BSW-125
Social Case Work and Social Group Work

Block

2

SELECTED SETTINGS IN SOCIAL CASE WORK

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BLOCK INTRODUCTION

This block 'Selected Settings in Social Case Work' is the second block of the Course BSW-125, 'Social Case Work and Social Group work'. The block deals with components and fields of social casework and social case work in educational and industrial settings.

The first unit 'Components of Social Casework' elaborates on the specific components of social case work. In social case work, a person with a problem comes to an organisation where a professional representative helps him/her using a scientific process. This unit will explain the four components of social case work which are the person, problem, place and process.

The second unit 'Fields of Social Case Work Practice' provides an overview of how casework is practiced in various settings and also shows how these settings affect social casework practice in Indian context. The unit explains how to apply the concepts and techniques of social case work in various settings (location) and with whom (client groups).

The third unit 'Social Case Work in Educational Setting' explains the relevance of social case work in educational setting. It provides an overview of the current trends and challenges of social case work in educational setting and the future prospects for social case work in educational setting.

The fourth unit on 'Social Case Work in Industrial Setting' explains the relevance, scope and goals of social case work in industrial setting. It provides an overview of the role, task, responsibility and skills of social case worker in industrial setting.

This block will give you a comprehensive understanding of the components and fields of social case work and its relevance and scope in the educational and industrial settings.

UNIT 1 COMPONENTS OF SOCIAL CASEWORK

*Dr. Sayantani Guin

Contents

1.0   OBJECTIVES

There are six methods in social work which are categorized into the primary methods and the secondary methods. Primary methods include social casework, social group work and community organization. The secondary methods include social action, social welfare administration and social work research.

In this unit, we will discuss about the components of social case work.

After studying this unit, you will be able to:

- Explain the components of social casework;
- Discuss the role of social worker in each component of social casework;
- Describe the role of the person, problem, place and process in effective casework process.

1.1   INTRODUCTION

Social case work is the primary method in social work practice. In social case work, a social worker works with an individual, helps an individual who faces problem in the day to day functioning. This method deals with both the social and psychological aspects of an

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individual's life. The term "social" implies the experiences of the individual with other people and his/her environment, and the term "psychological" implies the thoughts and feelings which occupy the mind within an individual. Thus, the social aspects deal with the interpersonal experiences of the individual and the psychological aspects deal with the intrapersonal experiences of a human being. In order to understand the individual person, it is important to understand the various components of social case work and the importance of the components in dealing with the problems of the individual.

Social case work is defined by Mary Richmond in 1915, as "the art of doing different things for and with different people by cooperating with them to achieve at one and the same time their own and society's betterment."

The nucleus of social case work is given by H.H. Perlman which is, 'a person with a problem comes to a place where a professional representative helps him by a given process'. This entire phenomenon is also known as the 4P's and is used in most of the situations where a person seeks professional help.

There are four components of casework known as the 4 P's:

1. The person.
2. The problem.
3. The place.
4. The process.

Let us now explain each one of them.

1.2   THE PERSON

The person is any individual who is under stress or is facing problem in his/her life. The person can be a man, woman or a child. The person in social work terminology is called the 'client'. The person may have problem due to his/her inability of adjusting to the existing situation which is created by forces which are beyond his/her control. This problem can be social, economic or psychological in nature. When confronted by a problem, an individual usually tries to solve the problem by employing solutions from his/her previous experiences. However, when the problem does not seem to resolve, an external support is needed and then the individual seeks for professional help. A person becomes a 'client' as soon as he starts getting professional help.

The person or the client has several unmet needs, concerns and problems. These problems are unique to his/her situation. Every person is unique and has his own set of social and cultural environment in which he/she lives which makes the person have unique social experiences. At the same time, the person is also part of the social environment and shares the commonalities of the humankind and has a set of transactions with other people. The person is unique and different from every other member of his/her family or society.

Clients are of the following types:

1. Those who seek help for themselves.

2. Those who seek help for another person.

3. Those who block or threatens the social functioning of another person (e.g., the neglectful parent in a child protection case).

4. Those who seek help for inappropriate goals.

5. Those who seek help as a means to reach their own goals or ends.

The nature of social casework will depend on identifying the type of the client and the problem he/she seeks to resolve.

Felix Biestik (1957) has identified seven needs of clients as they come to the helping situation:

1) To be dealt with as an individual rather than a type or category.

2) To express feelings both positive and negative.

3) To be accepted as a person of worth, a person with innate dignity.

4) Sympathetic understanding of and response to feelings expressed.

5) To be neither judged nor condemned for the difficulty in which the clients find themselves.

6) To make own choices and decisions concerning one's own life.

7) To help keep information confidential about self as secret as possible.

To understand a person, it is essential to understand the personality of the person. The personality structure plays an important role in determining how the behaviour of the person is affecting the social functioning of the person. According to Freud, a person's behaviour is governed by three forces of personality structure, viz. id (life forces of the individual), ego (which is conscious and drives our personality forces) and super ego (which is unconscious and consists of ethical values and principles).

Every human being is hindered by some obstacles and tries to cope with the problem. If the coping is not successful, he / she look for outside help to solve their issues to return to regular functioning. A person seeking help not only brings innumerable concerns, needs and problems, but also brings with him/her perceptions of self, the situations and patterns of coping with stress and patterns of interpersonal relationships. The role of the social worker is to understand the client as a unique person in a unique situation. Since the social and cultural background of a person varies therefore these problems or unmet needs could be unique.

1.3 THE PROBLEM

A problem is an obstacle or a hindrance in the normal functioning of an individual. Problems usually arise due to unmet needs, maladjustments and frustrations. When these unmet needs or frustrations prolong for a longer period of time and start affecting the social functioning of an individual, they take shape of problems. Thus, intrapersonal problems arise due to unmet needs and desires of the person, which affect the person's living situation or the effectiveness of his/her efforts to deal with it.

Dimensions of problems

There are several dimensions in which a problem may arise. Some of these are listed below:

1) **Intrapersonal problem**: When maladjustments and frustrations arise due to personal issues of an individual and block their social functioning, these problems are intrapersonal in nature. These problems only affect the concerned person and the surroundings of a person.

2) **Interpersonal problem**: When problems arise due to some external cause, situation or the surroundings of an individual and make him/her uncomfortable, these problems are interpersonal in nature. Interpersonal problems also affect the people who surround us like family, friends, etc.

3) **Physiological problems**: Physiological problems are caused due to ailments in certain body part or due to physical illness. When a person experiences a prolonged disease, it starts to affect his/her mental health and therefore it becomes important to be addressed.

4) **Economic problems**: Fulfillment of basic needs is imperative for every human being. Problems arising due to poverty are one of the basic problems. People all over world are facing economic crisis. The society is divided into various classes - upper, middle and lower. The upper class is capable of affording almost all the luxuries, the middle class is capable to at least fulfilling all the basic requirements, while the lower class faces a crisis in their daily life.

5) **Psychological problems**: Psychological issues are usually related to the mind and behaviour of a person. Anxiety, depression, paranoia, etc., are the extreme results of a prolonged psychological problem.

