Social Work
Intervention with Individuals and Groups

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Preface

‘Social Work Intervention with Individuals and Groups’ has been presented in two volumes comprising thirty one chapters. The first six chapters deal with casework which is the oldest and the most developed method of social work profession. In the initial period when social work was emerging as a profession and a discipline, it was through casework that social workers performed their activities. Subsequently they gained recognition from the society for their profession. Skills and techniques of casework are well developed today. Casework is also important as it is used by those practicing other methods like group work, community organisation, social action, social work research and social welfare administration. The skills and techniques of casework are used by social workers practically in every setting. Thus, casework also becomes a base for other methods.

The first chapter is on ‘Introduction to casework: historical development’ which will introduce you to the history of casework in the West and in India. Basic assumptions, principles and values of casework are being discussed in the historical perspective. The second chapter ‘Basics of social casework’ deals with the principles and values of casework in detail. Various approaches to casework based on different theories will also be discussed. The third chapter ‘Practice of social casework’ shows how casework is done with the individual. These phases are described so that you understand the various elements involved in the caseworker-client relationship, how the caseworker develops a relationship with the clients and finally how he/she uses the relation to solve a client’s problems. The fourth and fifth chapters: ‘Interviewing and recording
in casework-I’ and ‘Interviewing and recording in casework-II’ deal with two important aspects of casework namely, interviewing and recording. Most of casework process are performed through interviewing the clients and others related to him/her. The sixth chapter on ‘Fields of social casework practice’ provides an overview of how casework is practiced in various settings and also shows how these setting affect social casework practice in Indian context.

Chapters seven to eleven are on ‘Social work with groups’. Like casework, group work skills and techniques can be used in a variety of settings. People live and work in groups and therefore have an affinity towards groups. Group work is based on the dependence of individuals on groups and vice-versa. Chapter seven is on ‘Social group work: historical development’ which traces the historical journey of group work from its origin to its acceptance as a recognised method of social work. Chapter eight ‘Characteristics and significance of group’ gives you the theoretical bases of group work. Various theories are presented which support the assumption that groups can be used to influence its members for the better. The ninth chapter ‘Principles, skills and models of social group work’ describes the principles, values, skills and approaches relevant to social group work. The tenth chapter ‘Group formation: stages of development of groups’ describes how group work is actually done. Different phases of group work process are described so that you understand that social workers do group work systematically and meaningfully. The eleventh chapter ‘Role of group worker in group work process’ deals with the social worker’s role in group work. This chapter also discusses the usefulness of this method in different settings.
A social worker often works in problem-afflicted areas or with problem-afflicted people. They may try to resolve the problem individually i.e. by helping individuals to overcome the problem by themselves. For example, the social worker may encourage a drug addict to go for rehabilitation. A social worker may also tackle the problem at the community level. Some of the strategies can be influencing government policy, persuading the bureaucracy to take necessary action, conduct awareness campaigns etc. Whatever may be the strategy, the social worker should have greater awareness about the dimensions and the causative factors of social problems. There are four chapters dealing with social problems and services. Chapter twelve 'Introduction to social problem' introduces you to the concept of social problems and how different ideologies identify the causative factors which cause social problems and suggest different solutions to solve them. Chapter thirteen on 'Contemporary social problem-I' explains the dimensions and causative factors of social problems such as HIV/AIDS, migration and displacement, environmental degradation, communalism, youth unrest and corruption. 'Contemporary social problem-II' deals with another set of social problems like suicide, substance abuse, adult crime, juvenile delinquency and problems of disadvantaged sections like minorities, backward classes and women which are elaborated in chapter fourteen. Chapter fifteen 'Social defence' introduces you to the concept and practice of social defence. The Institute of Social Defence is the apex institution dealing with social defence. Hence its programmes and activities are discussed in details in this chapter.

'General Areas of social work practice' have been discussed in six chapters. Each chapter deals with a
specific area of social work intervention. Although areas of social work intervention are many, we have chosen just six most important settings in the Indian context. Chapter sixteen on ‘Social work with family’ deals with multiplicity of family problems, dynamics of family system, intervention methods in social work and eclectic approach for handling family related problems. Chapter seventeen on ‘Social work in educational settings’ provides you conceptual clarity about social work in education, historical development, and models of school social work practice. Chapter eighteen is on ‘Social work in health care sector’. This chapter introduces you to the meaning of health and health care, concept of patient as a person, social and psychological factors involved in disease and their treatment and role of social work in the health care team.

Chapter nineteen on ‘Social work in industrial sector’ explains about social work intervention in industry, social responsibility of industry, scope of social work in industry, applicability of social work methods in industrial sector, place of social work in industry and problems and prospects of social work in industry. The chapter on ‘Social work among communities’ describes community as a social system and social work with rural, urban and tribal communities. Chapter twenty one ‘Social work in correctional setting’ deals with characteristics of social work in the context of correction, values of social work in correction, correctional settings and tasks of social workers, social casework in correctional settings, social group work in correctional settings and social work in police departments and courts.

There are five chapters on ‘Social development and social work’. These chapters will give you an introduction to
the often-used concept namely, ‘development’. Development means positive social change. In a country like India, it is a major concern of politicians and policymakers. Social workers cannot neglect this important area when they deal with social and individual problems. Social workers, unlike others, have to actually see development as a practical issue rather than a theoretical one. In other words, they have to be catalysts in the process of development. They have to implement programmes and motivate people to use them to improve their lives. Chapter twenty two on ‘Development and underdevelopment’ will give you an overview of the concept of development and various theories explaining development and underdevelopment. Chapter twenty three on ‘Concept and dynamics of social development’ gives you an introduction to the concept of social development, which is of special interest to social workers. It will show why in a country like India economic development alone will not be sufficient and why social attitudes and practices have to change. The twenty fourth chapter namely ‘Concepts and types of economic systems’ explains to you the nature of the various economic systems, i.e. capitalism, socialism and mixed economy. The next chapter on ‘Social planning and social policy’ discusses the concept of plans and policies in the Indian context. Chapter twenty six on “Human development’, deals more with the comprehensive concept related to development which takes into account factors not taken into consideration earlier.

There are five chapters on ‘Basics of legal literacy’. These chapters have been meticulously prepared so that you will be enabled to have minimum basic information about the legal system in the country. Chapter twenty
seven on ‘Indian constitution’ deals with the basic features of the Indian constitution, preamble of the constitution, fundamental rights and duties of the citizens and the directive principles of the state policy. Chapter twenty eight is on ‘Indian legal system and its relevance for marginalized and disadvantaged groups’. In this chapter you are exposed to the structure of the Indian Judiciary and different courts, composition, powers and functions of supreme court and high court and the relevance of Indian legal system for marginalized groups. Chapter twenty nine is on ‘Public Interest Litigation (PIL)’. This chapter deals with the meaning, origin, nature and essentials of PIL, constitutional backing, new interpretation of ‘locus standi’, persons disqualified to file PIL, issues related to PIL, some examples of PIL, procedure to file PIL, points to be followed while filing PIL, and explanation of important legal terms.

Chapter thirty on ‘Basic understanding of criminal procedure’ describes crime and their categories, first information report (FIR), arrest and warrant, meaning of bail and the rights of the arrested persons. Finally chapter thirty one describes ‘Social legislation and role of social worker in Legal assistance’. The discussion in this chapter is on concept of social legislation, needs and objectives of legislation, social legislation as an instrument of social change, social legislation and social work and role of social worker in legal assistance. The last five chapters explained in the second volume will provide necessary information about various aspects of the Indian legal system, the constitution of India as well as the role of social workers in providing legal assistance to people in need.
Several experts and academics have made valuable contribution for the preparation of these two volumes on ‘Social work intervention with individuals and groups’. I am pleased to place on record my profound gratitude to Dr. Anna Mathew, Ms. Hema Mehta, Prof. P.D. Misra, Dr. Ranjana Sehgal, Ms. Manju Kumar, Dr. V.J. Kochuthresia, Dr. Sherry Joseph, Mr. Raja Samuel, Prof. R.B.S. Verma, Dr. B.V. Jagadish, Dr. Suresh Pathare, Dr. Udaya Mahadvan, Mr. Ashis, Mr. Vedanshu Tripathi, Mr. Sundrara Babu, Prof. S.P. Srivastava, Prof. Devi Prasad, Dr. Herry Rozario, Prof. Anjali Gandhi, Prof. Ashok Sarkar, Dr. Ajit Kumar, Dr. V.V. Devasia, Prof. A.S. Kohli, Mr. Joseph Varghese, Dr. R.P. Singh, Dr. Archana Dassi, Dr. R. Nalini, Dr. Renu Sharma, Prof. Hajira Kumar, Prof. K.K. Jacob, Dr. Bernand D’Sami, Fr. P.D. Mathew, and Prof. Sanjai Bhatt for their kind cooperation, encouragement, timely submission of the chapters and for correcting and editing the manuscript at various stages. These two volumes on ‘Social Work intervention with individuals and groups’ will be highly useful to teachers and students of undergraduate programmes as well as for para professionals.

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Introduction to Social Casework: Historical Development

*Hema Mehta

Introduction

All human beings are part of society and everyone in the society has different social role and duties. While performing his role and duties, individual faces many problems in one or other form, which hinder his performance as a social being. Casework is the oldest and the most developed method of solving individual’s problems and improving his social relations. In this unit we will discuss the concept of casework and its usefulness in solving these problems. We will also study the evolution and historical development of casework in the West and in India.

The Nature of Individual

Every individual is unique and his/her needs are different from others in society. Consequently, the treatment given or approach to one individual cannot be used for the other individual. To understand human behaviour and the individual difference Grace Mathew has given following proposition.

- An individual’s behaviour is conditioned by his/her environment and his/her life experiences. Behaviour refers to reacting, feeling, thinking, etc. Attributes of human being are not visible to others.

*Hema Mehta, Indore School of Social Work, Indore*
The conditions and influences surrounding the persons constitute the environment.

- For human growth and development it is essential that certain basic needs should be met. The basic needs may be – physical and mental. Physical needs refer to needs for food, shelter and clothing. Mental needs can be in the form of emotional security, need of parents, child, and spouse.

- Emotional needs are real and they cannot be met or removed through intellectual reasoning.

- Behaviour is purposeful and is in response to the individual’s physical and emotional needs.

- Other people’s behaviour can be understood only in terms of one’s own emotional and intellectual comprehension.

Each individual and every individual has his/her own importance. As every human being has his/her own set of qualities, he/she cannot be neglected.

Herbert Bisno described the following attributes of individual nature:

- Each individual by the very fact of his/her existence is of worth.

- Human suffering is undesirable and should be prevented or at least alleviated, whenever possible.

- All human behaviour is the result of interaction between the biological organism and its environment.

- Man does not naturally act in a rational manner.

- Man is amoral and asocial at birth.
There are both individual and common human needs.

There are important differences between individuals and they must be recognized and allowed for.

Human motivation is complex and frequently obscure.

Family relationships are of primary importance in the early developments of individual.

"Experiencing" is essential for learning process.

While these two attributes regarding individuals seem obvious at first glance they are often forgotten. Our tendency to simplify events and our biases often prevents us from realizing the uniqueness of the individuals with whom we are dealing. We often observe how individuals with different natures are treated using the common approach. For example, we hear people say that beggars have no self-respect and are lazy. To avoid this mistake caseworkers have to remind themselves that each client who comes to the agency has his own outlook, feelings and attitudes. Their problems may have some similarities but has important differences. Thus the treatment must be differentiated according to the needs of the individual. The caseworker should attempt to understand the client’s need and respond to him in an individualized way according to his needs. Similarly the caseworker should recognize the individual as important simply because he is human being. Professional acceptance of clients by putting aside personal bias is an important requirement of the caseworker. The caseworker may have to deal with terrorists, criminals and other deviants who he/she may personally dislike.
According to Maslow’s prioritization, needs can be categorized as follows:

- **Physiological needs**: This refers to basic needs of food, shelter, cloth, air, and water.

- **Safety needs**: It is the nature of human being that it like to be on the safer side and avoid physical damage and hazards.

- **Need for belongingness and love**: Every human being loves to be love and to belong a particular group and with the prestige in that group. If a person is deprived from parental love, affection of siblings and peer group, there are chances of development of violent behaviour in him.

- **Esteemed needs**: It is general psychology of human being that it like to be at the top position, to have status in the society and acceptance in his own group.

- **Need for self-growth and identification**: After fulfillment of above needs there is need for opportunities available to a person for self-growth and to prove his capabilities for his remarkable identification in the society.

- **Need for cognitive understanding of self and the world around**: When the person recognize himself and the world around him it is said that all his needs are fulfilled. It is the top most need in the need hierarchy, which governs the person at spirituality and very few persons achieve it.

We can say that each human being has a number of needs requiring satisfaction. If these needs are not fulfilled it may result in frustration followed by crisis situation. The caseworker has to understand the client’s
need in order to study, diagnose and to give treatment according to his needs.

**Problems Faced By Individual and Families**

Problems may be caused due to the non-fulfillment of needs or inability to perform his social roles. The social roles are connected with being a parent, spouse and wage-earning worker etc.

**Causes of Human Problems**

Problem of social functioning causes distress to the individuals. These individuals are not to be considered as a unit of category but a unique person. Casework method tries to resolve individual problems through scientific approach.

According to Encyclopedia of Social Work Vol.1, the reason for human problems may be divided into five categories:

1) Lack of material resources
2) Misconception about the situation and relationships and lack of appropriate information
3) Illness or health problems related to a disability
4) Emotional distress resulting from stressful situations
5) Personality features or deficiencies

Grace Mathew undertook a survey of 200 casework records, which was based on the reports of casework services rendered for the clients in India. From the sample obtained from Survey of Casework Record; the problems can be categorized as follows:
1) Problems related to illness and disabilities
2) Problems due to lack of material resources
3) School related problems
4) Problems related to institutionalization
5) Behaviour problems
6) Problems of marital discord
7) Problem situations needing a follow-up service
8) Needs related to rehabilitation of people handicapped by disabilities
9) Predicaments and difficulties of client caught up in problems that have been regarded as social problems like gambling, prostitution, alcoholism, drug addiction and unmarried motherhood.

**Types of Problem**

In general we can categorize the problems faced by individual as:

![Figure: Problems Faced by Individuals](Image)
Broadly we can say that in a society many problems are associated with the individual and the prime aim of casework is to resolve individual problems in order to help him/her to be independent and effective in social functioning.

**Concept of Social Casework**

In the words of Gordon and Hamilton “social casework which is both a tool and area of work consists of processes which develop personality through adjustment consciously affect individual by individual between man and his social environment”. Miss Richmond gives this definition of casework. “Social casework is art of doing different things for and with different people by cooperating with them to achieve at one and at the same time their own and their society’s betterment.” Thus it is both art and science of resolving individual problems in social area, for individual and society are interdependent and social forces influence behaviour and attitude of an individual.

The focus of each branch is different but the practice of these three branches is not mutually exclusive. Social casework is concerned with individual and his adjustment to life and general social welfare. It does not concentrate on individual to the exclusion of social factors. In other words the basic objective of social casework is to promote social welfare with basic focus on individuals.

**Basic Assumptions of Social Casework**

The main work of social casework is to enable an individual in solving a problem through self-efforts. The social worker’s job is to provide adequate help and guidance. According to Hamilton the chief assumptions of social casework are:
Individual and society are interdependent and complimentary to each other.

Various factors operative in the society influence human behaviour and attitude.

Some problems are psychological and some are interpersonal in nature.

In the process of social casework conscious and controlled relations are established for achieving its aims.

Social casework enables an individual to solve his/her problems by channelising his/her energy and capacity positively.

Social casework provides everyone equal right to progress. It also provides help to every needy and disabled person.

**Philosophical Assumptions**

The ultimate goal of social casework is to establish harmonious relationship between individual and the society to which he belongs. According to Grace Mathew there are certain assumptions, which constitute the fundamental structure of social casework. They are generated out of the collective thinking and traditions in casework.

These philosophical assumptions are:

- Every human being has to be considered as a person with dignity and worth.
- Human beings are interdependent and it governs their interaction in social groups.
- There are common human needs for growth and development of individuals. The existence of
common needs does not negate the uniqueness of individuals. Every individual is like all other human beings in some aspects and like no other individuals in certain aspects.

- Every individual has within him/her, the potential for growth and achievement and he/she has a right to the realization of this potential. From this it follows that people has capacity to change.

- Society has an obligation to help those who do not have the means for the realization of their potentials.

**Historical Development of Casework in West and India**

Individuals in every society right from ancient times were helped by others to solve their problems. All religions encouraged the helping of the poor and helpless people. However, it took professional shape in the late 19th and early 20th century. To date the actual beginning of social casework in west is impossible but some important landmarks in its growth is given below.

**Early Beginnings**

The Association for Improving the Condition of the Poor (A.I.C.P.) formed in America in 1843 approached the problem of poverty more individually than had been previously it was. The aims of A.I.C.P. were to visit the poor at homes, to give counsel, to assist them practically in obtaining employment, to instill in them self-respect and self-reliance, to inculcate the habits of economy and whenever absolutely necessary to provide such relief as should be suited to their wants.

The first professional School of Social Work was the New York School established in 1898. The establishment
of this institution indicates that social work had sufficiently large body of knowledge and skills by that time. Further the need was felt for better trained professionals as complicated modern problems could not be handled in traditional ways.

1877s

The earliest organised effort in USA was the establishment of American Charity Organisation Society in 1877. One of the aims of the society was to find out the ways and means of helping the poor and needy and thus to organise individualised service. The society used volunteers called “FRIENDLY VISITORS”. We will be studying in detail about contribution of Friendly Visitors in coming chapter of the same unit. The main plan of this organisation included the investigation of applicants to assess the need, central registration, recording and relief giving.

1914-1917

The first training programme for the casework started at this time. Casework at this time was based more on medical model. For sometime casework was only confined to sick persons, i.e. a sick person to be treated was the priority.

The term “work with case” was used for the first time in national conference in USA. The first professional training programme especially for the casework was started in the form of summer training. The impact of this training programme resulted in the need for more substantial training and schools of social work attached to the agencies came into existence. When these schools started regular training programme, they were recognized as professionals.
Miss Richmond and Francis McLean, offered specialized service to thousand of clients. Social casework journal of family service association grew out of efforts of this great pioneer movement. The first book in case work “Social Diagnosis” was published in 1917 by Miss Richmond.

**Impact of First World War**

Prior to First World War, major emphasis was given on the social factor, which influenced individuals who had problems. The causes of these problems were found in the environment and the larger social economical pressure under which people lived. The primary basis of social casework was human behaviour.

The impact of Second World War was that social work became popular and a large number of people who had not been acquainted with it became familiar with it. Medical and psychiatric social workers were especially in demand during the war. Many men and women came to know the meaning of social casework for the first time.

The First World War made a wide impact on social casework. Psychiatry in this period became important. The contribution of Freud and his follower influenced the method employed by the caseworker in dealing with the individuals. Child guidance clinic movement and treatment, prevention of mental problem and delinquency strengthened the psychological orientation of this approach.

**1920s**

At this time caseworker adopted the new psychoanalytical approach to understand the client and their problems. These caseworkers found the psychoanalytical theory and the concepts in psychology
very useful in casework movement. This psychoanalytical theory was given by Freud and known as Freudian psychology made strong impact on casework. Thus it was the era of psychiatric development of social work. Focus of caseworker was on psychic forces within the individuals. Professionals also began to move into other fields like prisons, school, etc.

In late 1920’s it was expected that client and his/her involvement in problem solution was essential for the success of casework. At this time caseworker realized that more responsibilities should be given to individuals to make decisions of their life. In 1930 psychoanalytical contributions became very important and social caseworkers accepted the new method of dealing with clients.

Gradually several schools of thought developed with many points in common and number of differences. These schools were based on the theory of Sigmund Freud and Otto Rank.

1930s

It was the era of sudden changes in life-style that lead to economic depression. Casework had to consider the economic factors, which were causing distress to the clients. It was realized that economic distress could lead to emotional disaster and breakdown. The social and economic need of great differentiation refocused sociological and reality consideration for social work and compiled action on the part of federal government. At this time many work programmes such as federal emergency relief act, the work progress administration, the public work administration and the civilian conservation corporation emerged. Thus major outcome of the depression was establishment of governmental public assistant programme. It relieved the voluntary
agencies from the task of providing economic help. Caseworker was able to devote more time in dealing with clients inter personal problems.

1940s

The 1940s were dominated by the world war. Social work approaches emerged in the previous decade were transformed by the changes in theory and practice.

Impact of Second World War

Social casework was greatly influenced by the events of Second World War. During the war there was increase in personal problems on the part of clients due to financial crises. Emotional problems also increased. To meet these needs and to solve these problems family agencies were started.

1950s

In this era private practice in the social work began. Professional agencies were started growing in the field of case study. Now the caseworker started going to community and the problems of community were taken care indirectly through solving individual problems. It was the period of resettlement, revaluation, and upgradation for social worker.

1960s

Here the most promising development increased stress on importance of research. The past overemphasis on either environment or personality gave away the awareness of interdependence of these two factors. In this era social action was more focused to bring about change in the society. Casework method adopted new techniques and principles.
Current Trends

One of the current trends is shifting of caseworker from older and established agencies to newer and experimental areas of social work. Caseworkers are now more aware of their own contribution to human welfare. As a profession it has now gained more popularity. One of the current trends is increased stress on the importance of research. Also there is growing awareness that personality and environment are interdependent.

Importance of Casework as a Method: Casework in India

Indian culture and religions advocate the need to help the poor and needy. There is also a tradition of knowledgeable individuals providing advice and support to others, for example Krishna gave advice and support to Arjun at the beginning of the Mahabharat war. The Hindu Shastra also emphasized on giving which may be in the form of wealth, knowledge and wisdom. In Buddhism help should be given to relatives and friends. In Islam alms was given by the fortunate to the State and used for welfare of needy. Christian missionaries in India also started activities which aimed at helping the poor. But these efforts were paternalistic in nature and did not aim at making the individual independent. Further, the relationship in these instances was not professional. Thus there exists an important difference between modern professional casework and traditional helping of needy individuals.

Education of social workers in India started with the training of volunteers engaged in charity and relief activities. In 1911 N.M. Joshi had established Social Service League in Mumbai. This league conducted training programme for volunteers who are at the service of people suffering from famines, epidemics,
floods and such other disasters and also who conducted welfare programmes among the poor and the destitute. The first professional social workers who did casework in the Indian settings were trained in the American School of Social Work. In 1936 Sir Dorabji Tata Graduate School of Social Work, now known as Tata Institute of Social Science (TISS), was started to impart training to those who had a University degree in the field of social service. Thus, the training for the social work was changed into a full time career oriented educational programme. Casework as a theoretical course and as a method of practice in the academic programme started from the year 1946. Initially social casework was practiced in relatively few agencies and institutions but nowadays social casework is practiced in many agencies, institutions and organisation such as hospitals, clinics, courts, industry, military organisation, family welfare agency, child welfare agency, institution for the aged, destitute, orphans etc.

**Major Landmarks in the History of Casework Development**

**Contribution of Friendly Visitor**

As we discussed earlier the term Friendly Visitors was first used in 1877 by American Charity Organisation Society for its volunteers. Citizens of England with the object of helping poor people founded this society. These people had funds to help poor and needy. They were kindhearted volunteers who visited poor families to assess their needs and to provide help, guidance and advice. They made their visits in act of charity and not expecting any monetary rewards. They collected data about the needy individuals and families and helped them after assessing their needs.
There were hundreds and hundreds of volunteers who made their visits to the home of poor and brought whatever they could in the way of understanding, sympathy, encouragement and general goodwill. The role of Friendly Visitor was educational one and goal was to improve the character through personal influence. Living advice and being model were two methods by which the visitor influenced the client and there can be no doubt that some of them did exert a wholesome personality influence in difficult personal and family situation. However, there was comparatively little consciousness or the analysis of factors at work in the relationship. At the same time it was probably through the efforts of Friendly Visitors that the concept of scientific charity evolved and seeds of social casework were sown. The visitor found that the problem of all poor people is not alike and they should not be treated in the same manner.

The term Friendly Visitors was subsequently supplemented by the term “Paid Agents”. These Paid Agents developed systematic procedures in performing their task. They collected data about the needy individuals and families and helped them after assessing their needs. Paid Agents also maintained records including personal data and the type of help given to clients. The collective experience of Friendly Visitors and Paid Agents facilitated the understanding of human behaviour.

With the development of Schools of Social Work, Friendly Visitors received training and instructions about the method of investigation, diagnosis and treatment from experienced social worker.

**Contributions of Mary Richmond**

In the previous chapter we discussed that the beginning of professional casework is associated with publication of Mary Richmond’s book “Social Diagnosis”. 
In the words of Richmond “Social diagnosis is the attempt to arrive at as exact a definition as possible of social situation and personality of the given client”. She was interested in the formation of methodology of helping clients. She visualized a diagnostic summary with following three headings:

- Difficulties defined
- Factors Causal
- Assets and liabilities

Richmond knew that the facts, which were observed and inferred, are not always scientifically reliable. Richmond tried to answer the following questions. “Who arrives at diagnosis? what are the basis of influence? how reliable is the worker’s judgment and the facts on which they are based?”

Richmond found that diagnosis is a process consisting sequence of steps in order to facilitate the worker to arrive finally at his/her definition of social situation and personality of client. The sequence of steps was as under:

- Interview with client
- Contact with his family and near ones
- Search of inside and outside sources for cooperation
- The interpretation of information collected

**Interview with Client**

According to Richmond the primary step is to know the personality of the individual and to study his/her life closely, which can be done by interviewing him/her about his/her family background, family doctor, health
agencies, schools, past and present employers, residence and neighbourhood. Interviewer’s aim is to collect information regarding the sources for further information. Richmond also described the objectives of the worker for the interview, which are to:

- give the client fair and patient hearing.
- establish mutual understanding on good basis.
- secure clues about other source of information.
- begin the slow process of developing self-help and self-reliance.

Contact with his Family and Near Ones

In the critical contact with the family, Richmond saw the need of an individual not only for assessing the personality, diagnosis of problem but also to develop a relationship with other members of the family. Richmond felt that attention should be given to family cohesion, unity of family and the capacity of family members toward affection, enjoyment and social development, children’s ambitions and aptitude, interference of relatives and difference in role were to be noted.

Search of Inside and Outside Sources for Collaboration

Outside source of information to make diagnosis included social agencies, churches, doctors and health agencies, present and former neighbours, relatives, friends, present and past employers, school and public record, etc. and inside sources like his/her willpower, confidence, self-reliance, attitude etc.

Miss Richmond recommended that the worker gain information from this outside source and he/she goes first to those sources which were likely to influence
his/her personality and the most prominent factors in client’s history.

**The Interpretation of Information Collected**

The collected data from the above sources was considered as raw material for diagnosis. Such interpretation is arrived through the careful weighing of evidence and critical comparison. Social evidence was defined as “all facts as to personal or family history are taken together indicates the nature of a given client’s in social difficulties and means to their solutions”. She also recognized that the client’s own hopes, plans and attitude towards life are more important than any other information.

Richmond made the first exclusive effort to analyse casework process. This was the first truly professional approach in casework. The contribution of Richmond has always been held in respect by modern caseworker because of many reasons. It contains the concept of self-determination which has become very important in modern casework philosophy.

Richmond’s interest was dual. On the one hand it was a social and on the other hand it was psychological. It was concluded that forces within the individuals and outside him/her influence his/her behaviour and his/her nature in the society. Richmond attempted to combine this dual interest and she suggested that there ought to be a profession called “Sociatry”.

**Contribution of Freudian Theory**

As mentioned earlier during the First World War much the influence of psychiatry became strong. Before the advent of psychiatry Social Casework was practiced as an active art. The caseworker investigated, diagnosed and administered the social services. After being
influenced by Freudian theory, social caseworker also provided individual therapy. Feelings, emotions, attitudes, repressed conflicts and the dealing with the unconscious became an integral part of Social Casework understanding and method. Gradually, social work curriculums in the West include psychiatry.

**Freudian Theory**

Today, as in the past, many social workers---not only those who specialize in psychoanalysis---draw on Freudian theory in their efforts to understand human behaviour. In 1918, the first psychoanalytically oriented school of social work, Smith College School for Social Work, was founded to teach students about Sigmund Freud’s ideas and their application to practice, particularly in the treatment of WWI veterans’ suffering from trauma due to their war experience. Freud’s influence is found in many areas of casework. His greatest influence was however on caseworker-client relationship. Previously clients were persuaded, convinced or even coerced into accepting the caseworker suggestions and ideas. But now the caseworker worker with client by listening and honoring the client’s self-expression.

Informally, a few psychoanalysts did provide training and supervision to social workers and in 1948 social workers were first accepted at the psychoanalytic institutes of the National Psychological Association for Psychoanalysis, and the Postgraduate Centre for Mental Health, both in New York. Organisations such as the American Psychoanalytic Association, which earlier had prevented social workers, dropped their prohibitions against admitting social workers.

The basic concepts of Freudian theory is as mentioned below:
**Unconscious Mind**

Through his experience with hypnosis and study of dreams, Freud found a word of hidden mentality, which he called the "Unconscious". Many of the social workers that came into contact with Freud’s concept of unconsciousness, and psychiatry began to introduce these concepts into social work.

**Ambivalence**

Thinking of men is divided into two parts and Freud noted that these two parts were often in conflict with each other. To understand the ambivalence he explained that, one could love and hate simultaneously, one could have fear and courage at the same time etc.

**The Past**

Freud observed that there were many conflicts between past experience and present attitude of a person. That is why to treat the conflict one should know the history of conflict.

**Transference**

Transference refers to any distortion of a present relationship because of unresolved (and mostly unconscious) issues left over from early relationship.

**Resistance**

Resistance refers to the resistance to interpretation of transference.

The Chief Conception of Freud are:

1) Unconscious mind is the determinant behaviour.
2) Ambivalence in feeling and attitude.
3) Past experience determines the present behaviour of the person.

4) The recognitions of the phenomenon of transference in psycho-therapy

5) Resistance to interpretation of transference to be dealt in all helping process.

Freud’s three disciples Alfred Adler, Carl Jung and Otto Rank have developed schools of their own. Adler was instrumental in establishing the first child guidance clinic in Vienna. Adler introduced the system of “individual psychology”. Jung has given analytical psychology and emphasized a relationship with the therapist and therapeutic factor. Otto Rank practiced as a therapist and wrote extensively on technical as well as on cultural aspects of psychoanalysis and gives emphasis on psychotherapeutic philosophy.

**Value of Social Casework within the Sphere of Social Work**

We know that Social Casework as method of social work aims at helping individual to solve his/her problem in the society to perform in better way and to enhance his/her own capabilities. The basic unit of society is individual. If individuals are satisfied in their life and efforts are made to minimize maladjustment then it leads to formation of peaceful society. Society is consisting of individual.

Every profession has a tested body of knowledge for it’s own growth and development. This body of knowledge should be easily understandable and communicable and should include principles, techniques, method, procedure, tools and terminology of its own. The social work as profession has developed a body of knowledge,
which include method and tools, and terminology of its own. In the sphere of social work, casework as a method demands a dual orientation. Firstly orientation in human psychology, secondly orientation in knowing cultural force of the society in which it works.

Initially Social Casework was practiced in a few agencies and institutions but it has been increasingly utilized in newer settings. Today there are many agencies, institutions and organisations, which frequently use social casework. It is practiced in hospitals, clinics, courts, industries, military organisations, family welfare agencies both government and voluntary, immigrant agencies, day nurseries and schools, adoption agencies, child guidance clinics, hygiene organisation, health organisation and others.

Conclusion

In this chapter, we have studied the concept of casework i.e. casework for individual and general welfare, basic and philosophical assumptions of casework, its functioning in the society etc. We further studied the historical development of casework in West, its roots in the form of concept of charity, then its journey from friendly visitors to modern professional caseworkers. Then we studied the development of casework in India. Contribution of “Buddhism”, “Maurya”, “Islam”, British period in historical development of casework and starting of professional social work with establishment of schools of social work in India. We also studied the impact of World Wars, Friendly visitors, contributions of Mary Richmond and Freud in the history of casework development.

Apart from the above topics we also studied about the individual needs i.e. his/her basic needs, physical
needs, psychological needs etc. and about the distress caused by non-fulfillment of needs. Then we discussed about the problems faced by individuals and families in their day-to-day life and the role of caseworker in resolving the problem, then the scope of casework in social work. Casework as a tool of dealing with individual has become an important method of social work.

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Introduction

Social Casework, a primary method of social work is concerned with the adjustment and development of the individual towards more satisfying human relations. But his/her adjustment and development depend on the use of available resources by him and within him. Sometimes due to certain factors, internal or external, he/she fails to avail existing facilities. In such situations, social caseworker by using different resources; both material and human helps the client. But before applying different techniques to the client in solving his/her psycho-social problems, he/she is required to know the theoretical framework of social casework practice. There are certain principles of social casework practice and these principles are the guidelines to work with the client. Those principles have also been discussed here. Diagnostic and functional schools of thought have been explained along with the difference between the two. Theories and models of working with the individuals have got its place in the present chapter.

Principles of Social Casework

The principles of social casework are applied in establishing close relationship between social caseworker and the client. Relationship is the medium through which changes are brought in the behaviour and personality of the client. The term relationship in

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social casework was used for the first time by Miss Virginia Robinson in her book, "A Changing Psychology in Social Case Work" in 1939. The social casework relationship is the dynamic interaction of attitudes and emotions between the social caseworker and the client with the purpose of helping the client to achieve a better adjustment between himself and his/her environment. Thus the purpose of establishing relationship is to help the client with his/her psycho-social needs and problems. The relationship between caseworker and client may be more strengthened by using certain principles. These principles are:

1) Principle of individualization
2) Principle of meaningful relationship
3) Principle of acceptance
4) Principle of communication
5) Principle of expression of feelings
6) Principle of controlled emotional involvement
7) Principle of non-judgmental attitude
8) Principle of client’s self-determination
9) Principle of worker’s self-awareness
10) Principle of social functioning
11) Principle of tuning behaviour
12) Principle of social learning
13) Principle of confidentiality

1) **Principle of individualization**

No two persons are alike in all qualities and traits. Their problems may be the same but the cause of the problem,
the perception towards the problem and ego strength differs in every individual. Therefore, each individual client should be treated as a separate entity and complete information is required to establish close relations in order to solve his/her problem from root.

2) Principle of meaningful relationship

The purpose of establishing relationship in social casework is to change the behaviour of the client or to achieve adjustment in maladjusted situation. Meaningful relationship is developed in social casework by demonstrating the interests in client. He/she is convinced of the caseworker’s warmth as an individual and conveys respect and caring for him/her. In return, the caseworker helps the client to trust in his/her objectivity and feel secured as worthwhile individual.

3) Principle of acceptance

Social caseworker accepts the client as he is and with all his/her limitations. He/she believes that acceptance is the crux of all help. It embraces two basic ideas – one negative and one positive. He/she does not condemn or feel hostile towards a client because his/her behaviour differs from the approved one. Later on, he/she tries to modify his/her behaviour step by step.

4) Principle of communication

Communication is a two-way process. There must be proper communication between caseworker and the client, which helps, in proper understanding of each other. It is the road to the identification of the client’s problem. The function of social caseworker is primarily to create an environment in which the client will feel comfortable in giving expression to his/her feelings. It depends on a proper communication.
5) **Principle of expression of feelings**

Purposeful expression of feelings is the recognition of the client's need to express his/her feelings freely, especially his/her negative feelings. The caseworker listens purposefully, neither discouraging nor condemning the expression of those feelings. Sometimes he/she even stimulates and encourages them when the expression is of therapeutic nature.

6) **The Principle of controlled emotional involvement**

The social caseworker tries to understand the client's feelings and emotions but he/she himself/herself does not involved emotionally in his/her problems.

7) **Principle of non-judgmental attitude**

The non-judgmental attitude is a quality of the casework relationship. The caseworker does not blame the client for his/her problem nor he assigns any responsibility for his/her miseries. He/she only evaluates the attitudes, standards or action of the client.

8) **Principle of client self-determination**

The client's self-determination is the practical recognition of the right and need of clients to freedom in making his/her own choices and decisions. But this right is limited by the client's capacity for positive and constructive decision making.

9) **Principle of self-awareness**

It means that caseworker should known his/her own strengths and limitations in dealing with client's problems. If he/she feels that the problems of the client is beyond his/her capacity, the client should be transferred to the appropriate authority.
10) **Principle of social functioning**

Social functioning means the functioning of the individual in his/her social roles and relationships, with emphasis on his/her relation to the environment. The caseworker tries to assess the roles of the client and his/her capacity to perform these roles.

11) **Principle of tuning behaviour**

Man has body, mind and intellect as three instruments of experiences through which life constantly pulsates. These three instruments have their own distinct characteristics in each person. Hence each person has unique personality. There is need of tuning three instruments for right perception and thinking. The social caseworker does it.

12) **Principle of social learning**

Social learning is a pre-requisite to the changes that are inevitably involved in problem-solving. The social learning processes involves (1) arousing and focusing attention and concern, (2) organising and evaluating the problem and planning future action, (3) searching for and acquiring new information, (4) providing opportunities to the client for new experience.

13) **Principle of confidentiality**

Confidentiality is the preservation of the secret information concerning the client, which is disclosed in the professional relationship only.

**Schools of Social Casework**

In the beginning the aim of social work was to help but later on due to influence of psychology and psychiatry, personality and behaviour treatment have also been
added as the objective of social casework. Basic orientation of social caseworkers are of different kinds and with the result diagnostic and functional schools appear in the practice of social casework.

**Diagnostic School**

The diagnostic school is basically founded on the Freudian theory of psychoanalysis. Mary Richmond gave shape to these thoughts in the form of a school. She wrote first book on social casework i.e. Social Diagnosis in 1917. The other contributors of this school were Marion Kenworthy (New York School of Social Work), Betsey Libbey (Family Society of Philadelphia), Gordon Hamilton, Bertha Reynolds, Charlotte Towle, Florence Day and Annette Garrett.

The Diagnostic school is based on the following main foundations.

**Principles of Diagnosis**

Social casework help is based on the understanding of each client individually and his/her problems. It is essential because it gives a realistic basis for differentiation, and a base for the improvement of the client’s social situation and personal satisfaction and adjustment.

The diagnosis is based on the following principles:

1) The diagnostic process consists of a critical study of a client and his/her situation and the trouble concerning which help is sought or needed for the purpose of understanding the nature of the difficulty with increasing details and accuracy.

2) Diagnosis is based on the knowledge of the worker about the interplay of social and psychological factors affecting the client.
3) The knowledge of interaction between inner and outer forces influencing the client makes the process of diagnosis helpful and therapeutic.

4) Every problem of the individual should be understood in the light of multiple factors theory.

5) In the initial stage also, relieving of pressure of stresses and strains on the client, helps the caseworker to arrive at a proper diagnosis.

6) The initial appraisal of personality and motivations and their significance in the development of client’s problem provides the basis for planning the treatment of the client’s problems.

7) For the solution of the problem of the client, it is of utmost importance to gain some knowledge of his/her current capacity to work and to recognize the motivating forces in his/her behaviour.

8) The understanding of the psycho-dynamics and the pathological symptoms of the personality of the client provides the basis of determining the kind of help that can be appropriately offered.

**Principles of Treatment**

The main objective of the treatment is of alleviating the client’s distress and decreasing the malfunctioning in the person situation system. The above objective is achieved by enhancing the adaptive skills of his/her ego and functioning of the person situation system. It is based on certain principles:

1) The forces of the discussion in the interview is centred on the problem and ways of resolving it. Attention is paid to know the obstacles both situational and behavioural that stand in the way of solution.
2) Nature and extent of both social and psychological factors differ in each situation.

3) Treatment goals and techniques are planned after a careful study of the particular needs of the client.

4) The success of the treatment programme is based on the utilization of the relationship purposefully.

5) Social therapy and psychotherapy are the two broad classifications of social casework treatment.

**Use of Techniques**

The techniques include encouraging, emotional discharge, reassurance, support, suggestion, guidance and direction, provision of new experiences, clarification, interpretation, etc.

**Use of Relationship**

The relationship is the medium of treatment through which client is enabled to find new ways of perceiving his/her problems and of handling himself.

**Functional School**

The functional approach to social casework practice was developed by the Faculty Members of the School of the University of Pennsylvania. This approach is based on the personality theory of Otto Rank. According to Functional School social casework is a method of helping people through special services given by social agencies in such way that the experience of using such services may be psychologically constructive. Thus the functional school of social casework has two inseparable aspects:

1) Potentials for help to a person is inherent in the existence of service. Inspite of the differences in the clients and ways of using of agencies services, the kind of service an agency gives and their
purposes remain the same.

2) The use of agency service gives psychological experience that differs from the form of another kind of service regardless of the similarity of problem in the people using the two services.

**Diagnosis**

The diagnosis is most effective which is related to the need for some specific service and which is developed in the course of giving the service. This school does not recognize the significance of understanding the total situation of the client. Functional diagnosis recognizes that people cannot be categorized and a plan with a specific kind of service may deny potential growth and change. In establishing a diagnostic conclusion each individual makes his/her own diagnosis of himself. Diagnosis is a way of engaging in a human relationship process, which frees the help seeker to determine his/her own goal for himself/herself. The client is the centre for change capable of continuous growth and development.

**Treatment**

Functional school prefers to use the term helping process, rather than treatment. Social caseworker is not responsible for treating someone who is the passive recipient of treatment because the school believes that the centre for change resides in the client itself. Social casework through the agency service seeks to release power for improved social functioning.

The process of establishing and using a diagnosis serves as the part of casework helping. Total social casework process includes three stages or three time phases: beginning, middle and ending.
In the beginning phase, the caseworker establishes relationship by removing all the hindrances that come in the way of understanding the client or by the client to the caseworker. He/she also tries to understand the client’s needs, desires, motives, interests and hopes for future. He/she also divides the problem of the client and put them in order of priority. The client starts to take services from the agency. In the middle stage the responsibility of the client increases and the relation becomes more close. The last stage is of separation of client from the caseworker. It is a difficult process. Sometimes client does not like to terminate the service due to emotional touch with the worker. The social caseworker with all his/her abilities and capacities tries on one hand not to harm his/her feelings and on the other hand the client may go happily. Caseworker gives him/her a chance to become conscious of his/her readiness to leave, so that he/she can leave the agency without and fear.

**Difference between Diagnostic and Functional School**

1) Diagnostic School follows the theory of personality developed by Sigmund Freud whereas functional school is based on the theory of ‘will’ developed by Otto Rank.

2) Diagnostic School believes that personality is a composite of many interacting forces, reacting not only in each other but also influences the social environment favourably or unfavourably. The strength and the nature of balance of these forces are the result of individual’s experiences primarily of his/her relationship to parents and the other person. The functional school also believes that the process of development of personality takes place within the interaction of inner needs and environmental experiences, but such an interaction
3) According to diagnostic school, the ego is the chief of psychic energy, the strength of which is determined largely by the favourable or unfavourable course of one’s psycho-social environment. But according to functional school the ego (self) is the result of the creative use of inner and outer experience through the ‘will’ and is not the product of interaction of inner and outer forces.

4) In the diagnostic view, the goal of treatment is to increase the individual’s ego capacity whereas functional school tends to direct his/her effort toward helping the client to release his/her inner capacity of feeling, organising and acting.

5) Total information about the client’s ego functions, total personality, motivating forces, reality pressures and his/her current feelings is essential according to diagnostic view for enabling the client to take part in the therapeutic relationship. Functional school gives emphasis on the client’s feelings in the immediate situation which includes both his/her problem and the casework relationship through which he/she may solve the problem, other information are secondary.

6) Diagnostic School believes in doing planned and goal directed help to the client –both psychological and social. Functional school gives full freedom to the client to give direction to his/her own process of change. Agency services are made available.

7) The Diagnostic School accepts responsibility for apprising client’s capacities and weakness and for organising and arranging measures for self development. The functional school believes in the
client’s right for choices and goals because of the constructive value of the use of self.

**Theories of Social Casework**

Theories or models give the direction to the caseworker to handle the client in a way which is suited according to the client’s need and social conditions.

1) **Psycho-social Theory**

Psycho-social theory was propounded by Hamilton. She published an article on “The Underlying Philosophy of Social Case Work” in 1941 in which the word ‘diagnostic’ was used to express psycho-social problems. In this approach, diagnosis and treatment are directed toward person in situation. The client is seen in the context of his/her interactions and transactions with the outer world. For proper diagnosis and treatment client’s social context must be understood and mobilized. Treatment must be differentiated according to the need of the client. Three stages are involved in psycho-social approach.

**Psycho-social Study**

Social Caseworker starts his/her work with the knowledge of the needs of the client. He/she on the basis of the needs, assesses what kind of help his/her needs. He/she also finds out the perception of the client about his/her own problem, and his/her desires about the kind of assistance to be provided. He/she, then, himself/herself tries to arrive at his/her own understanding of what the client’s trouble is, what factors contribute to it and what type of service is needed to improve his/her ego strength and adaptability.

**Diagnosis**

On the basis of the collected data and available material social caseworker tries to assess the nature of client’s
trouble contributing factors and where changes can be brought in his/her behaviour without much efforts.

**Treatment**

Social Caseworker gives much emphasis on indirect treatment or environmental modification. He/she intervenes actively in the environment and provides necessary concrete help to the client. He/she provides financial help by locating such agency, proper health care and also educational resources. Direct treatment is also provided for the ventilation of the client to accept concrete help. Psychological support, counselling, suggestions, etc. techniques are used to establish close relations with the client.

**II) Behaviour Modification Theory**

Behaviour modification theory is based upon the principles of learning and conditioning propounded by Pavlov and Thorndike. The researches of B.F. Skinner helped to develop the behaviour modification approach further. The behaviouristic theory viewed problem as essentially the result of a failure to learn necessary adaptive behaviours and competencies and/or the learning of ineffective and maladaptive behaviours. It may happen due to conflicting situations that require the individual to make discriminations or decisions of which he/she feels incapable. The maladjusted person has learned faulty coping patterns, which are being maintained by some kind of reinforcement, and he/she has failed to learn needed competencies for coping with the problem of living.

**Techniques of Behaviour Modification**

The following techniques are used for behaviour modification:
**Simple Extinction**

In this technique, the reinforcement is removed to eliminate a maladaptive pattern of behaviour. This is especially helpful where maladaptive behaviour is being reinforced unknowingly by others. Through this technique, learned behaviour patterns are made weaker and disappear overtime.

**Systematic Desensitization**

It is a technique to deal with a wide variety of maladaptive emotional behaviours, particularly involving anxiety, irrational fears and phobias and other forms of dysfunctions i.e. neurotic tendencies. There are five basic steps in systematic desensitization: (1) assessment, (2) construction of anxiety hierarchies, (3) training in muscle relaxation, (4) imaginary training, and (5) implementation.

**Impulsive Therapy**

In this technique, instead of banishing anxiety, the social caseworker attempts to elicit a massive flood of anxiety. With repeated exposure in a safe setting where no harm is felt by the client, the stimulus loses its strength to elicit anxiety.

**Assertive Therapy**

It is needed to develop more effective coping mechanism. In such therapy, the opportunity is given to the client for role-playing.

**Aversion Therapy**

This technique is used for the modification of undesirable behaviour by the method of punishment. Punishment may involve either the removal of positive reinforcements or the use of aversive stimuli.
Family Therapy

Family is a system which is composed of three sub systems: marriage, parenthood and siblings. There are continuous interactions and transactions among these sub systems. It is quite often observed that sometimes relations may not be harmonious and at that time outside help is required to bring the family on proper track.

Family therapy is based on the assumption that marital relationship system influences the family adjustment and therefore it is necessary to understand the nature of marriage. It is also true that the nature of the marital equilibrium affects all family members but its effect differ on each of the member. The development of children are affected also by the nature of the marital equilibrium because they interject the parents as models and guides. Further each developmental phase in the family has stressful situation which requires new relationship.

Family therapy is significant because whenever one member of a family is in trouble, all are in trouble. Communication in the family is the channel through which members of the family interact. Whenever there is problem in the family communication become faulty or dysfunctional.

In family therapy, the diagnosis is confirmed on the basis of various types of interviews with the client and family. The social caseworker tries to know family structure, and the processes in the family responsibilities, roles patterns of daily living, role performance, role relationship, dependency, separateness, independence level, capacity, tolerance and control of feelings, intimacy, anxiety, regression,
taboo, etc. He/she records the family history and analyses its contents.

The social caseworker uses most of the techniques in one to one treatment, such as guidance, advice, education, suggestion, clarification, and interpretations.

**Self-control and Self Management Therapy**

Helping clients to help themselves is an old casework phrase. Self-control refers to the ability of individuals to change behavioural patterns that they or others perceive as harmful. The role of social caseworker in this process is to help the client to develop the knowledge about how, when and where to use strategies for change. The worker acts as an instigator and motivator to help the client to start the programme and have motivating force to complete it. A multi-step guide has been presented by Watson and Tharp to develop a self-control plan.

1) List a current dissatisfaction.

2) Select one particular problem of behaviour that occurs in a particular situation.

3) Describe the effect of problem on behaviour.

4) Be as precise as possible in stating the behaviour that occurs and the situation in which they occur.

5) Gather baseline data. Count every instance of target behaviour and keep a record of count.

6) Catalogue enforcements. Answer three questions for each potential reinforcer. (a) Is it a reinforcement or specially formed, (b) Is it a strong reinforcer? (c) Is it accessible?
7) List and attempt to verify through observation possible antecedents to problem behaviours. Devise a plan for intervention for altering antecedents.

8) Identify the emotional components of the problem and plan for desensitization.

9) Select one of the plans that you have developed.

10) Continue to collect data on the problem behaviour. Make a graph of the data to determine that the intervention plan is working.

11) If the plan is successful, consider termination of relationship.

**The Problem Solving Theory**

This theory was propounded by Helen Harris Perlman in the book “Social Case Work: A Problem Solving Process”. This model stands firmly upon the recognition that life is an outgoing problem encountering – problem solving process. Every person is involved every time in coping with his/her problems. Sometimes he/she is capable of coping and sometimes fails to resolve the crisis situation. Through problem solving process individual or family is helped to cope with or resolve some difficulty that he/she is currently finding difficult to solve. Thus the primary goal of problem solving model is to help a person cope as effectively as possible with such problems in carrying social tasks.

