



CHHATRAPATI SHAHU JI MAHARAJ UNIVERSITY, KANPUR

(Accredited with Grade A++ by NAAC & UGC Category-I University)



Smt. Anandiben Patel
Hon'ble Chancellor & Governor
Uttar Pradesh



Prof. Vinay Kumar Pathak
Vice-Chancellor
C.S.J.M. University, Kanpur



**TRANSFORMING LIVES
THROUGH PSYCHOLOGICAL CARE
AND REHABILITATION**





TRANSFORMING LIVES THROUGH PSYCHOLOGICAL CARE AND REHABILITATION

A Comprehensive Initiative for Children Residing in Government Shelter Homes, Kanpur
(January 2025 – June 2026)



REPORT AT A GLANCE

A collaborative initiative by the Department of Clinical Psychology and Department of Social Work, Faculty of Advanced Studies in Social Sciences, Chhatrapati Shahu Ji Maharaj University, Kanpur in partnership with Government Shelter Homes, Kanpur.



BACKGROUND

Children in shelter homes often face adverse experiences such as abandonment, abuse, neglect, family conflict, poverty and loss of parental care. To support their emotional healing, personal growth and future opportunities, CSJMU, Kanpur initiated a comprehensive rehabilitation programme combining psychological care, counselling, skill development and life-skills education.



PROJECT COVERAGE



TOTAL CHILDREN COVERED

235

Government Shelter Home	Category	Children Covered
Rajkiya Bal Griha (Balika), Swaroop Nagar	Girls	109
Rajkiya Bal Griha (Balika), Nawabganj	Girls	71
Rajkiya Bal Griha (Balak), Kalyanpur	Boys	55
TOTAL		235

MAJOR COMPONENTS OF THE PROJECT



Psychological Assessment & Profiling



Individual, Group & Family Counselling



Weekly Psychosocial Interventions



Yoga & Wellness Activities



Life-Skills Education



Educational & Career Guidance



Vocational Skill Development



Monitoring, Follow-up & Support

MAJOR FINDINGS

KEY CHALLENGES IDENTIFIED

- Family conflict & adverse childhood experiences
- Poor self-concept & emotional insecurity
- Depressive symptoms
- Interpersonal adjustment difficulties
- Behavioural concerns



STRENGTHS OBSERVED

- Resilience & adaptability
- Creativity & potential
- Educational aspirations
- Interest in vocational learning
- Positive response to support and guidance

Rehabilitation needs were consistent across homes: counselling, confidence building, life-skills education, educational support and livelihood preparation.

MAJOR INTERVENTIONS & IMPACT



Psychological Counselling
Individual, group & family counselling for emotional well-being and adjustment.



IMPACT

Improved emotional well-being, self-confidence and interpersonal relationships.



Psychosocial Interventions
Weekly activities including life-skills, recreational sessions, mentoring, yoga and creative expression.



Better social interaction, reduced stress and improved behaviour and participation.



Vocational Skill Development
Certificate programmes in Basic Sewing & Stitching and Food Production.



Enhanced skills, employability and confidence for independent living.



Education & Career Guidance
Academic support, career counselling and future planning.



Stronger educational engagement and clarity about future goals.



Continuous Monitoring
Regular case follow-up and individual care plans.



Sustained support and measurable positive changes over time.

VOCATIONAL SKILL DEVELOPMENT HIGHLIGHTS

University-Certified Programmes



Certificate Programme on Basic Sewing & Stitching



Certificate Course in Food Production



Empowering children with practical skills for their future.

GLIMPSES OF OUR WORK



Counselling Sessions



Yoga & Wellness Activities



Life-Skills & Interactive Activities



Vocational Training

KEY OUTCOMES



Enhanced self-confidence and self-esteem



Improved emotional well-being and resilience



Better social adjustment and behaviour



Increased educational engagement and aspirations



Practical skills and employability for independent living

OUR COMMITMENT

We remain committed to the holistic rehabilitation of children in shelter homes through sustained care, psychological support, skill development and compassionate engagement.



"Together, we heal today, build skills for tomorrow and create brighter futures."

Department of Clinical Psychology | Department of Social Work
Faculty of Advanced Studies in Social Sciences, CSJMU, Kanpur

TRANSFORMING LIVES THROUGH PSYCHOLOGICAL CARE AND REHABILITATION

**A Comprehensive Report on Psychological Assessment,
Counselling, Rehabilitation and Skill Development of Children
Residing in Government Shelter Homes, Kanpur**

(January 2025 – June 2026)

Prepared by

**Department of Clinical Psychology
Department of Social Work
Faculty of Advanced Studies in Social Sciences
Chhatrapati Shahu Ji Maharaj University, Kanpur**

Researcher

Dr. Priyanka Shukla
Associate Professor and Head of Department
Department of Clinical Psychology

Associate

Prof. Sandeep Kumar Singh
Dean, Faculty of Advanced Studies in Social Sciences

Co-Associate

Dr. Anita Awasthi
Assistant Professor, SAHSS

Mr. Satyendra Singh Chauhan
Assistant Professor, SAHSS

Faculties Participated

Dr. S.P. Verma

Asst. Professor, SAHSS

Dr. Urvashi

Asst. Professor, SAHSS

Dr. Ram Kishore

Assistant Professor, Dept. of Yoga

Dr. Sonali Dhanwani

Asst. Professor, Dept. of Yoga

Dr. Prashant Singh

Asst. Professor, Dept. of vocational Studies

Chef Siddharth Singh

Asst. Professor, School of Hotel Management

Mr. Arvind Chauhan

Asst. Professor, School of Hotel Management

Details of students (Centre wise)

1. Rajkiya Bal Griha (Baalika) Unit-I, Swaroop Nagar		
1	Shatakshi Singh	MSW
2	Nikita Singh	MSW
3	Ayushi	MSW
4	Vaishali	MSW
5	Vaasvvi Yadav	MA Clinical Psychology
6	Sharavani Yadav	MA Clinical Psychology
7	Arshi	MA Clinical Psychology
8	Aayushi	MA Clinical Psychology
2. Rajkiya Bal Griha (Baalika) Unit-II, Nawabganj		
1	Neha Gupta	MSW
2	Namrata Chaurasiya	MSW
3	Preeti Pal	MSW
4	Janhvi Mishra	MSW
5	Mannat	MA Clinical Psychology
6	Sejal	MA Clinical Psychology
7	Riddhika	MA Clinical Psychology
3. Rajkiya Bal Griha (Balak), Kalyanpur		
1	Anand	MSW
2	Rovilas	MSW
3	Ashwini	MSW
4	Tushar	MSW
5	Tanya	MA Clinical Psychology
6	Vamika	MA Clinical Psychology
7	Shilpa	MA Clinical Psychology

Other Students

Jyoti Tiwari, Fashion Tech.
Jyoti, Fashion Tech.
Muskan, Fashion Tech.
Prachi, Fashion Tech.
Pinki, Fashion Tech.
Shabnam, Fashion Tech.

Deepa, Fashion Tech.
Roshni, Fashion Tech.
Lalisha, Fashion Tech.
Priyanka, Fashion Tech.
Gulapsha, Fashion Tech.
Rinki, Fashion Tech.

Aradhna, Fashion Tech.
Raginin, Fashion Tech.
Kamal Shresth, Hotel
Management
Sarthak Rastogi, Hotel
Management

CONTENTS

CHAPTER	PARTICULAR	PAGE NO.
CHAPTER 1	EXECUTIVE SUMMARY	1-4
CHAPTER 2	BACKGROUND AND RATIONALE	5-8
CHAPTER 3	PROJECT DESIGN AND METHODOLOGY	9-13
CHAPTER 4	BASELINE PSYCHOLOGICAL ASSESSMENT AND NEEDS ASSESSMENT	14-17
CHAPTER 5	PSYCHOLOGICAL COUNSELLING AND WELLNESS INTERVENTIONS	18-24
CHAPTER 6	WEEKLY PSYCHOSOCIAL INTERVENTIONS AND STUDENT ENGAGEMENT	25-30
CHAPTER 7	VOCATIONAL SKILL DEVELOPMENT AND LIVELIHOOD PROMOTION	31-34
CHAPTER 8	IMPACT ASSESSMENT	35-38
CHAPTER 9	BEST PRACTICES, CHALLENGES AND FUTURE ROADMAP	39-43

1.1 BACKGROUND

Children residing in Government Shelter Homes constitute one of the most vulnerable sections of society. Many of them have experienced adverse childhood circumstances such as abandonment, abuse, neglect, family conflict, child marriage, trafficking, poverty, domestic violence, or loss of parental care. These experiences significantly influence their psychological well-being, educational continuity, social adjustment, and future opportunities. While shelter homes provide protection, food, education, and basic care, long-term rehabilitation requires systematic interventions that address children's emotional, behavioural, social, and livelihood needs.

Recognizing this need, **Chhatrapati Shahu Ji Maharaj University (CSJMU), Kanpur**, in collaboration with Government Shelter Homes in Kanpur, initiated a comprehensive rehabilitation programme titled "**Transforming Lives Through Psychological Care and Rehabilitation.**" The project was jointly implemented by the **Department of Clinical Psychology** and the **Department of Social Work**, combining academic expertise with community service to improve the overall well-being of children residing in institutional care.

Implemented over a period of **one and a half years**, the project adopted a multidisciplinary approach integrating scientific psychological assessment, counselling, psychosocial interventions, wellness activities, life-skills education, and university-certified vocational training. The initiative demonstrates how higher educational institutions can contribute meaningfully to strengthening child protection systems through evidence-based rehabilitation.

1.2 PROJECT OVERVIEW

The project covered **three Government Shelter Homes** located in Kanpur Nagar and provided comprehensive psychological assessment and rehabilitation services to **235 children**.

Table 1.1 Project Coverage

Government Shelter Home	Category	Children Covered
Rajkiya Bal Griha (Balika), Swaroop Nagar	Girls	109
Rajkiya Bal Griha (Balika), Nawabganj	Girls	71
Rajkiya Bal Griha (Balak), Kalyanpur	Boys	55
Total		235

The project was implemented through close collaboration between university faculty members, postgraduate students, psychologists, social workers, and Government Shelter Home authorities. Weekly visits were conducted every **Friday and Saturday**, ensuring continuity of care, regular monitoring, and sustained engagement with the children.

1.3 MAJOR COMPONENTS OF THE PROJECT

The intervention followed a structured sequence beginning with scientific assessment and progressing towards holistic rehabilitation.

The major components included:

- Baseline psychological assessment and psychological profiling.
- Individualized needs assessment.
- Individual, group, and family counselling.
- Weekly psychosocial interventions.
- Yoga and wellness activities.
- Life-skills education.
- Educational and career guidance.
- University-certified vocational skill development.
- Continuous monitoring and follow-up.

Unlike conventional institutional programmes that focus primarily on custodial care, this project emphasized emotional healing, confidence building, employability, and successful social reintegration.

1.4 MAJOR FINDINGS

The baseline psychological assessment revealed that many children experienced significant emotional and psychosocial challenges arising from adverse childhood experiences. The assessment identified family conflict, poor self-concept, emotional insecurity, depressive symptoms, interpersonal adjustment difficulties, and behavioural concerns among a considerable proportion of the participants.

At the same time, the assessment highlighted important strengths among the children, including resilience, creativity, educational aspirations, and strong interest in vocational learning. These findings reinforced the importance of adopting a strengths-based rehabilitation approach that combines psychological support with opportunities for personal and professional development.

The assessment also demonstrated that rehabilitation needs varied in intensity across the three shelter homes but remained broadly consistent in terms of counselling, confidence building, educational support, life-skills education, and livelihood preparation.

1.5 MAJOR INTERVENTIONS

Based on the assessment findings, the University implemented a comprehensive rehabilitation programme consisting of regular psychological counselling, psychosocial support, and vocational education.

Psychological Counselling

Children received individual and group counselling sessions focusing on emotional regulation, confidence building, behavioural adjustment, stress management, interpersonal relationships, and future planning. Family counselling was also undertaken wherever feasible to strengthen family support systems and facilitate reintegration.