Casework helps in problem solving. It tries to provide an intervention to breaks or modify the cause-and-effect chain of problems. Social casework tries to assess the situation of the client and the available means and processes to facilitate the client's problem-solving efforts. Three main considerations enter into the choice of problem focus: 1) what the client wants 2) what the caseworker's professional judgments points to as possible and desirable solutions and 3) what the agency is for and can offer.

Check Your Progress I

Note: a) Use the space provided for your answer.

b) Check your answer with those provided at the end of this unit.

1) Define Social case work.

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1.4   THE PLACE

'The place' is a social service agency or a social service department where the person comes for help with his/her problem. Place may include a larger institution (e.g., the local authority), or the smaller social work microcosm (e.g., the psychiatric social work department in a mental hospital). Place may also include the institutions in which caseworkers' practice (schools, child guidance clinics, children's departments of the hospitals and courts and so on).

Classification of Social casework agencies

Social casework agencies may be classified based on the following three factors:

1) **Source of support**- These are the agencies which are funded by public taxation (child welfare, physical and mental health programmes, etc.) or voluntary contribution.

2) **Source of professional authority** – Some agencies are primary agencies which carry full authority and responsibility for their social functions and some are secondary agencies which derive their authority and responsibility from the host agency.

3) **Special function and area of concern**- Primary agencies may be both public and private. These agencies choose to work in particular area in which they give services. Secondary agencies are associated with the work of some other profession, such as medicine, education or law and cater to their specific knowledge and purpose.

Characteristics of social agency

Some of the characteristics of social agency as given by Pearlman are described below:

1) Help the society: A social agency protects members of a society by helping individuals and groups against social breakdowns, to prevent their maladjustments and to promote the development of better or higher levels of humans functioning.

2) Develops a suitable programme: A social agency develops particular programmes and activities depending on the needs of the people, availability of funds, the knowledge and competency of the agency staff, the interest, resources and support of the community.

3) Has an organizational structure: The social agency has a structure and is made up of many members with different purposes and powers, all dependent upon one another in the agency's overall functioning. Each member of the agency is assigned different tasks and responsibilities.

4) Consists of skilled personnel: The agency consists of trained caseworker who has specialised knowledge and skill to deal with problems of people to assist them in better social functioning.

5) Meeting point for client and social worker: The agency brings the client and social worker together and enables them to interact in a professional manner. In majority of the cases, it provides the meeting point for the social worker and the client.

Social workers need to understand the agency in which they are employed. They also need to be able to understand other social agencies working in the allied areas. The first task in understanding an agency is to define its boundaries. The second task is to determine

environmental factors that influence the structure and functioning of the agency. The third task is to understand the structure and functioning of the agency system.

1.5   THE PROCESS

A process, is a number of stages or steps followed by the case worker to help the client. It is mandatory for a professional worker to follow certain steps in order to help the client. The worker is required to maintain a good rapport with the client throughout the process. The worker helps the client to strengthen his/her coping mechanism in a problematic situation. The professional social worker accepts the client, develops a good relationship with client and tries to elicit facts. The facts stated by the client are properly diagnosed and the worker helps the client to arrive at the solution, ensuring full participation of the client in the process.

The first part of the casework process, is to ascertain and clarify the facts of the problem. The second phase of casework process is thinking through the facts. The conclusive phase of each problem-solving effort in casework is the making of some choice or decision.

Stages of Problem-Solving Process

The following stages explain the processes involved in the problem-solving in social case work:

1) Preliminary statement of the problem: This involves a clear, precise and accurate statement of the problem. Often the problem statement is vague, global and lacking in precision.
2) Statement of preliminary assumptions about the nature of the problem: After clearly stating the problem, assumptions are made regarding the nature and cause of the problem. This gives an indication regarding the need to solve the problem and understanding the hurdles in fulfilling this need.
3) Selection and collection of information: Information may be collected from a variety of sources including historical, social, psychological, biological, economic, political, religious, and ethical understandings. The client is the primary source of information regarding the problem.
4) Analysis of information available: The information gathered regarding the problem is analysed in order to determine feasible goals, possible outcomes, possible plans of action, interpretation of the meaning of the information gathered, and evaluation.
5) Development of a plan: Gathering and analysing information leads to an understanding of what can be done to remove obstacles which are blocking need fulfillment. A plan is developed regarding the possible solutions considering various strategies and techniques.
6) Implementation of the plan: The plan is put into action in order to solve the problem of the person.
7) Continuous monitoring and evaluation: While the plan is in operation, it is constantly monitored and reviewed. While implementing the plan, constant evaluation must include gathering of more information. Once the goal is reached, evaluation of the plan is undertaken in order to understand the outcome of the plan.

Steps of Problem-Solving Process

The following steps are given by Mary Richmond in 1917 to solve the problem of the client:

1) **Intake**: Whenever a person seeking help comes to an organisation, an administrative process of enrolling the client is performed by the agency. Intake can also be explained as the acceptance of the client as he/she is by the case worker. A case worker has to maintain a non-judgmental attitude towards the client. The professional worker in this step establishes a relationship with client and tries to make the client comfortable.

2) **Study**: Once a relationship is established, the worker tries to elicit various facts and information from the client. Probing is a well-known technique performed by a skilled caseworker to understand the deep aspirations and underlying issues, while dealing with the client. A preliminary analysis starts at this stage.

3) **Diagnosis**: In this stage, the worker tries to diagnose the problem of the client after studying the facts provided by the client. Diagnosis is understanding the nature of the cause of problem. The worker thoroughly assesses the already known information and tries to reach to the roots of the problem. Diagnosis are of three types:

- Dynamic diagnosis: Dynamic refers to analysing the current problem. Dynamic diagnosis is assessing the current issues, surroundings and feelings of the client.
- Clinical diagnosis: In this type of diagnosis, the worker gathers information related to the behaviour of the client. Here the case worker analyses the behavioural patterns and personality traits of the client. This type of diagnosis helps in understanding the nature of the problem and a particular behavior or trait related to the problem. Clinical diagnosis helps in understanding various personality disorders.
- Etiological diagnosis: This type of diagnosis deals with the background and the life-history of the client. It also studies the family history to understand certain personality patterns and helps in assessing the success of the employed alternatives and coping mechanisms of the client.

4) **Treatment**: The last step in problem-solving process is the treatment which is the sum total of all the activities implemented to provide immediate relieve to the client. A treatment is done to avoid breakdown of an individual and restore his/her social functioning. It is to strengthen the psychology of the client.

Components of Problem-Solving Process

The components of the problem-solving process include assessment, planning, action and termination. Although assessment precedes planning, planning precedes action and termination precedes action, the process is cyclic in nature.

Planning for a solution of the problem involves understanding the situation of the person. This understanding includes assessment. Action often leads to new information for use in understanding or demonstrates the need for additional planning. Evaluation, the assessment of what has happened as a result of action, is ongoing in the process and leads to new understanding and sometimes to new plans and action. Thus, all four stages are always present, but at various points in the work one or more may be the focus and receive the most attention.

All the above four stages as well as the interactional process constitute intervention. All can influence changes in the transactions between clients and the systems in their environment. All can influence the social functioning of individuals and social systems.

