




Government of Maharashtra
Dr. Homi Bhabha State University, Mumbai
Elphinstone College



synapse
...where minds meet
A Quarterly Magazine

Social Identity & Mental Health

FROM THE INDIVIDUAL
TO THE COLLECTIVE:
COMMUNITY MENTAL HEALTH
page 12

THE PSYCHOLOGY OF
DEHUMANISATION
page 17

COMPLEX TRAUMA:
AN OVERVIEW
page 21

STEPS TOWARDS
INCLUSION
page 25

**CONVERSATION WITH
Dr. YASHPAL JOGDAND**
Associate Professor, IIT Delhi
page 7



Image source: Medium

Inaugural Edition- October '24



HBSU

Dr. Homi Bhabha State University

विश्वविद्यालयः बौद्धिकसंस्कृतेः प्रेरणास्रोतः अस्ति
अर्थात् विद्यापीठ हे बौद्धिक संस्कृतीची प्रेरणा स्रोत असते।




VISION

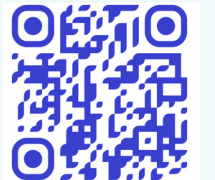
"To be a premier institution of higher learning, committed to academic excellence, research, innovation, and social transformation, that prepares future leaders for a sustainable and equitable world."

MISSION

- Our mission is to provide high-quality education, foster critical thinking, communication, collaboration, creativity and encourage innovative research that leads to social transformation.
- We aim to empower our students with the necessary skills, knowledge, and values to contribute to the betterment of humankind.
- We strive to create an inclusive, diverse and welcoming environment that promotes personal growth, teamwork, ethics and leadership development.

Website :<https://hbsu.ac.in/home>
Contact: 022-35136751
Mail Id: indo@hbsu.ac.in
Address: Dr. Homi Bhabha State University
Mahatma Gandhi Road , Fort ,
Mumbai 400032

 [@Dr.HomiBhabhaStateUniversityMu](https://www.youtube.com/@Dr.HomiBhabhaStateUniversityMu)
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Foreword



Prof. Vilas Padhye
Head, Department of Psychology

The five evils of *Kaam* (Lust), *Krodh* (Rage), *Lobh* (Greed), *Moh* (Attachment), and *Ahankar* (Ego) now have five modern counterparts to keep them company – Insta, X, WA, FB, and YouTube. In these challenging times, launching an academic magazine and expecting students to read and appreciate its content (academically) is indeed a daunting task. However, when my editorial team of young, enthusiastic students from our newly launched master’s program showed keen interest, I was equally buoyed.

Teachers stand as the last defenders of the citadel of social values against the relentless onslaught of Big Tech and its bots that seem bent on enslaving humanity. This might sound far-fetched, but I am neither agnostic nor averse to technology; it's just that parents have given up, grandparents have faded into history, friends have turned virtual, and relationships have become synonymous with breakups. Yet, reading and writing, absorbing and expressing, contemplation and critique, articulation and enunciation – these are the very human attributes that have sustained cultures and civilizations for millennia.

So, here I stand, firmly behind my students, supporting their editorial endeavors, encouraging them to write, and urging them to read even more. I hope they grow into independent-thinking citizens who uphold free speech and expression. This magazine is a platform for all things human – a space for creativity and experimentation, serious contemplation and wry humor, art and imagination, and even some trial and error. Speaking of **trial & error**, the **cat** is out of the **box** now, and it has a long way to go!



Concept Note

As we launch the first edition of Psynapse, we also launch our attempt to create a space of conversation and connection. Psynapse, the official magazine of the Department of Psychology, Elphinstone College, aims to bring forth critical, concise, and credible discussions about important aspects and developments in the field of mental health. By moving beyond the syllabus, we aim to co-create a platform, where our writers can explore ideas, and provide their unique perspectives on varied themes. Thus, to start with, we begin by exploring Social Identity and Mental Health, in our first edition.

The psyche of the individual does not develop in isolation. Right from the preliminary theories of nature and nurture, to advanced theories of developmental psychology, the role of the environment in shaping the individual has been acknowledged. However, along with the immediate environment, it also becomes essential to attempt to understand the role of social structures, and social locations in impacting the life course of the individual, and therefore, their psyche. Particularly within the Indian context, the life chances, mobility, and opportunity of the individual are impacted, in significant ways, by their social location, that further determines their access to resources and power, and thereby impacts life outcomes. Within a society and polity that is stratified along the lines of caste, class, religion, gender, sexuality, language, and multiple other sources of identity; any attempt to understand the mental, emotional, and psychological health of the individual cannot ignore the phenomenological life worlds that the person inhabits.

Writers have interpreted this theme in multiple ways, and have written articles surrounding marginalisation, microaggressions, language and meaning-making, and much more. This edition also features a special interview with Dr. Yashpal Jogdand, who explores the ways in which mental health practice can attempt intersectionality. Thus, we present to you, dear reader, the very first edition of Psynapse. We urge you to think about the articles in the magazine, and develop your stance on them, from your positional standpoints, and share your thoughts with us. For it is only through conversation that we might be able to co-create a space of critical insight.

By Team Editorial

*Reach out to us for any queries at
psynapse.elphinstone@gmail.com*



Editorial Team



Ishika Khollam & Veda Palkar

MEET THE TEAM!




Design Team

From left to right:
Sachin Yashwantaro
Meera Karekar
Sonia Wadhwa
Santoshi Patil
Rutuja Aughade
Parth Kankal

Writers

From left to right:
Komal Pandey
Sneha Kalokhe
Sriza Dasgupta
Tanvi Thakkar
Parth Kankal
Santoshi Patil
Disha Manerkar
Sonia Wadhwa





In fond memory of- The Pride of Elphinstone College and the Department of Psychology

In the words of Firooza Munawwar Ali Razvi
(Retired lecturer, Elphinstone college, Mumbai)



Prof. Razvi Syed Munawwar Ali
(31.07.1947 - 24.06.2024)

The year was 1987. Little did the staff and students know that Elphinstone college was veering towards a major change in its history. At that time the Department of Philosophy headed by Dr. Bongale was also talking care of teaching the Psychology syllabus with an addition of one temporary lecturer. That particular year, the Department of Education transferred a lecturer from Aurangabad's Government College to Elphinstone College in Mumbai. Professor Razvi Syed Munawwar Ali joined as a permanent lecturer appointed to teach psychology. The department of philosophy was well set with the temporary lecturer and was not ready for the change. Professor Munawwar Ali was not well received. The temporarily appointed junior lecturer felt hurt and upset at being ousted from her post.

The students were made to protest against the so-called injustice and the new transferee was accosted with 'Munawwar Ali go back' written in bold on classroom blackboards. He had come into a hostile setting. In the years of 70s and 80s, Elphinstone College was reputed to have very bright students who felt free to speak their minds regarding social and political matters and were known to protest against various kinds of injustice which they would not be ready to tolerate.

Well, in the case of Prof. Munawwar Ali, they were misled. His transfer was a legitimate transfer and every gazetted officer serving the State Government is duty bound to honour the decision of the State Education Department. Being a Psychologist he understood the psychology of the students and their reluctance to part with their former teacher. He also understood that he needed to impress, convince and befriend the students so that they would accept him and recognise that the decision taken by the Education Department was favourable for them. He was not one to accept any kind of defeat and hide with the tail between his legs. He set out to sincerely attend his duties and teach the students, answering each of their queries, however irrelevant, unjustified or insulting they might have been. His vast knowledge of the subject, sincerity, supreme sense of confidence, the strength to overcome hurdles and most importantly his tremendous sense of humour made him win over the students and staff alike. He once lonely figure smoking a cigarette in one corner of the staff room became the life of the staff room. Seeking a bit of respite after teaching exhaustively, professors would come to the common staff room to relax and have a cup of tea over a chat with colleagues.

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Now they all made a beeline to the 'Munawwar Ali corner' looking to relax with a joke or anecdote narrated in his signature style with detailed description of story telling and humorous punches. He was the hub of any group that was seen on the campus. Whether it was an intellectual discussion, whether it was telling anecdotes of this teachers and past stalwarts or whether it was literature, poetry and sher-shayari, Munawwar Ali was sought and always present. His sense of humour was often the subject of envy among many who lacked it. He was active with extra curricular activities too. Joining the hiking group, going for nature camps and planting trees, and taking charge of the running of the NSS (National Service Scheme), helping the Music and Drama association, joining the Marathi Vyangmaya Mandal, reviving the Urdu Society, you name it and Sir was always sought and present.

Psychology became a popular subject and many students began to opt for studying Psychology for their final Bachelor's degree. However, Elphinstone College was not yet granted a full Psychology department since it would involve having a well- equipped laboratory and there seemed to be not enough space or funds to establish that infrastructure. This remained his disappointment throughout his teaching career at Elphinstone. Yet, he has the honour of becoming the first Head of Department of Psychology at the Elphinstone College. Alongside his teaching assignments, he also submitted his thesis for the Doctorate degree. Nobody knew how and when he fitted in the time to do this. Like everything else, this also appeared to be done casually. There are some people who make simple things appear difficult and some who make the difficult simple. Munawwar Ali Razvi had this supreme knack for making difficult things appear simple and casual. He was now Dr. Syed Munawwar Ali Razvi. He rarely used this title till much later when he was forced by family and friends to do so.

'Munawwar Ali Sir' as he was fondly and respectfully addressed, was a qualified Psychologist but never chose to make counselling his profession. Through his compassionate nature he offered that service as a friend and guardian to all who sought his help. Students would regularly seek him out and he would spend his precious hours listening to their thoughts, problems and giving subtle guidance. Not only to students, but he has been a friendly counsellor to friends, colleagues and his family members.

No problem in his family could ever be solved without his advice and guidance. He earned respect from all, big and small. Once having come to know him, there is no one who does not remember Munawwar Ali Sir; be it a Principal, or a peon or student. He was larger than life, full of intelligent wit and wisdom, laughter and fun. These very qualities attracted the young lady lecturer from the Philosophy Department and Elphinstone College was witness in 1989 to the union of two of its lecturers, one from Philosophy and the other from Psychology, both of whom continued to serve at the college for many years. They became an example of an ideal couple who could rise above all differences social and religious to celebrate the union of minds and hearts. He also was a true friend. Each one of his friends right from school days till the ripe age were important for him. No wedding or function or funeral was complete without his presence. He made it a point to extend himself to be available for everyone.

I think of him I always remember a very famous couplet (doha) written by Sant Kabir: he says, " Kabira khada bazaar mein, sabki rakhe khair; na kahu se dosti na kahu se bair ". I apply this to Munawwar Ali Sir, tweaking it slightly. It is like this: " Munawwar khada bazaar mein, sabki rakhe khair; sabse rakhe dosti aur na kahu se bair". A friend to all and an enemy to none. Even

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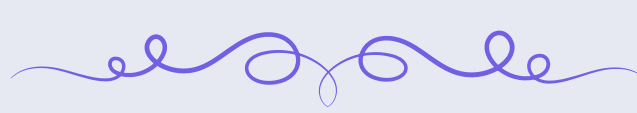


those some who were envious of him would sooner or later begin to like him with growing fondness. It was just not possible to feel animosity towards him for long.