Weekly Psychosocial Interventions

Faculty members and postgraduate students visited each shelter home every Friday and Saturday. Activities included behavioural observation, educational mentoring, life-skills education, recreational activities, yoga sessions, creative expression, and continuous follow-up of individual cases.

Vocational Skill Development

Based on children's interests and rehabilitation needs, the University introduced two certificate programmes:

- **Certificate Programme on Basic Sewing and Stitching**
- **Certificate Course in Food Production**

These programmes equipped children with practical livelihood skills while simultaneously improving confidence, responsibility, teamwork, and career awareness.

1.6 KEY OUTCOMES

The integrated rehabilitation programme produced encouraging outcomes across multiple domains of child development.

Psychological Outcomes

- Improved self-confidence and self-esteem.
- Better emotional regulation.
- Reduction in emotional distress.
- Increased willingness to seek psychological support.
- Improved coping abilities.

Behavioural Outcomes

- Better discipline and responsibility.
- Improved anger management.
- Greater participation in institutional activities.
- Enhanced cooperation with peers.
- Increased confidence in social interactions.

Educational Outcomes

- Improved motivation towards education.
- Greater career awareness.
- Enhanced participation in learning activities.
- Better communication and life skills.

Vocational Outcomes

- Development of employable skills.
- Increased readiness for independent living.
- Greater interest in entrepreneurship.
- Improved confidence through practical learning.

Institutional Outcomes

- Strengthened collaboration between CSJMU and Government Shelter Homes.
- Development of an evidence-based rehabilitation framework.
- Increased involvement of postgraduate students in community engagement.
- Establishment of a multidisciplinary rehabilitation model.

1.7 INNOVATIVE FEATURES OF THE PROJECT

Several innovative features distinguish this project from conventional rehabilitation initiatives:

- Comprehensive psychological profiling of every child.
- Evidence-based intervention planning.
- Weekly university engagement over one and a half years.
- Integration of Clinical Psychology and Social Work.
- Student-led supervised community engagement.
- Combination of psychological care with vocational education.
- Continuous monitoring and documentation.
- Development of the **CSJMU Integrated Rehabilitation Model**.

The project demonstrates that effective rehabilitation is achieved through sustained engagement rather than isolated activities.

1.8 WAY FORWARD

The experiences gained during the project indicate that psychological rehabilitation should become an integral component of institutional child care. Universities can play a pivotal role by contributing professional expertise, research, student participation, and evidence-based interventions.

The **CSJMU Integrated Rehabilitation Model** developed through this initiative offers a practical framework that can be replicated in Government Shelter Homes across Uttar Pradesh and other parts of India. Expanding university–government partnerships, strengthening mental health services, promoting vocational education, and establishing systematic monitoring mechanisms can further enhance rehabilitation outcomes for children residing in institutional care.

1.9 CONCLUSION

The "**Transforming Lives Through Psychological Care and Rehabilitation**" project demonstrates that holistic rehabilitation is possible when scientific assessment, psychological counselling, psychosocial support, wellness activities, educational guidance, and livelihood promotion are implemented through sustained collaboration. Over one and a half years, the initiative reached **235 children** across three Government Shelter Homes and created measurable improvements in emotional well-being, confidence, behaviour, educational motivation, and vocational preparedness.

Beyond its direct impact on children, the project established a strong partnership between Chhatrapati Shahu Ji Maharaj University and Government Shelter Homes, illustrating the transformative role of higher educational institutions in advancing child protection and social rehabilitation. The evidence generated through this initiative supports the adoption of integrated, multidisciplinary rehabilitation models that prioritize both the psychological recovery and future empowerment of children in institutional care.

2.1 INTRODUCTION

Children residing in Government Shelter Homes represent one of the most vulnerable sections of society. Many of these children have experienced adverse childhood circumstances such as parental loss, abandonment, neglect, abuse, child marriage, trafficking, domestic violence, family conflict, poverty, or situations requiring care and protection under the Juvenile Justice (Care and Protection of Children) Act, 2015. These experiences often leave deep psychological, emotional, behavioural, and social consequences that extend far beyond the immediate crisis leading to institutionalization.

While Government Shelter Homes play a crucial role in ensuring the safety, protection, education, nutrition, and healthcare of these children, rehabilitation requires much more than meeting their basic physical needs. Long-term institutional care must also focus on emotional healing, psychological well-being, social development, life skills, vocational preparedness, and successful reintegration into society.

Recognizing this need, **Chhatrapati Shahu Ji Maharaj University (CSJMU), Kanpur**, initiated a comprehensive psychosocial rehabilitation programme in collaboration with Government Shelter Homes in Kanpur district. The programme combined scientific psychological assessment, professional counselling, continuous psychosocial support, wellness interventions, vocational education, and regular student engagement under faculty supervision. Implemented over a period of one and a half years, the initiative aimed to establish a sustainable and evidence-based rehabilitation model that could improve the quality of institutional care while preparing children for independent and dignified living.

2.2 CHILDREN IN INSTITUTIONAL CARE: A PSYCHOSOCIAL PERSPECTIVE

Institutionalized children differ significantly from the general child population because of the complex circumstances that lead to their admission into shelter homes. Many have experienced repeated trauma, disrupted family relationships, social rejection, exploitation, emotional neglect, or exposure to violence during critical stages of development.

Such adverse childhood experiences frequently affect multiple domains of functioning, including emotional regulation, self-esteem, behaviour, interpersonal relationships, educational achievement, and future aspirations. Without timely psychosocial intervention, these challenges may persist into adulthood, limiting opportunities for education, employment, and healthy social integration.

Adolescence is a particularly sensitive developmental period. It is characterized by identity formation, emotional maturation, increasing independence, and career planning. Children residing in institutional care often face these developmental challenges without adequate family support, making psychological guidance and mentoring especially important.

Therefore, rehabilitation programmes for institutionalized children must extend beyond custodial care and incorporate systematic interventions that promote emotional well-being, resilience, social competence, and livelihood preparedness.

2.3 POLICY FRAMEWORK

The present initiative is consistent with the objectives of several national policies and legislative frameworks that emphasize holistic child development and rehabilitation.

Juvenile Justice (Care and Protection of Children) Act, 2015

The Juvenile Justice Act recognizes every child's right to care, protection, development, treatment, education, rehabilitation, and social reintegration. It emphasizes that institutional care should facilitate the physical, emotional, intellectual, social, and vocational development of children while preparing them for successful reintegration into family and community life.

National Education Policy (NEP), 2020

The National Education Policy advocates experiential learning, vocational education, skill development, and multidisciplinary approaches to education. The implementation of university-certified vocational programmes within Government Shelter Homes aligns closely with the NEP's vision of developing practical competencies alongside academic learning.

Sustainable Development Goals (SDGs)

The intervention also contributes to several Sustainable Development Goals, particularly:

- **SDG 3:** Good Health and Well-being
- **SDG 4:** Quality Education
- **SDG 5:** Gender Equality
- **SDG 8:** Decent Work and Economic Growth
- **SDG 10:** Reduced Inequalities
- **SDG 16:** Peace, Justice and Strong Institutions

Through psychological rehabilitation, educational support, and vocational skill development, the project promotes inclusive and sustainable development for vulnerable children.

2.4 NEED FOR PSYCHOLOGICAL REHABILITATION

Experience from child care institutions across the country indicates that many residents require structured psychological support in addition to educational and social services. Emotional trauma, family separation, abuse, and prolonged institutionalization often influence children's behaviour, interpersonal relationships, academic performance, and future outlook.

The preliminary interactions conducted by the University team also indicated that many children experienced:

- Emotional insecurity and loneliness.
- Low self-confidence.
- Family-related distress.
- Behavioural adjustment difficulties.
- Anxiety regarding future life after institutional care.
- Interrupted education.
- Lack of vocational exposure.
- Limited career guidance.

These observations highlighted the necessity of conducting systematic psychological assessments before initiating rehabilitation activities. Rather than implementing generic programmes,

interventions needed to be based on each child's specific strengths, vulnerabilities, interests, and developmental needs.

Accordingly, the University adopted a scientific approach beginning with comprehensive psychological profiling, followed by individualized counselling, regular psychosocial interventions, wellness activities, and livelihood-oriented skill development.

2.5 ROLE OF UNIVERSITIES IN CHILD REHABILITATION

Higher educational institutions possess considerable academic expertise, professional manpower, and research capacity that can significantly strengthen child rehabilitation services. Universities are uniquely positioned to bridge the gap between academic knowledge and community service by applying evidence-based practices to address real-world social challenges.

The involvement of university departments offers several advantages:

- Scientific psychological assessment using standardized tools.
- Professional counselling services.
- Social work interventions and family support.
- Student-led community engagement under expert supervision.
- Research-based planning and monitoring.
- Capacity building of shelter home staff.
- Development of innovative rehabilitation models.

At the same time, students gain valuable experiential learning opportunities, enabling them to apply theoretical knowledge in community settings while developing professional competence and social responsibility.

The collaboration between CSJMU and Government Shelter Homes therefore represents a mutually beneficial partnership that strengthens both institutional rehabilitation and academic training.

2.6 CSJMU INITIATIVE: A COMPREHENSIVE REHABILITATION MODEL

To address the multidimensional needs of children residing in Government Shelter Homes, Chhatrapati Shahu Ji Maharaj University developed an integrated rehabilitation programme combining expertise from the **Department of Clinical Psychology** and the **Department of Social Work**.

The project covered three Government Shelter Homes in Kanpur district and adopted a phased intervention strategy:

- Comprehensive psychological assessment and profiling.
- Preparation of individualized psychological reports.
- Identification of emotional, behavioural, and developmental needs.
- Individual and group counselling.
- Weekly psychosocial interventions every Friday and Saturday.
- Yoga and wellness sessions.
- Life-skills education.
- University-certified vocational training.
- Family counselling and reintegration support.
- Continuous monitoring and evaluation.

This structured intervention transformed the programme from a series of isolated activities into a comprehensive rehabilitation model based on scientific evidence and continuous engagement.

2.7 PHILOSOPHY OF THE INTERVENTION

The project was guided by a simple yet powerful belief: **every child possesses inherent strengths and the capacity for positive change when provided with appropriate opportunities, support, and guidance.**

Rather than viewing institutionalized children solely through the lens of vulnerability, the programme adopted a strengths-based and child-centred approach. Psychological assessment was used not only to identify emotional difficulties but also to recognize talents, aspirations, resilience, creativity, and vocational interests.

The intervention emphasized:

- Respect for the dignity and individuality of every child.
- Trauma-informed and non-judgmental care.
- Evidence-based psychological practice.
- Participation and empowerment.
- Skill development and self-reliance.
- Collaboration among psychologists, social workers, educators, and shelter authorities.
- Long-term rehabilitation rather than short-term assistance.

This philosophy ensured that children were treated as active participants in their own development rather than passive recipients of services.

2.8 VISION OF THE PROJECT

The long-term vision of the initiative is to transform Government Shelter Homes into centres of comprehensive psychosocial rehabilitation where children receive integrated support for their emotional, educational, social, and vocational development.

The project also seeks to establish the **CSJMU Shelter Home Rehabilitation Model** as a replicable framework that can be adopted by universities and government agencies across India. By integrating psychological care, academic engagement, life-skills education, and livelihood promotion, the model demonstrates how higher educational institutions can make meaningful contributions to child protection and social development.

2.9 CHAPTER SUMMARY

Children residing in Government Shelter Homes often experience complex psychological and social challenges arising from adverse childhood experiences and disrupted family environments. Addressing these challenges requires a multidisciplinary approach that extends beyond institutional care to include emotional healing, psychological support, educational guidance, and livelihood preparation.

Recognizing this need, Chhatrapati Shahu Ji Maharaj University launched a one-and-a-half-year comprehensive rehabilitation programme in collaboration with Government Shelter Homes in Kanpur. Guided by the principles of the Juvenile Justice Act, the National Education Policy, and a child-centred rehabilitation philosophy, the programme combined scientific psychological assessment, counselling, regular psychosocial interventions, wellness activities, and vocational education.

The following chapter describes the project design, implementation methodology, and intervention framework that guided the execution of this comprehensive rehabilitation initiative.

