



ರಾಜೀವ್ ಗಾಂಧಿ ಆರೋಗ್ಯ ವಿಜ್ಞಾನಗಳ ವಿಶ್ವವಿದ್ಯಾಲಯ, ಕರ್ನಾಟಕ, ಬೆಂಗಳೂರು

RAJIV GANDHI UNIVERSITY OF HEALTH SCIENCES, KARNATAKA, BENGALURU
4th T Block, Jayanagar, Bengaluru - 560 041

Ref: RGU/ACA/AFF/AHS/Cont/DIMH&NS/2023-24

Dated: 02.11.2023

NOTIFICATION

Sub: Ordinance Governing Regulations and Curriculum of M.Phil
Psychiatric Social Work Course - 2022

Ref: Minutes of the Syndicate Meeting held on 10.07.2023.

In exercise of powers conferred under Section 35(2) of RGUHS Act, 1994, the Ordinance pertaining to Regulations and the curriculum of M.Phil Psychiatric Social Work Course - 2022 is notified herewith as per Annexure.

The above Regulations relating to M.Phil Psychiatric Social Work Course - 2022 shall come into force from the academic year 2022-23 onwards.

By Order,


REGISTRAR

To,

The Principals of all affiliated Allied Health Science Course colleges of RGUHS,
Bangalore.

Copy to:

1. The Principal Secretary to Governor, Raj Bhavan, Bangalore - 560001
2. The Principal Secretary Medical Education, Health & Family Welfare Dept.,
3. M S Building, Dr.B.R Ambedkar Veedhi, Bangalore- 01
4. PA to Vice-Chancellor/PA to Registrar/Registrar (Eva.)/Finance Officer, Rajiv
Gandhi University of Health Sciences, Bangalore
5. All Officers of the University Examination Branch / Academic Section
6. Guard File / Office copy.

**Ordinance Governing Regulations and
Curriculum of PSYCHIATRIC SOCIAL
WORK COURSE– 2022
RGUHS**



**Rajiv Gandhi University of Health
Sciences,
Karnataka, Bangalore**



The Emblem

The Emblem of the Rajiv Gandhi University of Health Sciences is a symbolic expression of the confluence of both Eastern and Western Health Sciences. A central wand with entwined snakes symbolises Greek and Roman Gods of Health called Hermis and Mercury is adapted as symbol of modern medical science. The pot above depicts Amrutha Kalasham of Dhanvanthri the father of all Health Sciences. The wings above it depicts Human Soul called Hamsa (Swan) in Indian philosophy. The rising Sun at the top symbolises knowledge and enlightenment. The two twigs of leaves in western philosophy symbolises Olive branches, which is an expression of Peace, Love and Harmony. In Hindu Philosophy it depicts the Vanaspathi (also called as Oushadi) held in the hands of Dhanvanthri, which are the source of all Medicines. The lamp at the bottom depicts human energy (kundalini). The script "Devahitham Yadayahu" inside the lamp is taken from Upanishath Shanth i Manthram (Bhadram Karnebh i Shrunuyanadev...), which says "May we live the full span of our lives allotted by God in perfect health" which is the motto of the Rajiv Gandhi University of Health Sciencesblem

Ordinance Governing Regulations and Curriculum of M.Phil Psychiatric Social Work Course – 2022

INTRODUCTION TO M.PHIL IN PSYCHIATRIC SOCIAL WORK COURSE

Course Description

Psychiatric Social Work is a specialized branch of Social Work that engages in psychosocial practice, research and training in the field of mental health. The M. Phil Degree (Psychiatric Social Work) is a 2 year full time programme that blends academic, clinical and research components. This programme is open to students who have completed their full time Masters in Social Work, preferably specialized in Medical and Psychiatric Social Work or Clinical Social Work. This course provides a strong multidisciplinary exposure which enhances the knowledge in the field of Psychiatric Social Work involving the streams of Behavioural sciences, Basic sciences and Neurosciences.

The programme is spread across 24 months. Trainees get practical training for a minimum of eleven months in the area of adult psychiatry. The trainees are posted in four adult psychiatry units under the supervision of faculties from the departments of Psychiatric Social Work. Trainees also get practical training in area of Child and Adolescent Psychiatry and Family Psychiatry for a period of three months each and in the area of Neuro Rehabilitation, Psychiatric Rehabilitation, Community Psychiatry, Addiction medicine, Neurology, Neurosurgery and Behavioral Medicine units for a period of month each. Trainees in these postings work with individuals, families, groups and communities in providing psychosocial assessments, interventions and research. Supervised training in the area of therapeutic interventions including case work, group work and community organization is an important feature of this programme. Research in mental health is an essential part of the course that trains them to develop advanced research knowledge and skills.

The trainees are given overall exposure to mental health and behavioural science with the aim to instill the 'untidiness and working alliance among all mental health disciplines (e.g., Psychiatry, Clinical Psychology, Psychiatric Nursing and other allied disciplines)'. The trainees are also given ample privileges and opportunities to develop their clinical and academic skills. The student-trainees are entrusted to take up daily routine clinical and therapeutic activities at both in-patient and out-patient levels. They learn to dispense individual, group, family and community based therapeutic services for people with mental illnesses under the direct supervision of the faculty.

Course Objectives

1. To expose to theoretical and practical aspects of working with individuals, families, groups and communities with mental health needs.
2. To develop understanding about the client/family systems in their socio-economic-cultural milieu and ability to work with them.
3. To acquire skills in the areas of psychosocial assessments and interventions in dealing with persons with mental health needs in India.
4. To enhance knowledge and skills in Psychiatric Social Work research methods and practice.

