"A STUDY TO ASSESS THE BEHAVIORAL PROBLEMS AND THE COPING STRATEGIES OF THE INSTITUTIONALIZED ORPHAN CHILDREN BETWEEN THE AGE 6-12 YEARS LIVING IN SELECTED ORPHANAGES AT KANPUR."

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INTRODUCTION

Children have been studied ever since man becomes a parent. The original impetus to the study of the child arose from man's love for this off springs, and for his awareness of his responsibility towards the child's welfare to see the child growth and personality unfolding itself has always been parents blessing as Christ himself said, "of such is the kingdom of heaven" The child's personality growth and maturation are affected by variety forces heredity, somatic, culture and particularly interpersonal ones. In this regard, the relationship between the child and parents assumes central importance, it from a source of permanence's of the child, an anchor in the stormy sea of life.1

In a normal childhood, in a loving, consistent family, a child gets this anchor during the first two years. The feeling of being loved for unloved begins birth. Kach caress and cuddle of infancy contributes to present emotional well - being of the individual. Bavly conceptualized this under of his attachment theory, this theory telling that the formation of strong trust bond between the child and care givers in the first two year of the life.2 The bond of trust and attachment later enables the child to accept the limits and controls attachment helps to the child to attain full intellectual potential, sort out what is perceived, think logically, become self-reliant, cope with stress and frustration, handle fear and worry. Develop future relationship. A child deprived of parents or any ostensible means of subsistence is a destitute. Destitution sculls up a process by which the child steadily loses confidence not only in himself, but also in society.3

In addition to deprivation, pressure often builds upon these children's to grow up fast and fend for themselves and that leads to premature coping and defensive ability like adults, children and grieved by the loss of their parents. They can be very stressful as they pose new demands and constraints to children's life.4 According to Minde (1998), stress show

symptoms of confusion, anxiety, depression, and worries the same symptoms may cause learning problems, school failure and early dropouts. Poor verbal communication leads to the behavioral problems, such as disobedience, nail biting, thumb sucking, bed wetting, sexual problems, lying, stealing, truancy etc, failure to recognize these symptoms will aggravate the child's psychological problems.5

NEED FOR THE STUDY

The child's optimum development rests largely on satisfaction of his needs in all dimensions during infancy and childhood. In this connection, the role of parents in the personality development of the child can never be over emphasized. Love and affection from the biological parents are regard as a foundation stone for the development of an adequate personality. Parents provide physical, psychological and intellectual environment to their offspring parent's goals, values and style of life have a great effect on growing children and can lead to either admiration and imitation, or alienation and rejection.9 As the earliest and most durable source of security, the child's parents are the first people with whom he/she identifies and they remain the straight influence on his or her development.10

Muthopadhyayapritha 1996 Negative self-perception, lack of knowledge about proper sex roles behavior, low emotional tones, high anxiety, aggression, unworthiness, guilt for being alive, profound pull towards death, and fear of "loss of self" because of the emptiness due to parental loss have been found in orphaned children.11

Reddy narayanasuma 2012 The individual is exposed to bitter childhood which leaves an indelible mark on his mind, reducing his capacity to cope with the vicissitudes of life and enjoy a productive living. Literature also reveals that parentless children's and children from single parent families are more susceptible to behavioral disorder than other personality problem and conduct disorder being the most common.12

STATEMENT OF THE PROBLEM

"A study to assess the behavioral problems and the coping strategies of the institutionalized orphan children between the age 6-12 years living in selected orphanages at Kanpur."

OBJECTIVES OF THE STUDY

- To assess the behavioral problems of orphan children's in selected orphanages.
- To assess the level of coping mechanism adopted by the orphan children's.

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> To find out the correlation between the behavioral problems and coping mechanism of

orphan children's.

> To find out the association between the level of coping mechanism and selected socio

demographic variables.

> To find out the association between the behavioral problem and selected socio

demographic variables.

HYPOTHESIS

H1 - There will be significant association between the behavioral problems and coping

strategies of the orphan children.

H2- There will be significant association between the behavioral problems and coping

Mechanism to the selected demographic variables such as age, gender, duration of institutions

etc.

RESEARCH METHODOLOGY

Research methodology is a way to systematically solve research problem. In this we study

about the various steps that are generally adopted by the researcher in studying the research

problem along with the logic behind them. The purpose of this section is to communicate to

the readers what the investigator did to solve the research problem as to answer the research

questions.44

This chapter describes the methodology, adopted for the study. This includes research

approach, research design, setting, sample, sampling technique, development and description

of instruments, procedure for data collection and plan for data analysis.