3.1 INTRODUCTION

The "**Transforming Lives Through Psychological Care and Rehabilitation**" project was conceptualized as a comprehensive, multidisciplinary intervention to improve the psychological well-being, social adjustment, educational engagement, and vocational preparedness of children residing in Government Shelter Homes in Kanpur. The initiative was implemented jointly by the **Department of Clinical Psychology** and the **Department of Social Work**, Chhatrapati Shahu Ji Maharaj University (CSJMU), Kanpur.

Unlike conventional one-time counselling programmes, this initiative adopted a **continuum of care approach**, beginning with scientific psychological assessment and extending to regular counselling, psychosocial interventions, wellness activities, vocational skill development, and continuous monitoring over a period of **one and a half years**.

The project emphasized that effective rehabilitation requires sustained engagement rather than isolated interventions. Accordingly, faculty members and postgraduate students visited the shelter homes every **Friday and Saturday**, ensuring continuous psychological support, behavioural monitoring, mentoring, and rehabilitation planning.

3.2 OBJECTIVES OF THE PROJECT

The project was designed to achieve the following objectives:

Psychological Objectives

- To conduct comprehensive psychological assessment of all children residing in Government Shelter Homes.
- To prepare individual psychological profiles for each child.
- To identify emotional, behavioural, and developmental needs.
- To provide professional psychological counselling based on assessment findings.

Rehabilitation Objectives

- To promote emotional well-being and resilience.
- To improve self-esteem and behavioural adjustment.
- To strengthen interpersonal relationships and social skills.
- To facilitate successful rehabilitation and community reintegration.

Educational and Vocational Objectives

- To motivate children towards education and career planning.
- To develop life skills for independent living.
- To provide university-certified vocational training.
- To improve employability and livelihood opportunities.

Institutional Objectives

- To establish a sustainable University–Government partnership.
- To create a replicable rehabilitation model for child care institutions.
- To strengthen the capacity of shelter homes through multidisciplinary collaboration.

3.3 PROJECT AREA

The project was implemented in three Government Shelter Homes located in Kanpur Nagar.

Table 3.1 Project Area and Coverage

S. No.	Shelter Home	Category	Beneficiaries
1	Rajkiya Bal Griha (Balika), Swaroop Nagar	Girls	109
2	Rajkiya Bal Griha (Balika), Nawabganj	Girls	71
3	Rajkiya Bal Griha (Balak), Kalyanpur	Boys	55
Total			235

The project covered children belonging to different age groups, educational backgrounds, and psychosocial circumstances, ensuring comprehensive assessment and rehabilitation of all residents.

3.4 KEY STAKEHOLDERS

The successful implementation of the project depended upon close collaboration among multiple stakeholders.

Table 3.2 Stakeholders and Their Roles

Stakeholder	Major Responsibilities
Chhatrapati Shahu Ji Maharaj University	Academic leadership, planning, supervision, monitoring
Department of Clinical Psychology	Psychological assessment, counselling, Mental Status Examination, psychological profiling
Department of Social Work	Case work, family interaction, rehabilitation planning, field coordination
Government Shelter Home Administration	Institutional support, coordination, beneficiary management
Faculty Members	Technical supervision, counselling, monitoring, training
M.A. Clinical Psychology Students	Psychological assessment, counselling support, documentation
MSW Students	Rapport building, life skills, psychosocial activities, follow-up
Children residing in Shelter Homes	Active participation in assessment, counselling, vocational programmes

The multidisciplinary collaboration ensured that psychological, educational, social, and vocational dimensions of rehabilitation were addressed simultaneously.

3.5 PROJECT TIMELINE

The intervention was implemented over approximately **12 months**, following a phased approach.

Table 3.3 Project Timeline

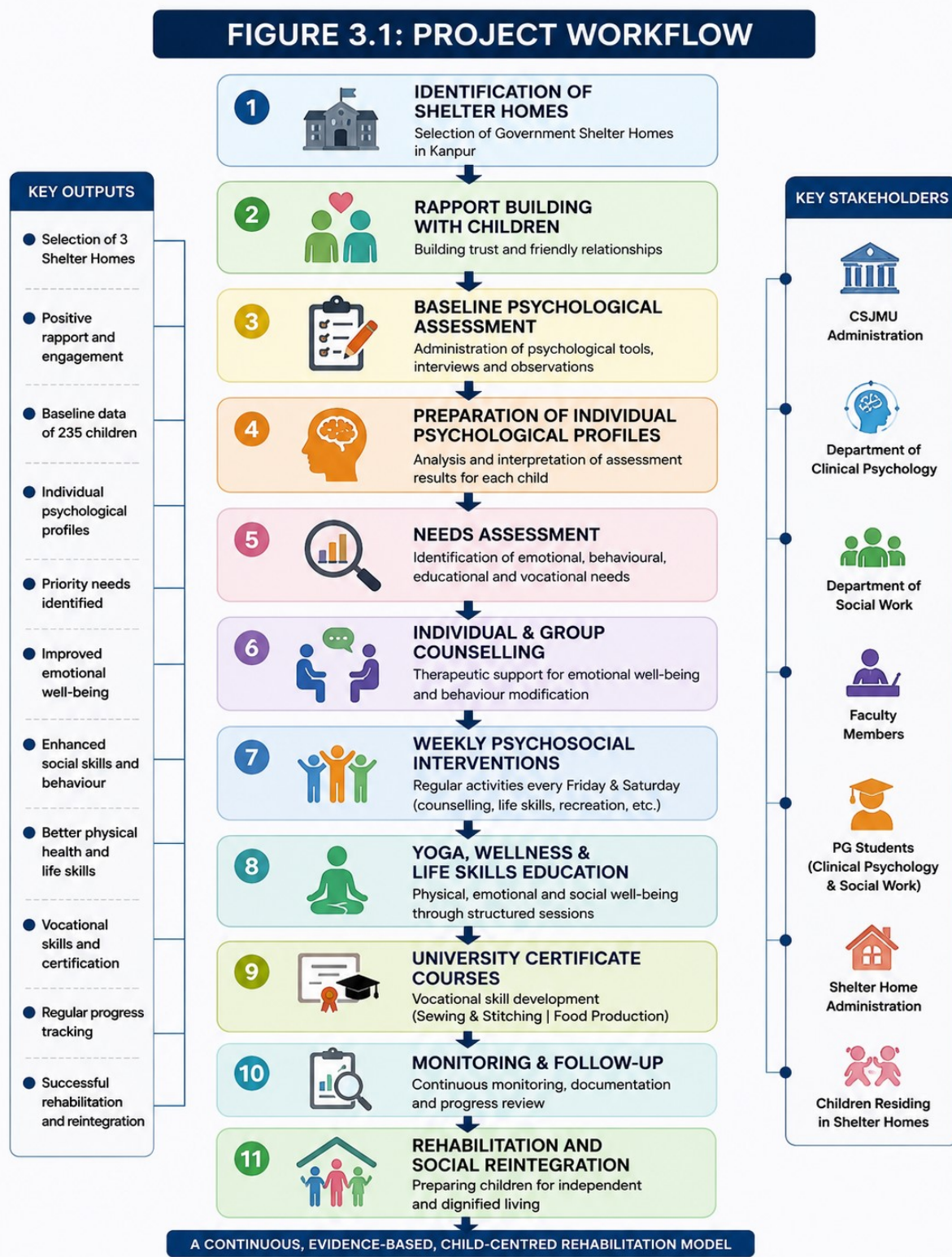
Phase	Major Activities
Phase I	Rapport building and orientation
Phase II	Baseline psychological assessment
Phase III	Individual psychological profiling and needs assessment
Phase IV	Individual and group counselling
Phase V	Weekly psychosocial interventions
Phase VI	Yoga, wellness and life-skills activities
Phase VII	University certificate courses (Basic Sewing & Stitching and Food Production)
Phase VIII	Monitoring, evaluation and documentation

This phased approach ensured systematic implementation and continuity of rehabilitation services.

3.6 INTERVENTION FRAMEWORK

The project adopted an integrated rehabilitation framework in which each intervention was guided by the findings of the baseline psychological assessment.

Figure 3.1 Project Workflow



The framework ensured that interventions progressed from assessment to rehabilitation in a structured and evidence-based manner.

3.7 WEEKLY INTERVENTION MODEL

One of the distinctive features of the project was the implementation of **regular weekly visits** rather than isolated counselling sessions.

Faculty members and postgraduate students visited each shelter home **every Friday and Saturday**, allowing continuous engagement with the children.

Friday Activities

- Review meeting with shelter authorities.
- Behavioural observation.
- Individual counselling.
- Group counselling.
- Educational guidance.
- Case documentation.

Saturday Activities

- Recreational activities.
- Yoga and wellness sessions.
- Life-skills education.
- Career guidance.
- Vocational training support.
- Progress review and planning.

The continuity of weekly visits enabled the project team to monitor behavioural changes, provide timely psychological support, and strengthen trust between the children and the intervention team.

3.8 ASSESSMENT METHODOLOGY

The project employed a **mixed-method, multidisciplinary assessment methodology** combining standardized psychological tools with qualitative techniques.

Assessment Process

1. Rapport Building
2. Case History Collection
3. Clinical Interview
4. Behavioural Observation
5. Mental Status Examination
6. Administration of Standardized Psychological Tests
7. Preparation of Individual Psychological Profiles
8. Identification of Rehabilitation Needs

Psychological Assessment Tools

Tool	Purpose
Human Figure Drawing Test (HFDT)	Personality assessment and emotional indicators
Sack's Sentence Completion Test (SSCT)	Assessment of attitudes, conflicts, and emotional adjustment
Beck Depression Inventory (BDI)	Measurement of depressive symptoms
Suicidal Ideation Questionnaire (SIQ)	Identification of suicide risk
Interest Inventory	Educational and vocational interests
Mental Status Examination (MSE)	Clinical assessment of current psychological functioning

The combination of quantitative assessment and qualitative observation enabled the preparation of comprehensive psychological profiles for each child, which formed the basis for individualized intervention planning.

3.9 CHAPTER SUMMARY

The project adopted a structured, multidisciplinary, and evidence-based methodology to address the psychological, educational, social, and vocational needs of children residing in Government Shelter Homes. Through systematic psychological assessment, individualized counselling, weekly psychosocial interventions, wellness activities, and university-certified vocational education, the programme established a comprehensive rehabilitation model based on continuity of care.

The collaborative participation of faculty members, postgraduate students, and Government Shelter Home authorities ensured effective implementation and created a sustainable model of university-community partnership. The next chapter presents the findings of the baseline psychological assessment and needs assessment, which guided the design and implementation of all subsequent rehabilitation interventions.



CHAPTER 4

BASELINE PSYCHOLOGICAL ASSESSMENT AND NEEDS ASSESSMENT

4.1 INTRODUCTION

Psychological assessment forms the cornerstone of evidence-based rehabilitation. Children residing in Government Shelter Homes often experience multiple adverse childhood experiences, including parental separation, neglect, abuse, abandonment, family conflict, child marriage, trafficking, and prolonged institutionalization. These experiences may adversely affect emotional well-being, behaviour, self-esteem, educational attainment, and social functioning. Consequently, rehabilitation programmes should be based on systematic assessment rather than assumptions.

Recognizing this need, Chhatrapati Shahu Ji Maharaj University (CSJMU), Kanpur conducted a comprehensive baseline psychological assessment before initiating counselling, psychosocial interventions, wellness activities, and vocational training. The assessment was designed to identify each child's emotional strengths, psychological vulnerabilities, behavioural concerns, interests, and rehabilitation needs using standardized psychological tools and clinical methods.

The findings presented in this chapter are based on the assessment of 235 children residing in three Government Shelter Homes in Kanpur. The results provided the scientific basis for planning individualized counselling, weekly psychosocial interventions, life-skills education, and university-certified vocational training programmes.

4.2 COVERAGE OF ASSESSMENT

The baseline assessment covered all children residing in the three Government Shelter Homes selected under the project.

