

THE EFFECT OF PSYCHOLOGICAL WELLBEING AND STRESS OF ORPHAN CHILDREN

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Abstract

The present study was undertaken with the objective to investigate psychological wellbeing and stress coping among orphan children and to compare the level of psychological wellbeing based on age and gender. The sample consisted of 130 orphan children, 65 each boys and girls in the age group of 10-17 years were selected using purposive sampling technique from three orphanages in Srinagar (India). The Goldberg's Wellbeing scale was used to measure psychological wellbeing and stress coping questionnaire developed by Latha Satish, was used to measure the stress coping from the selected orphan children. The results showed that most of the orphan children faced social isolation, social and cultural discrimination. The comparison of psychological wellbeing characters based on age showed majority of the older children exhibited psychological wellbeing characters better than the younger ones. Majority of the boys found to have higher level of psychological wellbeing (50%) compared to 50 % of girls who had low level of psychological wellbeing. Most of the older orphan children (55%) found to have high level of psychological wellbeing than younger children (45%). There existed a significant difference in psychological wellbeing of older children than younger children ($p < 0.001$) and it also found significant difference of stress coping on gender. The present study will be helpful in understanding and would provide insight into vulnerable segment of the population. This will also help in identifying the factors contributing to their wellbeing and modifying them. The present study would help in identifying the factors affecting their Psychological wellbeing. It will also help to develop effective intervention program to enhance the level of psychological wellbeing among them, providing psycho-education to parents and care givers.

Key Words:

Orphanage, Children, Stress, psychosocial differences and Psychological Wellbeing

Introduction

The current trends in the world with the emerge of acquired immune deficiency syndrome and other diseases, armed conflict, natural disasters, forced displacement, and extreme poverty have left millions of children orphaned, separated or on the brick of family breakdown. These children need and have a right to protection and care, and government have an obligation under law to respond. Despite the rising role of foster care for orphans in western society, orphanages continue to play a key role in the war tom third world countries, where there number is ever increasing, they have no means of survival, and foster care is culturally unacceptable.

India is the world's largest democracy with a population of over a billion people, of which 400 million are children. The number of orphan children in India stands at approximately 55 million which is about 47% of the overall population of 150 million orphans in the world reported by 'The United Nations Children's Emergency', social statistics Division of Ministry of Statistics and programme implementation (Government of India 2018) has been found that 4 peccent of India's child population of 20 million are orphans. The percentage of children who are orphans rises rapidly with age, from less than 1% among children under age 2 years to 9% among children age 15-17 years. The Northeast region has the highest percentage of children who are orphans (6 % or more in every state except Tripura).

The orphanages have become important places of care from the last decades in the war torn Kashmir with the number of orphans started increasing due to on going low intensity conflict and breaking of

traditional family and social structure. In spite of not being ideal places of care for psychological and physical development of children, the fact is that thousands of children are living in these institutions throughout Kashmir.

The term orphan is used more liberally to include young people bereft of one or more parents and/or any person bereft of protection and economic advantage because of loss of the parent or guardian. For the purpose of the study, an orphan is operationally defined as a child who is below 18 years of age and is deprived of parental care due to death of one or both the parents or because of abandonment by parents due to various reasons.

Well-being is dynamic concept that includes subjective, social, and psychological dimensions as well as health related behaviours. Ryff's model Psychological well-being theory states that the goal of life is about living virtuously instead of just feeling good.

Review of literature suggests that gross neglect, abuse and extreme deprivation of affection in early infancy may result in temporary or even enduring maladjustments. Infants reared in an emotionally cold and unstimulating environment - for example institutions where they are cared for in a rigid and mechanical manner without warmth of love and individual attention, tend to be quiet, passive and emotionally disturbed.