In the initial phase the attempts are made to engage the client with his/her problems and to do something about it in a working relationship with the agency. The problem solving process starts at once, from the first movement with treating the person. The client is not treated for his/her problem but he is treated for the purpose of helping him/her to know himself/herself i.e.
strength and weaknesses and how to remove those weaknesses.

In short, the problem-solving casework process involves the following steps:

1) It tries to release, energize and gives directions to the client’s motivation for change.

2) It tries to release and exercise the client’s mental, emotional and action capacities for coping with the problem.

3) It tries to find and make accessible to the client such aids and resources as are necessary to the solution of the problem.

**Role Theory**

Role is mainly behavioural concept. Role may be seen as a product of an interplay between (i) individual member’s needs and resources, (ii) the solution in the social network, and (iii) the forces acting on the social network from the environment. When there are internal or external difficulties, which are beyond the capacity of an individual, he/she feels the problem and fails to perform his/her role.

Social Caseworker with such clients suggests new ideas and ways of facing the problem and suggests solution for a difficulty that the external factors have encountered. He/she offers facts, which relate to his/her own experience for understanding the problem. He/she gives suggestions in terms of examples, and tries to explain how suggestion would work if followed by the client. He/she mediates between other members, attempts to reconcile disagreements, and relieves tension in conflict situation. His/her efforts are also directed to keep communication channels open by
encouraging others to participate in the business of the client.

**Rational Emotive Therapy**

This technique is used in the area of modifying irrational elements control over the self. Some of the irrational ideas at the core of emotional and behavioural problems are as under:

1. It is dire necessity for an adult to be loved by everyone for everything he/she does.
2. Certain acts are awful or wicked, and people who perform such acts should be severely punished.
3. It is horrible when things are not the way one would like them to be.
4. It is easier to avoid rather than face life’s difficulties and self-responsibilities.
5. One needs something stronger or greater than one self on which to rely.
6. Human happiness can be achieved by inertia and inaction.
7. One has virtually no control over one’s emotions and one can not help feeling certain things.

Rational Emotive Therapy includes four stages:

1. **Presentation of Rationale**
   
   The worker attempts to elicit the problems or significance of self-statements in general without mentioning the client’s problems.

2. **Overview of Irrational Assumption**
   
   The worker presents a number of irrational self-statements before the client and tries to makes
the client realize that his/her statements are irrational.

3) **Analysis of Client’s Problem in Rational Emotive Terms**

Client is made aware of his/her problem rationally and is provided with the knowledge of how he/she has labeled the event.

4) **Teaching the Client to Modify Internal Statement**

In this stage the client is taught to change his/her opinions and attitudes which are anxiety provoking.

**Conclusion**

In this chapter we have examined the similarities and differences between social casework, counselling and psychotherapy because these three methods are used in providing services to the individual client. There are different principles, which are significant in the practice of social casework, have been analyzed here. If the social worker working with the individual follows these principles he/she will be more useful to the client and will be able to perform his/her job efficiently. There are two schools of approaches in social casework—diagnostic and functional—are practiced in social casework. These have been highlighted with their main features. Certain important theories or models of social casework practice have also been narrated in this chapter.

**References**


Basics of Social Casework


Introduction

So far we have seen that social casework addresses itself to the solution of problems that block or minimize the effectiveness of the individual in various roles. In a society of rapid change and development, the scientific base and the knowledge and philosophical assumptions regarding the worth and value of the individual have not changed. However, new theories and new models of practice have developed in response to the experience of practitioners to the many situations they encounter. As Florence Hollis states in her article, “The Psychosocial Approach to the Practice of Casework” (1972), that casework concepts are dynamic, they change, grow and develop as they are shaped by new experience and knowledge.

Brief History of the Casework Process

Mary Richmond may be thought of as the conceptual founder of casework. In 1917, in her book, “Social Diagnosis”, she described the three basic categories in the theory of social work practice. They are (a) Investigation or Fact finding, (b) Diagnosis, and (c) Treatment. The process, according to Richmond began with the gathering of evidence or investigation followed by a critical examination and comparison of evidence. The second category was the diagnosis, wherein an attempt was made to arrive at a definition

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of the social situation, knowledge of the causes and personality of a given client. Last came its interpretation and the definition of the social difficulty. Richmond used the word diagnosis more frequently when describing the whole process; she felt that the word diagnosis was a better word than investigation as the former belonged to the end of the process. However, social work writers like Florence Hollis, Evelyn Davison and several others expressed that the term diagnosis had been borrowed from medicine and therefore gave a false impression of the caseworker. It led to the necessity for discovering the etiology of each “illness” as though it were some internal infection. Then treatment was focused on dealing with some internal bacterium that was causing some symptoms of fever and aches and pains. The caseworker does not diagnose pathology and prescribe a remedy, but working alongside the client, seeks gradually to come to an understanding of the client and his/her problem. Diagnosis in medicine, according to the critics suggests a completed appraisal before treatment, which may not be true in casework. In casework both diagnosis and treatment proceed together. Since client worker relationship is the medium through which help is offered, treatment begins at the moment when the client and the worker first meet, and continues as long as the case remains active. Since clients and problems are ever changing, diagnosis in casework must also be a continuing process. Besides when treatment was used as the almost partner of the term ‘diagnosis’, it was felt that the worker manipulated the client- doing something to the client rather than with him/her. The idea of partnership was lacking as also the respect for the client’s right to direct his/her affairs.

Caseworkers for several years attempted to use the
knowledge about the causes. It served as an aid in understanding the development of behaviour. It was also used as a substitute for intervention knowledge on the assumption that understanding how a problem came about also provides information about how to change that problem. For instance, understanding a body of knowledge such as the Freudian theory was sufficient for carrying out treatment or intervention. Very soon casework critics realized that causal knowledge is not often related to treatment or intervention knowledge rather it cannot be equated with treatment. What was needed was to have a separate and an entirely different set of principles and procedures to carry out an intervention. Several writers like Gordon Hamilton, Hollis, Turner and others evolved various sets of procedures and techniques of intervention for guiding change in clients.

Gradually the approach faced changes as it was influenced by the socio-economic events of the 1920’s and 1930’s, as well as by the growth of social theory. It redirected its attention to the fact that individuals live in a world of here and now, or in a series of situations. Living in a series of situations means “interaction is going on between an individual and other persons.” Subsequently the use of the principle of interaction brought with it the dynamic conception of social casework as a process of helping.

**Phases in the Social Casework Process**

Study, assessment, intervention, termination and evaluation are the main divisions of the social casework process. They are the threads of the process that will continue to be interwoven throughout the social casework process. We, as social workers would logically place study, assessment, intervention, termination and
evaluation in that order. Actually these steps are not performed in sequence, and as Gordon Hamilton said they are woven in and out, one process paralleling another. She further explained that we made a tentative or temporary diagnosis in the beginning and even planned out a treatment. However, our minds go on drawing inferences and we continue in the preparation of the study to understand the client better. Intervention or treatment begins with the first contact. According to Skidmore the study process is treatment when it helps the client to clarify the problem for him or herself, and to make changes in or her life situation resulting from this understanding. Since our assessment is on ‘persons’ and not ‘problems’ and while we are trying to understand the nature of the problem, we are also trying to understand what sort of person has the problem. So understanding the person is a continuous process. As long as the assessment continues the phases of study, intervention, termination and evaluation continue to recur. The phases may overlap and may proceed simultaneously. However, there tends to be an emphasis in time on one or the other. Although, specific stages are not the rule, the processes, though interwoven, should be stated in orderly stages of procedure or the case may lose its focus and may drift.

**Study, Assessment, Intervention, Termination, Evaluation and their Applications to Social Casework Practice**

In the study phase the client presents the problem. This phase begins with the caseworker involving the client fully in the process. The essential functions of the worker are to facilitate the client to participate and interact in the process.
This stage is crucial because the client makes the important decision of whether to enter into the treatment. Whether to accept or decline a service is the client’s decision. The client, not the worker makes the choice. So the initial contact needs to be fruitful and constructive to encourage the client to continue in the service.

**Client-Worker Communication**

The worker’s attitude is an important controlling factor in what the client decides. At this juncture, the worker is guided by the basic values of social work. Showing respect for the worth and dignity of the client profoundly influence the worker’s practice with individuals. Worker believes in the ‘worth’ value which places the individual in a position of ‘eminence’. Where a client is placed above objects and institutions, worth caring for because he or she is an individual. While communicating this value, the worker reinforces the problem-solving capacity, worth and self-affirmation in the client. Worker also applies his/her skill and knowledge in helping clients to decide, to express individuality and ambivalence in socially approved ways. This helps the client to achieve social enhancement and personal growth.

It is the first task of the worker to hear the client’s description of his problem, catching not only the words but also their meaning—what is said and what is unsaid are important. Mary Richmond described the first interview in the book, ‘Social Diagnosis’ as an opportunity for a full and patient hearing and for getting an idea of the client’s attitude towards life. A sense of leisure, even within the limited time, conveys to the client that the worker regards him as a person of worth to whom the worker wishes to give the time that is needed for
full understanding. A rapport is established where in the worker is natural, outgoing, and at ease. Worker takes definite steps to establish the so called emotional bridge over which factual data regarding the client and his/her problem pass to the worker and back, over which interpretations and guidance pass from worker to the client.

Much of this type of communication takes place through nonverbal or para verbal means—nods, smiles, and an attentive posture. The worker usually tries, by giving the client an empathetic hearing, to lessen anxiety and give the client the feeling that he or she is in a place where help will be given. Remarks such as “You are looking well today” or “I can understand how difficult that must have been” or “Such feelings are natural” are some illustrations.

Two factors are important in this stage—the client’s trust in the worker’s competence and his/her trust in the worker’s goodwill. The way the client sees the worker depends a great deal on the worker’s true interest in helping the client, his/her warmth and his/her acceptance of the client. The worker’s way of greeting the client, his/her tone of voice, facial expression, and posture, as well as his/her verbal expression and the actual content of his/her communications will all contribute to how the client feels about the worker. The worker will have to show his/her competence by understanding the client’s needs and feelings, by his/her knowledge of resources and by the skill with which he/she enables the client to communicate. The emphasis during the interaction is on the ‘here and now’ and on the problem. The problem may not be as what is seen by the worker but as experienced at the moment by the client. This relationship, which is established between the two, is therefore a central
means of help in casework. Perlman describes it as 'an attitude of attentiveness, respect, compassion and steadiness' and adds, “It is this demonstration of sympathetic attitudes and intent that, more than words, encourage the client to begin to tell his/her troubles.”

**Understanding the Client**

Study basically involves three main activities, which will help in understanding the client:

a) Ascertaining the facts;

b) Pondering their meaning; and

c) Deciding upon the means of help.

**Ascertaining the Facts**

According to the Oxford Dictionary 'a fact is a thing certainly known to have occurred or to be true, a datum of experience.' Facts may be a present fact or fact of history, it may be tangible or intangible. All these facts are important in casework often the intangible ones most of all. The next issue that we need to address ourselves is: What facts do we really need in order to help? Data on the client's feelings and emotions, communicated in the interview are of great relevance and provide important clues regarding the problem. It also helps in understanding the way the client perceives the problem and the way the client has handled the problem in the past. A client cannot be isolated from the family. Study of the family gives a clear insight into the relationship and interactional pattern amongst the family members and more importantly between the client and the family.

There are three aspects on which the worker may focus the study of the client’s family:
1) The influences in the family, which shaped the early years.

2) The way the family relates to the problem and the client.

3) The way it reacts to the worker’s intervention.

Such data are useful for assessment purposes and for decisions on treatment goals.

The amount of information, which a worker needs in order to help his/her client effectively, varies greatly. In some cases long and detailed exploration may be essential, in others it may be unnecessary. The casework skill here is the ability to determine what each case requires.

To illustrate: For any child care officer, when planning to receive a child into care, particularly if this is likely to be long-term, it is essential to have a thorough understanding of the child’s home background and of the kind of life experience he/she has had so far. Worker, therefore, needs to understand what is likely to be relevant in any problem, which falls within a given category.

**Tools and Techniques in the Study Process**

Interviews with the client and those significantly involved in the situation can motivate, can teach, can secure information and can help the client to bring out things, which are bothering him/her. It is also one of the best ways of observing a person’s behaviour. Records and documents also have a special place. Collateral contacts are also helpful as these are contacts other than the client or his or her immediate family, for example, schools, hospitals, employers and relatives.
Assessment

Assessment is the understanding of the psychosocial problem brought to the worker by the client. Assessment means to ‘know through’ or recognizing or understanding thoroughly; it attempts to answer the question ‘what is the matter’. As Hamilton says ‘it is a realistic, thoughtful, frank and “scientific” attempt to understand the client’s present need. Assessment begins with a further elaboration of the problem by the client giving the worker a better perspective and understanding of the problem. As the case progresses and more information are added, the initial impressions are established, changed or even rejected. There is a circular quality about assessment. It never stops during the casework process. As Skidmore and Thackeray say that it is fluid and dynamic as it is ever changing, beginning at study and continuing to termination.

Drawing of tentative inferences begins with the first interview and observation continues throughout the case. All skills rest in knowing what to look for, what to disregard and how to review the findings in the light of the present data. As one moves along with the client to explore, the meaning of the facts becomes clearer. When one asks relevant questions, helps the client to bring out the necessary data, whether he/she is telling about his/her current situation, his/her life experience, or his/her purposes in using the agency, whether he/she arranges with us for a home or collateral visit or for an interview between the worker and another member of the family, one comes to an understanding of the problem and the person who has the problem.

Tasks of the Worker

One of the tasks of the worker in this phase is to arrive at causes and this means a more precise definition
and a description of the problem. For example, when
the client tells the worker that he is not able to get
along well with his wife, we note this as an instance of
‘marital discord’ which need to be further defined and
described. However, as a complete definition of the case
is not always possible and final, the assessment needs
to be reviewed from time to time.

Another task of the worker is to establish causal
relationships. Use of causal knowledge focuses on
answering the question, Why did a given state of affairs
come about? Thus, a caseworker might use such
knowledge to understand how and why a particular
individual developed as he or she did. For example, the
boy runs away from school and does not return home
because he is jealous of his younger sibling, or the
child’s aggressive behaviour was because of his early
rejection by his mother. Here we are looking at the
interplay between the client and other people and the
interactions within them in order to understand how
change in one part may affect another part. In other
words we are looking at the causes of a specific
situation.

We do not seek to know the past because we feel that
the past is structured in the present. Failures in
adaptation in the past are usually carried over and may
be seen in the client’s functioning in the present
situation even in the interview itself.

The worker is constantly making a review of the
strengths and limitations of the client and assessing
how the client is coping with the situation. Assessment
therefore refers to the analysis of strengths, capacities,
limitations, motivation and opportunities of the client.
Eventually the net result of assessment guides the
worker in planning out the intervention.
Role of the Worker

The role of the worker is essentially that of a knowledgeable person. The worker in a helping role applies his or her knowledge of life situations and understanding of human behaviour. A thorough knowledge of Freud’s personality theory may be essential. The functioning of the many aspects of the interacting forces such as id, ego and superego, including how the individual’s defences operate is considered of primary importance in assessing the client’s capacity to deal with the problem and the extent to which he/she is contributing to his/her own problem. Any body of knowledge that focuses on understanding human behaviour, whether in terms of personality or society becomes essential. This is the reason why we study the subjects in our courses — dynamics of human behaviour and individual and society.

We also need to understand the nature and dynamics of role expectations as they influence the individual’s shaping of his/her own behaviour, his/her expectations of how others will act, his/her interpretations of their actions and consequently his/her response to their actions and their response to his/her.

An assessment does not result in categorization of individuals or in labeling of problems. It further facilitates the worker to use psychosocial classifications say for example, according to socio-economic class, which is often represented by education plus occupation and income or physical disease for which the classification is arrived at by the doctor or breakdowns or inadequacies in social functioning which may be classified into, for instance, parent-child adjustment problem or learning problem. Classifications may be kept flexible keeping in view the dynamic and changing life situation. Questions, comments and in many non-verbal
ways, the worker communicates to the client to further elaborate the problem as may be required for intervention. A mutual agreement is maintained between the worker and the client. Goals are set according to the client’s needs and the availability of services.

**Intervention**

Technical definitions of “intervene” as given in Webster’s Dictionary include “to come in or between by way of modification” and “to come between in action”. Intervention knowledge would include that knowledge which helps caseworkers bring about change in those situations with which they are concerned. This knowledge focuses on the questions, What can be done to modify this situation, and will it be effective?

Intervention begins with the set of goals as decided together by the client and the worker. Goals, as mentioned earlier are determined by the client’s needs and the availability of external resources if the services within the agency are not available. The ultimate objective of the worker is to reduce the client’s distress and decrease the malfunctioning in the client’s situation or to put it positively as Hollis says it is to enhance the client’s comfort, satisfaction and self-realization. Here we must look at client motivation and client strengths and at how the situation can be modified or changed.

According to Skidmore and Thackeray, Intervention is guided by a set of principles, which are as follows:

1) The client’s right to decide his or her own course of action. Worker considers the limits of the client’s capacity to make sound choices. This is encouraged and respected by the worker, knowing that one small achievement can be a stepping-stone for further development.
2) Acceptance of the client’s capacity to change and that he/she can and will utilize his/her resources to improve.

3) Social work relates to strengths rather than sickness or disorder. Limitations are handled and recognized realistically.

4) Knowledge about the client’s family and the various situations related to it are used responsibly for the welfare of the family. The worker shares this information appropriately with the knowledge and consent of the client.

5) Worker is responsible not only to the client but to him or herself, the agency, the community and the profession.

**Categories of Intervention**

Intervention can be of three types: a) Direct, b) Environmental modification, and (c) Administration of a practical service

a) By direct methods of intervention is meant a series of interviews carried out with a purpose of helping the client make constructive decisions, maintain an emotional balance and reinforce attitudes favourable to growth and change. They are called direct as they involve face-to-face interaction. These include counselling, supportive techniques like acceptance, assurance, and facilitation of expression of feelings, accrediting and building of self-confidence, and being with the client. Counselling techniques are inclusive of the supportive techniques as in the beginning phase of the client worker communication, use of supportive techniques is necessary for a professional relationship. However, as Grace Mathew says they need to be
considered as two sets of techniques as supportive techniques and not always followed by counselling techniques even though counselling techniques are always preceded by one or more supportive techniques.

Counselling is intended to help a person in a rational way to sort out the issues in his/her situation, to clarify his/her problems and conflicts, to discuss the various options and help make choices. Counselling, to some extent is an educational process and is used only for individual counselling that calls for professional training, education and experience. Some of the important counselling techniques are reflective discussion, giving advice, motivation, clarification, correcting perception, modeling, anticipatory guidance, role playing, reality orientation, partialisation, interpretation, universalisation and confrontation. (For more details of these counselling techniques read the book, “An Introduction to Social Casework” by Grace Mathew.)

Supportive techniques: Acceptance, which is a basic technique of helping, is conveyed through words and the overall behaviour is visible to the client. Further, it is characterized by the way the worker demonstrates warmth and genuineness to the client. The way the client is received and listened to, is important in creating a feeling of being accepted. One way to accept the client is to empathize rather than sympathize. Sympathy is the feeling of concern, compassion or sorrow, while empathy refers to the ability of entering into another person’s ‘shoes’ or mental state and to feel the latter’s feelings. Worker has to guard himself or herself from sympathizing with a client.
Assurance is a technique used by the worker to help the client understand that his/her feelings are not judged and that the worker is not shocked at hearing the client expresses feelings of hatred, jealousy, resentment and anger. The worker can make statements that are assuring like “I can understand how you feel” or “it is natural to have such feelings in such circumstances”.

Facilitation of expression of feelings is a technique of helping the client to vent his/her feelings. Strong feelings that are bottled up can create blocks in thinking. In such cases it is essential for the worker to help the client to express and the worker acts as a prodder and prompter.

Accrediting and building of self-confidence refers to the worker pointing out to the client his/her strengths and giving him/her due credit for the tasks performed. This helps the client build up his/her confidence.

Being with the client is a technique that is essential when the client loses confidence or is weighed down with anxiety and is unable to make decision or carry out his/her tasks. In such instances the presence of the worker will serve as a support.

b) According to Hamilton environmental modification refers to all attempts to correct or improve the situation in order to reduce strain and pressure. The emphasis here is on modifying the situation. This method is often referred to as an 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. For example, the client
may be encouraged to join a recreational or other group, so that he/she may be able to function better, or arranging programmes to reduce strain for the slow learners for whom competitive situations are to be avoided.

c) Administration of a practical service as Hamilton says is one of the oldest and best known of the casework methods of intervention. In this method the worker helps the client to choose and to use a social resource or service provided by the agency. Many times the client knows what he/she wants, but does not know where or how to get it. The client is served in one’s own agency or sent to another agency where he/she is best served. Providing material help, legal aid, medical care and arranging for camps are examples of practical services. The worker needs to have a thorough knowledge of community resources, use them selectively and economically.

**Termination**

Termination as used in social work means the ending of a process that began when the agency agreed to enter into the interventive process. The processes of study, assessment and intervention do not continue forever. The worker and the client together understand and plan out termination.

Termination is also the stage when the client can look back with satisfaction on what has been accomplished. Worker takes the initiative, outlines realistic goals, confirms the importance of what the client can do and is expected to do in resolving the problem. Termination in other words is the signal that the worker uses to confirm that the worker has confidence in the client’s
ability to learn to cope with situations and to grow. The role of the worker is of an enabler and also as a resource for the client in the present situation.

Termination planning removes certain wrong notions that arise in the client about shifting the responsibility to the agency or to the worker, thus avoiding the feeling of dependency and false hope by some clients. As the relationship gradually comes to a close, the worker reviews the total number of gains made in the interventive process. This review, based on worker’s observations and client’s contributions will also include a self-assessment by the client. This phase is basically highlighted by the reassurance of the client in his/her readiness and willingness to function more effectively.

**Evaluation**

Evaluation is the process of attaching a value to the social work practice. It is a method of knowing what the outcomes are.

Evaluation is done for three important purposes, which are:

1) To let the agency and the worker know if their efforts have brought fruitful results in the service provided.

2) For public relations.

3) To build a case for promoting funds.

Casework practices need to be evaluated from time to time. This subject needs to be tested and researched and most importantly needs ongoing validation. They need to be proved to the public that they are effective and beneficial to the clients. Casework practice should be subjected to critical review. Workers need to be held
accountable for what they do and for their social work competence. Workers need to win approval from the public for their programmes. They may sometimes have to be told that their services are overlapping and ineffective. Workers have to enhance their own image and also of the agency to develop public relations. The clients need to give a feedback on the effectiveness of the services.

**Recording**

Recording is important as it publicizes to the public about the efficiency of the services. Facts have to be gathered, organized and recorded for measurement of results.

**Case Illustration**

**Study**

Suresh was a twelve-year-old boy who had problems of lying, stealing and cheating in examinations. His overall performance in school and particularly in class was far from satisfactory. He also had a behaviour problem, which involved hitting other children, kicking various objects in the classroom, and swearing when other children hit back, or when the teacher corrected him.

Suresh belonged to a middle class family, which consisted of his father, Ramesh, mother Saundarya and one sister Seema, two years younger to him. Ramesh worked as a driver in a private firm and his job seemed demanding. The children rarely saw their father, leave alone talk to him. Saundarya, his mother was sick most of the time, looked weak and lethargic. She could barely manage the home and take care of the children. As a result the home and the children were badly neglected.

Suresh found it difficult to relate to his mother as she was in bed most of the time. He spent a lot of his time...
with his friends in the neighbourhood and was hardly seen at home. From his talk and behaviour it could be inferred that he was greatly influenced by his peer group.

**Assessment**

The worker tried to look for the underlying causes of Suresh’s behaviour or try to get at the why’s of it. Taking a ‘social history’ was the purpose of the worker’s efforts. What was also important was to look at ‘here and now’ and on the present problem. Saundarya’s ill health, consequently leading to Suresh being neglected were partially some of the causes contributing to the problem. Ramesh’s indifference to the responsibility of taking care and showing love to the children were also the other factors. The teacher in school did not make efforts to provide the right kind of emotional support that he was craving for. He had confidence only in his friends and that was the solace that he looked forward to.

**Intervention**

First and foremost the worker tried to communicate to Suresh in a warm and non-threatening manner. She demonstrated a genuine concern to his problems in school and towards his mother’s ill health. Gradually a rapport was established with Suresh. Worker talked about his friends in school and in the neighbourhood, which made Suresh feel relaxed and free. He started to talk more, gradually expressing some of his likes and dislikes. He expressed dissatisfaction about his father not being around, not taking him out like other fathers did. He said he was unhappy about his mother’s illness and that his mother never looked happy. He felt that his little sister was always stuck to his mother – ‘never would leave her’.
The meetings with Suresh increased in frequency and the relationship between the worker and Suresh grew stronger. Suresh seemed to enjoy worker’s company and would want to spend more time with the worker than before. It was apparent that Suresh had developed a confidence in the worker. Suresh did not hesitate on worker’s suggestion to meet his teacher and even his father. Suresh on his own arranged a meeting of the worker with the family.

On meeting the family, the worker realized that it was not an easy task for the worker to relate to Ramesh the father, on Suresh’s problems. It would take at least two to three meetings for Ramesh to change his attitudes towards Suresh. Saundarya the mother seemed forthcoming and she assured the worker that she would spend more time with Suresh. Worker’s meeting with the teacher did not show immediate results. The teacher expressed her inability to help at first as she said she had so many children to look at and so would not have much time to mind Suresh. But then she said she would try.

**Termination**

Worker planned out a termination once she learned that Suresh was showing improvement. Since Ramesh, Suresh’s father needed more counselling, it was necessary for the worker to work more towards changing the father’s attitude and outlook. Worker regularly met the mother to pursue the treatment for her illness. Worker used supportive techniques with the teacher in school like for example giving advice, anticipatory guidance, motivating and encouraging.

**Evaluation**

There was a definite improvement in Suresh’s behaviour. His attitude towards other children in class
had changed for the better. He was not misbehaving in class. The two to three meetings with Ramesh had made some impact as worker felt that Ramesh was showing some interest in Suresh. The teacher in class enquired and showed concern about Suresh. Complaints about Suresh in the school reduced. Suresh certainly looked better and the worker feels, even felt well.

**Conclusion**

In this chapter we have studied the various phases of the casework process. The history of social casework process saw the gradual changes and developments in the various approaches of the process. The phases of the casework process, the study, assessment, intervention, termination and evaluation are considered as the threads interwoven throughout the process.

In the study phase the worker makes the initial contact constructively and fruitfully. Showing respect and warmth influence the worker client communication. Worker shows his/her competence by understanding the client’s needs and feelings and by his/her knowledge of resources. The tools in this phase include interviews, records and documents and collateral contacts.

Assessment, which is the understanding of the psychosocial problem, is circular in nature. As the case moves on, more information is added or even rejected. Assessment involves arriving at causes, establishing causal relationships and reviewing the strengths and weaknesses of the client.

Intervention knowledge focuses on the questions. What can be done to modify the situation? This phase begins with a set of goals as decided together by the client and the worker. The ultimate objective is to reduce the client’s distress and decrease the malfunctioning of the
client’s situation. It also includes that knowledge which helps caseworkers to bring forth changes in those situations with which they are concerned. Intervention is guided by a set of principles. Intervention can be of three types: Direct intervention, environmental modification and administration of a practical service.

Termination refers to the end of the process. At this juncture, the client looks back with satisfaction on what has been accomplished. It also gives the signal that the worker uses to confirm that the worker has the confidence in the client’s ability to cope.

Evaluation is a method of knowing what the outcomes are. Casework practices need to be evaluated from time to time. Caseworkers need to be held accountable for what they do and for their social competence.

Finally facts have to be gathered, organised and recorded for the purpose of measurement of results.

References


4

Interviewing in Social Casework—I

* Ranjana Sehgal

Introduction

Interviewing is an art which is practiced in many situations with varying degrees of satisfaction to the interviewer and interviewee. Many people representing many different professions conduct interviews. Some people because of the nature of their work spend a substantial part of their time in interviewing such as lawyers, counselors, doctors, journalists etc. However, social caseworkers, according to Garret are interviewers par excellence. For social workers, interviewing is a pre-eminently important activity. They spend more time in interviewing than in any other single activity. It is the most important, most consistently and frequently employed social work skill. For them interviewing is an art as well as a science and in order to be successful practitioners they have to be adept at this art and understand the science behind it.

Social casework employs a variety of approaches in attempting to help the client. All casework interviewers have to make the interviewee feel at ease, all have to help the interviewee talk about the difficulties, all have to guide the interview so that its purposes are achieved, all have to start and end the interview in a way which maximizes helping. This chapter describes the general art of interviewing as adapted and enacted by the social caseworkers.

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Concept and Purpose of Interview

What is an Interview?

The most obvious feature of an interview is that it involves communication between two individuals. But can all interactions between two people be termed as interview? When two friends are talking to each other is it an interview? When a father and son are conversing with each other is it an interview? No, it is not. You have to distinguish between mere conversation and an interview. Not all the talks that take place between two people can be termed as an interview. Interview is not a mere conversation but a purposeful, directed conversation. One person, i.e., the interviewer takes the responsibility for the development of the conversation. He/she sees to it that the conversation moves towards the desired goal.

The professional interview is different from an informal interview for varied reasons, the predominant feature being that it is conducted within the framework of a specialized knowledge and skill. In a professional interview the interviewer operates within the confines of a well defined setting and is backed by organised experience and recognized competence, working towards known and established purposes.

Interviewing is an integral and important activity in every profession. Both experienced practitioners and relatively inexperienced social workers struggling on the job with all the recurrent problems of interviewing, and seeking some specific guidelines and answers, may benefit from an explicit examination of the interview in this chapter.
Interview – A Purposeful Conversation

The simplest definition of an interview is that it is a conversation with a deliberate purpose, a purpose mutually accepted by the participants. It is usually a face-to-face interaction which involves both verbal and non-verbal communication between people during which ideas, attitudes and feelings are exchanged.

Distinguishing Interview from Conversation

The crucial characteristic which distinguishes an interview from a conversation is that interview interaction is designed to achieve a conscious purpose. If the interaction has no purpose, it may be conversation but it may not be termed as an interview.

The point of differences between an interview and conversation are listed below:

1) Since the interview has a definite purpose, its content is chosen to facilitate achievement of the purpose. The orientation of the conversation is associational, and there is no central theme.

2) If the purpose is to be achieved, one person has to take responsibility for directing the interaction (designated as interviewer) so that it moves towards the goal. There are no comparable terms to indicate status, positions and role behaviour in a conversation as its participants have mutual responsibility for its course.

3) In an interview between a professional and a client, one person asks questions and another answers them partly because someone has to take the leadership. Here, two people are working on the problem of one.
4) The actions of the interviewer must be planned, deliberate and consciously selected to further the purpose of interview whereas the behaviour of all the parties to a conversation may be spontaneous and unplanned.

5) An interview requires exclusive attention to the interaction. A conversation, however, can be peripheral to other activities.

6) Because it has a purpose, the interview is usually a formally arranged meeting. A definite time, place and duration are established for the interview.

7) Because an interview has a purpose other than amusement, unpleasant facts and feelings are not avoided. In a conversation, the usual tacit agreement is to avoid the unpleasant.

**What is a Social Casework Interview?**

The casework interview refers to the meeting of the social worker and the client in a face-to-face conversation. It is not a casual conversation but a professional activity on the part of the social worker, because the conversation is geared to a specific or general purposes which may be obtaining or imparting information, giving help or studying and assessing the client’s situation.

**Purpose of Social Casework Interview**

Interviewing is the base on which the theory and the practice of social casework has been built over the years. It is the main medium of help without which the social casework process will never be possible.

Interviewing is one of the important casework technique which functions as a conveyor for the transmission of
help to the client. The purposes it serves may be one or more of the following:

1) **Obtaining and imparting information**

Interviewing is a two way process. Just as information is received by the social worker, so also information is imparted to the client regarding official procedures and other matters about himself/herself, his/her role as a social worker, and about the function of the agency.

Generally the client is a perfect stranger to the agency on his/her first visit. He/she may or may not bring a note of referral from a third person indicating the reason for referral. The social worker has to gather data regarding the problem. When a client is not able to furnish the required information, members of his/her family are interviewed for the purpose.

2) **Study and assessment of the client’s situation/problems**

Data gathered from and about the client are sorted out and analysed, from which relevant aspects are linked to form a verbal picture of the problem situation with clear indications of cause-effect relationships. In this process, the social worker applies the knowledge of social sciences for understanding the behaviour of the clients and others in a problem situation. Ordinarily a few interviews are necessary before an assessment of the situation can be made.

3) **Interview as a direct tool for giving help**

The information that the social worker elicits and the social assessment that she evolves serves as a
blue print based on which she decides suitable mode of help. During the interview many other casework skills and techniques are also used. Casework interview is operative as long as the individual is a client of the agency. The interview is a channel of direct help even at the first contact between the social worker and the client.

**Types of Interview**

The various types of interview patterns are discussed as below:

On the basis of the manner in which they are conducted, interviews are generally of the following types:

1) **Structured Interview**

It is also known as controlled, guided or directive interview. Under this a predetermined questionnaire is used. The interviewer is asked to get the answers to those questions only. He/she generally does not add anything from his own side. The language too is not changed. He/she can only interpret the statement wherever necessary.

2) **Unstructured Interview**

It is also known as uncontrolled or non-directive interview. No direct or predetermined questions are used in this type of interview. The interviewers may develop questions as the interview proceeds. It is generally held in the form of free discussions. The basic objective of this method is to get the client express himself/herself freely.

3) **Mixed or Depth Interview**

It is a combination of structured and unstructured types of interviews. Under this method the client is free to
express himself/herself but at the same time structured questions provide a base of information to the interviewers to compare the clients. The method of conducting an interview will be influential to a considerable extent by the purpose of the interview.

On the basis of the purposes they serve, interviews are of following types, some are primarily directed towards obtaining information, some primarily towards giving help. Most, however involve a combination of the two.

1) **Information gathering or social study interview**

Its purpose is to obtain a focused account of the individual in terms of social functioning. The information enables the worker to understand the client in relation to the social problem situation. Knowledge about the client and his situation is a necessary prerequisite to an understanding of the client in his situation. And understanding is a necessary prerequisite for effectively intervening to bring about change.

2) **Diagnostic / Decision-making Interviews**

This type of interview is geared towards the appraisal and determination of:

a) what the problem or the trouble is.

b) what factors seem to be contributing to it.

c) what can be changed and modified.

As the caseworker listens to each interview he/she constantly tries to answer the above three questions and what he/she does in the immediate interview will be, to a large extent, dependant on this understanding. For example, in the case of a delinquent juvenile, the caseworker has to direct the interview in answering the following questions:
- how the client sees himself/herself as a delinquent.
- what role his/her parents, peers, neighbourhood have played in contributing to the problem.
- The teacher’s attitude, school curriculum and environment.
- Other contributing factors such as current provocations, historical factors, personality makeup etc.
- The anxiety, anger and other such feelings experienced by the clients.
- What needs to be changed in the client and/or his/her environment.

Diagnostic interview is multifaceted and is an orderly attempt to understand the client-situation configuration.

3) **Therapeutic Interview**

The purpose of this interview is to effect change in the client, in his/her social situation, or in both. The goal is more effective social functioning on the part of the client as a consequence of the therapeutic changes. Such interviews involve the use of special remedial measure to effect changes in the feelings, attitudes and behaviour on the part of the client in response to the social situation.

**Interviewing Skills**

The interviewing process comprises a series of interviews which deal with the basic steps in the problem-solving process---Study, Diagnosis and Treatment.
These three phases of social work are nothing but the process of data collection, data assessment and intervention pertaining to the client in his problem-solving process. The interviewing process in Social Casework, thus, follows a consciously dynamic movement through these various stages to accomplish the purpose of casework. Each single interview is only a part of the sequence of the whole process. We can divide the whole interviewing process into three important/basic phases which we can term as:

- Initial/Introductory phase
- Developmental phase
- Final/Concluding phase

Though in actual practice, it may not be possible to keep the phases in watertight compartments, but for our conceptual understanding we need to demarcate and separate the various steps in the process and dwell on each one of them separately. Thus, the interviewing process is viewed here as a unit of series of steps embodying a process of three successive phases. As these phases have already been discussed in detail in the previous unit only the generic skills and the specific skills relevant to each phase will be analysed in this unit.

Interviewing in social casework is not a routine procedure of asking certain set questions and recording their answers. It is an art, a skilled technique which the social caseworker can improve and gradually perfect through practice. The requisite skills however have to be tempered with adequate scientific knowledge. Knowledge of the theory underlying interviewing gives you the required framework within which one can
critically examine the skills used and the ways to improve.

In this section you will be acquainted with the skills which a casework interviewer has to acquire to become an effective interviewer. We will be discussing them at two levels:

- Phase-specific skills
- Generic interactional skills

Caseworkers are constantly struggling to hear, see, feel and understand what the others are trying to express or hide and are well aware of the complexities of this task.

**Phase Specific Skills**

**The Introductory Phase**

While every phase of the interview contributes significantly to the whole process the initial phase is of particular importance for it has a special purpose which is to establish the setting, mood and pace most conducive to a productive conversation between the client and the caseworker so that the interview can get off to a good start. The following skills are most useful in the Introductory/Initial phase.

1) **Preparatory Reviewing**

Preparatory reviewing is a skill used to examine and consider information available to you and your agency prior to an initial contact with another person. For example, if a prospective client has received service at the agency before, you would look over relevant records the agency has on file. Preparatory reviewing helps you grasp significant factual information which reduces the possibility that the applicant, client or other persons
will have to repeat information they have previously provided.

2) **Preparatory Arranging**

The skill of preparatory arranging is the logistic preparation for a first meeting. It includes scheduling an appointment for the interview, ensuring that there is adequate time and privacy and organising the physical environment. It may include securing an interview room, locating an interpreter, or rearranging furniture. It includes considering the appropriateness of the interviewer’s appearance and perhaps even hygiene. In agency settings, it includes considering the potential effects of the physical environment. To sum up, preparatory arranging should facilitate communication and diminish, to the extent possible, interference and distraction.

3) **Preliminary Planning**

The interviewer should engage in the skill of preliminary planning before the interviews with the clients. Many first meetings have as their primary purpose, gathering of information. In such cases you might formulate a general but flexible plan concerning what data to seek and from whom. Preliminary planning enables you to begin the interview in a coherent fashion and helps you formulate a tentative purpose to share with the client.

4) **Introducing Yourself**

At the beginning, you should identify yourself by name and profession and by agency or departmental affiliation. You might also want to provide formal identification. In most circumstances, a friendly facial expression and a warm, firm handshake or a ‘namaste’ are helpful in making contact. A few informal comments may also help
the clients feel more at ease with you, but do not overdo it.

5) **Seeking Introduction**

Early in a first meeting, the interviewer should encourage each new client to say his or her name, and then pronounce it correctly. After knowing the client’s name ask how the person prefers to be addressed and thereafter throughout the interview, refer to your client by name.

6) **Clarifying Purpose**

The initial phase of the interview should clarify the purpose that will engage the participants during the course of interview. The purpose needs to be of manageable proportions. Frequently the stated purpose of an interview is either far too ambitious or too ambiguously stated. Both participants should make every effort to formulate the purpose in operational terms.

7) **Probing/Questioning**

When the interviewer and client substantially agree about the purpose of the meeting, one may then proceed to seek information about the concerns that led to this encounter. ‘Probes’ are used to elicit facts, ideas and feelings concerning the person, the problem, the situation and potential means for resolving the identified difficulties. The process of probing yields information necessary for mutual understanding, assessments, contract formulation, movement towards problems resolution and goal attainment, evaluation and ending. Generally probes are phrased as questions. A good general rule regarding questioning is that it should be for the twin purposes of —
a) Obtaining specific information

b) Directing the conversation from irrelevant to relevant areas so as to make the interview more fruitful and meaningful.

Questions are generally of two types:

a) Close ended questions: They are asked to elicit short responses usually a ‘yes’ or ‘no’ or one line answers. Example: “Do you like going to the movies?” “Who is your best friend?” Such questions are especially useful in crisis situations where vital information must be gathered quickly. However, too many such questions should not be asked in a casework interview, else the client may feel he is under some investigation and is being interrogated than being interviewed. Some closed-ended questions are known as ‘leading questions’ in legal terms. A leading question is phrased in such a way as to encourage a specific answer—one that the questioner wishes to hear. Example: “Did your parents not have a fight on the night you ran away from home?” Such leading questions should generally be avoided.

b) Open ended question: Such questions are phrased in a manner that encourages people to express themselves more extensively. They are designed to further exploration on a deeper level or in a broader way. Most of the time, they tend to check a factual answer. These are ‘what’ and ‘how’ questions that enables the client to react and respond in a number of ways. Example: “What happened after that?” “How did you feel at that moment?”

8) Reflecting Feelings

In order to use competently the skill of reflecting feelings, the interviewer needs a sophisticated
vocabulary of feeling words without which it is extremely difficult to paraphrase the feelings, emotions and sensations experienced and expressed by clients. Example: Under the ‘happiness’ category you might include the word ‘satisfied’, under the ‘anxiety and fear’ category, you might list ‘stress’ as an associated term. Thus ‘reflecting feelings’ mirrors client’s emotions and the facts or thoughts associated with them.

The Developmental Phase

1) Organising Descriptive Information

It is the first step for assessment process to organise the information gained through exploration into a form that allows for efficient retrieval and examination. Typically, this involves arranging data according to certain categories that the interviewer and the agency professionals consider to be significant. Descriptive organisation allows you to present coherently information that you read, directly observe or hear.

2) Analyzing

Analyzing entails examining in detail the various pieces of information about the client in his/her problem situation. The attempt here is to pinpoint the critical elements or themes from among this information. Finding out truth with probing at a right point is a skill which may be developed with experience and sensitivity.

3) Synthesis

Synthesis builds on what is gained from analysis. It involves assembling significant pieces of information into a coherent whole by relating them to one another and to elements of your theory, knowledge and experience base.
4) Reflecting a Problem

The interviewer demonstrates to the client that he/she understand his/her view of an identified problem. Clients, especially adults who voluntarily seek social services are usually quite ready to share their views about the problems of concern, but some clients may need support guidance and encouragement to do so. Reflecting a problem is an important form of active emphatic listening.

5) Developing an Approach

In developing an approach, the interviewer and the client must identify who will meet with them in what context or what will be the target of change. Together they must also determine who will be involved in the change efforts and how these efforts might affect others. Both of the participants consider a number of factors and develop a scheme or problem to guide their work together.

6) Attending Behaviours and Minimal Encouragements

Attending behaviours are those observable actions of the interviewer, which indicates that he/she is interested and paying attention. An important component of attending behaviour is non-verbal, manifested in eye contact and body posture.

Minimal encouragements are short utterances with little content which have the effect of encouraging the interviewee and reinforcing his desire to continue – “uh- huh ,” “go on” , “so”, “I see”, “ sure” – they include non-verbal nodding.

7) Summarizing or Recapitulation

Partial or detailed summaries and recapitulations help to extend the range of communication. The interviewer
briefly reviews what has been discussed and gives the interview its direction. A summary tends to pull together a section of the interview, make explicit what has not been covered. Summarizing requires a sifting out of less relevant, less significant material. It also indicates to the interviewee that the interviewer has been listening attentively and knows what has been going on.

8) **Making Transitions**

At times during the interview, the interviewer may decide that a change should be made in the material being discussed. The content under discussion may have been exhausted. Transitions help extend the range of interview without disturbing the relationship.

9) **Paraphrasing**

Paraphrasing is a selective restatement of the main ideas in the phrasing, which resembles, but is not the same as, that used by the client. ‘Para’ means ‘alongside’, and a paraphrase parallels what the client said. A paraphrase helps the interviewer check his/her understanding of what the client is saying. It also helps the interviewee to see more clearly what he/she has said, since it holds a mirror up to his/her communication.

10) **Interpreting**

An important task that confronts the caseworker is to interpret what has been said and heard. The interpretation that worker gives to words and body language will be a function of theoretical grounding/orientation. The interviewer must discover factors by going beneath the surface of his/her client’s remarks and understand them more than is superficially significant. For example, the casework interviewer must
look for the underlying anxiety and fear that may be symptomatically indicated by hostility and dependency.

11) Advising

Making a suggestion or recommendation can be a perfectly appropriate action by a caseworker. In using the skills of advising, the interviewer must always convey that the client may freely accept or reject his/her advice. In general, resist the temptations to offer advice based on your own personal feelings, attitudes and preferences. Of course there are many occasions when you clearly should offer direct and specific advice but avoid communicating advice as commands or directives.

12) Confronting

In confronting, the interviewer points out to the clients – directly and without disapproval– inconsistencies, or contradictions in their words, feelings and actions. Confrontation can have a powerful effect on clients. It has the potential to cause severe disequilibrium in people who are highly stressed or have fragile coping skills. Therefore, be certain that the person has the psychological and social resources to endure the impact. Avoid judgmental or evaluative speculation or conclusions. Finally, it is wise to “precede and follow confrontations with empathic” responses.

13) Reframing

Reframing refers to the words you say and the actions you take when introducing clients to a new way of looking at some aspect of themselves, the problem or the situation. Usually, it involves sharing a different perspective from that which clients have previously adopted. Reframing is applicable when the fixed attitude constitutes a fundamental part of the problem for work.
It liberates the clients from a dogmatic perspective. As a result, clients may reconsider strongly held beliefs which in turn affects their feelings and behaviour as well.

**The Final / Concluding Phase**

1) **Reviewing the Process**

   It is the skill of tracing what has occurred between the interviewer and the client over the time they have worked together. It is a cooperative process where both share in the retrospection. You might probe for additional thoughts and feelings and then share some of your own significant recollections.

2) **Evaluating**

   In addition to reviewing the process, you also engage the client in a final evaluation of progress towards problem resolution and goal attainment. For this discussion, the interviewer may draw on the results of measurement instruments such as before-and-after test scores, graphs and various ratings. You may also share your own subjective impressions of progress. Whatever you do in the form of a final evaluation, be sure to seek feedback from the client about it. As a part of the process, you express your pleasure concerning the positive changes that have occurred.

3) **Sharing ending Feelings and Saying Goodbye**

   Both the client and the caseworker may experience a wide range of emotions and feelings when the time comes to say a final goodbye. The caseworker should in the last interview give ample opportunity to the client to express his/her feelings related to the ending of the relationship. The intensity of the feelings may vary according to the personality of the client, the duration
and intensity of the relationship, the role and the function of the caseworker and the final outcome. The client may be encouraged to share some of his/her feelings (sadness, anger, fear, dependency, gratitude, affection) in the last meeting or else the feelings may lie suppressed forever.

4) **Recording and Note-taking**

Following your final meeting with a client, you condense what occurred into a written closing summary. Include in the final recording the following information:

- Date of final contact.
- The names of the interviewer and the interviewee.
- Beginning date of service.
- The reason why contact between you and the client was initiated.
- The approach taken, the nature of the services provided, the activities you and the client undertook.
- A summary evaluation of progress and an identification of problems and goal that remain unresolved and unaccomplished.
- A brief assessment of the person-problem situation as it now exists.
- The reason for closing the case.

**Generic Interactional Skills**

**Talking (Voice, Speech and Language)**

Talking as a skill implies using voice, speech, language and body language effectively so that interviewing can
be a smooth affair. The words you choose, the quality of your pronunciation, the sound and pitch of your voice, and the rate and delivery of your speech communicate a great deal to the clients and others with whom you interact. A caseworker has to be very careful with the selection of the words and should use words and phrases that are readily understood by most people. Try to use words that are descriptive and observational rather than inferential. Through your voice, speech and language convey that you are truly interested in what the client has to say. When you speak or write, active voice is preferable to passive voice and each unit of speech should not be so long or complex as to impede understanding.

A caseworker should try to cultivate a talking style which is moderate in vocal tone, volume and speed of delivery. It should be, however, varied to match the pace of the client.

**Listening**

1) **Hearing and Observing**

‘Hearing’ refers to the process of listening that involves attending to the voice, speech and language of other people. Effective hearing involves removing the barriers and focusing completely on the words and sounds of the client. One should not hear selectively which happens due to judging, comparing, criticizing or evaluating what is being said by the other person.

‘Observing refers to listening through your eyes. It occurs when you pay attention to the client’s physical characteristics, gestures and other non-verbal behaviour. The purpose of observing is to understand the ways in which the client views and experiences his words. There is hardly any situation in casework where
hearing and observing do not go hand in hand.

Among the specific aspects to observe are

- facial expressions
- eye contact
- body language, position and movement

Observation makes it possible to record the behaviour of the client as it occurs. You should not only listen to what the client says but also note closely what he does not say, the vital blanks left in his/her story. Non-verbal signals may supplement or contradict what the client is saying. As you master the art of interviewing it will become apparent to you that people do not always say what they mean or act as they feel.

2) **Encouraging and Remembering**

‘Encouraging’ is an element of listening that very closely approaches talking. You can encourage other people to continue expressing themselves by making very brief responses in the form of single words, short phrases or sounds and gestures. Example: “Please go on”, “Uh-huh”, “Please continue”.

‘Remembering’ is the final dimension of listening. It is the process of temporarily storing information in order that it may later be used, for example to communicate understanding, make thematic connections between messages expressed at different times, prepare a written record, or develop an assessment.

**Body Language (Non-Verbal Communication)**

Though we may not be aware of it, for most of us, our body language speaks more than our verbal speech. A lot of communication is non-verbal and our body is the
main channel of this form of communication. Factors such as posture, facial expression, eye contact and body positioning are powerful forms of communication. The body language should be congruent with your verbal language. You cannot say ‘thank you’ but actually look ‘sorry’. You can convey through your smile that you are friendly, caring and attentive to the client. It should communicate attention and interest in other person, as well as care, concern, respect and authenticity. You should typically adopt an open or accessible body position when beginning interviews. Tightly clasped hands, looking at a watch tend to communicate nervousness or impatience and slouching in chair may suggest fatigue or disinterest. The frequency and intensity of eye contact should depend on the purpose of interview.