Table 4.1 Centre-wise Coverage of Assessment

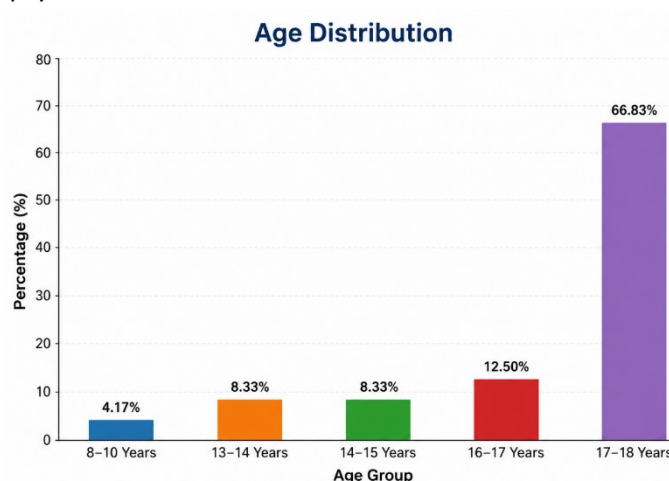
Government Shelter Home	Category	Children Assessed
Rajkiya Bal Griha (Balika), Swaroop Nagar	Girls	109
Rajkiya Bal Griha (Balika), Nawabganj	Girls	71
Rajkiya Bal Griha (Balak), Kalyanpur	Boys	55
Total		235

The assessment covered children from diverse socio-economic and educational backgrounds, enabling a comprehensive understanding of their psychosocial needs.

4.3 DEMOGRAPHIC PROFILE

Age Profile

The assessment revealed that the majority of children belonged to the 16–18 years age group, indicating that many were approaching the transition from institutional care to independent adulthood. This finding highlighted the need for interventions focusing on career planning, vocational skills, and independent living.

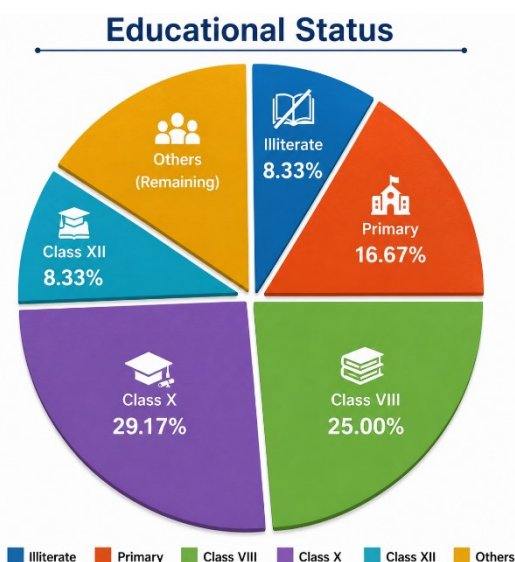


Educational Profile

Educational attainment varied considerably, with most children studying in Classes VIII and X. Educational discontinuity was observed among several children, indicating the need for academic support and career guidance.

Interpretation:

The demographic profile indicates that the majority of children were adolescents requiring psychosocial support, educational guidance, and livelihood preparation. These characteristics informed the design of subsequent rehabilitation interventions.



4.4 PSYCHOLOGICAL ASSESSMENT METHODOLOGY

The assessment adopted a multidisciplinary approach combining standardized psychological tests with clinical interviews and behavioural observations.

Table 4.2 Psychological Assessment Tools

Tool	Purpose
Clinical Interview	Psychosocial history
Mental Status Examination (MSE)	Current mental status
Human Figure Drawing Test (HFDT)	Personality and emotional functioning
Sack's Sentence Completion Test (SSCT)	Emotional conflicts and attitudes
Beck Depression Inventory (BDI)	Depression screening
Suicidal Ideation Questionnaire (SIQ)	Suicide risk assessment
Interest Inventory	Educational and vocational interests

The integration of multiple assessment methods enabled the preparation of comprehensive psychological profiles for each child and facilitated individualized rehabilitation planning.

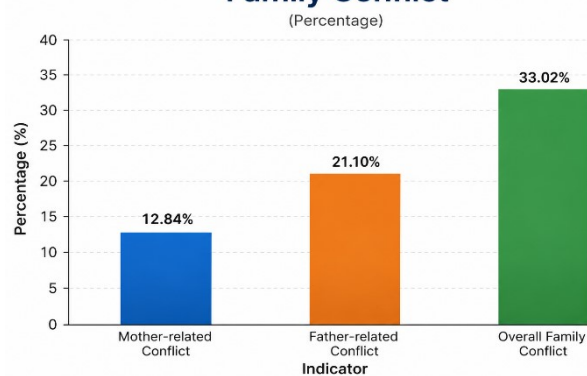
4.5 MAJOR PSYCHOLOGICAL FINDINGS

Family Conflict

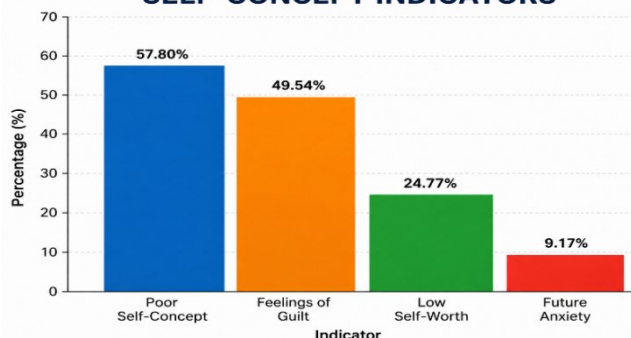
Interpretation:

Family conflict emerged as one of the most significant emotional stressors. Approximately one-third of the children demonstrated unresolved family-related conflicts, highlighting the need for counselling and family reintegration efforts.

Family Conflict



SELF-CONCEPT INDICATORS



Self-Concept

Interpretation:

Negative self-perception was one of the most prominent findings. These indicators justified interventions focused on confidence building, resilience, and positive self-identity.

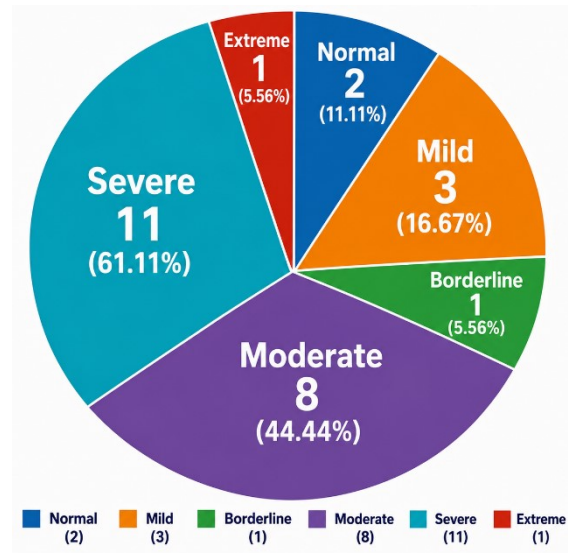
Depression

Table 4.3 Depression (BDI)

Severity	Number
Normal	2
Mild	3
Borderline	1
Moderate	8
Severe	11
Extreme	1

Interpretation:

A considerable number of children exhibited moderate to severe depressive symptoms, emphasizing the need for regular psychological counselling and continuous monitoring.



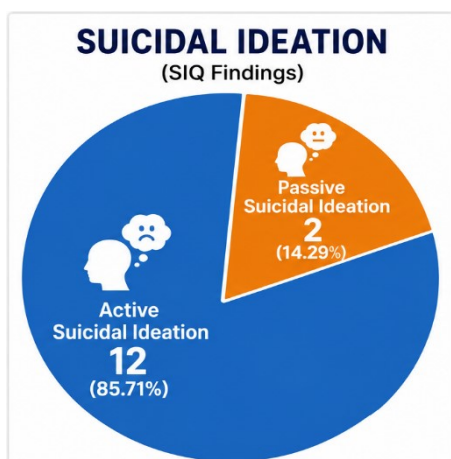
Behavioural and Personality Indicators (HFDT)

Table 4.4 Major HFDT Findings

Indicator	Percentage
Fear and Poor Self-Concept	46.23
Aggression / Grandiosity	31.13
Emotional Immaturity	32.1
Self-Orientation	41.51
Attachment to Opposite-Sex Parent	39.62

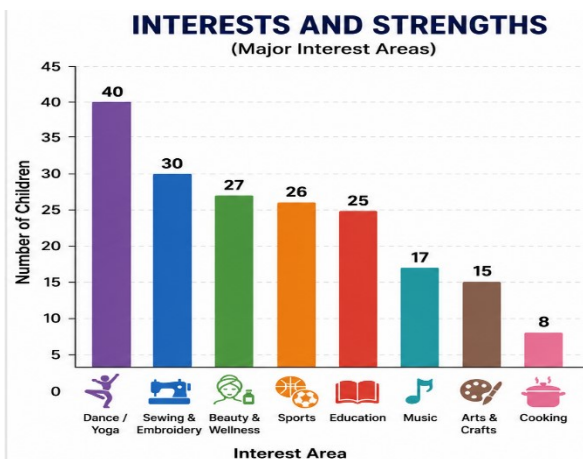
Interpretation:

The HFDT findings suggested emotional insecurity, identity-related concerns, and interpersonal difficulties among many participants. However, they also indicated aspirations and adaptive potential that could be strengthened through counselling.



Interpretation:

Children identified with suicidal thoughts were prioritized for immediate counselling, crisis intervention, and continuous follow-up.



Interpretation:

The assessment revealed significant strengths and vocational aspirations. These findings directly informed the introduction of the University's Certificate Programme on Basic Sewing and Stitching and Certificate Course in Food

4.6 COMPARATIVE ANALYSIS

Table 4.11 Comparative Analysis of Three Shelter Homes

Dimension	Swaroop Nagar	Nawabganj	Kalyanpur
Family Conflict	High	Moderate	High
Poor Self-Concept	High	Moderate	Moderate
Depression	Moderate–Severe	Mild–Moderate	Mild–Moderate
Behavioural Concerns	Emotional Withdrawal	Emotional Instability	Aggression / Impulsivity
Major Strengths	Creativity	Education	Sports & Technical Skills
Rehabilitation Priority	Counselling & Confidence Building	Career Guidance	Behaviour Management & Life Skills

Interpretation:

While all three shelter homes demonstrated similar rehabilitation needs, Swaroop Nagar required more intensive psychological support, Nawabganj benefited from educational and career guidance interventions, and Kalyanpur required additional emphasis on behavioural management and emotional regulation. Across all centres, counselling, life-skills education, vocational training, and continuous mentoring emerged as common priorities.

4.7 NEEDS ASSESSMENT

The integrated assessment identified the following priority needs:

Table 4.12 Priority Needs Matrix

Priority	Identified Need	Planned Intervention
High	Emotional distress	Individual counselling
High	Low self-esteem	Confidence-building sessions
High	Depression	Clinical counselling
High	Family conflict	Family counselling
High	Vocational preparedness	University certificate courses
Medium	Educational support	Academic mentoring
Medium	Communication skills	Group counselling
Medium	Stress management	Yoga and wellness sessions
Medium	Recreation	Sports and creative activities

Interpretation:

The needs assessment demonstrated that effective rehabilitation requires an integrated approach combining psychological care, educational support, life-skills development, family interventions, and vocational training. These findings directly informed the design of the counselling programme, weekly psychosocial interventions, yoga and wellness sessions, and the two university-certified vocational courses implemented during the project.

4.8 CHAPTER SUMMARY

The baseline psychological assessment of 235 children provided the scientific foundation for the entire rehabilitation programme. The assessment identified significant psychosocial concerns, including family conflict, poor self-concept, depressive symptoms, behavioural difficulties, and suicidal ideation, while simultaneously highlighting children's resilience, aspirations, and vocational interests. The integrated analysis enabled the preparation of individualized rehabilitation plans and guided the implementation of counselling, weekly psychosocial interventions, wellness activities, life-skills education, and university-certified vocational training. The findings demonstrate that evidence-based psychological assessment is indispensable for designing effective, child-centred rehabilitation programmes and establishing a sustainable model of institutional care.

