



## **BEHAVIOURAL AND EMOTIONAL PROBLEMS IN ORPHANS AND OTHER SUSCEPTIBLE CHILDREN STAYING IN ORGANIZED HOMES IN RAJASTHAN**

**<sup>1</sup>Dr. Sneha Sahay Youtham, <sup>2</sup>Mr. Harshit Rawal**

<sup>1</sup>Research Guide, <sup>2</sup>PhD Nursing Scholar

### **Abstract:-**

Orphans and other sensitive children and adolescents who are lovingly cared for and living in institutional homes are more prone to behavioral and emotional problems than others because they are deprived of the love and care of family. In India, there is a dearth of studies focusing on the psychological health of these children. Therefore, we conducted a cross-sectional descriptive study to examine behavioral and emotional problems in these institutionalized children. The sample consisted of 292 orphans and foster care in institutional homes in Rajasthan. Sociodemographic data were collected using a semi-structured questionnaire. The Strengths and Difficulties Questionnaire with an Impact Supplement was used to assess their behavioral and emotional problems. In our study, 49 out of 292 children and adolescents were found to have behavioral and emotional problems. Factors such as age, sex, reason for institutionalization, age of admission, and years of residence were all found to be significantly associated ( $P < 0.05$ ) with emotional and behavioral problems. Behavioral problems (34.90%) were found to be the most common followed by peer problems (15.80%), emotional problems (14.70%), hyperactivity (8.60%) and low prosocial behavior (3.40%). This study shows that orphans and loving care in institutional homes are prone to behavioral and emotional problems. These children should be regularly screened for behavioral problems, emotional problems, hyperactivity and peer problems. Due to the lack of data in this regard, several multicenter studies are also needed to obtain an overall comprehensive view of these issues.

**Introduction-** The orphanage is a residential institution for the care and education of orphans. Children living in orphanages are a socially sensitive group that is often neglected by mainstream society and are more prone to malnutrition.

A huge number of children living in nursing homes are brutalized and neglected by nursing home staff. They are at increased risk of being mistreated and overlooked because of the poor standard of consideration in many organizations. All suffered because of the absence of family care and protection. Those who stay in nursing homes are not orphans. Some of the children's parents are alive but due to poverty and unemployment they are unable to support their children and feed them twice a day. Kinship care, foster care and adoption are the best options, where the child will receive all the care and protection and will be properly brought up. The child's mental and physical capacity will expand and the child will grow properly.

About 24 million children worldwide live without parents, of which about 8 to 10 million are infants and children who live in orphanages. In socioeconomically poor Asian countries, placing deprived children in orphanages has long been practiced with little or no emotional and financial resources. Children in institutional care are constantly at risk of malnutrition, overweight and lack of micronutrients and tend to be neglected. Urban malnutrition is a growing problem worldwide and is more severe among children living in orphanages. In addition to malnutrition, children in orphanages also suffer from infectious diseases. With its continuing concern for the health and well-being of children, especially those living in disadvantaged circumstances, the United Nations Emergency Fund has designed a series of systematic studies under the auspices of various research agencies, including the Ministry of Social Welfare and the Government of India. The most susceptible children are those who have lost both parents. They lack the emotional and physical maturity to deal with their psychological trauma and are at greater risk of developing depression and anxiety disorders. Children living in institutional care often suffer from developmental and behavioral problems due to lack of family care and support.

### **Objectives of the study**

1. To study the prevalence and the types of behavioral and emotional problems in orphans and love care living in institutional homes

2. To study the association between socio demographic parameters and behavioral and emotional problems in these children
3. To study the impact of behavioral and emotional problems on the child's life.

## **MATERIALS AND METHODS**

### **Study type and setting**

This study is a cross-sectional, observational, descriptive study. The study was done in various institutional homes in Rajasthan, India.

### **Study sample**

The sample for the study was 292 love care from six institutional homes in Rajasthan.

In the present study, the term “orphan” refers to those children and adolescents who have lost both the parents and the term “Susceptible” refers to those in institutional homes who were abandoned by their parents or those who had run away from home and had no contact with their families. At times, the term “children” is used to refer to both “children” and “adolescents. Sample size was 292 children and adolescents.