From 1987 to 2000, Elphinstone College grew on him and his contributions to the institution were numerous. But he was now restless. Since a full fledged department was not in the offing, he felt himself stagnating and yearned for something more dynamic. At the same time, the growing pollution in Mumbai was affecting his throat adversely and continuously lecturing was becoming very painful. Just when he was debating what should be done, an offer came from the education ministry asking him to take up the position of the Joint Director of Higher Education, Mumbai region. Wanting to get away from the pollution of Mumbai he requested to be given the same position in another district and was appointed as the Joint Director of Higher Education at Nanded, Maharashtra. He joined in December 2000.

Thus began a new phase in his career. The students and staff were very unhappy to see him leave but at the same time were proud of his achievements. He was after all, one of the very few lecturers who were offered the responsible position of Joint Director of Higher Education, perhaps the first one to do so. Elphinstone College has much to be proud about! The new millennium saw a radical shift in his job profile. In his new capacity he served the administration from 2000 till his retirement in 2005, bidding goodbye to his career and service with the Government of Maharashtra retiring as the J.D. Higher Education from Mumbai region. To write details about his service as the J.D. would need a separate article covering many pages about his contributions.

Well, let's suffice it here to say that he worked very hard to develop a fair and honest education system rooting out malpractices wherever noticed. He did this at the cost of his health and safety. He was always available to every present and past colleague who needed their papers sorted out at the JD's office, whether it was about a delay in salary, promotion, transfers, collecting arrears or receiving pensions on time. He left no stone unturned to make sure that the hardworking lecturers and other staff got what they deserved, including respect. And everything was done very casually without wanting accolades or recognition. Great jobs were done casually making them appear absolutely simple. This was his characteristic greatness. After retirement he was offered the position of Vice Chancellor outside of Mumbai but had to decline due to health reasons. Thereafter he made immense contributions to some other institutions as Principal and also as a Director. His last position was with the Maharashtra College, Mumbai. His friends and colleagues there have not yet come to terms with his sudden loss. Nor has his dear family and friends. A brief illness and he was suddenly gone! Before anyone could fathom it, the light had dimmed. Not much time for goodbyes. He went sooner than he should have at the age of 76, leaving a hole in our hearts where a part of us will always feel missing. He was accompanied on his final journey by a sea of people, none wanting to see him disappear from sight. I dearly miss my friend, partner, husband, philosopher and guide, the father of my children, the one who could always make me laugh and smile. He lives on in my heart and in the hearts of thousands who love him.





THE MIND MATTERS

Dr. Yashpal Jogdand in conversation with Ishika Khollam



Dr. Yashpal Jogdand

Dr. Yashpal is an Associate Professor of Psychology at IIT Delhi, and his primary research interests include group processes and intergroup relations, particularly intergroup humiliation; prejudice, leadership; political rhetoric and collective mobilisation; social psychology of caste; stigma & wellbeing among marginalised groups. He is the co-editor of the Journal of Social Inclusion Studies (Sage) and Book Reviews editor for the Caste: A Global Journal on Social Exclusion (Brandeis University). He also serves on the editorial boards of the British Journal of Social Psychology (BJSP), the Asian Journal of Social Psychology (AJSP), and the Journal of Social & Political Psychology (JSPP).

1. Your academic journey from a small town in Marathwada to IIT Delhi, via JNU and St. Andrew's is like a dream run. Could you tell us more about it?

Indeed, the journey is like a dream run. Yet, if we had met when I was a student in Aurangabad or when I was studying at school in Ambajogai, you would not have found any dream of such kind in my consciousness. All I knew was I must do something since I seemed clever and kept on reading books of different kinds. As I read more and encountered different life-worlds and perspectives, the path became clearer. I realised that one must not take anybody's word for truth but to examine it directly, satisfy all scrutiny, and then accept it.

This attitude created a lot of trouble for me, for I kept thinking independently and took decisions that seemed perfectly rational and wise course of action to me, but to others they seemed unrealistic and risky.

Take, for example, my decision to apply for JNU. When I made application to JNU, I was recently married, had only MA but not passed the SET/NET exam, and had no scholarship and no clear plan for future. In that condition, the worldly advise to me was to clear the SET/NET exam and apply for the teaching positions. However, looking at all the efforts I had taken to read widely on various topics, it made sense to continue my education and go a place which will challenge me and help me develop a niche employable skillset. JNU seemed like an institution with potential to provide a platform and direction.



Once I was at JNU and were able to absorb the available guidance, it seemed natural to aspire for doing PhD at St Andrews with one of the world's top social psychologist.

Another important aspect of this journey was that while the decisions were mine, the positive outcome of those decisions, which makes it seem like a dream run, is possible only because I was lucky to have great teachers, friends, a life-partner, and family who believed in me and supported me. I was (and still am, unfortunately) the first person in my family to complete higher education and earn a PhD.

2. What really drew you towards psychology, research, and ymental health?

I had a different idea while enrolling for BA, and psychology was not part of the plan. However, on the insistence of my elder brother, I had to choose other topics and I chose psychology. At first instance, I loved psychology for helping me approach mind as an object of enquiry. I grew up reading a lot of religious and philosophical literature and it was very useful to see how a scientific approach is possible for study of the mind, something that has been presented as if it is a black box - mysterious, inaccessible, and metaphysical. I wanted to learn more about Psychology and go beyond the textbooks. Although textbooks were very interesting and had a special feel with all the boxes, tables, and images, I kept wondering about the long reference list at the end. It became apparent to me that the authors of the textbook have read this literature and interpreted it in their own way while writing the textbook. Is it possible that the way they have interpreted the text is wrong? What is the guarantee that the published research they refer to has got all thing right?

Again, my attitude of not taking anybody's word for the truth led to me read more and see things independently. Just as before driving any vehicle, we would check if there is enough fuel in it, whether the breaks are working, and whether the overall condition of the vehicle is trustworthy, I thought we should also do the same with the ideas. Afterall, people have developed ideas. The ideas may be right or wrong; useful or useless; leading to benefit of humanity or damaging to humanity. We must ask more questions and be sure. Once scrutinized and adopted, we must take responsibility for our ideas and be open if we realize its limitations at a later stage. This led me to disagree with the position that emphasises 'objectivity' in doing science. Can we really separate the aspects of objectivity and subjectivity? If you read Thomas Kuhn, the famous philosopher of science, it becomes clear that scientific activity does involve self-interest, group dynamics, and politics of worst sort. I come to believe that psychologists should take a value position and have a sense responsibility regarding their ideas.

I was not initially interested in the issues of mental health. This was because I used to see things in silos -abnormal psychology, cognitive psychology, social psychology, etc. But slowly these silos stopped making sense. I came to see them as orientations that one would take to address a complex issue. As I read more, I realized that restricting oneself to psychology would be a wrong way to do psychology. As C.L.R. James, a powerful writer and historian, has said "What do they know of cricket who only cricket know?" If one really wants to understand Psychology, one needs to go beyond the confines of disciplinary boundaries. The issues of mental health become a focus as I engaged more with psychology and realized that it is a core concern that should a focus of one's research.



3. Coming to your research interests, when we look at Identity and Mental Health, we emphasise upon the idea of inequality, in its varied manifestations, and try to think about how it impacts mental health. However, as we try to think of ways to counter this as an issue, what do you think it is to actually "see a person or a group as an equal", and what psychosocial processes do you think are a part of it?

I am not sure I understand your questions clearly. Yes, a core theme in my research is identity – a cognitive representation of who we are. But we have to keep in mind that identity is never singular. We have multiple identities. At most basic level, we have a personal identity, how I am different from you, but we also have social identities – how we are different from them. Social identity is the part of self-image that we derive from belonging to various social groups.

A key aspect of identity is that we want as much positively regarded personal/social identity as possible. However, we live in a world which is not equal and people face discrimination due to their identity such as caste, gender, class, etc. Having a negatively valued identity puts one at various health risks. Imagine being a self-assertive woman in a sexist world or a self-respecting Dalit in a casteist world. Under such conditions, social identity negatively affects mental health. While identity makes one vulnerable, it can also be a great source of support, resilience and power.

4. In your scholarly work, you speak about ideas of structural humiliation, and the meaning-making process behind it. You also acknowledge that while this is a structural process, it has deeply personal consequences. So, looking from the lens of psychology, which emphasizes individual agency, how would you tread the line,

if you conceptualize one, between externalizing one's humiliating experiences to systemic issues, and claiming personal agency over narratives?

There are two issues in your question. First, psychology is not just about individuals and does not have 'individual agency' at its core. We are individuals but also members of multiple social groups at the same time. Psychology therefore focuses on both individual as well as collective agency. Second, the aspect of systemic issues need not be divorced from individual as our psychological processes do not operate in a vacuum. Even individuals are deeply embedded in the social networks and form part of the social structure. We are social species! We need a psychological analysis that correctly understands the relationship between individual and society and takes into account the myriad ways both influence one another.

5. How would you conceptualise a structurally informed lens towards mental health in daily praxis - be it pedagogical, epistemic, or therapeutic?

Perhaps my above answer provides some indication about how I think regarding these issues.

I think a structurally informed lens would take into account how social identities of race, caste, gender, sexuality, disability, etc influence health outcome. Another critical aspect of having a structurally informed lens is that the focus move from making individuals 'adapt' to their circumstances to motivating individuals or groups to help challenge and transform their circumstances. The goal of a structural lens is to make changes in the social structure, not just to the individual. As Richard Wilkinson and Kate Pickett's influential book 'The Spirit Level' showed, it is only in more equal and decent society that human beings are able to lead happier and healthier lives.



6. Talking about life in IITD, how is the postgraduate programme in cognitive science drawing traction with students?

My sense is that the postgraduate program in cognitive science is thriving. We have had many challenges while starting it amidst the pandemic, but by and by it is getting recognized and we are providing good competition to other cognitive science programs in the country. Majority of students from previous batches have found jobs through campus placement and we are receiving good response from the potential recruiters. Yet some challenges in terms of lab space and recognition remain. An institute level discussion on developing an academic entity around Brain and Cognitive Science is underway and hopefully it will crystallize soon.

7. How do you look at the future of psychology?/ Any advice for our young psychology readers?

I think the future of psychology is going to be bleak unless efforts are made to make it more inclusive in nature. Most psychological theory and research claims to speak for the entire humanity but emanate from its narrow slice in the Euro-American context, rightly characterized as “WEIRD” (Western, Educated, Industrialised, Rich and Democratic; Henrich, Heine, & Norenzayan, 2010). So the psychology we speak of is WEIRD psychology. The future of psychology rests on making it truly representative of humanity.

Finally, my advise to young psychology readers is to go beyond the textbooks, go beyond the psychology, read the original references of the journal/book and make sure you ask more questions. Take no one’s word for it! Nullius in Verba! Atta Dip Bhav! Thank you.