RESEARCH APPROACH

The selection of research approach is the basic procedure for the conduct of research. It tells

the researcher what data to collect and how to analyze it and also suggests possible

conclusions to be drawn from the data.

The present study was aimed at assessing the effect of orphan hood on the behavior of the

orphan children and the coping strategies adopted by them, living in the selected orphanages

at Kanpur. There for a descriptive survey approach was used to carry out the study.

RESEARCH DESIGN

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Research design is defined as "A researcher's overall plan for obtaining answers to the

research question or for testing the hypothesis". Research design helps the researcher in

selection of subjects, identification of variables, their manipulation and control. Observations

are to be made and different types of statistical analysis are used to interpret the Data.18

Research design provides back bone structure of the research study. It determines how the

study will be organized and the data will be collected and when intervention if any, are to be

implemented.45

For the present study, a descriptive design was adopted to assess the behavioral problems and

coping strategies of the orphan children between the age group 6-12 years.

RESEARCH VARIABLES:

A variable is any phenomenon or characteristic or attribute that changes. Variables are

measurable characteristics of a concept and consist of a logical group of attributes.45

Dependent variable:

The outcome of variable of interest, the variable that is hypothesized to depend on or be

caused by another variable called dependent variable. In the present study the dependent

variable is the behavioral problem and coping strategies the orphaned children between the

age 6-12 years.

Independent variable:

The variable that is believed to cause or influence the dependent variable in experimental

research. The independent variable is the variable that is manipulated. In the present study the

independent variable is the orphaned children between the age 6-12 years.

Demographic variables

Age

Gender

• Languages known

Educational status

Duration of institutionalization

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SETTING OF THE STUDY:

It is the physical locations and conditions in which data collection takes place is a study. This

study was conducted in various orphanages present around Kanpur which includes 2

orphanages. Formal permission was obtained from the Administrative authorities and care

givers of the orphanages for conduction of the study.

POPULATION:

Population is the total number of people who meet the criteria that the researcher has

established for a study from whom the subjects will be selected and to whom the findings will

be generalized.

Target population for the present study was orphan children between the age group of 6-12

years living in selected orphanages at Kanpur.

The accessible population is the group that is actually available population for present study

comprised of orphan children between the age group of 6-12 years who were living in

selected orphanages at Kanpur.

SAMPLE

The sample is the small portion of a population for observation and analysis. For the present

study 60 orphan children between the age group 6-12 years living in the selected orphanages

at Kanpur."

Criteria for selecting sample:

For the selection of sample, the researcher set the following criteria.

Inclusion criteria:

• Orphan children between the age group of 6-12 years who were living in selected

orphanage.

Orphan children who are willing to participate in the study.

• Orphan children who are present during the data collection.

Exclusion criteria:

• Orphan children who are not willing to participate in the study.

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• orphan children who are not present during the data collection.

SAMPLING TECHNIQUE:

The sample for the study was drawn from different orphanages at Kanpur by convenience sampling technique because of the limited amount of time and availability of subjects according to the sampling criteria.

Non Probability Convenience sampling is selected based on the judgment of researcher and objectives of the research at hand. Convenience sampling technique involves the selection of subjects who were available at the right place in the right time.

DESCRIPTION OF THE TOOLS

Based on objectives the study findings were presented under the following sections-

Section A: Distribution of socio demographic variables of orphan children's.

Section B: Assessment of the behavioral problems of orphan children's in selected orphanages

Section C: Assessment of the level of coping strategies adopted by the orphan children's.

Section D: Assessment of the correlation between the behavioral problems and coping strategies of orphan children's.

Section E: Assessment of the association between behavioral problem and level of coping strategies with the selected socio-demographic variables.

SECTION A

DISTRIBUTION OF SOCIO DEMOGRAPHIC VARIABLES OF ORPHAN CHILDREN

This section deals with description of socio demographic variables or sample Characteristics such as Age, Gender, Educational status, Languages known, and duration of institutionalization.

Samples of 60 orphan children were drawn from the selected orphanages based on sample criteria.

The data on sample characteristics were analyzed using descriptive statistics, and presented in terms of frequency and percentage depicted with diagram.