**Active Listening**

According to Barry Cournoyer active listening combines the talking and listening skills in such a way that clients feel understood and encouraged towards further self-expression. It represents a clear and tangible demonstration that you have understood, or at least are trying to understand what the client has expressed. It indicates that you want to comprehend fully and accurately what the client has expressed and that you are interested in the client’s views, feelings and experiences. It constitutes a major element of the vital feedback loop between you and your client. Your sincere attempt to understand by active listening almost always elicits further expression from the client. Because it conveys empathy and understanding, there is simply no substitute for active listening. If you only talk or only listen but do not actively listen, you will probably discourage clients from free and full expression.
Essential/Requisite Qualities of the Casework Interviewer

A discussion on skills would be incomplete if we do not touch upon the qualities required on the part of the caseworker to be an effective practitioner. However, the task to list all the qualities is a complex one as definite conclusions may never be reached. Further the qualities may also vary according to the purpose of the interview. For example: The warm accepting qualities necessary for an interviewer whose main objective is therapeutic, may not be required for an interview where primary purpose is assessment. However, the demonstration of these qualities alone will not enable the caseworker to reach the goals unless they are accompanied by specialized knowledge and skills. According to Cournoyer, the following qualities are desirable on the part of an effective worker:

1) Empathy
2) Respect
3) Authenticity
4) Self-understanding
5) Self-control
6) Understanding of social work values and ethics
7) Professional social work knowledge
8) Responsible assertiveness.

“Empathy” is a process of feeling with another person rather than feeling for or feeling towards as in sympathy. Baker (1991) defines empathy as “The act of perceiving, understanding, experiencing and responding to the emotional state and ideas of another person”. Empathy
helps the caseworker to gain an appreciation for and sensitivity to the client and helps in developing a rapport and maintaining sound working relationships.

"Respect" according to Rogers (1957), is the demonstration of unconditional positive regard. The caseworker should maintain a respect for all clients irrespective of their class, caste and economic status. The caseworker should also recognize and respect the fundamental right of the client to make his own decisions.

**Authenticity**: Hamund, Hapuer and Smith (1977) state that, "Authenticity refers to a sharing of self by behaving in a natural, sincere, spontaneous, real, open and non defensive manner. An authentic person relates to others personally, so that expressions do not seem rehearsed or contrived. However, it does not give an absolute liberty to the caseworker to say or do whatever he/she thinks/feels at any given moment.

**Self-understanding**: It is a quality which a caseworker must possess if he/she is to use himself/herself effectively in helping others. The caseworker has to go through the process of "self exploration and self discovery" in order to "know thyself".

**Self-control**: Self-discipline and Self-control have to follow self-understanding. Situation may be painful, upsetting, disturbing or provocative wherein the caseworker may be overwhelmed by his/her own emotions and feelings. But an enormous self-control has to be exercised. The worker has to direct her words and action in such a manner that they do not go against the values and ethics of the profession.

**Understanding of Social Work Values and Ethic**: The caseworker must pay consistent attention to professional
ethics and obligations as they are applicable to almost all aspects of one’s professional life. For this, he/she must have a thorough grasp of social work values and ethics as well as their legal obligations.

**Professional Knowledge:** A caseworker without professional knowledge is like a painter without a brush. Knowledge related to theory and research of human behaviour, social problems, use of social work theory and principles etc. and other wide range of areas is essential to be effective. The caseworker must keep himself/herself abreast with the latest development of the field to be updated and informed.

**Responsible Assertiveness:** It includes the capacity to express knowledge, opinions, and feelings in a manner that respects both your own and others rights and preferences as unique and valuable human beings. It includes the ability and the manner in which you express your knowledge and opinions, your authority and responsibility, your personal and professional power without showing disrespect to your own dignity and that of the client.

**Basic Rules of Interviewing**

One wishes that there was a blueprint of an ‘ideal’ or ‘perfect’ interview available to the caseworker which could serve as ready reference before embarking on the interviewing process. It is impossible to have a comprehensive list of ‘infallible rules’ for conducting a casework interview. However an attempt has been made here to list the rules of interviewing which if followed/kept in mind by the caseworker, will ensure a smooth flow of interaction between the client and the caseworker.
Effective interviewing is possible only when it is grounded in a basic understanding of human nature, behaviour and motivation.

The setting of interview is of vital significance. It should ensure some degree of privacy, provide for an atmosphere which is relaxed and physically comfortable, should be free of distracting noise and interruptions. Provide a setting with which the interview can get off to a good start.

The length of the interview should be determined according to the purpose of the interview. It should be neither too long nor too short.

The client should be put at ease, stimulated to talk freely about his/her problems, helped to organise his/her own confused thoughts and feelings about his/her difficulties. Help the client to relax, which is not possible, if you are not relaxed.

The relationship between the interviewer and interviewee is of utmost importance in casework. The interviewer must never forget the impact that her own personality, appearance and manner may be having on the client.

Talk in a language understood by the client, begin where the client is and proceed at the pace of the client. The interview must always be adapted to the emotional and intellectual needs of the client.

Be a warm, receptive and patient listener. Competent listening on the part of the caseworker requires minimal attention to ones own thoughts and feeling and maximum concentration on what the client is experiencing and expressing. A good interviewer is always a good listener and a keen observer.
- Listen to silence for it can be more evocative than words. You should know how to respond and manage pauses and silence. Do not be in a hurry to fill the gap created by silence because an unwarranted or hasty intervention may leave a vital part of the story forever unsaid. A decent respect be shown to silence.

- Master the fine art of questioning. The type of question asked should be in accordance with the purpose of interview. The wording is important but equally important is the tone of voice in which they are put. Framed in simple words, the questions should be neither very few nor too many. A reassuring tone is better than an accusing and suspicious one.

- To understand what is said, understand what is not said, non-verbal behaviour cannot be ignored. Often it can be a more effective a message conveyor than the spoken words.

- People do not always say what they mean or act as they feel. Look for ‘bodily tensions’ because these non-verbal signals may supplement or contradict what the client is saying and thereby help you to read between the lines.

- Have a high level of awareness of your own feelings and emotions, biases and prejudices should be kept outside the purview of the interview as they have no place in a professional interview.

- The interviewing in casework should be a reciprocal process. The intended meaning of the communication should be received and understood by both parties. The client should be included as an active participant in the interviewing process.
• Acknowledge the client’s right to self-determination. Direct your activities in the interviewing process towards promoting self-determination and participation.

**Conclusion**

In this chapter, we have studied the process of interviewing and its relevance in Social casework. Interviewing is the most important, frequently employed social work skill. It is a purposeful conversation between the caseworker and the client – an interaction designed to achieve a conscious purpose. We have studied various types of interviews on the basis of the manner in which they are conducted and on the purposes they serve. In ‘information-gathering’ interviews, you encourage people to discuss their views and feelings about themselves, their preferences and strengths, goals and problems and the situation (you gather data that may help you and your client reach a better understanding of the circumstances). In ‘information-giving’ interviews, you share needful or useful knowledge. In ‘assessment-forming’ interviews, your overall purpose is to arrive at an assessment, diagnosis, evaluation or conclusion, often which is followed by the preparation of a recommendation. In ‘change-making’ interviews you effect or help to effect movement or change somewhere within a targeted system.

The process of interview begins with the introductory phase that involves getting acquainted and initiating the interview process. The next step involves a sequence of actions guided towards the desired goal. It includes attending minimal encouragement, paraphrasing, reflecting, summarizing, transitions etc. One of the principal difficulties encountered during this main body of the interview is to stimulate the interviewee to discuss
freely all the relevant aspects of the problem for which he wants service. In appraising what needs to be covered, the interviewer again needs an expert knowledge of the particular social problem involved. When the purpose is accomplished, the adhoc social system of interviews is dissolved. Having conducted and completed the interview, the interviewer is faced with the responsibility of recording it. As a consequence of recording, the interviewer has to selectively decide which aspects of the interview were most significant. Throughout the interview, the competent interviewer uses some procedures and skills for helping the client to achieve the objectives of the interview. An interviewer must never forget the impact his own personality and appearance may be having on the client, even in small ways and quite possibly in ways in which the interviewer cannot possibly foresee.

References


Interviewing in Social Casework—II

Introduction

The interviewing process, as we have already seen, has its main objective of gathering information and bringing about a happy adjustment between the client and her situation. The interviewer has to employ interventions that help the interviewee to extend the range and depth of the interview. She has to employ and manifest effective communication of attitudes that help to develop positive relationship. The client casework relationship has to be fostered and nurtured through the interviewing process. Many problems from inside and outside this relationship can impede the smooth flow of the interviewing process and need to be handled deftly.

Once the interviewing is over the next step is to record systematically what has transpired between the client and the caseworker. As a caseworker you have the obligation to keep records through all the phases of practice. It is not enough for the caseworker to know what she is doing but reporting well what one has done is of equal importance. Recording is an integral part of social casework practice as it aids in stimulating thinking about the client and helps in developing the skills required for providing effective help. As students you should first develop a logical way of thinking about problems followed by record writing that reflect this orderly way of thinking.

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The Relationship of the Interviewer and the Interviewee

All human beings form relationships with other human beings but the relationship formed by a caseworker with the client is special and unique. This relationship facilitates the whole interviewing process.

For many a client, talking with someone who listens with a non-judgmental understanding instead of criticizing or admonishing is a unique experience. This relationship with a person who does not ask anything for himself personally but focuses his/her interest entirely on the client and yet refrains from advice or control is a very satisfying one (Garret).

The establishment of a relationship between the client and the caseworker serves as a prerequisite to a successful interviewing process.

Establishing Rapport

Establishing rapport, especially in the Indian context becomes easy when the caseworker is well aware of the client’s total environment as well as the socio-cultural processes, which influence his/her thinking and behaviour. The worker can also work through the network of family members, close friends, elders etc. Home visits, talking over a cup of tea, knowing the interests, likes and dislikes of the client facilitate this process. The caseworker’s own background, environment and behaviour are of crucial importance in establishing rapport.

Once a positive relationship is in place between the worker and the client, the client is ready to open his/her heart to the caseworker. Homogeneity of language and socio-culture background further facilitates the
The caseworker with his/her comments and questions continuously stimulates this process. As the 'more important' is distinguished from the 'less important', crucial issues are center of focus. Supported by the relationship, the client feels free to communicate better with the worker. Even though the problem may still be unresolved, some significant changes may occur in the attitude of the client towards it. Consequently, his/her feelings of anxiety and frustration may also undergo change and become less intense.

During the interviewing process, the caseworker and the client have to keep in focus the professional nature of their relationship. A professional relationship is pursued for a purpose, which should be recognized by both participants, and it is over once that purpose is achieved.

In casework, the problem of the client is the mutual concern of the client and the caseworker and the caseworker has the requisite knowledge and competence to help the client. The caseworker presents herself in the same warm and receptive ways to all clients during the interview; however the clients may respond and react differently. Some clients may bring forth inappropriate reactions and a caseworker should be skilled in managing the problematic responses.

**Transference**

The most frequently encountered necessity to "work" a relationship occurs with the phenomena called "transference". To any emotionally charged relationship each of us brings conscious and unconscious feelings and attitudes that originally arose in or still belong to other earlier important relationships. This is readily understandable for none of us comes newborn to new relationships—we are drawn to or repelled by persons
who unconsciously remind us of others.... These transferred elements of attraction or repulsion, yearning or defensiveness, liking or dislike occurs spontaneously and they may emerge at any point in a relationship— at the beginning or any time along the way. In casework they present no particular problem if the client is not so heavily subject to them that he sees and reacts to the caseworker as though he were some person with a function other than that of a professional helper. When the client reacts inappropriately, with excessive or distraught feeling, to what is called forth, we say, that a “transference” or a “transference reaction” has taken place. Transference may occur after an interview that has been deeply satisfying and has called up echoes of submerged wishes to be more fully and continuously satisfied then the client suddenly feels a surge of overwhelming gratitude or helpless frustration and reacts “childishly”. “Why can’t we drop all this professional stuff and just be friends?” pleads the woman who wants the caseworker’s affection but not his/her help in work on her problems. Transference may also manifest not in spoken expression at all but rather in the way a client momentarily or consistently reacts towards the caseworker. They may be considered transference reactions when on their examination in the light of the actual role and operations of the caseworker they have not actually been provoked. Transference manifestations need to be recognized, identified and dealt with as they occur, but the effort is to so manage the relationship and the problem solving work so as to give minimum excitation to transference. Primarily the caseworker avoids the rousing of transference or deals with its spontaneous emergence by maintaining his/her clarity of direction, role and purpose. (Perlman 1957)
Counter Transference

The caseworker is also human who has had his/her share of satisfying and frustrating relationships in his/her personal life. He/she too may have “relationship reactions” and should have the requisite professional skill to manage them. She may at times unconsciously transfer into his/her relationship with the client certain positive and negative reactions or strong feelings of attachment which are not realistically called for. This phenomenon is called counter transference. Any personal and subjective involvement with the client may be a part of counter transference. The caseworker through practice will have to recognize and separate the personal from the professional and consciously control his/her subjective responses. The counter transference may otherwise hamper the smooth process of interviewing and derail the interviewing process.

Transference and counter transference are dynamic factors that operate in casework interview and have to be dealt with maturity and competence.

Specific Interviewing Problems

During the interview process, the interviewer and the interviewee may at times face a variety of problems or blocks those prevent or impede the interviewing process. The most obvious of these is physical and the most complex is psychological. However, many a time they may appear in combination. For effective interviewing one must be alert to such barriers and take remedial steps. Some of the specific interviewing problems are explained here which could be due to any of the following factors.

- Environmental factors
- Socio-cultural factors
Interviewing In Social Casework—II

- Psychological factors

- Factors related to the client/caseworker

**Environmental Factors**

- **Physical setting and seating arrangement:** The purpose at the beginning of the interview is to establish a setting, mood and pace which will be conducive to a productive conversation. The physical setting and the seating arrangement may sometimes serve as a barrier. If the client is made to sit too far or too close, it may put him ill at ease. The physical setting should be one that leads to comfort and helps him relax. The client and the caseworker should not sit sideways but face-to-face so as to establish eye contact, else, the worker will not be able to note all facial expressions. Seating of chairs should not be such so as to lead to physical inconvenience which could be distracting. Insufficient light and excess temperature can negatively affect the interviewee’s initial response to the interviewer. Any physical barriers to non-verbal communication where the interviewee’s body is non-verbal can make the client inaccessible to conversation.

- **Noise:** The place of interview should be free of any disturbance or distraction. Noise can be a source of distraction for both the client and the interviewer and it should be minimal. During casework interviewing, the environment should be noise free, so that nothing is unheard.

For example: If the interview is disturbed by loud traffic noise, the worker may have to ask the client to repeat which may lead to irritability and loss of vital information.
• **Lack of privacy and frequent interruptions:** Lack of privacy is a common barrier especially in an Indian setting. More than often the whole family wants to be a part and parcel of the interviewing process. Though privacy is desirable, in certain cases, if the interviewer and interviewee belong to the opposite sex, family may not permit them to meet in isolation. Frequent telephone calls, walking in and out of the room can fail to create an atmosphere wherein the clients feel free to reveal their innermost thoughts and feelings. Further during home visits one may fail to get total privacy.

**Socio-cultural Factors**

• **Biases:** Keeping ones biases from intruding into the interview is a major task at times. Many a times it is difficult to keep one’s personal likes and dislikes, preferences and predispositions from affecting the interaction. Biases and prejudices lead to stereotype thinking and categorization of interviewee in terms of predetermined presumptions.

• **Socio-cultural differences:** Class, colour, age, customs, beliefs and sexual preference are some of the important socio-cultural differences that at times separate the interviewer from the interviewee. We generally have the tendency to stereotype a person by his/her age, race, class or ethnicity. These factors tend to intrude at times into the interviewer-interviewee relationship despite the worker’s vigilance.

Knowledge of the client’s cultural milieu is necessary in understanding the client as well as in solving his/her problem. The interviewing
process will be totally hampered if the interviewer fails to vary the communication patterns to accommodate differences in age, race, culture and class.

- **Complexes that affect people due to religious affiliations:** Problems may be encountered when dealing with specific concerns which are impacted by religious differences. Example—a Muslim caseworker may be uncomfortable discussing gender discrimination with a Hindu female client.

- **Class and status differences:** Problems may crop up if the interviewer is from a lower class and goes to interview people who have high status. The high status person is faced with the problem of maintaining appropriate distance without becoming unapproachable. The lower status interviewer has the problem of assuring the interviewee of her expertise and knowledge in her own area. In the Indian context a higher caste client may find it difficult to talk freely with the low caste worker.

**Psychological Factors**

- **Differences of age, intelligence and attitudes:** If the interview content is not according to the age of the client then distortion is likely to occur in their interaction. Aspects like age differences may at times operate as barrier to effective interviewing especially if the client is too young or much older to the interviewer. A generation gap is inevitable. The interviewer may have special problems with her own feelings when working with interviewees from different age groups.

The interaction should be channelized according to the client’s level of intelligence. The interviewer
must keep a check on client’s attitude. The interview must always be adapted to the client, emotionally and intellectually. Always the interview must start where the client is and move ahead as fast as the client can move.

- **Personal inadequacies and personality complexes:** The interviewer as a human may have personality complexes or his/her own personal inadequacies. He may be introvert or of shy nature. One’s personal complexes and limitations could also act as a barrier at times.

**Factors Related to Client and the Caseworker**

- **Lying and fabrication:** Lying and fabrications by the interviewee present a difficult problem for the social work interviewer. A relationship built on lies and maintained through lies (one lies leading to others) involves a complex mixture of feelings, none of which can lead to easy communication. Clients lie because they want to be accorded respect and acceptance; they want to present a socially desirable façade, hiding the imperfections. If you suspect lying, ask yourself what prompts this behaviour—what purpose does it serve?

  Our effort should be to act in a manner which would deny the client, all reason for lying.

- **Boredom and frustration:** Repeated casework interviews with the same general problem increase boredom and it becomes hard to maintain the same level of interest. The clients may become bored and somewhat calloused, having listened repeatedly to a long series of difficult sessions with many similar elements
• **Hiding back vital information:** Clients hide back vital information because they have the feeling of insecurity and they want to be accorded respect and acceptance. The interviewer should assure the client for confidentiality and assuring for the betterment.

• **Non-cooperative client:** At the onset of the casework interaction, clients show no interest towards sharing their problem and try to avoid the interaction by maintaining a long spell of silence. Many a times the clients may refuse to cooperate, hampering the interviewing process.

• **Misunderstanding the message:** The language used during interview should be simple and understandable to the client so that client may not mislead the interview interaction.

• Transference reaction on the part of the client can also obstruct the smooth flow of the interviews

**Factors Related to Case-worker**

• Inability to vary the pattern of interviewing to accommodate the differences in race, class, culture

• Exploiting position and power to dominate interviewee

• Selective attention and listening

• Stereotyped thinking and categorization of client on the basis of preconceived assumptions

• Overemphasizing personal need gratification and rewards

• Priority to own needs over the needs of the client
• Professional failure, self-control in case of the client’s hostility, rejection and abusive behaviour

• Coming unprepared for the interview

• Bureaucratic approach with more inclination towards procedural details and strict interpretation of rules. Task-oriented approach rather than person-oriented approach

• Too active or too passive

• Counter-transference reactions

This is by no means an exhaustive list. Success in the interview would depend on the joint efforts of the client and the caseworker to overcome these problems.

**Case Recording: Concept**

After the interviewing process is over the caseworker has the obligation to record the interview. The language of interview now has to be translated into the language of the record (file, forms, computer).

According to Kadushin recording can be seen as a part of the interview process. Through the act of recording the interview continues in the mind of the interviewer after it is terminated. It is a retrospective living of the encounter. As a consequence the interviewer of necessity, has to selectively decide which aspects of the interview were more significant. She has to systematically organise a somewhat chaotic experience.

**What is a Case Record?**

A record literally means ‘a formal writing of any fact or proceeding’ and when used as a verb means ‘to set down in writing or other permanent form’.
Taking cue from this we can define case record as a written account of the casework proceedings.

However, from the above statement one should not conclude that case recording is an easy, routine and simple task, far from it, its a highly skilled and complex task. Recording is an important and integral part of casework procedure and is an output of the activity of the casework. The importance of recording lies both in the process as well as the product.

For, an individual who is planning to become a caseworker, the art of record writing is worth striving to develop and perfect, not only because case recording is an essential part of good casework and is becoming a more important factor with the increasing complexity of social treatment, but also because the case record is fortunately or unfortunately often used as one of the important indexes of the caseworkers ability.

A question often asked is, why do we need to write records? Do they really serve any purpose? The importance of case records can be ascertained when we look at their functions and the varied purposes they serve.

**Purpose of Recording**

According to experts, recording in social casework serves the following purposes:

- It aids practice
- It aids administration
- It aids teaching and supervision
- It aids research
As an aid to practice

The fact that recording has improved/the practice of social casework is now well accepted and is considered as the most important device to develop one’s skills in this area. Records help in diagnosis and treatment. It enables the caseworker to analytically reflect upon and improve his or her practice thus enabling efficient interviewing and intervention. As the caseworker gives the information collected, an organised and structured form, analysis and critical thinking becomes easier. Case records are essential for refreshing the memory, especially when cases stretch for too long and the worker may lose track of detail. They also enable better planning for the next interview and provide the opportunity to rectify previous mistakes. This knowledge when passed on to a new worker ensures that the same mistakes are not repeated.

As an aid to administration

Records, also serve as important tools of administration. They serve as an index for the correction of policies and practices. Further they also give an insight into the caseworker’s ability and ensure continuity if the caseworker is transferred, or resigns. They help the agency in not only evaluating the caseworker but also in the evaluation and reappraisal of the existing and as well as future services. Records are also of great importance when client is referred from one agency to another for specialized services, as they ensure continuity. Further they allow sharing of information between agencies.

As an aid to teaching and supervision

Recording as a teaching and supervision device is indispensable. Records aid teaching and supervision in
that they add to the body of knowledge of social work and make this knowledge communicable. They provide an opportunity to the students to organise and present information and observations, reflection and action in a systematic manner. It is useful for reflecting on one's role and reactions in an interaction. Recording serves as a tool for supervision and evaluation whereby a teacher can encourage students to analyze and interpret data, expressing their individuality through it. Supervision encourages the cultivation of better recording skills and better casework as a result. It can be used in systematically training the students and is an important device to introduce students to practice.

**As an aid to research**

Records can be used for social research and planning. They are the chief source of material for research done on such important subjects as the effectiveness of casework as a social work method. Records contain accumulated experience of social workers which can be translated into statistical form and thereby help in finding solution to social problems.

**Purposes of recording in casework**

- helps in diagnosis and treatment
- enables more effective interviewing and intervention

As an aid to practice

- contributes to analytical reflection and improvement in casework practice
- useful for organising and structuring of information/aids orderly thinking
refreshes the memory of the worker/increases retrospective understanding

- enables better planning for subsequent interview

- useful as a guide to new worker in correcting past mistakes

- useful as an index for correction of polices

- ensure continuity if any caseworker discontinues a case

As an aid to administration:

- ability of caseworker can be gauged

- useful for future reference

- useful in evaluation of agency

- Allows sharing of information between agencies

- helps in supervision and training of students

As an aid to teaching and supervision:

- ladds to body of knowledge of social work, which is made communicable

- enables students to develop analytical and interpretative skills

- easy method of introducing
students to practice

As an aid to research useful for social research and planning
- contains accumulated experience
- can help in providing statistical data on social problems

**Types of Recording**

From the literature available on casework recording no clear cut classification of records on the basis of their types is available. However, for our understanding we can give the following classification of recording.

(a) Process  (b) Summary  (c) Verbatim  (d) Non-Verbatim

**Process Recording**

Process recording is a form of recording used frequently by the caseworker. In this type, the process of interview is reported and is a rather detailed description of what transpired with considerable paraphrasing. It preserves a sequence in which the various matters were discussed. It includes not only what both the worker and the client said but also significant reaction of the client and changes in mood and response. In this the interview and observation go hand-in-hand. It may be verbatim or non-verbatim reproduction.

**Summary Recording**

Summary is a good device for organising and analyzing facts. Summary points into meaning and relative importance of material gathered. A careful summary
made at appropriate intervals reduces bulk, clarifies
direction and saves the workers, time. Summary is
commonly assumed to be a review or recapitulation of
material that has already appeared in the record. It
may be either topically arranged or may appear as
condensed chronological narrative.

Mrs. Sheffield has defined summary in social casework
recording as “A digest of significant facts in the client’s
history which has previously been recorded”. Summary
could be a diagnostic summary, periodic summary or
closing summary.

The closing summary is a summary made at the time
the case is closed. To be most effective it should be
written by the worker who was responsible for the case
at the time of closing.

The periodic summary is simply the summary of material
previously recorded and is made at more or less regular
intervals or at the end of more or less definite episodes
in the family history.

**Verbatim Recording**

It is reproduction of factual data in the individual’s own
words. It is commonly used in casework because of its
accuracy and objectivity. However, it should not become
a mechanical reproduction of information because
casework as an art requires an intelligent selection
and rearrangement of material. As a part of training of
the worker, verbatim recording may be of value in
developing objectivity.

**Non-verbatim /narrative recording**

Narrative recording has been and still is a predominant
style of recording. It is the style found in newspapers
and magazines. It is the way we speak of the day’s
events, it is the way we write letters, and it is the ways we keep diaries. Narrative form of recording is preferred for reporting acts of practical helpfulness, events and most collateral visits or conferences. It may be used for the contents of the interview in all instances except when the process itself and use of relationship have special significance.

**Principles of Recording**

How we wish, especially in the initial stages of practice that there were some fixed rules and perfect procedures, which could guide us in writing case records. However there is no such thing as an ideal or model record. Record is a flexible instrument, which should be adapted to the needs of the case.

Each case is different, the conditions of work hold marked differences and the recording therefore, rests not on following an outline, but in the mastery of certain component processes. Given below, are the attributes one looks for in a good case records whereby we can judge it to its merits. They can be termed as principles of casework recording as they serve as guidelines for writing records.

1) Accuracy, objectivity, simplicity, clarity and brevity should be observed in writing records.

2) Facts and their interpretation should be distinguished as it leads to objectivity. Inferences should be drawn in an impartial manner without attempting to influence the judgment of the reader (e.g., frequent fights between the husband and wife might lead the caseworker to interpret that she dislikes or hates her husband).
3) Record must be orderly in its arrangement and it is not possible unless the writer has thought out in advance what should be included and then has set out the material in a logical sequence.

4) A long record is not necessarily a good record. Records should neither be too long nor too short.

5) The casework records are not meant to be literary masterpieces, therefore they should be written in simple language and simple style.

6) A telling verbatim quote can sometimes depict a situation much better than a narrative description, therefore, wherever possible reaction of the clients should be recorded in their own words.

7) There should be certain degree of uniformity and standardization as to the form of observation.

8) A record should have readability and visibility and should contain a clear and concise presentation of the material. (E.g. content can be organised under topical heading such as interviews, home visits, contact with collaterals. Letters, medical reports etc filed at appropriate place.)

9) To maintain clarity and accuracy avoid using words which are vague, ambiguous and likely to be misinterpreted by the readers. (e.g. “middle aged, perhaps etc.) Note taking as far as possible should be done immediately after the interview is over. If done during the course of interview it may not only hamper the full participation of caseworker in the process but may make the client feel that she is not getting the full attention of the caseworker.

10) It should always be made clear who are involved in the situation, which is addressing whom and what are the sources of information.
11) The details of every significant subject or situation should be given.

12) One should not record the self-evident, the insignificant, the familiar, and the repetitive.

14) Any record should show clearly the nature of the problem presented or the request made; what the worker thinks about the situation; what the worker and client know about it; what relevant family group and community factors are involved; what the change or movement of outcome are.

Guidelines for Casework Recording

Record is a dynamic and flexible instrument hence no hard and fast rules can be prescribed. The casework record should reflect an orderly way of thinking which can be done through a flexible use of process, summarized and condensed recording so that the recorded material becomes a positive aid to the worker in his/her practice.

The following guidelines however may be observed:

1) Maintain a field work diary

While in the field you must carry with you a field work diary. This diary is used for writing, events and incidences as they happen during the day. They may cover such things as names, addresses, dates, and details of interviews with the client and collaterals, observations, inferences and any other such relevant information. From this jumbled up data you are then expected to organise systematically the available information into a formal case record. The daily process record may comprise the following:
a) Conduct the interview, write in narrative style the questions asked and the way they were answered or in other words write about the interview as it took place. The observation should be suitable recorded such as the mannerisms, expressions, gestures, hesitation, silence, resistance, discomfort, emotions expressed, refusal to answer, certain questions etc. The record should also reflect significant reactions of the client such as changes in mood and responses, body language, the subjects from which the client tends to shy away or finds difficult to discuss.

b) Extra information on environmental factors, relationships with those around gathered with home visits or any other source could be mentioned. Letters or other such documents could be attached. At the end of report you should give your inferences and interpretation. You should indicate the meaning you derived from the events and incidents and reasons for it. You should conclude by briefly outlining your plans for the next meeting or the next steps you propose to take, in other words your future plan with respect to that case. This may include:

1) areas to be covered in the next interview
2) collaterals to be contacted
3) information to be obtained for the next meeting

How to Collect and Organise Data

The caseworker can use the following tools and devices for collecting data:
1) Face sheet/Intake sheet

2) Eco-map

3) Genogram

**Face Sheet/Intake Sheet**

Face sheet or intake sheet as some prefer to call it is generally filled in at the initial phase of the casework process. Most of the social work agencies have a more or less standardized proforma which has blanks for entries to be made by the worker related to the identification data such as name, age, occupation, family profile and other such information. The purpose of the face sheet is to give in a convenient form the objective social facts or situation of the client of a permanent character to particularize the case.

**Genogram**

A family genogram is the graphic representation of one's family tree. It gives a pictorial representation of the members along with a chronological statement of significant events. It helps in assessing a person's psychosocial characteristics or the interactional patterns of the family. The caseworker organising the information can make it brief or extensive depending on the purpose it is to serve.

**Eco-map**

Though family experiences are significant, people are also greatly affected by the social context in which they live. Our record will not be complete if we do not depict this social context. An eco-map is an effective tool for this purpose.
According to Hartman (1978) an ecomap is an extremely useful tool for portraying the social context, because it provides a diagrammatic representation of a person’s social world. In addition to presenting an overview of a person, family or household in context, the eco-map readily identifies the energy-enhancing and energy-depleting relationships between members of a primary social system (e.g. family or household) and the outside world. The graphic nature of the eco-map highlights social strengths and social deficiencies and helps to identify areas of conflict and compatibility. It often indicates areas where change may be needed. The eco-map is a natural adjunct to the genogram.

Conclusion

In this chapter we have further studied some important aspects of the interviewing process namely the relationship of the interviewer and the interviewee and some specific interviewing problems. The establishment of a relationship between the client and the caseworker serves as a pre-requisite to successful interviewing and facilitates the whole interviewing process. Once a positive relationship is established, the client becomes ready to open his/her heart to caseworker. The caseworker presents himself/herself in the same warm and receptive ways to all clients during the interview, however the client may respond and react differently. ‘Transference’ and ‘Counter Transference’ are dynamic factors that operate in casework interview and have to be dealt with maturity and competence. Some specific problems, which can be due to social, psychological factors or which can be specifically caseworker or client centered are sometimes likely to impede the casework interviewing such as biases, prejudices, lying, holding back information etc. The caseworker has to be sensitive to these problems and consciously make efforts to
overcome them when they intrude into the casework interview.

Once the purpose is accomplished the interviewing process is dissolved. Having conducted and completed the interview, the caseworker is now faced with the important task of recording, the interview and has to selectively decide which aspect of the interview was most significant and record it. The case record should contain a clear, concise, accurate and objective presentation of the material. It should be properly organised and should not be too long or too short and should be readable. Caseworkers should not only be “consumer of the practice of others” but “strive to be further creators of practice”.

**References**


Fields of Social Casework Practice

Introduction

Now that you have learnt about the concepts, process, and skills and techniques of Social Casework, it is time to look at how to apply these concepts and techniques (differential use), where will you apply them (location) and with whom (client groups).

Social casework situation comes into existence when a person comes to a professional seeking help in connection with some concern /problem /issue which he/she is not able to deal with himself. The professional, the social caseworker, views these concerns in the light of the person’s total social environment.

Characteristics of Social Casework Practice

All that you have learnt now needs to be applied to specific clients – in specific situations with similar or different problems and concerns – being served by different organisations. It will help you perform more effectively if you keep in mind the following features that characterize social casework practice, wherever you may be located:

- Let me start by stressing the fact that casework help is not standardized. As we go along, we shall

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talk about different factors that may determine caseworker’s differential response to a similar situation.

- The individual, the client, is seen as a whole – as a thinking, feeling, acting being — in continuous interaction with his total social environment.

- You, as the Social Caseworker, represent not only the agency which has employed you but also your profession – Social Work. That is, you have to practice (use knowledge and skills & techniques) within the professional value-system, ethics and principles but at the same time be responsible for achieving the goals of the employing agency.

- While you generally work within the service delivery systems devised by the organisation, you have a commitment to performing the role of a change – agent in case these systems are dehumanizing or degrading for the clients.

- You have to be constantly aware of your personal self and make sure that it does not interfere in your social casework practice.

- It is all the more important in Social Casework because its clients’ problems and concerns have heavy emotional component.

- Human problems of living are complex and multidimensional and require sensitive handling.

- Therefore, Social Casework Practice may very often require interagency collaboration.

- You will very often be a part of a team of professionals. In primary settings, you are likely to be the main professional for service delivery,
whereas, in secondary settings, you may have an ancillary status. It is important for you to communicate your contribution as a social work professional to other professionals in the team.

- Social Casework service may be offered for prevention, promotion, cure/ remedy, rehabilitation, placement, reformation, palliative care, or for modification of social environment.

**Determinants of Fields of Practice**

Fields of social casework practice are broad areas or settings in which casework method is utilized to help individuals and families. Various fields can be determined on the basis of the following components:

a) **Person-in-context** – The context here includes the total social environment of the client — a male adult with visual impairment, a middle-aged woman abandoned by her husband, an orphaned child in a Foundling Home.

b) **The concern or the problem requiring help** – Destitution, chronic illness requiring major changes in life-style, drug dependence, rehabilitation, trauma caused by riots or serious accident, bereavement, role conflict, displacement.

c) The human service organisations that provide the location for providing help, like, schools, hospitals, childcare institutions, short stay homes, institutions for the elderly and juvenile homes.

The first two dimensions can be analyzed further from two perspectives:

- **The needs perspective**
a) **Common human needs** – beside survival needs, every individual has needs for affection, for security, for achievement and for belonging (to a group).

b) **Special human needs** – needs that arise because a person has a disabling impairment, is suffering from a chronic illness requiring major changes in life style, has deficit of coping or social skills, needs arising due to traumatic experiences like accident, riots, natural calamities or needs of very young or old persons.

c) **Societally caused needs** – those that arise due to certain conditions in society itself, for example, discriminatory practices, oppression, deprivation, or displacements due to large developmental projects.

The needs perspective helps the worker in understanding the source and extent of the problem as it applies in each case. It helps in knowing about the impact of the unfulfilled need on the client and his social environment. The worker is able to help the clients decide upon the action plan for dealing with their problematic situation by fulfilling the unmet needs.

- **The life-span perspective**

An individual experiences a number of life changes as he/she goes through his life cycle, that is, from birth to death. She/he is seen as moving in life through a series of developmental stages, each stage requiring the individual to successfully complete some tasks before he/she moves on to the next one. In most cases, human beings move through this cycle without major unsettling
stresses. But if the person is not able to achieve this transition smoothly, he/she may find life changes stressful and is thus unable to adapt to the new demands.

A five-year-old child enters school, which is discipline-driven and formal, after the secure and free atmosphere of home.

A young girl gets married, shifts to her matrimonial home and takes over the role of a wife and daughter-in-law. If she is not prepared for this transition, she may feel overwhelmed by the demands of her new situation and get depressed.

A middle-aged man, gainfully employed, gets retired from his job. From a very busy life style with set routines, he/she now finds himself at loose ends, with a lot of time at his disposal. How well he/she is prepared to deal with the life changes will determine the level of his emotional well-being.

d) The human service organisations: The mandate of these organisations is that of 'service', that is, to maintain and improve the general well-being and functioning of people. Examples of such organisations are schools, hospitals, correctional institutions, and social welfare and development agencies.

Human Service Organisations are characterized by a) goals and objectives, b) specific client groups, c) personnel, d) programmes and services, e) service delivery systems, f) material resources and networks.
Fields of Social Case Work Practice

As we have already stated that any discussion of fields of casework practice needs to look at two components: client groups with some problem or concern and the setting where the clients get help with their concerns.

Let us first describe in brief the client groups and some of their characteristics.

**The Individual:** Person and his/her interaction with social environment are influenced significantly by a number of factors. These factors determine as to how different clients react to a similar situation/problem/concern differently. Their expectations from the caseworker may also vary accordingly. Some of these factors are:

- **Age:** The needs and concerns, problems and difficulties faced by a child are invariably different from those of a young adult or an elderly person. Again, how the individual—of any specific age group—looks at the situation under study, feels about it and wants it to be handled may differ according to the age of the individual.

- **Sex:** The experiences and conditions of male and female persons in a given society are socially and culturally determined. The status in society (rights, privileges and power within the family and society at large), division of tasks, role expectation, role transitions, and role conflicts affect men and women differently. The stereotyping of image and roles tend to become oppressive and discriminatory for women specially.

- **Caste:** In Indian society, caste based discrimination affects individuals and families across age and sex.
divisions, although females suffer the most. The low status because of belonging to lower castes results in deprivation, oppression, and lack of opportunity, depression, apathy and inertia.

- **Class:** The income group an individual belongs to determine the life goals and motivation for striving for change. Outlook towards life and problems of living are likely to affect persons belonging to: a) lower income groups; b) middle income groups; c) affluent groups; or d) those who are below poverty line.

- **Religion:** In a pluralistic society like India, belonging to minority groups’ religion has its own difficulties. Religion holds a very important place in an Indian person’s upbringing. Understanding of religious beliefs, customs and moral values is essential in helping a person.

- **Region:** People belonging to rural, urban or tribal areas tend to demonstrate specific response-patterns and preferences in life. Persons hailing from a small city, a village or a metro city, are exposed to different stimuli. Their life experiences will, therefore, be different from one another. Their needs and expression of concerns may also be different.

**The Family:** Family is a special social group wherein members are bound to each other by blood or marriage. The main function of family is child rearing and growth and development of each member. Families fulfill their social responsibility by socializing children in the culture of the society. In fulfilling their functions, families interact with a large number of social systems and organisations like, kinship network, religious and economic institutions, schools, the work place, civic
authorities, welfare and legal framework etc. Unique patterns of interaction – within the family (among members), and with outsiders evolve overtime.

Family is a system wherein the experience of any one member affects the other members. A drug dependent son, a physically or mentally challenged child, the main earning member having problems at the work place, an elderly father / mother – all affect the social functioning of the family as a whole. Sometimes, the problem faced by one member is an expression of a serious problem with the basic interpersonal relationships, interaction and communication patterns within the family.

Families go through a life cycle. Marriage takes place and children are born. Children go to school or work. The first child gets married – the daughter goes away or the daughter-in-law joins. The married son may or may not stay with the parents. The parents grow old and die. The son continues with the family. With each change in the composition of the family and role transition, various stresses occur. Most often, families are able to cope with these normal transitions. But, some special situations cause a sense of inadequacy in the families and they are forced to seek professional help.

Some of the problems, which put too much strain on family’s coping mechanisms, are severe marital discord, domestic violence, child abuse, incest and redundancy (unemployment).

Let us now discuss some of these settings in brief to get an idea of what are their main features, what kind of problems or concerns they deal with and the kind of professional interventions Caseworkers provide to their clients – individuals and families.
• Hospitals

Doctors are the main professional groups in the hospital, responsible for medical care of the patients.

The recognition of psycho-social and cultural dimensions of illness and hospitalization has enabled employment of trained social workers in the hospitals.

Social Casework is utilized in the OPDs (outpatient departments), the Wards, and Special Clinics. The heavy work load of doctors in large Govt. Hospitals generally leads to lack of clear communication between the medical staff and the patients and their families.

In such a scenario, the main roles expected of social workers are those of mediator; enabler; coordinator of services; case manager; mobilization of family, community and hospital resources; and acting as a member of the team of professionals. Working with the patient and his/her family is a major task of the social worker. Therefore, Social Casework is a primary method in medical social work practice.

• Institutions Providing Mental Health Care

The caseworker works as a member of the team of professionals including psychiatrists, psychologists and occupational therapists. Psychiatrists are the main professional group in charge of care and treatment of the mentally ill or emotionally disturbed persons. The patients may be attending OPDs, day care, or may be hospitalized. The main tasks of the caseworker are to maintain constant contact with the family of the patient; mediate between the doctors and the patient/family; provide counselling to the patient; assist in discharge and after care of the patient. The worker provides the necessary support to the family and helps the other
family members understand the needs of the mentally ill person.

- **Working with the Chronically/Terminally Ill**

The patients who are suffering from chronic illness, like diabetes, asthma, and heart disease, need help in understanding their illness and the demands of the treatment, and adjusting their life-styles to the limitations imposed by the condition. The families of the patients also need support and guidance in dealing with the patient’s condition that may have long-term implications for the entire family. In some cases, especially among those belonging to lower income-groups, the financial burden may need to be eased out by identifying and mobilizing resources in the kinship network or community at large.

While working with the terminally ill patients, the first dilemma the worker faces is to inform the patient and his family about the illness. The patients suffering from a terminal illness, like cancer and AIDS, have additional stress factor – the thought of impending death and anxiety about the family after their death. The tasks of the caseworker include: a) ensuring palliative care to reduce pain and discomfort, b) talking about death, c) involving the patient in planning for the family after his/her death, d) providing opportunity to family members to talk about death and dying, e) providing support— emotional and material — to the patient/ family. In the case of AIDS, the caseworker will need to tackle the issue of stigma attached with contracting AIDS and the possibility of infection getting passed on the other family members.

- **Schools**

Schools are institutions for formal education, with a fixed routine, set syllabus, and a well-established
pattern of teaching and learning. Teachers are the main professional group and they spend the maximum time with students. Schools vary in size—from small single teacher schools in the villages and tribal areas to large bureaucratic organisations with thousands of students. Schools may offer primary, middle, secondary or senior secondary education. Again, some may be Government schools/aided by the Govt. or fully private independent schools.

Despite progressive and child-centred educational philosophy, schools are characterized by emphasis on syllabus (information content), formal examination system for evaluating achievements and formal teacher-child relationships. In this context, the child very often is not able to get his basic human and educational needs fulfilled. This situation proves to be stressful to the child. Due to preoccupation with syllabus and maintaining discipline, teachers are unable to individualize the child’s situation and there is a ‘problem child’ at hand. Hence, there is recognition of need for individualized Social Casework Service to help the child.

School, however, offers an excellent opportunity to Caseworkers for offering preventive and promotive interventions beside remedial service. Transition of the child from entry to passing out from school coincides with the child’s own maturation process. By anticipating the demands and stresses of a particular age group, appropriate interventions may be planned so as to avoid unnecessary emotional turmoil. By helping in the development of personality and life and social skills, the Social Caseworker can achieve the status of a partner in the educational process. Despite of its being a secondary setting of Social Casework Practice, the Worker can easily demonstrate the vital contribution of Professional Social Work to fulfillment of educational goals of schools.
The Social Caseworker works as a liaison between the family and the teacher. He/she acts as a mediator, enabler, teacher (giving necessary information), advocate (to highlight the negative impact of school norms and practices on the child), change-agent for the school’s systems and procedures, and as a consultant for the staff of the school in matters regarding children’s needs and well-being.

- **Residential Institutions**

There are situations when individuals have to be removed from their natural environments and placed in residential institutions. Some of the institutions where social casework is practiced are as follows:

a) **Children’s Homes:** Children who are destitute, orphans, or have run away from home and can not be sent back home; those who are violence, risk to health (e.g., healthy children of leprosy patients) or moral danger are generally placed in children’s homes. Most of these Homes operate under the provisions of Juvenile Justice Act and, therefore, provide custodial care. Children are committed for specific periods. There is sometimes a feeling among inmates that they are under detention. Only in a small number of cases adoption and foster care services are or can be offered.

Homes, run by the Govt. or voluntary organisations, are expected to provide custody and care to the children. Social Worker is an important professional here. Living arrangements may be dormitory or cottage types. Social Caseworker is expected to help each inmate adjust to the life within the Home and achieve psychosocial development. As the children have often gone through traumatic experiences before they are placed in Homes, it is very important
for them to come to terms with their life, talk about it and get over the pain and the sense of betrayal. The worker is expected to provide pastoral care, liaison with schools where the children go for education, help children develop positive relationships within the institution, and prepare for life after the stay in the Home is over.

b) **Correctional Institutions:** These include homes/special schools for the delinquent, prisons, remand/observation homes, beggar homes etc.

The main task of the Social Caseworker is to help those in conflict with law by enabling them to understand themselves and their relationship with others. They need to understand what is expected of them as members of society. The aim is to rehabilitate these persons – to help them in such a manner that they can engage in socially constructive activities once they go back to their homes. The worker helps the clients change/modify their values (so that they are in line with the social values); change their behaviour and response patterns. The residents of these institutions often have a feeling of hostility towards society or they suffer from a sense of inferiority and inadequacy. Social Casework aims at correcting these attitudes and feelings by modifying the clients’ immediate environment, working with their families and maintaining a supportive professional relationship with them.

The Caseworker works as a member of a team of professionals like, probation and parole officers, psychologists, psychiatrists, and vocational counsellors and educators.
c) **Homes for the Aged:** The number of old age homes have been increasing in cities. The stresses and constraints of urban living have often led to adult children opting to send their aging parents or relatives to residential institutions. The residents in these homes need nursing care, understanding and emotional support. The caseworkers in these institutions help the residents cope with loss of the loved ones, illness, lack of energy, loneliness, loss of economic independence and the thought of approaching death. The caseworker enables the client maintain his/her self-esteem. He/she also helps the family deal with suppressed or open feelings of guilt so as to encourage them to maintain cordial relation with the client. The worker needs to identify and mobilize community resources like motivating and orienting volunteers to spend time with the residents, talk to them and attend to their simple errands.

d) **Residential institutions for women:** Short stay homes, rescue homes, nari niketans, widow homes etc. are some of the settings where casework practice takes place. Most of the inmates are those women who are destitute, abandoned or battered by their husbands, widows with no relative to give them support, victims of crimes including prostitution or kidnapping. These residents need to build their skills – vocational and social – to become independent persons capable of taking care of their lives. The caseworkers try to bring about conciliation between the client and her family, if any. Where marriage is indicated, pre-marital counselling is provided.

- **Organisations Working with the Differently Abled**

There are residential and non-residential organisations offering variety of services to the differently abled. The
main task of the caseworker is to fulfill the objectives of the organizations such as a) care; b) rehabilitation - vocational training, education (depending upon their capacity), employment; c) offering services according to governmental provisions and special concessions; d) advocacy to reduce or remove social discrimination against the differently abled; and e) facilitating the client’s acceptance and understanding of his/her situation and also recognition of his/her potential.

Giving support to the client – both emotional and action oriented – is an important intervention offered by the caseworker. The caseworker also works with the family to help them cope with the situation, to understand the needs of the client, and to learn to take care of the client when he or she is at home. The worker very often acts as a broker, linking the client and or his/her family with the available community resources and networks of other organisations working in this area.

- **Organisations Working with Victims of Disasters**

There is increasing recognition of the need for individualized help for the victims of disasters – whether natural or man-made. Victims of natural calamities are victims of floods, earthquakes, and drought. Victims of man-made disasters include victims of communal violence (riots), serious accidents, mega projects of development etc.

Some of the common experiences of most of the victims of disasters are trauma; loss of loved ones; loss of livelihood or assets; homelessness; feeling of helplessness; feeling of anguish or hostility (desire for revenge); loss of community feeling; despair and a sense of fatality or sometimes high/unrealistic expectations from the worker.
Despite this commonness, the clients need individualized care to overcome debilitating impact of the crisis.

Large-scale displacements due to mega projects like Dams lead to erosion of community and family life, absence of usual social control mechanisms, the tearing of the social fabric, and loss of livelihoods beside the problems of settling down in alien environments.

Working with these persons is a big challenge for the Caseworker. It is not easy to win their trust as they have lost confidence in everyone around them. Very often, winning their trust is the first vital step towards taking them out of the traumatic experience. Beside offering them emotional support, the worker needs to build in them hope for a secure future. The worker enhances the client’s resources by co-ordinating with various agencies – both governmental and voluntary. Giving information about the available services and provisions goes a long way towards instilling hope in the clients. The clients are helped in viewing their experiences rationally rather than emotionally. But, this can be done only after they have emerged from their trauma. Engaging the client in the planning and implementation of the action plan facilitates the client’s rehabilitation and recovery from despair.

- **Organisations Working with Women**

Social caseworkers are employed in family counselling centers, crime women cells, legal aid cells, family courts and women resource centers. The aim of the professional interventions is to enable women become empowered, confident, and independent and also utilizes available legal provisions and safeguards for her protection.
There are increasing number of cases of rape victims. The worker has to help link the family with police, courts, hospitals, schools, and agencies working for rehabilitation of these victims. Special techniques are used to help the victim come out from trauma, and restore her self-confidence and self-esteem. The family also needs understanding and support of the worker in dealing with this situation.

The sensitivity towards the discrimination women face in families and society is vital in arriving at accurate assessment of the condition under study.

For illustrating Social Casework Practice two cases are presented.

**Case 1 – Hospital Based Casework**

**Referral**

The attending doctor refers a woman patient admitted in the female surgical ward to the medical social worker of a government hospital. She is reported to be unwilling to undergo operation, which she has postponed twice before.