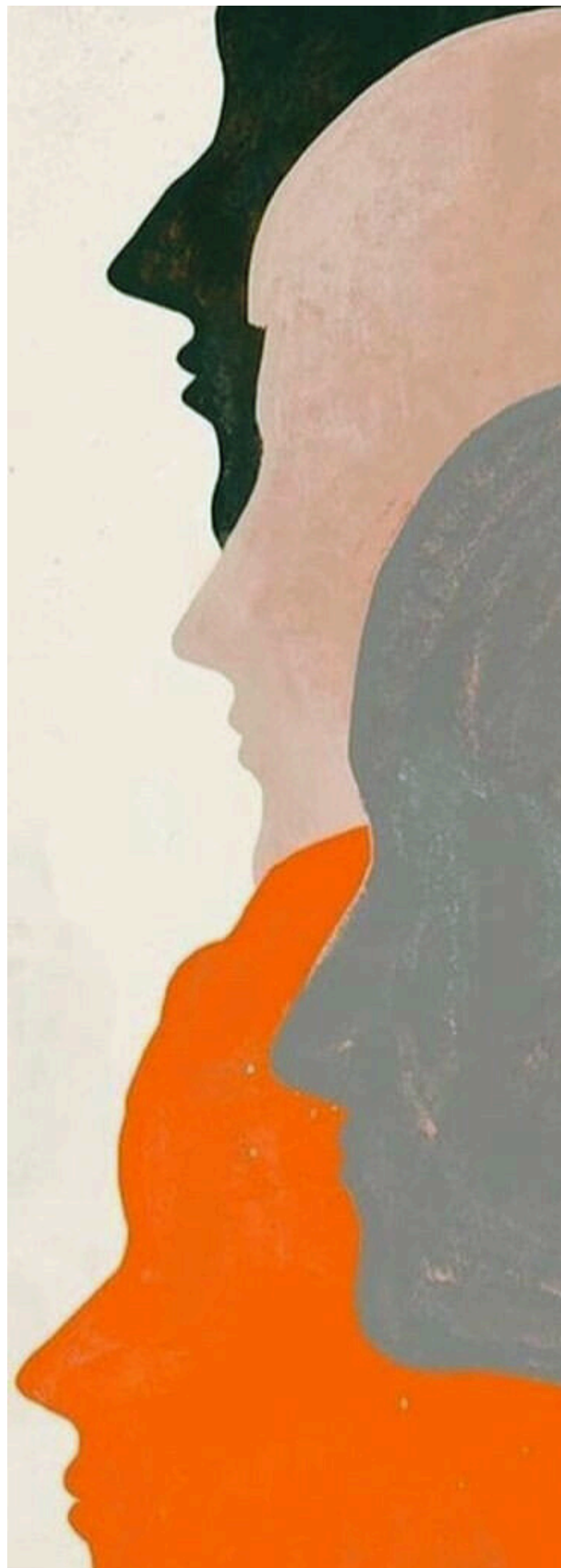


Image source: Dayana (D.) Orozco



Glimpses from the first quarter of 2024-25



Introducing HBSU's Counselling Centre:

The Counselling Centre of HBSU was started under the Department of Psychology at Elphinstone College with the aim of making mental health services accessible to all students of the University. The centre is run by Ms. Shubhangi Pingulkar, the in-house counsellor, and also employs interns from the Masters programme. In September, Ms. Shubhangi also conducted a workshop on self-care for students.

Suicide Prevention Day:

Students of the Psychology Department (UG & PG) conducted various activities to raise awareness on World Suicide Prevention Day. They made informative charts, and affirmation bookmarks, and put up a stall at the entrance of all constituent colleges. This allowed them to reach out to students from different faculties and initiate conversations about mental health.



Student Achievement:

Ishika Khollam, a student from the MA Applied Psychology course at Elphinstone College, participated in the 13th Intercultural Olympiad of Performing Arts, held at Paris, organised by the Akhil Bharatiya Sanskrutik Sangha, under the patronage of UNESCO. She performed semi-classical Bharatanatyam in the senior, solo, freestyle category, and bagged the silver medal in the same.





From the Individual to the Collective: Community Mental Health

By Tanvi Thakkar | MA 1

Ever wondered if the beam balance of opportunities is truly balanced? Mental health is a privilege— an excalibur that only few can wield. With privilege comes disparity. The idea that everyone in need would get the resources they require, is extremely utopian. These unfortunate gaps in our current systems, especially the mental health care sector, highlight an evident imbalance.

Today we see mental wellness picking up pace in India. However, this traction is usually only limited to urbanized, metropolitan cities. Even in the most urban location, mental health is often dismissed or misunderstood. For some other sectors of our society, the “problem” of mental health does not exist. When basic survival becomes overwhelming, feelings take a back seat. Even for those who wish to seek help, access to such services remains limited, unavailable, or unaffordable.

For a profession that aims to help unconditionally, one question remains: How often do these services present themselves without an invisible barrier?



Image source: [designboom.com](https://www.designboom.com)

Knowing that there is a way out of a problem, no matter how big or small, can be comforting. It also is an alien concept for people who are rarely on the receiving end of care and attention. That mental health is practiced in fancy clinics, contributes to it feeling like a foreign concept. If we were to utilize one of India’s biggest resources, its communities, mental health could be normalized and attainable in the truest sense.

Communities make for an integral part of India. Being an inherently close-knit, collectivistic country, communities are resources waiting to be utilized. History is witness to the impact of collective action taking on groups and communities. Such an approach can make mental health feel less “out-of-reach” slowly, but surely. Community mental health aims to improve access to mental health services and meet the needs of diverse demographics. The larger social factors of mental health, such as poverty, discrimination, and limited access to care, are frequently overlooked by the traditional, individual-centric model. By tackling these problems at a community level, we aim to bring mental health to familiar spaces and break the notion of mental health being exclusive only to a particular stratum.



An important step toward including mental health into public health programs is the ‘Community Mental Health Development Project’. The aim of this study was to develop a model that could be easily applied across various non-urban locations, particularly underdeveloped or impoverished areas. As per the study, the project employed a multifaceted approach that involved training primary health care providers, creating community-based interventions, and fostering collaborations between mental health services and local health systems. Training primary care physicians to recognize and attend to mental health conditions as first responders was a crucial element. Introducing mental health treatment alongside mainstream, general health services, increased accessibility and played a part in reducing the stigma revolving around mental illnesses.

While the project showed promising outcomes, it was not without its fair share of difficulties and setbacks, highlighting the incapacities of not just the study but the general layout of healthcare systems. First, these mental health services are likely to lack the infrastructure and resources required to enable comprehensive care. The lack of proper resources and up-to-date techniques could lead to potentially inadequate caregiving. Secondly, since the onus is placed on the community as a whole, there is a consequent lack of leadership. This role ambiguity adds on to the structural dysregulation. The new strategy also faced some opposition because of the additional duties it brought the healthcare professions, leading them to feel uncomfortable and overburdened. Moreover, the overall lack of training and specialization could cause a failure to meet the needs of a client, incorrect or uninformed suggestions and a general stagnancy in the process of alleviating the issues at hand.

In spite of these obstacles, there are various tactics that can prepare the community as a whole to step into the area of mental health as informed individuals. Creating alliances with community-based groups and industry professionals can increase access to resources and role-specific/ topic-specific information and bring forward inventive approaches. Promoting a culture of ongoing education and expertise development in the healthcare sector can play a key role in filling knowledge gaps and enhancing service provision. Volunteering, increased internship opportunities, postings at specific regions, frequent psychoeducation camps, etc can improve the efficiency of mental health interventions and move closer to creating lasting and powerful solutions.

It is also important for to keep in mind the cultural and social contexts in which the interventions are implemented. The need to come up with strategies that are sensitive to local traditions, values and practices should be the primary concern when it comes to ensuring the effectiveness of the plan and mental health practices in community setups.





Rome was not built in a day. These changes have the potential to expand the idea of mental health and increase its awareness tenfold. However, the bitter truth remains that these changes cannot be brought overnight. From breaking stereotypes and changing belief systems to actively engaging in society, this fight has a long road until victory. However, the progress that we have made as a nation gives us hope that more change is yet to come. The immense power “being together” holds, needs to be realized, acknowledged and implemented. By recognizing mental health as a concept beyond self care and as a shared responsibility, we can make it an integral part of every life and strive for greater heights. As Helen Keller puts it, “Alone we can do so little. Together we can do so much”.



Image Source: d.pining.comm



Forget competing for a cup with friends, try gifting one instead!

The psychology department of Elphinstone College conducted a ‘Gift a Mug’ event on Aug 29, 2024. In this event, all the students of the department painted a ceramic mug with their own creative ideas and then gifted the cup to a classmate.



The philosophy of this event was that, we have always been told that cups are for winning — work hard, excel, compete, and claim the prize! However, life is more than just a race against our peers. Why reduce a beautiful journey to mere competition? Blessed with the gift of life, let's try something different. Instead of winning a cup, gift a cup—and win a heart instead.





MINDING THE Margin

By Santoshi Patil | MA 1

Imagine going through life with an attire made up of little, extremely pointy blades. Each action and every encounter causes little wounds that are barely noticeable when taken solely but devastating when combined. For many people who are marginalised by society and are continuously subjected to microaggressions resulting from discrimination, stereotyping, and marginalisation, this is their reality.

The book "Microaggressions in Everyday Life: Race, Gender, and Sexual Orientation" by Derald Wing Sue, microaggressions are little, inconspicuous, everyday occurrences that degrade people because of their association with a particular group. The book offers a thorough analysis of the manifestations of microaggressions based on sexual orientation, gender, and race. It also looks at the effects that these behaviours have on both targets and offenders. Sue believes that these behaviours harm both the targets and the perpetrators by weakening the targets' physical, mental, and emotional resources and by impairing the offenders' capacity to form relationships and appreciate the positive aspects of others.

"Half the Sky: Turning Oppression into Opportunity for Women Worldwide" by Nicholas Kristof and Sheryl WuDunn focusses on worldwide concerns that affect women, like maternal mortality, gender-based violence, and sex trafficking.

The controversial topics like the the decriminalisation of prostitution and cultural customs like female genital mutilation, all the while arguing for the global liberation of women and the benefits of women's labour.



Image source: bdper.plandetudes.ch

I'm seeing a therapist for my kleptomania. I'm taking away something valuable from each session.





The impacts of racism on health are discussed in this text, with an emphasis on perceived prejudice based on race or ethnicity. Racism is defined as a system that divides people into racial groups and distributes resources according to a hierarchy of superiority. The authors clarify that negative racial stereotypes can cause discriminatory behaviour even among people who may not consider themselves prejudiced, and that racism can continue in institutional structures even after individual-level prejudice fades.

The article draws attention to the increasing body of research on the stressor known as perceived racial or ethnic discrimination, which has the potential to affect health and worsen health disparities. It implies that stress, including discrimination-related stress, may accelerate cellular ageing and result in early disease and death.

The authors point out that earlier evaluations have discovered a negative correlation between prejudice and health, with the most often researched outcome being mental health. They used a variety of search phrases associated with racism and prejudice to look for pertinent research published between 2005 and 2007 in the PubMed database. 115 publications, out of 5,107 preliminary findings, satisfied their requirements for an empirical investigation of the relationship between felt prejudice and health status or healthcare usage.

It is critical to put into practice comprehensive measures that promote supportive environments, increase awareness of microaggressions, and offer assistance to individuals impacted in order to address this urgent issue. This involves educating staff members and students about microaggressions and how to foster an environment of respect and understanding. To ensure that everyone receives fair and compassionate care, healthcare workers in particular need to be knowledgeable about microaggressions and able to identify and lessen their impact on their patients.



4. VDIONANTA SPITREOYNL SISDOREDR
5. LETNOAYLMTI ASBULTEN YPRNASOLTIE RDEODSIR
6. OSEBSVISE POSCEMLUVI RDISODRE

One of the finest tennis players of all time, Serena Williams, disagreed with the umpire's decisions, during the 2018 US Open Championship. Williams was then portrayed by the media as having an "angry outburst" or "meltdown," terms that are rarely applied to male athletes who behave in similar ways. The connection between gender- and race-based microaggressions in sports can be understood through this example. Williams' portrayal as an "angry Black woman" reinforced negative stereotypes, and her emotional outburst was criticised in a way that was very different from how male athletes' intense outbursts are sometimes commended as evidence of their competitive spirit. Williams also had to deal with offensive remarks about her body throughout her career, highlighting the subtle yet widespread aspect of prejudice in professional sports and media coverage.