Expected Outcome

Trainees at the end of the course will have developed greater understanding and application of the psychiatric social work methods, principles and techniques. They are expected to also gain knowledge and skills on human growth and development of behavior, mental health issues and treatment modalities used in individual, groups, family or community in Indian settings. They would be trained in facilitating various

health and welfare measures and in networking with multiple stakeholders across multiple sectors including Gov. and Non-Gov. Organizations (NGOs) to bring about change in social action and policy. This training is expected to elevate them to the status of a professional psychiatric social worker who will have expertise to work nationally and internationally in the areas of clinical, academic and mental health training and research.

Requirements to start M. Phil in Psychiatric Social Work course

1. There shall be an independent Department of Psychiatric Social Work, headed by qualified teaching faculty in Psychiatric Social Work in the institute /university as per Mental Health act, 2017.
2. There shall be minimum three Psychiatric Social Work faculty members on fulltime at the department as specified: One Professor in Psychiatric Social Work, one Associate Professor in Psychiatric Social Work, and one Assistant Professor in Psychiatric Social Work.

Guidelines for faculty recruitment and promotion

Assistant Professor/Lecturer:

1. Post Graduate/Master Degree in Social work (Full Time) from UGC recognized university.
2. Master of Philosophy in Psychiatric Social Work obtained after completion of a full time course of two years which includes supervised clinical training form any University recognized by the University Grants Commission established under the University Grants Commission Act, 1956 or such recognized qualification, as may be prescribed
3. Ph.D in Social Work (preference shall be given for the candidate/s who have obtained Ph.D related to mental health topic/s) subjects, obtained after three years course form UGC recognized University/Institution. (with or without experience)

Associate Professor:

1. Post Graduate/Master Degree in Social work (Full Time) from UGC recognized university.
2. Master of Philosophy in Psychiatric Social Work obtained after completion of a full time course of two years which includes supervised clinical training form any University recognized by the University Grants Commission established under the University Grants Commission Act, 1956 or such recognized qualification, as may be prescribed
3. Ph.D in Social Work (preference shall be given for the candidate/s who have obtained PhD related to mental health topic/s) subjects, obtained after three years course form UGC recognized University/Institution

Teaching experience

1. Eight year of teaching experience, as Lecturer/Assistant Professor, out of which 3 years must be post Ph.D teaching experience in a UGC/NMC recognized teaching/ training mental health institution/college, in the subject of specialty.
2. Merely only research work experience and guest lecturer/teaching assistance shall not be counted as a teaching experience.
3. 5 research publication in reputed/peer reviewed journal

Professor in Psychiatric Social Work:

1. Post Graduate/Master Degree in Social work (Full Time) from UGC recognized university.
2. Master of Philosophy in Psychiatric Social Work obtained after completion of a full time course of two years which includes supervised clinical training form any University recognized by the

University Grants Commission established under the University Grants Commission Act, 1956 or such recognized qualification, as may be prescribed.

3. Ph.D in Social Work (preference shall be given for the candidate/s who have obtained Ph.D related to mental health topic/s) subjects, obtained after three years course form UGC recognized University/Institution.

Teaching experience

1. 10 years of teaching experience out of which 3 years as Associate Professor.
2. Teaching experience in a UGC/NMC recognized teaching mental health institution/college, in the subject of specialty. Merely only research work experience and guest lecturer shall not be counted as a teaching experience.
3. 10 research publication in reputed/peer reviewed journal.

NB: "psychiatric social worker" means a person having a post-graduate degree in Social Work and a Master of Philosophy in Psychiatric Social Work obtained after completion of a full time course of two years which includes supervised clinical training from any University recognised by the University Grants Commission established under the University Grants Commission Act, 1956 (3 of 1956) or such recognised qualifications, as may be prescribed.

Allocation of Research Supervisor:

1. Any regular Assistant Professor/Lecturer, Associate Professor and Professor of the Institution may be recognized as Research Supervisor.
2. Only a full time regular teacher of the concerned Institution can act as a supervisor.
3. A Research Supervisor who is a Professor, at any given point of time, cannot guide more than three (3) M. Phil. An Associate Professor as Research Supervisor can guide up to a maximum of two (2) M. Phil. and an Assistant Professor as Research Supervisor can guide up to a maximum of one (1) M. Phil.

All the above faculties mentioned above will be serving as Teaching faculty, Clinical Supervisors and as Research Guide.

COURSE OUTLINE

Part I (1st year)

Group	Paper code	Paper Title	Duration	Credits	Marks
Group A Paper I	MPSW111	(THEORY) Psychiatric Social Work	60 hours	4	100
Paper II	MPSW112	Psychosocial Perspectives on Mental Health	60 hours	4	100
Paper III	MPSW113	Psychiatry, Including Common Neurological Problems	60 hours	4	100
Group B	MPSW121	Record of Case Reports(5)	540 hours (30 days x 6 months x	36	100

			3 hours)		
Group C	MPSW122	Viva on the scope of the above Papers, Record of Case Reports and Clinical Examinations	---	12	200
Total				50	600

Part II (2nd year)

Group	Paper code	Paper title	Duration	Credits	Marks
Group A Paper I	MPSW211	Social Perspectives of Human Behaviour and Mental Health	60 hours	4	100
Paper II	MPSW212	Psychiatric Social Work Interventions	60 hours	4	100
Paper III	MPSW213	Psychiatric Social Work Research and Statistics	60 hours	4	100
Group B	MPSW221	Dissertation	540 (30 days x 6 months x 3 hours)	36	100
Group C	MPSW222	Viva on the scope of the above papers, Dissertations		12	100
Total				60	500

ADMISSION

1. Eligibility for Admission:

- The course for M. Phil (Psychiatric Social Work) programme is held at the DIMHANS (Dharwad Institute of Mental Health & Neuro Sciences, Dharwad (An Autonomous Institute under Government of Karnataka).
- The course is open to those who have obtained Master's degree in Social Work (M.A. in Social Work) or MSW from a University recognized by UGC, securing not less than 55% marks in the aggregate of the Master's degree (regular) as a whole.