**The Casework Process**

**Study**

The social worker, Sangeeta met the patient, Mrs. K. in the ward and told her about the doctor’s referral. Sangeeta learnt that Mrs. K was 35 years old married woman. Theirs was a nuclear family. She had three children, aged 14, 10 and 5 years. All the children went to a school nearby. Mrs. K. was a housewife. A part-time maid servant helped with a few of household jobs. Her husband’s job required him often to be away from home. Mr. K had brought his wife to the hospital because
of severe pain in her knee. The doctor had advised surgery.

Sangeeta explored further to enquire the reasons for the client’s resistance to surgery by interviewing the client in the ward and her husband, both in the ward and during a home visit. The worker also spoke to the nurse on duty in case the client had shared any of her concerns with the nurses (using the collateral sources for information). She spoke to the doctor concerned to understand the client’s medical problem and the chances of the client’s recovery. The worker considered the following probable reasons (there could be even more than the ones listed):

a) Was it because of her anxiety as to who would look after her children during her long period of hospitalization?

b) Was she scared of the process of operation, as Sangeeta, the medical social worker, knew from her experience that surgery very often created panic in the patients and even their relatives?

c) What was her husband’s reaction to the doctor’s advice? Did he offer any support to her operation?

d) Who will attend to her during the post-operative period, because, according to hospital rules, only female attendant is allowed in the female wards?

**Assessment**

Sangeeta, the worker, shared with Mrs. K, her understanding of the likely reason(s) for the latter’s anxiety about the operation. Sangeeta believed that it was important that Mrs. K confirmed the worker’s definition of the client’s problem before some solution could be worked out. (Communicating empathy and
ensuring client’s participation in the process.) Depending on the reason/s, Sangeeta and Mrs. K could consider one or more of the following solutions:

1) **Giving Information**

- Sangeeta could explain the exact problem Mrs. K was suffering from. It was possible that the patient might not have felt free to ask the doctor or the doctor never explained the problem in detail. Worker could also explain the complete process of surgery and the chances of recovery. (Based on facts gathered from the doctor himself.) Here she performed the role of a mediator between the patient and the medical staff.

2) **Identifying and Mobilizing Family Support System**

- Some female relative could be requested to be with children during the period of hospitalization;

- Husband could apply for leave from his office;

- Sangeeta could provide opportunity to Mr. K to express his anxiety. She could have sessions with the husband and children to provide them emotional support. The family, then, could provide the necessary emotional support to the client. (Counselling sessions with the family members.)

- The eldest child could be helped to share some responsibility at home in the mother’s absence. With the support of the worker, this experience could become a source of positive learning for children – to learn to tackle difficult situations and to become independent.
3) **Using Hospital Resources**

- The medical social work department could arrange for an attendant for the client.

4) **Any other**

- Any other help that the client may need or any other suggestion that Mrs. K or Mr. K may now think of.

**Intervention**

The worker could assure the client that the surgery she was undergoing was well within the doctor’s experience. (Based on facts gathered from the doctor himself, so that Sangeeta could offer realistic assurance.)

Following the principle of client’s right to self-determination, Sangeeta could offer one or more of the interventions outlined earlier. Throughout the casework process, she communicated her availability to the client in case of need.

Sangeeta also worked as a member of the team of professionals responsible for the medical care of the patients being served by the hospital.

**Evaluation**

Mrs. K agrees to undergo surgery. The doctor who had referred the case acknowledges Sangeeta’s work and appreciates social work intervention in facilitating the patient's medical treatment.

**Termination**

The case is, therefore, formally closed. Sangeeta describes the location of her office in the hospital and
working hours and encourages them to meet her whenever they feel the need. They thank the worker for all that she had done for them.

**Follow-up**

Sangeeta visits Mrs. K in the ward occasionally, before the operation and after the operation. She seeks feedback about the client’s recovery from the doctor and the nurses and passes it on to the family. She keeps in touch with Mr. K and enquires about the children. Meets the family at the time of discharge of the patient from the hospital. She ensures that the family is prepared to look after the patient at home during convalescence.

In case, there is some unforeseen complication in the post-operative stage, Sangeeta will have to initiate the casework process again.

**Assignment/Activity-I**

Given the same case of the referral of a patient who is unwilling to undergo surgery, work out assessment in the following contexts/circumstances:

a) Patient is an office going male person. All other particulars are the same.

b) Patient is a woman from low-income family. Her husband is a construction site labourer.

c) The patient is a school going/non-school going child (male/female) aged 12 years.

d) The infection having become serious, the doctors may have to amputate the patient’s leg above the knee. There is no risk to life on account of the operation. Select any of the family contexts discussed above.
Write down your answers and discuss with your field instructor.

**Case 2 – Family Work in the Community**

We shall now discuss a case where the social worker identified the client herself. The case also demonstrates proactive approach, that is, the worker did not wait for the client to seek help. Rather she offered her service to the client at the latter’s own home.

**Referral**

Renu, a young trained social worker recently qualified, is working in a community-based organisation. She recently organised a women’s group around weekly kirtan (Devotional music and worship day organised by women themselves. A Brahmin woman conducts the worship). The residents of the Basti belong to low-income groups, and mostly of lower castes.

After one such session, Renu asked Mrs. G about her daughter-in-law Kala. Renu told Mrs. G that though Kala had arrived some time back, she had not been seen in the present group. Mrs. G invited Renu to visit their home and meet her daughter-in-law.

During the home visit, Renu found that Kala was looking very ill, was obviously anaemic, and did not talk to Renu at all. Sensing Renu’s concern, Mrs. G took Renu outside and started complaining about Kala. She informed Renu that Kala was very lazy, did not know how to cook or do other household work, and that Kala always pretended to be ill to escape work.

Renu decided to take up the case to help the family. As the family had not asked the help, Renu had to explore the particulars of the family and gather other relevant information very slowly and discreetly (quietly) so that
no member of the family felt offended. She learnt the following details about the family.

**The Social Casework Process**

Renu realized the importance of applying different principles of casework to be able to establish positive relationship not only with Kala, who Renu identified as her client, but also with Mrs. G and Mohan, Kala’s husband. Only then could she hope to help Kala. She accepted Mrs. G Kala and Mohan; adopted a non-judgemental attitude; created an atmosphere in which the persons concerned could share their experiences and feelings freely. (Principle of purposeful expression of feelings) She was careful not to allow her initial sympathetic attitude towards Kala and anger against Mrs. G to bias her and affect her exploration work. (Controlled emotional involvement) She had to keep an open mind to gather and interpret information.

**Study**

Renu interviewed Mrs. G in her shop. She visited Kala in the presence of Mrs. G and by involving both of them in conversation learnt various facts about their situations. Once or twice she met Mohan along with his mother to observe their interaction. (Using tools of interviewing and home Visit.)

Mrs. G in late forties, lost her husband when her two sons were still small. Her elder son had shifted, after marriage, to his own establishment in another Basti. Mrs. G owned the single room tenement, acquired by her as result of the slum clearance scheme of the City Government. She also owned a small shop near her home in which she sold simple items of daily needs.

Her younger son Mohan, aged 20 years, worked as a worker in a factory nearby. He had left school after
studying till class four. Mohan was under awe of his mother and obeyed her completely.

Kala was 16 years old and belonged to a village in the district of Jhansi, in the State of Uttar Pradesh. She had studied upto 7th standard and had been forced to leave studies. Kala was not used to cooking on kerosene oil stove. In the village, they used Chullah, with wood and cow dung cakes as fuel. Theirs was a big family with something going on all the time. She had been very scared in the City, very unsure of herself. Her mother-in-law never liked anything that she did. Her husband did not bother about her or her health problems. She had been feeling weak and sickly for quite sometime but had not been taken to the doctor. Kala had become depressed and lost her appetite. She never had any energy to do work fast or properly. Mrs. G did not agree with these observations.

Assessment

After reflecting on the facts (objective facts and feelings about those facts and experiences), Renu arrived at the following inferences tentatively:

- Kala was from a village and found living in the city stressful;
- She was perhaps not prepared for marriage, being quite young;
- Kala found herself under constant scrutiny of her mother-in-law, Mrs. G, their family consisting of only three members;
- Her sickness could be more due to depression than actual physical reasons (psychosomatic symptoms);
In any case, it was advisable to get her medical care to eliminate any physical causes of sickness;

Kala perhaps expected more support from her husband which was not there. Mohan just did not react to the situation;

He did not want to be blamed or nagged by the mother for having supported the wife as had been the case with his older brother;

Mrs. G had felt hurt when her older son had left her;

She wished to keep her younger son and daughter-in-law under her control;

She felt insecure. After long widowhood and its associated problems, she felt that she had the right to demand obedience from her son and daughter-in-law;

She wished to prove to the community people that she had full control over her household.

**Plan of Action:** Having achieved positive relationship with Mrs. G and Kala, Renu considered the following actions for initiating the process of helping the family:

a) **Medical Care**

1) Convince Mrs. G to allow Kala to go to hospital for proper medical check-up.

2) To persuade Mohan to accompany Kala to the hospital, otherwise offer to escort Kala for medical check-up.

This will also confirm whether Renu had really won the family’s trust.
b) **Facilitating Role Transition**

1) Help Kala accept her new roles of the daughter-in-law and that of wife.

Provide her emotional support and an opportunity to express her feelings in a safe and encouraging professional relationship with Renu.

c) **Improving Interpersonal Relationships within the Family**

1) Help Mrs. G understand difficulties of a young bride from a small village;

2) In a joint session, help Mrs. G spell out her expectations from Kala and let the latter express her anxieties;

3) Help the two women develop bonds of affection.

d) **Use of Social Intercourse for Kala’s Resocialization**

1) Persuade Mrs. G to let Kala join women’s group to increase her interaction with the community people;

2) In case Mrs. G agreed to this suggestion of Renu, this had to be done very cautiously because women’s curiosity and comments may create complications. That may undo all that Renu had accomplished. (Community pressures may have both positive and negative influence.)

e) **Assertiveness Training for Mohan**

1) To try for a breakthrough with Mohan and help him to become more assertive without being
disrespectful towards his mother (A tall order! Renu felt);

2) Mohan could be persuaded to join some group of men in the community or at his work place;

3) Help Mohan take on the role of husband and feel responsible for Kala.

f) **Use of Community Resources**

1) Identify some woman in the community who was friendly with Mrs. G and could help in reducing Mrs. G’s antagonistic attitude towards Kala;

2) Enlist help of such a contact by ensuring that this woman understands Renu’s intentions.

g) **Professional Relationship as an Intervention**

**Intervention**

How many of the tasks listed above would actually be done depended, of course, on the family members’ reaction to the first task decided upon. Renu could not take her rapport with Mrs. G for granted. She had to continuously work at maintaining relationship with all the members. Relationship itself could be therapeutic (healing).

**Evaluation**

Kala carried on the medical treatment prescribed. Kala started talking more with her mother-in-law and took pains to cook food according to the latter’s instructions. Mohan went with Kala to the hospital couple of times and worked in his mother’s shop to enable her to take rest. Kala attended the kirtan along with Mrs. G. Mrs. G showed off her daughter-in-law proudly in the
women’s group. Kala had a good voice and sang devotional songs in the group, which were appreciated by other women.

**Termination and Follow-up**

As the things were under control and interpersonal relationships within the family improved, Renu reduced her visits to the family. As she continued to work in the Basti, she would greet them occasionally but terminated the case.

**Assignments – II**

a) In case Mohan had been addicted to alcohol or drugs, what would be your action plan?

b) If the husband and mother-in-law had been beating Kala (domestic violence), what would your action plan (interventions) be?

c) What legal provisions are there for dealing with cases of Domestic Violence?

d) In the light of the concept of “empowerment”, work out an action plan for helping Kala.

e) As a caseworker at a Remand Home, you are required to work with Mohan/ Mrs. G. Critically review the use of the principles of acceptance and non-judgmental attitude in such a case.

Write down your answers and discuss with your field instructor.

**Conclusion**

We have seen that Social Casework Practice is determined by the client (person), his/her social environment (context), the problem and/or concern for
which the client needs professional intervention (problem), and the setting in which the worker is employed and where the client meets the worker (place).

Study of ‘Person’ and ‘Problem’ has two dimensions: 1) Needs and 2) Life Span (Developmental tasks and social roles concepts) perspectives. Understanding goals, services and service delivery systems, and resources of human service organisations (Place), in which the worker is employed, is very necessary for the caseworker to utilize casework process for helping the clients.

You have also gone through a brief description of different client groups and settings where these client groups receive casework services.

The Process of Social Casework (Study, Assessment, Intervention, Evaluation, and Termination and Follow-up) has been illustrated through two cases.

The illustration and the questions raised in the Assignments will help you in appreciating various factors that are likely to influence assessments you arrive at and interventions you may decide to offer. The illustrations also sensitize you towards use of some of the principles and the skills in the Social Casework Process.

You have also been able to get some idea of settings and areas of social casework practice to understand and appreciate its scope and relevance.

**References**


Social Group Work: Historical Development

*Sherry Joseph*

**Introduction**

Group work is one of the methods used predominantly in the context of the face-to-face group and which uses the group also as a medium of action. It is a unique, exciting, dynamic way to help people make changes in their lives that they themselves desire. Groups are used effectively by social workers today to help people of all ages and all walks of life, enhance their social functioning and to cope more effectively with their problems. Group workers are involved in all fields of social work practice and are to be found in mental health, family counselling, child welfare, substance abuse, disability, correctional and many other settings. They are critically important to members of clinical teams attempting to respond to serious mental and emotional social problems.

They also work in nonclinical settings in which they seek to foster social growth and enhance social integration. They work among children, youth and in community settings and are integral to community based programmes that seek to facilitate community cohesion and more effective community based response to social needs. Today small groups are considered as a useful instrument for community change and development.

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especially for the welfare and development of weaker sections, marginalized population. For instance, self help groups, micro credit and savings have become an integral programme in the field of women’s empowerment and organisation of poor and marginalized people for socio-economic development.

Relevance of Groups for Individual and Community for Change and Development

Human interaction in society takes place in several forms. The most common form is interpersonal interaction between two persons — you and I. If we look at our daily routine, we will notice that a large number of our activities throughout the day require interpersonal interaction. At the same time, we spend a lot of time at work and at home in small groups.

Why should we worry about small groups? Why do we need to learn about them? At a general level, we all need to learn about small groups so that we can play our membership roles in different groups more effectively. Besides, there is a special relevance of groups to individual and community change and action.

The principle trait of working with groups in social work settings is that of mutual aid. It is believed that people grow and change as they relate to others, both in receiving and in giving help. A part of this process recognises that everyone not only can take from but also have something very important to contribute to others. Northen summarises the forces that are released by this mutual aid process that help individual growth and changes as follows:

1) Mutual support: When members are supportive of each other and receive additional support from the group worker, a climate is created in which
members are able to express themselves and try out new thoughts and behaviours.

2) **Cohesiveness**: This dynamics results from the affective ties that the members develop with each other. A commitment to the group and to each other results from this force.

3) **Relationships**: The optimum condition to help members change requires a blend of support and challenge.

4) **Universalisation**: The members discover that he/she is not the only person who is feeling or behaving in this manner. There is solace in knowing that one is not alone.

5) **Instillation of hope**: Groups provide opportunities to relate to others who may be more optimistic and, in fact, may have accomplished some very important tasks and goals. The group as a whole, with the help of the worker, may convey some very positive expectations for the members.

6) **Altruism**: A great deal of self-esteem results from the members becoming aware that he/she does have something of value to give to others, whether it is a suggestion, the narration of an experience, or simply support and concern.

7) **Gaining knowledge and skills**: The group provides opportunities to learn from others and to try new ways of thinking and behaving in a safe environment.

8) **Catharsis**: Ventilation of feelings and exposing one’s ideas to others who are accepting, frees energy, and the member can continue to work toward the desired changes.
9) **Corrective emotional experiences:** The group setting allows the members to correct earlier dysfunctional relationships by providing a primary group experience in which the person can reexperience and correct ways of feeling about and relating to significant others. Often this is accomplished by working through transferences with the worker or with other members. Transferences result when the member perceives another in the group as being like a significant other that they had experienced earlier in their life.

10) **Reality testing:** Groups provide a setting in which the members can test and compare their perceptions and feelings. This process promotes validation or corrections of distortions in perceptions.

11) **Parameter and pressure of group membership:** The experiences and norms of the group help the member to function within certain limits, often allowing him/her to reduce resistance to authority, accept necessary limitations and behave in a manner acceptable to others.

The participatory approach to development using different approaches like Participatory Learning and Action (PLA), for instance, rely greatly on the potential of groups as a medium for social change. In such approaches, ignorant, weak and unorganised people are organised into small groups; the groups are organised, informed, empowered and networked to deal with the exploiting elites who own and control the majority of the resources. This process of social change entails informing, mobilizing and organising the poor and the weak, so that they can identify, articulate and struggle for their common interests. This is best possible in small group situation. The relevance of groups to community change and development is three-fold.
1) **Small groups are powerful vehicles for learning:**
   In a small group, we are able to share our experiences and reflect upon them. Others are able to give me feedback about myself in small group. The process of interaction with others provides the motivation to learn in a small group. This group acts as an arena for generating insights and analyzing experiences. The experiential nature of group work makes it imperative that members work and learn in small groups.

2) **Small groups are a basis for action and change:**
   In group work, learning is seen as a step towards change and new actions. Thus members can experiment with new actions in groups. They can then use those actions outside the group work situation. The nature of group work is such that it promotes collective action, and hence groups become the context for planning and understanding such collective actions.

3) **Small group is a building block of organisations:**
   Organisations of all types rely on small groups. People's organisations develop from the building blocks of small groups. When activists work with tribals and women and landless labourers to form their organisations, they start with small groups. Besides, village meetings, youth animation and camps are also examples of groups. Hence we can strengthen people's organisations by creating a strong base of groups. Thus as field workers we work with small groups in the field all the time. Our role in the field is largely a role of strengthening small groups and making them work more effectively.

Thus small groups acquire great significance in our work in the field. Groups provide the essential context of learning in group work. We learn in and through groups.
Concept and Definition of Group Work

Group work is a modality for bringing about change either in the environment or in the member’s intrapersonal or interpersonal relationships. According to Garvin social group work uses the group approach to accomplish the goals common to all social work activities: (1) to prevent members from developing dysfunctional ways of coping with their situation; 2) enhance member’s engagement in and use of artistic, social, intellectual and other endeavours; and (3) to rehabilitate members who have developed handicaps in their social and personal functioning.

One way of understanding what group work is about is by looking at what the group worker does. This is clearly explained in the report – Definition of the Functions of Group Worker (1949) of the American Association of Group Workers. It is reproduced below.

“The group worker enables various types of groups to function in such a way that both group interaction and programme activities contribute to the growth of the individual, and the achievement of the desirable social goal.

The objectives of the group worker include provision for personal growth according to individual capacity and need; the adjustment of the individual to other persons, to groups and to society, the motivation of the individual toward the improvement of society and; the recognition by the individual of his own rights, abilities and differences of others.

Through his participation the group worker aims to effect the group process so that decisions come about as a result of knowledge and a sharing and integration of ideas, experiences and knowledge, rather than as a result of domination from within or without the group.
Through experience he/she aims to produce those relationship with other groups and the wider community which contributes to responsible citizenship, mutual understanding between cultural, religious, economic or special groupings in the community, and a participation in the constant improvement of our society towards democratic goals.

The guiding purpose behind such leadership rests upon the common assumptions of a democratic society; namely, the opportunity for each individual to fulfill his capacities in freedom, to respect and appreciate others and to assume his social responsibility in maintaining and constantly improving our democratic societies.

Underlying the practice of group work is the knowledge of individual and group behaviour and of social conditions and community relations which is based on the modern social sciences.

On the basis of this knowledge the group worker contributes to the group with which he works with a skill in leadership which enables the members to use their capacities to the full and to create socially constructive group activities.

He is aware of both programme activities and of the interplay of personalities, within the group and between the group and its surrounding community.

According to the interests and needs of each, he assists them to get from the group experience, the satisfaction provided by the programme activities, the enjoyment and personal growth available through the social relations, and the opportunity to participate as a responsible citizen.

The group worker makes conscious use of his relations to the group, his knowledge of programme as a tool and his understanding of the individual and of the group process and recognizes his responsibility both to individuals and groups
with whom he works and the larger social values he represents”.

According to Staub-Bernasconi (1991), social work with groups have at least three meanings; (a) work within the group because it is the richest resource system for problem solving and help for its members; (b) work with a group, whose structure and process are the main subjective or objective problem area; and (c) work with groups as an instrument to reach goals outside the group in another social system. Added to this group work need not be confined to helping clients, but could also be used to help the individual group worker to become more effective in his/her work with the clients. It could even be used to help organisations to reduce, mitigate and manage intra and inter-organisational conflict. Thus group work methodology can be help not only the clients, but also the organisations to become more effective in helping its client groups to change the social environment. Thus networking, and collaboration with other helping agencies/agents, planning and social change can also be effectively accomplished through the use of group work technique.

Let us now look at how social group work is defined by different people.

Social group work is a method of social work that helps persons to enhance their social functioning through purposeful group experiences and to cope more effectively with their personal, group or community problems (Marjorie Murphy, 1959).

Social group work is a method through which individuals in groups in social agency settings are helped by a worker who guides their interactions in programme activities so that they may relate themselves to others and experiences growth opportunities in accordance with
their needs and capacities to the end of individual, group and community development (Trecker, 1955).

Group work is a broad professional practice that refers to the group setting. It involves the application of group theory and process by a capable professional practitioners to assist an interdependent collection of people to reach their mutual goals, which may be personal, interpersonal or task-related in nature (Association for Specialists in Group Work, 1990).

**Historical Development of Group Work**

In order to develop a broad perspective concerning the potential uses of groups in social work practice, it is helpful to understand the developments that have occurred in the study of groups and in the practice of group work over the years. This historical perspective will also give you a firm foundation upon which a knowledge base can be built upon for effective group work practice.

Two types of inquiries have enhanced our understanding of groups. One type of inquiry has come from social scientists who have studied groups by experimenting with them in laboratories or observations of group’s functioning in community setting. The other type has come from group work practitioners who have examined how groups function in practice settings like social work, psychology, education and recreation. The results of both enquiries have led to improved methods of working with a variety of different types of groups.

A basic research question that was asked by social scientist concerns the extent to which being a part of a group influences the individual group member. The early findings suggest that the presence of others has a significant influence on an individual group member
and tends to generate forces to conform to the standards of behaviour and judgments of individual members. Le Bon in 1910 referred to the forces that were generated by group interaction as ‘group contagion’ and ‘group mind’, recognising that people in groups react differently from individuals.

The concept of a primary group was also an important contribution to the study of groups. Cooley in 1909 defined a primary group as a small informal group such as family or a friendship group, which has a tremendous influence on member’s values, moral standards and normative behaviour. The primary group was therefore viewed as essential in understanding socialisation and development. Allport (1924) for example, found that presence of others improved task performance.

After World War I, social scientists also began to study groups operating in the community. One of the earliest was Frederic Thrasher (1927) who studied gangs of delinquents in the Chicago area by becoming friendly with gang members and by observing the internal operations of gangs. Thrasher observed that every member of a gang had a status within the group that was attached to the functional role that the member played for the gang. Thrasher also drew attention to the culture that developed within a gang, suggesting there was a common code that all members followed. The code was enforced by group opinion, coercion and physical punishment. This work along with others have influenced the ways group work is practiced with youths in settlement houses, neighbourhood centres and youth organisations.

Later some group workers relied on naturalistic observations of groups of boys in a summer camp to demonstrate how cohesion and intergroup hostility develop. Social scientists also learned more about
people’s behaviour in groups from studies done in industry and in the United States Army.

During the 1950s an explosion of knowledge concerning small groups took place. The major themes that developed in the first half of the twentieth century includes conformity, communication and interaction patterns, leadership, interpersonal preference and social perception, that are important components while dealing with group process in social work. It is also important to mention the contribution of psychoanalytic theory, learning theory, field theory, social exchange theory and the system theory that explains group functioning, the details of which will be discussed elsewhere.

Casework began in England and the United States in Charity Organisations in the late nineteenth century and group work grew up largely in English and American settlement houses. Group work was also used for therapeutic purpose in state mental institutions but much of the interest in group work stemmed from those who had led socialisation groups, adult education groups and recreation groups in settlement houses and youth service agencies.

It is often believed that group work is considerably younger than casework, but group work agencies actually started only a few years after casework agencies. The first course of group work was offered in the School of Social Work at Western Reserve University in Cleveland by Clara Kaiser. When she left for New York in 1935, Grace Coyle continued to develop the course. It was taught partially as a method and partially as a field of practice. By 1937 about 10 schools offered special course in social work. However, as Schwartz points out, the real historical differences between the two is that casework soon became identified with social work
profession where as group work did not begin to become formally linked with the profession until much later during the National Conference of Social Work in 1935. In 1936 the American Association for the study of group work was founded with an aim to clarify and refine both the philosophy and practice of group work. By 1939 group work began to be treated as a separate subject at the National Conference of Social Work. The identification of group work with social work profession increased during the 1940s although group workers continued to maintain loose ties with recreation, adult education, and mental hygiene until the 1950s when group workers joined together with six other professional groups to form the National Association of Social Workers in 1955.

The use of group work in settlement houses and casework in Charity Organisations was not an accident. Group work and the Settlement houses where it was practiced offered citizens the opportunity for education, recreation, socialisation and community involvement. Unlike Charity Organisations that primarily focussed on the diagnosis and treatment of the problems of the poor, settlement houses offered groups as an opportunity for citizens to join together to share their views, to gain mutual support and to exercise the power derived from their association for social change.

Unlike casework, where there is a sharp distinction between the given and the receiver, group work evolved out of the idea of self-help, self-help of a group nature. While philanthropy was generally of middle class origin, mutual self-help as the name implies, developed from the need for mutual aid and support. As compared to caseworkers who relied on insight developed from psychodynamic approaches and on the provision of concrete resources, group workers relied on programme
activities to spur members to action. Programme activities of all types were the medium through which group attained their goals. Activities such as camping, singing, group discussion, games and arts and crafts were used for recreation, socialisation, education, support and rehabilitation. Unlike casework, which was largely focussed on problem solving and rehabilitation, group work activities were used for enjoyment as well as to solve problems. Thus the group work method that developed from the settlement house work had a different focus and a different goal than casework method.

Differences between casework and group work can also be clearly seen in the helping relationships. Caseworkers sought out the most underprivileged victims of industrialisation, treating ‘worthy’ clients by providing them with resources and acting as good examples of virtuous, hardworking citizens. Although they also worked with those who were impaired and those who were poor, group worker did not focus solely on the poorest cases or on those with the most problems. They preferred the word members to client. They emphasised working with member’s strengths rather than their weakness. Helping was seen as a shared relationship in which the group worker and the group members worked together for mutual understanding and action regarding their common concerns for the community in which they lived. As concerns were identified, group members acted to support and to help one another and the worker acted as a mediator between the demands of society and the needs of group members.

Shared interaction, shared power and shared decision making placed demands on the group worker that were not experienced by caseworkers. Group workers frequently had to act quickly during complex and often fast paced group interactions while remaining aware of
the welfare of all group members. The number of group members, the fact that they could turn to one another for help and the democratic decision making process that were encouraged in groups meant that group workers had to develop skills that were different from those of caseworkers.

Between 1910 and 1920, those who were concerned with adult education, recreation, and community work began to realise the full potentials of group work. They began to understand that groups could be used to help people participate in their communities to enrich people's lives and to support those persons whose primary relationship were not satisfying. They became aware of the potential that groups had for helping people learn social skills and problem-solving skills. They began to use groups to prevent delinquency and to rehabilitate those who were maladjusted. The organisations that build the foundation of group work were the self-help and informal recreational ones: settlement houses, neighbourhood centres, Y's, the Scouts, Camp Fire Girls, Jewish centers and camps. Latter designated as 'group work agencies' the new concepts that united these services are participation in small groups, the democratic way of life, community responsibility and membership in a worldwide effort.

Early in 1920 Mary Richmond realised the potentials of working with groups and wrote on the importance of small group psychology. Mary P Follett, a political scientist in 1926 wrote in the book — The New State, that solutions to social problems would emerge from the creation of groups in neighbourhood and around social interest. John Dewey, who developed the idea of progressive education also found the usefulness of small groups as early as 1933. According to him, social group work method was an application of the principles of
progressive education to small informal groups in leisure time settings. In fact, group work was very closely associated with community organisation method and its concept of citizen’s participation.

During the 1940s and 1950s group workers began to use groups more frequently to provide therapy and remediation in mental health settings influenced by the psychoanalysis and ego psychology and partly of World War II, which created a severe shortage of trained workers to deal with mentally disabled war veterans. It was spurred on by the continued interest in the use of groups in psychiatric settings during the 1950s.

Although there was an increased emphasis in the 1940s and 1950s on utilising groups to improve the functioning of individual group members, interest remained in using groups for recreational and educational purposes, especially in Jewish community centres and in youth organisations such as Girls Scouts and the YWCA. During the 1940s and 1950s groups were also used for purposes of community development and social action in many different neighbourhood centres and community agencies. At the same time, there was an accompanying increase in the study of small group as a social phenomenon.

The years after the war saw an immense rise in group work literature. Gertrude Wilson’s Social Group Work Practice (1949), Harleigh B. Trecker’s Social Group Work (1949), Grace Coyle’s Group Work with American Youth (1948) and Gisela Konopka’s Therapeutic Group Work with Children (1949) appeared in a time span of only two years. These books made the attempt to clarify the orderly process of social group work as part of the helping function of social work on the wide scale from healthy to sick individuals and groups.
During the decade of the 1960s the popularity of group services declined. The skills of group worker were then viewed as being more significant in the area of community organisation in organising youths and adults around important social concerns. Also during the 1960s the push towards a generic view of practice and the movement away from specialisations in casework, group work and community organisations, tended to weaken group specialisations in professional schools and to reduce the number of professionals who were trained in group work as their primary mode of practice.

During the 1970s interest in group work continued to wane. Fewer professional schools offered advanced course in group work and fewer practitioners used group work as a practice method. In order to increase practitioners awareness about the potential benefits of groups, group workers throughout the US and Canada came together and held the first Annual Symposium for the Advancement of Group Work in 1979. Each year since then, the annual symposium about group work has been convened.

Group work as a method of social work came to India in 1936 along with the introduction of professional social work education, ten years after its formal acknowledgement in the West. Even though there is evidence of the group approach being used in charity, imparting religious education through oral tradition, mobilising people for the freedom struggle against the British, social reform and in welfare strategies such as the Sarvodaya and Bhoodan movement, there is very little documentation and theorisation based on it. All schools of social work in India teach a course/paper in social group work (sometimes alternatively titled as social work with groups) at the graduate and the postgraduate level.
There was an effort to develop some indigenous materials in group work by the then United Nations Social Welfare and Development Centre for Asia and the Pacific and the Association of Schools of Social Work in 1979. Compared to casework and community organisation, contributions in developing indigenous materials on group work are lagging even today. The Department of Social Work at the University of Baroda developed and published some of the first records of group work practice in 1960. The Association of Schools of Social Work jointly with the Technical Cooperative Mission (USA) laid down minimum standards for group work practice. Two social workers who have tried to trace the historical development of group work in India, V.D. Mehta (1987) and Helen Joseph (1997), agree that the theoretical perspective taught in the schools of social work in India and the practice models are primarily American as in the case of social work itself.

The practice of social group work in India is generally limited to correctional and other residential institutional setting, hospitals and so on in the urban areas. The general activities undertaken were recreational, educational and cultural in character. Group work method was also practiced in community work, as in the case of Mahila Mondals and Yuvak Mondals, but it was primarily recognised as community work. Practice of group work is also given emphasis through the fieldwork programme in some schools. Students placed in agencies and open communities work with groups of children, youth, adults and elderly who are either ‘sick’ or healthy in urban and rural areas. For instance, the student of Visva Bharati placed in open communities organise groups of children and adults in the poor neighbourhood with a combined objective of socialisation, structured recreation, functional literacy, awareness generation on health and
hygiene, environment and other socially relevant issues. In the recent years, groups of adolescent girls and boys are also been organised in the villages to deal with issues of life skill development including home management, reproductive and sexual health, sexuality, family planning methods etc., considering the social reality that majority of them will be getting married at an early age.

This brief review of historical trends in group work practice is intended to enable you to understand current trends in group work practice from a broad perspective. Today a remedial approach focussing on improving the functioning of individual group member continues as the preferred method of practice. This model of practice is based on problem identification, assessment, and treatment. The emphasis on mutual aid characteristics of group work also continues where the worker’s role is to mediate between the needs of group members and society. Mutual aid and shared, reciprocal responsibility are appropriate in such settings such as short-stay homes and Nari Niketans that are designed to helping women in distress to live together, to support each other and to cope with distressing life events. It is also useful in community groups like mahila mondals, youth clubs and other community groups where reciprocal sharing of mutual concerns and the giving and receiving of support are central purposes. Professional social workers are also involved as consultants or facilitators of self-help groups that emphasise the mutual aid characteristics of a group.

**Group Process**

Small group process, the way groups’ function, is an important content in group work. It is so because we need to know how small groups function, what are its key dynamics and how they can be made to function
more effectively. Hence we also need to know how to facilitate small groups. Facilitation skills of small groups are necessary if we want to strengthen a group or we want to ensure that a group function effectively to accomplish its objectives. It is with this perspective that this section looks at group process.

In the helping process of group work, the client is the group member and the group as a whole. This dual focus changes the psychological climate fundamentally from that in a one-to-one relationship. A relationship may exist between the individual group member and the group worker; but at the same time the person is surrounded by equals, by people ‘in the same boat’. Hence, the relationship of the members to each other has much meaning. This is never static. They change in time, and in relation to specific situations even if a helping person such as group worker is not present. This changing movement is called the group process. Marjorie Murphy defined it as ‘the totality of the group’s interactions, developments and changes which occur in the group’s life’.

The dynamics of the group are deeply intertwined with the dynamics of each individual in it. The movement of the group — the group process, is seen in the relationship between its members. It changes in time; its quality depends on the degree of health and the maturity of the members and on the purpose of the group. The group worker must understand group formation. He/She must understand the necessity for subgroups and assess their place in the total group. He/She must know about the positions of members as isolates, leaders, or members of subgroups for the role of each member is related to the expectations of the group and to its values and mores. He/She must recognize the bond as a vital part of every group and
realize that its degree is intrinsically related to group formation and goal. Finally, he/she must recognize conflict-solving and decision making as specific functions of groups, with a strong impact, in turn on individual development.

In all human interactions there are two major ingredients: content and process. The first deals with subject matter of the task upon which the group is working. In most interactions, the focus of attention of all persons is on the content. The second ingredient, process, is concerned with what is happening between and to group members while the group is working. There is a certain dynamic character to the functioning of the small groups. It does not remain static. It moves and change over a period of time. It is this dynamic character of small groups that makes it possible to change them. Group process deals with such items as morale, feeling tone, atmosphere, influence, participation, style of influence, leadership struggles, conflicts, competition, cooperation etc. In most interactions, very little attention is paid to process, even when it is the major cause of ineffective group action. Sensitivity to group process will better enable one to diagnose group problems early and deal with them more effectively. Since these processes are present in all groups, awareness of them will enhance a person’s worth to a group and enable him to be more effective group participant (Balgopal, 1989). The following description will help you to analyse the dynamics of the group process that take place in almost every group.

**Participation:** One indication of involvement is verbal participation. Look for differences in the amount of participation among members.

1) Who are the participators?
2) Who are the low participators? Do you see any shift in participation? Do you see any possible reason for this in the group’s interaction?

3) How are the silent people treated? How is their silence interpreted? Consent? Disagreement? Disinterest? Fear? Shy?

4) Who talks to whom? Do you see any reason for this in the group’s interaction? How is this relevant in the larger environmental context?

5) Who keeps the ball rolling? Why? Do you see any reason for this in the group’s interaction?

**Influence:** Influence and participation are not the same. Some people may speak very little, yet they capture the attention of the whole group. Others may talk a lot, but generally not listened to by other members.

1) Who are the members high in influence? That is, when they talk others seem to listen.

2) Who are the members low in influence? Others do not listen to or follow them.

3) Is there any shift in influence? Who shifts?

4) Do you see any rivalry in the group? Is there a struggle for leadership?

5) What effect does it have on other group members?

**Styles of Influences:** Influence can take many forms. It can be positive or negative. It can enlist the support or cooperation of others or alienate them. How a person attempts to influence another may be the crucial factor in determining how open or closed the other will be towards being influenced. The following are four styles of influences that frequently emerge in groups.
1) **Autocratic:** Does anyone attempt to impose his will or values on other group members; tries to push them to support his decisions? Who evaluates or passes judgement on other group members? Do any members block action when it is not moving in the direction they desire? Who pushes to ‘get the group organised’?

2) **Peacemaker:** Who eagerly supports other group members’ decisions? Does anyone consistently try to avoid conflict or unpleasant feelings? Is any member typically deferential toward other group members — give them power? Does any of the members appear to avoid giving negative feedback i.e., who will participate only when they have a positive feedback to give.

3) **Laissez Faire:** Are any group members getting attention by their apparent lack of involvement in the group? Does any group member go along with group decisions without seeming to commit himself one way or the other? Who seems to be withdrawn and involved and does not initiate activity but participates mechanically and only in response to another member’s question.

4) **Democratic:** Does anyone try to include everyone in a group decision or discussion? Who expresses his feelings and opinions openly and directly without evaluating or judging others? When feelings run high and tension mounts, who are the members who attempt to deal with the conflict in a problem-solving way?

**Decision Making Procedure:** Many kinds of decisions are made in groups without considering the effects of these decisions on other members. Some people try to impose their own decisions on the group, while others
want all members to participate or share in the decisions that are made.

1) Does anyone make a decision and carry it out without checking with other group members (Self authorised)? For e.g. she decides on the topic to be discussed and starts talking about it. What effect does this have on other group members?

2) Does the group drift from topic to topic? Who jumps topics? Do you see any reason for this in the group’s interaction?

3) Who supports other members’ suggestions or decisions? Does this support result in the two members deciding the topic or activity for the group (Handclasp)? What effect does this have on other group members?

4) Is there any evidence of a majority pushing a decision through over other members’ objections? Do they call for a vote (majority support)?

5) Is there any attempt to get all members participate in a decision making (consensus)? What effect does this seem to have on the group?

6) Does anyone make any contributions that do not receive any kind of response or recognition (flop)? What effect does this have on the member?

**Task Functions:** These functions illustrate behaviours that are concerned with getting the job done or accomplishing the tasks that the group has before them.

1) Does anyone ask for or make suggestions as to the best way to proceed or to tackle problems?

2) Does anyone attempt to summarise what has been covered or what has been going on in the group?
3) Is there any giving or asking for facts, ideas, opinions, feelings, feedback or searching for alternatives?

4) Who keeps the group on target or prevents digressing?

**Maintenance Functions:** These functions are important to the morale of the group. They maintain good and harmonious working relationships among the members and create a group atmosphere, which enables each member to contribute maximally. They ensure smooth and effective teamwork within the group.

1) Who helps others get into the discussion (gate opener)?

2) Who cuts off others or interrupts them (gate closers)?

3) How well are members getting their ideas across? Are some members preoccupied and not listening? Are there any attempts by group members to help others clarify their ideas?

4) How are ideas rejected? How do members react when their ideas are not accepted? Do members attempt to support others when they reject their ideas?

**Group Atmosphere:** Something about the way a group works creates an atmosphere which in turn is revealed in a general impression. In addition, people may differ in the kind of atmosphere they like in a group. Insight can be gained into the atmosphere characteristic of a group by finding words that describe the general impressions held by group members.

1) Who seems to prefer a friendly congenial atmosphere? Is there any attempt to suppress conflict or unpleasant feelings?
2) Who seems to prefer an atmosphere of conflict and disagreement? Do any members provoke or annoy others?

3) Do people seem involved and interested? Is the atmosphere one of work, play, satisfaction, taking flight, sluggish etc.?

**Membership:** A major concern for group members is the degree of acceptance or inclusion in the group. Different patterns of interaction may develop in the group which gives clues to the degree and kind of membership.

1) Is there any sub-grouping? Some times two or three members may consistently agree and support each other or consistently disagree and oppose one another?

2) Do some people seem to be ‘outsider’ in the group? Do some members seem to be most ‘in’? How are those outsiders treated?

3) Do some members move in and out of the group, e.g., lean forward or backward in chair or move chair in and out. Under what conditions do they come in or move out?

**Feelings:** During any group discussion, feelings are frequently generated by the interactions between members. These feelings, however, are seldom talked about. Observers may have to make guesses based on tone of voice, facial expressions, gestures and many other forms of non-verbal cues.

1) What signs of feelings do you observe in group members? Anger, irritation, frustration, warmth, affection, excitement, boredom, defensiveness, competitiveness etc.
2) Do you see any attempts by group members to block the expression of feelings, particularly negative feelings? How is this done? Does anyone do this consistently?

**Norms:** Standards or ground rules may develop in a group that control the behaviour of its members. Norms usually express the beliefs or desires of the majority of the group members as to what behaviours should or should not take place in the group. These norms may be clear to all members (explicit), known or sensed by only a few (implicit) or operating completely below the level of awareness of any group members. Some norms facilitate group progress and some hinder it.

1) Are certain areas avoided in the group (e.g., smoking, religion, talking about present feelings in group, etc.)? Who seems to reinforce this avoidance? How do they do it?

2) Are group members overly nice or polite to each other? Are only positive feelings expressed? Do members agree with each other too readily? What happens when members disagree?

3) Do you see norms operating about participation or the kinds of questions that are allowed (e.g., ‘If I talk, you must talk’. ‘If I tell my problems you have to tell your problems’?) Do members feel free to probe each other about their feelings? Do questions tend to be restricted to intellectual topics or events outside of the group?

**Practice Activity**

Based on your field work practice with groups, explain the various aspects of group process that take place in the group.
Conclusion

In this chapter we started our discussion by saying that groups have a great potential for individual, group and community change and development. When we talk about social work with groups today, it conveys a meaning not necessarily restricted in bringing about change in the lives of individual member, but also change in the group as such and also change in the larger community or society at large. The group work method evolved out of the developments in the field of practice in social work and from the practice in other disciplines. Even though social group work came to India ten years after it was formally recognized as a method of social work in the West, the social work practitioners and educators in India had not contributed much to evolve a culturally relevant theoretical perspective and practice models.

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Characteristics and Significance of Groups

Introduction

All day long we interact first in one group and then in another. We live in a dwelling as part of a group, we learn in groups contained in the same classroom, we work in groups, we interact with friends in groups, and we spend much of our leisure time in groups. Our family life, our leisure time, our friendships, and our careers are all filled with groups. In fact, if a person from outer space conducted a study of the people of Earth, group membership would probably be the dominant characteristic noted. We are born into a group called the family, and we would not survive the first few minutes, the first few weeks, or even the first few years of our lives without membership in this group. It is within our family and peer groups that we are socialised into ways of behaving and thinking, educated, and taught to have certain perspectives on ourselves and our world. Our personal identity is derived from the way in which we are perceived and treated by other members of our groups. We learn, work, and play in groups. As humans we have an inherent social nature. Our life is filled with groups from the moment of our birth to the moment of our death. All these make groups one of the most important factors in our lives. In business, government, and the military there is great interest in improving the productivity of groups. There is great concern in

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our society with strengthening the family. Educators are striving to better understand how the classroom functions as a group. Drug abuse, delinquency and crime, and mental illness are all being treated through group procedures, and there is continued concern with making those procedures more effective. As the effectiveness of groups goes, our quality of life goes. The more effective our family, career, and educational groups, the higher the quality of our lives.

**Definition of Groups**

Not every collection of people can be considered a group. The Oxford English Dictionary defines *group* as a number of persons or things regarded as forming a unit on account of any kind of mutual or common relation or classified together on account of a common degree of similarity. There are three criteria suggested by this definition to call a group as a group:

a) Number of persons – more than one

b) Mutual or common relation

c) Similarity

Groups may be contrasted with aggregates. An *aggregate* is a collection of individuals who are present at the same time and place but do not form a unit or have a common degree of similarity. Individuals standing on a street corner, the members of an audience at a music programme are aggregates, not groups.

While the Oxford definition has captured the basic essence of a group, different social scientists have put forward their own views on what is a group with emphasis on the various aspects of a group. We can see some of the definitions below.
Interpersonal Interaction

A group may be defined as a collection of individuals who are interacting with one another. According to this definition, the individuals are not a group unless they are interacting with one another. Three psychologists who have defined group in this way are Bonner, Stogdill, and Homans. They stress that the primary defining characteristic of a group is interpersonal interaction. It is questionable that a group can exist without its members interacting with one another.

Perceptions of Membership

A group may be defined as a social unit consisting of two or more persons who perceive themselves as belonging to a group. According to this definition, the persons are not a group unless they perceive themselves to be part of a group. Two psychologists who have defined group in this way are Bales and Smith. They stress that the primary defining characteristic of a group, is that the members perceive themselves to be part of a group. It is questionable that a group could exist without its members being aware that they are members of a group.

Interdependency

Group may be defined as a collection of individuals who are interdependent. According to this definition, the individuals are not a group unless an event that affects one of them affects them all. Four psychologists who have defined group in this way are Cartright and Zander, Fiedler, and Lewin. These authors stress that the primary defining characteristic of a group is that the members are interdependent in some way. It is questionable that a group could exist without its members being interdependent.
Goals

Group may be defined as a collection of individuals who join together to achieve a goal. According to this definition, the individuals are not a group unless they are trying to achieve a mutual goal. Three psychologists who have defined group this way are Deutsch and Freeman.

They stress that the primary defining characteristic of a group is the craving of its members to achieve a mutual goal. It is questionable whether a group would exist unless there was a mutual goal that its members were trying to achieve.

Motivation

Group may be defined as a collection of individuals who are all trying to satisfy some personal need through their joint association. According to this definition, the individuals are not a group unless they are motivated by some personal reason to be part of a group. Two psychologists who have defined group in this way are Bass and Cattell. They stress that the primary defining characteristic of a group is that its members belong to the group in order to obtain needed rewards or to satisfy other personal needs. It is questionable that a group could exist without its member needs being satisfied by their membership.

Structured Relationships

A group may be defined as a collection of individuals whose interactions are structured by a set of roles and norms. According to this definition, the individuals are not a group unless their interactions are structured by a set of role definitions and norms. Two sets of psychologists who have defined group in this way are McDavid and Harari and Shel and Sherif.
They say that the primary defining characteristic of a group is that the interaction of its members is structured by role definitions and norms. It is doubtful whether a group could exist unless role definitions and norms structure the interaction of its members.

**Mutual Influence**

A group may be defined as a collection of individuals who influence each other. According to this definition, the individuals are not a group unless they are affecting and being affected by each other and therefore, the primary defining characteristic of a group is interpersonal influence. Shaw defined group in this way.

One solution to the profusion of definitions is to combine them all into one definition. A small group may be defined as two or more individuals who:

a) pursue common goals  
b) are interdependent  
c) interact with each other  
d) share norms concerning matters of common interest and participate in a system of interlocking roles  
e) influence each other  
f) find the group rewarding and  
g) define themselves and are defined by others as belonging to the group

Not all these characteristics are equally important and although it is impossible to gain consensus among social scientists as to which characteristics are most important we can arrive at a definition of group for the purpose of group work as follows.
A group is two or more individuals in face to face interaction, each aware of positive interdependence as they strive to achieve mutual goals, each aware of his or her membership in the group, and each aware of the others who belong to the group.

**Types of Groups**

All of us are simultaneously members of various types of groups. We are members of the family, members of friendship groups, members of work organisations and members of fan club or a religious group. Sociologists have attempted to classify/differentiate the various types of groups as follows:

**Voluntary and Involuntary Groups**

Voluntary groups are those we join through our own choice and effort. We may join a political party or a particular occupation. In contrast involuntary groups are those that we are forced to join or those that we are automatically members of without choice. For example, everyone is without a choice, automatically a member of sex, age and racial groups.

**Open and Closed Groups**

An open group is one in which virtually anyone can become a member. For instance, all can join the Hrithik Roshan fan club. A closed group, however, is much more difficult to join. Some exclusive clubs restrict membership so that all cannot join. Only a few elites manage to get memberships in such clubs. Similarly the mafia (underworld) is a closed group.

**Vertical and Horizontal Groups**

A vertical group consists of members from all walks of life, while a horizontal group consists predominantly of
members from one social class. Occupational groups – of doctors or electricians for instance – are composed largely of members from the same social class. On the other hand religious groups may have members from all classes.

**Primary and Secondary Groups**

Primary group is one where members develop close, personal, intimate and enduring relationships. Family, neighbours and work associates are examples of such groups. Members know one another well, greatly influence each other and feel closely related. On the other hand, in secondary groups individuals act towards one another in rather impersonal, superficial and utilitarian ways.

**Natural and Formed Groups**

Natural groups consist of members who come together in a spontaneous fashion on the basis of naturally occurring events, interpersonal attraction or the mutually perceived needs of members. Family, peer groups and street gangs are examples of natural groups. On the other hand formed group consists of members who come together through some outside influence or intervention. These are groups that are formed for a particular purpose. Therapy groups, encounter groups, committees and teams are examples of formed groups.

The type of group that we discussed last – formed group – is of great interest to group work as the groups that we come across in group work predominantly belong to this type of groups.

**Factors of Group Formation**

We can identify four major factors that influence our decision to join and remain in a wide variety of groups:
attraction to members of the group; the activities, goals, or the task of the group; affiliating with the people in the group; and meeting needs or goals lying outside the group.

Attraction to members of the group grows out of proximity and frequency of interaction. (Consider your own experience of friendship groups that are largely determined by who is available for interaction: your neighbours, classmates, roommates, and so on.) However, we must remember that proximity creates only the potential for attraction; other factors usually come into play when actually establishing a relationship. The power of similarity, especially attitudinal similarity, appears to be as strong in group formation as in interpersonal attraction.

The task of a group, as experienced in its activities and goals is often an important reason for joining. You join a photography club because you enjoy taking pictures and discussing that activity with others. You join a protest group against higher tuition fees because you cannot afford to pay more. In these examples, you are gaining rewards directly through group membership. The application of social exchange theory to group formation predicts that we join and remain in groups when the rewards for doing so outweigh the costs, thus yielding profits.

