

Caste-Based Discrimination and its Psychological Impact on School-going Dalit Children: A Mental Health Perspective

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Abstract

This article critically comments the severe and prolonged psychological impact of caste-based discrimination on Dalit children in schools in India. Although there are constitutional protections in place for equality, the long-standing caste hierarchy continues to delineate school environments, which expose Dalit children to repeated exclusionary practices, ridicule, and systematic discrimination. Such negative experiences during early development are important social determinants of mental health outcomes including high rates of chronic stress, anxiety, depression, and low self-esteem, along with complex trauma for this already marginalized population. This article is grounded in a critical narrative review of interdisciplinary scholarship across sociology, psychology, public health and education, and discusses how both structural and interpersonal manifestations of caste discrimination function as chronic psychosocial stressors which affect mental health, cognitive and educational outcomes, all overall wellbeing. The article criticizes ordinary clinical and educational practice for not rigorously considering the social determinants of mental distress along with the implementation of the Community-Based Rehabilitation (CBR) model as a culturally respectful and empowering approach to mental health and social inclusion. In following the systematic exploration of the interlinked questions it raises, the research contributes to the existing literature of equitable mental healthcare, highlighting the absurdity of the barrier's organizations erect, and journey of building ideations that offer genuine mental well-being for the disadvantaged group of Dalits children in India.

Keywords: discrimination, marginalized group, Community-based Rehabilitation (CBR)

1. Introduction:

The roots of the caste system in India can be traced back over 2000 years, but it can be first identified in the Vedic period, with the emergence of early varna based division, and then

institutionally codified with rules of the ritual, colonialism, and later postcolonial social structures, that set up a system of inherited hierarchy, stigma, and exclusion (Dirks, 2001; Dumont, 1970). While there have been legal changes enacted since independence - such as the abolition of untouchability in India's Constitution (Coalition Government of India, 1950) and more recently affirmative action policies aimed at dismantling caste - the informal, sociocultural norms remain firmly in place to the extreme psychological detriment of those affected. The theoretical work of Erving Goffman (1963), who described stigma as an attribute that isolates the person who possesses it as "deeply discrediting" and the effect of stigma to fundamentally change "a whole and usual person" into a "tainted, discounted one," does much to explain how Dalit children arrive at school already animated by the weight of stigma and its related identity issues (Goffman, 1963/1990). Bronfenbrenner's ecological systems theory (Bronfenbrenner, 1979, 2005) elaborates stigma and discrimination as not static in an individual or an isolated immediate interaction, but as produced and reproduced across nested systems—microsystem (family, school peers, teachers), mesosystem (relationships between home and school), exosystem (district policy, school administration), macrosystem (caste norms, media, societal expectations), and chronosystem (historical legacies of caste and changes over time). At this stage, Erikson's developmental phase of identity vs. role confusion characterizes adolescence (approximately ages 12-18) as the period in development in which young people will attempt to integrate their previous identifications (family, caste, community), their current social roles (school, peers), and future possibilities (educational goals, career, sense of self) in order to form a clear sense of self; failure to effectively navigate this will lead to identity confusion, low self-esteem, and susceptibility to external influences (Erikson, 1968). Adolescence provides a particularly important developmental context for Dalit children as they experience increased exposure to a larger array of contexts and interactions, including secondary school, peer groups, and pressures of competition for academic success. At this juncture, it is likely that stigmatized experiences are even more relevant and/or noticeable. As children struggle to learn academic skills, they simultaneously form self-concept and self, but Dalit adolescents struggle with symbolic and structural exclusion that disrupts that developmental task (Reddy, R., Gibbons, J.L, 1999; Pathania, Jadhav, Thorat, Mosse, & Jain, 2023). While there is some academic evidence (e.g., humiliation-based narratives, caste-related slurs, segregation, exclusion) focused on experiencing caste stigma and ways in which Dalit