Casework process aims to engage the client with his/her problem and encourages him/her to do something about it. This happens within a working relationship of the client with the agency and the social caseworker.

Many a times, solution of a problem involves provision of material means or opportunities which are accessible to the person who is in need. Some resources that any person may need in order to resolve a given problem in his/her daily living include money, medical care, nursery schools, scholarship, short-stay homes, foster homes, recreational facilities, etc. It is essential that the caseworker is informed about these resources and when and how to use it.

Check Your Progress II

Note: a) Use the space provided for your answers.
      b) Check your answers with those provided at the end of this unit.

  1) Enlist the components of social case work.
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  2) Explain dynamic diagnosis.
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1.6   LET US SUM UP

This unit aims to familiarise you with the components of social case work. The four components of social case work are person, problem, place and process. The person is called the client in social work terminology. The person may voluntarily approach the social work agency or may be referred by someone else. The person may be facing some problem which hampers his/ her day to day social functioning. Professional help is sought by the person when he/she is unable to get a solution. The place is the agency or the organisation where the person with the problem meets the social case worker. The social case work process consists of several stages, steps and techniques. Some of the important steps in social case work process include assessment, planning, diagnosis and evaluation.

1.7   KEYWORDS

The person:	A person can be a man, woman or a child who is facing problem in his/her life.
The problem:	A problem is an obstacle or a hindrance in the normal functioning of an individual. Problems usually arise due to unmet needs, maladjustments and frustrations.
The place:	The place refers to a social agency or a section of any social agency that provides help to the person in problem.
The process:	The process involves various steps, stages and techniques, used to arrive a solution to help the person who is in the problem.

1.8   SUGGESTED READINGS

Hamilton, Gordon (1956), *Theory and Practice of Social Casework*; Columbia University Press, New York.

Perlman, H.H (1957), *Social Case Work: A Problem Solving Process*, Chicago. Biestek, Felic P (1957), *The Case Work Relationship*; Loyola University Press, Chicago, Illinois.

Matthew, Grace (1991), *Theory and Practice of Social Casework*; Columbia University Press, New York.

Aptekar, Herbert H. (1955), *The Dynamics of Case Work and Counselling*; the Riverside Press, Cambridge.

Turner J. Francis and Hollis Florence (1983), *Differential Diagnosis and Treatment in Social Work,* 3rd Edition; Collier Macmillan Publishers, London.

Nee Robert H and Roberts W (1970), *Theories of Social Case Work*, The University of Chicago Press, Chicago and London.

Timms Noel (1964), *Social Case Work Principles and Practice*; Routledge & Kegan Paul, New York.

Tilbury D.E.F (1977), *Case Work in Context-A basis for Practice*, Pergamon Press, United Kingdom.

1.9   ANSWERS TO CHECK YOUR PROGRESS

Check your progress I

1) Social case work is a method of helping people individually through one to one relationship that taps personal and other resources for coping with problems.

Check your progress II

1) The components of social case work are:

- The person.
- The problem.
- The place.
- The process.

2) Dynamic as the name suggests refers to analysing the current problem. Dynamic diagnosis is assessing the current issues, surroundings and feelings of the client.

UNIT 2   FIELDS OF SOCAL CASEWORK PRACTICE

*Manju L. Kumar

Contents

2.0   OBJECTIVES

This unit helps you to understand the practice of social casework with different population groups in different settings. After reading this unit you will be able to:

- Understand different dimensions of practice of social casework;
- Acquire the ability to apply casework concepts, principles, and skills for helping different client groups;
- Critically analyse the context of the clients of social casework and its significance for the practice of social casework; and
- Appreciate the importance of the different setting of social casework practice.

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2.1   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 to 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 by himself. The professional, the social caseworker, views these concerns in the light of the person's total social environment.

2.2   CHARACTERISTICS OF SOCIAL CASEWORK PRACTICE

All that you have learnt till 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 characterise social casework practice, wherever you may be located:

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

2.3   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, etc.

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, security, achievement and 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 to 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.

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.

2.4 FIELDS OF SOCIAL CASE WORK PRACTICE

As we have already stated that any discussion on 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. In majority of the cases, the stereotyping of image and roles tend to become oppressive and discriminatory for women.

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

- *Class:* The income group that an individual belongs to determines the life goals and motivation for striving to change. Outlook towards life and problems of living are likely to affect persons belonging to all the groups namely; 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, people belonging to different religions live together and are allowed to practice their religion freely. In majority of the cases, religion holds a very important place in a 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 expressions 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 socialising 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, interactions 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 group 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; mobilisation 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 hospitalised. 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/family; 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 those belonging to lower income-groups, the financial burden may need to be eased out by identifying and mobilising 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 factors – 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 characterised 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 individualise the child's situation and there is a 'problem child' at hand. Hence, there is recognition of need for individualised 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 cannot be sent back home; those who are victims of 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 type. 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 the 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 has 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 anxiety of the 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 mobilise 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, *nariniketans*, 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 trafficking, 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 organisations 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 individualised 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 individualised 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 survivors 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. Besides offering them emotional support, the worker needs to build in them hope for a secure future. The worker enhances the client's resources by coordinating 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 against 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 utilises available legal provisions and safeguards for her protection. There are increasing numbers 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 survivors. 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 an accurate assessment of the condition under study.

For illustrating social casework practice, two cases are presented below.

2.5   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 a 35 year 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 the household chores. Her husband's job required him to be often 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 hospitalisation?

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 for 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 Mobilising Family Support System**

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

- 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.

Any other

Any other help that the client may need or any other suggestion that Mrs. K or Mr. K may 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, 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. Sangeeta meet 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.

Check Your Progress I

Note: a) Use the space provided for your answers.

   b) Check your answers with those provided at the end of this unit.

1) Why was the patient not accepting the doctor's treatment?

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2) What action plan did the worker prepare for helping the patient to accept the treatment?

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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:

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

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

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

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.

2.6 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, freshly qualified young trained social worker, 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 realised 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 a result of the slum clearance scheme of the municipal authorities. She also owned a small shop near her home where she sold basic items of daily needs.

Her younger son Mohan, aged 20 years, was employed 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 up to 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 sick for quite some time but had not been taken to the doctor. Kala had

become depressed and lost her appetite. She never had the energy to do work quickly 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 elder 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.

2) 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 Interaction 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 could 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 on 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.

Check Your Progress II

Note: a) Use the space provided for your answers.

b) Check your answers with those provided at the end of this unit.

1) What social problems are reflected in the client's situation?

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2) How did the worker win the trust of the client's mother-in-law?

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3) Who is the real client in the family casework? Support your answer with reasons.

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4) From the case, what is the kind of relationship of the family under study with other families in the community?

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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.

2.7   LET US SUM UP

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 utilise 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 illustrations and the questions raised in 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 sensitise 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.

2.8   KEY WORDS

Empowerment   :   According to Barker's Social Work Dictionary, empowerment is "the process of helping individuals, families, groups, and communities increase their personal, interpersonal, socio-economic, and political

strengths and influence towards improving their circumstances." Empowerment counters powerlessness and oppression.