Table 1 : Distribution of socio demographic variables of orphan children. S. No Demographic

S. No	Demographic Variables	No	%
1	Age (In years)		
	a. 6-7	6	10
	b. 8-9	17	28.33
	c. 10-11	21	35.00
	d. Above 12	16	26.67
2	Gender		
	a. Male	35	58.33
	b. Female	25	41.67
3	Educational Status		
	a. No formal education	0	0.00
	b. Primary school	37	61.67
	c. Secondary school	23	38.33
4	Language known		
	a. Hindi	50	83.33
	b. Bundelkhandi	5	8.33
	c. Awadhi	5	8.33
	d. Others	0	0.00
5	Duration of Institutionalizations		
	a. 1-3 years	9	15.00
	b. 4-6 years	24	40.00
	c. Above 6 years	27	45.00

The above table-1 shows that maximum number of subject 21(35%) belongs to age group of 10-11 followed by 17(28.33%) of subjects in the age group 8-9 years, 16 (26.67%) in the age of 12 years and 6 (10%) in the age group of 6-7 years.

The orphan children 35(58.33%) were males and 25(41.67%) were females.

With regards to educational level about 37(61.67%) studying in primary classes and 23(38.33%) studying in secondary class. There are 0% subject with no formal education.

Majority of orphan children's 50 (83.33%) using Hindi, as a communicative language and 5 (8.33%) as Bundelkhandi, 5 (8.33%) as Awadhi. None of children using other languages.

In relation to the duration of the stay in institution most of the subject 27(47%) have above 6 years history of the institutionalization, 24(40%) have 4-6 years history of the institutionalization and 9(15%) children have the 1-3 years history of the institutionalization.

Table: 2 Percentage distributions of orphan children according to their age

N = 60

S. No	Age (Year)	Frequency	Percentage (%)
A	6-7	6	10
В	8-9	17	28.33
С	10-11	21	35.00
D	Above 12	16	26.67



Fig 3: Bar diagram shows the Percentage distribution of orphan children according their age

The above table-2 & figure-3 shows that maximum number of subject 21(35%) belongs to age group of 10-11 followed by 17(28.33%) of subjects in the age group 8-9 years, 16 (26.67%) in the age of 12 years and 6 (10%) in the age group of 6-7 years

Table 3: Percentage distribution of orphan children according to Education Status

S. No	Age (Year)	Frequency	Percentage (%)
A	No formal education	0	0.00

В	Primary school	37	61.67
С	Secondary school	23	38.33

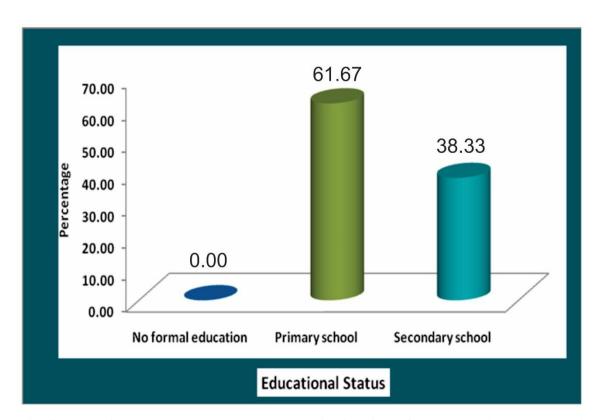


Fig 4: Bar diagram show the Percentage distribution of orphan children according to education status

The above table-3 & figure-4 shows that educational level orphan children about 37(61.67%) studying in primary classes and 23(38.33%) studying in secondary class. There is 0% subject with no formal education

Table 4 : Percentage distribution of orphan children by gender.

N = 60

S. No	Age (Year)	Frequency	Percentage (%)
A	Male	35	58.33
В	Female	25	41.67

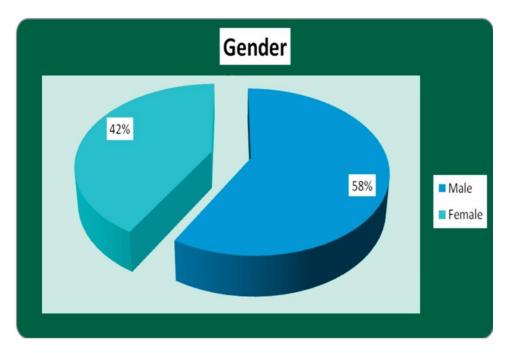


Fig 5: Pie diagram show the Percentage orphan children by gender

The table 4 & figure 5 indicates that orphan children 35(58.33%) were males and 25(41.67%) were females.