2. Selection of students:

Admission to the course shall be through selection by a duly constituted Selection committee. The selection is based entirely on merit through Entrance Test and subsequent Counseling.

3. Number of Seats:

Not more than 05 candidates per year may be admitted for the course. Of these, one seat may be reserved for Deputed candidates from State Government.

However the intake quota may be revised by RGUHS from time to time.

4. Duration of the programme:

- The course extends to 2 Full Academic years. The leave Rules are governed by RGUHS, Bengaluru.

Block Leave: The trainees are eligible to utilize leave not extending 15 days in a year (15 Days).

5. Curriculum:

This is specified in the Appendix and may be reviewed from time to time.

6. Attendance:

A minimum attendance of 80% in each of the Academic terms of the course is necessary before taking the examination. Course of study must, (unless special exemption is obtained), be continuously be pursued. Any interruption in a student's attendance during the course of the study through illness or other extraordinary circumstances must be notified to the Director of the Institute for appropriate action.

Examination System:

Examination will be held in two parts i.e. Part I & II. Candidate will not be allowed to take the Part II examination unless she/he has passed the Part I examination. The Annual examinations for Part I & II will be held in the month of June every year.

- (a) Supplementary examination will be held for Part I & II as per RGUHS exam Guidelines for candidates who have failed in the Annual examination.

Candidates of Part I

- (i) Need to reappear for all the papers of Group 'A' and Viva voce and Clinical examination of Group 'C' if they do not secure pass marks in Viva voce or papers of Group 'A'.
- (ii) If they have Failed in Group 'B', need to resubmit the Record of CASE REPORTS

Candidates for Part II

- (i) Need to reappear for all the arrears of Group 'A' and Viva voce (Group 'C'), if they have not secured pass marks in Viva voce and /or papers of Group A
- (ii) In case of failing in Group 'B', they have to resubmit their DISSERTATION.
 - (a) A candidate who has not appeared for the Part I of the Annual Examination will be allowed to continue the course for the II Year and is allowed to take the Supplementary examination which is held in the month of December of the year.
 - (b) A minimum of period of 3 months additional attendance is necessary for a candidate before appearing for the examination in case she/he fails to clear Part I&/or Part II within a period of 3 years from the year of admission to the course.
 - (c) The prescribed examination fee as laid down from time to time by the RGUHS, Bengaluru for each Part I & II of the Examination should be paid to the Director of the Institute at the scheduled time??.
 - (d) The application for appearing in Part I & II of the Examination should be accompanied by a certificate issued by the Head of the Department that the candidate has undergone the course of study and has carried out the clinical work and research assignments prescribed.

RECORD OF CASE REPORTS AND DISSERTATION:

- (a) Candidates appearing for Part I examination should submit 3 copies of the Bound volume of 5 Case Reports (Record) to the Head of the Department on of the concerned year, candidates appearing for Part II examination should submit 3 copies of Bound volume of the Dissertation to the Head of the Department on of the concerned year.
- (b) Record of Case Reports will be Evaluated by the members of the Board in charge of Part I examination. The Record of Case Reports along with Internal Assessment marks would be cumulatively considered for results of Group B –Part I.
- (c) The Dissertation will be evaluated by the members of the Board in charge of Part II examination. The Dissertation along with Internal Assessment marks would be cumulatively considered for results of Group B –Part II.

SCHEME OF EXAMINATION

Part I & II examinations shall be conducted at the end of the First and Second year of the course respectively.

PART I

Group	Paper	Duration	Max. Marks	Marks for Written Examn.	Internal Assessment (IA)
GROUP A	THEORY				
Paper I	Psychiatric Social Work	3 Hrs.	100	80	20
Paper II	Psychosocial Perspectives on Mental Health	3 Hrs.	100	80	20
Paper III	Psychiatry, Including Common Neurological Problems	3 Hrs.	100	80	20
GROUP B	RECORD OF CASE REPORTS(5)		100	80	20
GROUP C	VIVA on the scope of the above papers, Record of Case Reports and Clinical Examinations		200	160	40
			600		

PART II

Group	Paper	Duration	Max. Marks	Marks for Written Examn.	Internal Assessment
GROUP A	THEORY				
Paper I	Social Perspectives of Human Behaviour and Mental Health	3 Hrs.	100	80	20
Paper II	Psychiatric Social Work Interventions	3 Hrs.	100	80	20
Paper III	Psychiatric Social Work Research and Statistics	3 Hrs.	100	80	20
GROUP B	DISSERTATION		100	80	20
GROUP C	VIVA on the scope of the above papers, Dissertations		100	80	20
			500		

** From evaluation point of view, Paper III of the Part II is divided as:
Section A: Psychiatric Social Work Research

Section B: Statistics

The question paper will also have two parts. Each part will have 2 main questions and 1 short note, carrying 40 marks. The candidates will be given two separate answer sheets for Section A-Psychiatric Social Work and Section B-Statistics. Section A and Section B will be evaluated by the Members of the Board for examination of Part II.

The Final evaluation will be based on theory, clinical and viva voce of Part I and Part II examinations including Case Record and Dissertation submissions, which will total up to 1100 marks (Part I: 600 marks + Part II: 500 marks).

10. INTERNAL ASSESSMENT:

(a) There will be 20 marks of Internal Assessment (IA) for each of the theory papers, under Group A and group B of Record of Case Reports and Dissertation during I Year and II Year respectively. Also 40* marks of Internal Assessment are allotted for the I Year Clinical Viva voce Examination. The IA marks will be awarded on the basis of written Test, Examination, and Evaluation of the Departmental Academic presentations and supervised Clinical work. These IA marks shall be added to the marks allocated to the respective group of subjects in the Part I and Part II Examinations respectively. The results of the examination shall be declared on the basis of the total score so obtained.