CHAPTER 5

PSYCHOLOGICAL COUNSELLING AND WELLNESS INTERVENTIONS

5.1 INTRODUCTION

The baseline psychological assessment revealed that a significant proportion of children residing in Government Shelter Homes experienced emotional distress, poor self-concept, family conflict, behavioural difficulties, depressive symptoms, and uncertainty regarding their future. These findings emphasized that rehabilitation should not be limited to institutional care but should include structured psychological interventions that promote emotional healing, resilience, and personal growth.

Based on the assessment findings presented in Chapter 4, Chhatrapati Shahu Ji Maharaj University (CSJMU), Kanpur implemented a comprehensive psychological counselling and wellness programme across the three Government Shelter Homes. The programme was designed to address individual emotional needs while simultaneously strengthening social skills, confidence, coping abilities, and overall psychological well-being.

Rather than adopting a problem-oriented approach, the intervention emphasized a **strengths-based, child-centred, and trauma-informed model** in which every child was viewed as capable of positive change when provided with consistent guidance, emotional support, and opportunities for development.

5.2 OBJECTIVES OF THE COUNSELLING PROGRAMME

The counselling programme was implemented with the following objectives:

- To provide psychological support based on individual assessment findings.
- To reduce emotional distress, anxiety, and depressive symptoms.
- To improve self-esteem and confidence.
- To strengthen emotional regulation and coping skills.
- To promote healthy interpersonal relationships.
- To improve communication and social interaction.
- To support behavioural modification and positive decision-making.
- To encourage educational motivation and career planning.
- To facilitate family reintegration wherever possible.
- To enhance overall psychological well-being through wellness activities.

The counselling programme formed the central component of the University's comprehensive rehabilitation strategy.

5.3 COUNSELLING MODEL

The counselling intervention followed a structured and continuous process rather than isolated counselling sessions. Children identified during the baseline assessment received individualized support according to the severity of their psychological needs.

Figure 5.1 CSJMU Psychological Counselling Model



The model ensured continuity of care and facilitated gradual emotional recovery through regular monitoring and supportive interventions.

5.4 TYPES OF COUNSELLING INTERVENTIONS

The counselling programme incorporated multiple approaches to address the diverse psychological needs of the children.

5.4.1 Individual Counselling

Individual counselling was provided to children requiring personalized psychological support. Sessions were conducted in a confidential and supportive environment where children were encouraged to express their thoughts, emotions, fears, and aspirations freely.

Major issues addressed during individual counselling included:

- Family conflict and separation.
- Emotional distress.
- Anxiety and depressive symptoms.
- Low self-esteem.

- Behavioural concerns.
- Anger management.
- Trauma-related experiences.
- Future planning.
- Educational motivation.

Counselling emphasized empathy, active listening, positive reinforcement, cognitive restructuring, and problem-solving. Children identified with moderate or severe psychological concerns received regular follow-up sessions throughout the intervention period.

5.4.2 Group Counselling

Group counselling served as an effective platform for improving peer interaction, communication, emotional expression, and mutual support.

The major themes of group sessions included:

- Emotional awareness.
- Building self-confidence.
- Stress management.
- Friendship and peer relationships.
- Communication skills.
- Conflict resolution.
- Decision-making.
- Goal setting.
- Gender sensitivity.
- Positive thinking.

Group discussions enabled participants to recognize that many of their challenges were shared by others, thereby reducing feelings of isolation and promoting mutual encouragement.

5.4.3 Family Counselling

Wherever feasible, counselling services were extended to family members and caregivers.

The objectives of family counselling were:

- Restoring communication between children and families.
- Reducing misunderstandings.
- Encouraging positive parenting practices.
- Preparing families for reintegration.
- Addressing emotional conflicts.
- Strengthening family support systems.

Although reintegration was not possible in every case due to legal or social circumstances, family counselling contributed significantly to improving emotional stability among several children.

5.5 YOGA AND WELLNESS INTERVENTIONS

Recognizing the close relationship between physical and psychological well-being, regular yoga and wellness sessions were incorporated into the rehabilitation programme.

These sessions were conducted under faculty supervision and focused on improving emotional balance, concentration, stress management, and self-discipline.

Major activities included:

- Yoga postures (Asanas).
- Breathing exercises (Pranayama).
- Relaxation techniques.
- Guided meditation.
- Mindfulness exercises.
- Physical stretching.
- Recreational games.

Regular participation in these activities encouraged children to adopt healthier coping strategies and improved their emotional regulation.

5.6 LIFE SKILLS EDUCATION

Life-skills education formed an integral component of the counselling programme. Sessions were designed to prepare children for independent and responsible living after leaving institutional care.

Major life-skills covered included:

- Self-awareness.
- Effective communication.
- Decision-making.
- Problem-solving.
- Emotional regulation.
- Stress management.
- Leadership.
- Teamwork.
- Personal hygiene.
- Time management.
- Goal setting.
- Career planning.

The life-skills programme was delivered through interactive discussions, role plays, games, storytelling, and experiential learning activities, making the sessions engaging and child-friendly.



5.7 OBSERVED CHANGES FOLLOWING COUNSELLING

Continuous observation by faculty members, psychologists, social workers, and postgraduate students indicated several positive behavioural and emotional changes during the intervention period.

The most frequently observed improvements included:

Emotional Changes

- Improved confidence.
- Reduced emotional distress.
- Better emotional expression.
- Increased optimism.
- Reduced anxiety.

Behavioural Changes

- Improved discipline.
- Better anger management.
- Increased participation in activities.
- Reduction in aggressive behaviour.
- Improved cooperation with peers.

Social Changes

- Improved interpersonal relationships.
- Better communication.
- Greater willingness to participate in group discussions.
- Enhanced teamwork.

Educational Changes

- Increased interest in education.
- Improved classroom participation.
- Greater motivation towards future careers.
- Positive attitude towards vocational training.

Psychological Changes

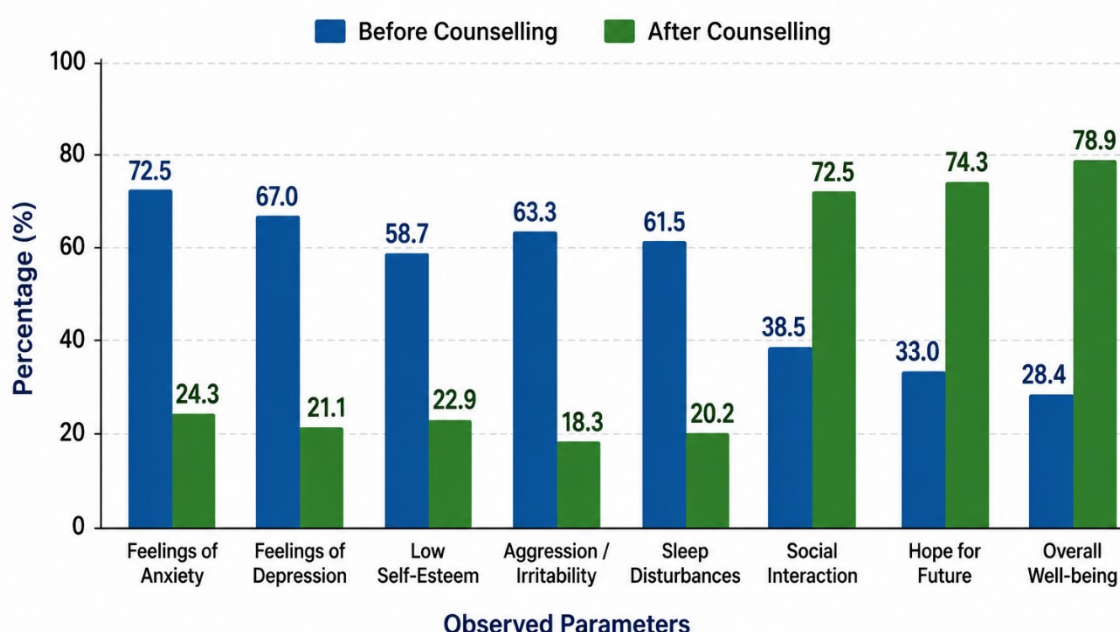
- Improved self-esteem.
- Better problem-solving ability.
- Greater emotional resilience.
- Increased willingness to seek help when required.

Although individual responses varied, the overall trend indicated progressive psychological adjustment and improved engagement with rehabilitation activities.

Table 5.1 Summary of Counselling Outcomes

Domain	Major Improvements Observed
Emotional Well-being	Reduced distress, improved confidence
Behaviour	Better emotional regulation and discipline
Social Adjustment	Improved communication and peer relationships
Education	Increased motivation and participation
Life Skills	Better decision-making and problem-solving
Future Orientation	Greater interest in education and vocational training

Observed Changes After Counselling (Before vs. After)



5.8 CONTRIBUTION OF COUNSELLING TO REHABILITATION

The counselling programme functioned as the psychological foundation of the entire rehabilitation initiative. It prepared children emotionally to benefit from subsequent interventions such as weekly psychosocial activities, yoga sessions, life-skills education, and university-certified vocational training.

By addressing emotional distress at an early stage, counselling facilitated:

- Greater participation in educational activities.
- Improved social interaction.
- Better acceptance of vocational training.
- Increased confidence for independent living.
- Enhanced readiness for family and community reintegration.

The integration of counselling with social work interventions, wellness activities, and skill development created a comprehensive rehabilitation framework that addressed both immediate psychological concerns and long-term developmental needs.

5.9 CHAPTER SUMMARY

The psychological counselling and wellness programme constituted a central component of the CSJMU Shelter Home Rehabilitation Model. Guided by the findings of the baseline psychological assessment, the programme provided individualized and group-based psychological support, family counselling, yoga and wellness sessions, and life-skills education to children residing in three Government Shelter Homes.

The intervention adopted a strengths-based and trauma-informed approach that emphasized emotional healing, confidence building, resilience, and positive personal development. Continuous counselling, combined with regular follow-up and wellness activities, contributed to noticeable improvements in emotional well-being, behavioural adjustment, interpersonal relationships, and educational motivation.

The counselling programme also created a strong foundation for the subsequent weekly psychosocial interventions and vocational skill development initiatives described in the following chapters, demonstrating the importance of integrating mental health services within institutional child rehabilitation.



CHAPTER 6

WEEKLY PSYCHOSOCIAL INTERVENTIONS AND STUDENT ENGAGEMENT

6.1 INTRODUCTION

While psychological assessment and counselling provided the scientific foundation for rehabilitation, sustainable behavioural change required **continuous engagement** with children. Recognizing this, Chhatrapati Shahu Ji Maharaj University (CSJMU), Kanpur developed a unique **Weekly Psychosocial Intervention Model**, under which faculty members and postgraduate students from the Departments of Clinical Psychology and Social Work visited the Government Shelter Homes **every Friday and Saturday** throughout the project period.

Unlike one-time awareness programmes, these regular visits established continuity of care, strengthened trust between children and the intervention team, and enabled systematic monitoring of psychological progress. The weekly intervention model combined counselling, life-skills education, recreational activities, educational guidance, family follow-up, and behavioural observation, thereby creating a supportive environment for the holistic development of the children.

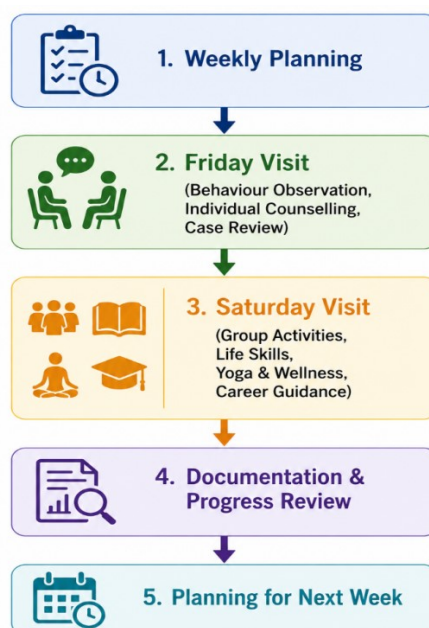
The sustained presence of University faculty and students also transformed the shelter homes into experiential learning settings, where academic knowledge was translated into meaningful community service while simultaneously improving the quality of institutional rehabilitation.