### **Inclusion criteria**

Children and adolescents aged between 4 and 17 years who are “orphans” or “Susceptible” (as defined above) and staying in institutional homes in Rajasthan .

### **Exclusion criteria**

- Those children who are having regular contacts with the parental family through regular weekend or vacation visits
- Those children who are suffering from intellectual disability and severe chronic medical illness
- Those whose duration of stay in the home was <1 month
- Juvenile delinquents.

### **Tools of the study**

Self structured Knowledge questionnaire: For collection of data regarding age, sex, reason for being in the institute, age of admission, years of stay in the institute and academic performance.

Strengths and Difficulties Questionnaire with impact supplement: The SDQ is a brief screening questionnaire for emotional and behavioral problems in children and adolescents. It consists of 25 items covering conduct problems, emotional problems, peer problems, hyperactivity problems, and prosocial behavior. When compared to other questionnaires such as Rutter questionnaires and Child Behavior Checklist, SDQ has an advantage of being in a shorter format, single form, and better in detecting inattention and hyperactivity. SDQ has been used to assess emotional and behavioral problems in various countries and diverse cultures all across the world. The use of parent report, teacher report, and self-report versions of SDQ in identifying the psychiatry diagnosis in children and adolescents was found to have a specificity of 80% and sensitivity of 85%. Children who are deprived of the parental care and a secure family environment often become susceptible to a host of psychological problems and psychiatric disorders. These children are then usually reared in institutional homes set up by the government or private agencies, which provide some semblance of order into their lives. In these homes also, the problems of overcrowding, inadequate personal attention, poor academic environment, and frequent moves may affect the psychological health of these children. The objective of our study was to evaluate the orphans and love care staying in these institutional homes for behavioral and emotional problems. For this purpose, we took a sample of 292 children being brought up in six of the institutional homes in Rajasthan. In our study, 49 of 292 children were found to have behavioral and emotional problems. Another similar study done in Tiruchirappalli, India, among orphans in institutional homes has reported a prevalence of emotional and behavioral problems to be 56%. The prevalence was found to be 40.35% among the children living in an orphanage. Another study using SDQ questionnaire found 49% of Ghanaian orphans and susceptible children to be having emotional and behavioral problems. Other studies done elsewhere have shown the prevalence rate to be between 18.3% and 64.53%. In a study done by Simsek *et al.*, the prevalence of emotional and behavioral problems among children and adolescents reared in orphanages was found to be higher (23.2%) compared with a nationally representative community sample of similarly-aged youngsters brought up by their own families (11%). In our study, the rate of emotional and behavioral problems among orphans and love care was found to be less compared to most of the above-mentioned studies. This may be because we have done our study in both

government and private institutional homes, whereas other studies have been mostly conducted exclusively in government homes. The private institutional homes tend to be more selective in their admission of children, thus weeding out the problematic children at the initial stage itself. Other sociodemographic and methodological differences may also cause a variation in prevalence rates.

Describing the sociodemographics of the present study, our sample of 292 subjects consisted of 37.3% children (4–11 years) and 62.7% adolescents (12–17 years). In this sample, boys (59.9%) slightly outnumbered girls (40.1%). The reason for admission for the majority of the children into institutional homes was abandonment (54.8%), followed by orphan hood (29.4%) and being a runaway from family home (15.8%). The reasons for abandonment of children may be illegitimacy, divorce of parents, abuse, and financial difficulties. In our study, a majority of runaways from home had done so because of physical or sexual abuse at home and school difficulties and occasionally because of love affairs too. Most of the children (50.3%) had been admitted to these homes between 5 and 10 years of age. Studies have shown that in institutional homes, factors such as age of admission, reason for admission including neglect and abuse, frequent moves and transfers, poor health and care, lack of regular contact with caregivers, substance abuse, and other psychosocial factors were significantly associated with an increased risk of behavioral and emotional problems. The sociodemographic details of our study sample differ by varying degrees from other studies done on this topic elsewhere, depending upon the geographical areas, type of institutional homes, and other sociocultural factors. Most of the other studies on institutionalized children report poor academic performance. The primary caregivers in our study described the children's academic performance to be average or good in majority of the cases with only 13% being described as poor. This can be because of low expectations of the primary caretakers of the children. In fact, some of the children who had run away from their families told us that the pressure to excel in studies as well as the discipline in institutional homes was much less as compared to their own family homes. In our sample, more number of adolescents (20.77%) had emotional and behavioral problems as compared to the younger children (10.09%), and boys (24.57%) were more affected than girls (5.13%). This is in accordance with the other studies on orphans, showing emotional and behavioral disorders to be more among boys than girls and also among adolescents,