(b) Minimum Prescribed Clinical Work (MPCW): **I year*II Year**

End of

i.	Detailed Case Histories	50	30
ii.	Clinical Interviews	50	20
iii.	Detailed Individual, Family and Social Network Assessment	20	35
iv.	Psychiatric Social Work Interventions (I & II Year)		
	a) Individual and Group Levels	200 Hours	
	b) Family Intervention	200 Hours	

(Consists of 50 hours each of psychiatric social work interventions with outpatients and inpatient including adults, family, children and adolescents, neurology and neurosurgical patients, psychiatric and neurological rehabilitation patients, addiction medicine patients and community extension beneficiaries)

*includes work done in I year

11. BOARD OF EXAMINERS

The Examination shall be conducted by two separate boards for Part I and II. **Part I Board consists** of 4 examiners, two of whom will be External examiners and two will be Internal Examiners. This Board will have two Social Work faculty members, preferably with psychiatric social work background (of whom one shall be an External examiner); the other two External Examiners are; one Clinical psychologist and one Psychiatrist. The Chairperson of the Board shall be the senior most among the internal examiners from Department of Psychiatric Social Work, DIMHANS, Dharwad.

Each Theory Paper and Record of Case Reports of Part I examination shall be evaluated by the Members of the Board for the allotted marks.

Part II Board consists of 4 examiners, two of whom will be External examiners and two will be Internal examiners. Part II will have one Statistician (internal) and 3 social work faculty members, preferably with psychiatric social work background (of whom one shall be external examiner and 2 will be internal examiners). The Chairperson of the Board shall be the senior most among the Internal

Examiners from the Department of Psychiatric Social Work, DIMHANS, Dharwad. Each of the Theory papers and Dissertation of Part II examination shall be evaluated by the Members of the Board for the allotted marks.

The respective chairpersons shall obtain the question papers from other examiners of the Board and finalize the question papers.

Viva voce examination and Clinical examination for Part I and Viva voce for Part II shall be conducted by the Respective Boards.

12. APPEARANCE FOR EACH EXAMINATION

- (a) A candidate shall appear for all the papers and submit Record of Case Reports/Dissertation as required for Part I & II under Regulation No. 8(a).
- (b) No candidate shall be permitted to appear either in Part I or Part II examination for more than thrice.

13. MINIMUM FOR PASS

- (a) No candidate shall be declared to have been successful in either of the two parts of the M. Phil examination unless she/he obtains not less than 50% of the marks in:
 - i. Each of the theory paper
 - ii. Each of the clinical viva voce examination
 - iii. Record of Case Reports submission (in case of Part I only)
- iv. Dissertation (in case of Part II only)

(b) GRADATIONS

- i. A candidate who obtains above 75% of the marks as an aggregate in both the Parts I & II will be declared to have passed with Distinction.
- ii. A candidate who secures between 60% and 75% of marks as an aggregate of both the Parts shall be declared to have passed in I Class. The other successful candidates shall be declared to have fulfilled the requirements for conferring of M. Phil degree in II Class.

PRACTICUM

Each trainee selected for the course shall be rotated for training in various clinical units for working skills related to mental health and allied disciplines. For this purpose, trainees start their placement in adult mental health, Child and adolescent mental health, Family mental health, Addiction medicine Centre, Neurological and Neurosurgical departments, Community mental health, Psychiatric and Neurological Rehabilitation and Behaviour Therapy unit. Each student is assigned to a psychiatric social work consultant under whom the student is expected to carry out psychiatric social work assessment and interventions during the two years of M. Phil in Psychiatric Social Work training programme.

M.PHIL PSYCHIARIC SOCIAL WORK CURRICULUM

Paper Code	MPSW111	<i>Hours</i>
Paper Title	Psychiatric Social Work	
Duration	60	
Credits	4	
Introduction	This paper introduces the various fields of Psychiatric Social Work practices from its inception and the practicing principles. The paper has a scope of understanding various theoretical models and practice settings of Social Work in the context of mental health. Legislative provisions and ethical considerations in the social work practice and education are the scope of the paper.	
Course objectives	<ul style="list-style-type: none"> • To develop an understanding about the basic concepts and principles of Psychiatric Social work. • To understand the process of Case Work, Group Work and Family Work • To understand the various practice settings by Psychiatric Social Work professionals • To inculcate legislative and ethical information in the practice of Psychiatric Social Work. 	
Unit 1	<i>Field of Psychiatric Social Work:</i> Basic concepts and historical development; social reform movements in India, <i>Methods in social work</i> (Case Work, Group work, Community organization, social action, social welfare administration, social work research).	4
Unit 2	<i>Principles and Assessment of PSW Practice:</i> Principles of Psychiatric Social Work practice with individuals, families, groups and communities. Process of Psychosocial assessment.	4
Unit 3	<i>Mental health team:</i> Working with Multidisciplinary team: Mental hospital as a social system and psycho-social aspects of hospitalization. Role and responsibilities of a psychiatric social worker, challenges and limitations.	4
Unit 4	<i>Theoretical framework in Psychiatric Social Work:</i> Therapeutic Models in Psychiatric Social Work to work with individual and family (Psychosocial, problem solving, functional, task centred approach, client centered approach, strengths based model, resilience model, cognitive approach, psycho-educational).	6
Unit 5	Case Work: Definition, nature, scope and process. Case work relationships, interview, listening, recording, termination and brief case work	4
Unit 6	Group Work: Characteristics, types (therapeutic and rehabilitative activities), purposes, group dynamics and stages of therapeutic groups group work process, principles and techniques. Application of group therapy in clinical settings: patient groups, caregivers groups, self-help groups.	6
Unit 7	Family Work: Origin, development, process, predominant characteristics of family (forces), family dynamics and interaction, problem families, Principles of Working with Families: Family life cycle stages, promotional/preventive activities (family and marital environments).	4
Unit 8	Family Intervention Techniques: Approaches to family intervention, family therapy (different models), family life education, and interventions for families in crisis.	6
Unit 9	<i>Social subjects and its relevance to mental health settings:</i> 1) Social Policy	6