THE PSYCHOLOGY OF DEHUMANISATION: POWER AND OTHERING

By Komal Pandey | MA 1

Have you ever seen a person from a particular community, and assumed certain characteristics about them? Have you ever been on a college sports team and wished that your opponents face difficulties? Or have you ever felt excluded from a group of friends because you did not 'fit in'?

If you answered yes to any of those questions, chances are, you have experienced the tendency of us humans to characterize people into “us” and “them” groups. While this is a tendency that all of us harbor, it also leads us to not consider the “them” group as human as “us”. We might inadvertently not consider the needs and rights of the people who we don't consider as part of our group, and this bias might then show up in the art we create, the media we consume, the ways in which we create images of the other group, thereby leading to their dehumanization. Dehumanization is a powerful psychological process that strips individuals or groups of their humanity, reducing them to something subhuman or monstrous.

This process forms the foundation for justifying acts of violence, exclusion, and oppression, as the moral and social norms that apply to human beings are no longer considered relevant to those who have been dehumanized. In this article, we will explore the mechanisms of dehumanization, how it is propagated, and the profound psychological underpinnings that make it possible for ordinary people to participate in extraordinary acts of cruelty. At the heart of dehumanization is the concept of the “outgroup,” a term in social psychology referring to a group of individuals perceived as different from the “ingroup,” or those we identify with. This perceived difference can be based on race, ethnicity, religion, nationality, political beliefs, or other distinguishing characteristics. When we perceive someone as part of an outgroup, we are more likely to view them as “other,” and therefore, less like ourselves. The process of dehumanization begins with this categorization into ingroups and outgroups. This is a natural psychological process, rooted in our evolutionary history where distinguishing between friend and foe was crucial for survival. However, when this categorization becomes rigid and is combined with negative stereotypes or propaganda, it sets the stage for the outgroup to be viewed as fundamentally different in a way that goes beyond simple social or cultural differences.





Dehumanization is also reinforced through social and cultural norms that legitimize discriminatory practices. When societies endorse or tolerate certain forms of prejudice—whether dehumanization can flourish. This is particularly evident in times of war or conflict, where the enemy is depicted as barbaric, subhuman, or evil, thereby justifying extreme measures like torture, genocide, or mass displacement. Language plays a critical role in the dehumanization process. The use of derogatory terms, slurs, and demeaning labels serves to diminish the humanity of the outgroup. These words are not merely insults; they are powerful tools that shape perceptions and attitudes, making it easier for individuals to rationalize or even endorse violence against the outgroup. Symbols and imagery used in propaganda also contribute to dehumanization.

At an individual level, it leads to a loss of empathy, making it easier for people to commit acts of violence without feeling guilt or remorse. At a societal level, it can pave the way for systemic oppression, human rights abuses, and even genocide. When an entire group of people is dehumanized, it becomes easier for those in power to justify policies and actions that would otherwise be seen as inhumane. Dehumanization also has long-term psychological effects on both the perpetrators and the victims. Perpetrators may suffer from moral injury, a condition where they experience deep psychological distress as a result of violating their own moral code. Victims of dehumanization often face profound trauma, both from the acts of violence committed against them and from the experience of being treated as less than human. Counteracting dehumanization needs effort at both the individual and societal levels.

However, when this categorization becomes rigid and is combined with negative stereotypes or propaganda, it sets the stage for the outgroup to be viewed as fundamentally different in a way that goes beyond simple social or cultural differences.

One of the key psychological mechanisms that facilitates dehumanization is objectification. When we objectify someone, we strip them of their individuality, agency, and emotions, reducing them to an object that can be manipulated, controlled, or discarded. This is often seen in propaganda that portrays the outgroup as vermin, parasites, or disease-carrying organisms—metaphors that invoke feelings of disgust and fear rather than empathy and understanding. Objectification serves to create an emotional and psychological distance between the ingroup and outgroup, making it easier to justify acts of cruelty or violence.



Image source: aps



Another mechanism is moral disengagement, where individuals disconnect from the ethical standards that would normally govern their behavior. Through moral disengagement, people justify their harmful actions towards the outgroup by convincing themselves that these actions are necessary, or even righteous. This is often achieved by framing the outgroup as a threat to the ingroup's values, safety, or way of life, making violence seem like a defensive or preventative measure. During wartime, for instance, soldiers might be trained to see the enemy as a dehumanized "other," leading to a mindset where killing is not only acceptable but seen as a necessary act of patriotism.

One of the most effective ways to prevent dehumanization is through education that promotes empathy, critical thinking, and an understanding of diverse perspectives. By learning about different cultures, histories, and experiences, individuals can develop a more nuanced and compassionate view of others, reducing the likelihood of categorizing people as "other." Media and language also play a crucial role in this effort. Promoting positive and accurate representations of diverse groups can help counteract the stereotypes and prejudices that fuel dehumanization. Encouraging respectful and inclusive language is another important step, as the words we use shape our perceptions and interactions with others. At the societal level, promoting policies that uphold human rights and social justice can help create an environment where dehumanization is less likely to take root. This includes challenging discriminatory practices, supporting marginalized communities, and fostering dialogue and reconciliation in areas of conflict. Dehumanization is a dangerous and insidious process that begins with the perception of others as different and less than human. Through psychological mechanisms like objectification, moral disengagement, and the use of dehumanizing language and symbols, it becomes possible for ordinary people to commit extraordinary acts of cruelty. However, by promoting empathy, understanding, and respect for human dignity, we can counteract the forces of dehumanization and build a more just and compassionate world.

FOREST BATHING THERAPY:

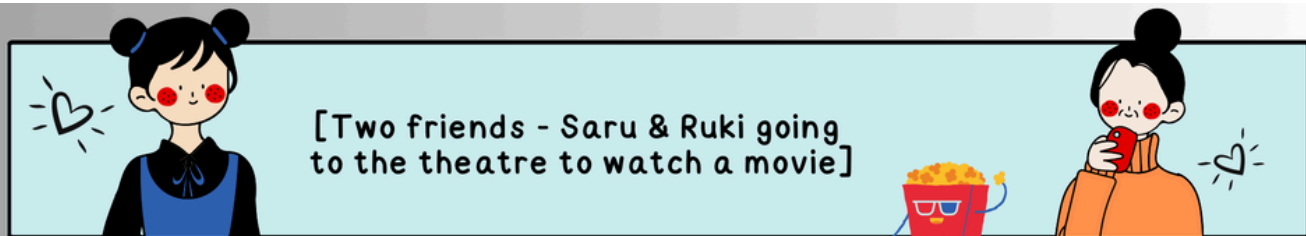
In this therapy, spending time with nature specifically in the forest helps boost energy, improves immunity and promotes well-being.



HORICULTURAL THERAPY:

It is mostly based on gardening and taking care of plants which helps to posit self care habit in the client and promotes emotional well-being in an individual.





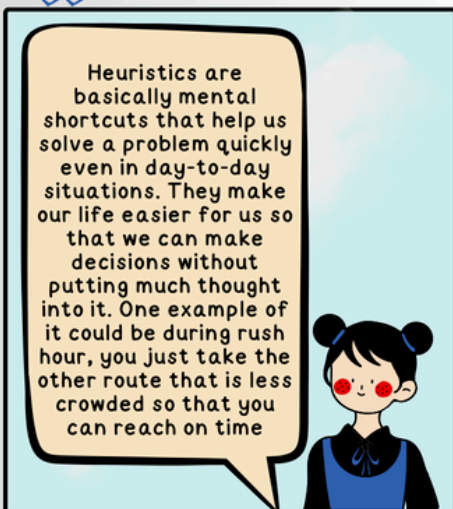
[Two friends - Saru & Ruki going to the theatre to watch a movie]



Hey, I hope you are carrying an umbrella in case it rains!



Ummm, why would I carry an umbrella? It isn't even raining.

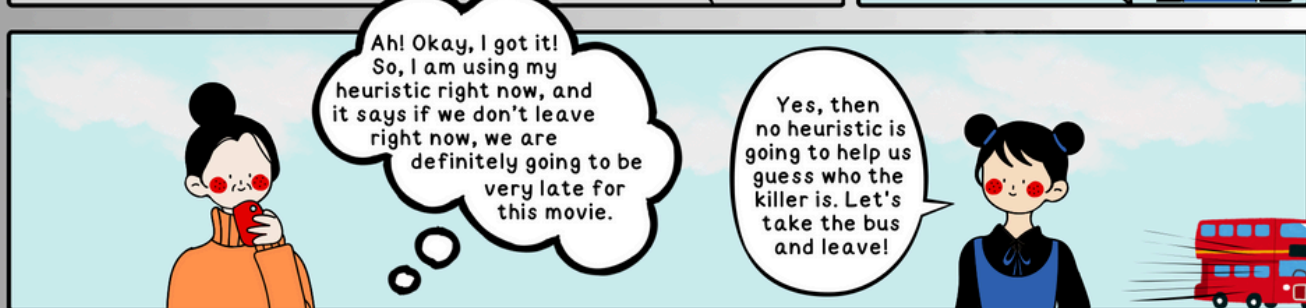


Heuristics are basically mental shortcuts that help us solve a problem quickly even in day-to-day situations. They make our life easier for us so that we can make decisions without putting much thought into it. One example of it could be during rush hour, you just take the other route that is less crowded so that you can reach on time



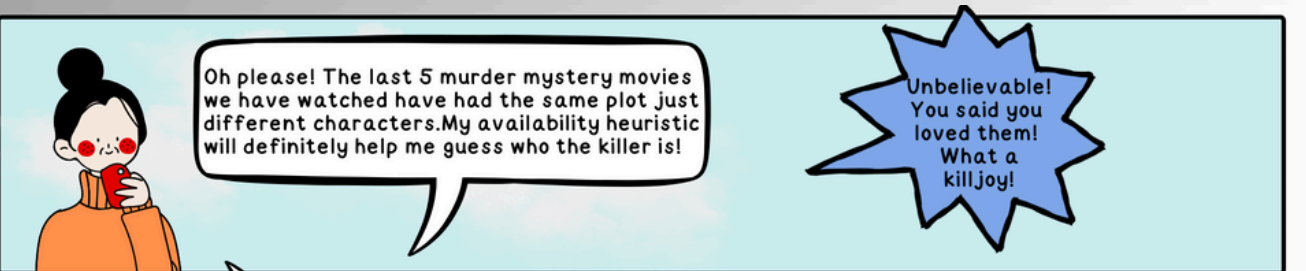
It is not, but it is certainly cloudy. You can't use your common sense heuristic once, can you?

Hold up! Did you say heuristic? What is that!?