rather than younger children. As this is also the trend in general community samples, these particular groups may be inherently more Suseptable to psychological problems. Reason for admission in the institute was significantly ( $P < 0.01$ ) linked with abnormal total SDQ scores. Those abandoned by their families (20%) were more likely to have emotional and behavioral problems than those who were orphans or had run away from their families. Simsek *et al.* reported that institutionalization because of abuse by family is also significantly correlated with higher behaviour problems. In our study, the age at admission and the duration of the stay in the institutional home were also significantly ( $P < 0.05$ ) associated with the emotional and behavioral problems in children. More number of children with <1 year of stay in the institutional home had abnormal SDQ scores as compared to others who had been there for a longer time. It may be because children feel more settled down in a new environment after 1 year. Contrary to this, Rahman *et al.* showed an association between psychological problems and a longer duration of stay (5–9 years) in institutionalized children. In our study, academic performance was the only sociodemographic factor studied that was not significantly associated with abnormal SDQ score. On the contrary, in a study by Seggane Musisi *et al.*, orphan's bad academic performance was significantly associated with emotional and behavioural problems. The emotional and behavioral problems can present as defensiveness, sadness, having difficulty forming friendships with many children, frequent lying, crying, shouting, screaming, and stealing, sometimes biting or pinching others and throwing things at others.

In the present study, most of the orphans and love care were found to be having conduct problems (34.90%) followed by peer problems (15.80%), emotional problems (14.70%), hyperactivity (8.60%), and low prosocial behavior (3.40%). Other studies done on institutionalized orphans and love care have reported varying rates of emotional and behavioral problems. Sujatha and Jacob showed the prevalence of 12.5% peer problems and 5% abnormal prosocial behavior. A study done by showed the prevalence of 86.0% withdrawal, 73.7% aggressiveness, 66.7% hyperactivity, and 64.9% disobedience among institutionalized children

## Discussion

The adolescents had a higher frequency of emotional problems, conduct problems, and hyperactivity as compared to the younger children. A study done in Kashmir reported that

majority of the female children (72.5%) felt emotionally weak in comparison to the male children (47.7%). In our study, the children who were in institutional homes because of abandonment by family were more likely to have emotional problems while the runaways had more of conduct problems and hyperactivity as compared to others. Children who had been in the institutional home for less than a year were also more likely to have conduct problems and hyperactivity as compared to others who had been there longer. Higher age of admission to the home was linked to emotional problems, conduct problems, and hyperactivity. Poor academic performance was associated with poor prosocial behavior. A few other studies on institutionalized children have also analyzed these emotional and behavioral problems and have varying findings. The same study by Simsek *et al.* said that factors “age” and “age at first admission” showed low negative correlation with the social, thought, attention problems, and externalizing and total problems ( $P < 0.05$ ). No significant relationship was found between age, age at first admission, and internalizing problems. In their study, it was also reported that children admitted for abuse showed more attention and total problems than those who were admitted because of family disruption or poverty. In our study, on evaluation with the impact supplement of SDQ, 45 out of 49 orphans and lovecare with emotional and behavioral problems reported serious impact of these problems on their life. The results showed that home life (97.7%) was the most commonly affected domain, followed by classroom learning (88.8%), leisure activities (82.2%), and friendships (64.4%). This is in accordance with other studies showing that children with behavior problems have more learning problems, poor social functioning, academic under achievement, and also more numerous and intense family conflicts than the normal controls

## **Conclusion-**

In our study, we found a prevalence of emotional and behavioral problems to be 16.78% in institutionalized orphans. We also found that conduct problems are the most common in this group followed by peer problems and emotional problems. Hyperactivity and low prosocial behaviors were less common. Being an adolescent, a boy, being abandoned, or having a shorter duration of stay in the institutional home increased the risk of having psychological morbidity.



## **References**

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