	(Concept of welfare state, Indian constitution, Fundamental rights and Directive principles, Five year plans, evolution of social policy in India), 2) Social development (Meaning, concept and indicators), 3) Social Justice: (Civil rights, Human rights, Social defense, Social security)	
Unit 10	Intervention Settings in Mental health institutions: Inpatient and out-patient, de-addiction, child and adolescent psychiatric units, family psychiatry unit, rehabilitation, neurology, neurosurgery, emergency services and community mental health centres	6
Unit 11	<i>Legislations and Programmes related to Psychiatric Social Work Practice:</i> Transplantation of Human Organs Act, 1994. The Persons with Disabilities Act,(revised)2016. Narcotic Drugs and Psychotropic Substances Act, 1985, The protection of children from sexual offenses (POCSO) Act 2012, The protection of women from domestic violence Act 2005. Juvenile justice (care and protection) Act 2015, Rehabilitation council of India Act 1992. Legislations related to adoption. UNCRC and UNCRPD; Mental health related International treaties, Mental healthcare act of 2017, National Trust Act,1990 National Mental Health Programme, District Mental Health Programme; Five year plans, National Rural Health Mission; Integrated Child protection Scheme; National Human Rights Commission	6
Unit 12	<i>Ethics, Values and Professional Social Work Bodies:</i> Ethical guidelines related to clinical practice research and profession of social work. Value concepts underlying psychiatric social work practice in mental health. Health information privacy. Professional Bodies working in the field of Social Work (NASW, IASSW, IFSW, ISPSW, NAPSWI)	4

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Paper Code	MPSW 112	Hours
Paper Title	Psychological and Social Perspectives on Mental Health	
Duration	60	
Credits	4	
Introduction	This paper would help to understand the basic of Psychology. The scope of this paper is to give a theoretical and clinic base to psychology in a mental health setting to trainees in PSW. The paper hence would focus on introduction to psychology, important concepts, fields in psychology and recent trends.	
Course objectives	<ol style="list-style-type: none"> 1. To understand the fundamentals of psychology in a mental health setting 2. To gain an insight about important concepts used in psychology 3. To understand the various fields of psychology 4. To update about recent trends in clinical psychology 	
Unit 1	<p>Introduction to Psychology</p> <ol style="list-style-type: none"> a) Definition of psychology b) Areas of psychology: clinical psychology, school psychology, counselling psychology, industrial and organizational psychology, c) Methods in psychology: observation, enquiry, experimental designs d) Application of Psychology to Psychiatric Social Work 	4
Unit 2	<p>Indian Psychology:</p> <ol style="list-style-type: none"> a) Concepts in Indian Psychology b) Application of Indian Psychology in therapy c) Yoga and its applications/ research 	4
Unit 3	<p>Social pathologies:</p> <ol style="list-style-type: none"> a) Definition and theories of social pathology b) Causes of social pathology. c) Suicide (theories, assessment and management) d) Social pathology in Indian context 	4
Unit 4	<p>Learning:</p> <ol style="list-style-type: none"> a) Definition and principles of learning b) Theories of learning: classical conditions, instrumental conditioning, social learning c) Application of learning theories in clinical set up. 	4
Unit 5	<p>Developmental psychology:</p> <ol style="list-style-type: none"> a) Phases of development: childhood, adolescence, adulthood and oldage b) Motor development: theories of motor development c) Speech and language development: theories of speech and language development d) Cognitive development: theories of cognitive development <p>Emotional and moral development: theories of moral and emotional development</p>	4
Unit 6	<p>School Psychology:</p> <ol style="list-style-type: none"> a) Issues for school counseling (bullying, truancy, poor scholastic performance etc) b) Early identification and management of school related issues c) Roles, responsibilities and scope of a school counselor 	4
Unit 7	<p>Cognitive Psychology:</p> <ol style="list-style-type: none"> a) Cognition (definition, concepts, theories) 	6

	<ul style="list-style-type: none"> b) Memory and forgetting (Definition, Theories and assessments of in clinical set up) c) Language d) Intelligence (theories, measurement, IQ, EQ, SQ) 	
Unit 8	<p>Social Psychology:</p> <ul style="list-style-type: none"> a) Introduction to social psychology and applications of social psychology b) Attitude, Prejudice, Stigma and Discrimination c) Social self, self-concept, and self esteem d) Leadership e) Intergroup conflicts and dynamics (aggression and violence) f) Definition, theories of motivation and emotions (including frustration and stress) 	8
Unit 9	<p>Psychological assessment and testing (Indian adaptation):</p> <ul style="list-style-type: none"> a) Intelligence, theories of intelligence and assessment b) Personality, theories of personality and personality assessment c) Behavioural assessment d) Psychodiagnostic assessments, e) Tests of achievement and aptitude <p>Neuro psychiatric evaluations and assessments</p>	8
Unit 10	<p>Counseling Psychology:</p> <ul style="list-style-type: none"> a) Definition and Goals of Counseling b) Types of Counseling c) Stages and Process of Counseling d) Qualities of a Counselor 	4
Unit 11	<p>Psychological theories and clinical management</p> <ul style="list-style-type: none"> a) Psychoanalysis and psychodynamic theory b) Social Learning theory c) Humanist theory d) Cognitive Behaviour Therapy e) Play therapy 	6
Unit 12	<p>Recent trends in psychological and social perspectives on mental health</p> <ul style="list-style-type: none"> a) Recent developments in the field of psychology: self psychology, positive psychology, strengths and resilience theories. b) Implication of recent developments in the clinical set up 	4
Bibliography		
<ol style="list-style-type: none"> 1. Carr, A. (2003). <i>Abnormal Psychology</i>: Taylor & Francis. 2. 		