Proactive	:	Reaching out to the clients without waiting for them to first seek help. It is opposite to the clinical approach.
Rehabilitation	:	Rehabilitation for persons with physical or mental disability means 'restoration to the fullest physical, mental, vocational, and economic usefulness of which they are capable'.
Dehumanising	:	Degrading; not considering service users as human beings, worthy of respect irrespective of their status in life.
Multidimensional	:	Having many layers and aspects.

2.9   SUGGESTED READINGS

Atwood, Nancy C. (2001), *Gender Bias in Families and Its Clinical Implications for Women, Social Work,* Vol. 46, No.1, January 2001.

Baruth, Leroy G. & Edward H. Robinson, III (1987), *An Introduction to the Counselling Profession,* Prentice-Hall, Inc., Englewood Cliffs, New Jersey.

Brill, Naomi I. & Joanne Levine (2002), *Working with People: The Helping Process,* 7thEd., Allyn and Bacon, Boston

Davies, Martin (2002), *The Blackwell Companion to Social Work,* 2ndEd., Blackwell Publishers, Oxford.

Feltham, Colin & Ian Horton (2000, Eds.), *Handbook of Counselling and Psychotherapy,* Sage Publications, London.

Macarov, David (1995), *Social Welfare: Structure and Practice,* Sage Publications, Thousand Oaks, New Delhi.

Mathew, Grace (1987), *Casework in Encyclopedia of Social Work in India,* Ministry of Social Welfare, Delhi.

Mathew, Grace (1991), *An Introduction to Social Casework,* TISS, Mumbai.

2.10   ANSWERS TO CHECK YOUR PROGRESS

Check Your Progress I

1) The worker accepted the client and with genuine concern for her, collected only the relevant data, the information which would help her understand the client's context and the problem/s affecting the treatment plan of the doctor. She found that the patient's anxiety arose from two main sources:

    a) Apprehensions about risk to life or post-operative complications
    b) Problems due to hospitalisation

These anxieties made the patient resistant to the medical treatment prescribed to her.

   1) The worker decided an action plan and undertook the following interventions:
- Giving accurate information about her medical problem and the chances of recovery.

- Identifying and mobilising family resources (including kinship network-relatives).

- Utilising resources at the disposal of social work department. Hospitals' Social Welfare Departments generally have a number of funds, concessions, free tests or medicines, contacts with other social welfare agencies, list of people available for working on wages, arrangements for temporary stay in or near the hospital and so on.

   2) The worker was guided by the principles of acceptance, client's right to self-determination. She used the techniques of assurance, mobilising community/agency resources.

Check Your Progress II

1)   Various socially constructed realities were responsible for the problem in question:

- Kala was much below the legal age for marriage. Despite her in-laws being in the city for a long time, they still followed many of the traditions, particularly related to marriage, of their native village.

- She also had not been prepared for the role expectations she had to fulfill in her matrimonial home. Transition from a joint family set-up to a small family also had its own stresses.

- Her husband's family had migrated to the city a long time back. Urbanised life-style and family norms had influenced her husband, while she remained socialised in village life.

2) Using the principles of acceptance, non-judgmental attitude and control of personal emotional reactions (maintaining objectivity), as also developing empathy with all the three members and communicating the same made it possible. Effective use of professional relationship proved to be important throughout.

3) While the worker started her work on account of her concern for Kala, she realised quite early that all the three members needed help in achieving effective social functioning. As such the entire family became the client of the worker. The objective was to achieve harmony and positive interpersonal relationships, which would lead to emotional well-being of all the family members.

4) The family was well integrated in the community they were living in. It is clear from the participation of the mother-in-law and later the daughter-in-law in women's group. Also, a neighbour was willing to assist the worker in her interventions.

UNIT 3: SOCIAL CASE WORK IN EDUCATIONAL SETTING

* Dr. Rose Nembiakkim

Contents

3.0 OBJECTIVES

After studying this unit, you should be able to:

- Understand the relevance of social case work in educational setting;
- Know about the current trends and challenges of social case work in educational setting; and
- Chalk out the future prospects for social case work in educational setting.

3.1 INTRODUCTION

'The pen is mightier than the sword', this statement holds true in all respect and hence, people all over seek to be educated as education is a lifelong learning process and is a fundamental human right. This is because educated people make informed choices and become dependent on their ability to take a decision. However, attaining complete and wholesome education is harder than it may seem. Bureaucratic functioning of schools, widening teacher-students ratio, class differences within the classroom, parent-child relationship, etc., can make individual learning impossible. The education system has realised the importance of seeking help from professionals other than teachers to meet the growing demands of the ever changing youth. These pupil specialist-social workers, psychologists,

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physician, special educators, etc., help the school to achieve the goals of wholesome education.

The social worker in particular has seen an increasing demand in the schools. Social worker and educator have common goals. Both aim to bring about holistic development in all learners, so that they become productive adults. Social worker's prime focus is on the individual child and his environment. In order to deal with the problems manifested by the child (client) the social worker uses social case work method. Social case work is a method of social work practised by a large number of social workers in different problem settings. It is based on knowledge, understanding and use of techniques that are skillfully applied to help people to solve problems. Social case work is a method of helping people individually through one to one relationship that taps personal and other resources for coping with problems. In recent times, social case work in educational setting has gained importance due to the changing pattern of adolescents in the educational set up. Comparatively, coming to school for help with the child's problem does not carry stigma that may have been associated with visiting a clinic or any other agencies.

Nowadays, parents are more competitive than the children themselves and therefore, there is a greater readiness to utilise the services of a qualified social case worker in the school.

For a more professional term we shall use the term 'client' to refer to students having problems in the educational setting.

3.2 SOCIAL CASE WORK IN EDUCATIONAL SETTING

The social case worker is a qualified professional who possesses the knowledge, skills and experience needed to work with individuals to solve their problems. These case managements may be done in different settings such as education, health, industry, etc. In this unit, we shall discuss the role of a social case worker with specific reference to the educational settings.

The case worker in an educational setting may be employed in schools, colleges, universities and other learning institutes. In such a setting, the social case worker works with the individual clients and his/ her parents to solve the problems. If need be, the teachers and the peer group and other significant people in particular extended family, siblings, etc., may be involved. It may not be the school policy to work with the parents always to solve the child's problems encountered in the school, but the professional knowledge of the importance of

parent-child relationship in the development of the child makes working with parents' imperative.

In recent times, problems faced by the clients have been addressed more religiously and schools all over have started to take an initiative to employ school social worker to deal with the clients' problem. This may be because the issues and problems faced by clients in the new age are more diverse and may be more complicated which then affects their academic, social and personal well being. Problems faced by the school going adolescents may include a) psychological b) academic c) social/ behavioural and d) emotional/personal. Addressing problems at an early stage helps to build a mentally and emotionally strong individual. The social case worker before working with the child assesses his/ her strengths in coping with the problems and may devise coping strategies to help the child. In most cases it may be best to work with the child alone but in certain case parents' involvement and active participation may expedite the healing process.