Table 5 : Percentage distribution of orphan children according to language known $N \!\! = \! 60$

S. No	Language	Frequency	Percentage (%)
A	Hindi	50	83.33
В	English	5	8.33
С	Braj	5	8.33
D	Others	0	0.00

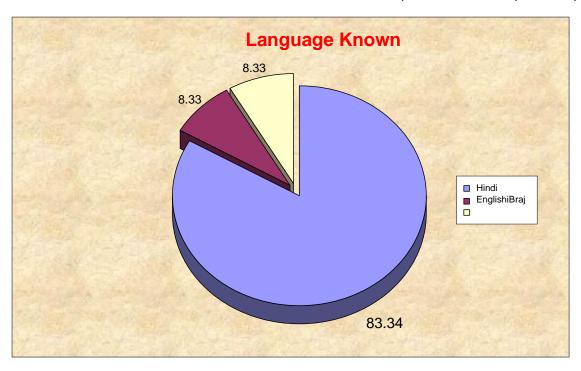


Fig 6 : Pie diagram show the Percentage distribution of orphan children according to language known

The table 5 & figure 6 shows that majority of orphan children 50(83.33%) using Hindi as a communicative language and medium and 5(8.33%) as English and 5 (8.33%) as Braj. There no children using other languages.

Table 6: Percentage distribution of orphan children according to duration of institutionalization

N=60

S. No Duration of **Frequency** Percentage (%) **Institutionalizations** A 1-3 years 9 15.00 24 40.00 В 4-6 years C 27 45.00 Above 6 years

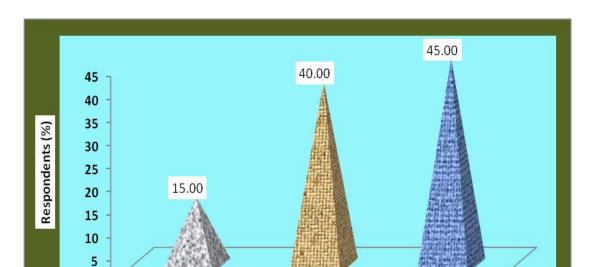


Fig 7: Bar diagram show the Percentage distribution of orphan children's according to duration of institutionalization

Above table 6 & figure 7 shows that the duration of the stay in institution most of the subject 27(47%) have above 6 years history of the institutionalization, 24(40%) have 4-6 years history of the institutionalization and 9(15%) children have the 1-3 years history of the institutionalization

SECTION B

ASSESSMENT OF THE BEHAVIORAL PROBLEMS OF ORPHAN CHILDREN IN SELECTED ORPHANAGES

Table 7: Aspect wise knowledge of the level of the behavioral problems of orphan children in selected orphanages

N=60

Aspects wise	Level of Behavioral Problems							
Knowledge	Normal		Milo	1 (25-	Mod	erate	Severe	
	(<25%)		50%	b)	(50-75%)		(>75%)	
	No	%	No	%	No	%	No	%
Academic and Social	0	0	17	28.33	23	38.33	20	33.33
Problems								
Emotional Problems	0	0	13	21.67	36	60.00	11	18.33
Conduct problems	10	16.67	18	30.00	20	33.33	12	20.00
Peer problems	2	3.33	19	31.67	39	65.00	0	0.00
Other problems	18	30	21	35.00	21	35.00	0	0.00
Combined	0	0	11	18.33	49	81.67	0	0.00

Table: 7 depicts that aspects wise knowledge of the level of the behavior problems divided in to five, that is academic and social problems, emotional problems, conduct problems, peer problems and other problems. The findings related to the behavior problems of the orphan children revealed that 49 (81.67%) of the subject having the moderate behavior problems, 11 (18.33%) of the subject having the mild problems. In relation to the academic and social

problems 20 (33.33%) of the subject having sever problems, 23 (38.33) of the subject having moderate problems and 17(28.33%) of the subject having mild problems. In relation to the emotional problems 11(18.33%) of the subject indicate sever emotional problem,36 (60%) having moderate problems and 13 (21.67%) having mild problems. In relation to the conduct problems 12 (20%) of the subject indicate sever conduct problems and 20(33.33) having moderate and 18(30.00%) having mild problems. In relation to the peer problems 39 (65.00%) having moderate problems and 19 (65.55%) having mild problems. In relation to the other problems 21 (35.00%) having moderate problems and 21 (35.00%) having mild problems.

