rapid Rural Appraisal (RRA). It was developed as a methodology in the 1970s, influenced by Farming Systems Research [FSR]. Robert Chambers, Robert Rhoades, Michael Collinson and Peter Hildebrand from Chiang-mai University, were the pioneers of this method. Rapid Rural Appraisal is a way of organizing people for collection and analyzing information within a short time span.

PRA uses certain methods for identifying the needs of the community. Let us discuss them.

The PRA Methods

PRA methods can be broadly sub divided in to:

- a. Supportive methods without village participation.
- b. Methods which involve direct participation of the villagers.

The use of different methods mainly depends on the way of expression which the villagers wish to adopt. The methods aid in participation and expression of views.

A. Methods Supportive of PRA

Apart from learning through direct participation, PRA looks for support from different kinds of methods and uses both primary and secondary data review for gaining knowledge of rural situations. The method of direct observation can also be made use of in a PRA exercise.

a) Primary and Secondary Data Review

Before conducting a PRA exercise, some background information about the area to be covered has to be collected. Such information can help in describing broad features and trends of the areas concerned. Sources of such data can be both primary and secondary. The primary source constitutes materials gathered firsthand and have a direct relationship with people, situations or events.

Secondary sources of data can be found in published materials which may include transcript or summaries of primary source materials, surveys, books, reports, plans, official records, census records, project records, aerial photographs journals, articles, etc.

b) Direct Observation

An outsider as a facilitator can directly observe an activity in a village and also

observe the effort ,skill or knowledge involved in it, can have a firsthand appreciation of the activity. This helps in forming preliminary ideas about activities or processes observed closely.

B. Methods with direct participation

There are different PRA methods involving direct participation. Diagrams form an integral part of PRA.

a. Semi Structured Interviews

Semi structured interviews are partly structured and mostly unstructured depending on the responses of the person. It is conducted in an informal manner in a relaxed setting where queries emerge according to the responses received.

It is a combination of the outsiders initiating interviews followed by discussions of rural people on the topic concerned. The questions have to be open-ended. The interview starts with a few pre-set questions and then would depend on the answer.

Semi structured interview can be conducted with different groups in a village or a community.

b. Maps and Models

Participatory mapping is crucial to PRA and can be on different aspects of rural life such as social issues, resource, etc. Such map can portray the image of dwellings in a village, of farms and fields, water collections etc. In participatory mapping and modelling, villagers prepare the map/model of their village with chalk, colours and other material available either on ground or on paper.

Let us discuss one of such maps.

Resource Map

A village resource map can also show different kinds of natural resources and micro environments. In a resource map, villagers draw the resource profile of the village depicting different kinds of soils, rivers, ponds, trees, crops, micro-environments in addition to infrastructure and social institutions. The problems can be described and discussed on the basis of a resource map along with the opportunities and the constraints. This can be made based on transect walk, which will be discussed subsequently.



How will you prepare a resource map?

- Mark different directions (North, South, East, West).
- Prepare checklist of known facts.
- Mark roads, houses, institutions , water sources , cultivation with the help of villagers.
- Prepare indicators and exhibit.
- Draw the map in the surface or chart paper with the help of locally available materials.

c. Transect Walk

Participatory Transect walks systematically involve walking with the villagers (preferably experts from different areas) through an area and discussing about different aspects of land use and agro-ecological zones in the village observed during the walk. A Transect walk is a useful method for knowing rural ecological



conditions. To walk from one point of the village to another enables the outsider to observe different aspects of rural ecology and to discuss with rural people about soil conditions, land use patterns, crops, livestock, agro-ecological zones etc.

The importance of transect lies in not only knowing the agro-ecological zones in rural areas, but also in getting an in depth understanding of their problems and opportunities. Transect walk can be used to cross check the available resource map.

d. Seasonal Calendar (Seasonal Diagramming)

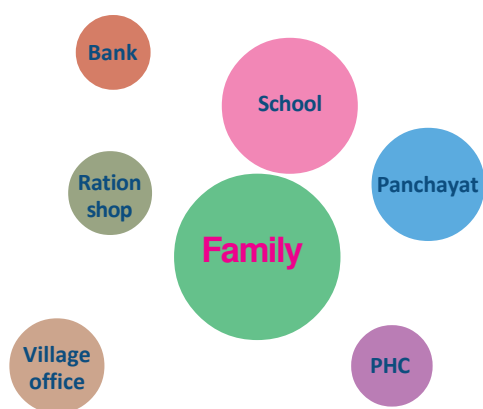
Rural livelihood is integrally connected with seasonality. Each season has its own problems and the rural people have different strategies for their livelihoods. The season bears heavily on the physical conditions which in turn influence their lives. Seasonal diagramming can lead to comparisons of related aspects of rural livelihood such as seasonal variations and their linkages with food, employment, work load, diseases, etc.

The villagers prepare diagrams and charts (either with chalk or other materials) either on ground or on paper, of various socio-economic and physical phenomenon such as seasonal wages received, food consumed, prices, rainfall patterns, sickness and others.

e. Chappathi or Venn Diagrams

Venn diagrams can be useful in the study of relationships of institutions/individuals with rural people. For rural people in a village community, Venn diagrams should reflect the kind of relationship between them and other governmental organisations and NGO's.

In such diagrams, circles of different size represent an individual or institution, whose size shows its degree of importance in decision making in a village and overlapping of circles, and the distance indicates the quality of their relationship with the village.



f. Historical Timeline

In historical time line, elderly villagers narrate their life histories. Since it is often difficult to remember the exact date of important changes, a villager can be facilitated to broadly connect such changes with major events and political regimes and thus summarise major events and changes that have taken place during his or her time.

Historical time line helps to know the changes taken place during different periods at different areas of the village.

g. Daily Routine Analysis

Daily routine diagrams reflect the kind of activities which one does on a daily basis. It can not only show the time spent in different activities, but the volume of work involved also. For instance, women spend different hours of day in activities like feeding children, cooking, and household chores. It is possible to identify general pattern from daily patterns. The general patterns of different groups can then be compared. It helps us to understand the burden of work and sharing of responsibility in families.



Check Your Progress

1. List out three PRA tools.
2. What do you mean by resource map?
3. Identify the importance of transect walk in understanding the community.



- Conduct a transect walk in the neighbouring village and prepare a resource map.
- Prepare a power point presentation on Tools and Techniques of PRA.

4. 5. Resource mobilization

We have studied need assessment and participatory rural appraisal using different tools and techniques. We cannot leave a felt need unresolved for long. For any attempt to satisfy individual or community needs, resources are essential. What does the word resource mean?

-

A resource is a source or supply from which benefit is produced or anything that is useful to raise the quality of life of individuals in a society.

Can you identify some resources of our country?

-

India is blessed with abundant resources such as rivers, land, minerals and metals, forest, etc. In addition to the above India is rich in human resources. Resources can be materials, energy, services, staff, knowledge, or other assets. Generally resource satisfies human needs. In short all these resources can be categorised as man, material, money, and, of course time!



Resources have three main characteristics: utility, limited availability, and potential for depletion or consumption.

Resources have been variously categorized as

- Biotic versus Abiotic
- Renewable versus Non-renewable

Resources categorized on the basis of origin:

- **Abiotic resources** comprise non-living things eg: land, water, air , minerals
- **Biotic resources** are obtained from the biosphere eg: Forests and their products, animals, birds, fish etc.

Natural resources categorized on the basis of renewability:

- **Renewable resources**, such as forests and fisheries, can be replenished or reproduced relatively quickly. Some resources, like sunlight, air, and wind, are called **perpetual resources** because they are available continuously, though at a limited rate. Their quantity is not affected by human consumption. Many renewable resources can be depleted by human use, but may also be replenished, thus maintaining a flow.



- **Non-renewable Resources** are formed over very long geological periods. Minerals and fossils are included in this category. They cannot be replenished easily, once they are depleted.

We have already learnt resource and its types. Let us discuss in detail how to mobilize these resources.

Read this news:

Ravi, the only bread winner of the family has severe heart disease. Doctors suggested an emergency surgery which costs 10 lakhs. Family cannot afford this huge amount.

Can you suggest some ways by which Ravi's family may be helped to raise this amount?

-

Generally we are taking donations, fund raising programme, etc. to raise money in such cases. There are so many other ways to mobilise resources.

Now can you define resource mobilisation in your own words?

-

Resource mobilization is the process of identifying and obtaining resources for solving a problem. It is a continuous process of identifying and using a wide range of available resources to address identified problems.

Resource mobilization is a process whereby resources both financial and non financial are mobilized either externally or internally to support developmental activities.

Objectives of resource mobilization

- To address development initiatives.
- To ensure judicious utilisation of resources.
- To ensure cost effectiveness and efficiency in resource utilisation.
- To ensure optimum utilisation of resources.
- To avoid wastage of resources.
- To address needs of individual, group and community.
- To promote people's participation.
- To maintain transparency and accountability.

Methods of resource mobilization

- **Donations:** Donations in cash and kind from philanthropists form an important source in resource mobilisation
- **Sponsorship:** Individuals, institutions, trusts, foundations etc. may sponsor beneficiary programmes.
- **Subscription:** Through memberships and subscriptions amount can be collected by organisations.
- **Funding:** Government and non-governmental organisations fund development programmes either as grants, subsidies or loans
- **Fundraising programmes:** Many agencies conduct fundraising programmes like benefit shows, magic shows, benefit matches, etc.
- **CSR:** Corporates provide fund to NGO's for development initiatives as part of their Corporate Social Responsibility.
- **Social Marketing:** It is a strategy of enlisting popular support and resources from grass-root level through campaigns and propaganda. Pulse Polio Immunisation programs and donations to the Prime Minister's Relief Funds are mobilised through social marketing.



Resource mobilisation is an essential skill required for a social worker. For fulfilling the objectives of resource mobilisation, proper planning and implementation strategy is essential.

4. 6. Project Planning

During the School Annual Day, the Panchayath President reported of a high dropout rate among students of Vellimala, an adjacent tribal community. The local schools also reported of high rates of absenteeism and truancy among the children from the above community. Numerous issues, where the children took to substance abuse, and involved in gangs that engaged in criminal activities, have been reported by the police. A closer examination reveals that most of the families have both parents working from 7 am till 8 pm. It was noted that the children drop out from school after Std. VII. There are also families who have children who are interested in studies, but cannot pursue the same due to the lack of support - financial and familial.



Assuming your class notices this issue, what would be your response to the same? Can you think of formulating a project to attend to the issue of school dropouts?

What is a Project?

-

According to R.N.Sharma and R.K.Varma, **A project** is the smallest economic activity that can be taken up, to translate into action any programme of development”

Solomon Morris defines **a project** as “the smallest unit of activity that can be separately planned, analysed and administratively implemented”.

In short, project is a proposal of what is to be done. A project consists of a set of interrelated activities or components. A project activity is an identifiable task or function to be completed. Each activity in a project is designed either to achieve a specific objective or a number of objectives within a given budget and period of time. Every project should have a detailed plan.

For preparing a project plan, different aspects need to be considered. This includes the nature of the project, objectives to be attained, feasibility of the project, availability of resources, time frame, etc. Mobilising the necessary resources is a key element and challenge to project planning. Resources are to be mobilised and effectively utilised for the developmental activities.

Characteristics of a Project

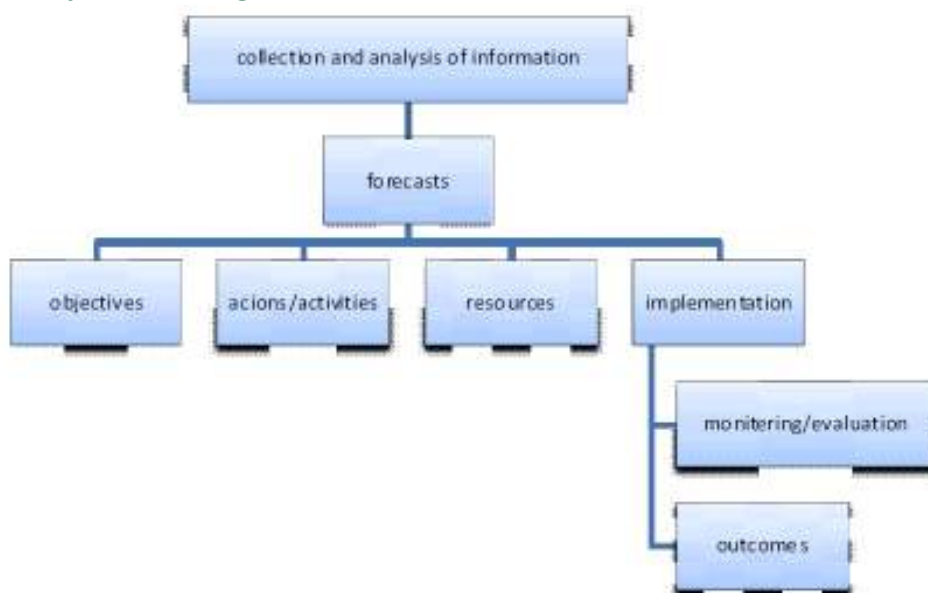
Any project undertaken will have the following:

- a fixed set of objectives - what is to be done, how it is to be done and why it is to be done
- a specific methodology to identify, formulate, implement, monitor and evaluate
- interrelated project activities or actions
- a time-frame
- an organisation with man-power and definite roles
- maximum results using limited resources
- operation at a specific location

Now let us discuss how to prepare a simple project. For this we need to learn the steps in project planning.

Planning becomes necessary when we have many goals to achieve, but very limited resources - money, materials and time. Planning involves looking ahead, relating today's event and tomorrow's possibilities. Project planning involves generating project ideas, issues or problems, by collecting and analysing the related information, exploring possible solutions, selecting a viable solution, and subsequently monitoring and evaluating the activities undertaken.

The Project Planning Process



Project planning can be conceived in the form of a cycle consisting of different steps arranged in sequential order.

a. Project Design

Project ideas derive from the problems, potentials and the needs of the people in a geographical area. A particular project which serves the socio-economic interests of the people, consistent with development is considered for project designing.

b. Project Preparation

While preparing a project, it would be necessary to ascertain the availability of resources and services in the area. Further, the relationship between various activities of the project has to be established.

c. Project Appraisal

The study of the social feasibility and economic viability is essential for a project. A project has to ensure that it is cost effective. Only then the project can justify its worth to the society.

d. Project Implementation

Effective implementation of a project requires a detailed implementation plan. For each activity, there should be an optimum allocation of resources and time. The implementation plan will ensure proper and effective controlling and monitoring of the project.

e. Project Control and Monitoring

Controlling and monitoring is complementary to the planning process. Control involves comparing at regular intervals, the actual achievements against the desired achievements as per the original plan.

Monitoring will strengthen the supervision and controlling system inbuilt in the project. Every single activity in the project should be carefully watched for its progress and deviation from the pre-determined progress at a particular time needs to be noted and corrected.

f. Project Evaluation

Evaluation is necessary for the purpose of public accountability, future planning and decision-making. Evaluation as a tool cannot be separated from the process of planning, implementation, monitoring and review associated with the life cycle of a project.

g. Project Proposal

Drafting up project proposal is both an art and a science. It requires detailing on the specifics - objectives, activities, resources, and time-frame. A project proposal is necessary for a project. The steps in the project proposal are:

- a. **Introduction:** This part deals with necessary aspects on a project-what the project is about i.e., problems or issues, the place and the present condition, etc.
- b. **Situational Analysis:** Here we make a situational analysis. For this we can use the PESTLE frame work.



PESTLE frame work

- P- Political- the political context
- E-Economic – economic condition of the area
- S-Social- discuss the social conditions of the area
- T- Technological aspects related to the problem
- L- Legal condition
- E-Educational and Environmental matters

- c. **Project Goals and objectives:** The project goal is a statement of the result to be achieved by the particular project. Project objectives are specific targets to be achieved within a specific time frame.



Project goals should be SMART-

- S-Specific
- M-Measurable
- A-Achievable/ Agreed upon
- R- Realistic
- T-Time bound

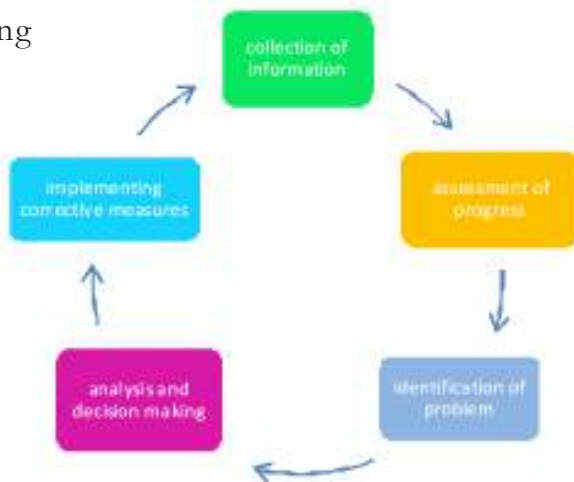
- d. **Activity Plan:** Once objectives are formulated, the next step in project preparation is activity planning.
- i. Redefining of activities
 - ii. Arranging the activities in sequence
 - iii. Estimating time for each activity and
 - iv. Estimating the cost for each activity
- e. **Budgeting:** Project budgeting is the forecast of the expenditure to be incurred in a project during each step. This includes:
- i) Cost plan: recurring and non recurring expenditure such as activity cost, administrative cost, personnel cost, etc.
 - ii) Financial plan: details the project income and expenditure.



Social Cost Benefit Analysis (SCBA)

A development organisation concerns about the interest of the poor and the underprivileged in particular. SCBA assesses the contribution of a project to the social, economic and cultural development of the different target groups in particular. SCBA computes the value of costs and benefits.

- f. **Monitoring:** Monitoring involves a scientific process of collection of information, assessment of progress, identification and analysis of problems, decision making for corrective actions, implementation of corrective measures, and follow up. See the monitoring cycle given below:



- g. **Evaluation:** A project is subjected to evaluation at different points of time during its span and aftermath.

Evaluation can be made concurrent, terminal, and internal or external



Project Proposal to Set up a Single Teacher Multi Grade School at Vellimala Tribal Village

Introduction

Education is pivotal in determining the growth and development of any community. It fosters personal growth and social change. Vellimala, mostly inhabited by tribals the children need to travel much to attend classes at towns. The children of the community lag in education, deviates showing absenteeism, truancy and gang behaviour. Providing basic learning facilities at their village itself is a solution to the problem.

Objectives

- To construct and run a single teacher multi grade school at Vellimala tribal village.
- To enroll a maximum of 40 students of the age group 6 to 14 years.
- To provide the service of a full time teacher and a helper.
- To provide nutritious food to students.

Activity Plan

- Identify a minimum of 30 cents of land suitable for setting up the school within 2 months.
- Construct a building with an area of 900 square feet with one class room, kitchen and toilet within 8 months.
- Furnish the class room with tables and benches within 9 months.

- D. Purchase stationary, study material and utensils within 10 months.
- E. Appoint a teacher and a helper within 10 months.

Budget

No.	Particulars	Income	Expenditure	
			Non-recurring	Recurring
1	Cost of land 30 cent @ Rs. 10,000		300000	
2	Construction Cost @ 900 x 1400		1260000	
3	Furnishing (bench, table, desk)		100000	
4	Utensils for kitchen		20000	
5	Salary			
	a) Teacher @ Rs. 10,000 x 12			120000
	b) Helper @ Rs. 6,000 x 12			72000
6	Purchase of study materials			15000
7	Miscellaneous			13000
8	Contribution from NGOs	600000		
9	Contribution of Gramapanchayath	600000		
10	Contribution from Philanthropists	300000		
11	Amount expected as sponsorship	400000		
	Total	1900000	1680000	220000

Total of Rs 19,00,000 is needed to implement the project. The same is expected to be mobilized from different sources.

Project implementation

A governing body comprising of 7 members including Gramapanchayath President, Ward Member, three representatives from the community, standing committee chairman for education of the Gramapanchayath and social worker as NGO representative will implement the project. They will conduct periodic meetings at least once in three months and take decisions regarding the appointment of staff, school maintenance and other programmes.

Evaluations

Periodic and annual evaluations will be conducted by the governing body to ensure the effective realization of the project objectives. Necessary correction will be effected.

Summary

In this chapter we discussed about development, its dimensions and approaches. Development is largely related to the standard of living of people which is reflected in all aspects of social life.

We can see that many approaches and models have been used to discuss development. Some of them have less relevance today, whereas, approaches such as participatory development, rights-based approach and sustainable development are suitable at all times.

For any development programme, we have to assess the needs, through various methods such as PRA, and have to find resources through resource mobilization strategies. Projects have to be prepared and monitored effectively.

Professional social workers can go a long way to help community realize its goals. Social workers can create awareness in people on their rights, encourage them to participate in decision making and take initiative in development projects. The social worker's skill in resource mobilization, need assessment, project preparation and implementation of the project can be helpful to the community to move from top-down to bottom-up approach.

Evaluation Questions

1. Define development.
2. 'Sustainable development is the need of the day'. Discuss.
3. Critically examine *any four* approaches to development.
4. Prepare a short note on any two community development programmes in our country.
5. The PRA tool which helps us to understand the seasonal differences in crops grown, unavailability of water, etc. is (a) Transect walk (b) Seasonal calendar (c) Resource map (d) Historical time line
6. Define PRA. Identify and describe various tools of PRA.
7. Make a social map of your village and find opportunities for development.
8. Assess the relationship between your school and related office with the help of a Venn diagram.
9. Analyse your time utilisation with the help of daily routine analysis.
10. List out and explain any five tools of PRA.
11. Define project planning and point out the steps in a project formulation.
12. Suppose your NGO plan to construct a school for the differently abled, how will you mobilize resource for the same?
13. Identify the elements of project cycle.

Significant Learning Outcomes

After the completion of this chapter, the learner:

- Analyses the concept of health by identifying the determinants, dimensions and indicators of health.
- Describes the concept of diseases and classify them.
- Appreciates the concept of wellness.
- Explains the meaning of mental health and understand common mental disorders.

Contents**5.1 Health**

Concept of health
Dimensions of health
Determinants of Health
Indicators of Health

5.2 Disease

Epidemiological Triad
Types of Diseases

5.3 Wellness**5.4 Mental Health**

Characteristics of Mental Health
Factors Contributing to Mental Health
Mental Status Examination (MSE)

5.5 Common Mental Disorders

Depression
Bipolar Disorder (Manic Depressive Psychoses)
Paranoia
Schizophrenia
Multiple Personality Disorder



5.1. Health

You are well aware that health is one of the major fields of social work practice. Hence it is imperative for a social worker to know the basic concept of health and diseases to intervene in the field for promoting health care services to the people.

Let us listen to Rohit, son of a farmer, recollecting his childhood experiences.

There was a coconut climber named Ravi, who worked as an agricultural labourer in our farm. Ravi was a tall energetic young man, having well built body with strong muscles. He used to climb many coconut trees within a short span of time and used to carry a lot of coconuts together to my house located on a hill top.

I used to envy his strong muscles and often I dreamt of becoming like him in future and for me Ravi was an ideal healthy person.

Later I came to know that Ravi used to beat his wife and children, scolding and abusing them often under the influence of alcohol. He used to quarrel with his neighbours also over silly issues and hence most of the neighbours did not like him.

Now I am confused whether Ravi was really healthy or not.

According to you who is a healthy person? What are the characteristics of a healthy person?

-

Concept of health

The concept of health varies across individuals, periods, culture and community. Traditionally health was believed to be the absence of disease, but today as a result of the development of biological, social, and environmental sciences, the concept of health has become more comprehensive. It encompasses physical, mental, environmental and cultural aspects. It has been accepted as a basic human

need for improving the quality of life.

Health is one of the vital elements of human resource without which no country can develop. Let us examine different views on health.

a Bio-Medical Concept

Traditionally health has been viewed as absence of disease. This is known as the bio-medical concept of health, which dominated medical practice during 20th century. The environmental, social, psychological and cultural aspects of health were not addressed in this approach.

b. Ecological concept

Ecologists viewed health as a dynamic equilibrium between an individual and his environment and disease, as a maladjustment of human organism to his environment.

c. Psycho- Social concept

Contemporary developments in social science reveal that health is influenced by social, psychological, cultural, economic and political factors. So these factors should be taken into consideration while defining and measuring health.

d. Holistic concept

The holistic model is a synthesis of all the above concepts. It recognizes the social, economic, political, and environmental influences on health. This view corresponds to the view that health implies sound mind in a sound body in a sound family in a sound environment. It recognises that factors like agriculture, animal husbandry, food, industry, education, housing, infrastructure and communication have a great impact on health.



Now can you define the concept of health?

-

Webster's Dictionary defines **health** as "The condition of being sound in body, mind or spirit, especially freedom from physical disease and pain."