1. **Psychological**

   Adolescence is a time of opportunity and change but also of vulnerabilities. The problems faced by adolescents during these times are not discussed openly in the society for fear of rejection. Some common psychological fears among clients are examination related stress, psychiatric problems which may not be diagnosed initially, over indulgence in technology out of fear of missing out on information, childhood abuse, taking the life of crimes to meet certain standards and even thoughts of suicide or attempted suicide due to inability to cope in school. These problems may take time to manifest in the clients but eventually when the academic performance gets affected, the cause may surface. Here, the social case worker works with not only the clients but also the parents to first evaluate the cause of psychological trauma. Once the cause is known the next step is to prevent further psychological trauma. The main aim of the social case worker is to improve the mental health of the victim and ensure perceptions of safety. The social case worker ensures safety by proving timely interventions with the help of the parents and this may be an on-going process. Here, both the parents and the child work together and respond to the psychological needs. The case worker along with the parents then evaluates the effectiveness of the crisis intervention and chalk out future interventions for the overall development of the child.

2. Academic

With the technological development in the society and a vast network of world wide web opened to clients, the most common difficulty faced by adolescents of school going age is academic in nature, i.e., retention of what is being taught and concentration, failing in subjects, under performance in class, etc. As compared to before, there are many things which take away the concentration of school going children in terms of virtual games, online sites and various other multimedia options, and books then take a back seat. This then affects the performance of the child in the class. A studious client may end up failing in most of the subjects due to lack of parental control at home and may end up being an under performer in school. There are also clients with special education needs. They may have conditions like dyslexia, autism spectrum disorders, intellectual disability, attention deficit hyperactivity disorder, etc. These clients lack social adjustment skills, motivation, and self-management skills. In such a situation, the social case worker is of great relevance in the educational setting and helps the clients by teaching them effective study habits, effective memorising skills, effective note taking skills, handling examination anxiety, time management and relaxation training sessions. Here, the support of the parents becomes necessary in order to help the client maintain the exercises given by the social case worker and adhere to it.

3. Social/ Behavioural

Man is a social animal and cannot do without the help and support of another human being. We have studied that family is the first social unit of a child but what was not informed is that if the family is dysfunctional and disorganised then the child may grow up to be socially awkward and end up believing what he/she does or how she/ he behave is normal. Such behaviour may lead to more problems in the school where children from different family background and parenting practices come together. This may affect the performance of the child academically and she/he may be an under achiever in the school and outside and affect his/her relation with the peer group. In worse situations, it may even lead to the self-isolation of the child. The child may then grow up to be a social embarrassment for the family. Here, the role of the parents is more important than that of the child but the social case worker may have difficulty in working with the parents if the parents are not willing to accept that there is a problem in the first place. For the social worker, working with the parents is of

great help as it will help understand the root cause of the problem and work towards developing coping strategies for the child. In such a situation, the social case worker may involve the peer group (classmates) of the child and/or the school through some activities so that a bond is created and helps the child to come out of his/her social awkwardness.

4. Emotional/personal

Every human being has emotions, some are able to express it and some keep it to themselves. Those who are able to express emotions tend to have a better personal life and those who are unable to express emotions-good or bad-have problems in adjusting to life situations. Similarly, children also have emotional problems which may arise due to various factors such as: inability to handle stress, difficulty in handling negative emotions-anger, fear, rejections, etc, broken family, relationship issues, inability to handle stress of failure in class and to take decisions regarding career, subject choice, etc., substance abuse, victim of child abuse and so on. When a child is confronted with such a problem, his/her academic performance gets affected and gradually his/her relation with the peer group and eventually with the family gets worse. Some of the minor problems faced by children may be due to lack of proper coping skills and the social case worker may resort to teaching them life skills which may act as a preventive measure. For effective treatment, the social case worker must therefore be clear that his/her responsibility is to help the child to bring about a change in his/her attitude towards life and situations. The social case worker may conduct specific prevention programmes and deal with child abuse victims, children coming from broken family and substance abuse issues by involving the parents and the child in question. She/he may use selective/targeted strategies and may include intensive individualised interventions and refer the child to experts such as clinical psychologist, psychiatrist, etc.

Check your Progress I

Note: a) Use the space provided for your answer

   b) Check your answer with those provided at the end of this unit.

1) Discuss the academic problems faced by students in today's contemporary time.

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3.3 TECHNIQUES AND SKILLS REQUIRED BY SOCIAL CASE WORKER IN EDUCATIONAL SETTING

Dealing with children requires a certain amount of expertise and hence it is not everyone's cup of tea to deal with children in educational settings with their myriad issues-big or small. A social case worker working in the educational setting should have set techniques and skills. We shall discuss the some of them here.

- Purpose and concern for client system-The social case worker should have a concern to find out problems of clients in the school, must talk to teachers and/or observe client and try an identify children with problems and help them solve the same. He/she should initiate the process by establishing a good rapport and aim at individualised action.

- Expectations- Expectation may be at three levels:
  a) Expectation of the social case worker from the child with whom he/she does the intervention. This expectation may be in terms of how the social case worker feels about the child's ability to cope with the problems and the strategies.
  b) Expectations of the child from the social case worker. This expectation may arise out of doubt from the child as to whether the social case worker will be able to help with the problem or not.
  c) Expectation from the educational settings. This expectation may be from both the social case worker and the child as to how much positive support would they receive from the educational institution.

- Accuracy of empathy and clear communication- Empathy is the ability to understand other's feelings but it should never be confused with sympathy. The social case worker should have the ability to communicate effectively with the clients and perceive their problems sensitively.

- Genuineness and acceptance-The social case worker must be practical in nature and should not get overwhelmed with emotions. He/she must show and express genuine concern and have an honest approach towards the client.

- Authority-Showing empathy and an honest approach do not mean the social case worker should not be strong mentally. He/she should be in control and be able to handle any problem or difficult situation. He/she should possess strength and be helpful, and have knowledge and experience to guide the clients towards holistic cure.

- Active listening- During the initial sessions, most communication between a client and the social case worker in the educational settings tend to be non-verbal communication and this is the time when the social case worker has to be an active listener in terms of identifying the emotions that is being communicated to him/her and even the verbal messages.

- Paraphrasing- Sometimes during a session the clients may not be able to openly discuss or find a word to describe his/her situation. The social case worker can reword, restate or even summarise what has been communicated to achieve better clarity.

- Interpretation- The social case worker must reach beyond the stated problem and examine more deeply the problem situation at hand. This may provide the client with an alternative way of viewing the present problem and put the focus on the clients' strength.

- Self disclosure- A social case workers' disclosure of personal information to the clients may be sometimes therapeutic and help improve the client's emotional or mental state only if used methodically. But if use incorrectly it may signify incompetence and hamper the healing process.

Confrontation-This enables a social case worker to point out certain discrepancies to the clients but it should be done co-operatively. Such confrontation can happen only when trust and honest relationship is established between the case worker and the client.

Check your Progress II

Note: a) Use the space provided for your answer.

    b) Check your answer with those provided at the end of this unit.

   1) Why should a social case worker be an active listener?