The third general factor of group formation is our desire to affiliate with the people in that group. We satisfy our need for affiliation through interacting with people, just as we meet our need for achievement through the activities and goals of the group. Whether we affiliate for social comparison, or to reduce anxiety, or to satisfy an innate craving, it is clear that the group is a powerful forum for meeting our basic social needs and a strong influence on our behaviour.
Group membership may help us meet needs that lie outside the group – thus, group membership may be a stepping stone to achieve an external goal, rather than a source of direct satisfaction. A college professor may regularly attend meetings of a professional association to enhance the probability of promotion. A candidate for political office may join a host of community organisations to enhance his or her chances for election.

When we consider attraction to a group, we must also consider the characteristics of the group itself. Several attributes of groups generally make them more attractive to prospective members and thus contribute to group formation.

- The more prestige a group can offer a member, the more attractive the group. Members who have positions of higher authority and prestige are usually most attracted to remain in the group.

- Co-operative relationships and joint rewards heighten the attractiveness of a group, whereas individual striving and competition detract from it.

- The degree of positive interaction among members directly affects attractiveness since it increases the range of personal and social needs being met.

- The size of the group affects its attraction. Smaller groups generally offer more possibility for interaction, for sharing similarities, and for meeting individual needs, and therefore tend to be more attractive.

- Positive relations with other groups may add to the prestige of the group and make it more attractive.
Nothing succeeds like success. Groups that are perceived as meeting their goals effectively usually appear to be more attractive.

**Plausible Hypothesis about Group Formation**

From the various factors influencing group formation the following hypothesis can be confidently stated.

1) People join groups in order to satisfy some individual need.

2) Proximity, contact and interaction provide an opportunity for individuals to discover the need satisfactions that can be attained through affiliation with others.

3) Interpersonal attraction is a positive function of physical attractiveness, attitude similarity, personality similarity, economic similarity, racial similarity, perceived ability of the other person (his or her success or failure) and need compatibility.

4) An individual will join a group if he or she finds the activities of the group attractive or rewarding.

5) An individual will join a group if he or she values the goals of the group.

6) There exists a need for affiliation which renders group membership rewarding.

7) An individual will join a group if he or she perceives it to be instrumental in satisfying needs outside the group.

8) Group development follows a consistent pattern, which may be characterized as orientation-evaluation-control.
Theories Underlying Group Work Practice

From knowledge about small groups accumulated over the years in laboratory and natural settings, investigators of group phenomena began to develop comprehensive theories to explain group functioning. An enormous variety of these theories exist. This section examines five of the most important theories: systems theory, psychodynamic theory, learning theory, field theory and social exchange theory. An understanding of these theories is important to place in the appropriate context the group processes and human behaviour in groups experienced by you when you do group work.

Systems Theory

Systems theory attempts to understand the group as a system of interacting elements. It is probably the most widely used and broadly applied theory of group functioning. According to this theory, groups are social systems with several interdependent members attempting to maintain order and a stable equilibrium while they function as a unified whole. Groups are constantly facing changing demands in their quest to attain goals and to maintain a stable equilibrium. Groups must mobilize their resources and act to meet changing demands if they are to survive. According to Parsons, Bales and Shils (1953), there are four major functional tasks for systems such as a group: 1) integration – ensuring that members of groups fit together; 2) adaptation – ensuring that groups change to cope with the demands of their environment; 3) pattern maintenance – ensuring that groups define and sustain their basic purposes, identities and procedures; and 4) goal attainment – ensuring that groups pursue and accomplish their tasks. Groups must accomplish these four functional tasks to remain in equilibrium. The
likelihood that a group will survive depends on the demands of the environment, the extent to which members identify with group goals, and the degree to which members believe goals are attainable. By overcoming obstacles and successfully handling the functional tasks confronting them, groups strive to remain in a state of equilibrium.

This theory also states that groups are in constant interaction with their environments. They occupy an ecological niche. Homans suggests that groups have an internal system and an external system. The external system represents a group’s way of handling the adaptive problems that result from its relationship with its social and physical environment. The internal system consists of the patterns of activities, interactions, and norms occurring within the group as it attempts to function. Concepts derived from the various views of systems theory that are particularly relevant for group workers include the following:

- The existence of properties of the group as a whole that arise from the interactions of individual group members.
- The powerful effects of group forces on member’s behaviour.
- The struggle of groups to maintain themselves as entities when confronted with conflicts.
- The awareness that groups must relate to an external environment as well as attend to their internal functioning.
- The idea that groups are in a constant state of becoming, developing, and changing, which influence their equilibrium and continued existence.
• The notion that groups have a developmental life cycle.

**Psychodynamic Theory**

Psychodynamic theory has had an important influence on group work practice. In his work *Group Psychology and the Analysis of Ego*, Freud (1922) set forth his theoretical formulations about groups and their influence on human behaviour. According to psychodynamic theory, group members act out in the group unresolved conflicts from early life experiences. In many ways, the group becomes a re-enactment of the family situation. Freud describes the group leader as the all-powerful father figure who reigns supreme over group members. Group members identify with the group leader as the ‘ego-ideal’. Members form transference reactions to the group leader and to each other on the basis of their early life experiences. Thus, the interactions that occur in the group reflect the personality structures and defense mechanisms that members began to develop early in life.

The group leader uses transference and counter transference reactions to help members work through unresolved conflicts by exploring past behaviour patterns and linking these patterns to current behaviours. The group leader might, for example, interpret the behaviour of two group members who are struggling for the leader’s attention as unresolved sibling rivalry. When interpretations made by the group worker are timed appropriately, members gain insight into their own behaviour. According to the psychodynamic theory, insight is the essential ingredient in modifying and changing behaviour patterns inside and outside the group.
More recent conceptions of psychodynamic group treatment have adapted and modified classical psychodynamic theory to include a greater emphasis on the here-and-now experiences of group interaction. This is useful in ensuring that members deal with issues of immediate concern to them. From an analysis of the immediate behaviour patterns in the microcosm of the group, the leader can help members reconstruct unresolved childhood conflicts and have corrective emotional experiences. Through direct, mutual interpersonal communications, members build interpersonal skills, adaptive capacities, and ego-strength, as well as gain insight into their behaviour. The cohesiveness of the group encourages members to reveal intimate details about their personal lives and to describe and act out their conflicts in a safe and supportive environment.

**Learning Theory**

The primary focus of learning theory is on the behaviour of individuals rather than on the behaviour of groups. Thus, learning theory has generally ignored the importance of group dynamics. However, learning theory has had an important influence on current methods of group work practice. The emphasis on clear and specific goal setting, contracting, the influence of the environment on the group and its members, step-by-step treatment planning, measurable treatment outcomes and evaluation can be traced to the influence of learning theory.

According to social learning theory (Bandura, 1977), the behaviour of group members can be explained by one of three methods of learning. In the classical approach to learning theory, behaviour becomes associated with a stimulus. For example, a worker responds by making a negative verbal comment each
time a member turns and speaks to another member while the worker or other group members are speaking. After several times, the mere stimulus of the member's turning, without speaking, will be enough to cue the worker to respond with a negative verbal comment. Another theory of learning is called operant conditioning. In this paradigm, the behaviours of the group members and the worker are governed by the consequences of their actions. Thus, if member A acts in a certain way and member B reacts positively, member A is likely to continue the behaviour. In the group, the worker might use praise to increase member-to-member communications and negative verbal comments to decrease member-to-leader communications. To help a member with a problem he or she has experienced in the outside environment, such as being overweight, the group leader might ask the member to develop a plan that specifies self-imposed rewards for behaviour that decreases caloric intake and self-imposed sanctions for behaviour that increases caloric intake.

Bandura (1977) has developed a third learning paradigm called social learning theory. According to Bandura, most learning takes place through observation and vicarious reinforcement or punishment. For example, when a group member is praised for a certain behaviour, that group member and other group members reproduce the behaviour later, hoping to receive similar praise. When a group member who performs a certain behaviour is ignored or punished by social sanctions, other group members learn not to behave in that manner because such behaviour results in a negative outcome.

**Field Theory**

Kurt Lewin conducted numerous experiments on the forces that account for behaviour in small groups.
According to Lewin’s field theory, ‘a group has a life space, it occupies a position relative to other objects in space, it is oriented towards goals, it locomotes in pursuit of these goals, and it may encounter barriers in the process of locomotion. The unique contribution of field theory is that it views the group as a gestalt, that is, an evolving entity of opposing forces that act to hold members in the group and to move the group along in its quest for goal achievement. In developing field theory, Lewin introduced several concepts to aid in understanding the forces at work in group. Among these are: 1) roles, which refer to status, rights, and duties of group members; 2) norms, which are rules governing the behaviour of group members; 3) power, which is the ability of members to influence one another; 4) cohesion, which is the amount of attraction the members of the group feel for one another and for the group; 5) consensus, which is the degree of agreement regarding goals and other group phenomena; and 6) valence, which is the potency of goals and objects in the life space of groups.

Relying on one principle of this theory that suggests individuals will not change their behaviour unless they see their behaviour and attitudes as others see them, the t-group experience attempts to provide participants with extensive feedback about their own behaviour. Members are confronted with the effects of their own behaviour on other group members and on the group worker. Role plays, simulations, and other experiential program activities are often used to illustrate how group processes develop and how they affect members.

**Social Exchange Theory**

Social exchange theory focuses on the behaviour of individual group members. The theory has its origin in animal psychology, economic analysis and game theory.
Social exchange theorists suggest that when people interact in groups, each attempts to behave in a way that will maximize rewards and minimize punishments. Group members initiate interactions because the social exchanges provide them with something of value, such as approval. According to social exchange theorists, because nothing is gained ordinarily unless something is given in return, there is an exchange implied in all human relationships.

In social exchange theory, group behaviour is analyzed by observing how individual members seek rewards while dealing with the sustained social interaction occurring in a group. For an individual in a group, the decision to express a given behaviour is based on a comparison of the rewards and punishments that are expected to be derived from the behaviour. Group members act to increase positive consequences and decrease negative consequences. Social exchange theory also focuses on the way members influence one another during social interactions. The result of any social exchange is based on the amount of social power and the amount of social dependence in a particular interaction.

Guided group interaction and positive peer culture are two specialized group work methods that rely heavily on principles from social exchange theory. They are frequently used with delinquent adolescents in residential and institutional settings. In both approaches, structured groups are used to confront, challenge, and eliminate antisocial peer group norms and to replace them with pro-social norms through guided peer-group interaction.

The importance of groups for humans has led a number of social scientists to perceive groups as the salvation or the bane of our species. To some social scientists
groups are the basis for everything that is good in our lives. For other social scientists groups are destructive influences on our lives. Both views are oversimplified. Groups can have constructive or destructive effects depending on how they are used.

**Benefits of Groups**

1) Under most conditions, the productivity of groups is higher than the productivity of individuals working alone. You may have seen this happening in most companies and even in small-scale industries where more numbers of a particular product is made by a group effort rather than an individual effort. You would have also seen this in games involving teams where the chance of hitting a goal is high when they work towards it as a team rather than as individual players.

2) Groups make more effective decisions and solve problems more effectively than individuals working alone. This is the reason why we have committees in organisations. It has been proved by social scientists and management experts that better decisions are arrived at by a group of persons working at the problem rather than an individual who is trying to solve the problem on his/her own. When problems are discussed in groups there is greater clarification of the problem. Similarly, a variety of solutions are suggested by group members out of which a good solution emerges.

3) It is through group memberships that we learn the values of altruism, kindness, consideration for others, responsibility and so forth. We are born in a primary group called family, which ingrains in us a wide range of human values. We learn to be kind to each other in the family. In our friendship groups
we learn to be considerate to others and in our workplace we learn to be responsible. Thus, all the groups we are in teach us a variety of human values.

4) The quality of emotional life in terms of friendship, love, excitement, joy, fulfillment and achievement is greater for members of groups than for individuals acting alone. A person who does not have any relationship with others will not be able to experience most of the emotions. Family provides the experience of love while friendship groups provide excitement. The office where we work may provide us with fulfillment and also a sense of achievement.

5) The quality of everyday life is greater in groups because of the advantages of specialization and division of labour. Our material standard of living, for example – our housing, food, clothing, transportation, entertainment etc. – would not be possible without the help of others and unless we interact with them.

6) Conflicts are managed more productively in groups. Without group standards, social values and laws, civilization would be impossible. Groups normally establish standards or norms for its members to function effectively. Without these norms, which generally reflect societal norms, there would be confusion. Group norms exert considerable influence over individuals and keep them under control.

7) A person’s identity, self-esteem and social competencies are shaped by the groups to which he/she belongs. If you are asked a question, ‘who are you?’, you will immediately say ‘I am a student’, which means you are part of the students group
which provides you with an identity. Similarly, you may say you are the son/daughter of a certain person or the friend of a certain person or a manager in a particular organisation. Thus, being a member of different kinds of groups provide you with identity. Groups also help develop the self-esteem of its members by being very supportive. Friendship groups in particular provide you with a lot of emotional support and understanding that builds up your self-esteem. You can experiment with different kinds of behaviour in a friendship group without the threat of rejection.

8) Without co-operation, social organisation and groups of various kinds, human beings would not survive. Humans have a basic social nature and our survival and evolution are the results of the effectiveness of our groups.

While groups provide a lot of benefits, social scientists have also pointed out aspects of groups that are not very constructive.

One of the important points they have mentioned is that, people in groups are more likely to take greater risks than they would alone. Groups tend to take more extreme positions and indulge in more extreme behaviour than individuals. In large groups individuals can become anonymous and therefore, feel freer to engage in rowdy, shocking and illegal behaviour. When one member engages in impulsive and antisocial behaviour, others may do likewise. Another negative aspect of groups pointed out is that groups often influence their members to conform. The identity of the individual can be threatened if conformity is too extreme. Social scientists also point out that sometimes group affiliations become so strong that group members treat non-members and other groups in impersonal
ways. Intense grouping behaviour leads to several conflicts in the society.

However, a correct understanding of groups and its proper application will help us reap the immense benefits from using groups. Experiments conducted by social scientists have proved time and again the strengths of using groups for the development of the individual and society. That is the reason why an understanding of groups is crucial to the practice of group work. In the context of group work, groups contribute immensely to the personality development of individuals.

**Influence of Groups on Personality Development**

a) The formation of proper attitudes that are crucial to personality of an individual takes place through groups. It is the attitude that guides every action of human-beings. Groups provide opportunities for individuals to expose themselves to a variety of situations that shape their attitudes.

b) Groups also change the levels of aspiration that individuals have. It is well known that individuals reach higher goals if their aspiration level is also high. Individuals constantly check their aspiration level with those of others in the group and change it if theirs is at a lower level. For instance, candidates aspiring for civil services join IAS study circles where they meet other IAS aspirants and get inspired by their hard work and perseverance. Thus, they are able to set higher goals for themselves after joining the group than when they would have acted individually.

c) Individual patterns of living, working and life pursuits also determine one’s personality. These patterns
could also be modified by participation in groups. Individual’s hobbies are greatly influenced by groups. Similarly in work life, how a person manages time and how he/she responds to stress would be greatly influenced by the group he/she is in. Groups also influence one’s mission in life. We see a lot of individuals who join groups to serve society in different ways. Whether an individual becomes self-serving and materialistic or altruistic may greatly depend on the group he/she belongs to.

d) Groups help individuals gain a perception of one’s self and his/her role in society. The constant feedback an individual gets from other group members helps build the self-image of one’s self. One can understand the type of personality he/she has with the help of groups. Individuals can also determine what their role is based on the feedback given by others.

e) Groups provide immense psychological support and help individuals express both positively and negatively. One of the key determinants of personality development is the psychological support required by the individual by which he/she can experiment with behaviour as well as express his/her ideas, opinion and feelings freely without the threat of rejection. Groups provide ample opportunities for this leading to personality development.

Types of Group Work Groups

Groups for the purpose of group work are generally classified into two types: treatment and task groups. They are classified according to their primary purpose.
Treatment Groups

Five primary purposes of treatment groups are: support, education, growth, therapy and socialisation.

Support Groups

Support groups can be distinguished from other groups using supportive intervention strategies by their primary goals: to foster mutual aid, to help members cope with stressful life events, and to revitalize and enhance members’ coping abilities so that they can effectively adapt to and cope with future stressful life events. Examples of support groups include the following:

- A group of children meeting at school to discuss the effects of deaths in their families on their lives.
- A group of people diagnosed with cancer, and their families, discussing the effects of the disease and how to cope with it.
- A group of recently discharged psychiatric patients discussing their adjustment to community living.

Leadership of support groups is characterized by a facilitative approach that emphasizes helping members share their collective experiences in coping with a stressful event. The group worker helps members share their experiences and empathically respond to each other. Simply recounting events, ventilating feelings, and reflecting on efforts to cope can promote self-understanding and help overcome loneliness, isolation and despair. A major role of the worker is to facilitate hope in the future and motivate members to improve coping skills through self-help and mutual aid. Strong emotional bonds often develop quickly in support groups because of member’s shared experiences. Emotional bonding may also occur because members are
stigmatized by the larger community and find comfort and power in their association with each other.

**Educational Groups**

The primary purpose of educational groups is to help members learn new information and skills. Educational groups are used in a variety of settings, including treatment agencies, schools, nursing homes, correctional institutions and hospitals. Examples of educational groups include the following:

- A group of women in slums who want to know about reproductive and child health.
- A group of parents who are going to adopt children.
- A group of NGO leaders who want to be more effective.

All educational groups are aimed at increasing members’ information or skills. Most groups routinely involve presentations of information and knowledge by experts. They also often include opportunities for group discussion to foster learning. When leading educational groups, workers concentrate on both the individual learner and the group as a whole as vehicles for learning, reinforcement, and discussion. Also, workers consider each members’ knowledge of the subject matter and level of skills and experience so that members derive at most benefit from the learning process.

**Growth Groups**

Growth-oriented groups offer opportunities for members to become aware of, expand, and change their thoughts, feelings, and behaviour regarding themselves and others. The group is used as a vehicle to develop members’ capabilities to the fullest. Growth groups focus
on promoting socio-emotional health rather than remediating socio-emotional illness. Examples of growth groups include the following:

- A group for newly married couples
- A value clarification group for youth
- A consciousness raising group for Rotary club members

Growth groups generally stress self-improvement and the potential of human beings to live a full and rewarding life, especially through improved relationship with others. They provide a supportive atmosphere in which individuals can gain insights, experiment with new behaviours, get feedback and grow as human beings. The bond in growth groups stem from members’ commitment to help one another develop and maximize their potentials. When composing growth groups, workers often select members who have diverse backgrounds and the potential to enrich and broaden each others’ experiences. Communication in growth groups is members centered and highly interactive.

**Therapy Groups**

Therapy groups help members change their behaviour, cope with personal problems or rehabilitate themselves after physical, psychological or social trauma. Examples of therapy groups include the following:

- A psychotherapy group for outpatients at a community mental health centre.
- A group sponsored by an NGO for people who want to stop smoking.
- A group for children who are first time offenders.
In therapy groups, members come together to solve their problems. The group leader is often viewed as an expert, an authority figure and a change agent. Members’ problems are assessed and treatment goals are developed with the help of the worker. Although the group has a common purpose, each member may have a different problem with different symptoms. Therefore, to achieve individual goals, the worker often focuses on one member at a time. The level of member’s self-disclosure is usually quite high.

**Socialisation Groups**

Socialisation groups help members learn social skills and socially accepted behaviour patterns so that they can function effectively in the community. Socialisation groups frequently use program activities such as games, role plays or outings to help members accomplish individual goals. Examples of socialisation groups include the following:

- A youth group in Nehru Yuvak Kendra
- A social club for outpatients of a psychiatry centre
- A group for children from poor and disadvantaged neighbourhoods

There are at least three common forms of socialisation groups: social skills groups, governance groups and recreation groups. Some social skills groups such as assertiveness training groups are formed for adults who wish to improve their existing skills. Social skills groups can be particularly useful for individuals who are unable or unwilling to communicate effectively and for those who have difficulty engaging in satisfying social relationships. Young children, shy adolescents and mildly retarded adults are examples of people who can benefit from such groups. Program activities can help
draw out these types of group members by helping them form meaningful relationships and learn social skills. Governance groups are often found in residential settings such as nursing homes, psychiatric hospitals, correctional facilities and residential treatment centres. The purpose of these groups is to involve residents in the daily governance of the institution. Through their participation in the governance process, members learn advocacy, communication, conflict resolution and empowerment skills. They also learn to share with others, take responsibility for their actions, and participate in decision making processes. Recreational groups are particularly important for working with children, adolescents and older adults in neighbourhood centres. They can help members learn community values and accepted forms of behaviour, develop interpersonal skills and feel a sense of belonging. In addition recreational groups help members develop confidence in their ability to function as apart of a group and to function in other social situations.

**Task Groups**

Task groups are common in most agencies and organisations. They are used to find solutions to organisational problems, to generate new ideas and to make decisions. Task groups can have three primary purposes: meeting client needs, meeting organisational needs and meeting community needs.

**Teams**

Team members coordinate their efforts and work together on behalf of a particular client group. Example of teams include the following:

- A group of workers in charge of a particular department in a company
A group of professionals who work in psychiatric hospitals

The functioning of the team is the responsibility of the team leader. Team leaders are often appointed by an administrator in the organisation. The team leader is a facilitator and coordinator for the group and is accountable to the organisation for the actions of the team. The team leader is responsible for conducting meetings, motivating team members, coordinating individual efforts and ensuring team functioning. Members are bonded by a team spirit that assists them in their work as a group rather than being a collection of individuals representing different concerns and professional agendas.

Committees

The most common type of task group is the committee. A committee is made up of people who are appointed or elected to the group. Their task is to accomplish a task delegated to the committee from a higher authority. Examples of committees include the following:

- A group of students in charge of a rural camp for the college
- A group of employees assigned the task of studying and recommending changes in the agency’s personnel policies.

Although members are expected to share their personal views during deliberations, the level of self-disclosure in committees is low. Most committees tend to follow a standard set of procedures. It is useful for each meeting to have an agenda so that committee members can follow the activity of the group and know what to expect during the rest of the meeting. The chairperson is responsible for seeing that the agenda and the formalized procedures are carried out.
Social Action Groups

Social action groups empower members to engage in collective action and planned change efforts to alter some aspect of the social or physical environment. Social action groups serve the common good of both members and non-members. Examples of social action groups include the following:

- A tenant’s group seeking support for a playground in their housing complex.
- A group of women in poor neighbourhoods working to improve water supply in their locality.

A worker involved in a social action group can assume one of many leadership roles, depending on the nature of the change effort and the needs of the group. A worker assumes an enabler role to help the group acquire information or resources, determine priorities and procedures and plan a strategy for action. The bond that holds members of action groups together is a shared perception of injustice, inequity, and a need for a change in the current social structure. Communication patterns vary with the circumstances of the group. The worker helps the group develop open communication patterns so that all members have a chance to become involved. The worker also helps the group establish communication links with its environment.

Group Logistics

Group Composition

Whether a group should have a homogeneous membership (members from similar age-groups, sex and socio-economic background) or a heterogeneous one depends on the group’s goals. In general, for a specific target population with given needs, a group
composed entirely of members of that population is more appropriate than a heterogeneous group. Consider a group composed entirely of elderly people. It can focus exclusively on the specific problems that characterize their developmental period, such as loneliness, isolation, lack of meaning, rejection, deterioration of the body, and so forth. This similarity of the members can lead to a great degree of cohesion, which in turn allows for an open and intense exploration of their life crises. Members can express feelings that have been kept private, and their life circumstances can give them a bond with one another. Similarly self-help groups for women also benefit greatly from the homogeneity of the composition of their group. They are able to pursue the common goal of credit management or self-development in a united fashion.

Sometimes a microcosm of the outside social structure is desired, and in that case a heterogeneous group is best. Personal-growth groups and certain therapy groups tend to be heterogeneous. Members can experiment with new behaviour and develop interpersonal skills with the help of feedback from a rich variety of people in an environment that represents everyday reality.

Group Size

What is a desirable size for a group? The answer depends on several factors: age of clients, experience of the leader, type of group, and problems to be explored. For instance, a group composed of elementary school children might be kept to 4 to 6, whereas a group of adolescents might be made up of 8 to 12 people. For a weekly ongoing group of adults, about 10 to 12 people with one leader may be ideal. A group of this size is big enough to give ample opportunity for interaction and small enough for everyone to be involved and to feel a sense of “group.”
Frequency and Duration of Meetings

How often should a group meet? For how long? Should a group meet twice weekly for 1-hour sessions? Or is 1½ to 2 hours once a week preferable? With children and adolescents it may be better to meet more frequently and for a shorter period to suit their attention span. If the group is taking place in a school setting, the meeting times can correspond to regularly scheduled class periods. For groups of college students or relatively well functioning adults, a 2-hour weekly session might be preferable. This 2-hour period is long enough to allow some intensive work yet not so long that fatigue sets in. You can choose any frequency and duration that suit your style of leadership and the type of people in your group. For an in-patient group in a mental health centre, it is desirable to meet on a daily basis for 45 minutes. Because of the members’ psychological impairment, it may not be realistic to hold their attention for a longer period.

Length of a Group

What should be the duration of a group, and is it wise to set a termination date? For most groups a termination date should be announced at the outset, so that members will have a clear idea of the time limits under which they are working. Groups in educational institutions typically run for about 15 weeks. It is long enough for trust to develop and for work toward behavioural changes to take place, but it is not so long that the group seems to be dragging on interminably. A major value of this type of time-limited group is that members are motivated to realize that they do not have forever to attain their personal goals. At different points in this 15-week group, members are challenged to review their progress, both individually and as a group. If they are dissatisfied with their own participation or with the
direction the group is taking, they have the responsibility to do something to change the situation.

Some groups composed of the same members meet for years. Such a time structure allows them to work through issues in some depth and to offer support and challenge in making life changes. These ongoing groups do have the potential for fostering dependency, and thus it is important that both the leader and members evaluate the impact of the group on the clients’ daily living.

**Place for Group Meetings**

Where should the group hold its meetings? Many places will do, but privacy is essential. Members must be assured that they will not be overheard by people in adjoining rooms. Groups often fail because of their physical setting. If they are held in a day hall or ward full of distractions, productive group work will not occur. You would require a room that is not cluttered up with chairs and tables and that allows for a comfortable seating arrangement. Members must be able to sit in a circle. This arrangement lets all the participants see one another and allows enough freedom of movement that members can spontaneously make physical contact.

**Open Versus Closed Groups**

*Open groups* are characterized by changing membership. As certain members are ready to leave, new members are admitted, and the group continues. *Closed groups* typically have some time limitation, with the group meeting for a predetermined number of sessions. Generally, members are expected to remain in the group until it ends, and new members are not added.

There are some advantages to open groups that incorporate new members as others leave, one of which is an increased opportunity for members to interact with
a greater variety of people. A potential disadvantage of open groups is that rapid changing of members can result in a lack of cohesion, particularly if too many clients leave or too many new ones are introduced at once. Therefore, it will be better to bring in new members one at a time as and when opening occurs.

**Conclusion**

In this chapter we discussed how we are part of groups most of the time in our lives and the benefits offered by groups and its influence on personality development. We looked at various definitions of groups and consolidated them into one definition that captures the essential characteristics of groups.

We discussed the various types of groups such as voluntary and involuntary groups, open and closed groups, vertical and horizontal groups, primary and secondary groups and formed and natural groups. After this we went on to discuss why people are attracted to groups. This was followed by the significance of groups with regard to the benefits individuals get from groups. At the end we saw how groups contribute to personality development.

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Principles, Skills and Models of Group Work Practice

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Introduction

Social group work is a method of social work which develops the ability of establishing constructive relationship in individuals through group activities. Group experiences are the essential needs of human being. The reciprocal and dynamic interactions and transactions between persons and environment are inherent in social group work practice. Sometimes due to his/her own fault or weakness and sometimes due to unfavourable environment, one fails to perform his/her activities of the group life. Here group work helps the individual in removing weakness and strengthening internal power to perform his/her job satisfactorily. The social group worker must have the theoretical knowledge of social group work, its principles, its skills, its models, its assumption so that he/she may be able to perform his/her jobs most satisfactorily. All these concepts have been discussed in this chapter.

Principles of Social Group Work

The group worker benefit the conscious understanding of the basic principles of social group work because this knowledge provides him/her a frame work to work with the group. Sometimes the word ‘concept’ and ‘principles’ are used interchangeably but there is difference

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between the two. The concepts are ideas regarding individuals, groups and communities emerged from social and biological sciences as well as from the humanities disciplines. Such concepts are for example social distance, problem, role, ego, etc. They are basic to all social work methods. A principle is a verbalized statement, general rules or laws, fundamental truths by which we proceed from one situation to another. A principle must be understood to mean a hypothesis so adequately tested by observation and experiment that it may be put forward as a guide to action. Social group work principles are guiding assertions of statements that have come from experience and research. Basic principles of working with people in groups to help them grow and change have emerged from the practice of social group work. The objectives of social group work can be fulfilled only within the frame work of principles. Therefore, it seems necessary to deal with basic principles, which are guiding force for group work practice. Douglas has described fourteen principles of social group work.

1) Recognition and subsequent action in relation to the unique difference of each individual.

2) Recognition and subsequent action in relation to the wide variety of groups as groups.

3) Genuine acceptance of each individual with his unique strengths and weaknesses.

4) Establishment of a purposeful relationship between group worker and group members.

5) Encouragement and enabling of help and cooperative relationship between members.

6) Appropriate modification of the group process.
7) Encouragement of each member to participate according to the stage of his capacity and enabling him to become more capable.

8) Enabling members to involve themselves in the process of problem solving.

9) Enabling group members to experience increasingly satisfactory forms of working through conflicts.

10) Provision of opportunities for new and differing experience in relationships and accomplishments.

11) Judicious use of limitations related to the diagnostic assessment of each individual and total situation.

12) Purposeful and differential use of programme according to diagnostic evaluation of individual members group purpose and appropriate social goals.

13) Ongoing evaluation of individual and group progress.

14) Humane and disciplined use of self on the part of the group worker.

Konopka has described certain principles to work with the groups. Summary of these principles has been narrated here.

1) The social worker’s goal is to enable clients or group members as a whole to move toward greater independence and capacity for help.

2) The social worker must use the scientific method to prepare for action fact-finding analysis and diagnosis in relation to the individual, group and the social environment.

3) The social worker must form purposeful relationship. It means a conscious focusing on the needs of the group members and attempts to fulfill them.
4) The social worker must use himself consciously. This includes self-knowledge and discipline in relationship but without the loss of warmth and spontaneity.

5) The social worker must accept members as they are, without condemning their behaviour. This involves deep understanding of group members as well as knowledge and identification of values regulating human beings.

6) The social worker must understand the origins of his own value system and be able to handle it in relation to the value system of others.

7) He must allow members to develop their own behaviour without much interference and to choose their own point of departure without imposing outside demands. But the worker has responsibility for stimulating change.

Cohen has also discussed certain principles which may be significant in working with the groups. According to him:

1) The group members must be encouraged to help themselves by the social worker playing as indirect or enabling role rather than a manipulative one. It means the group members be given the right of self-direction and self-determination.

2) The work with the group should be started at the level of group members. It means that proper knowledge of educational, economic, social and other characteristics are essential while working with the group. If the work or programmes are above the mental level of members, they will lose their interest.
3) Social worker must focus not merely on the immediate problem as seen by the group but on relation to the total situation.

4) Social worker must keep in mind that individual differences exist while dealing with the group members.

5) It should be kept in mind that the welfare of individual is inextricably interwoven with the welfare of the group. Therefore social worker must be concerned with the development of material, human and social resources to meet all the needs of all the members of the group.

Friedlander has mentioned the following basic principles of social group work.

1) The function of the social group worker is a helping or enabling one. This means that his goal is to help the members of the group and the group as a whole to move toward greater independence and capacity for self-help.

2) In determining his/her way of life, the group worker uses the scientific method—fact-finding, analysis and diagnosis in relation to the individual, the group of the social environment.

3) The group work method requires the worker to form purposeful relationship to group members and the group.

4) One of the main tools in achieving such relationship is the conscious use of self.

5) A basic respect and love for people without considering his weakness.

6) The work should be started from where the group is.
7) There should be constructive use of limitations. The group worker will mainly use himself, programme materials, interaction of the group and awaking of insight in the group members.

8) Every member of the group should be understood separately. It means individualization is essential.

9) Interaction is a process through which group members develop their strengths and power. Therefore, social group worker should properly monitor this process.

10) It is also necessary that non-verbal activities and programmes should be understood and used alongwith the verbal material.

**Trecker** has explained the following principles of social group work.

1) The principle of planned group formation.

2) The principle of specific objectives.

3) The principle of purposeful worker-group relationship.

4) The principle of continuous individualization.

5) The principle of guided group interaction.

6) The principle of democratic group self-determination.

7) The principle of flexible functional organisation.

8) The principle of progressive programme experience.

9) The principle of resource utilization.

10) The principle of evaluation.
On the basis of different principles discussed by different social work authors, we may summarize as follows.

1) Principle of planned organisation of the group.

2) Principle of understanding each individual as a member of a group and as an individual.

3) Principle of equality.

4) Principle of understanding relationship as tool for solving group problems as well as individual problems and also for development of the group.

5) Principle of encouragement of each member of the group.

6) Principle of recognition of variety of groups with different objectives.

7) Principle of self-development, i.e. full opportunity to the group to organise its programmes according to its needs.

8) Principle of self problem solving. Members should be involved in understating and solving problems themselves.

9) Principle of use of programme according to diagnosis of the group. Different types of programmes are needed according to the problems of the group.

10) Principle of experience development. Each member of the group should get opportunity to act and express his feelings in the group.

11) Principle of understanding the importance of group life in shaping and moulding one’s character and personality. The group worker should believe the importance of group experience.
12) Principle of understanding the group process and its different elements, for example, group structure, role and status, division of responsibility, etc.

13) Principle of understanding familiarity with the process of cooperation, conflict, accommodation, resistance and ambivalence in the group. This knowledge is essential to handle the different group situation.

14) Principle of modification in-group process. The group worker always keeps in mind the result of group activities. If it is not as it is required he suggests the group members to modify their activities and programmes.

15) Principle of providing new opportunities. It is the job of group worker to make aware the group about the opportunities of work in different fields and also the ways and means to avail these opportunities.

16) Principle of use of constructive limitations. Nobody is perfect. This is also applicable to the group members. Whatever the capacity and ability they have should be used properly by the group and whatever the limitations, they should fully understand and attempts should be made to work within these limitations.

17) Principle of conscious use of himself/herself. The role of group worker is to guide the interaction process of the group. He/She should interfere in the group activities only when group members should demand for his/her help. Members of the group should not feel that the worker is unnecessary interferes in their affairs.

18) Principle of use of scientific action plan. It means that the social group worker first find out the
problem of the group or collect data and on the basis of collected facts, the diagnosis is done. After that action plan should be prepared for the solution of the problem and for the development of the group.

19) Principle of acceptance. It means that the group worker should accept the members as they are without condemning any weakness. At group level, it must accept the services of the group worker.

20) Principle of understanding values. Values are the guiding force for behaviour expression, they must be kept in mind while dealing with the group problems.

21) Principle of determination of specific objectives. Objectives should be clear for the group as well as to the group worker.

22) Principle of resource utilization. The group may have different kind of needs and these needs cannot be fulfilled by one agency and therefore the worker should tap the resources of the community.

23) Principle of evaluation, continuous examination and evaluation of group activities.

**Program Planning in Social Group Work**

**Program Planning in Social Group Work—Trecker**

In the group work, if a program has to be of maximum value,

1) it must be person centered

2) it must meet specific needs

3) it should develop out of the interest and needs of the group members
4) it should involve the members themselves in planning to the maximum amount of their ability

5) it should utilize the worker as a helping person. The worker is not there to give a program, but to help the members to develop their own program.

The term program is a concept which when broadly conceived includes the entire range of activities, relationships, interactions and experiences of individual members and the group which have been deliberately planned and carried out with the help of the worker to meet the needs of the individuals and the group. The worker helps the group to select the areas of content and the media of expression. The group worker who consciously relates the ‘what’ (the content) of program and the ‘how’ (the means) of program with the ‘why’ (aims and objectives) of program. The program development process aims at the blossoming of the group’s own potentialities.

The social worker’s primary job in program development is to guide the process of interaction among the group members. Social group work utilizes the interaction of members around program in an agency setting with worker guidance. Interaction refers to participating behaviour of a reciprocal kind. Interaction itself is not an end but rather a means to the goal of the group.

**Principles of Program Planning**

1) Program should grow out of the needs and interests of the individuals who compose the group.

2) Program should take into account the factors such as age of the members, cultural background and economic condition.
3) Program should provide individuals with experience and opportunities, which they voluntarily choose to pursue because of their interest and values.

4) Program should be flexible and varied to satisfy a variety of needs and interests and to afford a maximum number of opportunities for participation.

5) Program should evolve from the simple to the more complex, with movement coming as a result of group growth in ability and readiness, movement from initially 'personal' to 'social' or 'community' concerns should be an ultimate objective if our program is to have greater social significance.

**Skills of Social Group Work**

In a general sense skill means the capacity to perform activities. The Webster Dictionary defines it as “knowledge of and expertness in execution and performance”. Virginia Robinson refers to skill as “the capacity to set in motion and control a process of change in specific material in such a way that the change that takes place in the material is affected with the greatest degree of consideration for and utilization of the quality and capacity of the material”. Trecker defines methods and skill as “Methods means the purposeful use of insights and understanding based upon a body of knowledge and principles. Skill is the capacity to apply knowledge and understanding to a given situation.

Jekins has listed certain skills that are essential for a social group worker to become more productive in-group situation.

1) Exchanging ideas among the members freely and clearly, using language understood by everyone and with no fears of starting arguments or hurting feelings.
2) Examining objectively how well the group and its members are working.

3) Sharing the leadership jobs among the group members and show sensitivity to the feelings of all.

4) Accepting new ideas and new members into the group without irreparable conflict, and to disciplining the group to work toward long range objectives and profit from failures.

5) Thinking clearly about group problems, findings, causes and working for solutions.

6) Adjusting group procedures and plans to meet the feelings and the desires of the members.

7) Creating new jobs or committees as needed and to terminate them or the group itself, when the need is fulfill.

Phillips has enumerated the following skills of social group work.

1) **Skill in Using Agency Functions**

   The group worker must be skillful in carrying the functions of agency. He should always try to propagate what the agency in the community wants to do. He does the following activities for this.

   1) **The Intake Process**

   The worker who meets the applicants while carrying out the agency's procedures for intake, will discuss with him what him/her particularly wants from the agency as well as what is available those for him/her to consider both the privileges and responsibilities of agency membership.
2) **Connecting the Group with the Agency**

The worker relates the group more firmly to the agency by helping it to understand what the agency stands for and what kind of responsible behaviour is expected of them as well as of other groups.

3) **Serving the Individual through the Group Work Process**

Since the function of the agency includes helping group units to develop in socially useful ways, as well as helping individuals the social worker’s attention must be on the development of the group as a whole and on each individual’s use of the group.

4) **Working with the Individual Outside the Group of Meetings**

Although the worker offers his services within the group process he also provides help to the individual if need be for the better use of group experience on the part of member.

5) **The Referral Process**

An important part of the group work agency’s service is to work with members and their parents in a process of considering the use of other community services for help with problems that cannot be dealt within the group work agency.

II) **Skill in Communication of Feelings**

The social group worker should have the following skills.
1) **The Worker's Feelings**

High among the qualities essential to a social worker's skill is the capacity to feel with others.

2) **The Group Member's Feelings**

The worker must be skillful in helping the group members to know, accept, express and be responsible for their feelings.

3) **Group Feelings**

The interaction of each member with the others and the worker produces group feelings. The worker helps the group in understanding their feelings and its meanings.

III) **Skills in Using the Reality of the Present**

Under this the social worker does two things.

1) Utilizing the group's current interest for purposeful activity.

2) Helping the group to take responsible decision.

IV) **Skill in Stimulating and Using Group Relations**

1) The social group worker should enable each group member to find and take his part in relationship with other members.

2) He should be skillful in using programmes to strengthen group relations.

**Trecker** has listed the following basic skills of social group work.

1) **Skill in Establishing Purposeful Relationship**

   a) The group worker must be skilful in gaining the acceptance of the group and in relating himself to the group on a positive professional basis.
b) The group worker must be skillful in helping individuals in the group to accept one another and to join with the group in common pursuits.

2) **Skill in Analysing the Group Situation**

a) The worker must be skillful in judging the developmental level of the group to determine what the level is, what the group needs and how quickly the group can be expected to move. This calls for skill in direct observation of groups on a basis of analysis and judgement.

b) The group worker must be skillful in helping the group to express ideas, work out objectives, clarify immediate goals and see both its potentialities and limitations as a group.

3) **Skill in Participation with the Group**

a) The group worker must be skillful in determining, interpreting, assuming and modifying his own roles with the group.

b) The group worker must be skillful in helping, group members to participate, to locate leadership among themselves and to take responsibility for their own activities.

4) **Skill in Dealing with Group Feeling**

a) The group worker must be skillful in controlling his own feelings about the group and must study each new situation with a high degree of objectivity.

b) The group worker must be skillful in helping groups to release their own feelings, both positive and negative. He must be skillful in helping groups to analyze situations as part of
the working through group or intergroup conflicts.

5) **Skill in Programme Development**

   a) The group worker must be skillful in guiding group thinking so that interests and needs will be revealed and understood.

   b) The group worker must be skillful in helping groups to develop programmes, which they want as a means through which their needs may be met.

6) **Skill in Using Agency and Community Resources**

   a) The group worker must be skillful in locating and then acquainting the group with various helpful resources which can be utilized by the members for programme purpose.

   b) The group worker must be skillful in helping certain individual members to make use of specialized services by means of referral that cannot be met within the group.

7) **Skill in Evaluation**

   a) The group worker must have skill in recording the development processes that are going on as he works with the group.

   b) The group worker must be skillful in using his records and in helping the group to review its experiences as a means of improvement.

On the basis of above discussions and opinions of different social workers on the different types of skills essential for group work practitioners, we may list them as follows.
I) **Communication Skills**

Communication is at the heart of group work practice. The social group worker makes use of two broad categories of communication skills.

i) Those which are intended to facilitate interpersonal helping.

ii) Those intended to facilitate to achieve the group work objectives.

A number of specific skills may help the group worker to perform his jobs more effectively.

1) **Skill of Programme Planning**

It is very essential that group worker must be skillful in planning the programmes for the group. It is also essential that the worker must be skillful in communicating the message around the answers of several questions. He/She should be skillful in communicating his own feelings to the members of the group.

2) **Skill of Identify Self Role**

It is an important step in group work practice. The worker must convince the group for his interference in its affairs.

3) **Skill of Explaining the Purpose of the Group Formation and Communicate the Group**

Everybody before joining the group wants to know about the benefits of joining the group. If he/she is satisfied, he comes forward and become a member of that group. Therefore, the group worker must be skillful in convincing the people to avail the facilities of the agency by
joining the group. The worker, further, explains how communicate in group so that the group may advance in its goal.

4) **Skill in Interpreting Verbal Communication**

It is the job of the group worker to keep watch on the verbal communication among the group members because if it is not on the right track, the group may lose its basic purpose. He/she should always try to direct in proper direction.

5) **Skill of Answering Question**

During group process, certain questions, queries or doubts are raised by the group members. If they are not answered in right perspective, the members may disassociate themselves. Therefore, it is essential that the social group worker has the vide knowledge of social work as well as human behaviour.

II) **Skill in Effective Helping Relationship**

It is heart of social group work practice. A group worker must genuinely care for the group members. The relationship will be more cohesive and fruitful if the social group worker possesses the following skills.

1) **Skill of Empathy**

It refers to the worker’s capacity to perceive accurately member’s feelings and subjective experiences. The group worker should show in his/her behaviour that he/she is taking genuine interest in their welfare. It will help in developing confidence between group worker and the group.
2) **Skill of Encouraging the Member’s Feedback**

It refers to statement that encourages the member to respond to the worker's explanation. This gives the members an opportunity to ask questions and raise disagreement if any.

3) **Skill of Describing the Member’s Role**

This is common tendency that everybody wants facilities, and rights but less inclined to fulfill their duties. It is the job of the social group worker to explain the member who is joining the group about his role in the group. When he/she is clear about his/her role he/she works happily.

4) **Skill of Active Listening**

In active listening the worker tends to both the member verbal and non-verbal message. The listening become active listening when it is followed by clarification and explanations needed by the group members.

5) **Skill of Exploring the Member’s Silence**

Sometimes it happens that one or the other members of the group keeps silence and takes the least interest in the group activities. It is the job of social group worker to find out the reasons for his/her silence and encourage him/her for active involvement.

6) **Skill of Recognizing every Member’s Strengths**

It refers to expressions of confidence in the members ability to accomplish some specific tasks in the group process. It will help the group
worker in performing different types of activities in the group with the help of its members and thus the group will grow and enrich in achieving its objectives.

7) **Skill in Partialization and Gradation of the Problem**

All the problems of the group and its members cannot be solved at once. Therefore, their gradation and partialization is needed. Priority should be fixed by the group worker. It will facilitate the group process in right direction.

**Assumptions Underlying Social Group Work**

It is accepted that the group attempts to achieve its goals through the interaction of its members. So the basic assumption is that the group organised for a given purpose attempts to achieve this purpose by employing their members to the best possible use. There are many factors that can influence the interaction of the members of a group. These factors maybe liking of members of each other, availability of direction, resources available, etc. A group in which members dislike one another tend to perform less effectively their roles than a group whose members are on friendly terms.

**Douglas** has drawn up a list of the basic assumptions upon which group work practice is based. These assumptions are:

1) That group experience is universal and an essential part of human existence.

2) That group can be used to effect changes in the attitudes and behaviour of individuals.
3) That group provides experiences which can be monitored or selected in some way for beneficial ends. Life outside the group is in no way neglected, it tends to be put out of focus.

4) That group offers experience shared with others so that all can come to have something common with the sense of belonging and of growing together.

5) That groups produce change which is more permanent than can be achieved by other methods and the change is obtained more quickly also.

6) That groups assist in the removal or diminution of difficulties created by previous exposure to the process of learning.

7) That groups as instruments of helping others may be economical in the use of scarce resources. e.g. skilled workers, time etc.

8) That a group can examine its own behaviour and in so doing learn about the general patterns of group behaviour.

In general, social group work is based on the following basic assumptions.

1) Man is a group animal.

2) Social interaction is the result of group life.

3) Man’s achievements can be increased, changed and developed through group experiences.

4) The capacity to solve problems may be increased through group experiences.

5) Group experience changes the level of individual aspirations and desires.
6) Group recreational activities are beneficial to both individual and society.

7) Group experience has permanent impact on individuals.

8) Group work always focus its attention on two types of activities — programme and social relationship in the group.

9) Professional knowledge and skills are essential for working with the group.

10) Knowledge of social science is required to deal with the group.

Models of Social Group Work

On the basis of varied assumptions about the role of the worker, the group members and the content of the group, social workers proposed four distinct group work models. These are:

1) Remedial

2) Mediating

3) Developmental and

4) Social goal model

Remedial Model

Remedial model focuses on the individuals dysfunction and utilizes the group as a context and means for altering deviant behaviour. This approach to group work practice emphasizes its utility in removing the adverse conditions of individuals whose behaviour is disapproved by the society. Clients of such social group work practice are physically and mentally handicapped, legal offenders, emotionally disturbed, isolated and alienated persons.
The Michigan School contributed to this model. Credit goes to Vinter and his colleagues for developing remedial model. In this model attempts are being made by social worker to bring change in the individual. He/she is the target point.

According to the Remedial Model, the group can be used to treat problems of adjustments in personal and social relations. According to Vinter “attention to such problems reaffirms the profession’s historic mission of service to those most in need”. The remedial model is considered more as a clinical model that seeks to help the socially maladapted to improve social functioning through guided group experience.

The social worker plays a key role as he/she gives expertise knowledge through the following activities.

1) The social worker is the central person. The worker is the object of identification and drives.

2) He/she is a symbol and a spokesman. He/she tries to maintain norms and values of the society.

3) He/she is a motivator and stimulator. He/she helps the individual and group to understand their goal as a group member.

4) He/she is an executive. He/she facilitates the activities of the group in order to gain the said objectives.

In this model whatever the changes are brought, they are explicitly limited to organisational and institutional elements that are responsible for individual’s dysfunction. Though this model focuses mainly on the individual client who is experiencing difficulty, the model is helpful for those likely to be affected. It means this model focuses on preventive aspects also.
Reciprocal Model or Mediating Model

Schwartz has introduced this model in 1961. This model is based on open systems theory, humanistic psychology and an existential perspective. The following are the chief characteristics of this model.

1) People and society are interdependent because they have mutual needs. When there is interference with these mutual strivings, it results into conflict.

2) The resolution of this conflict is possible only when interested parties try to understand their dilemmas with all of these inner resources and they utilize that at that moment.

3) In this model attention is directed towards the relationship of members in the group with each other, with the worker and the group as a whole.

4) It is the relationship among the members that shows the characteristics of the group.

5) In this model emphasis is placed on the continuing and reciprocal transactions of sets of members with each other, the worker and the group.

6) It gives importance to the emergent goal and actions, which are based on feelings of the group. It believes that intensive involvement by the parties in the current realities will generate their on purposes and goals.

7) Client and worker together as well as separately challenge the current problems with their total capacity.

8) Basic educative processes are utilized which incorporate particularizing, synthesizing and generalizing the feeling and action components of the problem.
9) In this model distinctions are not made with respect to types and various of group since it is presumed that this model is widely applicable.

In this model the individual and the group are significant components. The workers role appears to be facilitative, relying on the power and potency of mutual aid system to take care of itself.

**Developmental Model**

This model has been developed by the faculty members of Boston University under the leadership of Berustein in 1965. Lowy is the main architect of the developmental model. In this approach, groups are seen as having "a degree of independence and autonomy, but the to and fro flow between them and their members, between them and their social settings, is crucial to their existence, viability and achievements. The chief characteristics of this model are:

1) It is primarily based on the dynamics of intimacy and closeness between the members over a span of time.

2) The degree of intimacy is taken into account for appropriate worker interventions.