Oxford Dictionary states health as the state of being free from illness or injury and a person's mental or physical condition.

The widely accepted definition of health given by WHO is as follows:

“**Health** is a state of complete physical, mental and social well being and not merely an absence of disease or infirmity”.

Dimensions of Health

Health is multidimensional. The WHO definition envisages three specific dimensions: physical, mental and social. Spiritual, emotional, vocational, political dimensions too interact with one another. Let us discuss them in detail:

a. Physical Dimension

Can you list out some of the attributes of a physically healthy person?

-

The physical dimension of health implies the perfect functioning of the body. It conceptualizes health biologically as a state in which every cell and every organ are functioning at optimum level and in perfect harmony with the rest of the body. The signs of physical health in an individual are good complexion, clean skin, bright eyes, lustrous hair, body with firm flesh, sweet breath, good appetite, sound sleep, regular activity of bowels and bladder, normal pulse rate and blood pressure etc.

b. Mental Dimension

What are the characteristics of a mentally healthy person?

-

One of the keys to good health is a positive mental health. Mental health is not merely the absence of mental illness. Good mental health is the ability to respond to the experiences of life with flexibility and a sense of purpose. Psychologists have mentioned the following characteristics as attributes of a mentally healthy person:

- Being free from internal conflicts.
- Being well adjusted and having the ability to get along with others



- Having a strong sense of self esteem
- Being aware of one's needs, problems, and goals
- Having good self control- maintaining rational and emotional balance.
- Ability to face problems and solve them intelligently.

c. **Social Dimension**

Perhaps you may be aware of communal clashes occurring in our country. One of the main reasons behind this issue may be attributed to the lack of social health.

Social well being implies harmony and integration within the individual, between individuals and also among the members of a society. A socially healthy person is able to adjust and adapt oneself with the people of other cultures. S/he possesses positive attitude and adequate social skills to interact with all types of people to make and maintain good social relationship.

d. **Spiritual Dimension**

Spiritual health refers to that part of the individual which reaches out and strives for meaning and purpose in life. It includes integrity, principles, ethics, purpose of life and commitment to some higher being.

e. **Vocational Dimension**

Why do we say a person should select a career based on one's own interest, aptitude and capacity?

-

Work often plays an important role in promoting both physical and mental health.

Physical work is usually associated with an improvement in physical capacity while goal achievement and self realization in work are sources of satisfaction and enhanced self esteem. For example, a doctor gets satisfaction when his patients are healed through his treatment.

f. **Other dimensions**

A few other dimensions of health have also been suggested such as cultural, economic, environmental, educational and nutritional.

Determinants of Health

Health is multi factorial. The factors which influence health can be internal (i.e. within the individual) or external (i.e. in the society in which s/he lives). It is true that health and disease are influenced by genetic and environmental factors. Thus the health of an individual and whole community may be considered to be the result of many interrelated factors.

They are:

a. Heredity

The physical and mental traits of every human being, to a great extent, are determined by the nature of his/her genes acquired from ancestors. The genetic makeup is so unique that it is decided at the moment of conception and cannot be altered. A number of diseases are known to be of genetic origin, eg: chromosomal anomalies, mental retardation, some type of diabetes, asthma and certain mental illnesses. Therefore, the state of health depends largely on the genetic conditions of man.

b. Environment

Health is viewed as a harmony between man and his/her environment and diseases as a maladjustment. The physical environment such as geographical features, climate, air, water, soil and all living organisms such as animals, birds, and micro organism influences the health of human beings.

The aspects of domestic environment like family background, parenting, peer group relation, socialization patterns, and culture influence the mental and social health of an individual.

c. Life style

Write down your comments on the given picture.

●

It is obvious that the boy doesn't seem to be healthy due to lack of exercise, excess intake of fast food etc.



The term life style is used to denote ‘the way people live’ reflecting the whole range of social values, attitudes and activities.

Today majority of the people avoid physical exercise by spending most of their time in offices, watching TV, operating electronic devices, etc. Alcoholism, smoking, drug abuse and consumption of junk food lead to alarming growth of life style diseases all over the world. Many modern health problems such as coronary heart diseases, obesity, cancer, diabetes and stroke are due to life style changes.

d. Socio- Economic Conditions

Socio-economic conditions also influence health. Health status of a country is largely determined by the level of socio-economic development. eg: per capita GNP, education, nutrition, employment, housing, etc.

e. Health Care Services

Can you list out some of the major health services available in your locality?

-

It may be primary health centers, anganwadis, dispensaries, clinics, hospitals, etc. How do these services help to improve the health status of the community?

-

Health care services cover a wide spectrum of personal and community services for treatment of diseases, prevention of illness and health promotion activities. For example, immunization of children can reduce the incidence of particular diseases. Provision of safe drinking water can prevent mortality and morbidity from water-borne diseases. Care to pregnant women and children would contribute to the reduction of maternal and child morbidity and mortality. So health care service is another important determinant of health.

f. Other factors

Other contributors to the health of population are related factors like food and agriculture, education, industry, social welfare, rural development as well as adoption of socio-economic policies to improve the standard of living.

Indicators of Health

We need indicators not only to measure the health status of a community but also to compare the health status of one country with that of another. Measurement and comparison of health status is required for assessment of health care needs, allocation of resources, and for the evaluation of health programmes. The commonly used health indicators are:

A. Mortality Indicators

This indicator takes into account the death toll taking place within a community. The following are the major mortality indicators:

a. Crude Death Rate: (CDR)

It is defined as the number of deaths per 1000 population per year in a given community. It indicates rate at which people are dying. All types of death due to accidents, aging, diseases, etc. irrespective of any age group, come under this category.

b. Infant Mortality Rate (IMR) :

It is the number of deaths under 1 year of age per 1000 live births per year, in a given community. It is one of the most universally accepted indicators of health.

c. Child Mortality Rate (CMR) :

This is the number of deaths between the age 1-4 years in a given year per 1000 children calculated at the midpoint of the year concerned. It excludes infant mortality.

d. Maternal Mortality Rate (MMR) :

It measures the rate of women dying from puerperal causes. It is calculated on the basis of the total number of female deaths due to complications of pregnancy, childbirth or within 42 days of delivery from puerperal causes in an area during a given year.

e. Life Expectancy Indicator

It is the average number of years a person is expected to live in a given geographic area. The life expectancy of an Indian during the year 1951 was only 32.25 whereas during 2011 it is calculated as 72. It is a good indicator of the socio-economic development of a country.

B. Morbidity Indicators

Mortality indicators do not reveal the prevalence of ill health in a community. Morbidity indicators reveal the burden of ill health in a community. The following morbidity rates are used for assessing ill health in a community:

- Incidence and prevalence of specific diseases.
- Attendance rates of out-patient departments.
- Admissions, re admissions and discharge rates in hospitals.
- Duration of stay in hospital.
- Spells of sickness or absence from work or schools.

C. Nutritional Status Indicators

Nutritional status indicators manifest nutritional intake and growth rate. They are positive health indicators. Three nutritional status indicators are considered important. They are:

- anthropometric measurement like weight and height.
- height of children at school entry level.
- prevalence of low birth weight (less than 2.5 kg).

D. Socio-economic Indicators

Following are the important socio-economic indicators:

- Rate of population growth.
- Per Capita GNP.
- Level of employment.
- Literacy rate, especially female literacy rates.
- Family size.
- Per capita 'calorie' availability.

E. Quality of Life Indicator

It is difficult to define and even more difficult to measure the quality of life. The quality of life can be evaluated by assessing a person's subjective feeling of happiness or unhappiness about various life concerns. Various attempts have been made to reach to one composite index from a number of health indicators.

The Physical Quality Life Index (PQLI) is one such indicator. It consolidates three indicators namely mortality, life expectancy at age one, and literacy rate.



Other Important Health Indicators

1. *Disability Rates*

Basic activities of daily living such as mobility, dexterity, ability to work etc. if affected will be measured as disability rate.

2. *Healthcare Delivery Indicators*

The frequently used health care delivery indicators are:

- a) Doctor – population ratio.
- b) Doctor – nurse ratio.
- c) Population – bed ratio.

3. *Utilization Rate*

Utilization of services is expressed as the proportion of people in need of a service who actually receive it in a given period. A few examples of utilization rates are:

- a) Proportion of infants immunized.
- b) Proportion of pregnant women who receive antenatal care.
- c) Percentage of population using the various methods of family planning.

4. *Indicators of Social and Mental Health*

These include the rate of suicide, homicide, crime, violence, traffic accidents, juvenile delinquency, alcohol and drug abuse, smoking, etc.

5. *Environmental Indicators* They include indicators relating to pollution of air, water, radiation, solid wastes, noise and exposure to toxic substance through food or drink. The proportion of population having access to safe water and sanitation facilities is an important environmental indicator.

6. *Health policy indicators*

The most important indicator of political commitment is the allocation of adequate resources. The relevant indicators are:

- a) Proportion of GNP spent on health services
- b) Proportion of GNP spent on health related activities like water supply, sanitation, nutrition, housing, etc.
- c) Proportion of money allotted to primary health care

7. *Other Indicators*

Social indicators (educational services, distribution of income, social security, and welfare services, housing etc.) basic needs indicators, health for all indicators, etc.



Check Your Progress

1. Explain different dimensions of health based on the definition by WHO.
2. 'The health of individuals or communities may be considered to be the resultant of many factors'. What are those factors? How do these factors influence health?
3. Why do we use the indicators of health?



1. Compare the health status of your Panchayat/Municipality/ Corporation with a neighbouring one based on at least six indicators of health. (you may compile data from 2011 census or data available at local self government.)
2. Conduct a debate on the prominent factor that determine the health of an individual- Heredity or Environment?

5.2 Disease

Perhaps you might have been affected by a disease which has created uneasiness and something seems to be wrong with your bodily function. What is meant by the term disease?

•

There have been many attempts to define diseases. The Oxford English Dictionary defines **disease** as 'a condition of the body or some part or organ of the body in which its functions are disrupted or deranged.'

From ecological point of view disease is defined as "a maladjustment of the human organism to the environment." From sociological point of view disease is considered as a social phenomenon which occurs in all societies. In general, **disease** can be defined as a deviation from normal functioning or state of physical or mental well being.

Epidemic disease is one that strikes many persons in a community. For eg. chicken pox. An endemic disease refers to the constant presence of a disease within a geographic area or a population without importation from outside and the occurrence is within the usual or expected frequency. Pandemic disease usually



affect a large proportion of the population over a wide geographical area such as a nation or a continent in the world.

eg. cholera in 1962 (still continuing), Ebola, etc.

Epidemiological Triad



A disease can be caused by many reasons. Generally, the causative factors of disease may be classified as ‘agent, host and environment’. These three factors are referred to as “epidemiological triad”. The mere presence of agent, host and favourable environment is not sufficient to start a disease in man. What is required is an ‘interaction’ of these three factors to initiate the disease. The characteristics of these three factors are given below:

A. Agent Factors

The first link in the chain of disease transmission is a disease agent. The disease “**agent**” is defined as a substance or relative lack of something which may initiate a disease. Disease causing agents in the environment may be classified into the following categories.

- a. **Inanimate group**– agents mainly responsible for non-communicable diseases.
 - i) Physical agents- eg. Heat, light, radiation, etc.
 - ii) Chemical agents- eg. Sulphur, carbon monoxide, etc.
 - iii) Nutritional agents- eg. Vitamins, Proteins, fibers, etc.
- b. **Animate group**- bacteria, virus, fungi, protozoan, worms, etc.

B. Host Factors

Age, sex, habits and customs, genetic makeup and psychobiologic characteristics including courage, immunity of the host are some of the important factors which determine the outcome of the interaction between the agents and host in a suitable environment.

C. Environment factors

Environment is the aggregate of all the external conditions that affect the life and development of an organism. It is classified as below:

- a) Physical environment – all those inanimate objects like air, water, food, etc.
- b) Biological environment – all those animate objects like animals, insects, and other humans.
- c) Socio– economic environment- social and economic factors like housing, social group, education, etc.

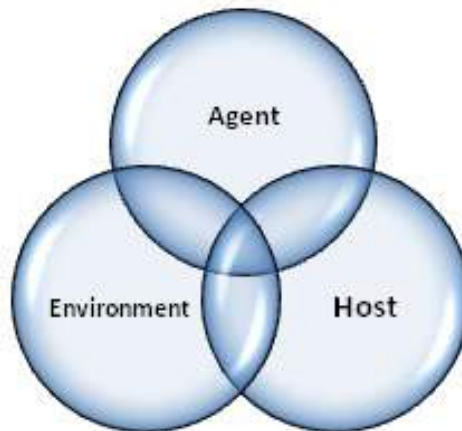


Diagram 5.1. Epidemiological Triad

Types of Diseases

Diseases are broadly classified into two categories, namely Communicable and Non Communicable

A. Communicable Disease:

It is transmitted between person to person by means of any causative agents (Bacteria, Virus, Fungi, etc) or from environment (through air, dust, soil, water, etc.) Based on the mode of transmission, communicable disease can be further

classified into air borne (eg. Tuberculosis, influenza, chicken pox etc.) water borne (eg. Diarrheal diseases, cholera, jaundice etc.) contact based (eg. Scabies, ring worm, typhus fever etc.) animal/insect borne (eg. plague, dengue fever, rabies, H1 N1 etc.) transmitted through needles, blood transfusion (eg. Jaundice, HIV/AIDS) and sexually Transmitted (eg. AIDS, Gonorrhea, syphilis etc.)



Based on **Causative agents** communicable diseases can be further divided into

- a. Bacterial diseases (eg. cholera, Tuberculosis, leprosy)
- b. Viral diseases (eg. chickenpox, measles, rabies, mumps etc.)
- c. Fungal diseases (eg. Ringworm, Athlete's foot, dhobi itch,)
- d. Protozoan diseases (eg. malaria, diarrhea, sleeping sickness etc)
- e. Helminthes diseases (eg. filariasis, tapeworm and hookworm transmission)

B. Non-communicable Diseases

They are not transmitted from one person to another, but caused by malfunctions of the body. These include organ or tissue degeneration, erratic cell growth and faulty blood formation and flow. Also included are disturbance of stomach and intestine, the endocrine system etc. Some diseases are caused by deficiencies, lapses in the body's defense system or due to a poorly operating nervous system.

Non-Communicable Diseases (NCDs) include cardiovascular, renal, nervous, and mental diseases, chronic respiratory diseases such as bronchitis, asthma etc. Non-communicable disease also includes permanent results of accidents, senility, blindness, cancer, diabetes, obesity and degenerative diseases.

a. Deficiency diseases

It is part of non-communicable diseases and are due to deficiency of nutrients in the diet and they can be generally prevented by providing the missing nutrients. For example, night blindness is associated with low intake of vitamin A.

b. Degenerative diseases

It occurs due to malfunctioning of some organ or an organ system in the body. The incidence and prevalence of degenerative diseases is observed to be growing

alarmingly. This transition is mainly due to a combination of demographic and life style changes which result from socio-economic development. Eg. Alzheimer's and Parkinson's diseases.

c. Life style diseases

The diseases caused by life style composed of cultural and behavioural pattern and lifelong personal habits are called life style diseases. (eg. smoking alcoholism, excessive intake of fast food, over eating, lack of physical exercise etc.) Today modern medicine is successful in controlling and curing communicable diseases whereas in spite of increased number of hospitals, doctors, paramedical staff, and pharmaceutical companies, life style diseases are alarmingly increasing. The cases of coronary heart diseases, obesity, cancer, diabetes, hypertension, stroke and arthritis are spreading far and wide.



Check Your Progress

1. Lot of diarrhea cases have been reported from a tribal village in your locality. Analyze the possible causative factors of the disease with the help of an epidemiological triad.
2. Prepare a flow chart showing different types of diseases.



1. Prepare a picture album showing the various causative factors leading to the alarming growth of non-communicable diseases today. (For example pollution, fast food culture, excessive use of pesticides and chemical fertilizers, etc.)

5.3 Wellness

Wellness is a term commonly discussed in recent days. Today people are becoming more conscious about preventing diseases and taking measures to promote and maintain good health. The objectives of wellness are:

- i) To protect oneself from degenerative and life style diseases.
- ii) To reduce the side effects of medication.
- iii) To reduce or minimize medical expenses.
- iv) To restore the health already lost.
- v) To revitalize and rejuvenate energy level in order to slow down the effects of aging.



The components of wellness that ensure good health are:

a. Positive Mental Attitude

It is the positive attitude of a person to his/her surroundings and fellow beings. It gives him a positive energy.

b. Adequate Relaxation and Sleep

Our body and soul need relaxation and rest. Sleep gives rest to our body. Relaxation and meditation will give spiritual and mental health. eg: Yoga.

c. Regular Exercise

Our body needs scientific exercise, including aerobics. This will keep our body physically fit by maintaining the bodily activities properly. Physical labour, walking, swimming, cycling, etc. are good exercises.



d. Proper Nutrition

Most important and often neglected component of optimal health is the role of nutrition in our health. Unfortunately, the major cause of the present day



life threatening diseases is the lack of proper nutrition in our diet.

We often mistake food for nutrition. Food is what we eat on a daily basis, depending on demand, taste, availability, affordability etc. It is what our body gets.

Nutrition, on the other hand, is what our body needs, irrespective of our culture, taste, etc. Its requirement is more or less the same for all of us.

Now the question is 'Are we getting what we need?' For this we should know about the major nutrients we need.

Nutrition refers to the various substances our body requires every day. They are broadly classified into two: Macro Nutrients and Micro Nutrients

i. Macro Nutrients:

- **Water** - We need 2 to 2.5 liters of drinking water every day. It reduces the chance of colon cancer upto 40 %.
- **Carbohydrates** - We need 250 to 750 grams every day. Our diet should include complex carbohydrate with lots of fiber. eg: tapioca , rice, etc.
- **Fat** - We need 20 to 60 grams of poly unsaturated fat daily. It is known as Omega-3, which is found in small fishes.
- **Protein** - It contains essential amino acids which help regeneration of cells. We need protein proportionate to our weight i.e, 1 gm/kg of body weight.

ii. Micro Nutrients

We need 13 essential vitamins and 11 essential minerals on a daily basis. We should eat 400 to 600 grams of different types of fresh fruits, leaves and vegetables along with its bioflavonoid i.e without leaving its colour.

Wellness and Life Style Disease

Recent studies reveal that the major cause of life style diseases is 'free radicals' a charged atom of oxygen. Oxygen has got a dual role. On the brighter side it is the basis of life and at the same time on the darker it oxidates anything that it gets into contact with. The rusting of iron, browning of the apple, tarnishing of bronze, etc. are examples for oxidation.

We inhale large amounts of oxygen into our body. In the metabolic process 4 to 10 % of oxygen atoms become charged, due to the deficiency of electrons and becomes free radicals. These free radicals attack the internal organs or glands and it leads to the disease associated with that part of the human body. Eg. if the free radicals attack pancreas it may lead to diabetes, if joints are attacked the result is arthritics, if it attack heart, it may develop heart attack. If it attack DNA, it may lead to cancer. In short, modern studies have proved that the important reason for life style diseases are free radicals which cause internal oxidation or oxidative stress.

Free radicals are neutralized by the presence of antioxidants. The major antioxidants are vitamin A, vitamin C, vitamin E, mineral selenium and bioflavonoids. These are found in fresh vegetables. These were eaten on great quantities and quality by our ancestors. But the change in our life style, fashion, fast food culture, etc. keeps these essential vitamins away from our diet.

The way out is to include and increase the amount of antioxidants in our diet i.e., eat more fruits and vegetables that are fresh, safe, and containing bioflavanoids.

It is always said that prevention is better than cure. Intake of large amounts of vegetables will keep our health optimum. Then we can move from illness to wellness. Hence the move today is not to treat the illness but to promote wellness.



Check Your Progress

1. What is meant by wellness? List out any four components of wellness.
2. Identify any three micro nutrients.



Conduct a seminar for the LP School students and their parents on the importance of proper nutrition in preventing diseases and promoting health. You can seek the help of a dietician.

5.4 Mental Health

Mental health includes our emotional, psychological and social well being. It affects how we think, feel and act. It influences the way we handle stress, relate to others and make choices. Mental health is important at every stage of life from childhood and adolescence through adulthood.



Good mental health is more than just the absence of mental illness. It can be seen as a state of mind that allows one to flourish and fully enjoy life. It is the ability to cope with the positive and negative experiences of life.

According to Karl Merringer, **mental health** is the ability for adjustment to the world and to each other with maximum effectiveness and happiness.

W.W. Boehm defines **mental health** as “a condition and level of social functioning which is socially acceptable and personally satisfying.”

In general, **mental health** can be defined as the optimal development and functioning of the individual consistent with the long term well being and progress of the group to which one belongs.

Characteristics of Mental Health

The National Mental Health Association cites the following as the characteristics of people who are mentally healthy:

- i. They feel good about themselves.
- ii. They do not become overwhelmed by emotions such as fear, anger, jealousy, guilt or anxiety.
- iii. They have lasting and satisfying personal relationship.
- iv. They feel comfortable with other people.
- v. They can laugh at themselves and with others.
- vi. They have respect for themselves and for others.
- vii. They are able to accept life's disappointments.
- viii. They can meet life's demands and handle their problems when they arise.
- ix. They make their own decisions.
- x. They shape their environment whenever possible and adjust with it when necessary.

Factors Contributing to Mental Health

There are several factors contributing to mental health of an individual like hereditary, organic conditions, psycho-social factors, etc.

- a. **Heredity:** It is the passing of certain traits from parents to offspring. Many psychiatric disorders like depression, bipolar disorders, schizophrenia, etc. are linked to genetic reasons.
- b. **Organic conditions:** Mental illness may have their origin in organic conditions such as cerebral arteriosclerosis, neurological diseases, endocrine and other chronic diseases.
- c. **Psycho-social factors:** The social and environmental factors associated with mental health comprise worries, anxieties, emotional stress, frustration, unhappy marriages, broken homes, poverty, industrialization, urbanization, changing of family structure, economic insecurity, etc.
- d. **Self esteem:** This is the value we place on ourselves, our positive self image and sense of self worth. People with high self esteem generally have positive outlook and good mental health whereas negative self esteem leads to social withdrawal, depression, anxiety, etc.

- e. **Physical ill health:** Diseases, injuries and other physical problems often contribute to poor mental health. The physical causes such as birth trauma, brain injury, or drug abuse directly affect brain chemistry and contribute to mental illness.

Mental Status Examination (MSE)

Mental status examination is a standardized procedure in which the practitioner records the psychiatric signs and symptoms of a mentally ill person at the time of interview. MSE describes all areas of mental functioning.



With the help of standardised MSE format a psychiatrist or a clinical practitioner can assess mental stage of a client in an objective manner through which the problem can be diagnosed and treatment plans can be formulated.

A standardized format of mental status examination (MSE) is given in the box.



MENTAL STATUS EXAMINATION

1. General Appearance and Behaviour.

- i. General appearance. eg: physical appearance, hygiene, grooming, dressing etc.
- ii Attitude towards examiner. eg: cooperation, attentiveness, etc.
- iii Comprehension; intact /impaired (partially or fully)
- iv Gait and posture (normal or abnormal way of sitting, standing, walking)
- v Motor activity – excitement, restlessness, mannerism, social withdrawal, autism.
- vi Social manner – non verbal behaviour, eye contact.
- vii Rapport; whether working or empathetic relationship can be made with patient.

2. Speech

- i Rate and quantity; presence or absence of speech, spontaneity, speed or slow.
- ii Volume and tone of speech – low, high, normal pitch, stammering, accent, etc.

3. Mood and Affect

Assessment of mood includes testing the quality of mood, variation, length of time mood lasts, etc.

4. Thought

Whether thought process goal directed, logical, realistic, How is the stream and form of thought. The content of thought eg. Irrational fears, false beliefs, over valued ideas, love, jealousy, etc.

5. Perception

Whether the client is aware of sensory experiences and able to recognize it by comparing with previous experiences.

6. Cognition (Higher Mental function)

i. consciousness

ii. orientation

iii. attention

iv. concentration

v. memory

vi. intelligence

vii. abstract thinking.

7. Insight

It is the degree of awareness and understanding of patient towards his/her illness. It is graded on responses of patient.

8. Judgment

It is the ability to assess a situation perfectly and appropriately.

5.5 Common Mental Disorders

Mental disorder and mental defiance may be observed on the basis of deviations from normality. Mental disorders are usually associated with significant disturbance in social, occupational, or other important activities. Mental disorder is a disturbance of cognition (thought) or conation (action) or affection (feeling) or all the three.