Paper code	MPSW113	<i>Hours</i>
Paper Title	Psychiatry, Including Common Neurological Problems	
Duration	60	
Credits	4	
Introduction	This paper would help trainees to understand the basic of Psychiatry, Neurology and Neurosurgery, which would help them in turn in clinical practice.	
Course objectives	<ul style="list-style-type: none"> • Trainees would be able to understand the psychiatric, neurological and neurosurgical disorders • Trainees would be able to gain basic knowledge and skills to identify psychosocial problems of people with psychiatric, neurological and neurosurgical disorders. • Trainees would be able to formulate and implement psychiatric social work interventions for people with psychiatric, neurological and neurosurgical illness. • Trainees would be able practice psychiatric social work interventions in clinical and nonclinical settings. 	
	PART A	
Part A Unit 1	Psychiatry as a scientific discipline: Concept of Mental Health: Approaches to mental health, history, classification (ICD, DSM, ICF)	4
Unit 2	Biological foundation of Behaviour: Brain, its structure and functions, neurons, neural transmission, synaptic transmission	4
Unit 3	Psychosocial Diagnosis and pathways: Social Diagnosis, Socio-genesis of mental disorders (Stress and coping theories, Social theories: labelling, social drift, Family theories: communication, dynamics), Z category classification in ICD, Pathways to mental health care (including cultural and traditional beliefs and practices).	6
Unit 4	Types of Mental Disorders and prevalence: Severe mental disorders and common mental disorders, mental retardation, organic mental disorders, personality disorders and sexual disorders	4
Unit 5	Psychiatric practice in different setting: Child and adolescent psychiatry, Social Psychiatry, General Hospital Psychiatry, Forensic psychiatry, Addiction Medicine, Community Psychiatry, Transcultural Psychiatry and Geriatric Psychiatry	6
Unit 6	Biological Interventions for psychiatric disorders: Pharmacotherapy, side effects management, ECT, TMS, FNRI.	4
Unit 7	Psychosocial Interventions for psychiatric disorders: Psycho education; Behavioural therapies, Cognitive Behavior Therapy, Play Therapy, Family therapy; Psychosocial mediums of care, Yoga Therapy, Art Therapy (Dance, Music, Drama, Painting), legal provisions and welfare benefits for people with mental illness	6
Unit 8	Psychiatric Rehabilitation: Principles of rehabilitation. Rehabilitation settings (Institution and non-institutional setup); Stakeholders in rehabilitation services, Community based rehabilitation, Independent Living	6

	Skills and Basic Living Skills, Vocational Rehabilitation, Social Skills Training, Self Help group movement and people with mental illness, Networking and Liaisoning, Advocacy and empowerment of people with mental illness and forming federations	
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PART B		
Unit 9	Functional Anatomy of Nervous System: Autonomic, Central and Peripheral Nervous System, Trauma and acute emergencies in Neurology and Neurosurgery, Etiological factors contributing to development of various neurological and neurosurgical disorders	4
Unit 10	Common Neurological disorders: Infections of the Nervous System, Paroxysmal Disorders (Epilepsy and Migraine), Neurodegenerative Disorders including Dementias & Movement Disorders, Cerebrovascular disorders, Demyelinating disorders, Neuromuscular disorders, peripheral neuropathy	6
Unit 11	Common Neurosurgical Disorders: Tumors of CNS, Spinal Cord Injuries and Infections, Congenital Anomalies of Central Nervous System, Traumatic Brain Injury : Description, etiology, related deficits, management	4
Unit 12	Psychosocial Interventions in Disorders of the Nervous System, Neuro – Cognitive – Psychosocial Rehabilitation. Pre and Post-Operative Counseling. Discharge Planning. Genetic counselling. Aids and appliances. Networking, breaking the bad news, pain management. Palliative and End of Life care. Multidisciplinary team approach in neurological rehabilitation	6

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Paper code	MPSW211	Hours
Paper title	Social Perspectives of Human Behaviour and Mental Health	
Duration	60	
Credits	4	
Introduction	This paper discuss about various social issues in various contexts of social change. This paper would throw light on the emerging social issues in the changing society in relation to various vulnerable groups such as women, elderly, children and its impact on the mental health. The scope of the paper include understanding mental health perspectives of various social issues	
Course objectives	<ul style="list-style-type: none"> ▪ To learn the changing social context and the concept of social change ▪ To understand the social issues emerging due the social change ▪ To develop mental health perspectives of emerging social issues in India 	