3) Conceptualization of study, diagnosis and treatment is made at all three levels of individuals, group and the setting.

4) This model derives knowledge from Erikson's ego psychology, group dynamics and conflict theory.

5) The group worker is engaged in study, diagnosis and treatment.

6) The worker is connected with community, agency, group and individual member.
7) The group is envisioned as a microcosm of society.

8) Thoughts, feelings, sentiments and behaviour are continuously assessed and attempts are made to improve them.

9) The social group worker tries to improve the situations among individual member, group agency and the social environment.

10) In short, it can be said that the developmental model is a compromise between the reciprocal, remedial and traditional approaches.

**The Social Goals Model**

The basic concepts of this model are social consciousness, social responsibility, and social change. It is suggested that by participation with others in a group situation, individuals can affect social change. Social action is the desired outcome, and the group worker is regarded as an influence person and enabler, who personifies the values of social responsibility and acts as stimulator and role model without purveying any political viewpoint. Implicit in this model is the emerging leader within the group. The model is concerned with democracy and the enhancement of personal functioning within the social context, heightened self-esteem and an increase in social power for the members of the group collectively and as individuals. The skill of the leader lies mainly in ‘programming’ (Weince 1964) (Konopka 1958).

There are other three interventions, which are considered as suitable models for effective practice in social group work.

1) Gestalt Therapy

2) Transactional Analysis
3) The Behavioural Model

**Gestalt Therapy**

In gestalt therapy the worker aids the clients in learning how they prevent themselves from maturing. It is the aim of worker to help the client to become aware of and accept responsibility for how they make themselves feel better.

**Transactional Analysis**

It is a process of analyzing and explaining intra-personal and interpersonal processes. This therapeutic model was developed by Berne. He proposes that personal change can be maximized through group psychotherapy where the social processes are much more varied than just one to one relationships. According to Berne, individuals are products of social processes and they use social processes. Within the group settings individuals can be made aware about their self-defeating behaviour. Once they are aware of their behaviour they can do something for changing it. The group provides a safe environment for practicing new behaviours.

According to Berne, there are four major features of Transactional Analysis.

1) **Structural Analysis**: It is a method of analysing thoughts and feelings and behaviour based on the phenomena of ego states.

2) **Transactional Analysis**: It involves the interactional processes that occur between the ego states of one person and the ego states of another.

3) **Game Analysis**: This involves examining repetitive patterns of interpersonal behaviour of individuals that are problematic.
4) **Script Analysis**: It is related to the early decisions and the positions taken by a person in childhood.

The role of the group worker is of a teacher, and a leader who explains the key concepts and helps the members to discover the disadvantageous conditions under which they made their earlier decisions, adopted life plans and developed strategies for relating to people.

**Behavioural Model**

According to this model, specific group programmes are implemented to alter dysfunctional patterns and learn new styles. The expertise of Behavioural group therapist is essential in assessing and devising a treatment plan for each individual member within the context of the group. The group worker calculates the specific elements of the disturbing behaviour to be decreased or desired behaviour to be developed. Other group members provide assistance and feedback concerning progress throughout the stages of the treatment process.

**Conclusion**

Social group work is a primary method of social work which believes that the development of individual is mainly dependent on the group experiences. There are number of socio-psychological problems which can not be solved without the help of the group. The development of personality is also dependent on the use of group life to some extent. The group worker should follow certain principles in her practice. These main principles are: planned group formation; specific objectives, purposeful relationship; continuous individualization; guided group interaction; democratic group self determination; progressive programme experience, resource utilization and continuous
evaluation. The social group worker also have certain skills that will make him effective in dealing with the group problems. These are: establishing purposeful relationship, analysing group situation; participating in the time of need in the group process; dealing with group feelings; progressive programme development; using agency resources; etc. The social group worker practices either remedial model or reciprocal or developmental model with the group.

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Group Formation: Stages of the Development of Groups

* B.V. Jagadish

Introduction

Whenever social work practitioners do not solve the problems of client/s by one to one — client and worker — basis they try the group approach or social group work — as an alternative. A number of factors determine the need to help people in distress through a group. Every individual is familiar with group life. The group life starts with the family, and continues throughout life in different social settings such as school, work place, and social clubs. People prefer to be in groups rather than live in isolation. People are shaped by others and in turn shape others. When an individual comes to know that there are others who are also having same or similar problem or need, feels assured that he/she is not alone in fighting his/her social predicament. The understanding about the social situation he/she is in changes as he/she learns how others in the same or similar social situations are coping up, and makes the person too, willing to resolve the problem. A person feels more encouraged to participate in solving the need when others having similar needs are involved to resolve the need. If the problem is something to do with the behaviour patterns then group provides the social context where in new behaviour can be tried and encouraged. Certain social situations affect a group of people and people can be helped as a group.

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Example is unemployed youth, professional bodies needing social recognition and support, and children in need of recreation. Social work services can cater to more clients through group intervention. Working through group saves a lot of time, energy and resources.

Social work groups are different from other groups. The social group work groups are basically formed groups. The social worker may form a new group or sometimes may work with already existing group. It involves members in a shared space and collective time. It has the power of changing individuals into members who consciously work for each other’s benefit. The social work group encompass a whole gambit of human behaviour. These nurture democratic attitudes and develop the group as a self-determining unit. The group is formed on the basis of a contract between the social group worker and the individual members.

**Types of Social Work Groups**

The social work groups can be classified on the basis of the purpose for which the group is conceptualised. The purposes may be to meet the socio-emotional needs of individual members or to accomplish a specific or a set of tasks of an individual member or group as a whole for its growth and development. Konapka (1983) classified social work groups as development groups and social action groups. Another classification is treatment and task groups as discussed by Toseland and Rivas (1984). They further divided treatment groups as remedial, educational, growth, and socialisation groups; and task groups into committees, teams, delegate councils, treatment conference and social action groups. This classification of groups into different types is not water tight, they tend to overlap. Therefore for our discussion,
the various types of groups that can be formed by social group workers are classified as

a) Remedial groups

b) Growth groups

c) Task groups

Remedial groups are mostly to enable the members to sustain their changed behaviour and to cope up with new situations in life. The focus is more on the socio-emotional needs. This type of group is formed with those people who have undergone some treatment for a pathological condition. For example, a group of people who have been discharged from a drug de-addiction centre have to be helped to continue their changed behaviour and the treatment. Growth groups are to create awareness about the opportunities to grow and develop in their career and other life positions. These groups focus both on the social and emotional needs of the members as well as achievement of a tangible target. Some examples are: a group of youth is brought together to enhance their entrepreneurial abilities so as to improve income generating capacities and make them feel they are worthy members of the society, teaching children to acquire social skills and social etiquettes, so that they perform their social responsibilities properly and grow as useful adults. Task groups focus on certain work or activity the group is to achieve for its own development. The task could be development oriented, solving a problem or a crisis situation or a social disadvantage. Some examples are: a committee formed by an organisation to deliberate on certain strategies to improve the service delivery, an administrative group of heads of different units of an agency to work out ways and means to improve the performance of the staff and bring about coordination among the different units,
group formed to tackle water shortage, poor civic amenities and reservation of jobs for women.

These groups are formed in residential settings, day-care service centres, community settings and even an open or general public platform as well as in formal organisations.

**Stages of Social Work Group Formation**

There are a number of stages or phases in formation of a social work group. Ken Heap (1985) discussed these as group formation and planning; the first meetings; the working phase; use of activities and action; and the termination of the Group. According to Douglas (1979) there are five stages viz., conceptualisation, creation, operation, termination and evaluation. He has discussed these as the functions of leader while Toseland and Rivas (1984) discussed the stages under planning phase, beginning phase, middle phase and ending phase.

For our purpose we can discuss the stages of social group work practice under the following five heads:

- Pre-group (group formation) phase
- Initial (first meetings) phase
- Middle (Active working) phase
- Evaluation of the group
- Terminating/ending the group phase

In the pre-group phase worker identifies the need for organising a group and initiates steps to form the group. In the initial (first meetings) phase the worker and the group members meet at the place specified — agency or any other place where group is likely to have its
sessions — and initial orientation to the group’s purpose and other information is given and shared. In the middle (active working) phase the group continues its deliberations and activities to accomplish its goals and in evaluation phase the performance of the group is examined vis-à-vis the group purpose and members, goals. Finally, in the ending or termination phase the group is made to dissolve and the worker enables the members to part with each other on a goodwill note.

Phase I: Planning and Formation of the Group

The social group worker representing an agency providing services such as residential care, day-care and community work may come across situations where the services of the agency are effectively utilized by the client system through a group experience. The needs may even be identified by the other staff or client system itself. Once the worker identifies the need for formation of social work group, he/she starts planning for the formation of the group. For this the worker has to answer some questions with his/her professional background very carefully and systematically. These questions are:

Why is the group? Here, the worker has to look at the need for forming the group. The purpose and goals it can attain have to be conceptualised and defined.

For whom the group is being formed? Here, the task is to work out type of members the group addresses to. The eligibility criteria to enroll a member.

How many? This looks at the number of members the group consists of. Should have large number or small number of members.
How long? This focus on the life span of the group in terms of time period and the number of sessions/meetings it shall have. The group exists for days, weeks, months and the frequency of its meetings.

How to ensure members’ involvement in the group? The agreements the members and the worker enter into ensure the group processes to go on till the attainment of the purpose of the group.

Keeping in mind these questions the broad steps at this stage are:

- Formulating group’s purpose
- Composition of the group
- Size of the group
- Enrolling the members
- Contracting

**Formulating Group’s Purpose:** Here the worker has to be clear in his mind as to why the group is being conceived and what it is addressing itself to. The purpose has to be expressed in a well defined statement/s. It shall not be confusing and shall not give any scope for suspecting its genuineness as to group’s broad aim of helping the potential needy members. Therefore, it shall be formulated in simple statements. It shall provide answers to the potential members as to what to expect and to what extent their participating in the group is beneficial. A well-defined statement of the purpose also takes care of unnecessary members to join the group. It also enables the agency that the formation of the group is within the confines of the agency’s areas of operations and is not against its interests and services. It also enable the sponsors
and other resource agencies what to expect from the group.

Let us see some examples of the statements of the purpose:

- Group is to create platform for the parents of the drug addicted college-going youth to share their problems and develop the skills to manage their wards.

- Group is to enable the women in the community to make productive use of their leisure time.

- Group is formed to chalk out tasks to be accomplished by the heads of the departments for the forthcoming financial year.

- The purpose of the group may subject to some modifications to suit the changing demands during the course of the group meetings with the agreement of all the concerned parties to the group.

**Composition of the Group:** Once the group is established then the worker has to look into what shall be the composition of the group. Should it be homogeneous in its composition or heterogeneous? Homogeneity indicates sharing common features among the group members such as age, educational background, social class, and other interests. Homogeneity helps in building the group bond faster which is a decisive force in group process. At the same time, it fails to provide diverse information, experiences, and alternative ways of doing. Heterogeneity addresses to the need for diversity of certain characteristics of the members such as the length of time suffering with or coping with the problem, the efforts put into deal with the problem, the emotional state besides the other demographic attributes. Diversity ensures
sharing of each other’s situations, making comparisons, finding alternatives, and stimulates each other. At the same time it poses problems of acceptance and involvement. Therefore, it is an important task for the group worker to decide the composition of the group keeping in mind the broad purpose and the individual member needs and goals. Another aspect that has to be considered is whether to have an open group or a closed group. In open group there are no restrictions on joining the group from the point of the time. One can be enrolled into the group any time during the life of the group. While the closed group stops enrollment of members after the stipulated time of admission. Opting for open or closed group depends on the purpose, the goals and the time frame set for the group.

**Size of the Group:** How many members shall compose the group? What shall be the ideal size? What are the criteria to determine whether the size of the group is too big or small? All these questions are there in the mind of the worker. There are no hard and fast rules to determine the size of the group. It basically depends on the purpose of the group and manageability from the point of time, space, funds and some form of controls that need to be introduced. Small size is easy to manage, more cohesive, provides higher levels of interaction but may not provide diverse experience, may not mobilise the required resources and the balance of the group is effected in case a member or two drops out. While the large size provides diverse experiences and even if some members drop out it will not adversely affect the group deliberations and achievement of group’s purpose, can mobilise more resources, greater scope of leadership. But it limits time, all members may not find enough time to share their views, experiences, work, it gives scope to formation of subgroups and more conflicts. It is easier for some members to hide and
avoid completing the tasks assigned. The professional experience and expertise of the group worker comes handy in determining the size of the group. Ideally a group of eight to fifteen members is a good size.

**Enrolling the Members:** Once it is decided to form the group and other modalities of the group viz., group’s purpose, composition and the size of the group have worked out, then the next step is to enroll the group members. Here, the worker has to make arrangements to inform the potential members about forming the group. The information may be given directly to the potential members or passed through a notice in the agency’s notice boards, a circular to the staff and other agencies concerned and by advertising in the media such as newspapers, radio, television etc., seeking applications from the interested members.

The prospective members may approach either directly or by sending in their applications. The worker has to examine the applications as to the suitability of the candidates on the basis of eligibility criteria established. The criteria include extent of need, urgency of intervention, demographic attributes, experience, and other skills. The worker can also arrange interviews with the applicants to ascertain their suitability. By interviewing the applicants the worker can also explain to them about purpose of the group and dispel some of their doubts about joining the group. Once the worker completes the screening, the suitable applicants are enrolled into the group.

**Contracting:** At the time of enrolling the members the worker and members have to enter into an agreement as to certain conditions that are to be followed during the course of group process. It consists of a statement of general responsibilities of the members and the worker during the life of the group. Some of these
include assurance to attend the group sessions regularly and in time, to complete any task or work assigned, maintain the confidentiality of the discussions of the group, not to indulge in a behaviour that is detrimental to the well-being of the group. The contract also specifies the fees or charges if any for undertaking certain activities and for procuring any material, as well as the penalties or fines the member/s have to pay for any violations of the terms of contract. The contents in the contract are subjected to revisions to accommodate some unforeseen developments as the group process unfolds. The contract may be in written or an oral understanding. The contract binds the worker and members to planned schedules of the group and facilitate an environment to conduct the group processes effectively.

Finally the worker has to prepare a stage for beginning the group proceedings. He/She has to procure a conducive place for group sessions either in the agency itself or any other suitable place, arrange for monetary back up, gather necessary information and material. And make such other preparations for launching of the group.

**Phase II : Initial Meetings**

In this section we are looking into what are the tasks the worker and members have to undertake to begin the group. In fact it is the most crucial stage as the success or failure of the group depends on how well the initial meetings are handled by the worker. The members attend the meeting with a lot of expectations. Member/s attend the meeting with the hope that time has come to get over the problem that has been affecting them over a (long) period of time. How much of it is going to be solved? They are also enthusiastic
to meet and interact with others whom they have not met before and who are also having similar needs/problems. They will look forward to having new social experiences.

While on the other hand members many entertaining a number of doubts about the competence of the worker and whether participating in this group exercise can really deal with their problems effectively. They are also having a number of fears. They do not know what type of persons are the worker and other members. Is the worker and other members are of friendly disposition, understanding and sensitive and would not misuse the confidential self-disclosures the member/s likely to make in the group? Whether I can participate meaningfully in the group deliberations? Will my situation get more worsened? These are some of the fears of the member/s.

Similarly the worker too has his/her own thoughts. How much guidance the group expects from the worker to accomplish its purpose and goals? Whether the professional competence and experience is good enough to handle the group? Whether the members accept him/her? What type of new challenges and experiences the group brings?

The Steps Involved in this Stage are:

- Self-presentations by the worker and the members
- Orientation about the group
- Goal formation
- Structuring the group session
- Reviewing the contract
Self-presentations: As soon as the group is convened for the first time, the worker takes the initiative of making the group members feel comfortable by friendly greetings with each and every member. Once the members are settled comfortably then the worker introduces himself/herself giving personal and professional details. The worker shall give adequate information about himself/herself as possible so that it not only makes members confident about the worker but it also act as guide as to the details of information they have to disclose when their self-presentations turn comes. After that the members are asked to introduce themselves. This exercise of introductions shall be planned in such a way that it will help the members to feel at ease, and come out with more details about their situation. The worker should make them understand that the more the details they give the better will be their understanding about each other and will make a way for developing trust which is very important for effective results. There are a number of ways of introductions. The worker can employ any of such introductions keeping in mind the group's purpose and composition of the group. One way is to sit in a circle and introductions start in either clockwise or anti-clockwise direction. Another way is the members are divided into pairs and each pair is asked to exchange information about each other and then one member of the pair introduces the other and vice versa.

Orientation about the Group: After the self-presentations the worker shall orient the members about the broad purpose of the group. Here the worker spells out circumstances that paved the way for forming the group. How their disadvantage/s are likely overcome through the participation in subsequent group processes. Members are told explained about the functions and the roles of both the worker and the
members. The worker also mentions previous experiences if any, so that members develop confidence in the worker as well as the strategy of adopting group work as a viable alternative. Members are encouraged to seek clarifications as to the relevance of the group’s purpose to their needs or problem situation. The worker also explains the agency’s background.

**Goal Formation:** In this step, the goals of the group are framed. Goals are statements of desired levels of change in behaviour or in social situation or in physical conditions to be achieved at some future time. The purpose of the group, agency’s purpose, the needs of the individual members and the modalities of conducting the group—Thelen norms of conduct — determine the goals. The worker assesses the individual needs of the members and in consultation with them frames the goals. Toseland and Rivas (1984) specified three areas of goal formation. First area covers group centered goals that revolve around the conduct and maintenance of the group. Second area consists of common group goals that address to all concerned people — worker, members, agency, sponsor, and finally the third area is concerning individual member centered specific goals. The goals are again viewed as ultimate goal and a number of intermediary goals (Rose, 1973). The ultimate goal indicates what final change in the status quo is to be attained while the intermediary goals that facilitate attainment of ultimate goal. These intermediary goals are formulated session-wise and / or stage-wise that is from the reference of time or progress made. Konapka (1958) emphasises that while framing the goals, care shall be taken to see that these are complementing and supplementing rather than conflicting and contradicting each other.

Some examples of the goals are:
- The parents of mentally retarded children join a group to learn some better ways of coping up with the challenges of upbringing their wards --- the general need of the group members.;

- The purpose of the group is to provide a platform for the parents of mentally retarded children to share and exchange their skills in upbringing of the children— the purpose of the group formation.

- Agency’s purpose is to make parents take more responsibility in bringing up their mentally retarded children.

- A parent’s specific need is to learn to tackle the aggressive behaviour of his/her child and to make his/her spouse and other family members to accept the child.

- The group centered goal is that all members will share their problems without any reservations and will not waste the group’s time by indulging in irrelevant issues.

All these are complementing and supplementing each other. For example, if the goal of joining the group is to question the policies of the agencies or to demand for more facilities then the goal is not complementary to other goals and create problems in attaining other goals, therefore, should not be included.

**Structuring Group Session:** Structuring the group session involves two aspects. First is structuring the time and the second addresses to the pattern of interactions. The group has to work out how much time has to be allotted to each session, to each activity and to each member. The group has to evolve the modalities of adhering to the time schedules. It has also to work out alternatives in case of failure to adhere
to the time schedules. For example it has to spend 30 minutes for a video show but because of the electricity failure, the video could not be played. Instead of idling away the time the group can have a discussion focused on the theme of the videotape.

The interactions among the members and between the members and the worker have to be structured. Structuring the interactions includes how to address each other, how to and when to intervene and interrupt, how to encourage docile and shy members to participate and control the domination of some members. It also includes certain group norms that are to be followed strictly by the members.

**Reviewing the Contract:** At the time of enrolling, the members and worker entered into an agreement of working together. At that time the members might not have good understanding about the whole exercise. After attending to the orientation and having initial interactions with the worker and with each other, members and worker may feel the need to change some conditions of the contract, for example, the frequency of meetings, time and duration of the meetings, and the fees etc. The contract is reviewed and new clauses are introduced or some clauses are deleted from the original contract with mutual consent.

Creating an environment that is conducive for the healthy conduct of the group session is a continuous process. The physical arrangements, financial back up and mobilising resources are the areas the group members and the worker have to work on.

**Phase III: Middle (Active Working) Phase**

This phase occupies the major part of the working life of the group. Members attend the sessions
Group Formation: Stages of the Development of Groups

regularly and actively working towards accomplishing its purpose and goals — general group maintenance goals, common group goals and individual member goals. The steps involved in this stage are:

- Making arrangements for the conduct of group sessions
- Structuring the time
- Facilitating group meetings
- Assessment of the group’s progress

**Making Arrangements for Group Sessions:** The group gears up for attaining various goals it is pursuing. The worker and the members plan and make preparation for the group meetings. The worker has to spend considerable amount of time in developing the activities and procedures for the conduct of the group meetings. A number of decisions have to be taken with regard to the selection of an activity or task, sequencing of the tasks and activities, assigning responsibilities etc. Materials and equipment to conduct the group activities have to be procured. Resource agencies and persons have to be contacted.

For example, a pre-retirement counselling group may plan for exercises that would give them an idea about the possible changes that take place in their social status and roles and how best to cope up with the new situation. The possible exercises could be role-plays, screening of a video followed with a discussion, an orientation lecture session by an expert counselor in the field etc.

**Structuring the Time:** The worker continues this task of setting the time limits for group sessions and individual tasks which has already been initiated in
the previous phase as the life of the group is for a specified period. The members and the worker have to be quite conscious of using time to get maximum benefit out of the group meetings. It is often the tendency to delay the start of the meetings for the sake of latecomers. Delaying the starting time may encourage late coming and cause inconvenience to others who report in time. It also happens that the meetings are either closed early or late. This is also not healthy as it causes inconvenience to members who have other works to attend and discourage them to attending or they may not pay proper attention to the group activity. Further, it is quite possible to get totally engrossed in a particular group task and lose track of the time. This may spill over into the other activity and giving it insufficient time. Consequently the benefits from the other activity are badly affected. So it is important that members must carefully structure their time and follow it.

**Facilitating the Group Sessions:** It is not sufficient just to plan and prepare for the group sessions. The very reason for forming the group is to enable the members to come on to one platform to work towards solving their problems, which they could not solve individually. This suggests that the group needs guidance and support to carry out the tasks it has set forth. The worker has to take a lead in this and facilitate the group to perform its tasks successfully.

At this stage of group’s life, the members seriously pursue the goals of both individual and group. Worker encourages members to actively involve in the group activities, may they be sharing, discussing, and performing a task. The worker develops some insight into their strengths and weaknesses. It may be noticed that some members are performing well and while
others do not show progress. Because of this the group’s progress is affected. The worker has to facilitate the non-performing members to perform. Equipped with the sound knowledge base in human behaviour he/she assists each and every member to be aware of their cognitive processes — intrapersonal processes — that are blocking their progress, and enables them to organise their social transactions — interpersonal interactions — in the group to establish purposeful relationship.

Intrapersonal limitations revolve around feelings, thoughts, beliefs and behaviour patterns of the member. For example when a member is asked to give his feeling about the just concluded group session, if he/she expresses that so and so member is rude in interacting, then the member is giving his thought but not the feeling which may unhappiness or happiness with the session. Sometimes the member does not understand the association between these cognitive processes. In the above example the link between the thoughts and feelings are not established if the member could link the association between the thoughts of being dealt rudely by others during the course of the session and his/her being unhappy. In another case a member may entertain irrational thoughts and beliefs. In the above example if a member says that he/she feels the behaviour of a particular member is rude towards him/her because the member resembles somebody in his/her past with whom he/she had bad relationships. The worker facilitates the member to perform in desired direction by making them to understand these mental states. The worker then make suggestions for reframing and restructuring of the thoughts and expressions, as well as for stopping of the recurrence of unhealthy thoughts to enable the member to deal with these cognitive processes.
The worker facilitates interpersonal interactions whenever he/she finds them deteriorating. Deteriorating interpersonal relations are discerned when members fail to communicate with each other, participate in the group activities, avoid some members, differ and pick up quarrels with each other, and form subgroups and work against each other. The worker helps to improve the interpersonal interactions by introducing a number of ice breaking, role-playing, modeling, and simulation exercises.

At the environmental level worker connects the members with resources, creates congenial physical and social environment.

**Assessment of Group’s Performance:** The group processes are assessed with a view to ensure that group attains its goals. It provides proper direction and guidance to the group. It includes the assessment of the levels of participation and involvement of group members in the group activities, the changes that are taking place in the members’ perceptions, attitudes and behaviours, acquisition of new skills and strengthening of existing skills that would help members to deal with their problem areas and grow. It points out the areas for and type of interventions that have to be planned and implemented by the worker at individual level as well as at the group level. The assessment is being done by the worker, members themselves and others who are associated with the group. The tools that help in the assessment are:

Structured observations by the worker and other members and self-observations of members themselves. For example, it is decided to assess the communication patterns among the members. The worker and members are informed in advance or later, that is during or after a specific task has been performed, to note their
observations on various aspects of communication such as the language, the gestures, modes of communication — verbal or non-verbal — the member/s resorts to.

Recording of the group meetings — written reports, audiotapes and videotapes, measurement scales of behaviour, and sociogram etc. The interaction patterns, behaviour manifestations, group attraction, situation leading to conflicts, subgroup formations, leadership styles are some areas that can be assessed by the above mentioned tools. The process and procedures of assessment are carried out with or without prior knowledge of members.

**Phase IV: Evaluation**

Evaluation is an integral component of social group work. The term evaluate simply means to examine the value of. According to Trecker (1955), it attempts to measure the quality of group’s experience in relation to the objectives and functions of the agency. Evaluation provides the necessary feedback on the performance of the group. It is carried out after the end of group work activity and before the group is terminated or sometimes after the group is terminated depending upon the purpose of the evaluation. It focuses on the worker’s performance, agency support, the group process and growth of the members. The evaluation may be entrusted to the worker or to someone in the agency or to an outside expert.

It points out that whether the worker competently dealt with the group work process or not. What shortcomings are constraining the worker to perform better? It enables him/her to gain confidence and make efforts to improve his/her professional knowledge and skills, gives him/her the satisfaction that he/she is contributing for good of the profession and the society.
Evaluation provides information to the agency as to the quality of its service and the additional efforts it has to make to improve its quality of services. The support it has extended to the worker and group is at the desired level or not.

It throws light on effectiveness and ineffectiveness of planning and conducting the group sessions. How far they could accomplish the goals for which they were planned. Whether inbuilt monitoring systems are useful and are properly executed or not.

It assesses the progress each and every member has made. The extent to which each member made use of the group experience to effectively handle his/her problem/need. The changes that have come in the member/s are to the desired extent or not.

Finally, it indicates measures to be taken not to repeat the mistakes or overcome the shortcomings for future groups formations and processes. Therefore evaluation is not just a routine administrative job but also a guide for the future.

Evaluation is a form of research process. It involves data collection and analysis of data. The first step in evaluation is to formulate the aims and objectives. This exercise draws boundaries to the area of evaluation. For example the aim of the evaluation is to find out the competencies and abilities of the worker.

The second step considers what type of data and sources from which the data are to be collected. Whether it is verbal or non-verbal data. For example, to know the performance of the worker the views of the members are taken or the movements and gestures of the worker are examined with the help of video tapes. The sources of data could be from the progress reports maintained
by the worker, notes and other task files written by the members of the group, other staff of the agency and outside resource agencies/persons.

Third step involves collection of data. The evaluator meets respondents and issues questionnaires, collects them, administer interviews with respondents and studies records and reports—written, audio and video.

Fourth step is analysis of the data. The data gathered is processed and analysed and conclusions are drawn. For example if the aim is to find out whether individual member’s goals are attained, the conclusions could be yes or no.

Fifth elaborates the implications for the future. Based on the outcome of the evaluation necessary changes and improvements are made in future group work practice for better results.

Phase V: Termination of the Group

All things have to come to an end whether one likes or not and social work group is no exception. The end could take place on a positive or on a negative note. That is it happens since the group has accomplished its purpose and goals or the time has lapsed or even because of failure to carry on further. Therefore, the termination of the group may be scheduled or unscheduled. The unscheduled termination takes place when the members fail to attend the group sessions continually or drops out prematurely. This happens due to various reasons. It could be due to a faulty enrollment, or failure of the members to develop relationships, or unresolved conflicts among the members and subgroups, or style of functioning of the worker and so on. This form of terminating of the group is disturbing and disappointing to the worker as it reflects on his/her
professional competence. Nothing much can be done in cases of unscheduled or abrupt endings.

In case of a scheduled termination the worker has to take into consideration number of measures to ensure smooth closure. The reaction of the members to the termination of the group varies. The worker has to have an idea as to the possible responses and reactions the members express for the ending. The members may welcome or disapprove the ending. Members mind could be wavering between feelings of happiness or unhappiness. Heap (1985) termed these as feelings of ambivalence. One state of mind looks at the ending as a good relief as there exists no need to face a number of pressures of coping with the group norms, need not interact with those they do not get along well, perhaps, even the group worker, no longer have to share the private and confidential information particularly in groups where the self disclosure is a precondition and emphasised.

While for other state of mind, the thought of disengaging with the group is a shock and unacceptable, feelings of getting once again isolated and alone in dealing with the problem/need generates anxiety and fear, the reality that the nurtured relationships with other members coming to a close leads to worry, the thought of missing the support and guidance of the worker produces feelings of being abandoned and orphaned, how to fill the vacuum created in the personal time that was used for attending and preparing for group meetings is a real challenge to face.

The worker has to be aware of these type of likely reactions and responses of the members to the idea of parting with the group and work towards termination.

The preparations for termination are very much included in the middle phase itself.
Group Formation: Stages of the Development of Groups

It is important to prepare the members to the fact that whatever desirable behaviour patterns the member/s experience and exhibit have to be carried forward even after the group comes to an end. The worker has to create situations within the group environment and even identify the real life situations where the member/s can act out the changed behaviours independently. This takes care of many of the members worry about missing the group support once the group ends.

Some follow-up sessions can be promised to reassure the member/s that they are not totally abandoned. Some support and guidance is still available either from worker or other members. The worker shall arrange activities wherein both worker and other members express their assessment of the progress already made and improvements to be made by each and every one of them. This exercise makes room for the group to deliberate upon what efforts the member/s have to make after the termination. Worker can suggest referral agencies to the members who need guidance and support for other shortcomings in future. Further, the worker gives assurance to the members that whatever self-disclosures made by them are kept confidential and will never be used against their interests. Members themselves share same type of assurances.

In addition to these the worker has to do other routine tasks such as preparing a report on the performance of the group, acknowledge the services and support given by resource agencies/persons, and pay the pending dues.

Role of Group Worker in Group Formation Stages

The group worker is the key player in the formation of the group. The worker plays a number of roles. He/
she plays the most widely shared roles of social worker in general viz., enabler, mediator, advocate, educator, and facilitator. The roles specific to social work group are that of a leader and decision maker.

As enabler the worker furnishes the necessary information to members so that member’s doubts are clarified and their participation levels improve. Encourages the member/s who takes initiatives in performing the group tasks.

As mediator, the worker resolves the conflicts in the group by liaison. Brings conflicting members onto discussion forum and interprets each member’s points of view so that the misunderstandings that caused the conflict are put to an end. The worker also mediates the negotiations between the group and the other staff of the agency and other resource agencies.

As advocate the worker presents the case of the members to the agency authorities to secure certain additional facilities and concessions. Pleads on behalf of the member with family and/or with the community to cooperate with the member by way of accommodating the member’s needs. He/She presents the case of the member/s to the referral services.

As educator the worker clarifies the misnomers the member/s have about various aspects such as the problem/need, irrational beliefs, unfounded fears etc. He passes on information to the members about the developments taking place in the areas concerning their social situations.

As facilitator the worker creates congenial environment for the group to go ahead with its activities and tasks. He/she procures the required material for the smooth conduct of the group sessions/tasks. The worker helps
members who are shy and withdrawn type to participate by helping them to identify their intrapersonal and interpersonal shortcomings and assists them in overcoming these.

**Role as a Leader**

The group worker also plays the role of a leader in the group. As a professional with sound knowledge base in human behaviour and social interactions and interpersonal relations, the group worker is automatically assumes leadership role. Till the time the group has its leader from among the members the worker discharges the functions of a leader. Douglas discussed four leadership acts the worker performs viz., preparation, intervention (working), intervention (control) and evaluation.

The worker provides directions to group members in planning the group activities, making preparations for carrying out the planned activities and finally in carrying out activities.

He exercises controls over those members who are either not cooperative or involving in actions that are detrimental to the group’s norms and purposes.

Takes initiatives in mobilising the resources both material and human. Connects members to resource agencies and persons. Oversees the utilisation of the available resources by the members for the common good of the group as well as for the benefit of individual members.

Reminds member/s about their goals and facilitates them to pursue their goals.

Protects and supports the weak members from those members who are inclined to exploit them.
He also performs the role as decision maker. Decision making is to choose among the alternatives available. A number of decisions have to be taken in planning and organising group and its activities. The decision-making process starts from the conception of the group to that of termination of the group. At every stage decisions have to be made. For example, a decision has to be taken to decide the size and composition of the group in the formation stage. They have to be made independently by the worker or made in active consultation with and involvement of members, agency administrators and other staff and at times even with resource and referral agencies. Even though the worker has conviction in the democratic process, still the worker is compelled to take decision as the group is in a fix or dilemma to take decisions.

Finally, the worker as a leader develops and promotes leadership in the group. The worker identifies the potential leaders from among the members and creates opportunities for them to take up leadership responsibilities.

**Conclusion**

In this chapter we have studied the different factors that necessitate social workers to plan for a social work group and the significant place group has in meeting the needs of people. We have learnt that social work groups are different from other groups as they come into existence for a specific purpose of enabling people in need to resolve their needs through group experience which under constant guidance from a professional trained social worker. We also have information about the types of social work groups that can be thought of by the worker keeping in mind the needs/problem situation of the members, the interests of the agency,
and the availability of resources. We have learnt that the social work group formation has a numbers of phases and each phase has a number of steps, which the worker and members have to carefully involve. We have also examined the role of social group worker in group formation. We have discussed the generic social work roles as well as the roles specific to social group work viz., leadership and decision making roles.

References


The Social Group Worker’s Role in Group Work Process

* Suresh Pathare

**Introduction**

The worker is tremendously important in social group work. It is said and generally agreed upon that the key to effective group work lies with the worker. The worker in his helping role is responsible for the provision of guidance and help for the group. There is no single, universally applicable style of working in a group. A worker has to construct for himself a framework of concepts and knowledge especially relevant to group situations.

The overall function of all social workers in dealing with a group is to help its members accomplish group goal. While doing this the group worker performs various roles. The different specific roles performed by him are determined by the nature of the group, the group goal and the relationships within the group setting. In this chapter, we discuss the various “roles,” that the worker performs while dealing with group process in different field setting.

**Defining the Worker in Social Group Work**

The social group worker is a person with knowledge, skills and values. The group worker is primarily a “helping person” rather than a “group leader.” His influence is indirect rather than direct. He is not a boss who has

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the say, a teacher who knows better or an expert in the subject matter of the group. He works with the group at its own pace and provides methodological help as and when required.

The worker is not a part of the group but he enters into it when the individual in the group or the group as whole or both need professional help to fulfill their own purposes. It must be noted that social group worker is not needed in all the groups. Many groups, just as many individuals, will be perfectly capable of carrying out their programs by themselves and will not need professional help. The professional group worker, as part of a helping profession, will be used and should be available wherever help is needed.

The group worker’s role in the group work can begin at various stages in different groups. He may have to perform some role even before he actually meets the group. This is particularly true when a worker within an agency framework deliberately forms the group. His role in the formed groups can depend on the need and the help required by the particular group. The worker's role will vary with different groups. This is because of the groups and the situations within which they operate. As a group worker one has to keep enough flexibility and adaptability, since an appropriate group work contribution in one group, or at one stage of a group’s development, may be totally inappropriate in another group or at another time.

**Factors that Influence the Role of the Social Group Worker**

The worker needs to understand the group and the circumstances surrounding it before attempting to define the specific aspects of his role with it. The primary
considerations, or factors, that influence the role of workers are:

1) the community setting,
2) the nature of the agency, its function and scope,
3) agency facilities and program,
4) the kind of group with which he is working,
5) the interests, needs, abilities, and limitations of individual members,
6) the skill and competence of the worker, and
7) the amount of help the group wants and its willingness to accept help from the worker.

These factors operate in every group situation. The extent to which the worker consciously studies them separately and in relation to one another will be influential at the point of role determination.

It is therefore difficult, if not impossible, to describe the worker’s role as consisting of concrete techniques that can be applied with unvarying regularity to all group situations. With some groups the worker may carry a great deal of responsibility because the groups are newly formed and unfamiliar with ways of working together. He may refrain from carrying responsibility for the same group at a later time in its development. With one group the worker may make a definite attempt to help that group participate with other groups in the carrying out of some large undertaking. He assumes that it is ready for such a step and sees the step as contributing to the group’s basic experience in the agency.

The predominant constant factor that must be thoroughly understood by the worker is that he is always
a representative of the agency. He is not a member of the group but rather a worker who has the responsibility of helping the group use the agency to fulfill all or part of its needs. His skill as a group worker is always put into practice within the accepted policies and procedures of the agency. What he does with the group will depend upon the basic method of work in which the agency believes. Consequently, it is of the utmost importance that workers interpret their role with the group relatively early so that the group may know what to expect from them. They should interpret the agency to the group and let the group know how the worker conceives of his task as a representative of that agency.

**The Social Group Worker’s Role in Group Process**

In the helping process of group work, the interactions and relationships of the members to each other have much meaning. They are never static. They change in time, and in relation to specific situations. The changing interactions and relationships as well as all the developments and changes taking place in group are called group process. The social group worker’s role in group work process can be best understood as a role of ‘midwife’, who provides help in delivery. He is a methodological helper, a catalyst. He makes his knowledge and experience available to participants during a group work process. It means the youth groups, treatment groups, adult groups where there is a need to improve relationships, groups that need help with understanding their own problems, and groups that need help in working toward the improvement of community services, they all need a professional group worker.
In working with groups a social worker is expected to be knowledgeable and skillful in a variety of roles. The particular role that is selected should (ideally) be determined by what will be most effective, given the circumstances. We are presenting here some, but certainly not all, of the roles assumed by social group workers in group process.

- **Enabler:** In this role, the group worker is present with the group as a “helper,” or “enabler,” there to do things with the group rather than for or to the group. His influence is indirect rather than direct. He helps individuals or groups to articulate their needs, to clarify and identify their problems, to explore resolution strategies, to select and apply a strategy, and to develop their capacities to deal with their own problems more effectively. As an enabler, the worker helps members revitalize and mobilize their own strengths and resources to cope with difficult problems.

- **Broker:** In the broker role, the worker identifies community resources, government schemes and programmes that may help group member to carry out their plans. Often the group members lack information about various resources and services available. As a broker, the worker helps members become aware of resources, eligibility criteria, and other conditions for using a particular service.

- **Advocate:** It is an active, directive role in which the worker advocates for a group. When a citizen’s group is in need of help and existing institutions are least interested in providing services, then the advocate’s role may be appropriate. In such a role, the group worker provides leadership for collecting information, for arguing the correctness of the
client’s need and request, and for challenging the institution’s decision not to provide services.

- **Activist:** When the group is formed with the social goal, the group worker works as an activist. An activist seeks change; often the objective involves a shift in power and resources to a disadvantaged group. In the role of an activist the group workers are concerned about social injustice, inequity, and deprivation. The goal is to change the social environment to better meet the needs of individuals.

- **Mediator:** The social group worker is often a link between the group members, between groups, group-community and group-agency. As a mediator, the worker helps resolve disputes, conflicts, or opposing points of view within the group or between a member and some other person or organisation. The mediator role involves intervention in finding compromises, reconcile differences, or reach mutually satisfactory agreements. He works through the members of the group and occupies a position of liaison between the group and the agency. The social group workers use their value orientations and unique skills in identifying miscommunication and clarifying position. For example, in a group for adolescents in a residential centre, the worker might help two members resolve a conflict about their participation in a recreational activity. In another group, the worker might help a member resolve a conflict with a child-care worker.

- **Negotiator:** A negotiator brings together those who are in conflict over one or more issues and seeks to achieve bargaining and compromise to arrive at mutually acceptable agreements, somewhat like mediation, negotiation involves finding a middle ground that all sides can live with. However, unlike
a mediator, which is a neutral role, a negotiator usually is allied with one of the sides involved. The group workers play this role especially while negotiating about time, venue, resources, etc. with group members, agency or community.

- **Educator:** One of the most important roles assumed by workers in helping members achieve their goals is that of the educator. The educator role involves giving information to group members and teaching them new skills. To be an effective educator, the worker must first be knowledgeable. Additionally, she or he must be a good communicator so that information is clearly conveyed and readily understood by the receiver.

- **Initiator:** An initiator calls attention to a problem – or even to a potential problem. It is important to realize that some problems can be recognized in advance. The group worker with his experience and knowledge can foresee the potential problem areas and draw the group members’ attention to address the issues. In this role he/her initiate discussion or action on the problem area. Usually the initiator role must be followed by other functions; merely calling attention to problems usually does not resolve them.

- **Empowerer:** A key goal of social group work is empowerment. In the role of empowerer the group worker helps the individuals and groups to increase their personal, interpersonal, socioeconomic, and political strength and influence through improving their circumstances.

- **Coordinator:** Coordinators bring components together in some kind of organised manner. On behalf of the agency often the group worker assumes
the role of coordinator for helping the group members to avail the services from different agencies. The group worker also at times coordinates between the group members, especially in the initial stage of group formation.

- **Group Facilitator:** A group facilitator is one who serves as a leader for group activity. The group may be a therapy group, an educational group, a self-help group, a sensitivity group, a family therapy group, or a group with some other focus. Facilitating discussion and helping group members to arrive at decision are important role that group workers play. As a facilitator he/she provides the methodological help. He/She does not discuss the method but he uses it for facilitating the group process. He/She does not allow himself/herself to become involved with the group and their problem. When required to express his/her own opinion, he/she at all times makes it clear when he/her is functioning as a group worker and when he/her is expressing his/her own opinion as a member of the group.

- **Communicator and Interpreter:** The group worker is a specialist in the “how” of communication between people. The group worker has to act as a communicator or interpreter, where interpersonal relationships have to be dealt with. The role of communicators is different from facilitating the communication in the group. In this role he/she actually helps the group or members to understand what is being communicated. At times she has to interpret or reword the phrases to explain to the members. For example where a group is starting from scratch, a group may be puzzled about, and even suspicious of its purpose and the role the worker, at this stage the group worker has to
Role of Social Group Worker in Different Settings

We will discuss now the role the group worker performs in different field settings. As we are aware there are different fields of social work practice. Social work professionals in India work with community, groups, families and individuals who are elderly, delinquent, unemployed, or who have disabilities. The services of social workers are grouped within various fields of practice as they relate to addressing specific social problems, meeting the needs of client groups, or reflecting particular settings. The prominent settings include family and child welfare, health and rehabilitation, mental health, occupational social work, community development, education or school social work, social work in corrections, and aging or gerontological services. Social group work practice is possible in almost all the settings. The models may vary according to the needs and the nature of the setting. Similarly the role of the social group worker also will vary in different setting.

In this section we will take up a few important field settings for understanding the role of group worker.

i) Social Group Worker in Community Development Setting

Certain features of the social group work in community settings have to be borne in mind when considering the role of social group worker. The primary objectives
of social group work in community setting include: social integration of the community on a local neighbourhood basis through participation in self-help and mutual-aid programmes; motivating people to improve their living conditions especially those adversely affecting their physical and social development; creation of opportunities for undertaking programmes of economic betterment based on the maximum use of community resources and local initiative; identification and development of local leaders with emphasis on providing them organisational skills and enabling them to locate and fully utilize various technical, social and welfare services; and development of a sense of belonging to the community. The group work in community setting is in the form of self-help groups, recreational groups, action groups, etc.

The social group worker in the role of organiser needs all her skills in organising the various sections of a community into well-knit groups. She organises the group members to develop their personality through participation in recreational, cultural and other activities. In this role one of her primary tasks includes the development of responsible leadership from the groups organised by her. For the worker operating on a macro level, one of the major tasks is to work at an inter-group level. This includes the ensuring that inter-group rivalries are kept at the minimal level, fostering of inter-group cooperation, matching the objectives of each group and the objectives of the community as a whole, facilitating communication, etc. Another crucial role for the group worker is that of a 'resource person'. It requires her to be aware of various avenues within and outside the community, which could be utilized for enhancing the functioning of the group members. The group worker also has to become a vital link between the civic administration and the people, especially
during the initial stages of his work. Subsequently, however, this role of a ‘liaison functionary’ has to be transferred to the group members.

In the performance of the above stated role, the social group worker in community setting also needs to play the role of a ‘management expert’. In this role, she needs to impart skills to the group leaders and other members in the area of office management with special emphasis on skills in letter writing, filing procedures, basic accounting, writing records of meetings, and elementary public relations and fund raising.

ii) **Social Group Worker in Institutional Settings**

In the institutional setting the social group worker makes a contribution through providing opportunities for constructive use of free time. Besides this her contribution includes the understanding of the group, nature of institutional living and makes it possible for many of the institutional residents to make a constructive use of the institution’s services. Institutional living is group living. It consists of living groups, school groups, work groups, leisure-time groups, friendship groups, age groups, and a wide variety of other groups. The group worker’s skills required in making constructive use of these group relations for the success of institutions. Some of the institutions that make use of the group worker’s skill are correctional institutions, institutions for the mentally retarded and the handicapped, homes for the aged, and children’s homes. The group worker perform different role according to the different function of the institution as well as to the personnel who are employed.

As said earlier, the group worker’s role in an institution is not limited only to recreational aspects. Her knowledge and skills are helpful for the whole group living situation:
she helps the institution in understanding the dynamics of group behaviour just as the caseworker brings to the institution their basic understanding of individual treatment. The social group worker in institutional setting takes on a specially helping role towards the other staff members like houseparent or counselor, since they are directly related to the group living process.

Another important role of the social group worker in any institutional setting is related to his direct work on some specific problem of the group, as for instance, discharge from the institution, intake into the institution, special behaviour problems, or problems around emotional needs that cannot be handled in the day-to-day group living situation. In this context the group worker’s role is to supervise and coordinate special services which are not carried by the houseparent but which relate to the group living experience. It is important that the group worker coordinate these services from the point of view of social relationships as well as of treatment for the individual, so that in them the treatment focus is maintained.

The group workers in institutional setting carry out his role for referral to recreational and group association resources in the community. She also maintain liaison with volunteers, if the institution uses them and work with groups of relatives of institutional residents. For further understanding we will discuss here social group worker’s role in some of the institutional settings

iii) **Social Group Worker in Clinical Settings**

In the hospitals and clinics, the social group worker becomes a member of a team composed of the medical doctor, psychiatrist, psychologist, therapist, nurse, and social caseworker. In such settings with a defined treatment goal, the purpose of the service becomes
much more specific than in the community setting. As service is more “pinpointed,” the methods and role of group worker also become more specific.

Social workers in medical setting extend direct services by using group work and casework methods. In the medical setting the social worker carry out group work and performs various roles:

i) enable patients with similar problems to come together and so feel less isolated and alone in facing their problems;

ii) bring about a feeling of belongingness and bring a part of a community which would give them the courage and confidence to adjust to the larger community outside;

iii) work through problems in an atmosphere of mutual acceptance;

iv) use the group as a therapeutic agent for emotional growth and attitudinal change through the process of mutual sharing.

iv) **Social Group Worker in School Setting**

The school setting is definitely a group setting, and teachers work with groups. Schools employ social worker on their staff in order to help children whose problems in the school have their genesis in social and emotional factors in the child, in his family, or in his social environment. Many schools in India are recognizing the importance of school social worker’s role as caseworker, counselor and group worker. The school social worker works with four parties: the child, the family, the school staff and the community. While working with them he/she uses his knowledge and skills of casework and group work.
The school social worker has to perform a variety of functions in the educational setting. While doing this one of the roles he perform is social group worker.

In the role of social group worker he promotes group adjustment through group work activities. He organises group work activities in the form of recreation, role-plays, story telling, group exercises, etc. to increase the capacity of social participation and constructive group interaction in the school children. Through guided group interaction the worker promote relatedness, belongingness and the feeling of identification among children. This also helps in the improvement of their social adjustment and the development of their personality.

Working with special student groups, the school social worker expand practice with specially formed groups of children and teen-agers experiencing difficulties in social and academic adjustment. He gives special attention to students who underachieve, disrupt, drop out, or are withdrawn from meaningful peer involvement. He ensures that lonely, isolated, and handicapped children have an opportunity for constructive participation in special interest or recreational groups.

Another important function of the school social worker is to conduct value education classes and leadership development programmes. Through the group work activities he orient the children about cooperation, teamwork, role taking, etc. The school social worker uses the group work method while assisting or leading special interest groups in activities such as dramatics, puppet-making, other hobbies, or community service projects. He performs important role in motivating students to participate in varied activities that broaden horizons and expand relationships with peers and adults.
Social Group Worker in Institutions for Children and Adolescents

In our country both the government and voluntary organisations offer institutional services for children and youth. We have observation homes, orphanages, homes for the street children, etc. These institutions are not the places in which children and/or youth are kept only to be fed, clothed and perhaps restored in a family. The most important part of institutional care lies in daily group living situation which can be used constructively for the purpose of socialisation and teaching the life oriented skills to the children.

The group worker’s role in children’s home is one of the most important areas of work. She deals mostly with the children and adolescents to whom the group situation is crucial even in life outside of the institution. In the absence of family these children need all the services given to children in their own homes and some additional ones related to their anxieties, loneliness, and planning for life outside the institutional services. The quality of group living is therefore as vital as the educational, clinical and other specialized services attached to the institution.