Mental disorders are generally classified as major and minor. The major illnesses are called psychoses. Schizophrenia, manic depressive psychoses, and paranoia are some of the major mental illnesses. The minor illnesses are of two types, namely, neurosis and personality disorders. Anxiety disorders, phobia, hysteria, obsessive compulsive neurosis etc. are some of the minor illnesses. Let us discuss some of them in detail.

Depression

Everyone occasionally feels gloomy or sad. But these feelings are usually short lived and pass within a couple of hours or days. If this state continues irrationally for long affecting his day to day life and behaviour, it can be an indication of depression.

Signs and Symptoms of Depression

- Persistent sad, anxious or empty feeling
- Feeling of guilt, worthlessness, or helplessness
- Irritability
- Loss of interest in activities or hobbies
- Fatigue and decreased energy
- Difficulty in concentrating and remembering details, and in making decisions
- Insomnia, early morning wakefulness, or excessive sleeping
- Over eating or appetite loss
- Thoughts of suicide or suicide attempts
- Psychosomatic symptoms like headache, stomach pain, etc. which never cease on treatment.

Causes of Depression

Most likely depression is caused by a combination of genetic, biological, environmental, and psychological factors. Research indicates that depressive illness are disorders of the brain.

How to Help a Person with Depression

- Offer emotional support.
- Show understanding and patience.
- Talk to him/her and listen carefully.
- Never dismiss feelings, but point out realities, offer hope.
- Never ignore their comments about suicide.
- Help him/her to seek medical assistance.

Bipolar Disorder (Manic Depressive Psychoses)

Bipolar disorder is a serious mental illness characterised by extreme changes in mood, from manic to depression. If it is not treated, it can lead to risky behaviour, damaged relationship and careers, and even suicidal tendency.

Symptoms

The primary symptoms of the disorder are:

- Dramatic and unpredictable mood swings.

- Excessive happiness and extreme depression.
- Irritability and restlessness.
- Increased energy, less sleep.
- Racing thoughts and high sexual drive.
- Isolation and withdrawal.
- Sadness and anxiety.
- Loss of energy.
- Uncontrollable crying.
- Difficulty in making decisions.
- Thought of death or suicide.

How to Help a Person with manic depressive psychoses

Manic depressive psychoses need proper medical intervention. Therapy and right combination of mood stabilizer medicines are administered. Though bipolar patients can lead a normal and productive life, the disease is recurrent and cyclical in nature.

Paranoia

People with paranoid disorder suspect and distrust others irrationally. Individuals with this disorder assume that other people will exploit, harm, or deceive them, even if no evidence exist. Paranoid patients generally find it difficult to get along with others and often develop severe problems with close relationships.

Symptoms

- Suspects and distrusts others without reason.
- Preoccupied with unjust doubts.
- Reluctant to confide before others.
- Persistently bears grudges.
- Angry and quick reactions, and counter attacks.

How to Help a Person with Paranoia

It is a mental disorder which requires proper medical treatment. Paranoia in its initial stage or of mild nature can be managed by regular counselling and rationalization therapies. The patient needs proper rest, diet, and exercise.

Schizophrenia

Schizophrenia is a serious mental disorder which affects how a person thinks, feels, and acts. Person with schizophrenia may have difficulty in distinguishing real and unreal. Often they are unresponsive or withdrawn and have difficulty in expressing normal emotions in social situations. It is marked by splitting or disintegration of personality. They suffer general psychological disharmony, emotional disorders, disturbances in thought process, stained social relationships, delusions, hallucinations, etc.

Signs and symptoms of Schizophrenia

- Hearing or seeing something that is not there (hallucination).
- Faulty belief against reality (delusion).
- Constant feeling of being watched.
- Peculiar or nonsensical way of writing or speaking.
- Strange body positioning.
- Indifferent feeling.
- Deterioration of academic or work performance.
- Failure in personal hygiene and appearance.
- Withdrawal from social situations.
- Irrational, angry, or fearful response to loved ones.
- Inability to sleep or concentrate.
- Extreme preoccupation with supernaturals.

How to Help Persons with Schizophrenia

It is a severe mental disease which requires regular and proper treatment. Schizophrenic patients may gradually lose their social and emotional skills. Hence rehabilitation for resocialisation is required. Patients require continuous social support and care to lead their life.

Multiple Personality Disorder

Multiple personality disorder or dissociative identity disorder is a condition wherein a person's identity is fragmented into two or more distinct personalities. Persons with this disorder fail to integrate various aspects of their identity, memory, and consciousness in a single multidimensional self. Dissociative identity

disorder is characterised by the presence of two or more distinct or split identities. The 'alters' or different identities will have their own age, sex or race and specific postures, gestures, and talking style.

Symptoms

- Patient may behave like someone else.
- Gesture, posture and talking will be different from the real self.
- Identity, consciousness and memory may get affected.
- Sometimes they behave like imaginary people or like animals.

How to Help Persons with Multiple Personality Disorder

The patient requires proper medical care. They require proper rest, sleep and diet. Close observation and care is needed for the patients as they may run away during identity shifts.



Check Your Progress

1. What do you understand by the term mental health? List out its characteristics.
2. Describe the general symptoms of paranoid disorder.

Summary

In the beginning of the chapter we discussed the meaning and concept of health. We examined the various concepts related to health like bio-medical, ecological, psycho-social and holistic concepts. The different dimensions of health, physical, mental, social, etc. have been discussed in detail. Health of an individual is determined by heredity, environment, life style, socio-economic conditions, health services etc.

We also understood that health indicators are essential to measure, compare, assess and monitor health status of any community or region. For that purpose, we have to depend on many indicators of health in order to have objective evaluation of health status. Mortality indicator is one of the major indicators of health that include crude death rate, infant mortality rate, child mortality rate, maternal mortality rate and life expectancy.

We also discussed the concept 'disease' and its types. Communicable diseases are caused by different agents namely, bacteria, virus, fungi, helminthes or worms,

and protozoa. Advancement of medical science has helped to eradicate or control most of the communicable diseases mainly with the help of immunization and vaccination.

We also understood the concept and role of wellness initiative in promoting health and regulating lifestyle. The concept of mental health and common mental disorders were also discussed.

Evaluation Questions

1. List out some of the major attributes of a mentally healthy person.
2. Communal clashes occurring in our country are closely related to the absence of _____ dimension of health.
(a) Physical (b) Spiritual (c) Social (d) Vocational
3. List out and describe various dimensions of health.
4. Find out the odd one
(a) Crude death rate (b) infant mortality rate (c) Utilization rate (d) Life expectancy
5. List out four components of wellness.
6. Depression is one of the common mental disorders found in any population. List out major symptoms of depression.
7. Write a note on the characteristics of a mentally healthy person.
8. Illustrate epidemiological triad with the help of a diagram.
9. List out the nutritional status indicators used to measure the health status of a community.

Hygiene and Health Care Services

Significant Learning Outcomes

After the completion of this chapter, the learner:

- Describes the concept, aspects, and types of hygiene.
- Applies hygienic practices in daily life.
- Analyses the problem of pollution and waste.
- Applies suitable practices to reduce and manage waste.
- Recognizes the concept and dimensions of health care.
- Appraises the health care system of the country.
- Appraises the importance of community health, school health, and other national health programmes.

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National Urban Health Mission (NUHM)

6.1 Hygiene

As we learned in the last chapter, the term 'health' includes everything that determine the physical, mental, and social well being of individuals. Man is a social animal and he lives in constant contact with the environment. Generally, the practices we observe at individual and environmental level greatly affect our health. Desirable practices that contribute to better health are known as hygiene. The word 'hygiene' is derived from the word 'Hygeia', the goddess of health in Greek mythology. **Hygiene** is defined as "the science of health that embraces all factors which contribute to healthful living."



Hygeia is the Greek goddess for looking after the health of people. In the myth, she was represented as a beautiful woman holding a bowl from which a serpent is drinking. In Greek mythology the serpent symbolizes the art of healing.

Hygiene is the science and art of preserving and improving health. It is a science because hygiene is based on scientific knowledge and an art as it involves skills in the application of knowledge. Sometimes the word hygiene is used synonymously to cleanliness. But it is more than cleanliness, and includes all practices, surroundings, and life style which affect healthful living.

Types of hygiene

Hygiene has two aspects: (A) Personal hygiene, and (B) Environmental hygiene.

A. Personal hygiene:

It is observed that the people of Kerala do have great concern about personal cleanliness.



In our day to day life we spend much time for personal hygiene. What does the word 'personal hygiene' imply?

.....

Personal hygiene is the branch of hygiene which deals with the practices we make use to preserve and improve the health of our body, and mind. The aim of

personal hygiene is to promote physical, mental, spiritual and social health.

Personal hygiene includes practices relating to bathing, brushing, clothing, washing hands, toilet usage, care of nails and spitting, coughing, sneezing, and inculcation of clean habits in the early years of life.

Training in personal hygiene must start at an early age and must continue through school days.

(B) Environmental hygiene:

Though Keralites are known to be eager about their personal cleanliness, they are said to be less sensitive towards the cleanliness of their surroundings. What is your opinion?



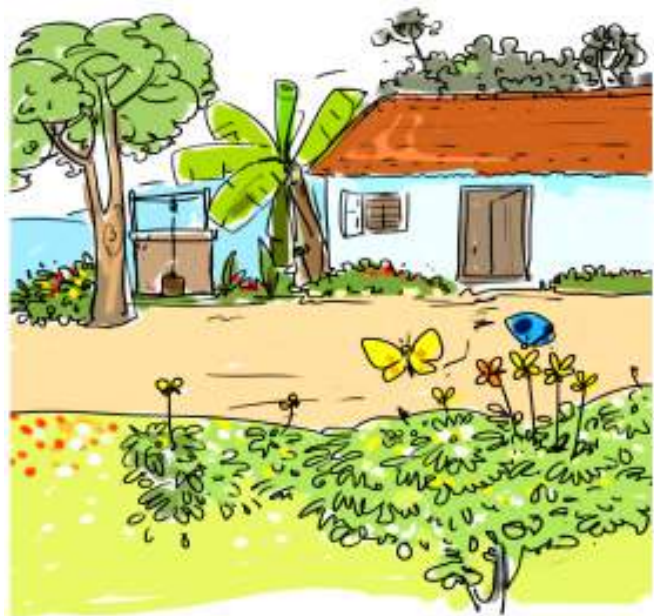
●

Cleanliness of the surroundings is an important component of the environmental hygiene.

Environmental hygiene is the branch of hygiene that deals with the practices to preserve and improve the quality of the environment in which we live. Environmental hygiene has two components - domestic, and community.

a. Domestic hygiene:

Domestic hygiene comprises the healthy practices at home. It includes need for fresh air, light and ventilation, hygienic storage of food, hygienic disposal of waste, need to avoid pests, rats, mice, and insects.



b. Community hygiene:

It deals with the practices and methods we use to protect and improve hygiene outside the home. It includes the improvement of water supply, safe disposal of human excreta, disposal of other solid and liquid wastes, pollution control, vector control, food sanitation, and housing.

Can you list out some of the problems affecting environmental hygiene?

-

A major challenge affecting the environmental hygiene is pollution.

**Check Your Progress**

1. Explain the concept hygiene.
2. Write five hygienic practices promoting personal hygiene.

6.2. Pollution

Any undesirable change in the environment due to human activity is called pollution. The change may be physical, chemical, or biological.



Pollution can be defined as the addition of any unwanted or harmful substances to the surroundings which adversely affect the natural quality of the environment.

It is the unfavorable alteration of our surroundings and occurs mainly because of the actions of man. It affects the health, quality of life and natural functioning of the eco systems. It can affect the life of humans, animals, and plants. It may cause illness or even death in the case of humans and animals and it may hinder the growth of plants. The World Health Organization has estimated that 80-90% of all human cancers are environment related.

The excessive population growth is a major cause of pollution. The world is over crowded with people who consume resources and create wastes. Rapid industrialization and fast urbanization are other major causes of pollution. The

undesirable agricultural practices with uncontrolled use of chemical pesticides and fertilizers also resulted in the alarming increase of pollution.

Types of pollution

We are threatened by several kinds of pollution. Depending upon the area or the part of environment affected, pollution may be of the following types: air pollution, water pollution, noise pollution, soil pollution, light pollution, etc. Let us discuss some of them.

A. Air pollution

Do we feel any uneasiness when we visit a busy city?

•

The atmospheric air in cities is contaminated by impurities emitted from automobiles and industries. The low quality of air in a busy town may cause several problems or ill effects.



Air pollution may be described as the imbalances in the quality of air so as to cause ill effects.

Air is a mixture of many gases. It consists of Nitrogen (78%), Oxygen (21%), Carbon dioxide (0.03%) and other gases such as Argon, Neon, Krypton, Xenon, Helium, etc.

Air pollutants may be natural or man-made. Natural air pollutants include smoke from forest fires or volcanoes. Man-made air pollutants are of two types-gaseous



and particulate. Major gaseous air pollutants are carbon monoxide, carbon dioxide, hydrogen sulphide, nitrogen oxides etc. Particulate air pollutants comprise both solid and liquid particles varying in size from 0.1 to 20 microns. These are dust, fumes, mist, spray, smoke, etc.

Sources of air pollution

- i. Factories and industries.
- ii. Automobiles
- iii. Burning of wood
- iv. Burning of fossil fuels like coal, petroleum products etc.
- v. Use of insecticides and pesticides.
- vi. Burning of plastic and other solid wastes.
- vii. Nuclear explosions, etc.

Air pollution affects the health of man and animals. Large quantities of dust and other particles cause lung diseases including lung cancer. There is growing evidence that many chronic diseases such as asthma, emphysema, bronchitis, etc. are caused by air pollution. Carbon monoxide is highly poisonous and is fatal. Another greatest danger of air pollution is green house effect and global warming.

**Green house effect and Global warming**

Greenhouse is referred to as a green chamber where plants are grown in a closed warm environment as compared to the outside temperature. This is normally practiced in cold countries. The solar radiations bringing heat are trapped inside the chamber. The atmosphere on earth can also act in a similar way. Industrialization and urbanization have led to the release of green house gases such as carbon dioxide, methane and Nitrogen oxides into the atmosphere. These gases have converted the earth's atmosphere into a green house. Heat contained in the solar radiation is allowed to come in, but it is not sent back to the space due to increasing concentration of carbon dioxide and other green house gases. As a result, the earth's average temperature is increasing. This warming up of atmosphere due to green house gases is called global warming.

B. Water Pollution

We are always advised to drink boiled water. Why?

●

It is because often the plain water is polluted with some biological or other agents.



We know that water is essential for life. It is essential for agriculture, industry, and household purposes. Supply of safe drinking water is of utmost importance in maintaining health.

Water pollution is the excessive presence of harmful substances in water which affects its normal quality due to natural or man-made reasons.

Water pollution is one of the most serious environmental problems of the modern society. WHO observed 'one hospital bed out of four in the world is occupied by a patient who is ill because of polluted water' and estimated that '80% of diseases in the world are associated with water'.



Sources of water pollution

Pollution of water takes place through:

- i. Residues and other poisonous substances from factories and industries.
- ii. Sewage from urban dwellings.
- iii. Chemical pesticides and fertilizers.
- iv. Plastic and other solid wastes.
- v. Decayed or putrefied (rotten) organic matter.

Can you list out the impacts of water pollution?

●

Pollution makes water harmful for drinking, bathing and other domestic purposes. Polluted water transmits diseases like cholera, typhoid, filariasis, etc. It may also cause serious nervous disorders, cancer, paralysis, and a number of respiratory diseases. It may lead to the destruction of aquatic organisms which in turn affects man and animals. The excessive use of fertilizers and pesticides

can lead to the phenomenon of eutrophication and bio magnification, which are serious consequences of water pollution.



Eutrophication & Bio magnification

The enrichment of water with nutrients such as nitrates and phosphates, which comes from fertilizers and detergents, that triggers the growth of green algae is called eutrophication. This fast growth of algae followed by their decomposition depletes the water body and reduces the dissolved oxygen level. As a result aquatic animals die of oxygen shortage.

Entry of harmful, non-bio degradable chemicals in small concentration and their accumulation at the various levels of food chain is called bio-magnification. Pesticides, such as DDT once entering the food chain, keeps on increasing their concentration. As a result, accumulation of these compounds takes place in the body of man or animals.

C. Noise pollution



During our field trips and study tours we demand for high watt stereo systems and like to play it in maximum sound throughout the journey. Does it have any adverse effect on our health?

•

Exposing to high watt sound for a long time affects our physical as well as mental wellbeing.

Do the words 'sound' and 'noise' have the same meaning?

"Unwanted and undesirable sound potentially hazardous to the environment" are termed as noise. It is unpleasant sound without agreeable quality.

Noise pollution is excessive sound that may harm the balance of human or animal life. Unit of loudness is decibel (dB).



Our normal conversation is about 60 decibel. The Central Pollution Control Board of India has set the safe limit for ambient noise at 55dB for residential areas and 65dB for commercial areas. When sound levels exceed 80db, it is considered as hazardous to humans.

Sources of noise pollution

- i. Noise from industries and transportation system
- ii. High volume music and public address systems.
- iii. Pressure horns and siren.

Harmful effects of noise

- i. Noise causes fatigue, lack of concentration, sleep disturbances, and forgetfulness.
- ii. Noise at work place can make workers irritable and aggressive which in turn may disrupt production.
- iii. Noise can cause high blood pressure. It can affect colour perception and can reduce night vision.
- iv. Very loud noise may cause temporary deafness.
- v. If sound levels are more than 160dB, it may rupture the ear drum, resulting in permanent deafness.
- vi. Plants and trees are also sensitive to noise and it may lower the quality of crops.
- vii. Loud noise damages the nervous system of animals. They may lose control and may become dangerous.
- viii. Loud noise is also dangerous to buildings and monuments.



D. Soil pollution

You might have heard about Endosulphan issues in Kasaragod district. What was the actual issue and how did it happen?

We know that the water and the soil of 11 panchayaths in the Kasaragod district are highly polluted as a result of the aerial spraying of the pesticide, Endosulphan in the cashew plantations.

The **soil pollution** is defined as the accumulation of materials in the soil which are harmful to the living beings.



The problem of soil pollution differs from air and water pollutions. In soil pollution the pollutants remain there for a long period.

Sources of soil pollution

- i. Industrial wastes from coal/metal mines.
- ii. Chemical effluents from factories and industries.
- iii. Chemical pesticides and fertilizers from agriculture practices.
- iv. Radio-active wastes from nuclear laboratories and industries.
- v. Domestic wastes and urban wastes including e-wastes.
- vi. Biological wastes by open defecation and animal excreta.



e-waste

The widespread use of electronic items has created a major challenge to the public health system in the form of e-waste. e-waste comprises things generated from used electrical and electronic devices and household appliances such as computers, television, mobile phones, music systems, refrigerators, air conditioners, etc. All these devices contain many toxic chemical elements and compounds such as steel, copper, aluminum, tin, lead, nickel, silver, gold, arsenic, cadmium, mercury, zinc etc. Unscientific handling and management of e-wastes creates many health problems to man as well as environment. e-waste pollution creates high incidence of birth defects, infant mortality,



tuberculosis, blood diseases, anomalies in the immune system, kidney problems, respiratory problems, lung cancer, development problems of the brain in children, etc. According to the Comptroller and Auditor General's (CAG) report, 4 lakh tones of e- waste are generated in our country annually. Available technologies for treating e- waste include recycling, incineration, land filling, and bio-remediation. But all these methods have their own limitations.

Soil pollution reduces the quality and fertility of the soil. Garbage dumps constitute breeding ground for insects. It is estimated that 70000 flies can breed in one cubic foot garbage. The chemical fertilizers and insecticides stay in soil permanently and find their way into plant products. The increase in the number of cancer patients in Kerala are suspected to be due to the intake of high amounts of pesticide contaminated agricultural products.

Prevention and control of Pollution

Some general steps are given below which can be used to control and prevent air, water, soil, and noise pollutions.

- a. **Reducing wastes:** In the case of wastes, we can adopt practices based on the principles of refuse, reuse, reduce, recycle, and replace. We must learn to improve the present waste disposal practices.
- b. **Promoting organic farming practices:** Instead of using chemical pesticides and fertilizers we must promote organic farming practices with bio pesticides and organic manures. Zero-budget farming is gaining more importance today.
- c. **Scientific treatment of industrial and e-wastes:** The chemical effluents from industries and factories must be properly treated and should not be dumped into water bodies. e-wastes must be handled in such a manner that it does not cause environmental hazards.
- d. **Promoting hygienic practices:** To avoid pollution we must promote good practices such as planting of trees around urban, industrial and residential areas; not throwing wastes into public places, rivers and ponds; avoiding the use of air horns, playing music and sound systems in low volume, constructing septic tanks in proper places, etc.
- e. **Adopting alternative practices:** Various alternate practices can be used to avoid pollution such as using mass/public transportation systems, using non- polluting vehicles like cycles, etc.

- f. **Making products out of wastes:** A large volume of wastes can be converted into useful products such as manures, recycled plastic and paper products, etc.
- g. **Enactment and implementation of laws:** Strict enforcement of the existing laws is very important to control the increasing levels of industrial and vehicular pollutions. The fast advancement in science and technology demands more comprehensive and strict anti pollution laws.
- h. **Vigilance and Surveillance:** The increasing tendency of dumping wastes in places like roads, play grounds, forests, rivers, lakes, etc. can be prevented by proper observation and monitoring. Vigilance squads comprising residents from the locality can be alert and watchful to the law breakers.

The major reason behind all types of pollution is the production of wastes by human activities. The production and consumption pattern of modern man is largely a 'waste generating' activity. The 'use and throw culture' creates a serious threat to the health of man and his environment. So scientific waste management becomes imperative as far as the health of future generations are concerned. Let us discuss it in detail.



Check Your Progress

1. What is meant by pollution? What are the sources of air pollution?
2. List out the reasons of water pollution.
3. Point out the harmful effects of noise.



1. Plastic and e-waste become a major threat to environment. Prepare a questionnaire and conduct a survey on the topic.
2. Prepare a collage on the topic air/water pollution.

6.3. Waste management and Sanitation

Waste is any matter that is left over unwanted. It can be solid waste(kitchen waste, plastic waste), liquid waste(waste water), organic waste (decayed food, putrefied vegetables), hazardous waste (radio-active, e-wastes),and bio-medical waste(syringe).



Waste management poses a serious challenge to the modern societies and requires coordinated efforts to address it.

The basic principle behind systematic waste management is refuse, reduce, reuse and recycle. Waste treatment is the best method of waste management. In this method, Wastes are segregated into bio degradable and non-bio degradable. The degradable waste can be used for making organic manures and non degradable waste must be recycled to other useful products.



Is waste management and sanitation the same?

●

Though it appears to be same, each has different meaning and scope. Sanitation is a broad area which covers all hygienic practices, positive usages of food, proper management of waste and healthy preservation of public places etc. Every civilization has placed sanitation a high priority among all community needs. Waste management is only a component of sanitation.

Sanitation is concerned with keeping the environment healthy. Environment includes the water we drink, the food we eat, the air we breath, and the surrounding we live in. Providing comfort stations, drainage and sewage facilities, promoting parks and gardens, ensuring neat and clean public places, etc. come under the purview of sanitation.

Sanitation generally refers to the maintenance of hygienic conditions through provision of facilities and services such as collection of garbage, waste water, human urine and faeces for safe disposal. Inadequate sanitation is a major cause of diseases all over the world and improving sanitation has significant impact on the health of people and communities.



Swachh Bharath Abhiyan

Govt. of India has launched the 'Swachh Bharath Abhiyan' or "Clean India Campaign" on October 2nd, 2014. It is a mass movement aimed at cleaning the country to get rid of garbage, clutter and weed out unwanted things from government offices, railway stations, and other public places. The programme also includes providing pure drinking water and sanitation throughout India. The slogan of this programme is "Clean India by 2019", by the 150th birth anniversary of Mahatma Gandhi. The programme focuses to make India 'Open Defecation Free (ODF)' by 2019 by constructing individual, cluster, and community toilets along with solid and liquid waste management, eliciting public-private partnership.

6.4. Health care

We know that health is a major asset of any society. There are various factors that contribute to health. In addition to the maintenance of a pollution free environment and hygienic life we need a comprehensive system to promote, maintain, preserve, and restore our health. So every society has developed appropriate systems for the purpose of health care.

Health care is defined as the variety of services given to individuals, families, or communities with the purpose of promoting, maintaining, monitoring or restoring health.

Health care includes diagnosis, treatment, and prevention of diseases, injury and other physical and mental impairments in human beings.

Health care is an expression of concern for fellow human beings. In India, health has been viewed as a basic need. The relationship between health and economic growth is well established. So it is the duty of any government to improve the health of the people through a proper health care system.