Hussian S.K., Dar M. et al (2020), study reported that 97.87% among those having psychiatric morbidity and 28.99% were females among children living in orphanages of Kashmir. Though there are varying statistics on number of orphaned children in Jammu and Kashmir, a study conducted by 'Save the Children' revealed that an estimated population of orphans in Jammu and Kashmir both due to conflict and natural death of parents is around 2.15 lakh and out of which 37 percent orphans were due to ongoing armed conflict, 55 percent orphans were due to the natural death of parents and remaining eight percent were due to the other reasons in the state and the study further indicated that 15 percent of them are residing in orphanage homes across the state(Bhat , 2014)

A study has been done on resilience in orphan and non-orphan children by sudha Katyal, Results show that there existed significant difference between mean scores of orphan and non-orphan children with regard to resilience. Orphans were found to be more resilient than non-orphans. The obtained results related to more resilience among orphans as compared to non-orphans are in line with the findings of Toth (1997), Octavia(2006), Musisi et al. (2007), Fernando and Ferrari(2011) and Yasin and Iqbq (2012).

A systematic research review shows, high prevalence of emotional and behavioural problems among orphans, impose new challenges on health systems and need to carry out exhaustive research on the emotional and behavioural problems faced by orphans in kashmir, S. Shawkat and Jameel, N. (2017). Based on the DASS21 questionnaire, the mental health level is measured on the elements of depression, anxiety and stress. The findings show that there was a significant difference in the score of stress depression and anxiety between orphan and non orphan adolescents. Thus, the results of the study showed that the level of stress, depression and anxiety of orphans was higher compared with non-orphans adolescents, Sahad, Zakaria et al. (2018).

Sreekanth and Verma conducted a study comparing stress and psychological well-being among orphan and normal adolescence (40 orphans and 40 non orphans) in Adilabadh district, Telangana state, through accidental sampling. Stress scale by Sinha and PGI General Well-Being scale by Verma and Verma were used for measuring the level of stress and psychological well-being of orphans and normal adolescence. The study revealed that compared to normal adolescents, orphans are significantly more stressed and performed weakly in the areas of psychological wellbeing probably due to lack of parental care or lack of guidance, facilities and negligence in orphanages. Also orphans are neglected from fields of education, daily needs of adolescents, sports activities, lack of love and affection, compare to normal adolescents.

The study conducted on Mental and psychological status of children in institutions for orphans and children left without parental care is characterised by a variety of pathologies including poor psychological self-wellbeing (Kozlovskaya,2013; Proselkova, 2013), poor self-concept (Shvets 2011), stressful life position and distorted life perspective(Zhiltsova, 2014).

Our review shows that, in spite of a significant number of studies, psychological wellbeing of orphans is still poorly understood. In particular, there is need of integrated, comprehensive studies of orphan children with stress and psychological wellbeing. Thus, the aim of the study was to determine the effect of stress and Psychological wellbeing of orphan children.

Objectives of the Study

1. To study the level of stress among orphan children.
2. To compare the level of psychological wellbeing between male and female orphan children.
3. To compare the level of psychological Wellbeing between younger and older orphan children.

Sample:

Following purposive sampling technique, a total sample of 130 orphan children (65 males and 65 females), living in Kashmir (india) between the age group of 13–18 years were selected.

Inclusion Criteria:

- Male and female adolescents in the age range of 13-18 years
- Urban / sub- urban
- Delinquent/ under trial orphan adolescent

Exclusion Criteria:

- Single parent child
- Adolescents with mental and chronic physical illness
- Residing in hostel or with any guardian

Variables Independent Variables: Children (orphan)

Dependent Variables: Stress and Coping, Psychological wellbeing.

Tools for Data Collection:

Psychological Well-Being Questionnaire

The scale was used to measure the psychological well-being of the children. It was developed by Goldberg in the year 1972. The original version of this scale contains 60 items which measures physical and psychological health. This 12 item version exclusively measures the psychological well-being of the individual. It consists of 12 items asking whether the respondent has already experiencing a particular symptom rated on a four point rating scale. In the questionnaire the options are A, better than usual, B, same as usual, C, less than usual, D, much less than usual. The subjects are required to give the most appropriate response.

Stress and Coping Questionnaire

The stress coping questionnaire developed by Latha Satish, consists of 52 items arranged from questions from mild, moderate and severe stress (which affects the adjustment of the individual). This lists the life experience based on the amount of change or adjustment one has to make to life rather than the undesirability of events themselves. It also has a control index where the subject has to record whether he/she has complete, partial or no control over the experienced stressful situation.