6.2 WEEKLY PSYCHOSOCIAL INTERVENTION MODEL

The Weekly Psychosocial Intervention Model was developed to ensure continuity of psychological support and regular interaction with children. Every visit was planned according to a structured schedule, allowing the intervention team to assess progress, identify emerging concerns, reinforce positive behaviour, and provide ongoing emotional support.

The intervention model followed a cyclical process in which observations from each visit informed subsequent counselling sessions and rehabilitation activities.

Figure 6.1 Weekly Psychosocial Intervention Workflow



This structured workflow ensured that rehabilitation remained dynamic, responsive, and child-centred rather than activity-based.

6.3 MAJOR ACTIVITIES CONDUCTED DURING WEEKLY VISITS

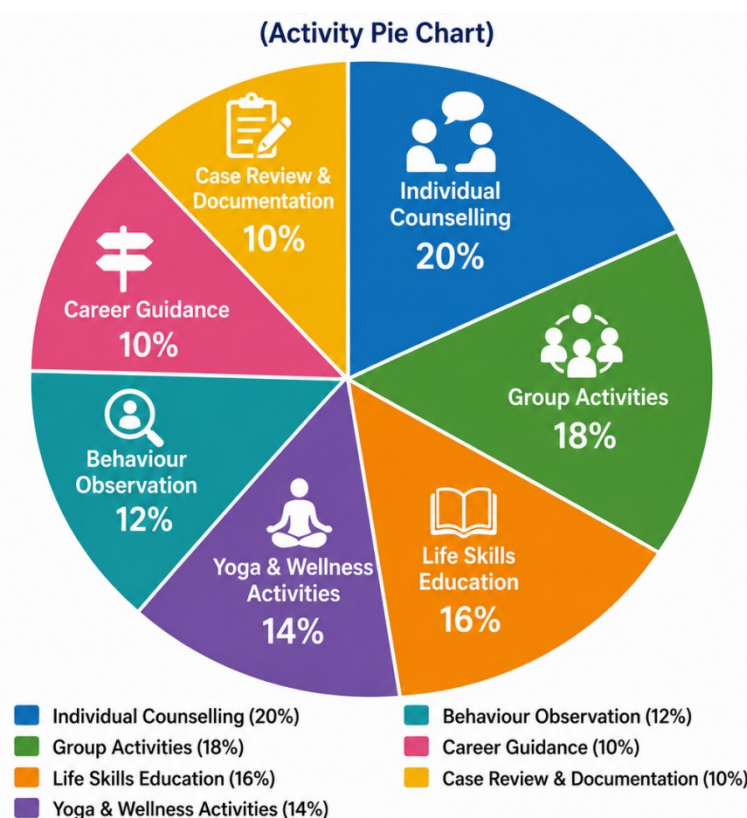
The weekly visits incorporated a variety of psychological, educational, recreational, and developmental activities designed to address the multidimensional needs of the children.

Major activities included:

- Individual psychological counselling.
- Group counselling sessions.
- Behavioural observation.
- Rapport-building activities.
- Educational guidance and academic mentoring.
- Career counselling.
- Life-skills education.
- Yoga and wellness sessions.
- Recreational and cultural activities.
- Creative expression through art, music, and games.
- Vocational motivation and follow-up.
- Family interaction and case follow-up.
- Progress documentation.

The diversity of activities ensured that children remained actively engaged while simultaneously receiving continuous psychological support.

Figure 6.2 Types of Activities Conducted During Weekly Visits



The chart demonstrates that counselling, life-skills education, wellness activities, educational support, and recreational engagement constituted the major components of the weekly intervention programme.

6.4 STUDENT PARTICIPATION AND COMMUNITY ENGAGEMENT

A distinctive feature of the project was the active involvement of postgraduate students from the **Department of Clinical Psychology** and the **Department of Social Work**. Under the supervision of faculty members, students participated in planning, implementing, documenting, and evaluating rehabilitation activities.

The involvement of students served a dual purpose. First, it enhanced the quality of psychosocial services provided to the children by ensuring regular interaction and individualized attention. Second, it offered valuable field-based learning opportunities, enabling students to apply theoretical knowledge in real-life rehabilitation settings.

The responsibilities of students included:

- Assisting in psychological assessments.
- Conducting behavioural observations.
- Supporting individual and group counselling sessions.
- Organizing life-skills education.
- Facilitating recreational and creative activities.
- Providing educational guidance.
- Assisting in vocational training sessions.
- Maintaining field documentation and progress records.

This collaborative model strengthened the University's commitment to community engagement while contributing to the professional development of future psychologists and social workers.

The participation of students throughout the intervention period significantly increased the frequency, continuity, and quality of psychosocial support available to the children.

6.5 FAMILY TRACING AND FOLLOW-UP

Family relationships emerged as one of the most significant psychological concerns identified during the baseline assessment. Consequently, family tracing and follow-up became important components of the weekly intervention programme.

Whenever appropriate and legally permissible, the intervention team worked in collaboration with shelter home authorities to:

- Review family backgrounds.
- Maintain communication with parents or guardians.
- Facilitate family counselling.
- Assess readiness for reintegration.
- Encourage positive family interaction.
- Support emotional reconciliation between children and caregivers.

For children whose family reintegration was not immediately feasible, counselling focused on developing emotional resilience, strengthening social support systems, and preparing them for independent living.

The regular follow-up process also enabled the intervention team to monitor changes in children's emotional responses towards family members and evaluate the effectiveness of counselling interventions.

6.6 BEHAVIOURAL CHANGES OBSERVED DURING WEEKLY INTERVENTIONS

Continuous interaction with children over one and a half years enabled faculty members and students to observe gradual behavioural and emotional improvements. Although the pace of change varied among individuals, several positive trends became evident during the intervention period.

The most frequently observed improvements included:

Emotional Changes

- Increased confidence.
- Better emotional expression.
- Reduced anxiety.
- Greater willingness to seek help.
- Improved optimism regarding the future.

Behavioural Changes

- Reduced aggression.
- Improved discipline.
- Better anger management.
- Increased participation in daily activities.
- Greater responsibility towards assigned tasks.

Social Changes

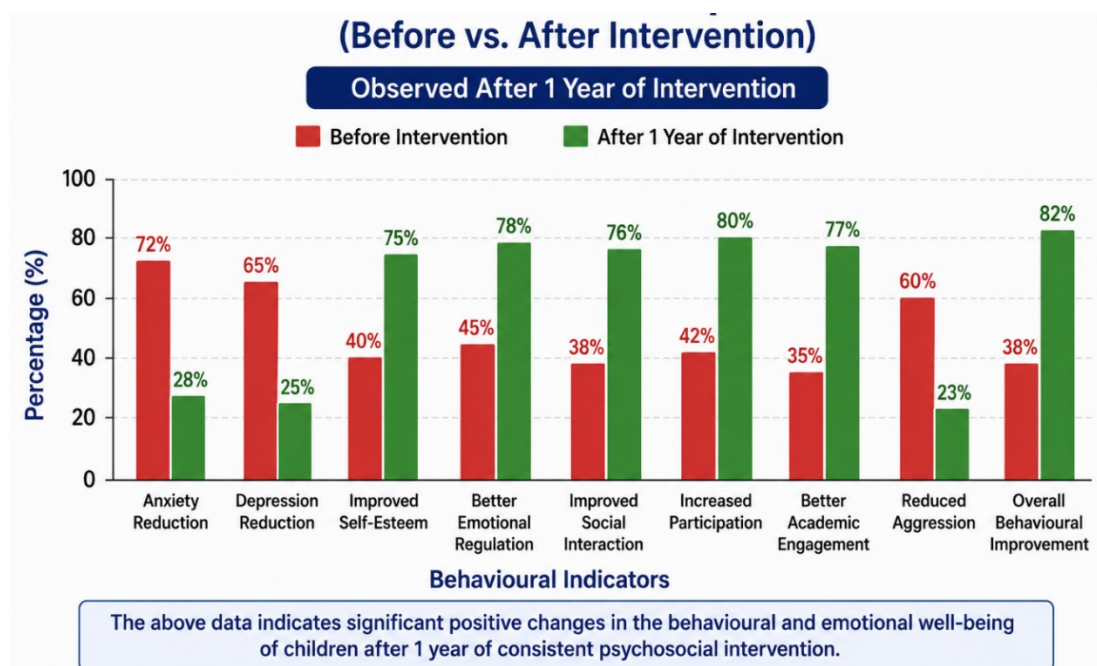
- Improved communication skills.
- Better peer relationships.
- Increased cooperation during group activities.
- Enhanced teamwork.
- Greater respect for institutional rules.

Educational and Vocational Changes

- Increased interest in education.
- Greater participation in vocational training.
- Improved career awareness.
- Enhanced motivation for independent living.

These improvements were consistently documented through behavioural observations, counselling records, and feedback from shelter home staff.

Figure 6.4 Observed Behavioural Improvements (Before vs. After Intervention)



The graph illustrates improvements across major behavioural domains following sustained psychosocial engagement.

6.7 SIGNIFICANCE OF THE WEEKLY INTERVENTION MODEL

The Weekly Psychosocial Intervention Model proved to be one of the most innovative components of the project. Unlike periodic outreach programmes, the continuity of weekly visits enabled the intervention team to establish strong therapeutic relationships with the children and monitor behavioural progress over time.

The model demonstrated several advantages:

- Continuity of psychological care.
- Early identification of emerging emotional concerns.
- Regular monitoring of behavioural changes.
- Strengthening of trust between children and counsellors.
- Improved participation in rehabilitation activities.
- Enhanced coordination between the University and shelter home authorities.
- Opportunities for experiential learning among postgraduate students.

The sustained engagement also ensured that interventions could be modified according to children's changing developmental and psychological needs, thereby making rehabilitation more responsive and effective.

6.8 CHAPTER SUMMARY

The Weekly Psychosocial Intervention Programme represented a distinctive feature of the CSJMU Shelter Home Rehabilitation Model. Through regular visits every Friday and Saturday, faculty members and postgraduate students provided continuous psychological support, behavioural monitoring, educational guidance, life-skills education, wellness activities, and family follow-up across the three Government Shelter Homes.

The multidisciplinary participation of students from Clinical Psychology and Social Work enriched both the rehabilitation process and academic learning, creating a successful model of university–community partnership. Regular engagement contributed to noticeable improvements in emotional well-being, behavioural adjustment, social interaction, educational motivation, and participation in vocational activities.

Most importantly, the weekly intervention model demonstrated that **consistent human connection, mentorship, and psychosocial support can significantly enhance the rehabilitation outcomes of children residing in institutional care.** The experiences gained through this programme laid the foundation for the University-certified vocational skill development initiatives presented in the following chapter.



CHAPTER 7

VOCATIONAL SKILL DEVELOPMENT AND LIVELIHOOD PROMOTION

7.1 INTRODUCTION

The ultimate objective of rehabilitation extends beyond emotional recovery to preparing children for independent, dignified, and productive lives. While psychological counselling strengthens emotional well-being, sustainable rehabilitation requires the development of practical skills that enable children to become economically self-reliant after leaving institutional care.

The baseline psychological assessment conducted under the project revealed that a majority of adolescents residing in Government Shelter Homes were approaching adulthood and expressed concerns regarding employment, financial independence, and future livelihood opportunities. The assessment also identified strong interests in tailoring, food preparation, beauty and wellness, sports, arts, and other vocational activities. These findings highlighted the need to integrate livelihood promotion with psychosocial rehabilitation.

In response, Chhatrapati Shahu Ji Maharaj University (CSJMU), Kanpur introduced two **University-certified vocational programmes** under the framework of the **National Education Policy (NEP-2020)**:

- **Certificate Programme on Basic Sewing and Stitching**
- **Certificate Course in Food Production**

These programmes were implemented alongside counselling, life-skills education, and weekly psychosocial interventions, ensuring that vocational education became an integral component of the rehabilitation process.

7.2 OBJECTIVES OF THE VOCATIONAL SKILL DEVELOPMENT PROGRAMME

The vocational training programme was designed with the following objectives:

- To develop employable vocational skills among children residing in shelter homes.
- To promote self-confidence and self-reliance through practical learning.
- To prepare children for employment and entrepreneurship.
- To complement psychological rehabilitation with livelihood-oriented interventions.
- To enhance life skills, discipline, creativity, and teamwork.
- To support successful social and economic reintegration after institutional care.