But access to health care services across the countries, groups and individuals are largely influenced by the social and economic policies of the state. Nearly all the governments in the world recognize provision of proper health care system as their duty. In many countries, including India health care is largely a governmental function.

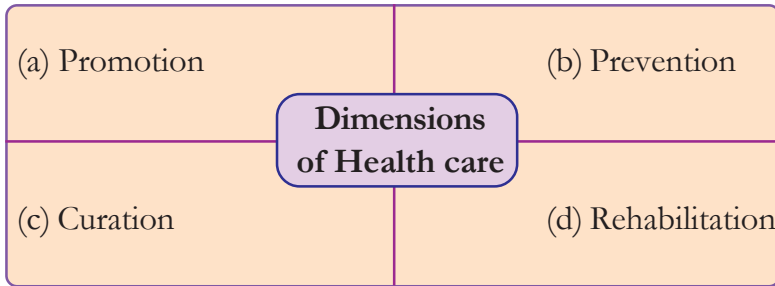
Do you think the term 'health care' indicates only the treatment of diseases?

●

Health care is not only the curation of certain health problems. It has promotive, preventive, and rehabilitative dimensions. Let us discuss it in detail.

Dimensions of Health care

Health care is not mere "medical care". Medical care means care or services given by a physician. But Health care is more comprehensive. It includes promotive, preventive, curative, and rehabilitative services. Therefore medical care is only a sub set of health care. Health care is intended to promote health, to preserve health, and to restore health when it is impaired, and to minimize the suffering and distress.



Let us discuss the promotive, preventive, curative, and rehabilitative aspects of health care.

Promotion

Health promotion is the process of enabling people to improve their health. It is intended to strengthen the person/host with a variety of interventions.

Important methods of health promotion are:

- a) Health education,
- b) Environment modification,
- c) Nutritional intervention,
- d) Life style and behavioural changes, etc.

Healthy
Living

In order to impart effective health promotion, we have to identify the 'target' or 'risk groups', define the goals, and implement various strategies to improve or promote the health.

In preventive health terminology, promotive care is generally termed as primordial prevention.

Prevention

Successful prevention depends upon the knowledge of causation, dynamics of transmission, identification of risk factors and risk groups, availability of early detection and treatment measures etc.

It is an action taken prior to the onset of disease which removes the possibility of a disease. It includes protection against specific disease agents through immunization. Diseases like polio, diphtheria, measles, tetanus, etc. can be successfully prevented. In the case of communicable diseases, like cholera, typhoid, and dysentery, prevention can be done by raising the standard of living of people.

In preventive health terminology, this level of health care is also termed as primary prevention.

Curation

After the onset of a disease, curation is very important. It is the clinical treatment of the patient. Early detection and treatment are the interventions in this regard. Proper diagnosis is very important at this stage. The earlier a disease is diagnosed and treated the better to prevent further complications and long term disability. Treatment can take the form of individual and mass treatment.



It is the action which prevents the progress of a disease to check further complications. In preventive health terminology curation is termed as secondary prevention.

Rehabilitation

Rehabilitation has been defined as the combined and coordinated use of medical, social, educational, and vocational measures for training and retraining the individual to the highest possible levels of functional ability.

It includes all measures aimed at reducing the impact of disability and enabling the disabled and handicapped to achieve social integration. Rehabilitation helps a person to actively participate in community life. The purpose of rehabilitation is to make people productive within the limit of their health.

It is an intervention at the later stage of disease. In preventive health terminology rehabilitation can also be termed as tertiary prevention. Tertiary prevention includes all measures available to reduce or limit the impairments and disabilities and to promote the patient's adjustments with the present condition. It tries to reduce the limit of impairments and disabilities and promote patient's adjustment to the new situation.



Rehabilitation as a branch of medicine makes use of various disciplines like: physiotherapy, occupational therapy, speech therapy, audiology, social work, psychology, education, etc.

Examples of rehabilitation are: establishing schools for the blind, provision of aids for the crippled, reconstructive surgery in leprosy, muscle re-education and exercise in the case of polio, etc.

Levels of health care

Health care services in India are provided through a three tier setup namely primary, secondary, and tertiary levels.

Primary Level

It is the first level of contact of the community with the health care system. It refers to the work of health professionals who act at the first point of consultation.

In India, primary health care is provided through a network of government owned and operated sub-centers, and Primary Health Centers.



Sub Centre is the most peripheral and first contact between the community and primary health care system. Each sub centre is manned by a female and a male multi- purpose health worker.

Primary Health Center (PHC) is manned by a medical doctor supported by 14 paramedical staff. It acts as a referral unit for 6 sub centers and has 4 to 6 beds for patients.

Primary care provides all types of basic health care for patients with acute and chronic physical, mental and social health issues.

Primary care also includes many basic maternal and child health services such as vaccination, family planning services, health awareness programmes, etc.

Depending upon the nature of the health condition, patients may then be referred to secondary / tertiary care.

Secondary Level

Secondary care is the health care services provided by medical specialists and other health professionals who generally do not have first level contact with the patients. eg: Services given by the specialist doctors like Cardiologists, Urologists, Dermatologists, etc.

It includes acute care, which means necessary treatment for a short period of time for a brief but serious illness, injury, or other health conditions. The secondary care is sometimes used synonymously with “hospital care”. In India this type of care is generally provided in community health centers, taluk hospitals, district hospitals, etc.

Tertiary Level

Tertiary care is more specialized, consultative health care usually for inpatients or referred patients from primary or secondary health professionals. It need specific facilities and highly specialized health workers. This care is provided by the Regional or central level institutions such as Regional hospitals, Medical Colleges, National Institutes, etc.



Check Your Progress

1. The dimension of health care which aims to restore the impaired capacity of an individual is known as.....
2. Prepare a chart showing the dimensions of health care.

Health care system

The health care system is intended to deliver the health care services. It works in accordance with the socio economic and political frame work of the country. In India, there are five major sectors or agencies of health care services. They are

A. Public Health Sector

- a. Primary Health Care
 - i) Primary Health Centers
 - ii) Sub- Centers
- b. Hospitals
 - i) Community Health Centre
 - ii) Rural Hospitals
 - iii) District hospital
 - iv) Teaching Hospitals
- c. Health Insurance Schemes
 - i) Employees State Insurance
 - ii) Central Govt. Health Scheme.

- d. Other Agencies
 - i) Defense Services
 - ii) Railways

B. Private Sector

- a. Private Hospitals, Polyclinics, Nursing Homes, and Dispensaries
- b. General Practitioners and Clinics

C. Indigenous System of Medicines

- a. Ayurveda
- b. Yoga and Naturopathy
- c. Unani
- d. Siddha.
- e. Homoeopathy.



The department of Ayurveda, Yoga & Naturopathy, Unani, Siddha, and Homoeopathy abbreviated as 'AYUSH', is a governmental body in India established in 2003 with the purpose of developing education and research in Ayurveda, Yoga & Naturopathy, Unani, Siddha, and Homoeopathy and other alternative medicine system. It is operated under the Ministry of Health and Family Welfare. The word 'AYUSH' is derived from Sanskrit, meaning 'long life'.

D. Voluntary Health Agencies

There are a number of organizations in India offering voluntary health services. They usually operate at the grass root level complementing the services of the government. Prominent among them are:

- V H A I (Voluntary Health Association of India)
- CHAL (Catholic Health Association of India)
- SEARCH (Society for Education Action and Research in Community Health)
- CRY (Child Relief & You)
- Indian Red Cross Society
- Tuberculosis Association of India
- The Kasturba Memorial Fund
- Caritas India, etc.

E. National Health Programmes

Government of India has launched various National Health Programmes to combat communicable, non communicable, and other major diseases. All these programmes played a significant role in the reduction of mortality and morbidity and improved the quality of life of common man. International Agencies like WHO, UNICEF, and World Bank have been providing technical and material assistance in the implementation of these programmes. National Malaria Eradication Programme, National Tuberculosis Control Programme, National Mental Health Programme, etc. are some of them.

6.5 Primary Health Care and Community Health

The concept of primary health care was emerged in the 20th century as a strategy to provide access to comprehensive, effective, health services for all people. This model was adopted in the declaration of the International Conference on Primary Health Care held at Alma Ata of Khasakistan (in former USSR) in the year 1978, which was known as 'Alma Ata Declaration'.



The Alma Ata Declaration defined primary health care as “the essential health care based on practical, scientifically sound, and socially acceptable methods and techniques made universally accessible to individuals and families in the community.”

The primary health care is the best approach to achieve health for all and it is a reliable guarantee for sustainable improvement in people's health. Here great importance shall be attached to the development of the health care in rural and remote areas. It provides safe, essential and accessible medical and health care services.

It is an ideal model of health care through the full participation of people and at a cost that community can afford.

Characteristics of Primary health care

- i. Primary health care is universally accessible to individuals, families, groups, and communities.

- ii. It involves community participation.
- iii. It includes promotion of health, prevention and curation of diseases.
- iv. Its goal is better health for all.

Components of primary health care

The Alma Ata Declaration has outlined eight essential components of Primary health care. They are:

- i. Health education regarding the prevailing health problems and the methods to prevent and control them.
- ii. Promotion of food supply and proper nutrition.
- iii. Supply of safe drinking water and basic sanitation.
- iv. Maternal and child health care including family planning.
- v. Immunisation against major infectious diseases.
- vi. Prevention and control of locally endemic diseases.
- vii. Appropriate treatment of common diseases and injuries.
- viii. Provision of essential drugs.



Check Your Progress

1. List out the components of primary health care.



Visit a primary health centre and prepare a report on its functions and activities.

Community Health

Community health is an integral part of public health. In some countries, the term community health has been replaced with the words “public health”, “environmental health” etc.

It is the “science that concerns itself with the study and betterment of the health of the community”. Therefore community health approach to health care has widely recognized as the right alternative for ensuring health to the poor millions in developing nations. It is an effort to make the health care system relevant and responsive to the socio-economic and political realities of the society.



Community health is a process of making people aware about their health needs, their rights and responsibilities. It demands active participation of the community in health initiatives. Running of village clinics, extension services from hospitals, free medicine and referral services, and awareness building through non formal education are programmes coming under community health.



6.6. School Health Programme

In India, a substantial number of school going children suffer from various preventable diseases. It is due to widespread poverty, illiteracy, and lack of hygiene and sanitation. Many diseases can be prevented by appropriate health education and services. The government of India launched School Health Scheme in the year 1996-97. The National Curriculum Framework also recommended that health education should be incorporated as a part of curriculum in schools.

School Health is a part of the community health programme. It is the programme for the comprehensive care of health and wellbeing of children throughout the school years. Now this programme is merged with a new programme named Rashtriya Bal Swasthya Karyakram (RBSK). In this programme all children from birth to 18 years are subjected to screening process in order to identify various health problems.

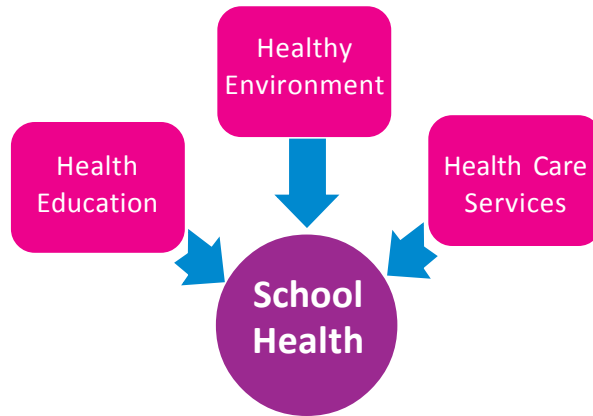
Providing easy access to health, nutrition, and hygiene education and services to children in school is simple and cost effective. It helps in the prevention and control of communicable and non communicable diseases. It also enables the revitalization of local health traditions and promotion of healthy life style among the students.

Objectives of School Health Programmes

The basic aim of school health programmes is to provide a comprehensive health care for school going children. Following are the important objectives of this programme:

- i) To develop health consciousness among school children.
- ii) Prevention of disease, early diagnosis, treatment, and follow up of defects.
- iii) Promotion of positive health.
- iv) Recognising the child as a “change agent” in the family and community.
- v) Promotion of appropriate social and emotional behaviour.

Components of School Health Programme



The School Health Programme has three components. They are health education, healthy environment and health care services.

A. Health Education:

This is the most important element of school health programme. It includes the following:

- Insisting on high standards of cleanliness in the school.
- Improving water supply and latrines and inculcating habits for their proper use.
- Introducing healthy diets through the noon meal programme.
- Demonstrating personal hygiene such as cutting of nails, dressing of hair, bathing with soap and water, etc.

B. Healthy Environment:

This should include not only the sanitation of the school premises but also the surroundings, which have moral, physical, and mental effect on the child. The school should be situated at a distance from the road so as to minimize the nuisance of dust, noise and traffic. Proper maintenance of the school building is more important. The school authorities must be careful on the following items of sanitation.



- a) Ensure supply of safe drinking water all the time.
- b) The waste water should drain into a soak pit or a garden.
- c) Proper urinals and latrine with adequate water supply.
- d) Each room should have a waste basket and it should be emptied into a compost pit regularly.
- e) Enough windows, doors, and ventilators should be provided to admit fresh air and light.
- f) A good playground must be provided for recreation and physical education.

C. Health care services

It should be promotive, protective, and curative as well as rehabilitative.

Health is promoted through environmental sanitation and health education and by good nutrition, immunization, recreation, exercise, and personal hygiene. Children are guided on safety measures to avoid accidents. Regular medical check-up, preparation of health card, and referral service help curation. Children who need special care must be helped physically or mentally.



Check Your Progress

1. Define community health and list out its characteristics.
2. Briefly describe the components of school health programme.

Integrated Child Development Scheme (ICDS)

ICDS is an integrated approach for the development of women and children from the disadvantaged sections. It was conceived in Kerala in 1975. The scheme targets the most vulnerable group of population including children up to 6 years, pregnant women, and nursing mothers belonging to poor families and living in backward areas, tribal areas, and urban slums.



The objectives of the scheme are:

- a) To improve the nutritional and health status of children in the age group of 0-6 years.
- b) To lay the foundation for proper psychological, physical and social development of the child.

- c) To reduce the incidence of infant mortality, morbidity, malnutrition, and school drop outs.
- d) To coordinate the activities of various departments to ensure child development.
- e) To enhance the capability of mother to look after the normal health and nutritional needs of the child through proper nutrition and health education.

In all the districts there are ICDS Cells to monitor the programmes.



Major Services to beneficiaries under ICDS are

1. Services to Children of 3-6 years
 - Early detection of childhood disabilities and referral
 - Growth monitoring
 - Immunization
 - Periodic health check ups
 - Treatment of minor and common ailments
 - Vitamin A supplementation
 - Early child hood education
 - Supplementary nutrition
 - De worming bi annually
2. Services to Adolescent girls
 - Health and nutrition education
 - Family life education
 - Distribution of iron and folic acid tablets
3. Services to Pregnant women
 - Antenatal care
 - Monitoring of monthly weight gain
 - Immunisation
 - Food supplementation
 - Nutrition and health education
4. Services to Nursing women
 - Post natal care
 - Nutrition and health education
 - Food supplementation



Anganwadi

Anganwadi is the focal point for the delivery of services under ICDS at the community level to children below 6 years of age, and women. It is literally a courtyard play centre situated in the village for child development and women empowerment. Here children spend more than 6 hours in a day. It is a meeting centre of women and mothers. The programmes aim to promote awareness and actions for child development and women. Now it is the duty of the local Self Government to provide the basic facilities for the anganwadi and the conduct of the supplementary food programmes.



Visit an anganwadi and prepare a report on the activities of the ICDS programme implemented through it.

6.7. National Health Programmes

The general health condition of the people of India was very poor before independence with a crude death rate of 22.4 per 1000 people, an infant mortality rate of 162 per 1000 live births and expectation of life around 26 years. Nearly half the total number of deaths were among children under 10 years. India was a reservoir of small pox and endemic diseases such as leprosy, filariases, malaria, etc. After independence the government of India took concerted efforts to combat communicative, non communicative and other major diseases. For this purpose, several National Health Programmes are directly run by the Union government which have resulted in the reduction of mortality and morbidity among the common man. The implementation of these programmes are done at the state level.

Let us discuss the major National Health Programmes.

National Cancer Control Programme

Cancer has become a major public health problem today. The increasing pollution and life style changes have made the modern man very much susceptible to this disease. There are about 20 lakh cases of cancer in the country at any given point of time and approximately 7 lakh new cases come up every year. As per WHO report 2005, the estimated deaths in India is projected to increase to



7 lakhs by 2015. 40% of the cancers in the country are related to tobacco use.

The National Cancer Control Programme was started in the year 1975. In 2010 this programme was merged in National Programme for the Prevention and Control of Cancer, Diabetes, Cardio-vascular diseases, and Stroke (NPCDCS). Primary prevention of tobacco related cancers, early detection of cancer cases, promotion of treatment facilities and pain and palliative care are the major focus of the programme.



Be Alert to Cancer Alarms!

Early detection is the key for improving cancer survival rate. But early detection happens only if people are aware of the symptoms. A study published in 2014 by Cancer Research Institute of UK say that people almost always do not recognize warning signals of cancer. The institute identifies 17 common cancer alarms. They are unexplained and persistent cough, change in bowel habits and indigestion, backache, unusual bleeding in stools and urine, unexplained weight loss, unhealing sores, etc. Any such symptoms which last for over two weeks and has no rational explanation should be checked out.

National Tuberculosis control programme (NTCP)

Tuberculosis is an infectious disease caused by micro bacterium tuberculosis. It is spread through the air by a person suffering from TB. To eradicate this disease, a National Tuberculosis Programme was started in India in 1962. In 1997, a Revised National Tuberculosis Control Programme (RNTCP) was adopted, which is known as 'Directly Observed Treatment - Short Course' (DOTS).



DOTS is a systematic strategy to combat TB. As its name itself suggests, DOTS is a "directly observed treatment" in which a health worker, who is not a family member, watches as the patient swallows the anti-TB medicines in their presence. An uninterrupted supply of good quality anti-TB drugs are ensured under DOTS. Its another feature is that, it shifts the responsibility for cure from the patient to the health system.

National Aids Control Programme

The government of India launched National Aids Control Programme in the year 1987. Since AIDS has no cure, the main objective of this programme is to

control the spread of AIDS infection through creation of awareness and aiming at behavioural change. Control of sexually

transmitted diseases, awareness creation, ensuring safe blood donation, and clinical management are the major components of this programme.



National Life Style Disease Control Programme

Non communicable diseases cause significant morbidity and mortality, both in urban and rural population in India. Heart disease, diabetes, lung diseases, cancer and injuries account for two-thirds of the total disease burden in the country. India with an estimated 5.1 crore diabetic patients is the second largest diabetic population in the world and this will grow upto 8 crore by 2030. Similarly, the number of persons with heart diseases was about 3.8 crores in 2005 may go up to 6.4 crore by 2015.



The major risk factors for non communicable diseases are high blood pressure, cholesterol, use of tobacco, unhealthy diet including low consumption of fresh fruits, vegetables and fast food consumption, physical inactivity, alcohol consumption, and obesity.

To control the various life style diseases a pilot programme under the name National Programme for Prevention and Control of Cancer, Diabetes, Cardio-vascular diseases, and Stroke (NPCDCS) was launched in 100 districts of the country in the year 2010 October. Now the programme is expanded all over the country.

The programme focuses on the health promotion, prevention of exposure to risk factors, early diagnosis, treatment of common non communicable diseases (NCDs), and rehabilitation services. Prevention and control of NCDs, awareness

generation, early detection of life style disease, etc. are the major objectives of the programme.

National Mental Health Programme (NMHP)

The National Mental Health Programme was started in the year 1982. The major objectives of the programme are to provide service for early detection and treatment of mental illness in the community itself and on increasing awareness about mental health.

Now, it has been recognized that it is possible to prevent a number of mental, neurological, and psychological problems if proper awareness is created among the public.

Universal Immunisation Programme (UIP)

Immunisation Programme is a vaccination programme launched in 1985. The programme has two components: immunization of pregnant women against tetanus, and immunization of children against six vaccine preventable diseases such as diphtheria, pertusis (whooping cough), tetanus, tuberculosis, measles, and polio.



In Kerala and Tamilnadu a new vaccine named Pentavalent vaccine has introduced in December 2011. It includes DPT, Hepatitis B, and Hib vaccine. Hib vaccine protects against Haemophilus influenza type B associated with pneumonia and meningitis. UIP became a part of the Child Survival and Safe Motherhood Programme in the year in 1992 and later merged into the Reproductive and Child Health (RCH) programme in 1997.



Other important National Health Programmes

1. **National Malaria Eradication Programme (NMEP):** Prevents deaths due to malaria and undertakes anti-malaria measures including mosquito control.
2. **National Filariasis Eradication Programme:** Control filariasis by mass campaign against the disease. DEC Albenbesol tablet has been introduced for all above 2 years.
3. **National Diarrheal Disease Control Programme:** The objective is to reduce mortality and diarrhea related malnutrition among children through oral rehydration treatment (ORT)

4. **Reproductive and Child Health Programme:** Controls maternal mortality, promotes child survival rate and provides adolescent education.
5. **National Programme for the Control of Blindness(NPCB):** Aims to reduce the prevalence of blindness in India by strengthening primary eye care and supplies aids to blind people.



Check Your Progress

1. What are the features of National Life Style Disease Control programme?



Collect news paper cuttings and prepare a poster on the high prevalence of cancer and other life style diseases in Kerala.

6.8 National Health Mission (NHM)

National Health Mission started in India with an aim of helping the States to achieve universal access to health care for all people. National Rural Health Mission (NRHM), and National Urban Health Mission (NUHM) come under NHM.



The goal of the Mission is to improve the availability and access to quality health care for disadvantaged people of rural and urban areas.



The Vision of NHM

The vision of NHM is “attainment of Universal Access to Equitable, Affordable, and Quality health care services, accountable and responsive to people’s needs, with effective inter sectoral convergent action to address the wider social determinant of health”

Structure of NHM

At the national level there is a Mission Steering Group (MSG) with Union Minister of Health and Family Welfare as the Chairman. The mission is headed by a Director having the rank of Additional Secretary. At the state level, there is a State Health Mission (SHM) headed by the State Chief Minister. The District Health Mission/ City Health Mission is headed by the District Panchayath president/ Mayor. Every district has a District Health Society which will be headed by the district collector.

National Rural Health Mission (NRHM)

NRHM aims at improving the health care system in rural areas and minimizing imbalances between urban and rural areas.

In case of NRHM, District Health Society is the prime governing body for policy formulation, district level planning, fund allocation, programme implementation and monitoring. At the Village level, Village Health Sanitation Committees have been formed for monitoring programmes at the village level. There are ASHA workers (Accredited Social Health Activists) to help at the village level.

An example of NRHM services is *Janani Suraksha Yojana* which aims to encourage women to use government hospitals for safe delivery by providing Rs 1400 to cover travel cost and other expenses. Another scheme is *Janani-Shishu Suraksha Yojana* for providing better health services to the mother and child.



National Urban Health Mission (NUHM)

NUHM is the urban counter part of NRHM. It is focusing on urban and city areas to improve the infrastructure conditions and standard of health care services in urban areas. NRHM and NUHM have helped to improve the infrastructure facilities of the rural and urban health sectors.



Summary

In this chapter we discussed about hygiene, pollution, health care, community health, and school health. It also dealt with Integrated Child Development Scheme (ICDS), National Health Programmes, and National Health Mission.

Hygiene is an important factor which affects the health and well being of a person. It is the science of health which deals with preserving and improving individual and community health. Proper maintenance of personal and environmental hygiene contributes to the overall health of the society.

Pollution is the presence of any unwanted substances in any part of the environment which adversely affect the health of the organism. Different types of pollution such as air, water, noise and soil pollution are mostly due to man-made reasons and can be prevented by an eco friendly life style and nature sensitive planning.

Health care implies various services given to the people for promoting, maintaining, and restoring their health. In India, these services are mainly provided through a well organized public health system comprising primary, secondary, and tertiary levels of health care.

Community health is an integral part of public health and is recognized as the right alternative for ensuring health to the poor millions in developing nations. School health is a part of community health which includes providing health education, healthy environment, and health care services for the overall development of children throughout the school years.

Integrated Child Development Scheme (ICDS) is a government programme for the welfare of children, adolescent girls, and pregnant women. Under this scheme, those people from weaker sections are helped with services like immunization, food supplementation, and health education.

In this chapter we also learnt about different National Health Programmes that were launched to control the mortality and morbidity among people due to various communicable and non-communicable diseases.

The last part of the chapter is about National Health Mission. It visions the attainment of quality health care services by rural and urban poor as per their needs.