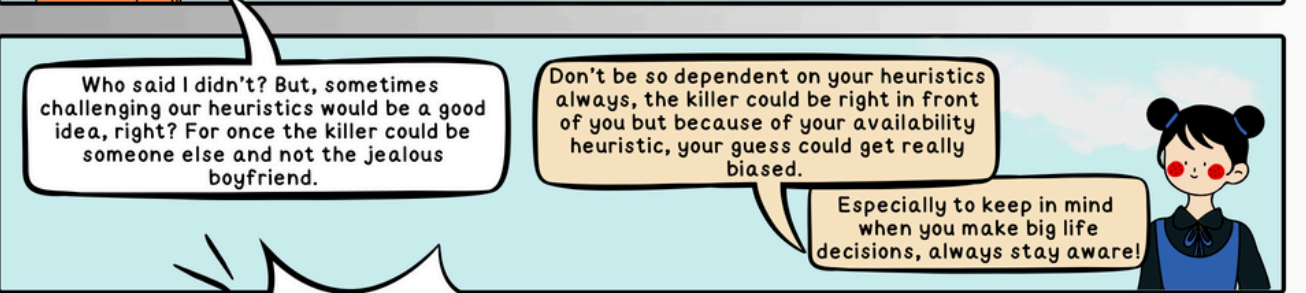
Ah! Okay, I got it! So, I am using my heuristic right now, and it says if we don't leave right now, we are definitely going to be very late for this movie.

Yes, then no heuristic is going to help us guess who the killer is. Let's take the bus and leave!



Oh please! The last 5 murder mystery movies we have watched have had the same plot just different characters. My availability heuristic will definitely help me guess who the killer is!

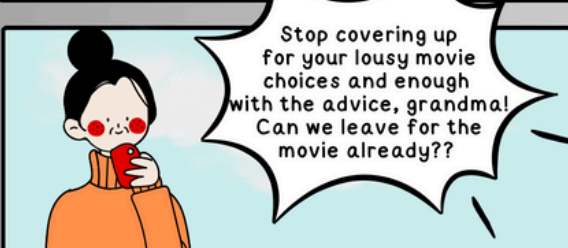
Unbelievable! You said you loved them! What a killjoy!



Who said I didn't? But, sometimes challenging our heuristics would be a good idea, right? For once the killer could be someone else and not the jealous boyfriend.

Don't be so dependent on your heuristics always, the killer could be right in front of you but because of your availability heuristic, your guess could get really biased.

Especially to keep in mind when you make big life decisions, always stay aware!



Stop covering up for your lousy movie choices and enough with the advice, grandma! Can we leave for the movie already??



First of all, they are the best and I know you love them and yes, let's leave!



Also, about the umbrella, we can always share! :)

By Lavanya Gogia & Parth Kankal | MA 1



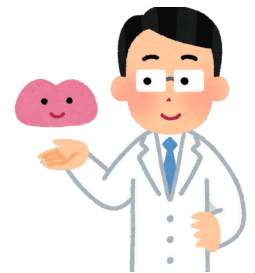
Complex Trauma: An overview

By Vaidehi Rathi | MA 1

Complex trauma is an integrative term that encompasses the exposure to multiple, chronic or recurrent traumatic experiences and the wide-ranging and long-term impact of these experiences. Complex trauma involves a pattern of abuse, neglect, or other harmful experiences over a significant period. It emphasises difficulties arising from a person's efforts to endure and adapt in the face of adversity. Provides a strengths-based, survival-driven reframe of trauma. (Complex Trauma, 2019). While research on Complex Post Traumatic Stress Disorder is ongoing, it is lacking on how common the condition is. But experts estimate that it may affect 1% to 8% of the world population. (CPTSD (Complex PTSD), 2024)

Complex trauma is a significant public health concern that affects people of all demography. The prevalence rates differ greatly depending on the specifics of trauma like culture, reporting practices, and the type of trauma in question. Nonetheless, it is crystal clear that many individuals undergo complex trauma at some point in their lives. The effects of complex trauma are extensive, & they bring about harm to individuals' physical, emotional, and psychological well-being. This in turn causes various mental health issues such as depression, anxiety, PTSD, substance abuse, and eating disorders. It is also common for complex trauma to have a long-term impact on relationships, career prospects, and life quality.

THE NEUROBIOLOGY OF COMPLEX TRAUMA



The neurobiology of complex trauma has become an increasingly important area of research, which explores the ways through which trauma affects the brain and development of a person. The exposure to trauma can affect how a person anticipates, focuses on and organises information. This may lead to trauma-induced alteration in their threat perception, represented through the way they think, feel, act and their biological responses. (Van Der Kolk et al., 2003)

The neurobiological underpinnings of trauma, focuses on how early exposure to extreme threat and inadequate caregiving can significantly affect the long-term capacity of the human organism to modulate the sympathetic and parasympathetic nervous systems in response to subsequent stress. Trauma occurs when an event or experience overwhelms an individual's normal coping mechanisms. These coping mechanisms provide a sense of control, connection, meaning, and safety. The neurobiology of trauma reveals that the body's responses to such events are natural protective mechanisms.





Neurobiological Key Implications of Complex Trauma

Brain Stem Dysfunction: The brain stem regulates basic physiological functions and coordinates the sympathetic and parasympathetic nervous systems. It is responsible for regulating basic functions like heart rate and breathing and can be significantly affected by early trauma. This can lead to dysregulation of the sympathetic and parasympathetic nervous systems, impacting emotional reactivity and stress responses.

Sympathetic Nervous System Hyperactivity: The Sympathetic Nervous System prepares the body for emergencies by increasing heart rate, blood pressure, and alertness. Trauma often leads to overstimulation of the sympathetic nervous system, which prepares the body for emergencies. This can result in increased heart rate, sweating, and gastrointestinal problems.

Parasympathetic Nervous System Dysfunction: The parasympathetic nervous system, which helps the body return to a state of calm after a stressful event, may also be impaired in individuals with trauma. This can lead to difficulties in regulating emotions and responding appropriately to social cues.

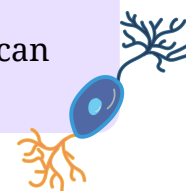
HPA Axis Dysregulation: The HPA axis, responsible for stress response through the release of cortisol, can be affected by trauma. This can lead to elevated cortisol levels, which can have negative consequences for brain development and function.

Limbic System Imbalance: The limbic system, includes the amygdala, hippocampus, and hypothalamus, and is involved in emotional processing and memory, can be dysregulated due to trauma. The limbic system, particularly the amygdala, plays a crucial role in trauma responses. The amygdala, often referred to as the "fear center," stores emotional responses to traumatic experiences. When activated during a traumatic event, the amygdala can interfere with the hippocampus, a brain region involved in memory recall. This interference can result in fragmented memory, a common occurrence among trauma survivors. (Janine D'Anniballe et al., n.d.) This can result in heightened fear responses, difficulty recognizing threats, and inappropriate emotional reactions.

Prefrontal Cortex Impairment: The prefrontal cortex, responsible for executive functions like decision-making and planning, may be affected by trauma. This can lead to difficulties in regulating emotions, controlling impulses, and learning from experiences.

Structural Changes: Trauma can lead to structural changes in the brain, such as reduced hippocampal volume and altered connectivity between different brain regions. These changes can contribute to memory problems, emotional dysregulation, and other cognitive difficulties.

In conclusion, trauma can have a profound impact on the brain, leading to a range of psychological and emotional difficulties. Understanding the neurobiological underpinnings of trauma is essential for dispelling misconceptions about sexual trauma and abuse. By comprehending how trauma affects victim-survivors, we can provide more compassionate and effective support.



Measures of Central Tendencies: History and Implications

By Sriza Dasgupta | MA 1

Let's say you want to understand a group of people and need a single value to summarize their ages, incomes, or heights. This is where measures of central tendency come in, also known as averages. These measures help you get a sense of the overall data with just one number.

The term "central tendency" has been around since the late 1920s. The most common measures of central tendency are the arithmetic mean, median, and mode. Here's a fun fact: each measure of central tendency has its limitations and none of them is perfect on its own. As you continue reading, you will discover why.

Mean: Mean is the average value of a data. For example if you look at the income of 5 people (Rupees 1,000, 9,900, 9,700, 9,800,9,950) the mean income is 8,070 rupees . This average can be misleading because it is heavily influenced by the higher incomes and doesn't accurately reflect the lower income of 1,000 rupees. The concept of the mean has evolved over thousands of years. Greek mathematician Theodorus of Cyrene first used it to find averages, and it was later refined by philosophers like Pythagoras and mathematicians such as Aryabhata and Blaise Pascal. The mean helps simplify data, compare sets of data, predict future values, and reduce the impact of outliers.

Normal Distribution

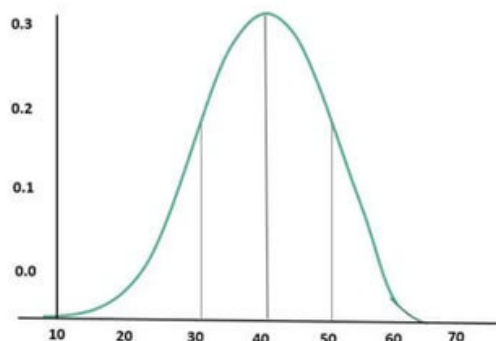


Image source: WallStreetMojo

Median: The Median is the middle value when the data is arranged in order. For the same income set sorted in ascending order (1,000,9,700, 9,800, 9,900,9,950), the median income is 9,800. While the median gives a clearer picture of the middle point and is less affected by extreme values, it doesn't reveal how the other incomes are distributed around that middle value.

Historically, median was used to address the limitations of the mean. Introduced around the same time as the numerical mean, it was first documented by the mathematician Edward Wright in 1599. Wright, known for his work on compass variance, proposed the median as a way to provide a clearer and more accurate representation of data, especially in cases where the mean can be skewed by extreme values. The median focuses on the middle value of a data set, making it less sensitive to outliers and particularly useful for statistical analysis, understanding population demographics, and interpreting experimental results. Researchers like Francis Galton preferred the median for its ability to offer a more precise view of data and address the shortcomings of the mean.

statis-tickle!



Why are two medians in a single data set funny?
Because it's a co-median!



Mode: The concept of the mode was introduced by Francis Galton in 1877 and Karl Pearson further developed it in 1894 by exploring multimodality, where a dataset can have multiple modes. It was developed to address the limitations of mean and median. Mode is the value that appears most frequently in a dataset. For example, in the set (2, 2, 2, 3, 4, 5), the mode is 2. While it shows the most common value, it doesn't indicate how often it appears or provide a complete understanding of the whole data. Historically, the mode has helped in understanding common values in social sciences, and business to understand customer behavior, marketing strategies, and market trends.

Each measure of central tendency has its own limitations, and choosing the right one depends on the data and what you want to understand. These measures are essential for comparing data, analyzing trends, and making informed decisions. For example, when budgeting, the mean helps with average expenses, the median reflects the central value, and the mode identifies the most common expenses.

In conclusion, mean, median, and mode, each provide a foundation for visualizing data and gaining insights from complex datasets. They each offer different perspectives on the same data, giving us the freedom to reflect further and helping us choose how we wish to interpret our data. In short, the measures of central tendencies are like our trusty friends— always there to help us make sense, no matter what. So, let's cherish these little helpers as we navigate the world of numbers!



Hands-on Hub Beck, Wechsler & more...



Sanjana Mehta and Merul Gandhi of Psychologia conducted insightful workshops for the students of the MA programme. These workshops included training about the background, conduction criteria, and interpretation of popularly used standardised psychometric assessments, such as Beck's Anxiety Inventory, Beck's Depression Inventory, Beck's Youth Inventory, Beck's Inventory for Suicidal Ideation, and the Weschler Intelligence Scales for Adults and Children.

Besides, they also conducted workshops on Counselling microskills, and conducted role plays with the students, to allow for practical learning.