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3.4 STANDARDS FOR SOCIAL CASE WORK IN EDUCATIONAL SETTING

The social case workers have to maintain certain standards to work with clients in the educational settings. Without proper standards the social case work will not yield any positive result and it may further hamper the personal growth of the client. The following are few of the standards to be maintained while working with the clients in the educational settings:

a) The social case worker should maintain the confidentiality with regard to the issues of the clients. For the case worker, the client's interest should be of utmost priority. The problems discussed in private should be kept confidential.

b) The social case worker must put into practice the professional skills, knowledge and competence attained to work towards the progress of the clients whose interests are of primary concern.

c) The social case worker must ensure that there is complete involvement of the clients in all the intervention stages while dealing with their issues and if the need arises, the parents of the clients should also be effectively involved.

d) The social case worker should actively participate at the client's level to provide for and coordinate the intervention strategies towards the treatment of the clients and his/her family.

There are also certain standards that have to be maintained by the social case worker while working in the system, i.e., educational setting, while delivering the intervention plan. Let us discuss some of them here.

1. The social case worker in the educational settings may have to intervene at the service system level to support the existing case at hand and to expand the supply of and improve access to needed services.

2. The social case worker has to be aware about the available resource and budgetary limitation in the educational settings and has to be responsible while undertaking the case work functions and activities.

3. The social case worker should participate in the evaluative and quality assurance activities that are designated to monitor the effectiveness of the service delivery system. He/she should ensure professional accountability.

Let us now discuss some of the personal standards that have to be maintained by the social case worker.

a) The most important standard to be maintained is the qualification. The social case worker should be a qualified social case worker accredited by the council on social work education and should possess the knowledge, skills, sensitivity, empathy and experience necessary to successfully perform case work.

b) The social case worker should maintain and develop intra-professional relationship in the educational setting among the different teachers and staff.

c) The social case worker should take up reasonable caseload which will allow him/her to effectively plan, monitor and evaluate.

d) The social case worker must provide for an effective intervention plan without putting too much burden on the parents or the client in particular for the smooth recovery of the client.

Check your Progress III

Note: a) Use the space provided for your answer.

b) Check your answer with those provided at the end of this unit.

1) List any two standards to be maintained while working with the clients in the educational settings by the social case worker.

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3.5 LET US SUM UP

Social case work is a professional service carried out by professional case worker based on scientific principles. The social case worker in an educational setting is a qualified professional who works towards creating a relation between the client and the school. Social case work in the educational setting reduces the effect of environmental, social and institutional barriers that may impede the academic progress and success of a student. A social case worker is an integral part of the education system and provides support to students in elementary, middle and high school and beyond. They have been employed by the

educational institutions across the world since ages but in recent times, their importance has been recognised. In this advanced and diverse society most students tend to encounter challenges beyond the teachers and parents management and comprehension. Such students need support, guidance and opportunities to share their problems and be provided with an effective intervention alternative which can be provided only by the social case worker in the educational settings. The presence of the social case worker in the educational institutes also minimises the role of the parents but here, parents may also be involved depending on the intensity of the problems.

3.6 KEYWORDS

Education : The process of acquiring the body of knowledge and skills. It leads to lifelong learning.

Social Case Work : Social case work is a method of helping people individually through one to one relationship that taps personal and other resources for coping with problems.

Social Case Worker : A qualified professional who possesses the knowledge, skills and experience needed to work with the individuals to solve their problems.

Empathy : The ability to understand and share the feelings of another.

Paraphrasing : Express the meaning of (something written or spoken) using different words to achieve greater clarity.

Confrontation : A hostile or argumentative situation or meeting between two or more people.

3.7   SUGGESTED READINGS

Adelman, H.S & Taylor. (2002), *School Counsellors and School Reform: New Directions*. Professional School Counselling, 5, 235-248.

Baker, S.B (2000). School Counselling for the Twenty-First Century. (3rd Edn). New York, Merrill/Prentice Hall.

Gandhi, A (1990), *'School Social Work Practice: The Emerging Models of Practice in India,'* Commonwealth Publisher, New Delhi.

Jones, R.N (2008). Basic Counselling Skills: A Helpers Manual. (2nd Edn), Sage Publication, New Delhi.

Mears, P.A., Washington, O.R. and Welsh B.L. (1996), *'Social Work Services in Schools,'* Allyn and Bacon, Boston.

From the internet:

www.socialworkers.org/practice/standards/sw_case_mgmt.asp (retrieved on 25th July, 2018)

https://www.jstor.org/stable/pdf/23707285

3.8 ANSWERS TO CHECK YOUR PROGRESS

Check Your Progress I

1. The retention of what is being taught and concentration, failing in subjects, under performance in class, etc., are few of the academic problems students face in educational institutes. As compared to before, there are many things which take away the concentration of school going children in terms of virtual games, online sites and various other multimedia options, and books then take a back seat. This then affects the performance of the child in the class. Thus, the major problems faced by school children are the following:

    a. Psychological,
    b. Social / behavioural,
    c. Academic, and
    d. Emotional / Personal

Check Your Progress II

1. The client may not open up easily to the case worker and it may take a while before relationship of trust is established between the client and the case worker. Also, during the initial sessions, most communication in the educational settings tend to be non-verbal communication and this is the time when the social case worker has to be an active listener in terms of identifying the emotions that is being communicated to him/her including the verbal messages.

Check Your Progress III

1. The following two standards may be maintained while working with the clients in the educational settings by the social case worker:

   a. Maintaining the confidentiality with regard to the issues of the clients.
   b. Putting into practice the professional skills, knowledge and competence while working with the client.

UNIT 4: SOCIAL CASE WORK IN INDUSTRIAL SETTING

* Prof. Rose Nembiakkim

Contents

4.0 Objectives

4.1 Introduction

4.2 Scope and Goals of Social Case Work in Industrial Settings

4.3 Task, Responsibility and Skills of Social Case Work in Industrial Setting

4.4 Employee Assistance Programmes (EAPs)

4.5 Let Us Sum Up

4.6 Keywords

4.7 Suggested Readings

4.8 Answers to Check Your Progress

4.0 OBJECTIVES

After studying this unit, you should be able to:

* Understand the relevance of social case work in the industrial setting;

* Know about the scope and goals of social case work in industrial setting;

* Understand the role, task, responsibility and skills of social case work in industrial setting; and

* Find out social case work as part of Employee Assistance Programmes (EAPs).

4.1 INTRODUCTION

Industrial social work refers to the application of social work knowledge, skills and values to workplace problems. This is needed in today's contemporary society because we live in an industrial age. The machines have contributed to the material wealth of the world. Now, industrial workers find it possible to enjoy more leisure and comfort as compared to few decades ago. However, if the industrial society has placed at the worker's disposal many comforts, it has also created a new threat to the economic, social and emotional security. The

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ever changing economic and technological conditions require workers to keep thinking and reinventing themselves. As a result, jobs for many people, consumes most of their time and there is no time left for family and personal aspirations thus, affecting the way they work. The employer therefore, has the ethical responsibility to provide a conducive working environment which is stress-free and such an environment will also increase efficiency and production value of the workers. In the industry, groups and individuals should be able to live and work together in harmony.