Evaluation Questions

1. Every citizen has the right to live in a pollution free environment. List out the measures to avoid pollution.
2. Suggest certain measures to protect our rivers from pollution.
3. Discuss the problem of soil pollution with reference to the Endosulphan issues in Kasaragod district.
4. Write a note on the waste management and sanitation.
5. Explain the dimensions of health care.
6. Health care in India is provided through the primary, secondary and tertiary levels. Explain.
7. 'Primary health care is the best approach to achieve health for all as far as a rural situation is concerned'—justify the statement.
8. "School health programme ensures the comprehensive health care of students."—What are the measures to maintain a healthy school environment?
9. Explain National Health Programmes.
10. "Hygiene includes all practices and efforts which affect our personal health". List out the practices to maintain the personal hygiene.
11. Kerala is a fast urbanizing state today and pollution is its natural result. Prepare a report on it.
12. Pollution is a major social problem in Kerala. Prepare a seminar paper on the causes, consequences and solutions of pollution.

Guidance and Counselling

Significant Learning Outcomes

After the completion of this chapter, the learner:

- Recognizes the importance of guidance and its application in one's life.
- Applies career planning in life.
- Recognizes counselling as an effective tool of helping process.
- Identifies various psychotherapies.

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Characteristics of Guidance
Need and Importance of Guidance
Types of Guidance

7.2. Career planning

Aptitude Tests
Competitive Examinations

7.3. Counselling

Types of Counselling
Counselling Skills

7.4. Introduction to Psychotherapies

Cognitive Behaviour Therapy (CBT)
Motivational Enhancement Therapy (MET)
Transactional Analysis (TA)
Neuro Linguistic Programming (NLP)

7.1 Guidance



After completing plus two and ITI, Rohit decided to go abroad for a job. His uncle promised him an employment visa. But Rohit doesn't have a passport to travel abroad. He approached the nearest passport office. They provided him information on the procedure and, documents required to apply for passport.

- *Download an e-form for passport*
- *Fill up the down loaded e-form*
- *Register through passport seva online portal and login*
- *Make the payment online*
- *Identification certificate, birth certificate or school certificate, etc.*
- *Address proof*
- *Education qualification certificate, etc.*

From the above illustration, you understand how to apply for a passport. The receptionist guided Rohit on how to apply for a passport. Do you think such type of services are required?

-

Can you list out certain other areas where we need guidance?

-

Education, career, health service, insurance, guidance regarding procedures to avail Adhaar, Electoral ID Card, PAN Card, etc. are some of such areas. From where do we get such information?

Parents, teachers, social workers, government officials, at times good friends, service providers and consultants guide us at different points in our life.

The term guidance derives its meaning from the word 'guide' which implies 'direct', 'point out', 'show the path', 'lead', etc. Guidance is the assistance or help rendered by an experienced person to the needy. Therefore guidance implies the act of providing necessary information regarding places, solutions, problems, subjects, situations or individuals. Giving information is one of the essential functions of guidance.

Guidance is a concept as well as a process. As a concept, guidance means the optimal development of the individual. As a process, guidance helps the individual in self understanding (understanding one's strength, limitations and other resources) and self direction (ability to solve problems, make choices and decisions of one's own). Guidance involves important techniques such as observation, testing, interviewing, record keeping, case study, encouragement, etc.

Guidance not only focuses on the problems of the individuals, but also on their strengths and abilities to solve their problems independently. In other words, guidance assists individuals to bring out their potentials, abilities and interests and thus enable them to solve their problems. As every individual is different, the guidance needed by different individuals will vary considerably.

"Guidance is an assistance given to the individual in making intelligent choices and adjustments"- A.J.Jones

"Guidance seeks to help individual become familiar with a wide range of information about himself, his abilities, and his previous development in the various areas of living and his plans or ambitions for the future."- Chisholm

Characteristics of Guidance

The following are the important characteristics of guidance.

- i. Guidance is a process.
- ii. It is concerned with problems and choices.
- iii. It assists individuals in the process of development.
- iv. It involves both generalized and specialized services.
- v. Guidance is meant for all.
- vi. Guidance is based on co-operation.

Need and Importance of Guidance

Present day life is becoming more complex with the advancement of science and technology pervading almost every sphere of lives. In order to adapt to modern life, we depend on others' advice and guidance to a large extent. Even in ancient times, when life was relatively simple, people turned on elders for advice whenever necessary. The need for guidance has always existed in human societies. Guidance can be imparted for:

- i. Self understanding
- ii. Optimum development of individual
- iii. Academic growth and development
- iv. Vocational choice and adjustment
- v. Social and personal adjustment
- vi. Better family life
- vii. Good citizenship
- viii. Proper utilization of resources
- ix. National development

Types of Guidance

Guidance services can be classified into different types such as educational, personal, marital, vocational, career related, etc. Let us discuss them in detail:

Educational Guidance

When you joined your school for Plus One what was your attitude towards the school, teachers, friends, etc. Did you have any problem in the beginning? Did you have any anxiety about the syllabus, examination, methods of instruction, etc?

-

Guidance is considered as an integral part of education. At each level of education, educational process becomes complex and gives rise to many confusions. This necessitates educational guidance. Educational guidance is related to every aspect of education- institution, the curriculum, the methods of instruction, co-curricular activities, discipline, parenting, etc. It helps the students to get maximum benefits from their education.

Objectives of educational guidance:

- i. To assist the students to understand their strengths, potentials and limitations.
- ii. To help students to discover, develop and improve their interests and abilities.
- iii. To help students to develop appropriate study habits.
- iv. To enable pupils to make educational plans consistent with their abilities, interests and goals.
- v. To help students to participate in co-curricular activities for developing their leadership and other social skills.
- vi. To assist students in the right choice of their course of study.
- vii. To help the child to adjust with the school, its rules, regulations, and social life connected with it.
- viii. To diagnose the learning difficulties of the students and help them to overcome the same.

Personal Guidance

Personal guidance is the guidance which is rendered to a person for solving his/her personal problems. There are occasions when one feels difficulties in satisfying one's personal needs. The individual faces problems in making adjustment to himself/herself, others and his/her peculiar environment. In this way, one needs personal assistance or help for satisfying one's personal needs for solving one's adjustment problems.

Personal guidance assists the individual to adjust with his/her psychological and social environment. It may be defined as the assistance offered to the individual to solve his/her emotional, social, ethical, and moral as well as health problems. In other words, a personal guidance refers to the help given to an individual towards better adjustment in the development of attitudes and behaviour in all areas of life.

Objectives of personal guidance

- i. To assist individual in understanding himself.
- ii. To assist individual in solving personal problems.
- iii. To help the individual in taking independent decisions and adjustments.
- iv. To enable the individual to know the world around him/her in the right perspective.

- v. To assist the individual in making sound adjustment to different life situations.

Marital Guidance

Marriage is an important event in the life of an individual. It has a number of dimensions and functions. Each society and culture has its own concept of marriage. People enter into marriage for companionship, affection, etc. But unfortunately, in certain cases, the couples get into adjustmental problems such as incompatibilities, lack of empathy and trust, communication gap, etc. This is mainly because individuals hail from different families, backgrounds and sub-cultures.

Marital guidance helps couples to recognize and resolve conflicts and improve their relationship. It can offer good insight into this problem and suggest ways for improving the functioning by providing information on marriage and married life.

Objectives of Marital Guidance

- i. To inculcate values of marriage.
- ii. To prepare for family life.
- iii. To promote positive communication- to hear and be heard.
- iv. To strengthen the family bond.
- v. To have better family adjustment.
- vi. To build or re-build the trust.
- vii. To avoid family break downs.
- viii. To learn how to resolve conflicts.
- ix. To increase the understanding of oneself, one's partner and patterns of interaction.
- x. To impart proper knowledge of sex and its role in family life.

Generally, marital guidance can be classified into two- pre-marital and post marital. Pre-marital guidance is the type of guidance that helps the individual to prepare for marriage. Realistic expectation about marriage can help the couple to identify weakness that could hinder smooth relationship.

Post marital guidance is given to the couple after marriage. Marital discord is common among many couples, if not addressed in time; it may end up in divorce. That is why post marital guidance is so important for the couples who have adjustmental problems.

Vocational Guidance

A vocation is an occupation to which a person is specially drawn or for which he or she is suited, trained or qualified. Vocational guidance is the assistance given to an individual in choosing and preparing for a suitable vocation. It is concerned primarily with helping individuals to make decision and choices on planning future and a career. An individual should choose a profession that suits his/her abilities so that s/he and his/her nation may profit. It is not possible for a person to do every job. Each job requires particular kinds of knowledge and skills.

Vocational choice is one of the most crucial decisions in an individual's life. Since all individuals are not equally endowed with potentials and capacities, choice of vocation assumes an added significance. Hence vocational guidance is needed while choosing a vocation.

The complex human personality, modern industrial complexities and multiplicities of educational streams and various vocations have made the vocational system itself complicated. So it has become almost necessary to seek the advice of a professional to understand the nature, selection and entry into a vocation.

Objectives of Vocational guidance

- i. To assist the individual to know more about various aspects of an occupation- its characteristics, functions, duties and responsibilities, rewards etc.
- ii. To assist the individual to discover the skills and abilities required for a particular profession.
- iii. To develop positive attitude towards work.
- iv. To assist the individual to think critically about the type of occupation.
- v. To help the individual to secure the necessary information about the facilities offered by various vocational institutions.
- vi. To convince the individual with the fact that what type of personnel is required for some particular vocations and what type of vocations suits an individual.



Check Your Progress

1. Define guidance.
2. Explain different types of guidance.



- Organize a seminar on the need and importance of guidance in different spheres of life.

Career Guidance

“I am totally confused ; I do not know what to do and where to go ; I am helpless ; my close friends have already joined for different professional courses’. My parents are not able to guide me and they have no money to spend for my education”. Said Riju

How can you help Riju to select a career?

-

A career is an individual’s vocation or trade, or how s/he makes a living.

Career guidance and vocational guidance are frequently used interchangeably. Career forms an integral part of one’s life. Our career gives us economic independence, identity, fame, status etc.

Career guidance is a process of assisting individual to choose a career, prepare for it, enter up on and progress in it. It is primarily concerned with helping individuals to make decision and choices involved in planning a future and build a career. It is an inclusive term that has been used to describe a range of intervention including career education and information.

Means of Career Guidance

- Career club and career corners
- Career conference and talks
- Interaction with successful personalities and experts
- Field visit to job avenues
- Career magazines, bulletins, and websites
- Career exhibition and quiz
- Career files, charts, and case studies
- Simulated interview

7.2 Career Planning

In the modern world, new careers are emerging which results in specialization of courses. It demands highly specialized training. New opportunities are coming up every day. If we make the correct career choices, we would be enthusiastic, highly motivated, successful and effective in the profession. The right choice of career becomes our biggest strength.

Career planning can be shown as a cycle having four steps:



Selection of a suitable career needs meticulous care, thought and proper planning. Career planning involves self assessment. Self assessment is necessary to understand one's capabilities and drawbacks. We must evaluate our interest, aptitude, ability, attitude, skill and values. This will help us to identify what we are expecting from a career as well as the attitude we are bringing into the world of work. Various career options have to be explored in detail to bring about cohesion between one's abilities and opportunities. It involves growth, improvement and continuous learning in the chosen career path. The following aspects are considered for planning a career.

- Interest
- Mental ability
- Aptitude
- Values
- Goals
- Priorities
- Physical features
- Family background
- Employment opportunities available
- Educational qualification required to get into the field
- Institutes that offer the course

- Eligibility criteria
- Course duration, fees and admission procedure
- Prestige of the course
- Economic and social gain
- Health and safety



Check Your Progress

1. What is meant by career guidance?
2. List out the steps in career planning.



1. Collect information on career options after plus two from various sources and prepare a power point presentation.
2. Invite a career expert to the campus and organize a career talk.

Aptitude Tests

Aptitude is thought of as a natural tendency, special ability or capacity or cluster of abilities. Often these natural abilities are looked at in relation to a person's readiness to learn or their suitability for a particular career eg: in order to be a successful architect, one must possess the cluster of abilities such as keen sense of aesthetic and visual memory, abstract reasoning and an ability to sketch free hand. So an aptitude may be defined as a trait that characterizes an individual's ability to perform in an area or to acquire the learning necessary for performance in a given area. Aptitude tests help in understanding an individual's capability and ability. The results of the aptitude test can be used to determine the suitable career of an individual. Aptitude test enables a social worker to help the client in choosing his/her field of study after a particular stage of education. So an aptitude test score is helpful in predicting the further course of performance of an individual.

An aptitude test, therefore, is one designed to measure a person's ability in any activity. Aptitude tests can be classified into Differential Aptitude Tests and Specific Aptitude Tests. Differential aptitude test measures an individual's performance with regard to his/her various potentials. Specific aptitude test measures an individual's performance with regard to a particular aspect or ability.

Aptitude test will help an individual:

- i. To know one's own potentials and abilities.
- ii. To decide the suitable course of study.
- iii. To seek admission to professional course.
- iv. To select jobs/profession.
- v. To select a hobby.



Differential Aptitude Tests

It is developed by Bennett, Osipow, and Wesman to measure the fundamental intellectual abilities. The purpose of DAT is to assess differential traits or abilities of an individual to explore his/her career possibilities. The DAT can help a social worker to guide the individual properly.

It is a battery of test which consists of seven tests

- i. Verbal reasoning
- ii. Numerical ability
- iii. Abstract reasoning
- iv. Space relations test
- v. Mechanical reasoning test
- vi. Clerical speed and accuracy test
- vii. Language- spelling and sentence test



Aptitude tests

- The Thurston's Test of Primary Mental Ability (PMA) developed by Science Research Association
- Differential Aptitude Test (DAT) developed by Test Division of Psychological Co-operation
- California Test of Mental Maturity (CMM)
- General Aptitude Test Battery (GATB) developed by United Development Service

If a person chooses his/her career without considering his/her aptitude, most probably he may switch his/her job frequently. Here comes the importance of popularizing aptitude tests. So we need to develop aptitude tests indigenously tailored to our conditions and suit our needs.

Competitive Examinations

Different competitive examinations are conducted for selection of candidates for job and for admission to various courses. So competitive examination can be job oriented and course oriented. There are so many job oriented competitive examinations. Today suitable personnel are selected for various jobs through competitive examinations. The Central and State Government and other public undertakings have their own agencies to select candidates for various jobs. eg: Union Public Service Commission and Staff Selection Commission at the Central level and State Public Service Commission at the State level. Likewise in other fields like defense, banking, insurance and certain established organizations have their own system to recruit employees.



Civil Service Examination

The Civil Service examination is a nationwide competitive examination in India conducted by the Union Public Service Commission for the recruitment to various Civil Service of the Govt. of India, including Indian Administrative Service (IAS) Indian Foreign Service (IFS), Indian Police Service (IPS), Indian Revenue Service (IRS), etc. The recruitment process go through different stages of examinations such as preliminary examination (Civil Service Aptitude Test), main examination and personality test (Interview). The educational eligibility for applying Civil Service Examination is University Degree. UPSC conducts the following important examinations also:

- a) Indian Forest Service Examination
- b) Engineering Service Examination
- c) Geologist Examination
- d) Special class Railway Apprentice Examination
- e) National Defense Academy and Navel Academy Examination
- f) Combined Defense Service Examination
- g) Indian Economic Service/Indian Statistical Service Examination
- h) Section Officers/Stenographers (Grade-B/Grade-1) Departmental competitive examination
- i) Central Police Force (Assistant Commandant) Examination.



Staff Selection Commission

This is the body that conducts examination to recruit class III and class IV employees in the Central Government. The examination

conducted by Staff Selection commission are:

- a) Combined Graduate level examination
- b) Combined Metric level examination
- c) Section Officer (Commercial)
- d) Section Officer (Audit)
- e) Junior Translator (CSOL)
- f) Junior Engineer (CPWD)
- g) Investigator (NSSO)
- h) Central Police Organization (SI) examination
- i) Tax Assistant (Income Tax and Central Excise Department) examination

IBPS Exam

Institute of Banking and Personnel Selection is a premier institute set up by banking industry to cater to its selection needs. IBPS is conducting written examination for the selection of officers and clerks in certain public sector banks. IBPS common written examination is now mandatory for anyone who seeks job in public sector banks across the country. The eligibility for appearing the IBPS is a university degree. IBPS syllabus consists of logical reasoning, quantitative aptitude, proficiency in English, general knowledge and computer proficiency.

Kerala Public Service Commission

Kerala Public Service Commission is an autonomous government body to recruit the most eligible candidates for civil service jobs in Kerala. The PSC publishes notification of vacancies, conduct written test, interview or both, practical test, physical efficiency test and prepare rank list for various jobs. It is prepared on the basis of performance of the candidates as the appointment is strictly on merit and reservation.

Job Opportunities in Railways

- Railway jobs are divided into 4 basic groups – Group A, Group B, Group C and Group D. Employees belonging to Group A and Group B are gazetted officers. The Railways selects its A and B officers through the UPSC exams.
- Recruitment of Group C- Officers are done through the Railway Recruitment Boards (RRBs).
- Recruitment for Group D -The Group D recruitment is done at the divisional level.



Course based Competitive Examinations

No	Abbreviation	Test	Eligibility	Admission For	Conducted By
1	CAT	Common Admission Test	Graduation	MBA in Indian Institute Management	Indian Institutes of Management
2	CMAT	Common Management Aptitude Test	Graduation	MBA	All India Council of Technical Education
3	XAT	Xavier Admission Test	Graduation	MBA	Xaviers Labour Research Institute
4	MAT	Management Aptitude Test	Graduation	MBA	All India Management Association
5	ATMA	AIMS Test for Management Admission	Graduation	MBA	Association of Indian Management Schools
6	SNAP	Symbiosis National Aptitude for postgraduation	Graduation	PG Programmes	Symbiosis International University
7	NMAT	Narsee Monjee Admission Test	Graduation	MBA	Narsee Monjee Institute of Management studies.
8	OPEN MAT	Management Aptitude Test	Graduation	MBA	IGNOU
9	HSSEE	Humanities and Social Science Entrance Exam	Higher Secondary	Integrated M.A.	IIT Chennai
10	DAT	Design Aptitude Test	Higher Secondary, Degree	Graduation & PG Diploma	National Institute of Design, Ahammadabad
11	NIFT Entrance	National Institute of Fashion Technology	Higher Secondary	Degree	National Institute of Fashion Designing

12	CLAT	Common Law Admission Test	Higher Secondary	Degree in Law (LLB)	National Law Universities in India.
13	NCHMCT JEE	National Council for Hotel Management and Catering Technology Joint Entrance Examination	Higher Secondary	BSC programme in Hotel Management	National Council for Hotel Management and Catering Technology-Noida-UP
14	AIST	All India Selection Test	Higher Secondary	Degree in Footwear Designing	Footwear Design and development Institute-Noida
15	JEE	Joint Entrance Examination	Higher Secondary	Degree in Engineering	JEE main-CBSE JEE advanced-IIT
16	KEAM	Kerala Engineering and Medical Examination	Higher Secondary	Degree in medical and Engineering	Commission of Entrance Examination-Kerala
17	AIPVT	All India Pre-Veterinary Test	Higher Secondary	Degree in Veterinary Science	Veterinary Council of India
18	AIEEA	All India Entrance Examination in Agriculture	Higher Secondary	Degree in Agriculture	Indian Council of Agriculture Research

Some other competitive examinations

Sl.No	Test	Abbreviations	Eligibility	Profession
1.	NET	National Eligibility Test	PG with 55% mark	Assistant Professor in college/universities
2.	SET	State Eligibility Test	PG with 50% mark and B Ed	Higher Secondary School Teacher in Kerala
3.	KTET	Kerala Teachers Eligibility Test	D Ed / B Ed	Teacher in LP/UP/ High School
4.	CTET	Central Teachers Eligibility Test	D Ed / B Ed	Teacher upto VIII th Standard

7.3 Counselling

Anil is a studious student. He got high grades in most of the examinations. The teachers always appreciated his success. The class teacher noticed that Anil did not have any kind of social contact with his class mates. He is often found alone. When the teacher enquired about this behaviour, he told him that he was homeless and financially backward. This situation kept him away from other students. The teacher referred him to school counsellor.



In the above story teacher cannot help Anil to establish social contact with others, because the teacher is not a trained person to help him in this regard. Only a trained counsellor can help him to make social contacts by establishing a therapeutic relationship. Let us understand the concept of counselling.

Counselling is a scientific process of assistance extended by an expert in an individual situation to a needy person. The word counselling is derived from the Latin word, 'consulo', means to advice, consult, etc. Counselling is a series of direct contacts with individual clients which aims to offer him/her assistance in changing his/her attitudes and behaviour. It consists of personal and dynamic relationship that exists between two individuals- a counsellor and counsellee in order to deal with a problem of the later with mutual consideration for each other. Counselling has remedial, preventive and developmental values. It believes that every human being has the potential for self growth, self development and self actualisation. It is concerned with bringing about a voluntary change in the client. Counselling has proven effectiveness in dealing with human concerns and strengthening capacities of individuals.

“Counselling is a purposeful reciprocal relationship between two people in which one, a trained person, help the other to change himself or his environment” – Shostorm and Brammer. (1952)

Counselling is “a structured permissive relationship which allows the client to gain an understanding himself to a degree which enables him to make positive steps in the light of his new orientation” - Carl Rogers

Characteristics of Counselling

The following are the characteristics of counselling

- i. Counselling is a two way process.
- ii. It involves two individuals.
- iii. Counselling is learning oriented.
- iv. It is a professional service.
- v. It is based on self guidance.
- vi. It is possible only in a cordial and co-operative environment.
- vii. It is a mutual relationship between the counsellor and the counsellee.

Types of Counselling

Based on the role of counsellor, counselling can be classified into three — directive, non directive and eclectic

a) Directive or Counsellor oriented counselling

In directive counselling, counsellor plays a major role. One should focus his attention more on the problem than on the individual. The main exponent of this school of thought was E.G. Williamson (1950). The entire attention is focused upon a particular problem and possible solutions are suggested. The counsellor has to advise the counsellee for its solutions. The counsellor through repeated explanations convinces the counsellee regarding the suitability of the suggested solutions. The counsellee's function is just to cooperate in the whole process. The directive counselling is also known as Prescriptive Counselling.

b) Non-Directive or Counsellee oriented Counselling

In non- directive counselling the focus is on the activities of the counsellee. Carl. R. Rogers (1951), was the exponent of this school. It is a client centered approach for solving personal problems of the individual. Non- directive counselling believes that counsellor's duty is only to create a suitable environment that helps the counsellee to understand himself which in turn helps him to develop an ability to face the real life situation. Here all attention is focused upon the individual rather than a problem. There is no forced direction from outside. It is also known as permissive counselling. The counsellee is permitted to express his feelings and to work out the solutions with the assistance of a counsellor.

c) Eclectic Counselling

F. C. Thorne was the chief exponent of this approach. The term 'eclectic' means accepting or choosing the best from the various sources. In this type of counselling process, counsellor studies the needs and personality of the counsellee. After this the counsellor selects the techniques which would be more useful and helpful for the counsellee. Eclectic counselling includes the useful elements of both directive counselling and non directive counselling.

Counselling Skills

Counsellors should have certain skill for intervention. The following are the essential skills required for counselling:

- a. **Listening skill:** It involves both eyes and ears. In order to develop a deeper insight on what the client feels, listening is essential. The counsellee may communicate his/her feelings indirectly and only a skilled listener can comprehend it.
- b. **Empathy:** It is the ability of a counsellor to feel and share the client's pain, emotions, etc.
- c. **Diagnostic skill:** The counsellor should be able to find the cause and effect relation between problems and underlying causes.
- d. **Communication skill:** Only with effective communication skill, a counsellor can elicit information and read nonverbal cues. Counsellor should encourage the client to open up and share even the difficult experiences.
- e. **Questioning skill:** Counsellor should have a skill to ask questions so that s/he can elicit adequate information on problem areas of the counsellee. The questions should be framed in such a way that the counsellee is encouraged to talk.
- f. **Observation skill:** It includes the observation of the postures and nonverbal behaviour of the counsellee which can better explain the condition of the client. Observations help the counsellor to understand and see beyond what the counsellee is explaining and understand the actual problem and the area to be addressed.
- g. **Understanding skill:** The counsellor should try to understand the counsellee at his/her emotional and thinking level. Counsellor can relate himself to the counsellee at both the levels.

- h. **Interpretation skill:** Through interpretations the counsellor evolves new meaning, reason or explanation for behaviour, thoughts or feelings. This helps the client to see the problem from a different angle.
- i. **Attending skill:** Through this the client should feel that the counsellor is attentive to what he says and that encourages him/her to talk. This is an important part of trust building and relationship.
- j. **Responding:** A counsellor should be able to respond to what the client says in a positive way. S/he should never be hostile, condemning, argumentative, ridiculing or challenging the client. Every effort should be made to make him feel relaxed so that he can open up.