children encounter and dealt with caste stigma at school, it would appear most empirical work has not effectively intersected a clinical, developmental, and epidemiological lens to quantify caste stigmatized experiences in adolescence and their impact on mental health outcomes, such as anxiety, depression, identity confusion and self-harm, while recognizing the multiple ecological levels of influence. The core research problem at the center of this study is to examine caste-based discrimination in Indian schooling contexts as a chronic psychosocial stressor during adolescence, to analyze its effects on self-concept, mental health, and well-being among Dalit adolescents through the frameworks of stigma, ecology, and identity development, and to identify which institutional, relational, and intrapersonal pathways affect those psychological consequences.

2. Review of literatures

Authors & year	Focus of the study	Relevance of the current study
Dumont, L. (1970)	Theoretical inquiry of the caste system in India	Provides the historical and sociological context for thinking about caste hierarchies and how they mediate social relationships that impinge on children’s lives in schools.
Goffman, E. (1990; orig. 1963)	Stigma and social identity	Provides a theoretical framework for thinking about how Dalit children internalize stigma and experience mental health trauma in educational contexts.
Reddy & Gibbons (1999)	School socioeconomic context and adolescent self-descriptions in India.	Supports the investigation into peer exclusion, teacher bias, and the social stigmatization of Dalit children in educational contexts.
Pathania et al. (2023)	Caste identities in Indian universities	Provides empirical evidence that caste discrimination happens systemically outside

		of basic education, affecting mental health and academic involvement.
Mehta, K, (2025)	Clinical implications of caste-based trauma	Provides empirical evidence to support the connection between caste-based discrimination and mental health, with a call for trauma-informed approaches to caste in schools.
Ali, M. (2024)	Right to Education Act (2009)	Describes how systemic failures to enforce governmental policies contribute to educational and mental health disparities for Dalit children in schools.
Jadhav & Narayan (2023)	National Education Policy (NEP) 2020	Supports a critique of government policy level changes and the systemic need for caste-sensitive educational reform.
Chaturvedi, S. (2019)	NCERT textbooks and caste	Demonstrates how curriculum marginalization elicits mental health distress and internalized stigma among Dalit children.

3. Architecture of bias in educational spaces

Caste discrimination in Indian schools has proven to be a powerful pedagogical tool. Ethnographic research and NGO reports have documented caste discrimination in several Indian schools. Pathania and colleagues (2023) found that Dalit students are often systematically ostracized from peers, with their classmates intentionally avoiding seating arrangements or participation in group activities; this, in turn, creates feelings of isolation and lowered self-esteem for them. Teacher biases are then compounded to further marginalize Dalit students as educators will oftentimes favor their upper-caste students, further alienating Dalit students from friends and affecting their participation in school and academic performance.

Furthermore, the curriculum often dismisses any contributions or histories of Dalit communities, thereby reinforcing the underlying structure of invisibility and inferiority with Dalit students. The "invisible curriculum" disparately reinforces caste structures by privileging particular perspectives while excluding others (Pathania et al., 2023). These systemic biases not only constitute a barrier to academic success but also facilitate long-term psychological trauma, and reveal the importance of intervention and structural reform in order to address caste discrimination in educational settings.

Table 1: Manifestations of Caste-Based Discrimination in Education

Level of Education	Types of Discrimination	Impact on Dalit Children
Primary and Secondary	- Physical segregation (seating, meals)	- Social exclusion, humiliation, and psychological distress
	- Verbal abuse (caste-based slurs)	- Low self-esteem, isolation, and academic challenges
	- Forced menial tasks (cleaning toilets)	- Physical and emotional trauma, cognitive impairment
	- Neglect by teachers (epistemological injustice)	- Low grades, poor academic guidance
	- Exclusion from activities (sports, cultural events)	- Feelings of alienation, loneliness
Higher Education	- Stigma around affirmative action (quota-wallah)	- Psychological distress, selfdoubt, imposter syndrome
	- Social isolation, lack of institutional support	- Anxiety, depression, feelings of inadequacy
	- Digital divide (lack of access to technology, internet)	- Dropout rates increase, forced employment, educational setbacks
Pandemic (COVID-19)	- Disruption in scholarships, limited financial support	- Further disadvantage, inability to continue education