7.3 University Certificate Programmes

Based on the interests and rehabilitation needs identified during the baseline assessment, CSJMU designed and implemented two structured certificate programmes.

Table 7.1 University Certificate Programmes

Certificate Programme	Duration	Credits	Focus Area
Basic Sewing and Stitching	6 Weeks	4 Credits	Tailoring and Garment Construction
Food Production	90 Contact Hours	4 Credits	Culinary Skills and Hospitality

Both programmes combined theoretical instruction with practical training and were delivered by University faculty members using competency-based teaching methods.

7.4 CERTIFICATE PROGRAMME ON BASIC SEWING AND STITCHING

The **Certificate Programme on Basic Sewing and Stitching** was introduced to equip adolescent girls with practical tailoring skills that could enhance their employability and support self-employment.

The programme included training in:

- Hand and machine stitching.
- Operation and maintenance of sewing machines.
- Basic garment construction.
- Preparation of utility products.
- Simple apparel designing.
- Measurement and cutting techniques.
- Finishing and quality control.

Training emphasized **hands-on learning**, allowing participants to independently prepare household items and basic garments under faculty supervision.

Outcomes

The programme contributed to:

- Increased confidence in operating sewing machines.
- Development of practical tailoring skills.
- Improved creativity and concentration.
- Greater interest in entrepreneurship.
- Enhanced readiness for self-employment.

The completion of tangible products during training provided participants with a sense of achievement and strengthened their confidence in their own abilities.

7.5 CERTIFICATE COURSE IN FOOD PRODUCTION

The **Certificate Course in Food Production** was designed to prepare children for opportunities in the hospitality and food service sector while simultaneously developing essential life skills.

The course covered:

- Kitchen organization.
- Food hygiene and sanitation.
- Safe handling of kitchen equipment.
- Basic cooking techniques.
- Preparation of Indian and simple continental dishes.
- Food presentation.
- Teamwork in kitchen operations.

The programme adopted a practical approach, enabling participants to prepare meals independently while learning professional standards of cleanliness, safety, and nutrition.

Outcomes

The programme resulted in:

- Improved culinary competencies.
- Better teamwork and communication.
- Increased confidence in preparing meals independently.
- Greater awareness of hospitality-related careers.
- Enhanced interest in self-employment and food entrepreneurship.

The training also reinforced discipline, responsibility, and collaborative learning among participants.

7.6 IMPACT OF VOCATIONAL SKILL DEVELOPMENT

The vocational training programmes had a positive impact that extended beyond technical skill acquisition. Faculty observations and regular follow-up indicated improvements in several psychosocial domains.

Table 7.2 Observed Outcomes of Vocational Training

Domain	Observed Improvement
Self-confidence	Increased willingness to perform practical tasks
Emotional Well-being	Greater sense of achievement and purpose
Social Skills	Improved teamwork and communication
Discipline	Better punctuality and responsibility
Creativity	Increased interest in productive activities
Employability	Acquisition of practical livelihood skills
Future Orientation	Improved career aspirations and planning

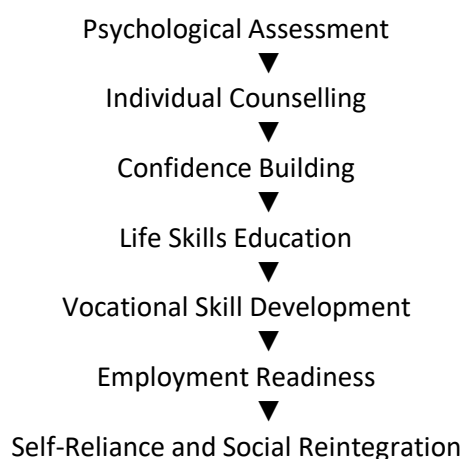
Participation in vocational activities enabled children to experience success through productive work, thereby reinforcing positive self-esteem and reducing feelings of helplessness.

7.7 INTEGRATION WITH PSYCHOLOGICAL REHABILITATION

One of the distinctive features of the project was the integration of vocational education with psychological counselling and weekly psychosocial interventions.

Rather than functioning as isolated training activities, the certificate programmes were introduced after children had participated in counselling, confidence-building sessions, and life-skills education. This sequential approach ensured that participants were emotionally prepared to benefit from vocational learning.

Figure 7.1 Integrated Rehabilitation Model



This integrated model demonstrates that psychological rehabilitation and livelihood promotion are complementary processes that together contribute to sustainable rehabilitation.

7.8 CHAPTER SUMMARY

Vocational skill development emerged as a key component of the CSJMU Shelter Home Rehabilitation Model. Guided by the findings of the baseline psychological assessment, the University introduced two credit-based certificate programmes in **Basic Sewing and Stitching** and **Food Production** to strengthen employability, self-confidence, and independent living skills among children residing in Government Shelter Homes.

The programmes provided practical vocational competencies while simultaneously enhancing emotional well-being, teamwork, discipline, and future orientation. By integrating skill development with counselling, life-skills education, and continuous psychosocial support, the University demonstrated a holistic rehabilitation approach that prepares children not only for employment but also for confident and dignified participation in society.

The success of these initiatives highlights the importance of incorporating structured vocational education into institutional child care and provides a replicable model for strengthening rehabilitation services in Government Shelter Homes across the country.



8.1 INTRODUCTION

The primary objective of the **Transforming Lives Through Psychological Care and Rehabilitation** project was not merely to conduct psychological assessments or organize individual activities, but to bring about measurable improvements in the emotional well-being, behaviour, social adjustment, educational motivation, and future preparedness of children residing in Government Shelter Homes.

The impact assessment presented in this chapter is based on continuous observations made during one and a half years of intervention, counselling records, faculty observations, student field reports, interactions with shelter home authorities, and behavioural changes observed among the participating children. Rather than focusing on individual activities, this chapter evaluates the overall outcomes of the integrated rehabilitation model implemented by Chhatrapati Shahu Ji Maharaj University (CSJMU), Kanpur.

The assessment demonstrates that the combination of scientific psychological assessment, regular counselling, weekly psychosocial interventions, wellness programmes, life-skills education, and university-certified vocational training contributed significantly to improving the overall functioning and rehabilitation outcomes of the participating children.

8.2 IMPACT ON EMOTIONAL WELL-BEING

One of the most significant outcomes of the project was the improvement in the emotional well-being of children. At the beginning of the intervention, many children demonstrated emotional insecurity, low confidence, anxiety, family-related distress, and poor self-esteem. Continuous counselling and psychosocial support helped children develop healthier emotional coping mechanisms.

Major Emotional Outcomes

- Increased self-confidence and self-esteem.
- Improved emotional expression.
- Reduction in anxiety and emotional distress.
- Greater optimism regarding the future.
- Increased willingness to seek psychological support.
- Better emotional regulation during stressful situations.

Many children who were initially reluctant to communicate gradually became active participants in counselling sessions, group discussions, and educational activities.

8.3 IMPACT ON BEHAVIOUR AND SOCIAL ADJUSTMENT

Regular interaction through weekly visits enabled continuous monitoring of behavioural changes. Faculty members, postgraduate students, and shelter home staff observed gradual improvements in discipline, communication, interpersonal relationships, and participation in institutional activities.

Table 8.1 Behavioural Changes Observed

Domain	Before Intervention	After Intervention
Self-confidence	Low	Improved
Emotional Expression	Hesitant	Open and Positive
Participation	Limited	Active
Anger Management	Poor	Improved
Peer Interaction	Restricted	Better Cooperation
Group Participation	Irregular	Regular
Responsibility	Limited	Increased

Overall, children demonstrated greater willingness to participate in educational, recreational, and vocational activities, reflecting improved social adjustment and emotional stability.

8.4 IMPACT ON EDUCATION AND LIFE SKILLS

The intervention programme also influenced children's educational attitudes and life skills. Regular mentoring, educational guidance, and career counselling encouraged children to view education as an important pathway for personal development.

Major educational outcomes included:

- Improved interest in formal education.
- Increased participation in academic activities.
- Better awareness of career opportunities.
- Improved communication skills.
- Enhanced decision-making ability.
- Better time management and personal responsibility.
- Increased confidence in expressing opinions.

Life-skills education further strengthened children's ability to manage everyday challenges and prepare for independent living.

8.5 IMPACT OF VOCATIONAL SKILL DEVELOPMENT

The introduction of the **Certificate Programme on Basic Sewing and Stitching** and the **Certificate Course in Food Production** significantly strengthened the rehabilitation process by providing practical livelihood skills.

The vocational programmes contributed to:

- Development of employable skills.
- Increased confidence through practical learning.
- Enhanced creativity and productivity.
- Greater awareness of self-employment opportunities.
- Improved motivation for future career planning.
- Increased readiness for independent living.

Children expressed pride in successfully completing practical assignments and receiving university certification, reinforcing their belief in their own abilities and future potential.

8.6 INSTITUTIONAL IMPACT

The project also produced significant institutional benefits by strengthening collaboration between the University and Government Shelter Homes.

Major institutional outcomes included:

- Introduction of scientific psychological assessment within shelter homes.
- Establishment of a multidisciplinary rehabilitation approach.
- Regular monitoring through weekly university visits.
- Increased academic engagement of postgraduate students.
- Improved coordination between psychologists, social workers, faculty members, and shelter home authorities.
- Development of an evidence-based rehabilitation model.

The project demonstrated that universities can play a transformative role in strengthening institutional child care through sustained community engagement.

8.7 OVERALL IMPACT MATRIX

Table 8.2 Overall Impact Assessment

Domain	Key Outcomes
Psychological	Improved confidence, emotional regulation, reduced distress
Behavioural	Better discipline, reduced aggression, improved participation
Social	Improved communication, teamwork, interpersonal relationships
Educational	Increased motivation, academic participation, career awareness
Vocational	Practical skills, employability, entrepreneurship orientation
Institutional	Strong University–Shelter Home collaboration, evidence-based rehabilitation

8.8 KEY OUTCOMES OF THE CSJMU REHABILITATION MODEL

The integrated rehabilitation model implemented by Chhatrapati Shahu Ji Maharaj University demonstrated that sustainable rehabilitation is achieved when psychological care, education, wellness, and livelihood promotion are delivered as interconnected components rather than isolated activities.

The project generated the following key outcomes:

- Comprehensive psychological profiling of all participating children.
- Individualized counselling based on scientific assessment.
- Regular psychosocial support through weekly interventions.
- Improved emotional well-being and behavioural adjustment.
- Enhanced educational motivation and life skills.
- University-certified vocational training in two employability-oriented disciplines.
- Strengthened collaboration between academia and Government Shelter Homes.
- Development of a replicable multidisciplinary rehabilitation model.

The success of the project indicates that continuous engagement, rather than one-time interventions, is essential for achieving meaningful and sustainable rehabilitation outcomes.

8.9 CHAPTER SUMMARY

The impact assessment demonstrates that the integrated rehabilitation programme implemented by Chhatrapati Shahu Ji Maharaj University significantly contributed to the psychological, behavioural, educational, social, and vocational development of children residing in Government Shelter Homes. The combination of scientific assessment, regular counselling, weekly psychosocial interventions, wellness activities, life-skills education, and vocational training produced measurable improvements in confidence, emotional regulation, participation, interpersonal relationships, and future preparedness.

Beyond its direct benefits to the participating children, the project established a strong partnership between the University and Government Shelter Homes and demonstrated the potential of higher educational institutions to contribute meaningfully to child protection and rehabilitation. The **CSJMU Integrated Rehabilitation Model** provides an evidence-based, multidisciplinary, and replicable framework that can be adapted by universities and child care institutions across India to strengthen psychosocial rehabilitation and promote the holistic development of vulnerable children.



9.1 INTRODUCTION

The **Transforming Lives Through Psychological Care and Rehabilitation** project demonstrated that sustainable rehabilitation of children residing in Government Shelter Homes requires much more than institutional care. The integration of scientific psychological assessment, continuous counselling, regular psychosocial interventions, wellness programmes, student engagement, and vocational skill development created a comprehensive rehabilitation model that addressed the emotional, educational, social, and livelihood needs of the children.