In recent years, social work profession has been involved with many and newer areas of practice. The service delivery differs in many settings but the common practice of facilitating support in difficult settings connects them all. Social work practice in industry is receiving a lot of attention nowadays. The business community is trying its best to improve the overall functioning of its human resource and hence, the services of professional social workers are in great demand.

For a more professional term we shall use the term 'client' to refer to workers having problems in the industrial setting.

4.2 SCOPE AND GOALS OF SOCIAL CASE WORKER IN INDUSTRIAL SETTINGS

The social case worker is a qualified professional who possesses the knowledge, skills and experience needed to work with individuals to solve their problems. These case managements may be done in different settings such as education, health, industry, etc. In this unit, we shall discuss the role of a social case worker with specific reference to the industrial settings.

Industrial social case work is one of the areas in which the case worker extend their skills and expertise in helping managers and employees in the industries and other work places to manage their work related issues and stress and in turn lead to organisational development. The industries all over have started to employ social workers who uses the case work approach apart from other social work methods to a large extend to help the client overcome problems /issues and increase not only the performance of the client but the profit of the business as well. Industrial social work can go a long way in improving the social climate and quality of human relationships in an organisation. Work in today's time, is central to majority of the people. They are known by the position they hold, the kind of work they do and the

kind of company they keep. Hence, having a job and keeping it to assert one's identity is very stressful. Sometimes, many people cannot separate their professional life with personal life. Workers may bring their work related stress to home which may result in disharmony within the family members or a person who is having family related problems may bring such unpleasant attitude to work. Such anxiety and irritation creeps in affecting either the professional work or the personal life. When such a condition prevails among the worker, the work gets affected and the much needed results are not achieved. In the present context, many business houses/firms and industries –big or small-have introduced professional social workers into their work systems to deal with the employees personal or professional problems.

Rationale for Introducing Social Case Work in Industries

Let us now discuss the rationale behind introducing social case worker in the industries:

1. The management's interest in increasing the efficiency of workers in the workplace in terms of productivity as a way of lowering cost and increasing the profit.

2. Industries commitment to corporate social responsibility and garnering a positive effect on the community.

3. Rapid societal and environmental changes that brings out individual stress in the workplace/home front and the community at large.

4. Nature of work-working with chemicals, explosives-giving rise to emotional and functional stress and the physical dangers created by the nature of work.

5. The need to renew connections between family, work and community.

6. The importance of work in everyone's life not only because of the economic benefits but because of its function in ascertaining meaning and value to one's life.

7. The attention given to person-in-environment as the focus of practice in a non-judgemental way.

8. New workplace, new group, new concerns may lead to new set of stress and work related performance anxiety.

9. Working women may feel guilty of leaving home and children and thus affecting their performance and service delivery.

10. Fear of job security among workers or no job satisfaction may further aggravate the environment within the workplace.

There is plenty of scope for social work practice in industry. This is because the larger the

organisation, the more complex are the problems faced by the workers. In small organisations, employees have direct access to the managers so many of their problems get sorted out early. In larger organisations, there is no such opportunity as it follows a 'through proper channel' kind of a routine and workers have access only to mid-level managers who are not decision makers.

Check your Progress I

Note: a) Use the space provided for your answer.

b) Check your answer with those provided at the end of this unit.

1) List out any five rationale for introducing social case work in the industries.

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Goals of Social Case Work in Industrial Setting

The primary goal of a social case work is to optimise client functioning by providing quality services in the most efficient and effective manner to individuals with problem issues. The following are the goals of social case worker in the industrial settings:

a. Enhance the coping and problem-solving capacities of the client to make them more resilient to problems and increase their productivity.

b. Helping the client to develop mental and physical strength and promote a fruitful personal and professional life.

c. Creating and upholding an effective operation system that provides resources and proper services to the work force.

d. Linking and liaisoning people with systems that may provide them with resources, services and opportunities and increase innovative ideas.

e. Encourage decision–making capacity in order to stimulate the individual to evaluate, accept and act upon his/her choice and assessment of problems.

f. Initiate process of improving relationships among employees to become more

effective in their interpersonal relations for the better good of the workplace.

g.   Facilitate the client to exploit their potential to the maximum in the workplace.

h. Working towards improving the capacity of the service delivery system.

According to M.M Desai, the professionally trained social worker can develop his/her programmes at two levels:

- Preventive and developmental,
- Curative.

Preventive and Developmental

1) Informal education programmes aimed at enlightening the workers on issues pertaining to work life such as industrial safety, functional literacy, saving habits, social security, etc.

2) Promoting the use of health and medical programmes for workers and their families such as health check-ups, vaccination campaigns, family planning, informative sessions on nutrition, seasonal diseases, diets, childcare, etc.

3) Sessions on personal and environmental hygiene, etc.

4) Developing recreational programmes like library services, skill competitions, film shows celebration of cultural festivals, vocational guidance, etc.

Curative

Curative programmes are aimed at handing problematic situations faced by the individual worker by helping him to make maximum use of his own potential, capabilities and resources offered by the industry and the community. Counselling can be provided for personal problems such as alcoholism, indebtedness and absenteeism, etc. Social work professional help can be used for preventing problem from happening as also for enriching the life of the workers and their families. Early detection of problems by the social case worker can prevent employees from becoming serious casualties.

4.3 TASK, RESPONSIBILITY AND SKILLS OF SOCIAL CASE WORKER IN INDUSTRIAL SETTING

We have already discussed how social case workers are employed in industries to guarantee healthy working conditions and fair treatment for all people in the work place and to provide such service delivery systems to improve the social functioning and productivity of the employees. In order to address the problem issues among the workers, social case worker has to find ways to address the stressors inside and outside the workplace. Let us now look into the tasks, responsibility and skills of social case worker in the industrial setting.

Some tasks of social case worker in the industrial setting

- Counselling- The social case worker has to counsel client who may show signs of having issues within and outside the workplace.

- Welfare- The social case worker works towards providing for the welfare of the client in the organisation and looks for various opportunities where the client can excel in his/her performance.

- Training- The social case worker should assist proper training of the client in various departments for their overall development.

- Facilitating-The social case worker should facilitate the client in all possible areas for complete recovery.

Responsibility of social case worker in the Industrial setting

- Individual, family and group counselling and home visits at the preventive level.
- Active participation in corporate social responsibility activities and community development initiatives of the industry.
- Employee management and effective intervention of worker related problems and issues.
- Health and educational support which may involve referral services as well.
- Planning for worker's recreational activities.

Skills of social case worker in industrial setting

- Interpersonal skills: The social case worker is equipped with the ability to communicate effectively with the client, negotiate with the workplace on behalf of the client (if necessary) and have the ability to handle conflict situation in the work place.
- Analytical skills: The social case worker assesses the situation and develops strategies for intervention as well as plan future action to help the client to deal with the problem situation and evaluate the intervention process.
- Self-management skills: The social case worker is able to handle work pressure in terms of client problem issues. He/she has time management skills and is able to devote quality time to diverse clientele and works to further his/her professional development.
- Problem-solving skills: The social case worker in the industrial setting has empathy for the client and is able to work around problem situations by staying focussed and planning an intervention which relies on individual problem solving approach.