The functions of the social group worker on the institutional team are twofold: to help with the group living situation and to conduct special groups. His role includes the tasks such as:

i) direct group work with formed groups of children inside the institution.

ii) work with parent groups, where possible.

iii) being responsible and helping with the recreational programme as part of group living.
iv) supervision and coordination of child care takers (sometimes called house parents).

v) supervision of volunteers who work with groups of children placed in the institution.

vi) responsibility for referral to resources for group association in the community, when the child is in the institution as well as when planning for his release.

vii) responsible participation in diagnosis of individuals and in decisions regarding placement in the institution, grouping of children, treatment plans, and plans for after-care.

viii) the social group workers sometimes conduct discussion or activity groups with a therapeutic purpose with children who have strong negative feelings or difficulties in relating to adults.

vi) Social Group Worker in Services for the Aged

The social group work with the aged is organised at both the community as well as the agency level. The group worker’s work is usually direct with specific groups. At times the worker has to work indirectly with the group of volunteers working for the aged. In both the cases it is the establishment of special groups in order to make a contribution to group living. Many of the problems of the aged are intensified when they enter in an institution. As all institutionalized people, they feel that they are removed from the normal community life, which centers on the family. They often have some impairment of their capacities. Self-respect is especially threatened. Therefore, the purposes of group work with the aged are usually:

i) to raise the self-esteem of the participants.
ii) to give an opportunity for planning.

iii) to become a part of their own small community and, if possible, a part of a larger community.

iv) to establish a group bond that may replace the warmth of family relationships.

The functions of the social group worker in community based agencies giving service to the aged are:

i) working out a program for different kinds of groups as per the needs with this age group.

ii) direct work with certain groups of the aged, especially those who present problems in relationships.

iii) as in all group work, some contact with individuals outside of the group, but more intensively in the particular age group.

iv) training, coordination and supervision of volunteers or part time workers in programs for the aged.

v) consultant to committees of older citizens in relation to social action in their own behalf, if requested to do so.

In the institution for the aged, the functions of the social group worker are:

i) direct work with formed groups for the purpose of specific help to those who cannot easily enter the group life of the institution:

ii) responsibility for the stimulation of a rich and varied programme in the institution designed to allow for satisfaction of individual needs and to counteract the feeling of segregation from the community which
may appear in an institution. This is usually done by either being a consultant to the staff of one or several institutions.

**Conclusion**

The aim of this chapter was to help you understand the social group worker’s role. You are now familiar with the group worker’s position in group work situation and her primary role in social group work. Now you know that the group worker’s role varies depending on the nature of group goal, the setting in which group is operating, nature of the agency, the interest, needs, abilities and limitations of group members, etc. You will be able to describe some of the roles that group workers play in group work processes. Social group work practice is possible in most of the field settings. We discussed social group worker’s role in some of the important settings. You are now equipped with the knowledge and understanding to distinguish the group worker’s role in different settings.

**References**


Introduction to Social Problem

* Ashis

Introduction

Certain adverse situations that may have harmful consequences may affect societies. They may hinder the normal functioning of the society. Such harmful situations are known as social problems. These problems arise because every society has certain norms and values. When these norms and values are violated, they result in social problems. They are problems because such deviation of norms and values are dysfunctional in the society. Some of the examples of social problems are drug addiction, terrorism, youth unrest, juvenile delinquency, corruption, offences against women, environmental degradation, etc.

However, not all violations of social norms and values result in social problems. For example, when a person sports an unusual hairstyle it does not become a social problem. Similarly, social problem may vary with time and over space. Smoking was not considered a social problem earlier. At present with the rising health consciousness, smoking is considered a major social problem. Similarly, sati was not considered as a problem in the medieval India. However, in modern India it is seen as a social problem.

A society may consider a certain practice as a social problem where as it may not be a problem in another society. This is because the norms and values are not the same in all the societies. Divorce may be seen as a

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serious problem in some societies, but it may not be so in other societies. However, there are certain practices that are considered harmful in all societies viz. murder, terrorism, rape, etc.

Definition

Many scholars have tried to define social problem but it is difficult to arrive at a commonly accepted definition. According to Fuller and Myers, a social problem is “a condition which is defined by a considerable number of persons as a deviation from some social norms which they cherish”. Similarly, Merton and Nisbet define social problem as “a way of behaviour that is regarded by a substantial part of society as being in violation of one or more generally accepted or approved norms”. However, these two definitions are applicable for certain social problems like corruption, drug addiction and communalism. It is not applicable to problems like population explosion. Further, some problems are caused not by the abnormal and deviant behaviour of the individuals but by the normal and accepted behaviour. For example, the degradation of the soil in certain regions of Punjab and Haryana is being caused by the accepted methods of farming. Therefore, for Carr, “a social problem exists whenever we become conscious of a difficulty, a gap between our preference and the reality”.

Characteristics of Social Problems

On the basis of the above discussion and definitions, following characteristics of social problems can be deduced:

1) All social problems are situations that have harmful consequences for the society.
2) All social problems are deviations from the ideal situation.

3) Social problems are caused by many factors.

4) All these factors are social in origin.

5) Social problems are interrelated.

6) Social problems affect every individual of the society.

7) Social problems affect different individuals differently.

Social Problems in Indian Context

We have discussed that social problems vary with time. Similarly, social problems in India have changed with different historical phases. The major social problems in each of these phases reflect the then existing social norms and values.

The major social problems in the early phase of the Indian civilization were increasing rigidity of social hierarchy, continuous conflicts between the Aryans and the Dasas, emphasis on the observance of rituals, sacrifice of animals etc. With the advent of the Muslim rule in India, new social problems like sati, purdah, introduction of caste system among the Muslims, etc. emerged.

In the contemporary phase, India is facing several social problems. We have the problems of terrorism, violence, offences against women, children and minorities, unemployment, poverty, drug addiction, communalism, youth unrest, corruption, migration and displacement, environmental degradation, population explosion, prostitution, HIV/AIDS, etc. These problems are the result of various factors that include economic, political, legal, cultural as well as historical.
Types of Social Problems

Broadly, social problems can be divided into two types. Social problems at the individual level and social problems at the collective level. Social problems at the individual level include juvenile delinquency, drug addiction, suicide etc. Social problems at the collective level emerge when the mechanisms of social control fail to regulate the behaviour of its members or when there is breakdown of effective institutional functioning. For example, poverty, exploitation, population explosion, untouchability, famine, floods etc.

Social problems can also be divided into following types in relation to their causative factors:

1) Social problems due to social factors.
2) Social problems due to cultural factors.
3) Social problems due to economic factors.
4) Social problems due to political and legal factors.
5) Social problems due to ecological factors.

1) Social Problems Due to Social Factors

The nature of heterogeneous societies has been the cause of a number of social problems. In heterogeneous societies like India, where there are people of several religions, castes, linguistic groups and tribal groups living together, several types of social problems can be seen.

The conflict among the different religious groups has given rise to the problem of communalism. In India, Hindu-Muslim conflict has been a major problem. We have also seen conflict between Hindus and Sikhs and between Hindus and Christians. Similarly, the caste
Social Work Intervention with Individuals and Groups

System in India has divided the society into various groups. It has led to the discrimination of one group by the other. The problem of untouchability in India is due to the caste system. Caste system is also responsible for the educational backwardness of the country. Traditionally, the caste determined the eligibility of the people for education. In the traditional system, education was considered to be the prerogative of the upper castes. As a result, the masses were deprived of education. This explains the high rate of illiteracy in India.

Another social factor that may lead to social problem is language. In a country where several languages are spoken, conflict between different linguistic groups can be seen. In India, we have experienced the conflict between different linguistic groups. For example, in Assam and Tamil Nadu.

2) **Social Problems Due to Cultural Factors**

Several cultural factors have been responsible for a number of social problems. In a traditional society like India, some of the cultural factors that have led to social problems are:

a) Male child preference,

b) Patriarchal system,

c) Lack of regard for public property.

In India the value system is such that a son in the family is considered necessary. It is desirable to have more sons. As a result, the members in the family go on multiplying. This has led to population explosion. The population in India has grown at a phenomenal rate after independence. At present, the population of the country is well beyond one billion that makes India the second most populated country of the world.
As elsewhere in the world, Indian society, by and large, has been patriarchal where woman is subjected to man. They are not seen beyond the roles of a wife or a mother. The woman is given an inferior social status to that of a man in almost every walk of life. As a result, almost half of the population has remained deprived. This deprivation is compounded when the woman belongs to the Scheduled Caste or the Scheduled Tribe.

Another trait of the Indian society that has implications for corruption is the disregard for public property. This lack of respect for public property is one of the root causes of corruption, black money, tax evasion, misappropriation of public goods and use of substandard materials in public construction.

3) Social Problems Due to Economic Factors

Economic factors are also responsible for some of the major social problems being faced by the contemporary society. It is more conspicuous in societies of developing countries like India. Unequal distribution of wealth has led to disparity in the distribution of benefits occurring due to development. As a result there is the problem of poverty. Poverty in turn aggravates other problems like high morbidity and mortality, crime, slum, illiteracy, etc.

Further, the process of urbanisation and industrialisation in India has been very slow. This has resulted in regional disparity in economic development. There are pockets of development where high level of urban and industrial growth can be seen. However, the other regions are still under-developed. It has attracted large number of people to migrate from the under-developed region to the developed region. This in turn has affected the population structure of both the regions. In addition to it, the regions receiving the
4) **Social Problems Due to Political and Legal Factors**

Some of the political factors that may cause social problems include electoral politics, political functioning, corruption, etc. In order to win elections and come to power, political parties do not shy away from using communal or parochial modes of mobilisation like caste, religion, and language. Even some of the decisions taken by the ruling party may lead to social problem as they may benefit a particular section of the society at the cost of the entire society. It may result in conflict between different sections of the society. Another problem is the increasing political corruption. Leaders are found indulging in nepotism and red-tapism. They are also seen accepting money in return of some favour.

5) **Social Problems Due to Ecological Factors**

Earlier, in an attempt to develop rapidly, environment was grossly ignored. The ecological consequence of such an attempt has now emerged as a major social problem. Rapid industrialisation has led to increase in environmental pollution that includes air pollution, water pollution, noise pollution, and degradation and desertification of the land. This in turn has led to increased morbidity and mortality, emergence of new types of diseases, global warming, ozone depletion, floods etc. that has threatened the existence of mankind itself. Further, to feed the increasing population of the world more and more land is being brought under cultivation. This has disturbed the global ecological balance. Application of modern technological inputs in agriculture like the pesticides, weedicides, insecticides, high yielding variety of seeds, genetically modified crops are threatening the biodiversity of the world. It has
also increased the probability of the emergence of super weeds and insects that may be beyond the human control.

**Systemic Factors Leading to Social Problems**

According to Merton, social problems may arise because of social disorganisation or because of the deviant behaviour of the individual. For example, in all societies consensus exists on values and interests. Whenever this degree of unanimity is disturbed by conflicting interests, we find trends of disorganisation in that particular society. Similarly, inadequacies in the social system also cause social problems. Society develops formal and informal mechanism of social control to regulate behaviours of its members. Whenever, these mechanisms do not work in an effective manner, the trends of disorganisation become visible in the society.

Social disorganisation is thus manifested in a variety of contexts such as the breakdown in the effective institutional functioning, disorganisation of family, marital breakdown, poverty, violence, crime, population explosion and community disorganisation like youth unrest.

Deviant behaviour is reflected in the violation of norms, values and moral codes. In every society there is a commonly agreed idea of normal behaviour. Whenever someone moves away from the accepted norm and behaves differently, that behaviour may be regarded as abnormal or deviant behaviour. Juvenile delinquency, drug addiction, suicide and prostitution are some of its examples.
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Approaches to the Study of Social Problems

The contemporary period has seen a remarkable shift in the way a social problem is perceived by the society. Earlier social problems and their origin were explained with a focus on the individual. The cause of such problems was seen in the genetic make up of the individual and was believed to be beyond redemption. Now the emphasis is on the social, economic, political, and cultural or on the structural factors. Thus, the contemporary approach views the cause of the social problem at the collective level and not at the individual level. Further, earlier emphasis was on the maintenance of social order and preservation of equilibrium that used to make social change a suspect phenomenon. Now, it is accepted that strains and social problems emerge due to contradictions existing in the social system which can be sorted out by removing these contradictions.

At present, there are two important approaches to study the nature and genesis of social problems. They are:

- Functional approach,
- Marxist approach, and
- Gandhian approach.

The Functional Approach

This approach views the society as a system. A system is a set of interconnected parts that together form a whole. The basic unit of analysis is society and its various parts are understood in terms of their relationship to the whole. Thus, social institutions like family, religion and marriage are the parts that constitute the whole, that is, the society. Functionalists see such social institutions only as a part of the society and not as an isolated unit.
The parts of the society are functional if they maintain the system and contribute to its healthy survival. If any part hinders the normal functioning of the society or threatens its existence then it becomes dysfunctional. According to the Functionalists, the concept of dysfunction is of vital importance in the modern study of social problems. Some of the important Functionalists are Auguste Comte, Herbert Spencer, Emile Durkheim, Talcott Parsons and R.K. Merton.

According to Merton, the study of social problems requires a focus on the dysfunctions of patterns of behaviour, belief and organisation in the society. Such social dysfunctions arise because of a specific inadequacy of a part of the system for meeting a functional requirement. For example, the shift from joint family to nuclear family as a result of industrialisation and urbanisation is dysfunctional for the care of the elderly population. As a result, care for the people in the old age has become a social problem.

The same social pattern can be dysfunctional for some and functional for other in a social system. For example, a large dam may be functional for the people who get benefited from it but is dysfunctional for those who get displaced by it. The accumulation of dysfunctions disturbs the social stability and creates new social problems.

Further, the society develops certain codes of norms and values to maintain equilibrium between the different parts. However, at times, certain circumstances are generated which infringe such social codes. This causes social problems like communalism.

**Marxist Approach**

The Marxists believe that in all societies except the primitive societies and in the Communist societies, the
society is divided into two classes—the ruling class and the ruled class. The ruling class is a minority but exploits the ruled class who is in majority. For example, in the feudal society, lords exploit their serfs. In capitalist society, the capitalists exploit their workers. This leads to a fundamental conflict of interest between these two classes since, one gains at the expense of the other. So all these societies contain some basic contradictions. Therefore, they cannot survive in their existing form. According to the Marxists, the social problems in the society are due to contradictions inherent in the system itself.

According to Marx, some of the social problems in the capitalist society are:

- Exploitation of a man by man,
- Alienation,
- Inequality, and
- Poverty.

In order to maximise their profit, the capitalists tend to pay the minimum possible wages to the workers and try to extract the maximum labour from them. In this way the capitalists exploit the workers, as they do not give them their due. The workers do not have any say in the production process. They are supposed to produce commodities as desired by the capitalists. So they get alienated from their own products. The units of production in the society are unequally distributed. This leads to inequality in the society. This inequality goes on increasing as the capitalists go on becoming richer and the workers go on becoming poorer. With the concentration of wealth in the hands of the capitalists, there is increase in poverty.
Marx believed that the solution of these problems is not possible through reforms within the existing social structure, that is, capitalism. Instead, it requires a radical change in the structure of the society where capitalism should be replaced by communism.

The Marxist approach, however, is criticised as it overemphasises the role of material forces and conflict. It has over-simplified the class structure of the capitalist society, ignoring the importance of new occupations, professions and the middle class.

**Gandhian Approach**

Gandhi gave an altogether different perspective to the understanding of the social problems. His views on social problems are contained in his ideas of *sarvodaya* and *swaraj*. Gandhi’s views are based on the values of truth and non-violence. Gandhi regarded society to be a unified organisation. Thus he was not in agreement with the Marxists. According to Gandhi, though the interests of different classes may clash, the fact of conflict of interest does not assume primacy over the unity of the community.

Thus, the unity of purpose of the whole community is predominant in Gandhian explanation. Cooperation rather than conflict is the chief characteristic of the society. Different classes forming a community work together or cooperate to achieve the well being of the community as a whole.

Gandhi rejected the view that by reorganising society economically, the social, political and cultural problems would end. Simply economic restructuring of the society cannot ensure solution to social problems. The changes to be brought should be all pervasive. Radical changes have to be brought about in economic, social, political
and cultural spheres of the community. The Gandhian approach opposes the theory of violent revolution and coercive change. The revolution has to be a gradual process and should be brought about by awakening of masses. Thus, a programme of social, economic, cultural and political awakening of the masses has to be undertaken to overcome the social problems.

Gandhi was opposed to the introduction of vast economic, social and cultural changes through legislation. The society must change itself gradually by its own initiative and efforts. Legislation may facilitate the changes when society itself is moving in the same direction. Changes should not be imposed on the society.

Gandhian approach offers a critique of the existing order, propounds certain basic elements of a new society and provides a methodology for solving social problems. Critics have argued that Gandhian approach lacks originality and is a combination of the traditional Indian thinking, welfare thinking and liberalism. It is idealistic and divorced from the hard social realities. However, it must be remembered that it was applied successfully by blacks in the USA and in South Africa and even by the people in the Eastern Europe to fight against communalism.

**Societal Response to Social Problems**

Social problems are threat to the stability of the society. Solutions to the social problems can be found if the causes of social problems are identified. Social problems are usually caused due to multiple factors. However, with proper analysis the chief factor, the cooperative factors and the minor aggravants in the origin and development of the social problem can be identified. After understanding and judging the social problem,
the social response should be constructive so that effective action can be initiated.

Society may introduce positive changes in the existing institution or may establish a new institution to overcome the problem. Thus the society’s response can be at two levels: organised response and individual response. Organised response is at the collective level and is taken by the state or by organisations like Non Governmental Organisations (NGOs) and Self Help Groups (SHGs). At the individual level, it is the effort made by socially concerned persons to combat the problem, for example, efforts of Baba Amte to eradicate the problem of leprosy.

But many problems are such that they are very difficult to control like those problems that are occasioned by natural factors such as flood or earthquake. In such case the society can take efforts to minimise the impact of the problem.

**Conclusion**

The chapter starts with an introduction to the social problems and then attempts to define what is a social problem. Based on it, the characteristics of social problems have been deduced and social problems in Indian context have been examined. Then an attempt has been made to classify social problems on the basis of causative and systemic factors. Social problems can be due to social, cultural, economic, political, legal, and ecological factors. Systemic factors leading to social problems can be due to social disorganisation or due to the deviant behaviour of the individual. We have also learnt about the approaches to study social problems. Finally, some light has been thrown on the societal response to the social problems.
References


Introduction

In this chapter we are discussing some of the common problems in India. The remaining problems will be dealt in the next chapter. Problems like HIV/AIDS, communalism, youth unrest, corruption and displacement have received a lot of attention in the recent times. One can say that these are problems related to that of developing societies like India. That is why they have to be given special attention to these problems. Some of the solutions to these problems are also discussed especially the government response are discussed.

HIV/AIDS

AIDS (Acquired Immuno - Deficiency Syndrome) is a disease which is caused by a virus called human immuno-deficiency virus or HIV. AIDS is the last stage of infection in the virus. It takes about eight to ten years between getting infected with HIV and developing AIDS. No vaccine has been invented till today as a cure for AIDS or for protecting people from HIV.

Magnitude: At the end of 2001, WHO and UNAIDS estimated that 40 million people around the world were living with HIV; it was estimated that there were five million new HIV infections and three million deaths

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due to AIDS. Among the new infections, 800,000 occurred among children under 15 years and more than 2 million were among women. Since the first clinical evidence of AIDS reported in June 1981, some 25 million people have died of AIDS --- including 3.6 million children.

The Indian Council of Medical Research (ICMR) initiated surveillance for HIV infection in India in late 1985. Anti HIV antibodies were first detected among sex workers in Chennai, South India in 1986.

The National AIDS Control Organisation (NACO) initiated ‘Unlinked Anonymous Sentinel Surveillance’ in 55 sites across the country in 1994, to monitor the trends of the epidemic. By the end of 2001, on the basis of nationwide sentinel surveillance, NACO estimated that approximately 3.97 million persons in India were infected with HIV/AIDS. These estimations of 2001 indicated that at least 0.8% adults in the age group of 15-49 years were infected.

**High Risk Groups and Routes of Transmitting the Virus:** HIV spreads mainly through four routes:

1) Sex with an infected partner --- heterosexual as well as homosexual,

2) Transfusion of blood and blood products infected with HIV,

3) Injecting drugs with infected syringes or needles, and

4) Transmission from infected mother to her unborn child.

In a study in Pune, it was found that 80 percent HIV cases were related to sexual promiscuity, 5 percent to
blood transfusion and 4 percent to injecting drug with infected syringes.

Thus, the most important sources of transmission of virus are:

1) **Prostitutes**: According to one estimate, the level of HIV infection escalated from one percent to thirty percent among prostitutes in Mumbai in just three years from 1989 to 1991.

2) **Homosexuality**: Though homosexuality is still an offence under the Indian penal code, the long held taboos about homosexuality are now beginning to break. Therefore, the risk of HIV infection through homosexuality is increasing.

3) **Drug Addicts**: Those who take drugs by injection carry the possibility of spreading the HIV infection through infected needles.

4) **Blood Donors**: There are some professional blood donors whose blood sometimes contains the HIV. When there blood is transfused to patients without proper testing, the HIV is transmitted. Laboratories may similarly transmit the HIV when they supply blood without scientific testing.

5) **Pregnant Women**: Pregnant women who are HIV positive transmit the virus to their new born children.

6) **Blades**: Use of blade for shaving, particularly the one used by the barbers, is also a risk factor in spreading the HIV.

**Implications**: AIDS is not just a health problem; it is a problem with important social, cultural and economic implications.
Caring for the Infected: The government recognized the serious impact of HIV/AIDS and has responded to the epidemic.

The government of India is currently implementing the second phase of the National AIDS Control Programme (NACP II, 1999-2004). NACP II was developed through a process of consultation and deliberation between Government of India, State governments, people living with HIV/AIDS, UNAIDS and bilateral partners, community members, industry and labour organisations and the civil society. It has five key components:

i) Targeted interventions for communities at highest risk,

ii) Prevention of HIV transmission among the general population,

iii) Provision of low cost care and support,

iv) Strengthening institutional capacities, and

v) Inter- sectoral collaboration.

The key objectives of NACP II are to:

1) reduce the spread of HIV infection in India; and

2) strengthen India’s capacity to respond to the HIV/AIDS epidemic on a long-term basis, in collaboration with multiple sectors, NGOs including other civil society actors.

Role of Voluntary Organisations: The voluntary organisations can provide information, services and other social support systems to people in danger of contracting the disease. Before contracting the infection, knowledge about the spread of HIV infection can be imparted by community based social workers.
The voluntary organisations can make effort towards this support system. Besides helping the patients, the voluntary organisations can also help the HIV/AIDS affected or infected children, families and other dependents from becoming victims of isolation and discrimination.

Finding funds to fight AIDS is a serious problem in our country because the potential costs are staggering.

**Environmental Degradation**

Environmental degradation can be broadly divided into two categories

1) **Extreme Events and Hazards:** The events are caused either by natural processes or man-made, which bring immediate changes in the environment and inflict damage and loss to the environment in which we live.

It is further divided into:

i) **Natural Hazards** (caused by natural factors)

   a) **Territorial**

      ---- Occurs on the land surface

      ---- Caused by endogenic factors

      ---- E.g. volcanic eruption, earthquake, submergence, etc.

   b) **Atmospheric:** cyclones, atmospheric lightening

   c) **Cumulative Atmospheric:** They are caused due to the accumulation of effects of certain atmospheric phenomena for several years in continuation e.g. floods, drought.
2) **Man Induced Hazard:**

   a) Physical Hazards --- landslides, forest fires
   
   b) Chemical Hazards --- release of toxic gases, nuclear explosions.
   
   c) Biological --- increase or decrease in the population of a species, explosion of human population.

3) **Biological hazards not caused by man**: E.g. Locusts swarms, epidemics

**Pollution**: Deterioration of environmental quality beyond a critical limit caused by human activities.

   a) Land Pollution --- soil erosion, desertification, and salination.
   
   b) Water Pollution --- pollution of sea water, pollution of rivers, and pollution of groundwater.
   
   c) Air pollution --- depletion of ozone layer, concentration of greenhouse gases, suspended particles.

Some of the important factors that cause environmental degradation are:

1) **Deforestation**: Accelerates soil erosion; increases sediments in the rivers; siltation of reservoir; increase in the frequency of drought and floods etc. Changes in the pattern and distribution of precipitation; intensification of greenhouse effects, increase in destructive forces of atmosphere storms etc.

2) **Agricultural development**: Increase in agricultural land and large scale deforestation. The need for
increase in the productivity of agricultural land and thus intensive cultivation through application of insecticides, pesticides, fertilizers, irrigation etc. has led to problems like eutrophication, contamination of soils, salination ( usurisation) of soils, pollution and depletion of groundwater etc.

3) **Population growth:** It leads to industrial expansion, agricultural development and urban growth. Increased demands lead to rapid exploitation of natural resources, which causes lowering of environmental quality and ecological imbalance.

4) **Industrial development:** Though it has given rise to economic prosperity it resulted in environmental degradation through undesirable outcomes such as industrial wastes, polluted water, toxic gases, ashes, scarification of land through mining etc.

5) **Increased urbanization:** Increased urbanization means phenomenal increase in the concentration of human population in limited space. It results in increasing buildings, roads and streets, sewage and storm drains, factories and industrial wastes, urban wastes etc. which causes environmental degradation.

6) **Modern Technology:** Modern technologies are more destructive than the earlier ones. They aim at accelerated rate of exploitation of natural resources and produce outputs to raise the material standards of human beings. However, such processes run counter to ecological pattern of productive growth. For example, application of fertilizers, pesticides and insecticides in agriculture. Use of nuclear technology, burning of fossil fuels etc.
Conservation Measures

1) The most important factor, which causes environmental degradation, is growth of population. So, one of the important steps to check environmental degradation would be to check the population growth.

2) Development of pollution free technologies.

3) Reduction in the exploitation of natural resources.

4) Large scale effort to replenish the depleted forests through afforestation and reforestation.

5) To limit the use of chemical fertilizers, pesticides and insecticides and to increase the use of organic fertilizers.

6) To limit the use of those items (like refrigerators, air conditioners etc.) which release ozone depleting gases like Chloro-fluro carbons (CFC).

7) To limit the use of hydrocarbons to reduce the release of greenhouse gases like (CO$_2$).

8) To heal degraded land caused by erosion.

9) To stop the use of nuclear weapons.

10) To educate people about environment.

The issue can be tackled by creating greater awareness about the ecological diversity and stability. There is also a need to realize the need for awareness about cooperation at international levels as these problems transcend the national boundaries and the current international efforts (Montreal Protocol, Kyoto Protocol etc.) dealing with climates change, the concept of sustainable development, etc.
Communalism

Concept of communalism: Communalism is an ideology which states that society is divided into religious communities whose interest differ and are, at times, even opposed to each other. The antagonism practiced by the people of one community against the people of other community and religion can be termed as ‘communalism’. This antagonism goes to the extent of falsely accusing, harming and deliberately insulting a particular community and may extend to looting, burning down the homes and shops of the helpless and the weak, dishonoring women, and even homicide.

The Genesis and Growth of Communalism in India

It is widely realized that communalism in India was born, nurtured and promoted by the British imperialism as a deliberate design to sow dissensions. It served the purpose of the colonial administration to divide and rule. Thus, the prevailing religious differences were first used to project the social and cultural variations and then to promote political divisions by treating Indians not as Indians but as members of different religious communities.

Growth of Communalism: Causes

Jawaharlal Nehru once described communalism as the Indian version of fascism. He said, while all communalism is bad, we must remember that minority communalism is born out of fear, while majority communalism takes the form of political reaction to assert dominance. But he added: ‘there could be no compromise on the issue of communalism, Hindu communalism or Muslim communalism, as it is a challenge to Indian nationhood and Indian nationalism.’
The main forces, which have encouraged the growth of communalism in contemporary India, are:

1) Economic backwardness of Muslims
2) Growth of communal parties and organisations
3) Electoral compulsions of political parties
4) Communal media, literature and text-books
5) Separatism and isolation among Muslims

**Anatomy of Communal Riots:** A probe into the major communal riots in the country during the last five decades reveals that:

i) Communal riots are more politically motivated than fuelled by religion.

ii) Besides political interests, economic interests also play a vital role in fermenting communal clashes.

iii) The probability of recurrence of communal riots in a town where communal riots have already taken place once or twice is stronger than in a town when such riots have never occurred.

iv) Most communal riots take place on the occasion of religious festivals.

v) The use of deadly weapons in the riots is on the ascendancy.

**Prescriptive measures to deal with Communalism:**

Measures to meet the challenge of communalism and communal violence can be of two types: *long-term* and *short-term.*
The long-term measures are:

1) In initiating the process of de-communalising the people at all levels, say, by bringing home to them that communal assumptions are false, by explaining to them the socio-economic and political roots of communalism.

2) Communalisation of the state and of the political elite has to be checked because it leads to inaction against communal violence and covert or overt political and ideological support to communalism by the state apparatus.

3) The communalisation of civil society also needs to be checked because it leads to riots that are more communal. People with communal ideas and ideologies pressurize the government to act in a manner, which is always against the principles of secularism.

4) The role of education, particularly emphasizing on value oriented education both in schools and colleges is important in preventing communal feelings.

5) The media can also prove to be significant in preventing communal feelings. Communal press can be banned and legal action can be taken against communal writers.

Some immediate measures are imperative for containing communalism and communal riots:

1) Peace committees can be set up in which individuals belonging to different religious communities can work together to spread goodwill and fellow feelings and remove feelings of fear and hatred in the riot affected areas.
2) The state has to plan and use new strategies in dealing with communal violence. Whenever strong and secular administrators have used or threatened the use of strong steps, riots either did not occur or were of short duration.

3) The role of media is immensely highlighted during the course of communal violence. The fear and hatred can be checked if the press, radio and TV report the events in a way conducive to soothing the frayed nerves of people instead of inflaming the temper further.

4) Lastly, the government in power has to treat the extremist communal outfits as its immediate targets and cripple their capacity to disrupt law and order. The secessionists in Kashmir, the militants in Punjab, the ISS now banned in Kerala and other extremist organisations of Hindu, Muslim and Sikh communalism have to be dealt with by the state through its law and order machinery.

The small insecure communities always look to government or move towards communal parties for protection. The Pundits in Kashmir, the innocent victims of communal riots in Mumbai, Uttar Pradesh, Gujarat and other states, and the sufferers of violence of extremists in Bihar, Assam, look towards the secular state of India for the security of life and property.

**Youth Unrest**

Youth unrest may be defined as the “manifestation of collective frustration of the youth in the society.” It is manifested when the existing norms in the society are perceived by the youth as ineffective or harmful to the extent that they feel so disillusioned and disgusted about them and recognize the need for changing these norms.
Characteristics of Youth Unrest

On the basis of the above definition, it may be said that youth unrest is characterized by

i) Collective discontent,

ii) Dysfunctional conditions,

iii) Public concerns, and

iv) The need for change in the existing norms.

Youth Agitations: Youth agitation is the behaviour of the youth whose goal is social protest. Its aim is neither to injure a person nor cause destruction of public property. Various forms of youth agitations are: demonstrations, slogan shouting, strikes, hunger strikes, road blocks, gheraos, and boycott of examinations. The preconditions of youth agitations are:

i) Structural strain,

ii) Identifying the source of strain,

iii) Precipitating factor in initiative action, and

iv) Mobilization of force for action by a leader.

The important functions of youth agitations are:

a) To create collective consciousness and group solidarity,

b) To organise the youth to work for new programmes and new plans, and

c) To provide opportunities to young individuals to express their feelings and make some impact on the course of social change.
Students’ agitations form an important dimension of youth agitation – Students’ agitations may be classified as:

i) Student-oriented agitations, and

ii) Society-oriented agitations.

The former include agitations pertaining to problems at college/university level and at national level while the latter refer to students’ interest in state/country’s politics and programmes. Student oriented agitations are generally discontinuous and problem-oriented rather than value-oriented.

**Process of Growth of Agitation due to Youth Unrest**

Many youth agitations follow a life-cycle, which comprises the following stages:

i) The discontent stage, which is the stage of dissatisfaction and growing confusion with the existing conditions;

ii) The initiation stage, in which a leader emerges, the causes of discontent are identified, excitement increases and proposals for action are debated;

iii) The formalization stage, in which programmes are developed, alliances are forged, and support is sought from outside actors;

iv) The public support stage, in which youth trouble is transferred into public trouble. This not only creates awareness among public but also seeks public support on the concerned issue.

The youth fail to get the public support where:

a) The claim is too vague,
b) The issue is not powerful enough to gain attention

c) The issue is incorrectly focused

d) Ineffective strategies are adopted by the youth for pressing claims, and

e) Opposition from other interest groups.

v) Official action stage in which the agencies in power realize the importance of the issue, officially acknowledge the discontent, and agree to adopt strategies to solve the issue.

**Causes of Youth Unrest and Agitation**

The UGC Committee of 1960 pointed out the following reasons for student agitations:

1) Economic causes, like demands for reducing fees, increasing scholarship.

2) Demands for changes in existing norms pertaining to admissions, examinations, and teaching.

3) Poor functioning of colleges/universities with non purchase of chemicals and instruments for laboratories, or books and journals for libraries.

4) Conflicting relations between students and teachers (teachers being accused of frequently cutting classes and remaining non committed to teaching).

5) Inadequate facilities in the campus, like inadequate hostel accommodation, poor food in hostels, lack of canteens and poor drinking water facilities and
6) Leaders being instigated by politicians.

**Controlling Youth Agitations**

The adult world has to accept the fact that youth problems cannot be solved for them but with them. Therefore, cooperation of students/youths needs to be sought by parents, teachers and administrators. Youth/students, parents, teachers and educational administrators, politicians and political parties should cooperate in understanding problems/griveances of the youth and in giving them logical guidelines.

It is high time that the vast youth power, which hitherto has been neglected and ignored, is harnessed for development, achievement of social justice and national goals.

**Corruption**

Corruption in simple terms may be described as “an act of bribery”. It has also been described as “the use of public power for private gain in a way that constitutes a breach of law or a deviation from the norms of society”.

Corruption is present in the society in several forms. Of these the major ones are: bribery (money offered in cash or kind or gift as inducement to procure illegal or dishonest action in favour of the giver), nepotism (undue favour from holder of patronage to relatives), misappropriation (using others money for one’s own use), patronage (wrong support/encouragement given by patron and thus misusing the position), and favouritism (unduly preferring one to other).

*The Preparatory Committee for Alternative Economic Policies* has done some research in the kickbacks. It estimated that the kickbacks shot up from Rs. 3,036 crores in 1980-81 to an astounding Rs. 19,414 crores.
in 1990-91, i.e. the amount involved increased by more than six times in one decade.

The registered number of cases of corruption in India under the Prevention of Corruption Act, 1947 varied from 300 to 500 between 1981 and 1987. However, after the enforcement of 1988 Act, the number now varies between 1,800 and 2000 per year. The number of corruption cases registered in 1988 were 1,295, in 1993 it was 1,895 and in 1994 it went up to 1,911. Of the total registered cases, 70 to 75 percent were chargesheeted. About 2, 104 new cases were already pending in courts. Out of 1,423 persons tried in 1994, only 13.9 percent were convicted. These figures give a picture of the situation of corruption in the country and how the situation is dealt with.

**Causes of Corruption**

A number of factors have been pointed out as causing corruption.

a) The emergence of political elite who believe in interest-oriented rather than nation-oriented programmes and policies.

b) Recent scandals have been in areas where either purchase policies or prices are controlled by the government.

c) Corruption is caused by scarcity of goods.

d) Corruption is caused as well as increased because of the change in the value system and ethics of men who administer.

e) Corruption can be traced to ineffective administration. Lack of vigilance, enormous powers to the bureaucracy, lack of accountability, defective
information system, etc. These conditions give scope to officials not only to become corrupt but remains unaffected even after following corrupt practices.

**Impact of Corruption**

It is important to recognize that corruption has affected our society in several ways:

1) It has retarded economic development of the country.

2) It has created violence and lawlessness in the society since the corrupt have the money power to influence the executor of law to serve him.

3) It has resulted in the deterioration of morals and destroyed the individual character.

4) It has increased inefficiency, nepotism, and lethargy and has created indiscipline in all fields of administration.

5) It has increased black money in the country.

6) It has led to adulteration of eatables, spurious drugs and shortage of many consumer items.

**The Legislation**

The Prevention of Corruption Act came into force in September 1988. It consolidated the provisions of the Prevention of Corruption Act, 1947, some sections of the Indian Penal Code, the Criminal Procedure Code, and the Criminal Law Act, 1952. The sole idea was to bring all relevant provisions under a single Act. Further the 1988 Act enlarged the scope of the term ‘public servant’ and included a large number of employees within its ambit.
Measures Taken to Contain Corruption

The Government of India appointed a committee on Prevention of Corruption in 1960 under the chairmanship of K. Santhanam. The recommendations covered various aspects of corruption. It was on the basis of the recommendations of this committee that the Central Vigilance Commission was set up in 1964 for looking into the cases of corruption against the Central Government and other employees.

The Central Government has set up the following four departments as anti-corruption measures:

i) Administrative Vigilance Division (AVD) in the Department of Personnel and Training,

ii) Central Bureau of Investigation (CBI),

iii) Domestic vigilance units in the Ministries/departments/public undertakings/nationalized banks, and

iv) Central Vigilance Commission.

Yet other effective method of containing corruption could be to introduce a method which will enable political parties to secure electoral funds in a bonafide manner, or the central government to finance elections through an election fund. This system is being followed in Germany, Norway and Sweden and in some advanced countries of Europe.

Migration and Displacement

According to the Demographic Dictionary, “migration is a form of geographical mobility or spatial mobility between one geographical unit and another, generally involving a change in residence from the place of origin or place of departure to the place of destination or place
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of arrival.” Such migration is called permanent migration, and should be distinguished from other forms of movement, which do not involve a permanent change of residence.

**Forms of Migration**

Internal Migration refers to migration from one place to another within a country, while external migration or international migration refers to migration from one country to another.

In India, the migrants are classified into four streams, namely,

a) rural to rural,

b) rural to urban,

c) urban to urban, and

d) Urban to rural.

Another typology based on time classifies migration into long-range migration and short or seasonal migration. Apart from these two important types, migration could be voluntary or involuntary or forced, brain drain (migration of young skilled persons) and migration of refugees and displaced persons.

**Characteristics**

An important characteristic is the age selectivity of the migrants. Most migration studies, have found that rural-urban migrants are predominantly young adults and relatively better educated than those who remain at their place of origin.

Another important characteristic is that the migrants have a tendency to move to those places where they have contacts and where the previous migrants serve
as link for the new migrants. In some cases, the migrants not only tend to have the same destination but also tend to have the same occupation. For example, research reveals that in certain hotels in Jaipur almost all the workers belong to one particular sub-region of Kumaon. The agricultural labourers in Punjab and Haryana are mainly from Eastern Uttar Pradesh.

**Reasons for Migration**

The important factors, which cause migration, may broadly be classified into four categories: economic factors, demographic factors, socio-cultural factors, and political factors.

**Economic**

The major reason for voluntary migration is economic. In most of the developing countries low agricultural income, agricultural unemployment and underemployment are the major factors pushing the migrants towards areas with greater job opportunities. Even the pressure of population resulting in a high man-land ratio is widely recognized as one of the important causes of poverty and rural-urban migration. The most important economic factors that motivate migration may be termed as “push factors” and “pull factors”.

a) **Push Factors:** An ILO study reveals that the main push factor causing the worker to leave agriculture is the lower levels of income. The non-availability of alternativesources of income in the rural area is also another factor for migration. Even sub-division of land holdings leads to migration.

b) **Pull Factors:** These refer to those factors which attract the migrants to an area, such as, opportunities for better employment, higher wages, better working conditions and better amenities of
life, etc. In recent years, the high rate of movement of people from India as well as from other developing countries to the USA, Canada and now to the Middle-East is due to the better employment opportunities, and possibility of attaining higher standards of living.

**Push Back Factors:** In India, another important factor which plays a crucial role on migration is 'push- back factor'. In India, according to Asish Bose, the urban labour force is sizeable, and the urban unemployment rates are high. There also exist pools of underemployed persons. All these factors act in combination as deterrents to the fresh flow of migration from the rural to urban areas. He calls this as a “push back factor”.

**Socio-Cultural and Political Factors**

In addition to these push and pull factors, social and cultural factors also play an important role in migration. Improved communication facilities, such as, transportation, impact of radio and television, cinema, urban-oriented education and resultant change in attitudes and values promote migration. Sometimes family conflicts also cause migration.

Infact, even political factors also may encourage or discourage migration. For instance, in our country, the adoption of jobs for “sons of the soil policy” by the State government will certainly affect migration from other states.

**Consequences of Migration:** The consequences of migration are diverse. They are:

1) **Economic:** Migration from a region characterized by labour surplus helps to increase the average productivity of labour in that region, as this encourages labour saving devices and/or greater
work participation by the remaining family workers. On the other hand, there is a view that migration negatively affects the emigration region i.e., the region from where people move out, and favours the immigrating region, i.e., the region to where people go. Similarly it was argued that migration would widen the development disparity between the regions, in view of the drain of the resourceful persons from the relatively underdeveloped region to the more developed region. However, the labour sending regions may gain economically by the money brought in by the emigrants.

2) **Demographic:** Migration has a direct impact on age, sex and occupational composition of the sending and receiving regions. Migration of the unmarried males of young working age results in imbalances in sex ratio. This tends to reduce the birth rate in the rural areas.

3) **Social and psychological:** Urban life usually brings about certain social changes in the migrants. Those migrants who return occasionally or remain in direct contact with the households of their origin are also likely to transmit some new ideas back to the areas of origin.

On the other hand, migration, which results in the absence of the adult males for long periods, may cause dislocation of the family. Under such circumstances, women and children often have to take over more and different types of work and other more important roles in household decision-making. Studies have revealed very disturbing effects of the male migration from Kerala. Neurosis, hysteria and depression are said to be on the increase among the emigrant workers’ wives in Kerala.
Conclusion

In this chapter we learned about many social problems. Broadly, we saw that social problems are caused due to social, cultural, economic, political, legal and ecological factors. We also saw that not just government but other civil society institutions are also playing an important part in containing these problems.

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Contemporary Social Problems-II

Introduction

Social problem is any undesirable condition or situation that is judged by a majority of the people within a community to be intolerable and to require group action towards constructive reform. Examples are juvenile delinquency, drug addiction, crime, prostitution, divorce, chronic unemployment, poverty, and mental illness.

These social problems vary with social class. A social class is a large category of people within a system of social stratification who have a similar socio-economic status in relation to other segments of their community or society. A social class is not organised, but the individuals and families who compose it are relatively similar in educational, economic, and social status. Those who are classified as part of the same social class have similar life chances. Some sociologists regard social classes as being primarily economic in nature, whereas others tend to stress factors such as prestige, style of life, attitudes, identification, etc.

To refer to any condition in the society such as crime, or alcoholism; the term used was social pathology. However, it has become obsolete today. Pathology implies a biological analogy in which society is conceived as an organism that can become either sick or healthy. It has been largely replaced by such terms as social

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disorganisation and social problems, which are not associated with the organic model of society.

When the social control in society weakens, the social class faces the social problems. Social control is any social or cultural means by which systematic and relatively consistent restraints are imposed upon individual behaviour, to which people are motivated to adhere.

This is a direct fall out of failure of conformistic behaviour in a society. Conformity is behaviour that is in accord with the expectations of a social group. It reflects acquiescence to the roles or social norms and is expressed in responses that are either similar to those of others or prescribed by group customs or norms. “Conformity may be defined as the endeavour to conform to a standard set by a group.

It is a voluntary imitation of the prevalent modes of actions, distinguished from rivalry and other aggressive phases of emulation by being comparatively passive, aiming to keep up rather than to excel, and concerning itself for the most part with what is outward and formal”, (Cooley, 1904). The term, “usually denotes conformity to the norms and expectations current in the individual’s own membership group..... Conformity to norms of an outgroup is thus equivalent to what is ordinarily called non-conformity, that is, non-conformity to the norms of the ingroup”, (Merton, 1957).

Suicide

One of the major social problems is suicide. The long hot summer of the millennium year 2000 saw an unusual spurt in suicides in different parts of India. It was scarcely even noticed that, since the near mass suicide of farmers in 1997-98, there has been a marked
increase in suicides and suicide attempts. National Crime Records Bureau data, despite the under-reporting of numbers and causes, shows nearly one-lakh suicides a year.

Besides the overall number of victims, their geographical spread, class background, income group, economic status, occupational antecedents, age group, family situation, etc., all indicate that suicides are no longer mere episodic occurrences, but have assumed a near-systemic character. The near exclusive concentration of suicides amongst the poorest strata of society underlines the deep socio-economic roots of suicide. Meanwhile, the judiciary is slowly shifting its stand on treating suicide as an offence.

Ever since the famous study on suicides by the renowned sociologist E. Durkheim, social science has evolved ways of understanding and tackling the set of circumstances, processes, and structures, which lead people to take their own lives. However, what is sadly lacking is a comparable response in the form of social policy by the state and social action by civil society.

Suicide is death resulting either from a deliberate act of self-destruction or from inaction when it is known that inaction will have fatal consequences. There are many types of suicides.

Even without a comprehensive profile on suicides, both at the micro and macro levels, the known facts about the last few years appear to be significant pointers to a heightened multi-dimensional social crisis in India. Most of the causes listed in the official statistics — poverty, unemployment, a sudden and unacceptable downturn in economic fortune, an unbearable, debt burden and the consequent socio-economic and psychological pressures, dowry disputes, illness and failure in examinations, etc. relate to social conditions.
At least, some of these maladies rarely afflict the well to do. In this sense of the various categories of suicide identified by Durkheim, the most relevant for present-day India is anomic suicide (as against egotistic and altruistic suicide).

**Altruistic suicide:** is one of the three types of suicide described by Emile Durkheim. Altruistic suicide is a type of suicide in which an individual who is very closely integrated into a group or society kills himself for the welfare of the group. Altruistic suicide is motivated by a desire to serve the needs of the group. It is suicide based on self-sacrifice and tends to occur in social systems that de-emphasise the importance of the individual. The Japanese hara-kiri is a way to destroy oneself rather than disgrace one’s family or group.

**Anomic suicide:** This type of suicide results from normlessness or social and personal disorganisation. The value system of the group no longer has meaning for the individual, and he/she feels isolated, lonely, and confused. Any disruption of a way of life may lead to this type of suicide. For a rich person suddenly to become poor — or a poor person suddenly to become rich — might lead to a catastrophic breakdown in the established normative integration of the individual’s personality. Anomic suicide then, is a result of not being properly integrated into a system of cultural values, and thus feeling isolated and regarding the social norms as meaningless. The incidence of anomic suicide would presumably be greater in societies that experience a high rate of social change, with a rapid disintegration of traditional social expectations. It would also tend to be higher among certain categories of individuals, such as the divorced or unmarried.

**Egoistic suicide:** Suicide that is due to the existence of strong social norms for which the individual is made
to feel personally responsible thus resulting in an overwhelming burden on the individual. The group itself is not strong enough to provide the individual with a sufficient source of support and strength outside himself. Neither is he sufficiently integrated to be able to mitigate his individual feeling of responsibility and guilt for moral weaknesses and failure. Egoistic suicide is due to a strong value system, weak group integration, and an overpowering sense of personal responsibility.

**Substance Abuse**

Drug addiction can be defined as: a “state of periodic or chronic intoxication, detrimental to the individual and the society, produced by repeated consumption of drugs (natural or synthetic).

Its characteristics include:

1) An overpowering desire or need (compulsion) to continue taking the drug and to obtain it by any means;

2) A tendency to increase the dose;

3) A psychic (psychological) and sometimes, a physical dependence on the effects of the drug.” (United Nations Expert Committee on Drugs Liable to Produce Addiction, World Health Organisation report 21, Geneva, 1950.)

India has about 3 million (about 0.3 per cent of total population) estimated victims of different kinds of drug usage, excluding alcohol dependents. Such population comes from diverse socio-economic, cultural, religious and linguistic backgrounds.

India is the biggest supplier of illicit demand for opium required primarily for medicinal purposes. Besides this,
India is located close to the major poppy growing areas of the world, with “Golden Crescent” on the Northwest and “Golden Triangle” on the North-East. These two regions make India vulnerable to drug abuse particularly in poppy growing areas and along the transit routes.

Over the years, drug addiction is becoming an area of concern as traditional moorings, social taboos, emphasis on self-restraint and control of the joint family and community are eroding.

The processes of industrialization and urbanization have led to the loosening of the traditional modes of social control thus rendering an individual vulnerable to the stresses and strains of modern life. The fast changing social milieu, among other factors, is mainly contributing to the spread of drug abuse, both of traditional and of new psychoactive substances.

The introduction of synthetic drugs and intravenous drug use leading to HIV/AIDS has added a new dimension to the problem, especially in the North-East states of the country.

Various surveys indicate a high concentration of drug addiction in certain social strata and high-risk groups, such as, commercial sex workers, transport workers, and street children and in the north-eastern states/border areas and opium growing regions of the country.

The situation in north-east states has been a matter of concern due to high incidence of Intravenous Drug Use (IDU), especially in the state of Manipur, leading to HIV/AIDS. The sero-positivity amongst them is about 70%.

**Constitutional and Legal Framework**

Article 47 of the Constitution of India directs the State to regard the raising of the level of nutrition and the
standard of living of its people and the improvement of public health as among its primary duties, and, in particular, to endeavour to bring about prohibition of consumption, except for medicinal purposes, of intoxicating drinks and drugs which are injurious to health.

Section 71 of the Narcotic Drugs and Psychotropic Substances Act, 1985 (as amended) provides as under:

“The Government to establish centres for identification, treatment, etc., of addicts and for supply of narcotic drugs and psychotropic substances:

1) The Government may, in its discretion, establish as many centres as it thinks fit for identification, treatment, education, after-care, rehabilitation, social re-integration of addicts ............

2) The Government may make rules consistent with this Act providing for the establishment, appointment, maintenance, management and superintendence of ........... the centres referred to in sub-section (1) and for the appointment, training, powers, duties and persons employed in such centres.”

The issues relating to drugs are tackled by the Government of India through its two-pronged strategy viz. supply reduction and demand reduction. Whereas the supply reduction is under the purview of the enforcement agencies with the Department of Revenue as the nodal agency, the demand reduction strategy comes under the domain of social sector and the Ministry of Social Justice & Empowerment, Government of India.