4. Psychological scars: a clinical and epidemiological analysis

Discrimination based on caste in Indian schools creates severe psychological trauma for Dalit teenagers, contributing to stress-diathesis, learned helplessness, and stereotype threat. The stress-diathesis model suggests that prolonged exposure to caste stigma plays a role as a diathesis, making individuals vulnerable to mental health disorders when exposed to environmental stress, including task demands in an academic setting, social exclusion and other school-based stigma (Mehta, K., 2025). Prolonged exposure to chronic stress contributes to learned helplessness, or the belief that effort will be ineffective, which leads to decreased motivation and engagement. Similarly, stereotype threat, which is the awareness that members of your group are viewed negatively, can undermine cognitive functioning and heighten anxiety, particularly during periods of adolescence neurological-science. The mental health implications in students' psychological performance are also evidenced in life experiences. For example, the case of Indra Meghwal, a Dalit boy who was beaten to death by a teacher because he drank water from an upper-caste pot, suggests that caste-based discrimination in schools can have a tremendous impacts on Dalit youth and is one example found on Wikipedia. Indra's tragic and gruesome death highlights the severity of caste-based discrimination, caste-based trauma, and the harmful impact it can have on Dalit students' mental health; therefore, it is essential to develop appropriate, systemic, comprehensive and multiscale interventions to reduce caste-based trauma in schools.

5. Systemic Failures

Although there are constitutional protections, discrimination on the basis of caste continues to persist in India's education system and undermines various policies such as the Right to Education Act (2009) and the National Education Policy (NEP) 2020. The Right to Education Act provides for compulsory and free education for children aged six to fourteen years in order to eliminate the educational gap. However, the implementation of the Right to Education has been hampered by systemic issues including inadequate school infrastructure, biases from educators and beliefs from the caste communities that limit access to quality education for Dalit children (Ali, M. ,2024). The NEP 2020, in an effort to support inclusive education, also lacks steps or considerations to deal with issues of caste discrimination, and the needs of marginalized communities (Jadhav, S. S., & Narayan, P. B. S. ,2023). Additionally, the NCERT curriculum has been criticized for not sufficiently including teaching Dalit histories and

contributions, always centering the dominant caste experience and treatment of Dalit identity and experiences (Chaturvedi, S., 2019). The Scheduled Castes and Scheduled Tribes (Prevention of Atrocities) Act also faces barriers in implementation, as there are instances of administrative delays, offenders being acquitted due to abdication of protocol, and delayed or no reparations for victims (The Times of India, SC/ST case 2025). Other marginalized groups, including tribal and Muslim communities, are similarly denied accessibility and concerns are largely systemic (*"They say we're dirty"*, 2014). These systemic failures necessitate comprehensive reforms are called for that do not only resolve infrastructural deficits but also actively address caste-based prejudices in educational institutions.