Social work intervention in industrial sector can be at micro level or macro level. At micro level, the social case worker can provide treatment to the client and his family, employer and union members. Help may be given in relation to problems related to work, self and others around them such as job performance and satisfaction, conflict situations, absenteeism, etc. Problems such as anxiety, depression, phobia, mental disturbance, substance abuse, marital

and family conflict, etc., may also be attended to.

At the macro level, it can be organisational intervention where the social worker can provide individual and group consultation to supervisors and managers at all levels regarding understanding of human behaviour. The scope of social work in business and industry would, in real terms, depend upon:

1. The attitude of the management;
2. The quality of relation between needs of business and the extent to which these needs can be addressed by the social case worker;
3. Cost effectiveness of the services provided.

4.4 EMPLOYEE ASSISTANCE PROGRAMMES (EAPS)

Employee Assistance Programs (EAPs) are worksite based programs and/or resources designed to benefit both employers and employees. EAPs help businesses and organisations address productivity issues by helping employees identity and resolve personal concerns that affect job performance. The main purpose of employee assistance programme is to enhance the quality of life of the workforce. The EAP helps employees to deal with issues pertaining to relationships, family problems and financial problems. Companies offering EAP found that those who participated in the programme were happier, more punctual, and more productive.

Stress counselling was also beneficial for reducing anxiety and depression, improved self-esteem and reduced absenteeism.

Social case work is practiced as part of the EAPs. The following are the benefits of EAPs as identified by Rothermel et al:

1. EAPs leverage the value of the organisation's investment in the workplace by:
   - Improving employee engagement.
   - Improving employee and dependents' skills for successfully responding to life's challenges.
   - Offering employees short-term problem resolution services or referring employees and dependents to mental health treatment services, when indicated.
   - Developing employee and manager competencies in managing workplace stress and improving work team performance.

2. EAPs address the costs of doing business by:
   - Reducing workplace absenteeism and unplanned absences.
   - Reducing workplace accidents.
   - Reducing employee turnover and related replacement costs.
   - Facilitating safe, timely, and effective return-to-work for employees following short-term and extended absences.
   - Reducing health care costs and improving the value of organisational investments in wellness and health promotion, self-care management, continuity of care, and work-related efforts.
   - Improving efficient use of health care through early identification, care management and recovery efforts.

3. EAPs mitigate business risks by:
   - Reducing likelihood of workplace violence or other safety risks.
   - Managing the effect of disruptive incidents, such as workplace violence, injury or other crises including facilitating a swift return-to-work after adverse workplace events.
   - Supporting disaster and emergency preparedness and assisting in minimising the disruption following disasters and emergencies.

- Facilitating successful adjustment to mergers, acquisitions, site closures or other workforce change events.
- Reducing the likelihood of legal action/liability.
- Promoting and supporting companies' drug and alcohol free workplace policies and programs.

Check your Progress IV

Note: a) Use the space provided for your answer.

b) Check your answer with those provided at the end of this unit.

1) Draw the similarities between EAPs and the social case worker in the industrial setting.

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4.5 LET US SUM UP

Industrial social case work is a systematic way of helping individual and groups towards better adaptation to work situation. This determines the role of social work in the industrial setting as well as examines the role(s) of social worker as a case worker which they perform in the workplace which maximise the application of social work skills, knowledge and training. If the industries accept that they are not merely profit-oriented institutions, but have a social obligation as well, then social case workers can play a vital role to help achieve its social goals which may be aimed towards the holistic development and growth of the workers. In today's time it is not only the production or sales of goods that is management's concern, but the social climate inside the organisation, the work culture and the mental health of the workers is of equal concern.

In spite of the obstacles, there is a promising future for social case workers in industry and business houses. The social workers are no longer confined to being a link between the management and the managers but are also now seen as extending their expertise in all occupations and work situations. It is indeed a challenge to the social case workers and the

social work in particular as a profession to apply its skills and knowledge to these non-conventional fields in new and innovative ways to increase productivity and organisational effectiveness.

4.6 KEYWORDS

CSR : Corporate Social Responsibility is a business approach that contributes to sustainable development by delivering economic, social and environmental benefits for all stakeholders.

EAP : Employee Assistance Programs are worksite based programs and/or resources designed to benefit both employers and employees.

Industry : Economic activity concerned with the processing of raw materials and manufacture of goods in factories.

Social Case Work : Social case work is a method of helping people individually through one to one relationship that taps personal and other resources for coping with problems.

Social Case Worker : A qualified professional who possesses the knowledge, skills and experience needed to work with individuals to solve their problems.

Workplace : A place where people work, such as an office or factory.

4.7   SUGGESTED READINGS

Biestek.F (1968). *The Casework Relationship*. London: Unwin University Book.

Desai, M.M (1979). *Industrial Social Work*, TISS, May.

Devi, R. and Prakash, R. (2004). Social Work Methods, Practice and Perspectives (Models of Casework Practice). Vol II, Jaipur: Mangal Deep Publication.

Fisher, J (1978). *Effective Case work Practice- An Eclectic Approach*. New York: MacGraw Hill

Mathew, G. (1992). *An Introduction to Social Case Work*. Bombay: Tata Institute of Social Sciences.

Rothermel S, Slavit W, Finch RA, et al. (2008). Center for Prevention and Health Services. An Employer's Guide to Employee Assistance Programs: Recommendations for Strategically Defining, Integrating and Measuring Employee Assistance Programs. Washington, DC: National Business Group on Health; December.

Sheafor, B., Horejsi, C., and Horejsi,C, G. (1997). *Techniques and Guidelines for Social Work Practice*. London: Allyn and Bacon

Timms, N. (1966). *Social Casework*. London: Routledge &Kegan Paul

4.8 ANSWERS TO CHECK YOUR PROGRESS

Check Your Progress I

1. The rationales behind introducing social case work in the industries are as follows:

   a. Increasing the efficiency of workers in the workplace in terms of productivity.

   b. Industries commitment to corporate social responsibility and garnering a positive effect on the community.

   c. Rapid societal and environmental changes that helps to reduce individual stress in the workplace/home front and the community at large.

   d. Rise to emotional and functional stress and the physical dangers created by the nature of work.

   e. The need to renew connections between family, work and community.

Check Your Progress II

1. Curative programmes are aimed at handing problematic situations faced by the individual worker by helping him to make maximum use of his own potential, capabilities and resources offered by the industry and the community

Check Your Progress III

1. The tasks performed by a social case worker in the industrial setting may be identified as the following:

- Counselling
- Welfare
- Training
- Facilitating

Check Your Progress IV

- Employee Assistance Programs (EAPs) and social case work in the industrial settings are similar in various aspects. EAPs are worksite based programs and/or resources designed to benefit both employers and employees and the social case worker design programmes which are individual oriented and help solve workers issues. Social case workers and EAPs help businesses and organisations address productivity issues by helping employees identity and resolve personal concerns that affect job performance. The main purpose of EAPs and social case worker in the industry is to enhance the quality of life of the workforce. The EAP just like the social case worker helps employees deal with issues pertaining to relationships, family problems and financial problems. Stress counselling for reducing anxiety and depression, improved self esteem and reduced absenteeism is also taken up by the social case worker.