Table 8: Mean, SD and Mean% of behavioral problems among orphan children N=60

Aspects wise knowledge	Statements	Max	Range	Mean	SD	Mean%
		Scores				
Academic and Social Problems	5	10	3-9	6.16	1.94	61.6
Emotional Problems	5	10	4-8	5.46	1.01	54.6
Conduct problems	5	10	1-10	5.27	2.44	52.7
Peer problems	5	10	4-7	4.97	0.86	49.7
Other problems	2	4	0-3	1.13	0.94	28.33
Combined	22	44	18-27	23	1.84	52.27

The table 8 shows that the mean, mean percentage and standard deviation of the behavioral problems score obtained by the children. The overall tests mean 23 with SD 1.84. The highest mean was 6.16 with SD of 1.94 in relation to the academic and social problems and lowest mean was 1.13 with SD of .94 in relation to the other problems.

SECTION C

ASSESSMENT OF THE LEVEL OF COPING STRATEGIES ADOPTED BY THE ORPHAN CHILDREN

Table 9 :Knowledge of the level of coping strategies adopted by the orphan children

N = 60

Level of coping strategies	Category	No of Respondents
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		No	%
Inadequate	<50%	10	16.67
Moderate	5075%	50	83.33
Adequate	<75%	0	0.00

The above table 9 shows that in the assessment of level of coping strategies adopted by the 60subject, 10 (16%) had inadequate level of coping strategies and 50(83.33%) had moderate level of coping strategies. In the assessment there were no subject with adequate level of coping strategies.

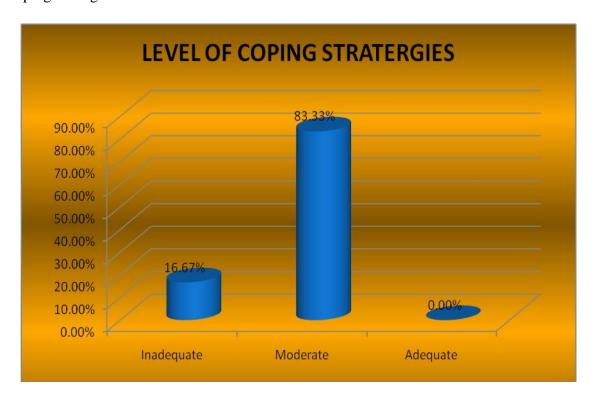


Figure-8: Knowledge of the level of coping strategies adopted by the orphan children

The above figure 8 shows that in the assessment of level of coping strategies adopted by the 60subject, 10 (16%) had inadequate level of coping strategies and 50(83.33%) had moderate level of coping strategies. In the assessment there was no subject with adequate level of coping strategies

Table 10 : Mean, SD and Mean% of coping strategies adopted by the orphan children

N = 60

Domain	Statements	Max Scores	Range	Mean	SD	Mean%
Coping strategies	11	22	916	12.89	1.87	58.57

The table 10 shows that mean, mean percentage and standard deviation of the level of coping strategies adopted by the orphan children. In the table mean was 12.89 with SD 1.87 and mean percentage 58.7%.

SECTION D

ASSESSMENT OF THE CORRELATION BETWEEN THE BEHAVIORAL PROBLEMS AND COPING STRATEGIES OF ORPHAN CHILDREN'S

Table 11: Mean and mean percentage of the behavioral problems and coping strategies adopted by the orphan children.

N = 60

Domain	Mean	SD	Mean%	t'- Value
Behavioral Problems	23	1.84	52.27	-0.17*
Coping Strategies	12.89	1.87	58.57	0.17

NS= not significant. S= Significant, *significant at 5% level (ie.,0.05%)

From the table 11 in the aspects of the behavioral problem mean was 23 and mean percentage was 52.27%.

In relation to the coping strategies mean was 12.89 and mean percentage was 58.57. The statistical paired 't' test indicates the correlation between the behavioral problems and coping strategies of orphan children mean scores found to be significant at 5% level (ie.,0.05%)revealing the correlation of the behavior problem and coping strategies.