A STEP TOWARDS INCLUSION

By Sonia Wadhwa | MA 1

“ We still think of a powerful man as a born leader and a powerful woman as an anomaly.”

— Margaret Atwood

This quote depicts the ever-going struggles for gender equality and recognition in every construct that exists, which puts women in a position of question every time regardless of their status, work ethic, talent, and basic human rights. Psychology till today has been through various transformations that have been evolving socially and culturally. Even open gender-sex communities today were once diagnosed as mental conditions in the early editions of the DSM; however, through research and revolution around the world, it has been clearing out many contexts, giving it the clarity and openness of living it needs.

Today, social views on women in psychology have evolved significantly. There is greater recognition of women's contributions to the field and increased efforts to promote gender equality. However, challenges remain: While women outnumber men in undergraduate and graduate psychology programs, they are still underrepresented in certain subfields and leadership positions (Eagly et al., 2012). Female psychologists and medical professionals, on average, earn less than their male counterparts, even when controlling for factors like experience and specialization. Women in psychology often face greater challenges in balancing career demands with family responsibilities. Despite increased awareness, subtle forms of gender bias persist in areas such as hiring, promotion, and publication.

In the early days in the field of psychology, theories often reflected and reinforced societal biases against women, reflecting broader societal changes and the increasing presence of women in the field.

“FROM EXCLUSION TO EMPOWERMENT”

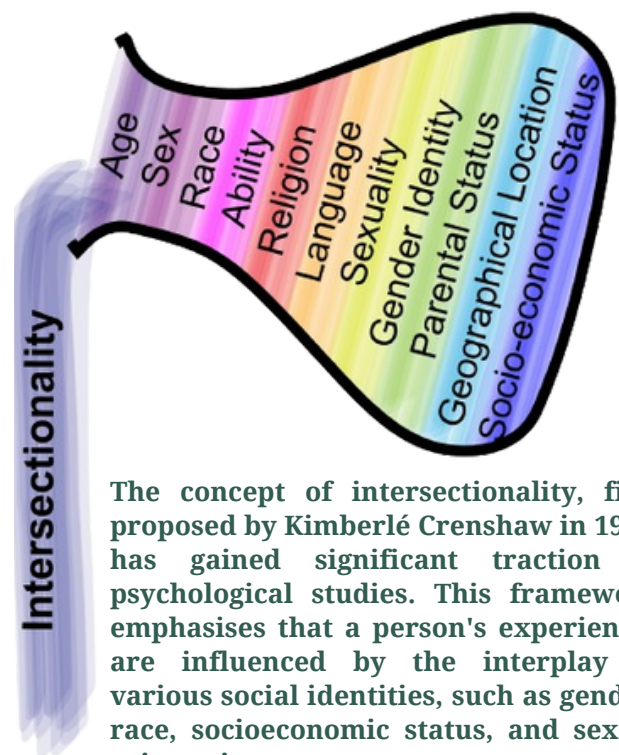
Freud's psychoanalytic theory, for instance, portrayed women as inherently inferior due to their lack of a penis and suggested that women's psychological development was fundamentally shaped by their lack of a penis, leading to feelings of inadequacy and resentment towards men. Such theories reinforced existing societal prejudices and contributed to the marginalization of women in the field (Rutherford & Granek, 2010). Such theories not only misrepresented women's experiences but also justified their exclusion from various aspects of psychological research and practice, even participants in the experiments.



Many studies used exclusively male participants, assuming that findings could be generalised to all humans. This "male as norm" bias led to significant gaps in understanding female psychology and physiology (Eagly et al., 2012). Furthermore, women faced numerous barriers to pursuing careers in psychology, including limited access to higher education and professional opportunities. People have often overlooked or understudied issues primarily affecting women, such as menstruation, pregnancy, and menopause.

The women's rights movement of the 1960s and 1970s had a profound impact on psychology. It led to increased awareness of gender biases in research and theory, sparking efforts to make the field more inclusive. This period saw the emergence of feminist psychology, which challenged traditional assumptions and focused on issues affecting women (Rutherford & Granek, 2010). According to this study, the key developments included: Increased representation of women in psychology; Gender-focused research examining unique experiences of women. Revision of classical psychological theories to account for gender differences.

Development of new methodologies to better capture women's experiences. This approach, championed by feminist psychologists like Carol Gilligan, allowed researchers to explore women's lived experiences in depth. Gilligan's work on moral development, detailed in her 1982 book "In a Different Voice", used narrative interviews to challenge Kohlberg's theory of moral development. By analysing women's stories and decision-making processes, Gilligan uncovered distinct "ethics of care" that had been overlooked in previous, male-centric studies of morality. This methodology enabled a more nuanced understanding of gender differences in psychological processes and highlighted the importance of context and relationships in women's moral reasoning.



The concept of intersectionality, first proposed by Kimberlé Crenshaw in 1989, has gained significant traction in psychological studies. This framework emphasises that a person's experiences are influenced by the interplay of various social identities, such as gender, race, socioeconomic status, and sexual orientation (Cole, 2009).

Image source: halfwaymark

Let us look into some terminology that has been used around this topic. Glass ceiling refers thus to discriminatory barriers that prevent women from rising to positions of power or responsibility and advancing to higher positions within an organisation simply because they are women (Li and Leung, 2001).

Despite women now constituting the majority of psychology graduates and practitioners, they continue to face barriers to advancement, often referred to as the "glass ceiling." This invisible barrier prevents women from reaching the highest levels of their profession, even in a field where they are numerically dominant (Eagly et al., 2012).

Sticky floors mean the difficulties women face even getting started on the career ladder or moving in beyond entry-level positions. Who governs the upper echelons? Despite psychology being a female-dominated field at entry and mid-levels, men still disproportionately occupy top leadership positions in academic departments, professional organizations, and major journals. These persistent inequalities highlight the need for continued efforts to promote gender equality in psychology.



The journey of women in psychology reflects broader societal changes in attitudes towards gender equality. From being largely excluded and misunderstood, women have become integral to the field, both as subjects of study and as researchers and practitioners. However, challenges persist; their journey from exclusion to empowerment has been impeccable.



Image source: psYCH

Fun, yet lesser-known therapies!


EMOTION BALL OR COLOUR THERAPY:

In this activity, the client is given a specific beach ball, so each colour depicts an emotion and it will help them to balance their emotions and promote well being.


CANDY GAME

This this activity, the client is asked to gather the number of candies with different colors like (M&M, gems, cotton candies etc) and separate those according to color and name them as (sad, joy or anger) and let them choose a random candy and then they will talk about it.

EXPLODING BALLOONS

This therapy is particularly for children who are struggling with anger issues. The longer we hold the more it will affect. 

MUSIC OR BINAURAL THERAPY:

In this therapy client is exposed to specific sound frequencies to alter the brainwave states reducing stress or anxiety and help to relax. 



Can you help me complete my homework? I am lost in word world.



Word Search

I	M	N	C	L	O	T	O	N	O	R	U	E	N	T	N	I	L	E	Y	M	E	H
G	H	A	E	Y	U	A	P	L	M	U	L	L	E	B	E	R	E	C	L	C	D	D
D	H	O	M	U	B	U	C	L	I	H	M	U	R	B	E	R	E	C	C	V	W	X
H	U	L	O	Y	R	V	H	E	A	G	I	R	A	W	D	N	O	X	A	E	H	V
C	E	C	X	M	G	O	I	P	T	S	O	P	E	D	E	H	M	H	K	T	I	O
O	N	G	C	J	N	D	G	S	B	Y	T	D	P	C	S	Y	P	K	E	Y	T	G
R	I	N	L	N	X	S	A	E	S	R	L	I	E	O	E	Y	W	D	B	C	E	L
T	M	H	I	U	O	Y	C	L	N	E	A	C	C	N	C	P	N	N	O	O	M	I
E	A	B	B	Z	T	R	Q	D	A	E	R	I	H	I	D	A	T	A	L	R	A	A
X	P	W	E	Q	Q	A	T	P	Q	Q	S	O	N	O	T	R	M	O	P	T	T	F
N	O	T	H	A	L	A	M	U	S	H	N	I	T	S	L	Y	O	P	R	S	T	Z
V	D	X	O	G	O	T	C	A	Y	M	O	O	S	O	T	I	K	C	U	A	E	F
R	D	E	N	D	R	I	T	E	T	B	P	M	P	S	N	E	N	V	Y	S	R	F
Q	A	L	L	U	D	E	M	F	E	E	B	V	A	K	Y	I	M	E	U	T	U	A
T	B	I	N	O	R	E	P	I	N	E	P	H	R	I	N	E	N	B	L	D	E	B
N	E	U	R	O	T	R	A	N	S	M	I	T	T	E	R	U	K	B	V	V	E	P

Find the following words in the puzzle.

Words are hidden and .



ACETYLCHOLINE
AMYGDALA
ASTROCYTE
AXON
BRAINSTEM
CEREBELLUM
CEREBRUM
CORTEX

DENDRITE
DOPAMINE
GLIA
GLUTAMATE
HIPPOCAMPUS
LOBE
MEDULLA
MYELIN

NEUROGENESIS
NEURON
NEUROTRANSMITTER
NOREPINEPHRINE
OLIGODENDROCYTE
PLASTICITY
PONS
RECEPTOR

SEROTONIN
SYNAPSE
THALAMUS
WHITE MATTER

By Disha Manerkar | MA 1



Language and Identity: An Unseen Influence!

By Parth Kankal | MA 1

We often look upon Intelligence as a characteristic that sets humans apart from all the species that live, or have once lived on this planet, which is undeniably true. However, if we ponder on evolution, one significant change was from how humans evolved to forming social groups, merely for ensuring their survival. The growing biological capacities and development of dynamic social groups and eventually a culture of its own, led to the emergence of a second very crucial defining characteristic in humans, Language.

“A case can be made that language has played a more important role in our species’ recent (circa last 200000 years) evolution than have our genes. (Pagel, 2017)” Ever since evolution, language has manifested itself into a dynamic medium of communication and expression. Even animals use language as means of signalling, but it also plays a vital role in the foundations of humankind.

“The moment people say something, they are already inevitably shaping the world.” We often encounter this saying, ‘Zabaan sambhaalke baat karo’ which simply translates as ‘speak carefully.’ Interestingly, this suggests that language does influence the way people think. This relationship between language and thought has been a matter of interest from ancient philosophy to contemporary psychological sciences (Klaus Fiedler). Research in the early 20th century led to the emergence of linguistic universals and linguistic relativity. While linguistic universals suggest that there are fundamental features or principles common to all human languages, linguistic relativity claims that the structure of a language influences its speakers’ perceptions and behaviour. It stresses the cognitive and cultural differences between different languages. This take on the language-thought paradigm highly resonates with what Rita Mae Brown quotes as,

“Language is the road map of a culture. It tells you where its people come from and where they are going.”



Attention, fellow readers.
I am Mr. Takeaway.
A few thieves have
taken away some
words from my
collection of quotes.
Fill them for me, please!