Check Your Progress

1. Define counselling.
2. Briefly explain various types of counselling.
3. Prepare a chart showing the counselling skills.



- Conduct a visit to a counselling center and collect information on their service.

7.4 Introduction to Psychotherapies

Psychotherapy is a general term used to describe the process of treating psychological disorders and mental distress. It may be defined as the process which utilizes psychodynamic principles to bring about emotional growth, thus permitting greater development of the individual's capacities and better social adjustment. It is a method of treatment based on the development of therapeutic relationship between the client and the therapist to modify the client's behaviour in a satisfying direction. During the process a trained psychotherapist helps the client to tackle a specific or general problem such as a particular mental illness or a source of stress. Depending on the approach used by the therapist, a wide range of techniques and strategies can be used. During psychotherapy, the client himself identifies his/her moods, feelings, thoughts and behaviour and develops an insight on how to respond better to life's challenges. The basic objectives of psychotherapy are:

- i. To remove, modify or retard existing symptoms.
- ii. To address disturbed patterns of behaviour.
- iii. To promote positive personality development.

In general, psychotherapy aims to bring about mature personality, giving emphasis on competence and self actualization. There are many types of psychotherapies belonging to different schools of thoughts such as, Psychoanalytic, Behaviouristic, Humanistic, and Interpersonal. The psycho analytic school was developed by Freud aiming at uncovering repressed memories, motives, and conflicts presumably stemming from problems in early psycho-sexual development stages. The behaviouristic model believes that the maladjustment in the individual is due to faulty learning of coping patterns and failure of acquiring needed competencies. The humanistic school is based on the assumption that man has the freedom to have his/her own behaviour, and can reflect upon the problems, make choices and take positive action. Interpersonal school emphasizes the role of faulty communication, interaction, and relationship in maladaptive behaviour.

Let us familiarize with a few psychotherapies commonly used by professionals like clinical psychologists, social workers, counsellors, etc.

Cognitive Behaviour Therapy (CBT)

Cognitive Behaviour Therapy is an approach to understand and treat people who are experiencing a wide range of mental health difficulties. It is problem focused, goal directed, future oriented, time bound and empirical. Individuals with mental disorders and psychopathology have impaired cognitive abilities. This error in cognition affects their thoughts, feelings and action. CBT focuses on correcting these errors to create reality orientation for realizing the psychological difficulties of life. In psychopathology cognitive ability is impaired, and errors in cognition occurs. During the time of mental distress people think and act differently. Cognitive Behavioural Therapy is based on the following basic principles.

- i. Our cognition has a controlling influence on our emotions and behaviour.
- ii. How we act or behave can strongly affect our thoughts, patterns and emotions.

Client and therapist work together in CBT to identify and understand problems in terms of the relationship between thoughts, feelings and behaviour. The treatments are inherently empowering in nature, being focused on developing specific psychological and practical skills for day to day life.

Through CBT the client learns to identify, question and change the thoughts, attitudes, beliefs and assumptions, related to problematic emotional and behavioural reaction to certain situations. CBT helps to reduce these emotional problems by identifying distortion in thinking and analyzing the situation from different viewpoints.

For the effectiveness of CBT, client must be open and willing to discuss his thoughts, beliefs and behaviour and to participate in exercises during and after the therapy sessions. CBT is an effective treatment for many psychological conditions like mood disorder, such as depression and bipolar disorders, anxiety disorders, including specific phobias, obsessive compulsive disorder (OCD), substance abuse disorder, etc.

In social work practice, we regularly meet individuals whose lives are affected by low mood or by anxiety. We are concerned with the assessment process to make sense of what factors might be contributing to an individual's difficulties. We must take into account of the social, economic, political and relationship factors as well as individual patterns of thinking and behaviour. Social workers use cognitive behavioural therapy for assessment and identification of the problems of the clients.

Motivational Enhancement Therapy (MET)

Motivational Enhancement Therapy is a systematic intervention approach for bringing change in the client using motivation techniques. This method employs motivational strategies to mobilize the client's own potential and possibilities for change instead of attempting to guide or train them. Motivational Enhancement Therapy was developed by William Millar and Stephen Rollnick.

Motivational Enhancement Therapy (MET) employs a variation of motivational interviewing (MI) sessions. Motivational interviewing focuses on re-patterning client behaviour which is the result of vague thoughts. This helps the client in clarifying his own perceptions and beliefs in order to direct him/her in a more decisive way. It also helps the client to recognize a problem behaviour and enhance motivation for beneficial change at each stage of the change process. This form of therapy is presented in a direct and client targeted manner that strives to transform undesired behaviour. This therapy aids the client to gain self control and speed up the healing process. This therapy is commonly used for treatment of addictions, including abuse of alcohol and other substances.

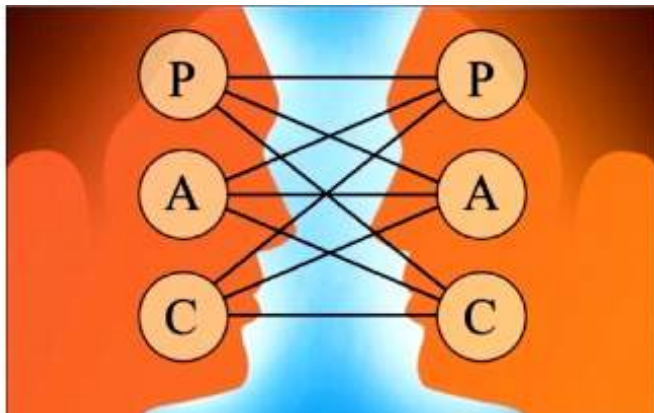
In short, MET seeks to evoke from the clients their own motivation for the change and for the consolidation of his/her personal decisions and plans for change. This approach is largely client centered, although planned and directed.

There are certain other therapeutic approaches too, developed parallel to the conventional psychological models. The common among them are transactional analysis (TA) and neuro-linguistic programming (NLP).

Transactional Analysis (TA)



Eric Berne



Transactional Analysis is a strategy proposed by Dr. Eric Berne, an American Psychiatrist. Transactional Analysis helps us to study the personality and behaviour patterns of individuals. For this Dr. Berne suggests to analyze the interaction and communication patterns of individuals. For him transaction is a stimulus plus response. He observed that people assume three distinct ego states while communicating. They are parent, adult and child ego states.

He speaks about strokes and games that take place in communication. A stroke is the attention and corresponding stimulation that happen in transactions. It can be positive or negative.

A boy greeted by his uncle for good scores in class test receives positive stroke. A child while crying if ignored by the mother receives negative stroke. Games are transactions with ulterior intentions.

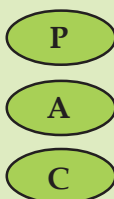
He proposed that in childhood modeling, attributions, comments and judgment of others affect lasting impressions on self image of individuals. He termed this process as scripting (life script). He also proposed the concept of life positions. It is the assumption and judgment of oneself and others based on worthiness and 'okeyness'.



More about T A

Transactional Analysis provides an explanation of personality development, patterns of communication and relationship. It was developed by Eric Berne (1910-1970) an American Psychiatrist.

According to Transactional Analysis, a transaction is a stimulus plus response. For Eric Berne, ego is the sum total of a person's feeling, thinking and behaving at a given time. We all have three ego states called Parental Ego, Adult Ego, and Child Ego. Transactional analysis is simply concerned with diagnosing which ego state is prominent in an individual in a particular interaction. TA is to provide better understanding of how people relate to one another, so that they may develop improved communication in human relations. The application of ego state model to analyse sequence of transaction is called transactional analysis.



P = Parental ego A = Adult ego C = Child ego

Different Concepts in TA

i. Strokes

Eric Berne observed that people need strokes i.e. strokes of recognition, attention or responsiveness that one person gives another. Strokes can be positive or negative. A positive stroke is one which the receiver experiences pleasantly. A negative stroke is one which is painful. Transactions can be experienced either as positive or negative depending on the nature of the strokes.

ii. Game Play

In transactional analysis a game means a series of complementary ulterior (secret) transactions progressing to a well defined, predictable outcome. In order to attract desired positive strokes, people may resort to negative comments or statements. For example a person may say I am not an attractive person, nobody looks at me, by expecting a reply as 'oh! No, you are charming!' If the person receives the response according to his expectation it makes him happy.

iii. Life Script Analysis

Script is the self image we make for ourselves from our childhood experiences. Script message comes from modeling, attributions, suggestions, etc. Changing the life script is the aim of transactional analysis.

iv. Life position

In the process of growing up, people make basic assumption and judgment about themselves and others around them. Life positions tend to be more permanent than ego state. These assumptions are described in terms of 'okayness'. Thus an individual assumes that he is either 'ok' or 'not ok' and he also assumes that other individuals are also either 'ok' or 'not ok'.

The box representation of life position portrays for distinct states.

- I am not ok; you are not ok (neither person has value).
- I am not ok; you are ok (you have value, but I don't have value).
- I am ok, you are not ok (I have value; but you don't have value).
- I am ok, you are ok (we both have value)

Achieving autonomy is the ultimate goal in transactional analysis. Being

		You are okay with me	
I am not okay with me	I am not OK You are OK	I am OK You are OK	I am okay with me
	I am not OK You are not OK	I am OK You are not OK	
		You are not okay with me	

autonomous means being self governing, determining one's own destiny, taking responsibility for one's own actions and feelings and throwing of patterns inappropriate to living.

The underlying philosophical assumption of transactional analysis is that people can change destructive and unhelpful feelings, attitudes and behaviour in favour of autonomy.

Neuro Linguistic Programming (NLP)

NLP is an approach to psycho therapy and personal development proposed by Richard Bandler and John Grinder in 1970. They claimed that there is a connection among the neurological process (Neuro) languages (Linguistic) and behavioural patterns learned through experience (Programming). NLP believes

that through consciously programming the mind one can achieve the desirable level of performance and goals in life. It claims that unconscious mind is the treasure house with answers to any challenge one confronts in life but one should programme his mind consciously to unleash this power. Intrapersonal communication (language) is the means to programme the mind for better results. This basic assumption of NLP is used to aid individuals to achieve better results in competition, business, interpersonal relations, etc. NLP is also used for behaviour modification, stress management and psychological problem solving. NLP makes use of different strategies and techniques such as disassociation, content reframe, self anchoring, modeling, belief change, etc. to get better results and realize more positive experiences.

Summary

Guidance assists individuals to bring out his/her potentials, abilities and interest and enable them to solve problems. It is essential to equip the person to relate better to his/her social requirements. The need for guidance always existed in our society. There are different types of guidance – educational, personal, marital, vocational, career, etc.

Educational guidance is related to every aspect of education. Personal guidance assists the individual to adjust with his psychological and social environment. Marital guidance can be classified into two-premarital and post marital. Premarital guidance helps the individual to prepare for marriage. Post marital guidance helps the couple to recognize and resolve conflicts and improve their relationship. Vocational guidance is the assistance given to a client in choosing and preparing for a suitable vocation. Career guidance is a process of assisting individuals to choose a career path, to prepare for it, enter upon and progress in it. There are different means of career guidance.

Helping the individual to plan his/her career is an integral part of career guidance. Aptitude tests help in understanding an individual's capacity and ability. The score in the aptitude test can be used to assess the suitability of career course for an individual. Different competitive examinations are conducted for the selection of candidates for jobs as well as admission to various courses. So it can be classified as job oriented and course oriented.

Counselling is a scientific process of assistance extended by an expert in an individual situation to a needy person. It is a professional task by professionally

trained people. There are three types of counselling: Directive, Non-directive and Eclectic. Counsellor should have certain effective skills like listening, diagnosing, communication, observation, etc.

The term psychotherapy is used to describe the process of treating psychological disorders and mental illness. There are many psycho therapies like cognitive behaviour therapy, motivational enhancement therapy, etc.

Evaluation Questions

1. Define guidance in your own words with its characteristics.
2. List out the relevance of guidance in the present day world.
3. Write the importance of educational guidance.
4. 'Personal guidance assists the individual to adjust with his psychological and social environment'. Substantiate the statement.
5. Elicit the objectives of vocational guidance.
6. Enlist the means of career guidance.
7. Describe the importance of aptitude test in guidance.
8. Prepare a note on characteristics and types of guidance.
9. List and describe the skills necessary for effective counselling.
10. Differentiate the concept psycho therapy and counselling.
11. List out various therapeutic approaches.
12. Transactional Analysis was developed by
 - a). Erik Berne
 - b). Sigmund Freud
 - c). Erikson
 - d). Roger
13. The term 'modeling' is associated with
 - a). Cognitive Behaviour Therapy
 - b). Transactional Analysis
 - c). Neuro Linguistic Programming
 - d). Motivational Enhancement Therapy

Family Life Education

Significant Learning Outcomes

After the completion of this chapter, the learner:

- Analyses the need and objectives of family life education, concept of family life cycle, responsible parenthood.
- Describes the need and objectives of sex education.
- Recognizes various sexual developmental stages and identify the physical, mental and social changes during adolescence.
- Identifies sexually transmitted diseases and sex deviations.
- Appraises the concept and components of reproductive and sexual health.
- Examines gender equity and equality, gender discriminations and related issues.

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Genital warts
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8.8 Gender equity and equality

Imagine life without family! Most of us are part of a family. Some others have no family. You have already learnt about family.

Family is the basic unit of a society. Human society cannot survive without family. The family has different roles and functions in the day to day life of an individual. The primitive society also largely depended on its family for routine life. At present, lots of changes are taking place in the structure and functions of the family. Many problems of the modern society are rooted in the deranged family life. The various functions of the family are needed to be strengthened in the contemporary world for creating a harmonious society. For that, various initiatives and measures are taking place all over the world. Family life education is an example of such family empowerment initiative.



8.1 Family Life Education

Can you identify some functions of a family? What are the effects of a broken family?

- Socialization
- Protection /Security
-

- Suicide
- Alcoholism
- Divorce
-

There are such serious elements that are to be discussed and studied about family. Today, it is essential to educate and assist people to understand various aspects of family life which help them to lead a productive life and to prevent the occurrence of family issues and mental health problems.

Look at the following symbols.



What do they represent?

●

These pictures symbolize marriage.

While discussing marriage, the following questions are usually raised: Why do people marry? How do people select their partners? What is the common age for marriage of a man and a woman?

What are the qualities that you expect from your life partner?

●

Education, health and personal qualities like intelligence, caring, understanding, responsibility, mutual respect, etc. are the essential factors. There are different factors like social, economic, cultural, etc. that influence the selection of a partner for marriage.

Marriage is considered as a permanent relationship, therefore, appropriate educational programmes are needed to prepare young people for marriage. Marriages are usually classified as follows: Arranged marriage, marriage by free choice of the partners or love marriage. In India, the minimum age for marriage is 21 for boys and 18 for girls.

Is it not good that the people are educated before they enter into a marriage relationship? What are the areas where the partners need to be educated?

●

Family Life Education is the educational effort to strengthen individual and family life. Parenting classes, pre-marriage education, sex education, family financial planning, child-rearing, sexual and reproductive health programmes, family planning, value education, life skill education, and family resource management are the major areas of family life education programme. These formal programmes are relatively recent. However, family life education has existed informally throughout history.

Family Life Education (FLE) is indispensable for healthy and happy family life. It prepares individual and families for taking the roles and responsibilities of family life within the existing socio cultural and economic context of the society.

Family Life Education is “An educational programme geared to enrich family life and help the individual better understand himself in relation to others.” (Levin,1975)

Family life education is a comprehensive and flexible field. Anything which contributes to the knowledge and capacities, total growth and well-being of the family-physical, mental, emotional, economic and spiritual - can be included under the umbrella of family life education. Its objectives are to promote the freedom to choose parenthood and the enrichment of human life along with members of the family.

Family life education is considered as a value related concept. Most of the values related to family life education are deeply rooted in the socio-cultural context of the community.

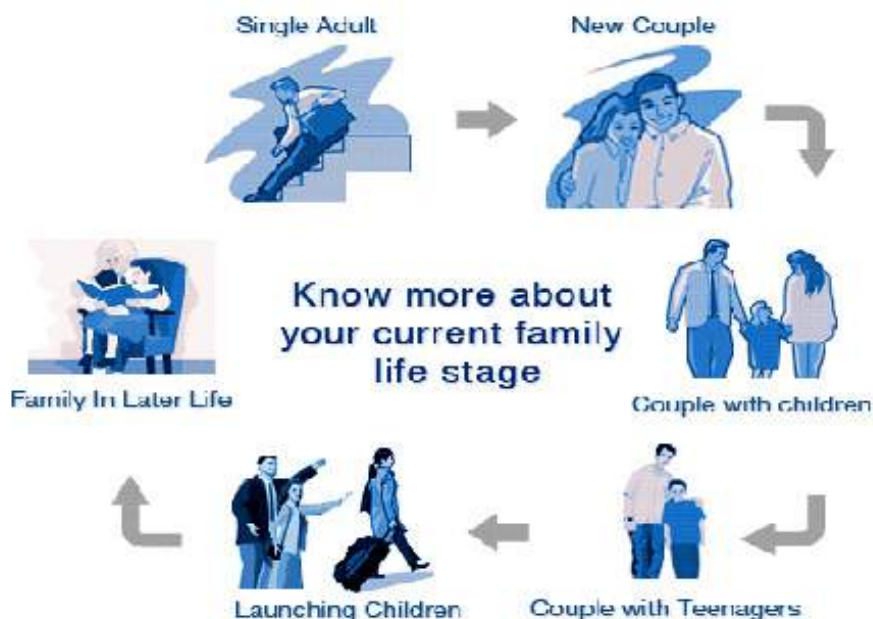
Objectives of Family Life Education

- i. To prepare the individuals for family life.
- ii. To understand the importance of marriage.
- iii. To enrich and improve the quality of individual and family life.
- iv. To impart the knowledge about the role and functions of family.
- v. To provide sex education.
- vi. To prepare them for responsible parenthood.
- vii. To help them to manage family resources.

It is the responsibility of all members of a family to fulfill family functions. Failure on the part of the parents to perform such duties may lead to social problems for future generations. The needs of each and every member of the family must be met. All members of the family including the children have certain roles and functions to perform. The parents may have rational expectations about their children. The children as they grow learn to control their irrational demands. A well functioning family shares the household chores and responsibilities among all members.

stages of Family Life Cycle

Look at the picture and identify different stages of family life cycle.



The family life cycle provides a basis for the study of the composition, growth and development of families. Each stage has certain developmental tasks to be fulfilled; but the failure in any of these tasks creates problems in the succeeding stages. There are basically eight stages in the family life cycle. The duration of the life cycle stages is decided by the age of the first child. The eight stages in the family life cycle are:

Stage 1. Bearing families (Starting of a Family)

At this stage, a couple learns to adjust with their ideas, values and culture. With the marriage, the partners learn to live together harmoniously and establish meaningful relationship.



Stage 2. Childbearing families (with the First Child)



The couples enter this stage at the time of first conception. With the birth of the first child, privacy of the couple, family budget and the use of leisure time will undergo changes. Proper child care is very important at this stage. Attention is diverted or shared between the newcomer and the partner.

Stage 3. Families with pre-school children

At this stage, parents should cater to the critical needs and interests of the pre-school children to stimulate their growth and development. Husband and wife share their responsibility of child rearing, socialization, education, etc.



Stage 4. Families with school children



Families with school going children have to pay attention to the child's educational and developmental needs. The parents are also expected to collaborate with the demands and expectations of the school by helping the child in his/her studies.

Stage 5. Families with adolescents

Adolescents have special issues that demand the help of parents. This stage is very crucial for the parents and their children. As the teenagers approach adulthood, parents must help them to have a balance between freedom and responsibility. The parents may help their children to plan and execute the programmes which will be beneficial for them in future.



Stage 6. Families as launching centres (Children at Working stage/higher education period)

When young people go for work or study, their parents feel loneliness-‘the empty nest syndrome’. There should be regular interaction between the parents and adult children whenever they are away from their families.

Stage 7. Families in the middle years

In this phase, the parents are united after their retirement/settling of their children. They also need to develop hobbies for entertainment. This is a trying time for a couple who have to adjust to a life together again.

Stage 8. Families in the late years

In this stage the elders require to adjust with a new situation. The grown-up children have their own families and children. Yet it is appropriate that the parents need support emotional, physical and economic from the grown-up children, even if they have their own family.



Responsible parenthood

Parents are the role models of the children. How can a parent be a role model?

-

If a parent is responsible in his/her duties, s/he can become a role model.

Social, economic and cultural changes are affecting family life including parenthood. Parenthood brings responsibilities which go on expanding over the years.



A responsible parent is able to:

- Plan the number of children, based on their ability to support and rear them to maturity or till they are self-supporting.
- Act as a role model for their children
- Provide their children with guidance and direction to develop the right values
- Help in achieving an orderly society; bring up the family members with their rights and duties.
- Ensure the individuality of each member of the family and provide freedom of thought and behaviour.
- Treat children with worth and dignity so that they should never feel humiliated or insulted.
- Facilitate good family communication and interpersonal relationships.
- Manage family resources effectively.



Check Your Progress

1. List out the objectives of family life education.
2. Identify any three consequences of broken family
3. List out various areas of Family Life Education
4. Identify and list out the purposes of responsible parenthood



- Conduct a comparative study between a well functioning family with a broken family and prepare a report.
- Conduct a field visit to an institution where family life education is arranged. Prepare a detailed report of the activities going on there.
- Conduct a study on the 'Parenting issues' through collecting various news items from news papers/periodicals and present it in the class room.

8.2 Sex Education

Let us look at the following pictures:



What do these pictures represent?

-

Give suggestions to check this kind of molestations and related issues?

- Awareness
- Legislations
- Sex education
-

In sex education, we analyse sex, sexuality, etc.

What is sex? To know more about sex, let us examine a hibiscus flower .What are the main parts of a flower?

.....

Sepals, petals, ovary, gametes etc. are the main parts. Among these parts ovary and gametes are the reproductive part.



Similarly, we can see different sexual/ reproductive parts in all higher level animals and plants

Sex is the sum of all features by which the members of a species are divided into male and female. Sex has a significant role in one's life. Sex has biological and psychological significance. Survival of life is possible through reproduction by means of asexual and sexual methods. Lower forms of plants and animals like amoeba, paramecium, etc. reproduce asexually. Higher forms of animals including human beings reproduce sexually.

Among human beings, besides physical involvement, sex is an expression of feelings, thoughts, and emotions. We must have mature understanding about sex. One does not need to shudder or feel embarrassed when the topic is being discussed. It is a wrong notion that there is something inherently impure in sex.

Sexuality is how a person feels about his/her body and the way that the person acts according to his or her perception. Everyone has sexuality.

Gender describes whether an individual is masculine or feminine according to behavioural differences in dress code, the nature of work and his or her functions in the society. These characteristics are defined by each culture so they can be different in different cultures. One's gender identity refers to whether one feels male, female or transgender (regardless of one's biological sex).

What is sex education?

-

Sex education is a broad term used to describe the area of education which deals with human sexual anatomy, sexual reproduction, sexual relations, reproductive health, emotional relations, reproductive rights and responsibilities, abstinence, birth control and other aspects of human sexual behaviour. Sex education can be imparted through parents, doctors, social workers, teachers, school health programmes and public health campaigns.

Objectives of sex education

- To impart scientific knowledge about sex.
- To develop mutually respecting relationship among opposite sex.
- To develop a positive, proper and healthy attitude towards sex.
- To provide knowledge about physical, psychological and social changes during various sexual developmental stages.
- To promote human values and cultural morality based on sex.
- To remove irrational anxieties and curiosities related to sex.
- To prepare an individual for future responsible parenthood.
- To impart values of sexual purity and chastity throughout life.
- To develop interest in family life in future.
- To promote the importance of monogamous sex relationship.
- To control sex deviations and sexually transmitted diseases.

8.3 Sexual Developmental stages-Puberty, Adolescence

Human development is a lifelong process of physical, behavioural, cognitive, emotional growth and changes. In the early stages of life—from babyhood to childhood, childhood to adolescence, and adolescence to adulthood—enormous changes will take place in human beings. Sexuality is also a lifelong process. Infants, children, teens, and adults are sexual beings. Just as it is important to enhance a child's physical, emotional, and cognitive growth, it is also important to lay foundations for a child's sexual growth.

Each stage of development encompasses specific markers. However, each child is an individual and may reach these stages of development earlier or later than other children in the same age. When concerns arise about a specific child's development, parents or other care givers should consult a doctor or other child development professional.

In which developmental stage of life span you belong to?