With this there arose the need for implementing strategies for prevention of drug abuse, educating the
people about its ill effects and rehabilitation of the addicts. The recent UN documents have also stated Demand Reduction as the pillar of drug control strategies and have urged upon all the Member States to take immediate steps so as to make significant achievement by the end of year 2003 in controlling the demand for consumption of illicit drugs.

The findings of studies also indicate to the relationship between drug abuse and the socio-economic conditions or the social dynamics of the population. Therefore, there is a need to recognize drug abuse as a psychosocio medical problem, which can be best, addressed through community based interventions.

Keeping this in view, the Govt. of India has a three-pronged strategy for demand reduction consisting of:

i) Building awareness and educating people about the ill effects of drug abuse.

ii) Dealing with the addicts through programme of motivational counselling, treatment, follow-up and social-reintegration.

iii) To impart drug abuse prevention/rehabilitation training to volunteers with a view to develop an educated cadre of service providers.

Thus, the overall objective of the strategy is to empower the society and the community to deal with the problem of drug abuse.

The Government has established a National Centre for Drug Abuse Prevention (NC-DAP) under the aegis of the National Institute of Social Defence, New Delhi, to serve as the apex body in the country in the field of training, research and documentation relating to drug abuse prevention.
While all round efforts are being made for prevention and containment of drug abuse in our society, much needs to be done to achieve a satisfactory impact. The causes of problem are transnational and drug abuse prevention shall require Herculean efforts on the part of all the institutions. The empowerment of society through sensitization and awareness appears to be the only solution to strengthen the efforts of enforcement agencies in containing the proliferation of drug trafficking and drug abuse.

**Adult Crime**

Crime is:

1) any behaviour that violates the criminal law.

2) any behaviour that violate legal sections (criminal, civil, military) which prescribe punitive action against offenders.

3) any behaviour contrary to the group’s moral codes for which there are formalised group sanctions whether or not there are laws.

4) any antisocial behaviour that is harmful to individuals or groups.

**Organised crime:** Crime committed by members of an organisation devoted to activities that are in violation of the law. Criminal organisations such as mafia, criminal syndicates, have a division of labour with certain roles filled by skilled specialists, hierarchy of status and authority, their own system of norms, and strict organisational loyalty and discipline. These organisations also often develop informal arrangements with members of the local police and sometimes with certain influential community leaders.
**White-collar crime:** Edwin, M. Sutherland first introduced the term White-collar crime which is defined as a "crime committed by a person of respectability and high social status in the course of the discharge of his/her official responsibilities. Consequently, it excludes many crimes of the upper class, such as cases of murder, adultery, and intoxication, since these are not customarily a part of their occupational responsibilities. Also, it excludes the confidence games of the wealthy, and the members of the underworld, since they are not persons of respectability and high social status.” Examples of white-collar crime include embezzlement, fraud, graft, legal combination in restraint of trade, misrepresentation in advertising, infringement of patents, adulteration of food and drugs, fee-splitting by doctors, and bribery.

Though the social and economical damage of the white-collar crime is greater, these crimes usually are less severely punished than the more conventional crimes, which are more likely to be committed by members of the lower classes. There is less public resentment against white-collar crime as compared to other types of crime.

A criminal is:

1) a person who is convicted of violating a criminal law, one who is convicted of a felony.

2) a person who commits an antisocial act whether or not he/she is convicted of committing a crime. This definition would include any person who violates the mores or behaves in anyway that is injurious to the society or to other individuals. It would include persons whose violations of the law are not discovered, as well as those whose antisocial acts are not illegal.
3) Because of the varied meanings associated with the term ‘criminal’ instead of attempting at a general definition, scholars focused on types of criminals, such as professional criminals, white-collar criminals, those in organised crime, and so forth. It was felt that by emphasising on the study of careers would give types of criminal more sociological and less legal orientation to the study of crime.

**Legalistic criminal:** An individual who violates the law unintentionally either because of ignorance, as in the case of a feeble minded person, or because the law is so confusing that it is virtually impossible to obey.

**Professional criminal:** A career criminal who is highly trained for work. He/she often has a philosophy of crime and takes pride in his/her work. Forgery, burglary, counterfeiting, and confidence games are some of the careers pursued by professional criminals. For example professional thief.

**Psychopathic criminal:** A person who commits a crime because he/she is psychologically unable to control his/her behaviour. Psychopathic criminals are psychotics whose psychoses result in illegal acts. They include the kleptomaniacs, pyromaniacs and sexual psychopaths.

**Situational criminal:** The person who commits a crime because of the overwhelming pressures of an unusual situation in which he finds himself. Criminal behaviour is contrary to his normal life pattern, and it is unlikely that he would commit a crime again.

**Juvenile Delinquency**

A violation of law or ordinance by individual below the legal age of the community is termed Juvenile
delinquency. It is essentially a legal concept. It does not include all acts of misbehaviour or even serious misbehaviour by children or youth, but only those acts that violate the law. Adults are considered more responsible for their actions than are children or adolescents, and such juvenile delinquent behaviour when performed by an adult is considered a criminal behaviour.

However, there are situations in which juveniles are legally restricted whereas adults are free (for example, buying liquor). The legal age dividing juvenile delinquency from adult crime is 18 years. Generally the punishment for delinquent behaviour is influenced by the attitudes of the local community and the degree of general tolerance for adolescent misbehaviour.

**Juvenile Justice**

The Juvenile Justice Act 2000, (JJA) is the primary law for children in need of care and protection. The JJA is designed for the care, protection, development, and rehabilitation of neglected and delinquent juveniles, as well as for the adjudication of and disposition of certain matters related to them.

The programme for Juvenile Justice include:

- To provide for full coverage of services envisaged under the Juvenile Justice Act, 1986 so as to ensure that no child under any circumstances is lodged in prison;
- To bring about qualitative improvement in the juvenile justice services;
- To promote voluntary action for the prevention of juvenile social maladjustment and rehabilitation of socially maladjusted juveniles;
To develop infrastructure for an optimum use of community based welfare agencies.

**Amendment of Juvenile Justice Act**

JJ Act 1986 is amended for bringing the same in conformity with UN Convention on the Rights of the Child (CRC) and other International Conventions/Agreements.

An attempt is made to clearly define the differential approach provided to children in conflict with law and to those in need of care and protection under the existing Act. It is proposed to provide for effective provisions for various alternatives for rehabilitation and social reintegration such as adoption, foster care, sponsorship and aftercare of abandoned, destitute, neglected and delinquent juveniles/children. The new legislation integrating these provisions was adopted recently as the Juvenile Justice (care and protection of children) Act 2000.

**Minorities**

Minorities are any recognisable racial, religious, or ethnic group in a community that suffers some disadvantage due to prejudice or discrimination. This term, as commonly used, is not a technical term, and indeed it is often used to refer to categories of people rather than groups, and sometimes to majorities rather than minorities. For example, though women are neither a group nor a minority, some writers call them a minority group, because in a male oriented society women are discriminated against which in many ways bears similarity to the discrimination suffered by minorities.

On the other hand, a group that is in a privileged status or is not discriminated against, even if it is a numerical
minority, would rarely be called a minority group. Thus, as the term is often used, so long as it refers to a category of people who can be identified by a sizeable segment of the population as objects for prejudice or discrimination.

Five religious minorities namely Muslims, Christians, Sikhs, Jains, Buddhists and Zoroastrians (Parsis) have been notified as minorities as per the provisions of the National Commission of Minorities Act of 1992. These six communities constitute about 18 percent of the country’s population.

**Constitutional Safeguards for Minorities**

Under the Constitution of India, certain safeguards have been provided to the religious and linguistic minorities. Some of the important provisions are:

1) The right to conserve language, script and culture under article 29

2) The right to establish and administer educational institutions under article 30;

3) Article 347 provides for presidential direction for recognition of language;

4) The right to submit representations for redressal of grievances to any authority in the government in any of the languages used in the States/Union Territories under article 350.

5) Article 350 A provides for facilities for instruction through the mother tongue at the primary education level, and

6) Article 350-B provides for a special officer to investigate all matters relating to the safeguards provided for linguistic minorities under the Constitution.
Welfare of Minorities

The 15-Point Programme for welfare of minorities was launched in May 1983. The Programme is in the nature of guidelines to the States/UTs and aims at giving a sense of security and for ensuring rapid socio-economic development of minority communities.

The 15-Point Programme is based on a 3-pronged approach, namely, (i) to tackle the situation arising out of communal riots, (ii) ensuring adequate representation of the minority communities in employment under the Central and State Governments as well as Public Sector Undertakings and (iii) other measures, such as, ensuring flow of benefits to the minority communities under various development programmes, maintenance and development of religious places, Wakf properties and redressal of grievances of the minorities.

The State Governments/UTs and the concerned Ministries/Departments of Govt. of India implement the programme and send half yearly reports to the Ministry of Social Justice & Empowerment, which is monitoring the progress of implementation of the 15-Point Programme at the National level. The Ministry obtains reports in respect of points 1 to 8 from the Ministry of Home Affairs, half-yearly reports in respect of points 11 to 14 are obtained from the State Governments/Departments.

The information received from concerned agencies is compiled, analyzed, reviewed and the deficiencies noticed in the implementation of the programme are brought to the notice of the authorities concerned for remedial action. At the State level, the progress under the programme is monitored at the level of Chief Minister/Chief Secretary. At the District level Deputy
Commissioner/District Magistrate monitors the programme.

**National Commission for Minorities**

The National Commission for Minorities has been reconstituted in February 2003 for a period of three years. The Commission has been set up to perform a number of functions for the effective implementation of safeguards provided under the Constitution for the protection of the interests of the minorities and to make recommendations in this regard to the Central Government or State Government, as the case may be.

The Commission receives approximately 3000 complaints/representations a year. The police, service matters, disputes relating to religious places and complaints relating to Minority Educational Institutions broadly come under the complaints received. After taking cognizance of the complaints, reports are called for from the concerned authorities. On receipt of the reports, the Commission makes appropriate recommendations to the concerned authorities. The Chairman, Vice Chairman, and Members of the Commission undertake visits to States/UTs during the period to review the problems relating to Minorities.

The Commission has also constituted a Minority Education Cell to exclusively look after the problems faced by the minority educational institutions concerning recognition, affiliation, grant-in-aid, etc.

**Commissioner for Linguistic Minorities**

The Office of the Special Officer for Linguistic Minorities (commonly known as the Commissioner for Linguistic Minorities) was created in July 1957, in pursuance of the provision of Article 350-B of the Constitution.
The Commissioner for Linguistic Minorities (CLM) in India has his/her Headquarters at Allahabad with three Regional Offices at Kolkata, Belguam, and Chennai. The CLM takes up all the matters pertaining to the grievances arising out of the non-implementation of the Constitutional and Nationally Agreed Scheme of Safeguards provided to linguistic minorities. These grievances may be brought to its notice by the linguistic minority individuals, groups, association or organisations, at the highest political and administrative levels of the State Governments and UT Administrations. On receipt of the reports, the CLM recommends remedial actions to be taken.

The Commissioner for Linguistic Minorities in India submits Annual Reports, which are sent to the concerned Ministries/Departments of the Central Government and the Governments of various States/UTs for follow-up action after placing them in Parliament. The CLM has so far submitted 38 Annual Reports.

**Backward Classes**

The Constitution of India prescribes protection and safeguards for Scheduled Castes and Scheduled Tribes and Other Backward Classes with the object of removing their social disabilities and promoting their varied interests. The main safeguards are: abolition of untouchability, protection from social injustice and various other forms of exploitation, throwing open religious institutions of public character to all sections of the population, removal of restrictions on access to shops, restaurants, wells, tanks, and roads, giving them the right to move freely and acquire property, giving them the right of admission to educational institutions and receiving grants out of state funds, permitting the State to make reservations for them in services, giving
them special representation in the Lok Sabha and the State Vidhan Sabhas, setting up separate departments and advisory councils to promote their welfare and safeguard their interests, prohibition of forced labour, and making special provision for the administration and control of the scheduled areas. The machinery for safeguarding the interests of OBCs, SCs and STs was created in the form of setting up separate commissions for them.

**Other Backward Classes**

The Backward Classes are those castes/communities that are notified as socially and educationally Backward Classes by the State Governments or those that may be notified as such by the Central Government from time to time.

Till 1985, the Backward Classes Cell (BCC) in the Ministry of Home Affairs used to look after the affairs of Backward Classes. With the creation of a separate Ministry of Welfare in 1985, (later renamed as Ministry of Social Justice and Empowerment w.e.f. 25.5.1998), the matters relating to Scheduled Castes, Scheduled Tribes, Other Backward Classes (OBCs) and Minorities were transferred to the new Ministry.

The Backward Classes Division in the Ministry looks after the policy, planning, and implementation of programmes relating to social and economic empowerment of OBCs. It also looks after matters relating to two institutions set up for the welfare of OBCs: National Backward Classes Finance and Development Corporation (NBCFDC) and the National Commission for Backward Classes (NCBC).
National Commission for Backward Classes (NCBC)

The National Commission for Backward Classes (NCBC) Act, 1993 was enacted on the direction of the Supreme Court to set up a permanent body for entertaining, examining and recommending requests for inclusion and complaints of over-inclusion and under-inclusion in the central lists of Other Backward Classes (OBCs) of citizens for the purpose of making reservation in civil posts and services under Government of India.

Composition of the Commission

The Commission consists of a Chairperson who is or has been a Judge of the Supreme Court or of a High Court, a social scientist, two persons who have special knowledge in matters relating to backward classes, and a Member-Secretary who is or has been an officer of the Central Government in the rank of a Secretary to the Government of India. Every Member holds office for a term of 3 years from the date he assumes office.

Advices of the Commission

The Commission is mandated to ‘examine requests for inclusion of any class of citizens as a backward class in the list and hear complaints of over-inclusion and under-inclusion of any backward class in such lists and to tender such advice to the Central Government as deemed appropriate’ under Section 9(1) of the NCBC Act, 1993. The advice of the Commission is ordinarily binding upon the Central Government under Section 9(2) of the Act.

Since the inception of the Commission, the Central Government has received 811 advices from the Commission for inclusion or amendment of castes/communities in the Central lists of OBCs as well as for rejection of claims of certain castes/communities for
inclusion in these lists. The Government has accepted 338 advices for inclusion of castes/communities in the Central lists and notified them. Fifty one advices for inclusion have recently been approved by the Cabinet and were notified on 21 September 2000. The Government has also agreed to 415 advices pertaining to rejection of claims for inclusion in the lists. Seven advices are under process.

**Scheduled Castes and Scheduled Tribes**

The SCs comprised 16.3 percent of the country’s total population. The highest numbers of SCs are found in Uttar Pradesh. About 84 percent of the SCs live in rural areas and are working as agricultural labourers, sharecroppers, tenants and marginal farmers. Most of them are engaged in jobs like sweeping, scavenging and tanning. About two-thirds of the bonded labourers are scheduled castes. Literacy among scheduled caste people is extremely low. Most of them live below the poverty line and are the victims of social and economic exploitation.

In practice, Scheduled Caste people continue to be subjected to discrimination, harassment, and humiliation. Various reports every year reflect an increase in the number of crimes committed against the scheduled castes. Many SC women are the victims of rape by the upper caste men. The SC men on the other hand are exploited by upper caste by usurping their lands, giving them low wages, using them as bonded labourers, and so on.

The STs comprised 8.08 percent of the country’s total population. At present, India has the second largest tribal population in the world, next only to Africa. The tribes in India are spread over the length and breadth of the country. They vary in strength from a few
hundreds to several lakhs. The highest number of tribal population is found in Madhya Pradesh and Chattisgarh. Some of the main problems of the tribals are poverty, indebtedness, illiteracy, bondage, exploitation, malnutrition, and unemployment.

**National Commission for Scheduled Castes and Scheduled Tribes**

The need for providing adequate safeguards for the Scheduled Castes and Scheduled Tribes was recognized by the framers of the Indian Constitution. For this purpose, special provisions were made in the Constitution of India to promote social, educational, economic, and service interests of these two weaker sections of the society.

The Constitution of India also provided for appointment of a Special Officer under Article 338 for investigation of all matters relating to the safeguards provided for the Scheduled Castes and Scheduled Tribes and to submit reports to the President, annually and at such other times, as the Commission may deem fit, about working of these safeguards.

In order to oversee the implementation of various safeguards provided for SCs & STs, a Multi-Member Commission, known as the Commission for SCs & STs, came into being w.e.f. 21.7.78. This Commission was renamed as the National Commission for SCs & STs w.e.f. 1.9.87, to act as a National level Advisory Body in matters, relating to SCs and STs. In 1990, the provisions of Article 338 were amended as per the Constitution (Sixty fifth) Amendment Act, 1990. Subsequently, the National Commission for SCs & STs with its headquarters at New Delhi replaced the Office of the Commissioner for SCs & STs in 12.3.92.
The National Commission for Scheduled Castes and Scheduled Tribes is, thus, a statutory body having its Headquarters at New Delhi and with 18 State Offices located at Agartala, Ahmedabad, Bangalore, Bhubaneswar, Bhopal, Calcutta, Chennai, Chandigarh, Guwahati, Hyderabad, Jaipur, Lucknow, Patna, Pune, Ranchi, Raipur, Shillong and Thiruvananthapuram. A Chairman who is assisted by a Vice-Chairman and five other Members heads it. The present Commission, fourth in the series, was constituted in March 2002.

**Function and Duties of the Commission**

The functions, duties and powers of the Commission have been laid down in clauses (5), (8) and (9) of the amended Article 338 of the Constitution. The following are the clauses.

Clause (5) — It shall be the duty of the Commission:

a) To investigate and monitor all matters relating to the safeguards provided for the Scheduled Castes and Scheduled Tribes under this Constitution or under any other law for the time being in force or under any order of the Government and to evaluate the working of such safeguards;

b) To inquire into specific complaints with respect to the deprivation of rights and safeguards of the Scheduled Castes and Scheduled Tribes;

c) To participate and advise on the planning process of socio-economic development of the Scheduled Castes and Scheduled Tribes and to evaluate the progress of their development under the Union and any State;

d) To present to the President, annually and at such other times as the Commission may deem fit, reports upon the working of those safeguards;
e) To make in such reports, recommendations as to the measures that should be taken by the Union or any State for the effective implementation of those safeguards and other measures for the protection, welfare and socio-economic development of the Scheduled Castes and Scheduled Tribes; and

f) To discharge such other functions in relation to the protection, welfare and development and advancement of the Scheduled Castes and Scheduled Tribes as the President may, subject to the provisions of any law made by Parliament, by rule specify.

Clause (8) — The Commission shall, while investigating any matter referred to in sub-clause (a) or inquiring into any complaint referred to in sub-clause (b) of clause (5), have all the powers of a civil court trying a suit and in particular in respect of the following matters, namely:

a) Summoning and enforcing the attendance of any person from any part of India and examining him on oath;

b) Requiring the discovery and production of any documents;

c) Receiving evidence on affidavits;

d) Requisitioning any public record or copy thereof from any court or office;

e) Issuing commissions for the examination of witnesses and documents;

f) Any other matter, which the President may by rule, determines;

Clause (9) — The Union and every State Government shall consult the Commission on all major policy
matters affecting Scheduled Castes and Scheduled Tribes.

**Women**

Women in the Indian society have been victims of humiliation, torture, and exploitation in both social and family spheres. Today, women are being recognized as important, powerful, and meaningful contributors to the society.

Ideologies, institutional practices, and the existing norms in the society have discriminated against women. Some of these discriminating practices thrive even today. Inspite of the legislative measures adopted in favour of women in our society after independence, the spread of education and women’s gradual economic independence, countless women still continue to be the victims of violence. They are beaten, kidnapped, raped, burnt, and murdered.

The constitution of independent India provided for equality of status and opportunity for women. The Constitution enunciated positive discrimination policies in their favour to enable them to overcome their handicaps arising out of centuries of oppression and unequal treatment. While the formal picture in respect of women’s status thus appears quite bright, the reality of women’s everyday life is found to be very different.

Women continue to be the victims of violence, (e.g. rape); traditional social evils continue to flourish (e.g. dowry); discrimination in the economic sphere is rampant (e.g. unequal wages) and newer challenges in the context of technological changes and global forces emerge to violate their rights and dignity (like female foeticide and immoral traffic).
National Commission for Women

The National Commission for Women (NCW) which was set up in 1992, pursuant to an Act of Parliament, was itself a recognition of this reality. It was established to monitor the legal, social and economic situation of women.

The National Commission for Women was set up as statutory body in January 1992 under the National Commission for Women Act, 1990 to:

- Review the Constitutional and Legal safeguards for women;
- Recommend remedial legislative measures;
- Facilitate redressal of grievances; and
- Advise the Government on all policy matters affecting women.

Important Developments Pertaining to NCW

The Committee on the Status of Women in India (CSWI) recommended, nearly two decades ago, the setting up of a National Commission for Women to fulfill the surveillance functions, to facilitate redressal of grievances, and to accelerate the socio-economic development of women.

- Successive Committees/Commissions/Plans including the National Perspective Plan for Women (1988-2000) recommended the constitution of an apex body for women.
- During 1990, the central government held consultations with NGOs, social workers and experts, regarding the structure, functions, powers etc.of the Commission proposed to be set up.
In May 1990, the Bill was introduced in the Lok Sabha.

In July 1990, the HRD Ministry organised a National Level Conference to elicit suggestions regarding the Bill. In August 1990 the government moved several amendments and introduced new provisions to vest the commission with the power of a civil court.

The Bill was passed and received assent of the President on 30th August 1990.

The First Commission was constituted on 31st January 1992. The Second Commission was constituted on July 1995. The Third Commission was constituted on January 1999. The Fourth Commission has been constituted on January 2002.

The composition of the Commission is as follows:

a) A Chairperson, committed to the cause of women, to be nominated by the Central Government.

b) Five Members to be nominated by the Central Government from amongst persons of ability, integrity and standing who have had experience in law, trade unionism, management of an industry, women’s voluntary organisations (including women activist), administration, economic development, health, education or social welfare.

c) Provided that at least one Member each shall be from amongst persons belonging to the Scheduled Castes and Scheduled Tribes respectively.

d) A Member-Secretary to be nominated by the Central Government who shall be:

i) An expert in the field of management, organisational structure or social movement, or
ii) An officer who is a member of a civil service of the Union or of an all-India service or holds a civil post under the Union with appropriate experience.

The Mandate of the Commission

The commission shall perform all or any of the following functions, namely:

a) Investigate and examine all matters relating to the safeguards provided for women under the Constitution and other laws.

b) Present to the Central Government, annually and at such other times as the Commission may deem fit, reports upon the working of those safeguards.

c) Make in such reports, recommendations for the effective implementation of those safeguards for improving the conditions of women by the Union or any state.

d) Review, from time to time, the existing provisions of the Constitution and other laws affecting women and recommend amendments so as to suggest remedial legislative measures to meet any lacunae, inadequacies or shortcomings in such legislations.

e) Take up cases of violation of the provisions of the Constitution and of other laws relating to women with the appropriate authorities.

f) Look into complaints and take suo moto notice of matters relating to:

i) Deprivation of women’s rights.

ii) Non-implementation of laws enacted to provide protection to women and also to achieve the objective of equality and development.
iii) Non-compliance of policy decisions, guidelines or instructions aimed at mitigating hardships, ensuring welfare, providing relief to women, and taking up the issues arising out of such matters with appropriate authorities.

g) Call for special studies or investigations into specific problems or situations arising out of discrimination and atrocities against women and identify the constraints so as to recommend strategies for their removal.

h) Undertake promotional and educational research so as to suggest ways of ensuring due representation of women in all spheres and identify factors responsible for impeding their advancement, such as, lack of access to housing and basic services, inadequate support services and technologies for reducing drudgery and occupational health hazards and for increasing their productivity.

i) Participate and advice on the planning process of socio-economic development of women.

j) Evaluate the progress of the development of women under the Union and any State.

k) Inspect or cause to inspect a jail, remand home, women’s institution or other place of custody where women are kept as prisoners or otherwise, and take up with the concerned authorities for remedial action, if found necessary.

l) Fund litigation involving issues affecting a large body of women.

m) Make periodical reports to the Government on any matter pertaining to women and in particular various difficulties under which women toil.
n) Any other matter, which may be referred to it by Central Government.

Conclusion

In this chapter we learned about many social problems. Broadly we saw that social problems are caused due to social, cultural, economic, political, legal and ecological factors. We also saw that not just government but other civil society institutions are also playing an important part in containing these problems.

References


Social Defence

Introduction

The prevalence and persistence of problems of crime and deviance has been a matter of serious social concern in all societies. When these problems have crossed a threshold – the limit of social tolerance, and have assumed the proportions of a social problem, they require – interventionist mechanisms comprising prevention, control, reformation, rehabilitation and reintegration, taken up by governmental and non-governmental organisations, agencies and institutions. The measures undertaken to combat these problems represent the society’s “response”, to defend itself from the threat these problems pose to the the balance between organisation and disorganisation. This indeed is the rationale of social defence. Therefore, an adequate understanding of the concept of social defence and programmes and policies is necessary to appreciate how the governmental and non-governmental organisations and agencies are responding to the problems of deviance, delinquency and crime.

The Rationale

Society’s concern for the protection of its social order lies at the root of all mechanisms of social control. This concern, in turn, leads to social action and, to find out solutions for problems, which disturb the orderly functioning of social institutions. Manifestations of crime

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and delinquency call for such control measures that require the application of threat, coercion, repression and other forms of punishment. The methods employed have had one central purpose to accomplish, namely, the preservation of safety and security of members and institutions of society against the dangerous consequences of law breaking behaviour. Though these methods of crime control have varied in terms of time and space, the purpose still remains the same: to hold the individual within the bounds of the accepted norms and expectations, including customs, rules and laws.

Viewed in this context, social defence appears to be a part of deviant behaviour management system, of crisis containment, and of rule-making and enforcing rule-conformity. Simply stated, Social Defence could well be taken as an art and science of defending Society against all odds, crises and problems which threaten to undermine, the very structure of societal institutions and agencies. The efforts to prevent, control or correct simple or bizarre forms of deviant behaviour are important aspects of social defence operations everywhere. The question in regard to the legitimacy or relevance of means and modalities of social defence have been discussed ever since the history of human civilization, often without expressly using the term. One significant indicator of this situation is the proliferation of literature on social defence and the steady growth of the movement throughout the world. It seems almost certain that the modern connotation of social defence has come to stay in the main body of criminological and correctional theory and practice.

**Concept of Social Defence**

The term social defence is of Italian origin. It has been frequently used in the penal theory of Continental Europe
and of Latin America. It gained popularity when it was adopted by the United Nations in 1948. Nevertheless, the term, as Marc Ancel (1965:1) said, "often appears strange and is frequently misunderstood, especially by lawyers brought up in the common law tradition or by the Criminologists of English speaking world". It has also not been completely absorbed into the terminology of Anglo-American criminological studies. The frequency and the variety of contexts in which the term has been used is often accompanied by a certain amount of misuse and distortion. Even those who use the term regularly do not always give it the same meaning. Many people in criminology, criminal law and penal policy do not know what the term exactly means. In such a situation, it is no wonder that the meanings attributed to the expression vary. For example, it was once fashionable to interpret the term 'social defence' as the protection of society against crime, to the extent that such protection justifies the ruthless repression of crimes and criminals irrespective of the means employed. Such an interpretation of the term was accepted when repressive criminal law was considered to be the best possible instrument of social defence. Then the term social defence was synonymous repression. These were the days when the purpose of criminal law and penal policy was to ensure absolute protection of society irrespective of the methods used.

History bears witness to the fact that till the end of the nineteenth century every repressive method to control crime was justified in the name of social defence. Jerome Hall wrote that any measure needed to protect society is justified if it achieves the desired purpose. Hall's view brings the notion of social defence nearer to an authoritarian approach of criminal law. Thus viewed, the concept of social defence approves of an arbitrary
system or punishment in which the judge or the magistrate becomes an agent of social defence through his manifest interest in public order and security.

Later, the ideas of Bentham and Beccaria brought out radical changes in the original meaning of the term. The positivists of the Italian School of Criminology called for the preservation of the moral basis of criminal law as part of the policy of social defence. Positivists gave a new philosophy of punishment as contrasted with the older notion of the protection of society by way of repressive punishment alone. Positivists emphasized a close relationship between criminal law and morality and asserted that the concept of social defence endeavour to establish the necessity and the relevance of a large number of preventive, curative and rehabilitative measures so as to reduce the relapse of offenders to criminal behaviour. In this sense, the concept of social defence involves the systematization of penal or correctional measures that is the measures of social protection against dangerous offenders.

The modern connotation of social defence clearly rejects the primitive measures for the protection of society, decries retributive system of punishment, introduces the element of humanity into the administration of criminal justice system and, establishes the need to treat crime as a social fact and a human act. In the light of this, social defence emerges as a new approach to the problem of crime and as a new trend in the decision-making, which organises the means of controlling crime. Marc Ancel reiterates that the modern concept of social defence often came to be a synonym for action of a non-penal nature, or at any rate, for the treatment of the offender that is less punitive and repressive.
In his elaboration of the concept, Ancel wrote that the concept of social defence covers proactive and preventive social policy which aims at the protection of society by protecting the offender as well. Thus social defence is designated to ensure that the offender should receive the treatment which is appropriate to his individual case within a legal framework and by legal methods. Thus conceived, social defence is largely based on the substitution of treatment for retributive punishment.

**Characteristics**

Without attempting to provide a universally agreed definition, Marc Ancel enumerated the following characteristics of social defence approach:

1) Social defence presupposes that the means of dealing with crime should be generally conceived as a system which aims not at punishing a fault but at protecting society against criminal acts.

2) The intention of social defence is to achieve social protection by means of a body of measures that are outside the ambit of the criminal law and are designed to ‘neutralize’ the offender, either by his removal or segregation from the group, or by applying remedial or educational methods.

3) Social defence thus leads to the promotion of a penal policy which naturally favours the individual rather than the collective approach towards prevention of crime and the treatment of offenders.

4) Such a process of resocialization can take place only by way of an ever-increasing humanization of the new criminal law which will have to call upon all the resources of the person concerned, seeking
to restore not only his self-confidence but also his sense of personal responsibility and the sense of human values. This perspective will safeguard the offender's inherent right as a human being whether he is charged with an offence or has been convicted.

5) Such a humanization of criminal law and the criminal will not be merely the result of a humanitarian movement. On the contrary, the process will be based on scientific understanding of the phenomenon of crime and the offender’s personality.

**Social Defence Movement**

Social defence is not a new dogma or establishes a single doctrine in place of all other theories of criminal law and criminology. It is a movement which seeks to bring together all those who are aware that the modern world and modern thought shatters the framework of preconceived ideas and it seeks to guide such persons in their search for a human renewal which goes beyond all technical considerations. It is an endeavour to breathe into criminal law a social spirit in harmony with the present trends. Social defence movement does not only opens up the fresh horizons in the control of crime by non-repressive methods, but also succeeds in getting rid of a certain number of obsolete elements that still encumber penal theory or are assigned importance disproportionate to their intrinsic value or usefulness. The aim of social defence movement is precisely to incorporate those methods of individual treatment into a comprehensive penal policy which will render it effective in achieving the protection of society through the protection of the individual. The movement does not hide the fact that there is a long way to go, nor does it seek to dissimulate that much remains to
be done to educate not only the legislator, the criminal lawyer, the judge, and the prison administrator, who has to apply the sanctions imposed, but also, to educate public opinion itself. All this must be accomplished, not through a violent break with the past, but through a continuous process of evolution and reform.

**Growth of Social Defence Movement**

Though the idea of social defence is an old one, it could, however, be assimilated into the body of criminal law and criminology only in the beginning of the twentieth century. It is, therefore, treated as a modern phenomenon having its direct roots in the radical changes that characterized the penal policy at the end of the nineteenth century. It highlights the dominant role of prevention in the society's struggle against crime, puts forward the utility of penal policy based on the reformation of the offender, and enunciates the principle of re-education of offenders. The “Age of Enlightenment” in Europe provided impetus to the evolution of the concept of social defence in the eighteenth century. It helped in spreading the consciousness of the notion of social protection and the need for preventive measures.

The modern connotation of social defence could become popular only in the beginning of the twentieth century when the ideas of the positivists like Lambroso, Ferri and Garofalo received wider acceptance. The criminologists’ endorsement of the view that prevention of crime by means of preventive measures designed to reform the offenders helped the social defence movement accelerate its pace.

The new social defence movement developed in the years after the Second World War. The movement assumed significance between 1945 and 1949 when the Study Centre on Social Defence was founded at Geneva in
1945. International recognition was first achieved in 1948 with the institution of the social defence section of the United Nations which defined the purpose of the movement as the prevention of crime and the treatment of offenders.

The Second International Social Defence Congress held at Liegein, France in 1949 demonstrated extensive interest in the movement and resulted in the creation of the International Society of Social Defence. The subsequent congresses of the International Society of Social Defence in the past two decades provided sufficient evidence of the growing popularity of the concept and ensured the spreading of the message of movement to all parts of the world. It is now emerging as a social movement to combining the philosophy of law enforcement and corrections into an integrated concept. Accordingly, the United Nations defined social defence as prevention of crime and treatment of offenders. Today the term has a wider meaning referring not to an elaborate school of thought but to a vigorous movement sustained by a variety of organisations sharing certain values and method in dealing with the phenomenon of crime. In the present context, social defence as a unified approach, not only endeavours to perfect the system that protects society against criminal acts but also goes much beyond the ambit of criminal law in extending measures to forestall criminogenic situations and to treat offenders through appropriate remedial, educational and rehabilitative services. It aims to protect society from crime-generating factors and forces, not merely by treating and rehabilitating the offender but also by creating such conditions in the community which are conducive for a healthy and wholesome growth of human life.
Social Defence: The Indian Context

Though no systematic account of the history of social defence movement in India exists at the moment, the idea of social defence could manage to reach India soon after it became popular in the West. The criminal justice system that Britishers introduced in India in the later half of the nineteenth century did not accept repression as an important measure of crime prevention and crime control. While drafting the relevant legislations like the Indian Police Act (1861), the Indian Prisons Act (1894), the Indian Prisoners Act (1900), the Reformatory Schools Act (1876), the Indian Penal Code (1860), and the Code of Criminal Procedure (1884), the Britishers were aware of new ideas in the field of criminal justice administration. They did make efforts to reject some of those obsolete, inhuman and uncivilized methods and techniques of crime prevention and crime control which at that time had received wider criticism in their own country. The functioning of the police, judiciary and prison in Great Britain was so structured as to permit little scope for repression and sadism. The British criminal law and the penal policy decried vengeance and retribution as a general rule.

In the early years of the twentieth century, Britishers made a thorough of the texture of criminal justice administration in India and certain reforms. The Report of the Indian Jail Committee (1919-20) furnishes a strong testimony to this fact. Some of the important recommendations of this report go on to show that social defence era in matters of penal policy seems to have emerged in India in the first half of the twentieth century. The chronicles of correctional administration, particularly after 1970, are replete with a number of changes which were ushered in to emphasize that crime problem demands solution which must be in keeping
with the ethos of the time. The recommendations of subsequent Commissions and Committees that went into details of new correctional policies and practices repeatedly emphasized that the new methods and techniques of prevention of crime and treatment of offenders offer the best hope for dealing effectively with the crime problem. These recommendations called for negating the old ideas, practices and traditions of dealing with juvenile and adult offenders. They sought to establish new measures to prevent crime and reform criminals.

While any new ideas of crime prevention and treatment of offenders gained currency, the term social defence did not become that popular in the official lexicon of criminal justice administration in India. Neither did the creation of a section of Social Defence by the United Nations in 1948 did alter the situation. Very few persons could meaningfully use the term in their lectures, speeches and writings. A noticeable change in the situation was witnessed with the setting up of the Central Bureau of Correctional Services by the Government of India in 1963. Many people connected with the police, judiciary and correctional institutions could then come to understand the term Social defence in its proper perspective. The use of the term gained more usage with the reorganisation of the Bureau into the National Institute of Social Defence in the year 1973.

National Institute of Social Defence

The National Institute of Social Defence started functioning as a subordinate office under the administrative control of the Ministry of Social Welfare (now the Ministry of Social Justice and Empowerment). It currently serves as the central advisory body in the
field of prevention of crime and the treatment of offenders. The main areas covered by the Institute are: Juvenile Justice Administration; Welfare of Prisoners; Probation and Allied Measures; Suppression of Immoral Traffic; Beggary Control and Drug Abuse Prevention.

The main functions of the Institute relate to technical advice to the Central and State Governments; formulation of laws, rules and regulations; training of governmental and non-governmental functionaries; collection of statistics and promotion of research; dissemination of scientific knowledge; exchange of technical know-how; liaison with academic research and training institutions; awareness building towards social defence issues, and publication of scientific and popular material on social defence. Further, the Institute assists the Ministry of Social Justice and Empowerment in the exchange of technical information with the United Nations and other International and foreign agencies in the field of social defence and drug abuse prevention.

The Institute has played a pioneering role in propagating and popularizing the idea of social defence in the country. In the initial years, under its new dispensation, the Institute had undertaken several programmes and activities which raised the hope of nurturing a strong social defence movement in the country. But, it did not happen on account of several reasons. It is true that social defence movement which began in the early eighties had lost much of its momentum, during recent times. Those engaged in the social defence sector are now disillusioned with the existing realities in the critical sectors of social defence. All this has happened because the lofty ideals of social defence has not percolated down to the formulation and implementation of existing social defence programmes.
Social Defence

Social Defence Programmes

The Social Defence Division of the Ministry of Social Justice and Empowerment, Government of India is implementing a variety of programmes for the neglected and marginalized people; abandoned, destitute, neglected and delinquent juveniles who need care and protection, children who are in conflict with the law, the street children; the drug addicts; the offenders, the aged and host of others who need special care and support. The programmes and policies aim at equipping them to sustain a life of respect and to become useful citizens. In this process, the government plays the role of a catalyst. The State Governments, autonomous bodies, NGOs and even the corporate world are involved in the implementation of these programmes. In brief the social defence programmes are meant to aid; prevent neglect, abuse and exploitation; and provide assistance to the deprived with an aim to bring them into the mainstream.

The following are some of the important programmes of the Social Defence Division.

Care and Protection of Children

In order to provide care and protection to children who for various reasons require it, the Juvenile Justice (Care and Protection of Children) Act, 1986 (as amended in 2000) has come into force. The Act provides services for the care, protection, treatment, development and rehabilitation of juveniles who have not completed eighteen year of age, by adopting a child-friendly approach in the adjudication and disposition of matters in their best interest and for their ultimate rehabilitation through various institutions established under the Act. It deals with two categories of children:
1) **Children in need of care and protection** – children without any home or settled place or abode and without any ostensible means of subsistence; mentally or physically challenged children or children suffering from terminal diseases or incurable diseases having no one to support or look after; children whose parents and guardians are unfit or incapacitated to exercise control; abandoned, missing, destitute and run away children; children who are being or are likely to be exploited for the purpose of sexual abuse or illegal acts and children who are found vulnerable or are likely to be inducted into drug abuse or trafficking.

2) **Children (juveniles) in conflict with law** – those who are alleged to have committed an offence.

The institutional measures for the above categories of children include observation homes, special homes, children homes and shelter homes. **Observation homes** provide temporary reception of juveniles in conflict with law during the pendency of inquiry regarding them. **Special homes** provide for reception and rehabilitation of juveniles in conflict with law. **Children homes** provide residential care, treatment and rehabilitation services for children who are destitute, abandoned, abused and exploited. **Shelter homes** (run by voluntary organisations) function as drop-in-centres for the children in need of urgent support.

Under the Act, special adjudication machinery has been established such as **Juvenile Justice Board** for juveniles in conflict with law and **Child Welfare Committee** for children in need of care and protection.

The process of rehabilitation and reintegration of children is carried out alternatively by (i) adoption, (ii) foster care, (iii) sponsorship and sending the child to an aftercare organisation.
**Integrated Programme for Street Children**

The objective of this programme is to prevent destitution of children and facilitate their withdrawal from life on the street. The programme provides for shelter, nutrition, health care, education, recreation facilities to street children and seeks to protect them against abuse and exploitation. The target group of this programme is children without homes and family ties i.e. street children and children especially vulnerable to abuse and exploitation, such as children of sex workers and children of pavement dwellers. In addition to voluntary organisations, State Governments, UT administration, local bodies and educational institutions are also eligible for the financial assistance from the Government to run these programmes.

**Inter-country Adoption of Children**

Considering the fact that there are about 30 million orphans in the country, of which 12 million are destitutes, and also keeping in view the malpractices indulged in by the voluntary organisations while offering Indian children in adoption to foreign parents, the Supreme Court of India in the year 1984 and also subsequently, delivered a series of judgements pertaining to child adoption. As per the directions of the Supreme Court regarding legal principles, norms and procedures to be followed in the inter-country adoptions, the Central Adoption Resource Agency (CARA) was set up in 1990. As an agency registered under the Societies Registration Act, CARA functions as an autonomous body funded by the Social Defence Division of the Ministry of Social Justice and Empowerment. It facilitates the adoption of orphaned, homeless, abandoned, exploited, abused and institutionalized children.
Besides, the Ministry has also granted recognition to both Indian and foreign agencies which are engaged in sponsoring Indian children for adoption abroad. 77 agencies in the country have been given recognition for doing inter-country adoption. In addition, 293 foreign agencies have been enlisted in more than 25 countries to sponsor inter-country adoption of Indian children. The Ministry has also issued guidelines for ‘Foster Family Care’ as an alternative to institutional care of children awaiting adoption.

**Care for Older Persons**

The population of older persons in India is increasing at a fast pace. The index of Ageing indicates that while in 1971, there were nearly 14.2 older persons for every 100 children, this figure rose to 24.7 per 100 children by 2001. Indian society has been witnessing a definite withering away of joint family system as a result of which the elders in the family are exposed to emotional neglect and lack of physical and financial support. The Social Defence Division of the Ministry of Social Justice and Empowerment, Government of India provides for the needs of older persons through its various programmes and activities.

In the year 1999 the Government has come out with a **National Policy for Older Persons** (NPOP) during the United Nations International Year of Older Persons. In keeping with the provisions contained in the NPOP, a National Council for Older Persons (NCOP) was constituted in 1999 to operationalize the action strategies as envisaged under the identified areas of intervention. The NCOP is the designated office for receiving suggestions, complaints and grievances from individual older persons. The Ministry has also commissioned AADHAR, as a secretariat for NCOP. This is being coordinated by ‘Age well Foundation’. Aadhar
is an initiative in the direction of empowering the elderly population to find satisfactory solutions to the problems as per their felt needs through the coordination of voluntary efforts and administrative initiatives. Since its constitution in December 1999, Aadhar is attending to requests for intervention received from all over the country by the Ministry and various other government agencies and functionaries. Aadhar is also identifying committed individuals and organisations across the country to undertake grassroots action programmes.

The Integrated programme for the Older Persons is about people above 60 years of age, particularly the infirm, destitutes and widows. Under this Scheme, grant is given for running old age homes, day-care centers, mobile medicare units and also non-institutional services for older persons. The aim is to improve the quality of life for older persons. As part of ongoing schemes of the Ministry, grants-in-aid has been provided to establish 44 New Old Age Homes, 16 New Day-Care Centres and 17 New Mobile Medicare Units in the country to provide services to the older persons. Besides, the Ministry is supporting 270 Old Age Homes, 403 Day-Care Centres, 57 Mobile Medicare Units and 3 Projects of Non-Institutional Services for older persons.

**Prevention of Alcoholism and Substance Abuse**

The use of dependence-producing substances in some form or the other has been going on since time immemorial. In India too, the abuse of alcohol, opium and cannabis has been known for long. However, the consumption of drugs like heroin, hashish, LSD etc., is altogether a new trend. Within the last decade or so, the extent of usage of such drugs in various segments of Indian society has assumed alarming dimensions. Today, India is not only a transit country for illicit trafficking of drugs from the ‘golden triangle’ or ‘golden
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crescent’, but it is also becoming a significant consumer in the global scenario. As long as addiction was a problem of certain individuals or socially alienated groups and as long as it was kept under control by informal social control mechanisms, it did not evoke much attention. However, with its spread amongst all socio-cultural and economic strata and an increasing perception of its disruptive influence on the individual, the family and society, drug abuse has emerged as a vital issue for planners.

In order to tackle the problem of drug abuse, a two-pronged strategy of supply control and demand reduction has been adopted. While the control of supply is taken care of by the Narcotics Control Bureau and the Police, the Ministry of Social Justice and Empowerment took the responsibility of looking after the educational and rehabilitation aspects of drug users. The Ministry of Social Justice and Empowerment is working towards:

i) Building awareness and educating people about the ill effects of drug abuse.

ii) Dealing with the addicts through a well rounded programme of motivation, counselling, treatment, follow-up and social reintegration of cured drug addicts.

iii) Imparting drug abuse prevention and rehabilitation training to volunteers.

As the implementation of programmes of drug demand reduction required community-based efforts, the Ministry had been implementing the Scheme of Prohibition and Drug Abuse Prevention in collaboration with NGOs since 1985-86. Recently a comprehensive review of the Scheme has been undertaken. The Scheme has been modified to widen its coverage and
was made more flexible to respond to the local needs and ground realities. The Scheme has now been renamed as the **Scheme for Prevention of Alcoholism and Substance (Drugs) Abuse** for running the following activities with the collaboration of NGOs:

- Counselling and Awareness Centres
- Treatment-cum-Rehabilitation Centres
- De-addiction Camps
- Awareness Creation Programmes
- Workplace Prevention Programmes

**Drug Awareness, Counselling and Assistance Centres**

These centers provide community based services for awareness building, screening of addicts, counselling to addicts and their families, referral of hardcore addicts to Treatment-cum-Rehabilitation centers and follow-up assistance to former addicts.

**Treatment-cum-rehabilitation Centres**

These centers provide community based services for awareness building for the identification, motivation, counselling, de-addiction, after care and reintegration of addicts into the mainstream society.

**De-addiction Camps**

To give wider coverage, provision of de-addiction camps has been made in the urban and rural areas where there are no Treatment-cum-Rehabilitation Centres. These camps are organised only by the organisations which are running Treatment-cum-Rehabilitation Centres.
Work Place Prevention Programme

In order to encourage work place prevention Programme, financial assistance upto 25% of the expenditure for the setting up of a 15 bedded or 30 bedded Treatment-cum-Rehabilitation Centre is provided to the industrial units/enterprises having at least 500 workers on their rolls.

Awareness Generation Programmes

Awareness generation programmes which include holding of seminars, conferences, workshops, essay/debate competitions, publicity through mass media etc. have been promoted. Several radio and TV Programmes have been launched and films were produced to create awareness about the role of parents, teachers and opinion leaders in the prevention and control of alcohol and drug abuse. Voluntary organisations are being financially assisted to undertake educational work amongst the community and target groups.

The Ministry has identified three major thrust areas for priority intervention as follows:

Rehabilitation: To achieve Whole Person Recovery (WPR) which emphasizes physical, emotional and mental rehabilitation, culminating in physically, socially and economically self-reliant life for drug addicts.

Socially and Economically Vulnerable Target Groups:
Special attention is given to drug abuse problem among socially and economically vulnerable groups i.e. street children, commercial sex workers, destitute women etc.

The Ministry is also seeking the collaboration of Department of Education, Department of Youth Affairs and Sports, Ministry of Information and Broadcasting, Ministry of Health and Family Welfare and their
subordinate agencies for imparting education on drugs through formal and non-formal education processes and for networking of services related to drug abuse.

In order to obtain international cooperation in the area of drug abuse prevention and treatment, the Ministry has launched the following three major projects in collaboration with the United Nations’, International Drug Control Programme (UNDCP) and the International Labour Organisation (ILO). They are:

- Community Drug Rehabilitation and Workplace Prevention Programme all over the country.
- Comprehensive Programme on Community Drug Rehabilitation for North-East States in the country.
- National Survey on the extent, pattern and trends of drug abuse in the country.

Problems Concerning Social Defence Programmes

The growth of social defence in India on sound-scientific lines has been hampered by the existence of certain problems in relation to the policy and its implementation. Some of those which deserve special mention are:

- Programmes and services in some of the key-sectors of social defence suffer from lack of uniformity of institutional structure, policy declarations, administrative rules and practices and also in terms of quality of services and scope of action.

- Compared with the complexity and magnitude of the problem under focus, the machinery of Social defence operations seems to be inadequate.
Despite wider theoretical acceptance of new methods and techniques of social defence, old and counter-productive measures are often applied. It is a known fact that a good number of social defence institutions continue to function on traditional lines with little provision for individualized correction and rehabilitation of offenders.

A great deal of social defence institutions suffer from the chronic lack of material and non-material resources essential, for the fulfillment of the avowed objectives of social defence.

Social defence Schemes have a marked tendency to depend largely on institutional measures of crime prevention and treatment of offenders. As a result, non-institutional measures seem to suffer from lack of attention.

Social defence being a State subject, States tend to ignore the directions of the central government. As a consequence, the progress made with regard to various social defence programmes is not symmetrical.

Personnel engaged in social defence institutions and agencies have not been given proper recognition in terms of salary, conditions of service and opportunities for professional growth and development. As a result it was difficult to attract suitable persons with requisite qualifications and aptitude for social defence work.

Research in social defence theory and practice is scarce. As a result there exists little data to provide empirical base about the success or failure of many social defence programmes and policies (Srivastava, 1981:224-239).
Conclusion

In conclusion, it appears that social defence movement in India has thus far made only a modest beginning. It is beset with problems such as piecemeal programming, scarcity of funds, lack of public support and understanding and so on. Seldom has the growth of social defence been based on systematic planning. It is felt that the tardy growth of social defence is because of its inability to cope up with the magnitude of problems it has to deal with. In reality there also exists a hiatus between the theoretical expositions of social defence and the field realities. The challenges faced by social defence movement in India do not have easy solutions. It needs resources which are hard to come by; it deserves a sort of planning of programmes and services which is easy as an intellectual exercise but difficult as a feasible proposition, and finally, it warrants realistic organisational structure which seems uncertain in the prevailing bureaucratic culture. Within these constraints, the social defence movement is struggling to achieve good results in its current thrust areas.

References