Over a period of one and a half years, the project generated valuable experiences that highlight both the strengths of the intervention and the challenges associated with institutional child rehabilitation. These experiences provide important lessons for strengthening child protection systems and developing sustainable rehabilitation models that can be replicated in other districts and states.

This chapter summarizes the best practices developed during the project, identifies key implementation challenges, and proposes a future roadmap for expanding and institutionalizing the **CSJMU Integrated Rehabilitation Model**.

9.2 BEST PRACTICES

The project introduced several innovative practices that distinguish it from conventional institutional support programmes.

1. Scientific Psychological Profiling

Every child was assessed using standardized psychological tools before initiating interventions. This evidence-based approach ensured that counselling and rehabilitation activities were tailored to individual needs rather than adopting a uniform approach for all children.

2. Continuous University Engagement

Instead of organizing occasional awareness programmes, faculty members and postgraduate students visited the shelter homes every Friday and Saturday. This continuity helped establish trust, strengthened therapeutic relationships, and enabled regular monitoring of behavioural and emotional changes.

3. Multidisciplinary Rehabilitation Model

The collaboration between the Departments of Clinical Psychology and Social Work combined psychological expertise with social work interventions, creating a holistic rehabilitation approach. Faculty members, students, and shelter home staff worked as a multidisciplinary team to address emotional, behavioural, educational, and social needs simultaneously.

4. Student-Led Community Engagement

The active participation of postgraduate students transformed the project into an excellent example of **experiential learning**. Students gained practical exposure while children benefited from continuous interaction, mentoring, and psychosocial support.

5. Integration of Mental Health and Skill Development

One of the most innovative aspects of the project was the integration of psychological counselling with **University-certified vocational education**. Instead of treating livelihood promotion as a separate activity, vocational training was used as a therapeutic intervention to improve confidence, responsibility, and future readiness.

6. Evidence-Based Rehabilitation Planning

All interventions were planned on the basis of the baseline psychological assessment and needs assessment. This ensured that rehabilitation activities addressed actual psychosocial needs rather than perceived problems.

7. Strong Institutional Collaboration

The project established an effective partnership between **Chhatrapati Shahu Ji Maharaj University** and the Government Shelter Homes, demonstrating how academic institutions can contribute significantly to child protection and rehabilitation through community engagement and professional expertise.

9.3 CHALLENGES ENCOUNTERED DURING IMPLEMENTATION

Despite the encouraging outcomes, several challenges were encountered during project implementation.

Psychological Challenges

- Many children had experienced multiple traumatic events before institutionalization.
- Emotional trust was difficult to establish during the initial phase.
- Some children required long-term psychological support due to severe emotional distress.
- Family-related issues continued to affect emotional stability.

Educational Challenges

- Interrupted education among several children.
- Lack of motivation towards formal education in some cases.
- Wide variation in educational levels within the same shelter home.
- Limited career awareness among adolescents.

Family and Social Challenges

- Difficulties in tracing families in certain cases.
- Weak family support systems.
- Complex legal issues delaying reintegration.
- Social stigma associated with institutional care.

Institutional Challenges

- Limited availability of mental health professionals within shelter homes.
- Resource constraints for specialized rehabilitation programmes.
- Frequent changes in institutional population due to admissions and rehabilitation.
- Requirement for continuous capacity building of staff.

Sustainability Challenges

- Maintaining continuity after completion of the project.
- Scaling the model to additional shelter homes.
- Ensuring long-term financial and institutional support.
- Need for stronger convergence among education, health, and child protection systems.

These challenges highlighted the importance of sustained collaboration among universities, government departments, civil society organizations, and child protection agencies.

9.4 LESSONS LEARNED

The project generated several important lessons that can inform future rehabilitation programmes.

- Psychological assessment should precede all rehabilitation interventions.
- Regular follow-up is more effective than one-time counselling sessions.
- Trust-building is essential for successful psychological rehabilitation.
- Vocational education significantly enhances children's confidence and future orientation.
- Student participation enriches both rehabilitation services and academic learning.
- Family involvement, wherever feasible, strengthens long-term rehabilitation outcomes.
- Universities possess significant potential to support Government Child Care Institutions through professional expertise and community engagement.

These lessons provide valuable guidance for institutions planning similar rehabilitation initiatives.

9.5 FUTURE ROADMAP

Building upon the experiences of the present project, the following roadmap is proposed for strengthening psychosocial rehabilitation services in Government Shelter Homes.

Strengthening Mental Health Services

- Establish regular psychological counselling units within shelter homes.
- Conduct periodic psychological assessments of all resident children.
- Develop referral mechanisms for children requiring specialized psychiatric care.

Institutionalizing University Partnerships

- Expand collaboration between universities and Child Care Institutions.
- Encourage participation of postgraduate students in supervised field practice.
- Promote interdisciplinary rehabilitation programmes involving psychology, social work, education, law, management, and health sciences.

Expanding Skill Development

- Introduce additional University-certified vocational courses based on children's interests.
- Strengthen entrepreneurship and financial literacy programmes.
- Facilitate placement and livelihood opportunities for eligible adolescents.

Strengthening Family Reintegration

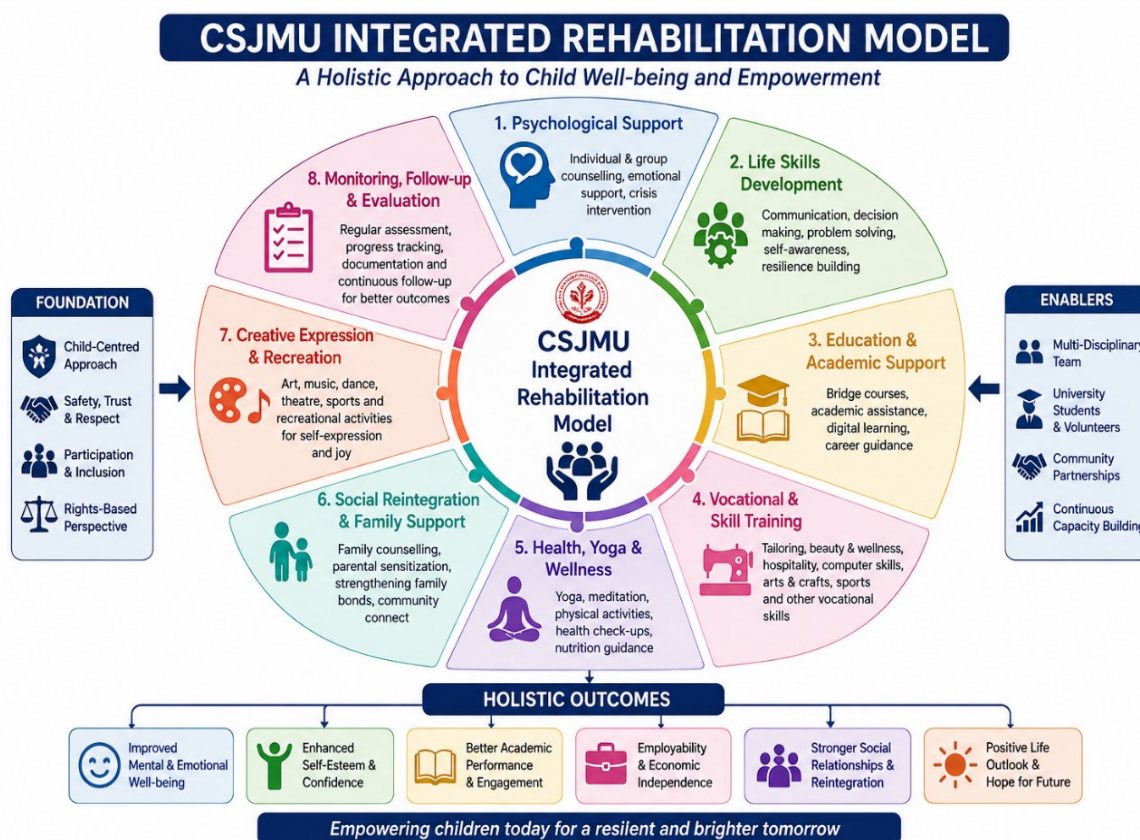
- Enhance family counselling services.
- Improve family tracing mechanisms.
- Provide post-reintegration follow-up and community support.

Research and Monitoring

- Develop standardized rehabilitation indicators.
- Conduct periodic outcome evaluations.
- Create digital monitoring systems for psychosocial rehabilitation.
- Encourage action research on institutional child care and rehabilitation.

9.6 CSJMU Integrated Rehabilitation Model

The experiences gained through this project led to the development of the **CSJMU Integrated Rehabilitation Model**, which combines assessment, counselling, psychosocial support, education, wellness, and livelihood promotion into a single coordinated framework.



The model demonstrates that holistic rehabilitation requires coordinated interventions addressing emotional, educational, social, and economic dimensions simultaneously. It also illustrates the vital role that higher educational institutions can play in strengthening child protection systems through sustained academic-community partnerships.

9.7 CONCLUSION

The **Transforming Lives Through Psychological Care and Rehabilitation** project demonstrates that comprehensive rehabilitation of children residing in Government Shelter Homes is achievable through sustained, evidence-based, and multidisciplinary interventions. The integration of psychological assessment, counselling, wellness activities, life-skills education, student engagement, and university-certified vocational training produced meaningful improvements in children's emotional well-being, confidence, behaviour, social participation, and future preparedness.

Beyond its immediate impact, the project established a strong partnership between Chhatrapati Shahu Ji Maharaj University and the Government Shelter Homes, highlighting the transformative role of universities in addressing complex social challenges. The **CSJMU Integrated Rehabilitation Model** provides a practical and replicable framework that can be adapted by universities, government agencies, and child care institutions across India.

The experiences documented in this report reaffirm that every child, irrespective of past adversity, possesses the capacity to grow, learn, and build a dignified future when provided with timely psychological support, meaningful educational opportunities, and compassionate human engagement. By investing in holistic rehabilitation today, institutions can empower vulnerable children to become confident, skilled and responsible citizens tomorrow.







Kanpur, Uttar Pradesh, India
202 B/e-1, Near Sapphire Tower, Kesav Nagar, Khalasi Line,
Swaroop Nagar, Kanpur, Uttar Pradesh 208002, India
Lat 26.48091° Long 80.30981°
29/08/2025 12:35 PM GMT +05:30

Kanpur, Uttar Pradesh, India
202 B/e-1, Near Sapphire Tower, Kesav Nagar, Khalasi Line,
Swaroop Nagar, Kanpur, Uttar Pradesh 208002, India
Lat 26.48091° Long 80.30981°
30/08/2025 01:05 PM GMT +05:30

Kanpur, Uttar Pradesh, India
202 B/e-1, Near Sapphire Tower, Kesav Nagar, Khalasi Line,
Swaroop Nagar, Kanpur, Uttar Pradesh 208002, India
Lat 26.48091° Long 80.30981°
29/08/2025 12:42 PM GMT +05:30

Kanpur, Uttar Pradesh, India
202 B/e-1, Near Sapphire Tower, Kesav Nagar, Khalasi Line,
Swaroop Nagar, Kanpur, Uttar Pradesh 208002, India
Lat 26.48091° Long 80.30981°
30/08/2025 01:06 PM GMT +05:30

Kanpur, Uttar Pradesh, India
202 B/e-1, Near Sapphire Tower, Kesav Nagar, Khalasi Line,
Swaroop Nagar, Kanpur, Uttar Pradesh 208002, India
Lat 26.48091° Long 80.30981°
30/08/2025 01:06 PM GMT +05:30



QS ASIAN UNIVERSITY RANKINGS
ASIA 2025 : SOUTHERN ASIA



 www.csjmu.ac.in

 www.facebook.com/csjmuofficial

 www.instagram.com/csjmuofficial/

 x.com/csjmuofficial

 www.youtube.com/@csjmuofficial



Chhatrapati Shahu Ji Maharaj University
Kalyanpur, Kanpur
Uttar Pradesh, India-208024