●

You belong to adolescent stage. Adolescence starts with the onset of puberty.

Developmental psychologists consider it as a period between 12 to 18 years and the period extending from puberty to the attainment of full reproductive maturity. According to WHO adolescent period is from 10 to 19. Persons belonging to this stage are usually called adolescents or 'teenagers'

Adolescence may be defined as the period of physical, psychological and social maturation from childhood to adulthood. The word Adolescence originated from the Latin word 'Adolescere' which means "to grow up"

Adolescence is a transitional stage of physical and psychological development that generally occurs during the period from puberty to the age of maturity or adulthood. Puberty is a unique and distinctive period which is characterized by certain developmental changes that lead to sexual maturity and a child's body becomes an adult body capable of reproduction. Onset of puberty varies from person to person. Puberty means the first external sign of sexual maturation, first menstruation (menarche) in females and the first seminal emission (spermarche) in males. Puberty is initiated by hormone signals from the brain to the gonads (the ovaries and testes).

Puberty changes occur due to the effect of sex hormones which are known as progesterone and estrogen in females and testosterone (androgen) in males. These hormonal changes result in the development of secondary sexual characteristics among male and female children.

Physical, Mental and social Changes during Adolescent Period

You are now passing through the stage of adolescence. List out some changes during this period?

Girl	Boy
• Breast development • Growth of the bony pelvis. • Growth spurt-Increases height and weight • Menarche • Pubic hair. • Underarm hair and coarse body hair. • Acne-Growth of oil and sweat glands. • Growth of uterus and vagina.	• Growth of the testes & scrotum. • Pubic hair • Growth of facial hair • Growth spurt- Increases height and weight. • Voice change • Appearance of underarm and coarser body hair. • Acne- growth of the oil and sweat glands.

Psycho-social changes

The physical changes are accompanied by marked psycho-social changes. Though bodily changes occur rapidly, psycho social development takes time to stabilize. Adolescent period is characterized by the following psycho social changes

- i. Identity crisis-Search for identity, concern about body image, role, future, etc.
- ii. Dependence vs Independence syndrome.
- iii. Sexual curiosity.
- iv. Attractions towards opposite sex-Infatuations and love.
- v. Distancing from family and formation of new relationships.
- vi. Peer pressure and its influences.
- vii. Adventurous behaviour-Taking risky behaviour.
- viii. Experimentations.
- ix. Tendencies to imitate.
- x. Rebelliousness.
- xi. Age of creativity.



Check Your Progress

1. Make a comparison between sex, sexuality and Gender.
2. According to WHO, the adolescent period is from to years.
3. First menstruation in female is known as.....
5. Find out the changes that are both common to boy and girl during adolescent period.
6. List out any five psycho social changes during adolescent period.

8.4 Sexual Reproduction

What is sexual reproduction? How asexual reproduction is different from sexual reproduction?

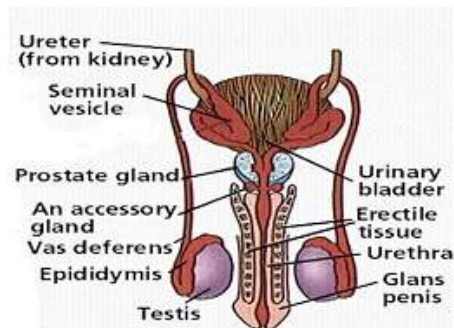
Most species have two sexes: male and female. Each sex has its own unique reproductive system. Both the male and female reproductive systems are essential for sexual reproduction. They are different in shape and structure, but both are specifically designed to produce, nourish and transport either the egg or sperm.

Male Reproductive System

Look at the following diagram and identify the male reproductive parts

The male genitals include:

- the testicles
- the duct system, which is made up of the epididymis and the vas deferens
- the accessory glands, which include the seminal vesicles and prostate gland
- the penis



Female Reproductive System

Observe the following diagram and identify the female reproductive parts.

A female's reproductive organs include:



- vagina,
- uterus,
- fallopian tubes,
- ovaries.

The vagina is connected with the uterus or womb at the cervix (which means neck). The cervix has strong, thick walls. The opening of the cervix is very small. During childbirth, the cervix can expand to allow a baby to pass.

Primary sex organs are also known as gonads. In females the gonads are the ovaries and in males, it is testis. In the human reproductive process, two kinds of sex cells or gametes are involved. The female gonads produce female gametes known as ovum or eggs, the male gonads produce male gametes known as sperm. Sexual reproduction involves fertilization. The union of sperm and ovum is known as fertilization. When the sperm fertilizes egg or ovum, this fertilized egg is called the zygote. The zygote grows to an embryo and develops into a foetus.

How is the sex of a child is determined?

-

Sex of the child is determined by a pair of sex chromosomes. The chromosomal number of human is 46. A pair of these acts as sex chromosomes which determine the sex of the offspring. Female sex cells-ovum or egg supplies only X chromosomes where as male sex cells-sperm supplies either X or Y chromosomes which determine the sex of the new born baby. This is known as primary sex determination.

During the onset of puberty, the ovary begins to release ovum or egg regularly once in a month. This is called ovulation. During ovulation, an ovary sends a tiny ovum or egg into one of the fallopian tubes. Usually, by the time of ovulation the uterus gets prepared to receive the fertilized ovum. The inner lining of the uterine wall (endometrium) has a mucous membrane and it becomes thick, spongy, and rich with blood vessels during ovulation. If the egg is not fertilized by a sperm, the mucus membrane in the uterus sheds along with blood vessels and tissues. This is called menstruation. Blood and tissues from the inner lining of the uterus combine to form the menstrual flow, which in most girls lasts from 3 to 5 days. A girl's first menstruation is called menarche. It can take up to

2 years from menarche for a girl's body to develop a regular menstrual cycle. During that time, the body gets adjusted with the hormonal changes. On an average, the monthly cycle for an adult woman is 28 days.

It is common for women and girls to experience some discomfort during the preceding days of menstruation. This includes both physical and emotional symptoms such as acne, fatigue, back aches, headaches, irritability, poor concentration, stress etc. This is known as Premenstrual syndrome (PMS) which usually disappears once menstruation begins.

After the fertilization, the egg is called the zygote. The zygote multiplies to become embryo. The embryo burrows itself into the lining of the uterus, called the endometrium. The hormone estrogen and progesterone causes the endometrium to become thick and rich with blood so that the embryo can absorb nutrients from it. The foetus floats in amniotic fluid inside the uterus. The foetus receives oxygen and nourishment from the mother's blood via the placenta which connects the foetus through the umbilical cord.

Pregnancy lasts on an average of 280 days - about 9 month and 10 days. When the baby is ready for birth, its head presses on the cervix, which begins to relax and widen to get ready for the baby to pass through the vagina.

The baby's head usually comes first; the umbilical cord comes out with the baby and is cut after the baby is delivered. The child will cry (birth cry) just after the delivery for taking oxygen and it is very much essential to adjust with new environment. The new born normally weigh between 2.5 kg to 3 kg.



Check Your Progress

1. The union of male and female gamete is known as.....
2. If the sperm with Y chromosome fused with an ovum, the sex of the baby will be.....

8.5 Sexually Transmitted Diseases (STD)/ Sexually transmitted Infections (STI)

Sexually transmitted diseases are those infectious diseases that are acquired through sex relations. These diseases affect sexual organs and can seriously affect

the entire health of the individual. Sexually transmitted diseases are also known as venereal diseases. Most STDs are easy to treat; if they are detected and treated early, they do not cause serious problems. Some of these may be additionally transmitted through other routes like from mother to child (HIV, Syphilis) or from infected blood (HIV, Hepatitis B).

The following are some common STDs.

Gonorrhea

Symptoms: symptoms occur 3-5 days after infection. In men, it causes a yellow/green discharge and pain on urination. Women have a vaginal discharge.

Syphilis

Small painless ulcer on the genitals that disappears gradually. A red rash may occur over the body. The last stage of syphilis may lead to insanity, paralysis and death.

Chlamydia

The symptoms include a discharge or burning sensation when urinating.

Chancroid

The infections cause small, usually painful ulcers on or around the genital organs.

Genital warts

Painful and frequently infected sores on the genitals.

HIV/AIDS

AIDS is a pandemic disease affecting the whole world. It is affecting large sections of the society, especially youth. Young people are more vulnerable to HIV/AIDS. Their access to information, services and support regarding HIV/AIDS, awareness about their sexual and reproductive rights are alarmingly low. Furthermore, the socio economic circumstances like urban migration, drop outs from school, early marriage, early pregnancy and individual's social status in context of gender, caste or class put young people especially young women at the increased risks to HIV and other STI's.



AIDS stands for:

Acquired - not genetically inherited but one gets it from some body.

Immuno Deficiency - weakness or inadequacy of the body's main defense mechanism, the immune system.

Syndrome - not one disease or symptom but being present in the body as a group of diseases or symptoms.

AIDS is caused by HIV, which stands for Human Immunodeficiency Virus.

Human immunodeficiency virus is a comparatively new virus and is supposed to have developed from mutation either from the virus that affected the African green monkey or from a virus that has been altered by environmental chemical pollutions, or synthesized by mistake as a result of experiments in some advanced country.

Transmission of HIV

HIV is transmitted through infected blood, semen, and vaginal fluid. The common transmission modes are:

1. Through unsafe sexual relations- sex relations with a person who is HIV positive. This is the most common route of HIV transmission
2. Through infected blood-Transmission of infected blood from one person to another. HIV can enter the body when contaminated blood or blood products that contain HIV is given to a person through blood transfusion. Through the use of non sterilized infected needles and syringes.
3. Infected mother to child (Perinatal) during pregnancy or birth.

Symptoms of AIDS

- Uncontrolled diarrhea and fever.
- Unexplained weight loss.
- General weakness.
- Enlarged lymph nodes.
- Skin infections.
- Opportunistic infections.





Progress of HIV in the body

HIV Infection	:	Enter the virus
Window Period	:	6 Weeks - 6 month Appearance of antibody
HIV Silent Infection	:	No symptoms 5 - 10yrs or more
AIDS	:	Uncontrollable diarrhoea and fever, general weakness, enlarged lymph nodes, skin infections, opportunistic infections

HIV does not spread through:

- Bites by insects, mosquitos, bed bugs, etc.
- Kissing, hugging, other close physical contact
- Sharing food, clothes, furniture, toilets
- Sneezing, coughing, vomiting
- Urine, stools
- Shaking hands
- Swimming together or playing together
- Sharing work instruments or machinery



Diagnosis of HIV infection

- ELISA tests are very sensitive and so will detect very small amounts of HIV antibody. All positive test results are followed up with a confirmatory test, such as:
- Western blot assay – One of the oldest but most accurate confirmatory antibody tests.
- Antigen test (P24 test)
- PCR test (Polymerase Chain Reaction test)

Prevention of AIDS

- A** - Avoid sex before marriage or Abstinence from sex till marriage
- B** - Be faithful with partner
- C** - Condom use
- D** - Avoid Drug use
- E** - Education on AIDS

8.6 Sex Deviations

Analyze the following news clippings and find out what these clippings speak about?

Have you noticed similar news related with deviant sexual atrocities in paper/TV?



Abnormal sexual behaviours are known as sex deviations. These are also known as psycho-sexual disorders. Those sexual acts which are not in conformity with norms set by the society and culture are deviations. These people are to be treated and corrected.

Let us discuss some of them:

- a. Transvestism: Sexual deviation in which sexual gratification is derived from dressing the clothes of the opposite sex.
- b. Transsexualism: sexual behaviour is directed towards either changing the sexual organs by operation or completely concealing the bodily sex by adopting both the dress and behaviour of the opposite sex.
- c. Exhibitionism: Sexual deviation in which sexual gratification is derived from exposure of the body parts.
- d. Fetishism: People with this disorder achieve sexual satisfaction from non-human objects, most often clothing, shoes, stockings, lipsticks etc.
- e. Pedophilia: Sexual deviations in which an adult engages in sexual activity with a child of the same or opposite sex.
- f. Incest: It is sexual relationship between two people who are closely related by blood or family ties.
- g. Frotteurism: People with this disorder often rub his genital organs to others. This behaviour is often carried out in busy, crowded place like bus or trains.
- h. Sexual sadism: An individual receiving gratification by physically hurting others during the sexual act.
- i. Sexual masochism: It refers to the experience of receiving sexual gratification from suffering pain.
- j. Voyeurism: in which a person finds sexual gratification by watching or peeping others naked, undressing, or having sex. This disorders usually occur in males.
- k. Homosexuality: The sexual attraction for persons of the same sex. eg: Gayism, Lesbianism.

8.7 Reproductive and Sexual Health

Sexual potential and reproduction are vital for the sustenance of any species. Human race and society depend on the reproductive health. Does this phase appear equally joyful and safe to the couples all over the world?



•

The vision of WHO is the attainment by all people of the highest possible level of sexual and reproductive health. It strives for a world where rights to enjoy sexual and reproductive health of all are promoted and protected. All women and men, including adolescents and those who are underserved or marginalized should have access to sexual and reproductive health information and services.

Reproductive health is defined by WHO as a state of physical, mental and social well-being in all matters relating to the reproductive system at all stages of life. It implies that people are able to have a satisfying and safe sex life.

The five components of WHO's Global reproductive health strategy are:

- Improving antenatal, perinatal, postpartum and newborn care
- providing high-quality services for family planning, including infertility services
- Eliminating unsafe abortion
- Combating sexually transmitted infections, including HIV, reproductive tract infections, cervical cancer and other sexual and reproductive health morbidities
- Promoting sexual health.

Family Planning

Have you noticed the recent demographic report on world population? As per the report, India will cross China's population by 2050 and will be the most populated country by then.

Why does it happen?

•



The population of India grows on faster rate.

Examine the given symbol.

What does the symbol represent?

●

It represents family planning. Is family planning necessary in our society?

Family planning allows people to attain their desired number of children and determine the spacing of pregnancies. It is achieved through the use of contraceptive methods and the treatment of infertility. It has a direct impact on the health and well-being of the child and mother.

Family planning is the planning of child birth, and the use of birth control measures if required. Family planning services include educational, medical or social activities which enable individuals to determine independently the number and spacing of their children and to select the means by which this may be achieved.

Benefits of family planning

- Spacing between children
- Reducing family size
- Preventing pregnancy-related health risks in women
- Reducing infant mortality
- Helping to prevent HIV/AIDS
- Empowering people and enhancing education
- Slowing down population growth
- Setting up happy families

Birth control

How can we control birth?

●

It is possible to control birth through preventing fertilization. The only method of contraception which can ensure hundred percentage successes in avoiding pregnancy is abstention as well as sterilizations. Different



mechanical, chemical and surgical measures are also available which can prevent the union of sperm and ovum which prevent pregnancy. Some of them are:

- **Natural Contraception:** (Rhythm method) Avoiding sexual contact during the possible days of egg production.
- **Sterilization:**-It is the surgical method to prevent pregnancy. These mild surgeries are simple and safe and largely promoted by the government. Males (Vasectomy) Females (Tubectomy).
- **Mechanical Contraception:** Condom, Diaphragm, Intra- Uterine Device (IUD).
- **Chemical Contraception:** Chemicals in the form of creams, jellies, etc. applied in genitals.
- **Oral Contraception:** An oral contraceptive is a 'pill' which prevent ovulation.

Adolescent Pregnancy

Have you heard about unwed mothers? Most of the unwed mothers are from adolescent age group. Is there anything wrong with an adolescent becoming pregnant?

-



Adolescent pregnancy is a major cause of maternal and child mortality, and the vicious cycle of ill-health and poverty. Pregnant adolescents are more likely than adults to have unsafe abortions. Unsafe abortions lead substantially to lasting health problems and maternal deaths. Having babies during adolescence has serious consequences for the health of the girl and her infant.

Complications from pregnancy and childbirth are the major cause of death among girls between 15-19. Infants of adolescent mothers are also more likely to have low birth weight, which can have a long-term impact on their health and development.

Abortion

Abortion is a pre-mature termination of pregnancy from the uterus before the foetus is ready for an independent existence. Abortion can occur at any stage of pregnancy. The reason for spontaneous abortion are defects in the formation of foetus, poor maternal health, infectious diseases, anxiety, depression, use of

certain chemicals, drugs, consumption of liquors, physical trauma, etc.

Induced or artificial abortion means abortion by mechanical, surgical, or chemical measures. It affects the psychological and physical health of the mother.



MTP ACT

In India, the Medical Termination of Pregnancy Act controls and regulates the practices related to abortion. This law was enacted by the Indian Parliament in the year 1971 with the intention of reducing the incidence of illegal abortion and consequent maternal mortality and morbidity. The MTP Act came into effect from 1 April 1972 and was amended in the years 1975 and 2002. As per the provisions of this act, pregnancies not exceeding 12 weeks may be terminated based on the single opinion of a competent doctor formed in good faith. In case of pregnancies exceeding 12 weeks but less than 20 weeks, termination needs opinion of two doctors. The Medical Termination of Pregnancy (MTP) Act of India clearly states the conditions under which a pregnancy can be ended or aborted, the persons who are qualified to conduct the abortion and the place of implementation. This act permits the termination of pregnancy under the following conditions:

- Women whose physical and/or mental health were endangered by the pregnancy.
- Women facing the birth of a potentially handicapped or malformed child.
- Pregnancy due to rape or incest.
- Pregnancies in unmarried girls under the age of eighteen with the consent of a guardian.
- Pregnancies in 'lunatics' with the consent of a guardian.
- Pregnancies that are a result of failure in sterilization.

Safe motherhood

What kind of special care is given to a pregnant woman in your community? Why do they require special attention and care?



-

Safe motherhood is a world wide initiative promoted by WHO. It ensures that all women receive the care they need to be safe and healthy throughout pregnancy and childbirth. The indicators used to measure maternal health include skilled

attendance at birth, use of contraceptives, and maternal mortality and morbidity. There are various means for ensuring safe motherhood like prenatal care, post natal care, obstetric care, nutrition interventions, and family planning services.



Check Your Progress

1. List out any five sex deviations.
2. Prepare a poster to promote family planning programme.
3. Analyze the consequences of adolescence pregnancy to child and mother.
4. Certain birth control methods are helpful for both population control and disease control. Mention the methods.



- Conduct a debate on 'abortion'.
- Prepare a seminar paper on the indigenous practices for safe motherhood in our community.

8.8 Gender Equality and Equity

Do men and women get equal wages in an unorganized sector?

-



Gender discrimination and gender issues are predominant in our society due to various reasons. Women are more disadvantaged in this aspect. From womb to tomb, females are facing lots of discrimination. Female foeticide, denial of food and education, child abuse, early marriage, eve teasing, rape, dowry, and domestic violence are common problems they face in their life.



Gender Based discrimination and Violence through out the life cycle

- | | |
|--------------|---|
| • Pre Natal | Sex Selective fertilization, Sex Selective Abortion. |
| • Infancy | Female Infanticide, unequal access to food and medical care. |
| • Child hood | Genital mutilation, incest and sexual abuse, unequal access to food, medical care and education, child labour and child prostitution. |

- Adolescence Marriage involving abduction and rape. Economically coerced marriage, sexual harassment and abuse on the way to or from school, at home, or at the work place, denial of sexual self determination, forced prostitution.
- Reproductive Age Psychological and physical abuse by the partner and relatives, marital rape, dowry related crimes and murder, honor killings, forced prostitution, sexual harassment, abuse at workplace abuse and rape of women with disabilities, persecution of lesbians, abuse and exploitation of young widows.
- Old Age Abuse of widows, neglect of old women.

Family has a crucial role in developing gender specific roles in children. The parental attitudes, style of parenting, child rearing practices, etc. influence the moulding of gender roles. Hence family life education has great relevance to fight against gender discrimination and ensure gender equity and equality.

Summary

Family life education is the educational effort to strengthen the individual and family life. Parenting classes, pre-marriage education, sex education, family financial planning, child-rearing, sexual and reproductive health programmes, family planning, value education, life skill education are a few components of family life education programme. Adolescents and youth require scientific sex education which will promote sexual and reproductive health, reduce sexual crimes and sex deviations. Adolescence may be defined as the period of physical, psychological and social maturation from childhood to adulthood. Sexual reproduction involves both male and female. Male and female reproductive system is essential for sexual reproduction. Sexual deviations or psycho-sexual disorders are abnormal sexual behaviours which are not in conformity with the norms of society. Family planning programmes and birth control measures have significant role in the population control and also to ensure family welfare. The adolescents need to understand the consequences of adolescent pregnancy and abortion. There are worldwide initiatives to ensure safe motherhood. Gender equality requires equal enjoyment by women and men of socially-valued goods, opportunities, resources and rewards. Gender equity is the process of being fair to women and men.

Evaluation Questions

1. Examine the importance and objectives of family life education in the contemporary world.
2. Identify and list out the purposes of responsible parenthood.
3. Adolescents need sex education. Bring out the argumentative points in favour of sex education for adolescents.
4. Suggest means for checking sex violence.
5. Bring out various physical changes among boys and girls during adolescence period.
6. Suggest a few measures to safe mother hood.
7. Design a poster to be exhibited in your school to promote Family planning programmes.
8. List out any four impacts of adolescence pregnancy.
9. Name any two STDs.
10. Develop a concept paper on HIV/AIDS which is required to present in a seminar.

International Social Work

Significant Learning Outcomes

After the completion of this chapter, the learner:

- Identifies the concept of international social work
- Recognizes social work as a global profession.
- Identifies the need to have cultural sensitivity for international social work practice.
- Recognizes the development and human rights approaches in international social work.
- Appraises the role of social work in various international agencies.
- Recognizes social work education and career opportunities at international level.

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9.1 International Social Work



Social Workers Are Highly In Demand

Large number of Professional /social Workers are needed in UK, USA, and Australia. There are existing Vacancies of Medical Social worker , Psychiatric Social worker, Geriatric Care Worker, Community Organisers. Professional aspirants are requested to contact immediately.

Contact persons:

Above given is an extract from a leading newspaper. You might have seen many such advertisements inviting various professionals in the national and international level. Why do you think professionals are highly in demand, especially abroad?

-

Nowadays professionals in social work field get lots of openings in international level.

Have you heard of international social work?

-

Social Work has universal application to meet human needs and address personal and social problems. It develops human potentials to face challenges of life. Professional social workers are dedicated for the welfare of individuals and promote development, human rights, relationships and empowerment of people to enhance their well- being.

Professional social workers play a vital role in dealing with issues related to international community where they have to meet a lot of challenges. This is the reason why social workers are highly in demand in recent years. Working with

international community and varied culture form international social work. Now let us discuss how international social work emerged.

Today the world is considered as a global village. The countries depend on each other for development. Liberalization, Privatization and Globalisation have changed the entire world. It resulted in complexities in all walks of life. The history of internationalization of the social work profession is associated with the rise of social problems. Besides, Social work professionals have been increasingly confronted with the challenges of immigrants and refugees recently. Social Workers also assist in humanitarian, reconstruction and rehabilitation efforts during or after war/disasters in different countries. Thus social work interventions became an integral part of international community.

Social work as a profession began in Amsterdam in 1899 and later spread through-out Europe and the United States. By 1920s, it has spread to other places of the world including India. The formation of the International Association of Schools of Social Work (IASSW) and the International Federation of Social Work (IFSW) have provided leadership in connecting international agencies and international development organisations to social work worldwide. The Commission on Global Social Work Education (CSWE) also contributed to social work to continue as a profession worldwide.

The Meaning of International Social Work

We have learnt different methods of social work in the previous chapters. In the modern world relevance of international social work is increasing. Do you know what international social work is?

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International social work is social work which deals with problems between nations and across national boundaries. International social work thinks and acts for the well-being of all the people on earth. International social work does not attach any special importance to a particular/specific country or people. International social work is against egocentrism and ethnocentrism. .

Usually, working abroad as social workers, is wrongly conceived as international social work.

International Social Work is defined as ‘international professional practice and capacity for international actions by the social work profession’. Principles

of social justice, human rights, collective responsibilities and respect for diversities are central to international social work.

International social work follows a global perspective - where the problems of humanity are treated without any national or regional divide-, human rights perspective - the key value base of international social work should be guided by fundamental rights and freedoms. Besides, ecological perspective and social development perspectives are also important.

International social work has various dimensions such as globalization, professional exchange, policy dimensions, international practice etc. These dimensions are the basis of international social work practice.

The Goals of International Social Work

The goals of international social work focus on:

- a) To eliminate the barriers to development of historically disadvantaged population
- b) To realize more balanced approaches to development ensuring equitable distribution of resources.
- c) To assign the highest priority to human development
- d) To eliminate absolute poverty worldwide
- e) To promote and protect human rights



Absolute Poverty

Absolute Poverty refers to a condition where a person does not have minimum amount of income needed to meet his minimum requirement.