Statistical Analysis : The collected data was compiled, scored and statistically analysed using percentage, mean and independent t-test fixed at a significance level of 0.05 to compare psychological wellbeing and stress among orphans.

Results and Discussion

Table-1: General characteristics of the sample

Item	Category	Percentage (%)
Gender	Male	50
	Female	50

Age	8-10	20
	11-13	30
	14-16	25
	17-19	25
Family Type	Joint	40
	Nuclear	60
Parents Alive	Father	10
	Mother	77
	None	13
Cause of Parents Death	Natural	25
	Conflict	35
	Illness	22
	Accident	18

Table-1 shows general characteristics of the sample based on Orphan Children, Item, Gender, Age, Family Type, Parents Alive, Cause of Parents Death and percentage of each domain.

Table-2: Comparison of Psychological Stress Coping of Orphan Children based on Gender

Stress Coping	N	Mean	Std. Deviation	Std. Error Mean	Sig.
Male	65	15.66	7.22	.89	.01
Female	65	17.43	5.62	.69	

In the table 2, descriptive statistics of Psychological wellbeing in male and female Orphan are shown. For the total number of respondents, (N= 130), a group of samples of 65 male orphan and 65 female orphan were selected. The table shows the mean score, Std. Deviation score, Std. Error Mean score of Psychological wellbeing and the t value is (0.01) which is significant on 0.01 level. Hence there is significant difference in the level of Psychological wellbeing among male and female orphans.

Table-3: Comparison of Psychological Wellbeing of Orphan Children based on Gender

Psychological Wellbeing	N	Mean	Std. Deviation	Std. Error Mean	Sig.
Male	65	26.33	4.82	.59	.00
Female	65	25.35	7.90	.98	

In the table 3, descriptive statistics of Psychological wellbeing in male and female Orphan are shown. For the total number of respondents, (N= 130), a group of samples of 65 male orphan and 65 female orphan were selected. The table shows the mean score, Std. Deviation score, Std. Error Mean score of

Psychological wellbeing and the t value is (0.00) which is significant on 0.01 level. Hence there is significant difference in the level of Psychological wellbeing among male and female orphans.

Table-4: Comparison of Psychological Wellbeing of Orphan Children based on Age

Age	N	Mean	Std. Deviation	Std. Error Mean	Sig.
Younger Children	72	25.40	5.53	.65	.00
Older Children	58	25.46	7.89	1.03	

In the table 4, descriptive statistics of Psychological wellbeing in male and female Orphan are shown. For the total number of respondents, (N= 130), a group of samples of 72 Younger orphan Children and 58 Older orphan Children were selected. The table shows the mean score, Std. Deviation score, Std. Error Mean score of Psychological wellbeing and the t value is (0.00) which is significant on 0.01 level. Hence there is significant difference in the level of Psychological wellbeing among Younger orphan Children and Older orphan Children.

CONCLUSION

Psychological wellbeing is not static construct, rather changes over time. Psychological wellbeing factors have greater importance for the protection of children and young people, such as positive self-esteem, talents recognized by others and cognitive skills. Caring relationships are the most critical factor in promoting a healthy and successful development for young people even in the face of multiple risks.

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The present study identified female and younger orphans are significantly more stressed and performed weakly in the areas of psychological wellbeing and higher in stress probably due to lack of parental care or lack of guidance, facilities, and negligence in orphanages. Also, orphans are neglected from fields of education, daily needs of adolescents, sports activities, lack of love and affection, compare to normal adolescents.

Further, this study also recommends continuous individual and group psychological intervention sessions and communication skill improvement programmes, thereby creating a sense of stability and continuity in life. A conducive environment must be created in the orphanages with the help of volunteers, teachers as well as the care takers to heighten the level of Psychological wellbeing among orphan children.

The research observed the need of continuous psychological interventions in the form of individual counselling and moral support from caretakers, teachers and volunteers to help in improving the level of psychological wellbeing among orphan children.

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