6. A framework for change

Addressing caste discrimination in Indian education, it is essential to take a multi-pronged approach that involves interventions at the family, school, policy, and technological levels. In the realm of family, the Ambedkarite Social Cafe in New Delhi provides an empowering space for Dalit, Adivasi, Muslim, and LGBTQI+ girls by enabling self-confidence, an understanding of their background, and leadership opportunities through lessons in English, computer training, and discussions of Ambedkar's thought (Brewed with equality, The Times of India). In school, the Tamil Nadu Directorate of School Education has started to make changes to try to eliminate caste discrimination by discouraging caste markers, randomly switching who sits where, promoting group activities, and establishing complaint boxes from which to report caste discrimination (No caste tags, The Times of India). In terms of policy, the Right to Education Act (2006) and the National Education Policy (2020) try to promote inclusion in education, but their implementation often fails due to structural concerns and a lack of policing (Kamal, U., & Roluahpuia., 2024). Globally interventions like assisting African American students in the U.S. and Māori education initiatives in New Zealand have been effective in reducing educational inequalities through culturally relevant curricula and community partnerships (Gisselquist, R., & Kim, M. J., 2024). In India, organizations such as CRY (Child Rights and You) seek to ensure children receive an education free of discrimination based on caste, gender, or socio-economic status (cry, n.d.). Additionally, the Drishti Foundation's digital classroom program provides high-quality education in tribal regions using technology to create a more equitable educational opportunity to marginalized communities (Drishti Foundation Trust.,

2024). These multi-layered initiatives demonstrate the importance of a coordinated response to address caste-based discrimination, and provide for inclusive educational opportunities in India.

Table 2: Mental Health Consequences and Policy Gaps

Issue	Details	Impact
Chronic Psychological Stress	Discrimination is a daily stressor, leading to constant hyper-vigilance and anxiety	- Increased incidence of depression, anxiety, and other psychosomatic disorders
Population-level Disparities	Dalit children show higher rates of mental health issues (depression, anxiety) compared to non-Dalits	- Clear evidence of caste as a pathogenic factor for mental health
Internalization of Oppression	Exposure to negative stereotypes leads to self-doubt and "imposter syndrome"	- Low self-worth, chronic stress, potential for self-harm and suicide
Policy Limitations	NMHP focuses on clinical models, lacks consideration for caste-related trauma	- Insufficient mental health services tailored for caste-based trauma
Cultural Competence in Healthcare	Lack of trained professionals with an understanding of caste-based discrimination	- Inadequate, sometimes harmful, care for Dalit children and families

Figure 1: Flowchart Depicting the Pathways from Caste-Based Discrimination to Mental Health Outcomes



7. Conclusion

In conclusion, caste-based discrimination in Indian educational settings represents a serious psychosocial and public health issue that is closely tied to the historical and social establishment of caste hierarchies. Theoretical frameworks such as Goffman's work on stigma, Bronfenbrenner's ecological systems theory, and Erikson's psychosocial development track together clarify how discrimination operates in the different layers of a child's environment, across family, peers, school, and society, influencing self-concept, resilience, and emotional regulation. Ethnographies, NGO reports and population surveys consistently show that Dalit children experience chronic stress, social exclusion, epistemological injustice, and stereotype

threat all leading to greater rates of anxiety, depressions, low self-esteem, and in some cases self-harm. Systemic failures — such as weak implementation of the Right to Education Act (2009), poorly developed aspects of NEP 2020 focused on inclusion, the absence of Dalit histories in curricula, and a culturally incompetent mental health support system—add another layer to the harm and create a structural feedback loop (or vicious cycle) that sustains inequity. Examples of successful approaches in other contexts, such as programming for African-American students in the United States, and Māori education in New Zealand, demonstrate that culturally responsive, community-based and multilevel approaches are effective. India-specific programming, including school-based digital counselling, NGO-led programming in communities, and family empowerment initiatives provide models for reducing psychological harm and increasing educational equity. Together, these examples present a critical orientation for policy to the systematic prioritization of anti-caste approaches in educational curricula, educator preparation, mental health services, and community engagement, which is an investment in the mental wellness and developmental trajectory of marginalized children, rather than a compliance because of legal requirements. Next steps for research would be to conduct longitudinal studies that track psychological and educational results of Dalit student participants, evaluate culturally adapted interventions, and examine the intersectional impact of caste with gender, disability, and socio-economic status. Such work will assist in creating evidence-based policy and practice and thus be a means to ensure that India’s constitutional vision of equality, liberty and fraternity becomes a lived experience for all children rather than just an aspirational ideal.

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