Check Your Progress

1. Social work as a profession had begun at in the year.....
2. Give the meaning and definition of international social work.
3. List out any three goals of international social work.
4. What are the dimensions of international social work?

9.2. Cultural Sensitivity and Multiculturalism



Mrs. Jeslin was born in one of the remote villages of Pathanamthitta district in Kerala. In 2000 she completed her Masters degree in social work. She went to UK to do her MBA in the year 2002 after serving an NGO as a family and child counselor. While she was studying in Brighmingham university, she was permitted to work as a part time social worker of a child protection center in UK. She applied for a permanent post of social worker after the successful competition of her course. Now she visits houses of clients from different countries Asia, Europe, Africa, etc. She deals with clients from different cultural background. She learns family backgrounds of the different clients who have migrated to UK.

What is Mrs. Jeslin supposed to do to practice her profession among the clients from different cultures?

•

Mrs. Jeslin has to familiarize the cultural diversity of people around her. She should have an understanding of multiculturalism.

The term multiculturalism describes the increasing diversity in the populations in terms of race and ethnicity. Culture refers to a group's shared language, traditions, customs, rituals, history and expectations of one another. Ethnicity refers to the classification of people on their shared ancestry and culture. Race is the classification of people based on geographic origin and shared physical characteristics like skin, color, hair texture and facial features. In the social work perspective multiculturalism implies cultural groups that maintain distinctive identities in their languages, beliefs, customs, and religions. These distinctive practices of people indicate cultural wealth of a society as a whole.

In multiculturalism the identity of an individual plays a vital role. The term identity means self conceptualization which helps an individual to see himself as a member of the larger community. Identities are socially constructed related

to one's nation, profession, economy and education. Many of these differences form an important part of the client's identities. For example, the client and social worker can have unseen value differences.

So how can we practice social work in multi cultural society?

-

Practice of Social Work in Multicultural Society

The professional social workers must prepare themselves to practise their profession in a multicultural environment. They should familiarize with many cultures, religions, family forms and the situation in which their client migrated to other country. International social worker must have cultural competencies to work with colleagues, clients and community members. Almost all of the international social workers work with clients who differ in age, gender, family form, religion, class, background, etc.

Professional organizations engaged in human service and mental health are to be aware of multicultural practises. The National Association of Social Workers (NASW) has developed standards for cultural competence in social work practice. While practicing international social work among multi cultural community a social worker should be:

- Aware of his own ethnic, gender and cultural heritage.
- Acquire knowledge about the cultures and customs of clients with whom he works.
- Able to use self- awareness and knowledge to plan flexible strategies for intervention with client's values.

9.3. Approaches in International Social Work

The concerns of international social work are to promote development, protect and enhance human rights. Development is a major thrust of international organizations. Many local, national and international organizations address poverty and related problems. Human rights provide an orientation to uphold human dignity. Thus approaches of international social work are divided into:

- Development
- Human Rights

A. Development

Development means a progressive change in the life of people.

We have already learnt meaning, definition and various approaches of development in the previous chapter. Let us study development in the international social work context.

UN symposium on Social Policy and Planning in 1970 defined **development** as a “process of improving the capability of a nation’s institutions and value system to meet increasing and different demands like social, economic, or political”.

Development should be geared up to the satisfaction of needs with the eradication of poverty, ignorance and disease.



A Brief History of Development Efforts in the World

The Colonized areas of Africa, Asia and Caribbea began to achieve their independence and emerged as new nations. Many South American countries achieved independence in the nineteenth century and India also became independent in 1947. Similarly so many newly independent countries have their increased influence at the United Nations to focus on the challenges of “underdevelopment” in 1960. UN launched its first development decade in 1961. It gave importance to economic growth, support for industry, infrastructure for modern economy and mechanization of agriculture.

Countries that experienced high growth rates did not improve in human well- being. In fact there was often little connection between increased GNP and improved well- being of the people. These realization led to recognition that development is complex and requires more than economic strategies. From the late 1970 to the present, a stream of additional concepts has been added to the approaches of development. They are basic needs, social, sustainable, gender and right based approaches.

How to Measure Development?

Various measures have been used to assess the level of development of various countries at the international level. They are as follows:

- a) **Human Development Index (HDI):** It is used by United Nations Development Programmes (UNDP) to assess the progress of a country

on several indicators like adult literacy, enrolment in primary, secondary, and tertiary education; life expectancy at birth and Gross Domestic Product (GDP)

- b) **Index of Social Progress (ISP):** It comprises 45 indicators that express a country's development in 10 sectors like: education, health, women empowerment, defence effort, economic, demographic, geographic, cultural, political and welfare efforts.
- c) **Physical Quality Life Index (PQLI):** is an attempt to measure the quality of life or well being of a country. The value is the average of three statistics: basic literacy rates, infant mortality and life expectancy.
- d) **Millennium Development Goals (MDGs):** In 2000 United Nations held its millennium summit and identified eight goals for making progress in development by the year 2015. Millennium Development Goals are :
 - Eradicate extreme poverty and hunger.
 - Promote gender equality and women empowerment.
 - Reduce child mortality.
 - Improve mental health.
 - Combat HIV/AIDS, malaria and other diseases
 - Ensure environmental sustainability
 - Develop a global partnership for development.

B. Human Rights

The second major global thrust of international social work is the campaign for human rights.. All people have rights because they are human. The Universal Declaration of Human Rights clearly states that the philosophy of human rights is that “All human beings are born free and equal in dignity and rights”. Thus human rights are not something to be earned. Nor they are to be withheld from certain group of people.

The human rights movement is founded on a fundamental respect for the dignity and worth of every human being. This respect for human dignity and the worth of individuals is at the very heart of social work.

The International Federation of Social Workers in 1988, observes its policy with the statement “social work has been a human rights profession. International social work has its intrinsic value that every human being has worth and dignity

which can offer people security and development. It is particularly significant that human rights are included in the three major international social work policies of the early twenty-first century”: Global Definition of Social Work, the statement of ethical principles and the Global Standards for Social Work Education and Training.



Check Your Progress

1. Explain the term multiculturalism.
2. How can an international social worker practice his profession among different people belonging to different cultures?
3. Give a brief account of approaches in international social work.



Arrange an interactive session with an international social worker to understand his/her experience in working in a multi-cultural environment. .

9.4 Global Organizations in Social Work

Name any international organization that applies social work methods to realize its objectives?

-

Some specialized organizations only deal with international issues related to social welfare. These organizations are at work on projects such as

- a) Planning and implementing income generation projects to address poverty
- b) Providing emergency food, clothing and medical care in crisis situations
- c) Conducting education and prevention campaigns to slow the spread of HIV/ AIDS and to deal with other health needs of the population
- d) Promoting low cost primary education models
- e) Developing standards to encourage equal rights for women
- f) Tackling child labour



The major groups of organizations engaged in international social work practice are:

- i) UN and its Agencies
- ii) Government agencies of each nation
- iii) Non-Governmental Organizations (NGOs)

UN and its Agencies

Have you heard of United Nations?

-

When was UN formed?

-

Can you list out any two UN agencies?

-

The UN and its agencies play a major role in international social work. The UN was formed by signing a charter on June 26, 1945. There are presently 192 member nations in UN. The charter defines the following as the purpose of the UN.

- To maintain international peace and security
- To develop friendly relations among nations
- To achieve international cooperation in solving international problems of an economic, social, cultural or humanitarian character and in promoting respect for human rights
- To be a center for harmonizing the actions of nations in the attainment of these common ends

There are various UN agencies concentrating on international social work. The important UN agencies are as follows:

- i) UNICEF
- ii) WHO
- iii) UNDP
- iv) FAO
- v) ILO

i) UNICEF (The UN Children's Fund)

United Nations International Children's Emergency Fund (UNICEF) is an important agency of the UN. It was founded in 1946 for post-war relief in Europe and China. UNICEF operates programmes in most of the world's countries. The goal of the UNICEF is to improve the lives of children and youth in the developing countries by providing community based services in primary health care, social services, water supply, formal and non formal education, nutrition and emergency operations. UNICEF and WHO had jointly announced the world that they could immunize 90 % of world's children against six major killer diseases namely Polio, diphtheria, tuberculosis, pertusis (whooping cough), measles and tetanus.



ii) World Health Organization (WHO)



WHO is another specialized agency of the UN started in 1948. The goal of WHO is to encourage the greatest possible level of health for all. It monitors international health issues, works to control communicable diseases and conducts research on health problems. It focuses on primary health care and makes interventions in sanitation, water, immunization and maternal-child health. WHO leads a campaign to control the spread of HIV. It also makes progress on eradicating major preventable diseases like Ebola, malaria and smallpox.

iii) United Nations Development Programme (UNDP)

Formed in 1965, UNDP plays a coordinating role among all the UN agencies involved in development. This UNDP focuses on five areas: “reducing human poverty; fostering democratic governance; energy and environment for sustainable development; crisis prevention and recovery; and responding to HIV/AIDS”. UNDP is currently a strong advocate for the Millennium Development Goals (MDGs).



In 1986, UNDP set up the Division for Women in Development. It administers the UN Development Fund for Women (UNIFEM), a special fund to support projects for low-income women in poor countries. The four strategic areas of UNIFEM are

- Reducing poverty among women
- Ending violence against women
- Reducing HIV/AIDS in women and girls
- Achieving gender equality in democratic governance

iv) Food and Agriculture Organization (FAO) and World Food Programme

FAO is the first specialized agency of UN which aims at global food security. It aims not only to provide food for crisis situations but also to support development. The organization provides technical assistance and advice on agricultural planning, production and food distribution, through a global information and early warning system. With the UN, the FAO sponsors the World Food Programme which supplies 25% of the world's food aid.



v) International Labour Organization (ILO)



The International Labour Organization was founded after the First World War 1946. ILO aims to promote rights at work, encourage decent employment opportunities, enhance social protection and strengthen dialogue on work related issues.

In 1969, the organization received the Nobel Peace Prize for improving peace among working class, pursuing justice for workers, and providing technical assistance to other developing nations.

We have already learnt about UN and its agencies. Now let us have a look at some government and non governmental agencies.

Governmental Bilateral Aid Programmes and Agencies

Foreign aid, or international development assistance generally aims to fulfill social welfare function. Aid is viewed as a mechanism that can assist less developed countries in their development efforts. In Kerala, we have many development projects funded by other countries and agencies such as Japan, France, Canada, UK, World Bank, Asian Development Bank (ADB), etc. Do you know the popular drinking water project aided by World Bank in Kerala?

●

That is Jalanidhi – the drinking water and sanitation project –funded by world bank through government of India. It was a revolutionary step to establish micro-level drinking water project to address water scarcity in rural areas.

Like this various countries provide financial aid to less developed countries with whom they have positive bilateral relation. Bilateral aid is an instrument of foreign policy. Some Governmental Bilateral Aid Agencies are:

- a. **United States Agency for International Development (USAID):** is the United States government agency primarily responsible for administering civilian foreign aid especially for poverty reduction and resilience of democratic societies.
- b. **Department for International Development (DID):** is United Kingdom governmental department responsible for administering overseas aid to promote sustainable development and poverty eradication, education, health, social services water supply and sanitation.
- c. **Canadian International Development Agency (CIDA):** Canadian Government administered foreign aid programmes in developing countries.
- d. **European Development Fund (EDF):** European Development Fund is the main instrument for European Union aid for development cooperation in Africa, Caribbea and Pacific.

Non Governmental Agencies (NGOs)

Have you visited any voluntary organization working for social development?

●

Non Governmental Organizations (NGOs) play a significant role in international social work. Some intervention areas of NGOs include

- Relief and development
- Advocacy for causes such as human rights and peace
- Development Education
- International networks of social and youth agencies

Some of the NGOs working for the promotion of international social work are Red Cross, CARE (the Cooperative for American Relief Everywhere), Save the Children, Oxfam, YMCA/YWCA, World Vision, Amnesty International, Save Our Souls (SOS), etc. Let us have a look at few of them.

a. Red Cross

Red Cross is one of the oldest international NGO, which was founded in 1863 to provide relief services and ensure humane treatment of prisoners and civilians. Red Cross gives importance to relief to refugees, famine victims, victims of war and natural disaster. Relief involves provision of basic necessities like food, water, shelter, clothing and medical care to sustain life. International Red Cross Society operates in almost all countries of the world.



Programmes of International Red Cross Society includes disaster preparedness and response, hospital Services, blood bank, HIV/AIDS programmes, maternity child and family welfare, nursing, Junior Red Cross activities, etc.

b. Oxfam International

Oxfam International works to address the root causes of poverty and inequality. The Universal Declaration of Human Rights is the guiding principle of Oxfam International. Oxfam International envisions creating a more equal, just, and sustainable world. The vision of Oxfam is “right to life with dignity for all” and fulfils its vision by working in partnership with various institutions and movements. Oxfam came to India in 1951 as a humanitarian response to the Bihar famine. This was Oxfam’s first full scale humanitarian response in a developing country.

c. Young Women's Christians Association (YWCA) and Young Men's Christian Association (YMCA)

The World Young Women's Christian Association (World YWCA) is a global network of women leading social and economic change in over 120 countries worldwide. YWCA advocates for peace, justice, human rights and care for the environment and has been at the forefront of raising the status of women for more than a century.

YMCA is one of the oldest and largest movements for youth in the world founded in 1844. The YMCA works to bring social justice and peace to young people and their communities regardless of religion, race, gender or culture.

Both YMCAs and YWCAs advocate to ensure adequate national and international public policies that protect and promote the rights of youth and women. They are creating long-lasting changes in the lives of millions of youth and communities.

d. World Vision International

World Vision International is a humanitarian aid, development and advocacy organisation. It has grown into one of the largest relief and development organizations in the world.

World Vision fights against poverty, hunger and injustice, irrespective of their religious beliefs. They are now focusing on larger issues of community development and advocacy for the poor towards the end of helping poor children and their families to build a sustainable future.

e. Amnesty International

Amnesty International is a non-governmental organisation focusing on human rights. Amnesty draws attention to human rights abuses and campaigns for agreements with international laws and standards. The organisation was awarded the 1977 Nobel Peace Prize for its "campaign against torture".



Check Your Progress

1. Prepare a chart on UN agencies showing year of starting, headquarters and purpose of agencies.
2. Explain any three international non-governmental organizations.
3. List out the governmental aid agencies existing in the world.



1. Prepare a report on objectives, programmes and funding of any NGO that you are familiar with and compare it with any of the international NGO's
2. Visit websites of UN agencies and collect information on different programmes of each agencies.

9.5. International Associations in Social Work

International Associations of Schools of Social Work

The international Associations of Schools of Social Work (IASSW) is the worldwide association of schools of social work. It is also the association of social work educators. IASSW was founded in 1928 at the First International Conference of Social Work held in Paris. The association has member schools all around the world.



IASSW tries to achieve the following objectives.

- i. To promote the development of social work education throughout the world.
- ii. To develop standards to enhance quality of social work education.
- iii. To encourage international exchange of social work educators.
- iv. To provide forums for sharing social work research and scholarship.
- v. To promote human rights and social development.

The mission of IASSW emphasizes the promotion of worldwide excellence in social work education and engagement of a community of social work educators in international exchange of information and expertise.

Membership is open to social work schools, individual social work educators and others specifically interested.

International Federation of Social Workers (IFSW)

The international Federation of Social Workers (IFSW) is a global organization striving for social justice, human rights and social development through the promotion of social work. IFSW supports its 116 country members



by providing a global voice for the profession. IFSW is working with WHO, UNICEF, UNHCR .

International Council on Social Welfare (ICSW)

The International Council on Social Welfare (ICSW) was founded in Paris in 1928. It is a non –governmental organization which represents national and local organizations in more than 70 countries throughout the world. Membership also includes major international organization. The network of organizations provides help for a wide range of people who are poor, ill, disabled, unemployed and oppressed. They help young people, older people, families, indigenous peoples, migrants, refugees and others who are experiencing special hardship or vulnerability.

National Association of Social Workers (NASW)

The National Association of Social Workers (NASW), an American association for social workers, is the largest membership organization of professional social workers. NASW works to enhance the professional growth and development of its members, to create and maintain professional standards, and to advance sound social policies.

9.6 Educational and Career Opportunities in International Social Work

The effect of globalization, global migration, disasters, poverty, diseases and other social issues have made social work education and practice gaining increased relevance. The international dimension



of social work education necessitates social work professionals to understand both local environment and approach social issues from global perspective. Social work professionals must position themselves to tackle today's complex social problems through the integration of a human rights framework for social justice.

Specific models are identified for international social work practice and curricular issues associated with international education for social work.

The models employed by educators to practice international social work include:

- Personal social services model
- Social welfare model
- Social development model
- Global social transformation model

Each model prescribes a different set of solutions for advancing more balanced approaches to social and economic development. It also helps historically disadvantaged population groups and others to achieve increased political equality

International Social Work Careers

Social work has always been a welfare profession. International social workers strive to protect against social injustices, human rights violations, crisis intervention and problems of poverty. Social work is interdisciplinary in nature.

Social work practice in international level is highly competitive. It is important to understand the necessary experience, skills, resources and cultures involved in a position before applying for a post. Prospective employer wants to hire the best person for the job and they will look at previous experience, cultural knowledge and innovative projects.

The careers and fields open for social workers at the international level include

- Medical Social Worker
- Psychiatric Social Worker
- Community Care Worker/Community Organizer
- Case Managers
- School Social Worker
- Geriatric Care Worker
- Child Guidance Clinics
- Correctional Setting
- Rehabilitation Social Worker
- Counsellors
- Welfare service provider and a lot more.

Organizations which Employ International Social Worker

There are a variety of international organizations-governmental as well as private-who absorb professional social workers. Each Embassy will have a list of programmes and organizations in their country that work with different communities. A few popular organizations which employ international social workers are;

- Council for International Education and Exchange (CIEE)
- International Justice Mission (IJM)
- International Rescue Committee (IRC)
- Save the Children
- Institute for international Education (IIE)
- International Society for the Intercultural Training and Research
- Agencies of United Nations

Most of the social work positions test your experience and knowledge. If you have a passion to help communities, you will be a great asset for the organization. Anyone considering a professional career as an international social worker must do a lot of research and consider all the factors before leaving the country for abroad. By volunteering and working with international organizations around the world, a social worker gain better competence and ability to prepare himself for greater career development.

Professionally qualified social workers have opportunities to practice social work in different fields at different countries especially in UK, USA, Canada, Ireland, Australia and even UNO. The scope of social work is increasing in Middle East also.



Check Your Progress

1. What are the models employed by educators to practice international social work?
2. What qualities are essential for international social work practice?

Summary

In this chapter we learn the concepts, 'International Social Work', the importance of social work as a global profession, various professional association promoting social work and various career opportunities of social work in the developmental fields of human life. International social work does not attach to any special country or group of people within a country. The four perspectives of International social work are global, human rights, ecological and social development. International social workers work in a multicultural context. In the social work perspective multiculturalism implies cultural groups that maintain distinctive identities in their languages, beliefs, customs, and religion. These distinctive practices of people indicate cultural wealth of a society as a whole. The professional social workers must prepare themselves to practise their profession in a multicultural environment. The organisations engaged in international social work are UN agencies, governmental and non-governmental agencies. We deal with important agencies and their intervention in this context. We also deal with the national and international social work associations that promote the education and practice of social work all over the world. Social work education must prepare the professional with ample knowledge and skills to work in various situations. In the last part of the unit we discuss about the career perspectives for international social work. Many international organizations including UN absorb professional social workers.

Evaluation Questions

1. Define international social work.
2. Expand IASSW.
3. List out the perspectives of international social work.
4. Prepare a chart on the goals of international social work.
5. Define multiculturalism in your own words.
6. The professional social workers face numerous challenges to practice their profession in multicultural community at international level. Comment.
7. Prepare a seminar paper on UN.
8. List out four international non-governmental organizations.
9. List out international associations in social work.
10. Name the organizations that employ international social workers.

References

1. Crosby, B.P., (1996). *The Absolutes of Leadership*. San Fransisco:- Jossey Bass Publishers.
2. Northouse, G.P., (2013). *Leadership*. New Delhi SAGE Publications India Pvt Ltd.
3. Black, S., (1999). *Practical Public Relations*. Universal Book Stall.
4. Moore, H.F, Kalupa B.F., (1985). *Public Relations. Principles. Cases*, (9th ed) New Delhi : Surjeet Publications.
5. Dutt, Kiranmal, P., Rajeevan, Geetha, P., *Course in Communication Skills*. CLN Prakash, Cambridge University Press India Private Limited.
6. Day, R.P., (1972). *Communication in Social Work*. Oxford: Pergamon Press Headington hill hall.
7. Raymond, S., (1980). *Public Relations-Concepts and Practices*. Ohio: Grid Publishing, Inc, Columbus.
8. Jethwaney, N.J., (1994). *Public Relations-Concepts, Strategies and Tools*. Sterling Publishers Pvt Ltd.
9. Branny, D.R., (1995). *Sustainable development: an introductory guide*. Earthscan: London.
10. Gangrade D. (2005). *Gandhian Approach to Development and Social Work* New Delhi, concept publishing company.
11. Roy, S., (2002). *Project Planning and Management*; The Catholic Health Association of India.
12. Mukharjee, N., (2004) *Participatory Methodology and Application* : New Delhi Concept publishing Company
13. Palakkal, A., & Shrum, W., (2007). *Information Society and Development- the Kerala Experience*. New Delhi: Rawat Publication Jaipur.
14. Cockerham , C.W., (2000). *Medical Sociology*. Prentice Hall.
15. Goel, S. L.(2004). *Health care policies and programmes:Health care system and management-2*. Deep & Deep Publications.
16. Goel, S. L., (2007). *Health Education: Theory and practice*.Deep & Deep Publications.

- 17 Gupta, M. C., & Mahajan, B.K., (2003). *Textbook of Preventive and Social Medicine*. Jaypee Brothers.
18. Park, K.(2009). *Preventive and Social Medicine*, Banarsidas Bhanot Publishers.
Sathe, P.V., &.Sathe ,A.V (1997) *Epidemiology and Management for health care for all*. Popular
Prakasan, Mumbai.
- 19 Naik, J. P., (1997) *An Alternative System and Health Care service in India- some Proposals*. Mumbai: Allied Publishers Pvt Ltd.
20. Park, J. E., & Park, K. , (1991) *Text Book Of Preventive and Social Medicine*. Jabalpure. Banarsidas Bhanot Publishers.
- 21 George, P .O., (1986) *Health Care Administration Manual II*. Kerala Voluntary Health Services.
22. Goel, S. L ., (2004) *Health Care Policies and Programmes*. Deep and Deep Publications Pvt Ltd.New Delhi.
23. Chaube, S. B., *A Text Book of Educational And Vocational Guidance* .New Delhi: Dominant Publishers and Distributors.
24. Gururani, G .D., (2014). *Guidance and Counselling*. New Delhi :Akansha publishing house,
25. Ramesh , M. C. *Testing in guidance and counseling* .New Delhi : Sumith Enterprises.
26. Dash, B.N. *A Textbook of Guidance Services* .New Delhi :Dominant Publishers.
27. RGNIYD , (2007). *Training manual on Career Guidance*. Sri Perumbudur Tamil Nadu.
28. Jena, S .P .K ., (2008) *Behavior Therapy*- Sage publication .
- 29 Elizabeth, P. (1984)- *Transactional Analysis for Social Workers and Counselors*. London.An Introduction- Tevistock/Rowthledge .
30. Harry, A ., (1994). *Neuro linguistic programming- the new art and science of getting what you want* London:Judy Piatkus Ltd
31. James, & Jongeward , (1971) : *Born to Win – Transaction Analysis with Gestalt experiments*. USA : Addison-Wesley publishing Company
32. Jaffe, G. P. ,Nancy. K. D., Poisson, S. E., (2003). *Child Custody and*

Domestic Violence-A call for Safety and Accountability. New Delhi: Sage Publications.

33. Ranson, K.E., Urichuk, L.J., (2006). *The Effect of Parent-Child Attachment Relationships on Child Bio Psychosocial Outcomes: A Review. Early Child Development and Care.*
33. Trickett, P. K, Schellenbach, C.I., (1998). *Violence against children in the family and the community.* Washington DC : American Psychological Association.
34. Cox, D., & Pawar, M ., (2006). *International Social Work – Issues, Strategies and Programmes.*, Vistaar Publications.
35. Di Nitto, Diana, M .and Mc Neece.C.A., (2008). *Social Work –Issues and Opportunities in a Challenging profession*, Chicago : Lyceum Books, Inc,
36. Flynn, J. P., (1992) *Social agency policy: Analysis and perspectives for community practice.* Chicago: Nelson Hall publishers.