**To not have your
suffering recognised is an
almost unbearable form
of _____**

-Andrei Lankov

**No one would ever tell a
cancer patient to 'just get
over it.' Why people think
they can tell those with a
mental illness as much
is _____**

-Sara Ella, Coral

**It's my experience that
people are a lot more
_____ if they can see
you hurting, and for the
millionth time in my life
I wish for measles or
smallpox or some other
easily understood
disease just to make it
easier on me and also on
them.**

*-Jennifer Niven,
All the Bright Places*

**Mental illness may be
_____, but the people
who live with it are not.**

*-Hannah Blum,
The Truth About Broken:
The Unfixed Version of
Self-love*

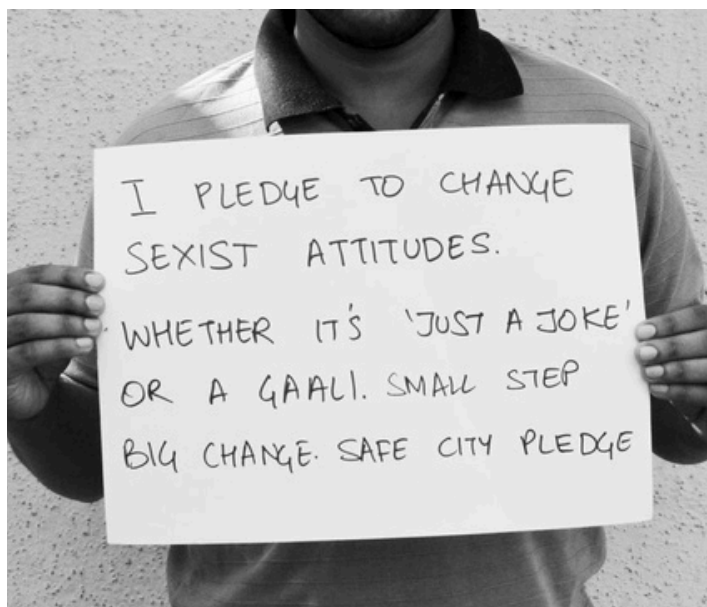


Image source: pinterest

The #ChangeThePunchline campaign, launched by HeForShe in India, challenges sexist humor and promotes gender equality. The initiative encourages individuals to rethink the way jokes reinforce harmful stereotypes about women. It aims to shift cultural narratives by replacing sexist punchlines with more respectful and inclusive humor, fostering a positive environment for all genders.



Image source: pinterest

Reflecting on the quote stated above and in the view of the recent events that have occurred in India, it makes me wonder upon the impact of derogatory, female-centric cuss words that have become an ingrained part of our language. In her article, “We need a new way to swear... one that doesn’t demean the women of India,” Nilanjana Bhowmick explores how sexist slurs are at the foundation of toxic masculinity, rape culture and boys’ club syndrome. A report that studied gendered aggression on Twitter found more than 2.9m tweets in one week that included gendered insults. The article also explores the alarming normalcy at which cuss words are often used in stand-up comedy shows.

One might possibly interrogate the analogy between the increasing use of derogatory language and a decade(s) long concern of rape and marginalisation. To answer this with the Critical Discourse Analysis (CDA), which concerns itself with relations of power and inequality in language (Jan Blommaert and Chris Baceum, 2000), it can be seen that female-centric cuss words are part of a broader discourse that positions women as subordinate or inferior. These words often carry connotations of shame and control, which can contribute to the marginalization of women in both public and private spheres. By analyzing these linguistic patterns, CDA reveals how language contributes to the systemic oppression of women.

Given that the increasing use of cuss words and derogatory language has stemmed out from an unconscious expression of aggression, which has also attained cultural relevance to an extent in today’s times; however, it is crucial to maintain the essence of language intact, and the privileges it has brought along-with, for humanity, and, humanness.



Portrayal Of Anxiety in Media



By Disha Manerkar | MA 1

Through the lens of movies and series, the audience views and relates to mental health issues and in recent times, it is evident that media can capture the multifaceted nature of one such complex mental health issue Anxiety, portraying it with varying degrees of realism and emotional depth. While *The Queen's Gambit* and *Black Swan* use the competitive world of chess and theatrical ballet to highlight the sociocultural pressures that fuel anxiety, *Dear Zindagi* offers a more introspective view, focusing on the therapeutic process and the journey toward combating it. While movies like *Mudbound*, *Eternal Sunshine of the Spotless Mind*, *Fight Club* and *Masaan* touch upon the philosophical aspects of existential anxiety, there are lighthearted depictions of this complex emotion as well, as seen in *Finding Nemo*, *Wake up Sid*, *Piku* and *The Intern*.

These works succeed in their own ways, illustrating various aspects of anxiety's impact on the human experience. These portrayals underscore the importance of nuanced and accurate representations of mental health in the media. By depicting anxiety authentically, films and TV shows can not only foster empathy and awareness but also encourage those who struggle with similar issues to seek help and feel less alone. This article takes a closer look at the depiction of anxiety in the popular Netflix series *13 Reasons Why* and the Bollywood movie *Dear Zindagi*.

13 Reasons Why (2017) is a popular series on Netflix, based on a young adult novel of the same name by Jay Asher. Clay Jensen, a central character in *13 Reasons Why*, experiences significant anxiety throughout the season show.

His anxiety is primarily triggered by the death of his friend and love interest, Hannah Baker, and the subsequent discovery of the tapes she left behind, detailing the reasons for her suicide. His issues manifest in several ways, and the series portrays it with considerable depth. The range of impact that anxiety can have on an individual's life and of those around them are portrayed well in the series. As a high school student, Clay is already under significant pressure in his academic and social life.



Image Source: d.pinimg.com

He is already considered “uptight” by other students, and during the series, we see him battling anxiety and having panic attacks initially which then morphs into other serious mental health disorders later on in the series. What is particularly well depicted in the series is how high functioning anxious people can get through their daily life while withstanding strong emotions like guilt, anger, fear and resisting intrusive thoughts. He constantly replays events in his mind and has flashbacks, questioning his role in her decision to end her life and this guilt drives much of his anxiety, as he feels a deep sense of responsibility, believing he could have done more to save her.



The social environment in the school and the behaviour of his peers makes him distrustful and he starts to pull away from his family and a few trusted friends as well.

The show visually portrays his feelings of helplessness during panic attacks and physical symptoms like rapid breathing, racing thoughts, blurred vision, etc. It is also shown that he loses sleep and there are changes in his daily routine and appetite following the incident, which further exacerbates his anxiety.



Image Source: d.pining.com

His avoidant personality and habit of running away from confrontations, while using isolation as a defence mechanism is also depicted well as a behaviour pattern in various contexts. This highlights the intrinsic and extrinsic causes of his anxiety which encompasses all perspectives and gives a holistic view of the issues that he faces. The show also focuses on how his anxiety prevents him from feeling the full range of his grief and instead fuels his desire to seek justice for Hannah and other students who are “wronged” due to the social environment created by his peers, the school, parents and society as a whole.

The series not only focuses on major sociocultural and mental health issues that students face, like bullying, substance use, sexual abuse, grief, parental neglect, depression, etc; but also illustrates the daily stressors that make the youth vulnerable to such issues. The show’s depiction of various societal, cultural and mental health issues and their deep-rooted causes is laudable.

The portrayal of Clay’s anxiety is largely accurate, especially as it touches upon oft glossed over details like physical symptoms, behaviour patterns, intrusive thoughts that a person experiencing this issue undergoes. However, the intensity is sometimes heightened for dramatic effect and Clay’s lack of self-awareness when things go awry is questionable since he has been through mental health issues before and would be more mindful of his mental state. As the show progresses, Clay realises the importance of seeking help and his sessions with the therapist portray mental health interventions accurately and in a positive light, as they allow him to cope with extreme situations and disorders. Overall, the show has been criticised for its depiction of suicide and its impact on those left behind; but it was also the first show which delved deeper into mental health issues and their impact on people. It also portrays the current issues faced by teenagers and sends a very clear message about the important dialogues that need to be initiated in our society to mitigate the rise in youth mental health crises.



Image Source: d.pining.com





In *Dear Zindagi* (2016), directed by Gauri Shinde, anxiety is depicted through the character of Kaira, played by Alia Bhatt, who seeks professional help from a therapist, Dr. Jehangir Khan (Shah Rukh Khan) after facing mental health issues. The film has a nuanced and realistic portrayal of anxiety, especially since it relates personal insecurities, unresolved childhood issues, and the pressures of adulthood to the manifestation of anxiety. Kaira, in spite of being a successful cinematographer at a young age and someone who appears to have everything going for her, struggles with deep-seated mental health issues that manifest as anxiety and emotional disturbances. She has a strong fear of abandonment, stemming from unresolved childhood trauma. This affects her romantic relationships in the present day as she is unable to commit and often ends her relationships abruptly. Her dysfunctional behavioural patterns of overthinking about the relationship, deep mistrust of others, fear of vulnerability, need for control in relationships and necessity for clarity in the relationship at all times causes her to develop anticipatory anxiety. This leads to self-pity, feeling overwhelmed and constant intrusive thoughts.

Insomnia, restlessness and overthinking have been accurately depicted in the movie as physical symptoms of anxiety. The scene where she “comes out” to her family as someone who is seeking therapy, is a powerful portrayal of how people facing mental health issues expect society and their own families to view them. The highlight of this movie is the focus on Kaira’s therapeutic journey which allows her to be aware of her fears and confront them. It accurately portrays how a therapeutic relationship is a professional collaboration between a client and a therapist, but also has a powerful personal impact on both, the therapist and the client. Through therapy, Kaira begins to explore the root causes of her anxiety and learns to deal with her emotions in a healthier way.

The process is depicted as both painful and liberating and the key message of self-love and acceptance is put across to the audience in a clear manner. This movie focuses more on developing emotional resistance to cope with anxiety. Apart from that, it also debunks many myths about therapy and also addresses some pop-psychological concepts.

Dr. Khan adds elements of humour in the session, validates Kaira’s “negative” emotions, makes her understand the futility of decoding dreams and explores various therapeutic settings apart from his clinic. Overall, the movie is an introspective, subtle exploration of anxiety in daily life and how it can have deep-rooted origins which can be resolved with the help of a mental health professional.

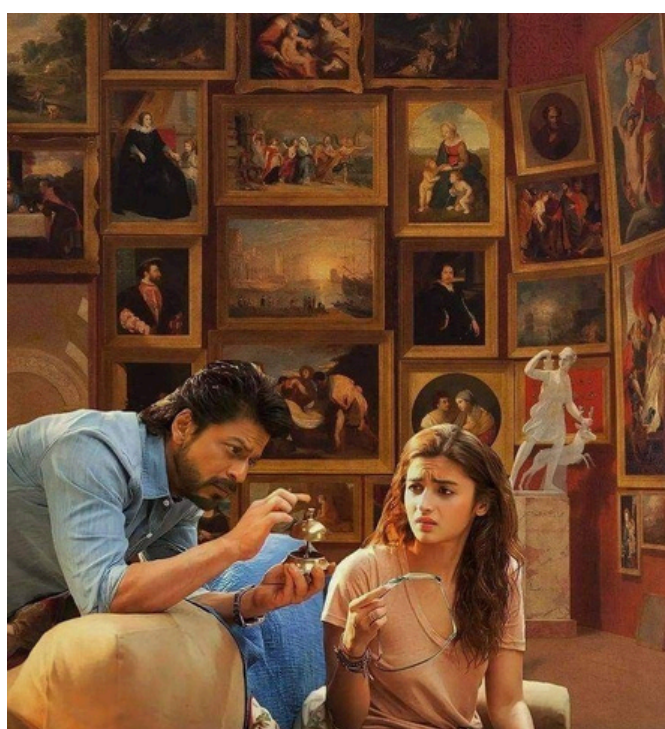


Image Source: d.pining.comm



- 10. MBLIUAI
- 11. SSNDPEREIO
- 12. ZISPHCNRAIOE





Both, 13 Reasons Why and Dear Zindagi portray young adults who are facing mental health issues. While the former focuses on systemic causes and the latter on personal experiences and sense of self; both portray anxiety accurately as a state of constant conflict which can be identified if we pay attention to a person's behaviour. While 13 Reasons Why is dramatic and hard-hitting, it manages to be sensitive towards the fact that the characters are complex and more importantly, they are young and require help from various support systems to overcome major mental health illnesses. On the other hand, Dear Zindagi is subtle and more relatable on an emotional level and allows the audience to explore the feeling of healing from mental health issues. Both pieces of media raise awareness about mental health issues and the necessity of having open conversations sans the stigma so as to allow people to seek professional help and overcome their problems.