Unit 1	Social Issues and Social Change: concept, meaning and theories. Social Organization and Social Change- Social Change in Industrialized and Pre- industrialized Societies- Causes of Social Change- Rapid Changes in Material than in Non-material Culture- Social Control and Social Organization- Social Organization and Modern Society- Social Organization: its Equilibrium and Disequilibrium- Concept of Social Disorganization- Causes Giving Rise to Social Problems.	4
Unit 2	Context of Social Problems in India: Multiculturalism (race, caste, language, religious and cultural differentiation), democratic system (federal structure, political mobilization, and people's participation), education (colonial legacy, relevance of modern education system), Urbanization, westernization, globalization (neo colonialism, role of international agencies), privatization, liberalization, Population explosion, health delivery systems.	4
Unit 3	Social Issues in India: Poverty (theories on poverty and mental health), communalism (concepts, factors generating communalism, measures for combating communalism), riots (means for grievance redressal, social and political significance, measures to deal with the issues), Corruption (concepts, forces generating corruption and suggestions for dealing with corruption), rape, honour killing, unemployment, crime and delinquency	7
Unit 4	Caste and Tribal Issues: Social Stratification according to caste, Manusmriti, Sanskritization, Issues faced by Scheduled tribe and Scheduled caste, Tribal culture, Land alienation, Barriers to mental health care in minority populations	4
Unit 5	<i>Special populations affected in society:</i> homeless mentally ill, beggars, disabled (all disabilities), PLWHIV, Elderly (retirement, ageing, health and adjustment, family relation and care of the aged) refugee/ displaced/migrated population, affected in war, people in conflict with law	4
Unit 6	<i>Family and intimate partner relations</i> – Changing family systems – nuclear, joint, extended, cohabiting couples, contemporary marriage and family issues - Rapid Changes in the Role and Status of Partners; Causes of Family Disorganization- Social Consequences of Desertion and Divorce- Divorce and Economic Position,	4
Unit 7	<i>Environmental Degradation</i> (development measures and their impact on environment): Types – Natural, Human made, man animal conflict; Causes – War, Conflicts, communal clash, deforestation; ecological degradation, conservation (air, water, noise) and legal provisions. Phases of disaster – rescue, relief, rehabilitation, restoration; psychosocial impact – psychological, social, economic and physical impact; vulnerable groups; guidelines on psychosocial support and mental health – NDMA, IASC, SPHERE guidelines	7
Unit 8	<i>Gender:</i> discrimination (concepts, causes), issues related to sexual minorities (LGBTI issues) family and child violence (concepts, causes, measures), Women Rights: legal issues, women empowerment, working women, violence against women and cultural constraints.	7
Unit 9	<i>Children:</i> children in difficult circumstances (single parent, orphans, disabled, refugee/migrated children, children with HIV, disaster and armed conflict) Adoption, child labour, child abuse and neglect, child trafficking, street children, institutional, and non-institutional care, single child, infanticide, school issues, children and legal issues., national and international organizations working with children	7
Unit 10	<i>Adolescents and Youth:</i> Youth movement, youth policies, education and employment, strategies for high risk behaviour reduction, adolescent issues, Adolescent sexuality, national and international organizations working with adolescents and youth. Influence of Technology: Internet addiction, mobile addiction, cyber crime, influence of mass media	4
Unit 11	<i>Religious and Spiritual Well Being:</i> Health practices and religion, religious institutions.	4
Unit 12	<i>Role of PSW</i> in assessing and intervention with different social issues at various levels in the society, using multisectorial perspective. (Each of the social issues	4

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Paper code	MPSW212	Hours
Paper Title	Psychiatric Social Work Interventions	
Duration	60	
Credits	4	
Introduction	This paper would help students with psychiatric social work to understand the various interventions at the individual, family, group and community level. It would also throw insight on the preventive and promotive interventions apart from the basic characteristics required for	

	an effective therapist	
Course objectives	<ul style="list-style-type: none"> ▪ To understand the spectrum of psychiatric social work interventions in various settings ▪ To Gain insight into the preventive and promotive interventions in the field. ▪ To understand the recent trends in Social Work education and practice nationally and internationally ▪ To enhance skills and characteristics as an effective therapist. 	
Unit 1	<i>Community:</i> Concept, dynamics, types, characteristics and functions. Community participation and education (different models of community participation), understanding and utilizing social supports in the community, community treatment approaches, camp approaches, case management and assertive community treatment and community mental health literacy	6
Unit 2	<i>Training of professionals,</i> paraprofessionals and volunteers in the areas of adolescent education, child sexual abuse prevention, life skills education and student enrichment programmes, stress management programmes, psycho-social care in disasters and disaster preparedness	6
Unit 3	<i>Inter-sectoral approach</i> in working with persons with physical disability and multiple disabilities. Role of voluntary social service organizations, involvement of community stakeholders and action groups for advocacy and social action (National and International organizations like UNICEF, Red Cross, ACMI etc)	6
Unit 4	<i>Interventions of Social Action:</i> Social Advocacy, Rights based approach, initiating Social Policies, Advocacy groups and their work in area of mental illness, Social policy initiatives and interventions in the last 1 decade, internationally and in India in the area of mental health and social work	6
Unit 5	<i>Preventive and Promotive Interventions:</i> Mental Health education (adolescent, pre-marital, family enrichment programme) Awareness programmes, Interventions to reduce stigma, discrimination, interventions to improve mental health (AYUSH, Diet, Exercise, Recreation, Sleep Hygiene). Interventions to improve psychological well-being, personality development, wellness training	6
Unit 6	<i>Characteristics and skills of a therapist:</i> Characteristics of an effective therapist, competency and skills required for conducting case-work, group work, community organization, social action projects, social work research and social welfare administration	4
Unit 7	<i>Psychiatric Social Work settings in Government and NGO setting:</i> Family service agencies, child welfare agencies, Educational setting, correctional institutions, general hospital settings and de-addiction centres, Geriatric care settings, Rehabilitation services	6
Unit 8	<i>Liasoin and Networking:</i> Liaison with Government and Non-Government organizations in fields of Health, Welfare, Disability, Education, Social Justice, Labour and Employment.	3
Unit 9	<i>Field Education in Psychiatric social work:</i> Psychiatric Social Work practice, Field instructions, supervision, documentation and evaluation in psychiatric social work practice.	4

Unit 10	Industrial Social Work: Roles of HR/ Social Worker professional, Corporate Social Responsibility, aspects of Industrial relations and Organizational Behaviour (IPOB)	4
Unit 11	<i>Psychiatric social work Education: Teaching methodologies: Teaching for a professional programme (participatory teaching, lecture method with our without audio-visual, brainstorming, group discussion, role plays etc). Professional development in PSW (Career opportunities, continuing Social work education, Measures of ensuring standards of PSW Practice), Technology and social work</i>	6
Unit 12	<i>National and International Social Work: Recent Trends, emerging concepts, practices, programmes and organizations.</i>	3
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Paper code	MPSW213	Hours
Paper Title	Psychiatric Social Work Research and Statistics	
Duration	60	
Credits	4	
Introduction	This paper would help students of Psychiatric social work; understand the basics of quantitative and qualitative research. Also it would give them practical training in statistics, steps involved in research process, report writing and in utilizing various software for analyzing the quantitative and qualitative data collected during research work.	
Course Objectives	<ul style="list-style-type: none"> ▪ Student will be understand the theoretical back ground of scientific psychiatric social research, methodology, techniques in the context clinical and social issues. ▪ Student will be able to apply research knowledge, techniques and skills to various clinical and non-clinical issues. 	
PART A- Psychiatric Social Work Research		
Unit 1	<p>Scientific Method of Social Research in Psychiatric Social Work:</p> <ul style="list-style-type: none"> ▪ Meaning of Research ▪ Distinctiveness of Scientific Research ▪ Philosophy, approaches and theories in social work research ▪ Nature of scientific method. The relevance of scientific inquiry in psychiatric social work research <p>Cause and effect relationship: General principles in detecting causal relations and Mill's Canon.</p> <ul style="list-style-type: none"> ▪ Concept and hypothesis, abstraction, conceptualization, re-conceptualization, theorization and reification. Hypothesis - null and alternative hypothesis. ▪ Ethics in social work research ▪ Principles for protecting human subjects ▪ Ethical safeguards of research: confidentially, Informed consent. Institutional review board, Monitoring study effects and conflict of interest. 	5
Unit 2	<p>Quantitative Research Designs:</p> <ul style="list-style-type: none"> ▪ Quantitative research: descriptive design, exploratory design, quasi experimental design, cross sectional designs, single group design, completely randomized design, randomized block design and Latin Square design. ▪ Mixed method design, logic of group designs and 	6

	<p>group designs in psychiatric social work practice</p> <ul style="list-style-type: none"> ▪ Threats to the validity of experimental findings, external validity, extraneous factors in experimental designs and controlling them. ▪ Quantitative methods of data collection 	
Unit 3	<p>Quantitative Sampling Techniques:</p> <ul style="list-style-type: none"> ▪ Meaning of sampling, sampling determination/sample size (subject to variable ratio), requisites of good sampling, sampling distribution, sampling and non-sampling errors. ▪ Random and non-random samples, different methods of sampling, and methods of minimizing non sampling errors. 	6
Unit 4	<p>Qualitative Research:</p> <ul style="list-style-type: none"> ▪ Meaning, functions of qualitative research, strengths and weakness of qualitative research. ▪ Qualitative approaches to inquiry (Ethnography, Narrative, Thematic, Phenomenology, Field Research, Grounded Theory, and Case study research), emic and etic perspectives. ▪ Qualitative methods of data collection, sample selection. ▪ Differences between Qualitative and Quantitative approach. 	4
Unit 5	<p>Scale construction and Standardization:</p> <ul style="list-style-type: none"> ▪ Types of scales, use of scale, construction of scale, steps in scale construction, item development, common response set biases and methods of Eliminating/controlling response set biases. ▪ Establishing psychometric properties of scale: Different types of reliability-Internal consistency Cronbach Alpha, Test retest reliability, Interrater reliability, split half reliability and validity – face validity, content validity, concurrent validity, discriminant validity and factorial validity. 	4
Unit 6	<p>Data analysis and Scientific Writing:</p> <ul style="list-style-type: none"> ▪ Data coding, data entry, methods of presenting research data in qualitative and quantitative software (tabular and diagrammatic) ▪ Steps in writing research proposals and reports ▪ Writing scientific publications, types of scientific publication: original research article, Concept Paper, systematic review, case reports. ▪ Trial registration ▪ Styles of referencing and reference management using software (Medley/ Endnote/ Zetero) 	5
Part B- Statistics		
Unit 1	<p>Basic Statistics:</p> <ul style="list-style-type: none"> ▪ Levels of measurement and selection of appropriate statistical tests Descriptive Statistics ▪ Basic probability theory and probability distributions ▪ Test of Normality - Kolmogrov Smirnov test and Shapiro Wilk test 	5

	<ul style="list-style-type: none"> ▪ Tests for Hypothesis analysis, one-tail and two-tail test, confidence intervals, type 1 and type 11 errors. 	
Unit 2	<p>Parametric Tests:</p> <ul style="list-style-type: none"> ▪ Assumptions for parametric tests ▪ Correlation and Regression ▪ t tests; one-way and two-way (F test) ▪ Basic concepts of analysis of Covariance and RMANOVA. ▪ Missing Data Analysis, Effect Size Analysis (Cohen's d, Cramer's V) 	5
Unit 3	<p>Non Parametric Tests:</p> <ul style="list-style-type: none"> ▪ Principles and Commonly used methods, chi-square, z test, Sign test, Wilcoxon Signed rank test, Mann-Whitney test, Median test, Rank Correlation and Kruskal- Wallis Test 	5
Unit 4	<p>Multivariate and Meta -Analysis:</p> <ul style="list-style-type: none"> ▪ Basic concepts of Multivariate Analysis its applications ▪ Multivariate regression analysis. ▪ Meta-analysis 	5
Unit 5	<p>Qualitative analysis:</p> <ul style="list-style-type: none"> ▪ Data saturation and qualitative data analysis: ▪ Content analysis ▪ Narrative analysis ▪ Conversational analysis ▪ Thematic Analysis 	5
Unit 6	<p>Software for analysis:</p> <ul style="list-style-type: none"> ▪ Quantitative Software: SPSS/ R Software ▪ Qualitative Software: Atlas ti/ NVivo/ RQDA/ Miner Lite 	5

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