The statistician could never decide if he preferred the certainty of uncertainty or the uncertainty of certainty.



Shades of Anxiety

1. Psychic Pain- Deep emotional or psychological suffering, usually an aftermath of a traumatic event. Psychic pain may feel like a feeling of 'unease', and leave an individual feeling unstable and helpless.



Image Source: ifehacker.com

2. Moral anxiety- the anxiety faced when one's moral values are threatened. it can be related to Freud's concept of superego, a part of the personality balancing our moral conscience. Moral anxiety occurs when one defies their own ethical beliefs and acts against mentally set norms.



Image Source: Detroit news.com

3. Existential anxiety- anxiety stemming from feelings of uncertainty of life, meaning/ purpose of life, and death.



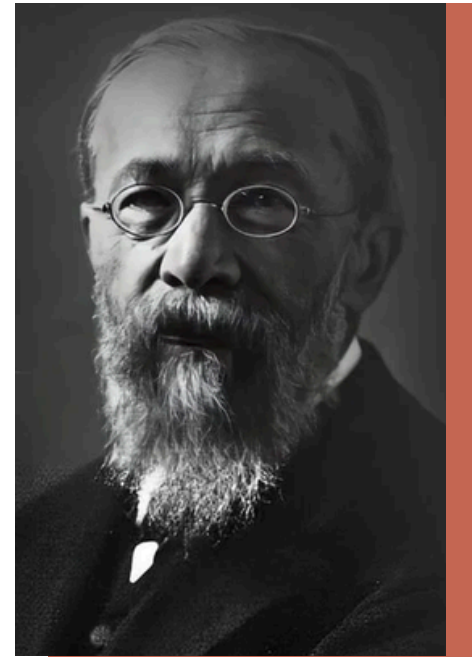
GROUNDBREAKERS in Ψ

“Physiological psychology is, therefore, first of all psychology”

Wilhelm Wundt, was born in the village of Neckarau, which is southwestern part of Germany. As a Heidelberg medical student he developed interest in research. In 1862, he published Contributions Toward a Theory of Sense Perception. He outlined his plans for psychology, where he envisioned it as a science which will establish facts of consciousness. In 1873 and 1874 he published two volumes of his book- Grundzuge der physiologischen Psychologie (Principles of Physiological Psychology) He planned to create experimental psychology and meta physics.

At Leipzig Wundt established psychology as experimental science through his publications, teachings, research and the students that he trained(he taught more than 24,000 students). 1879 was when experimentation began in the Leipzig Laboratory. His approach became known as Structuralism, which studied the structure of Thought. He introduced Introspection(looking inward). He had also studied Reaction Time- where he studied how much time it takes to respond to a stimulus, and if it takes more time then multiple mental processes must be involved. He was known as Father of Experimental Psychology and Father of Psychology. He separated psychology from philosophy and biology and became the first person to be called Psychologist.

**WILHELM WUNDT
(1832-1920)**

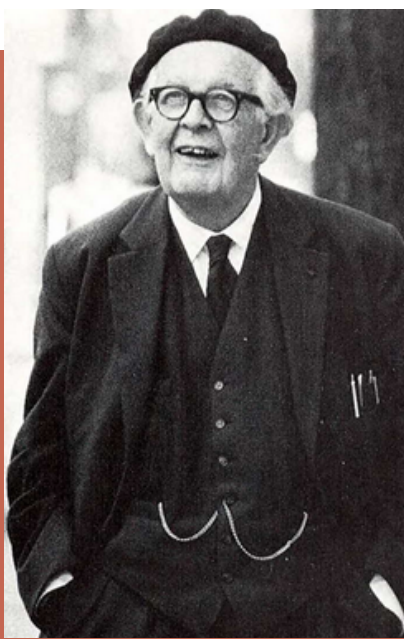


WIL-HELM-WOON-T

**JEAN PIAGET
(1896-1980)**

“The principle goal of education in the schools should be creating men and women who are capable of doing new things, not simply repeating what other generations have done; men and women who are creative, inventive and discoverers, who can be critical and verify, and not accept, everything they are offered.”

Swiss psychologist Jean Piaget (1896–1980) is revered for his groundbreaking contributions to the field of developmental psychology. Piaget was born in Neuchâtel, Switzerland, initially majored in natural sciences before turning to psychology. His best known theory of cognitive development examines how children's thinking changes over time as they interact with their environment. The four key stages identified by Piaget are: the Sensorimotor Stage, the Preoperational Stage, the Concrete Operational Stage and the Formal Operational Stage. Beyond his groundbreaking cognitive theory, Piaget coined the term "genetic epistemology" to understand knowledge development. In addition, Piaget's study on the evolution of abstract thought and logical reasoning influenced philosophical debates over the nature of knowledge and cognitive processes. Piaget's views have had a significant impact on educational methods, emphasising the role that stages of development play in educational processes. Piaget's interdisciplinary approach incorporated psychology, education, and philosophy, resulting in a complete framework for understanding human cognitive development.



JON-PEE-UH-JAY



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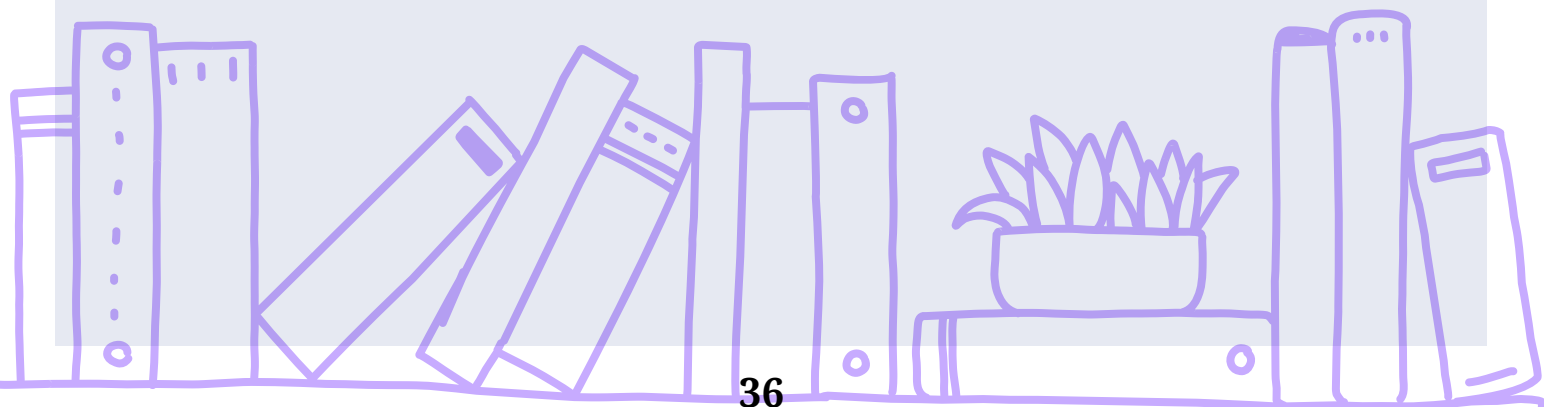
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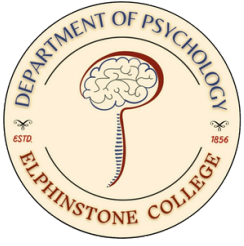
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Dr. Homi Bhabha State University, Mumbai

Counselling Centre

The Counseling Centre at HBSU is located on the fourth floor of the Department of Psychology at Elphinstone College, dedicated to providing accessible mental health services to all university students. Led by our in-house counselor, Ms. Shubhangi, the center also offers invaluable hands-on experience for interns from the college's Master's program. In September, Ms. Shubhangi further enriched the student community by conducting an insightful and empowering workshop on self-care, emphasizing the importance of mental well-being in academic life. The center stands as a supportive haven, fostering emotional resilience and mental wellness across campus.

APPOINTMENT

Appointments will be given on a first-come-first-serve basis. The date and time slot will be communicated on the mobile number/email provided by the student in the registration form (see details below).



Ms. Shubhangi Pingulkar
Counsellor

CONTACT DETAILS:

Email: psych.counselor@hbsu.ac.in

REGISTRATION FORM

Students can register to avail our services by filing a Google Form.



Scan the QR Code to get started

Your journey to wellness begins here!

Services Offered by the Centre

- Psychological Counseling
- Vocational Counseling and Guidance
- Personality Testing
- Intelligence Testing
- Stress Management Workshops
- Workshops and Seminars
- Support Groups
- Crisis Intervention
- Mindfulness and Meditation Sessions
- Life Skills Development
- Relationship Counseling
- Wellness Programs
- Substance Abuse Counseling



UPCOMING EVENT

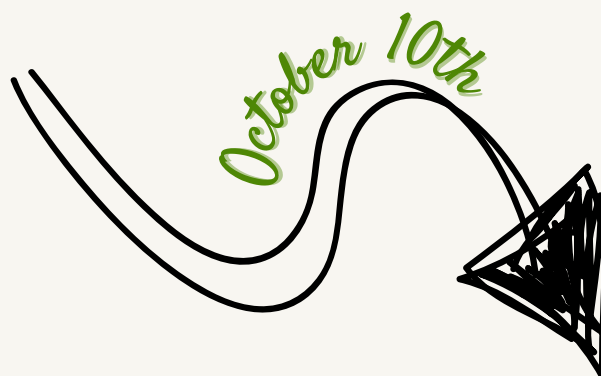
On the occasion of

WORLD MENTAL HEALTH DAY



Globally, specific days are set aside to highlight important issues that often go unnoticed or are pushed to the background. Mental health is one such issue—it touches every aspect of life but rarely receives the attention it truly deserves. To mark World Mental Health Day, the Psychology Department at Elphinstone College and the Counseling Centre of HBSU are collaborating on an outreach initiative aimed at college students, employees in both the public and private sectors, and the wider community.

As part of this initiative, we will offer standardized assessments for anxiety, depression, and stress. Participants will receive personalized reports and have the opportunity to attend counseling sessions based on their results. We want to emphasize that just as blood sugar and blood pressure require regular monitoring, mental health should be given equal, if not greater, attention.



Just like you keep a track of your physical health with blood tests and other diagnostic tools...

...learn more about your mental health with our free Psychometric Assessment tools as we observe... Mental Health Assessment Week

Test bouquet:

- STRESS
- DEPRESSION
- ANXIETY

THE CENTRE WILL ALSO PROVIDE
ONE FREE COUNSELLING SESSION
 All information will be 100% confidential



sy! of relief

Address:

Postgraduate Department of Psychology
 Elphinstone College
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