SECTION E

ASSESSMENT OF THE ASSOCIATION BETWEEN BEHAVIORAL PROBLEM AND LEVEL OF COPING STRATEGIES WITH THE SELECTED SOCIODEMOGRAPHIC VARIABLES

Table 12: The association between the behavioral problem and selected socio demographic variables

N=60

S.	Demographic	Freq-		Level of co	Chi-		
No	Variables	ency	Prese	Mild (25-	Moderate	Severe (>75%	square

			ntage	-50	⁰ / ₀)	(50-	75%))		
			(%)	N o	0/0	No	%	No	%	
1	Age (In years)									
				3	50.0		50.0			
	a. 67	6	10	3	0	3	0			
					17.6		82.3			
	b. 8-9	17	28.33	3	5	14	5	0	0	4.53*
					14.2		85.7			
	c. 10-11	21	35.00	3	9	18	1	0	0	df 2 S
					12.5		87.5			
	d. Above 12	16	26.67	2	0	14	0	0	0	
2	Gender									
							91.4			
	a. Male	35	58.33	3	8.57	32	3	0	0	5.34*
					32.0		68.0			
	b. Female	25	41.67	8	0	17	0	0	0	df 1 S
3	Educational Status									
	a. No formal									
	education	0	0.00	0	0.00	0	0.00	0	0	1.49
					13.5		86.4			df 1
	b. Primary school	37	61.67	5	1	32	9	0	0	N.S
					26.0		73.9			
	c. Secondary school	23	38.33	6	9	17	1	0	0	
4	Language known									
					10.0		90.0			
	a. Hindi	50	83.33	5	0	45	0	0	0	13.91*
	b. English	5	8.33	3	60.0	2	40.0	0	0	df 2 S

					0		0				
					60.0		40.0				
	c. Marwadi	5	8.33	3	0	2	0	0	0		
	d. Others	0	0.00	0	0.00	0	0.00	0	0		
	Duration of										
	Institutionalization										
5	s										
					22.2		77.7				
	a. 1-3 years	9	15.00	2	2	7	8	0	0	0.41	
					20.8		79.1			df	2
	b. 4-6 years	24	40.00	5	3	19	7	0	0	N.S	
					14.8		85.1				
	c. Above 6 years	27	45.00	4	1	23	9	0	0		

N.S- Not significant

S- Significant at p<0.05%

Table 13: The association between the level of coping mechanism and selected socio demographic variable

N=60

S. No	Demographic Variables	Freq u ency	Prestang	Leve						
				Inadequat e (<50%)		Moderate (50-75%)		Adequat e (>75%)		Chi-square
				No	%	N o	%	No	%	Square
1	Age (In years)									
	a. 6-7	6	10.00	2	33.33	4	66.67	0	0	
	b. 8-9	17	28.33	6	35.29	11	64.71	0	0	7.12
	c. 10-11	21	35.00	2	9.52	19	90.48	0	0	df 2 S
	d. Above 12	16	26.67	0	0.00	16	100.0	0	0	

							0			
2	Gender									
	a. Male	35	58.33	3	8.57	32	91.43	0	0	3.96
	b. Female	25	41.67	7	28.00	18	72.00	0	0	df 1 S
3	Educational Status									
	a. No formal education	0	0.00	0	0.00	0	0.00	0	0	5.09
	b. Primary school	37	61.67	3	8.11	34	91.89	0	0	df 1 S
	c. Secondary school	23	38.33	7	30.43	16	69.57	0	0	
4	Language known									
	a. Hindi	50	83.33	6	12.00	44	88.00	0	0	4.7
	b. English	5	8.33	2	40.00	3	60.00	0	0	df 2 N.S
	c. Marwadi	5	8.33	2	40.00	3	60.00	0	0	
	d. Others	0	0.00	0	0.00	0	0.00	0	0	
5	Duration of Institutionalization s									
	a. 1-3 years	9	15.00	1	11.11	8	88.89	0	0	2
	b. 4-6 years	24	40.00	6	25.00	18	75.00	0	0	df 2 N.S
	c. Above 6 years	27	45.00	3	11.11	24	88.89	0	0	

N.S- Not Significant *S- Significant

Table 12 shows that Chi-square values df2 between demographic variables and behavioral problems scores of orphan children reveals that there was significant association of behavioral score when compared to the Age, Gender, and Language knownp<0.05 level.

There was no association between scores of behavioral problems when compared to Education status and duration of institutionalization.

Table 13 shows that Chi-square value df2 between demographic variables and the level of coping strategies scores of orphan children reveals that there was significant association of level of coping strategies when compared to the Age, and value df1 was significant association of level of coping strategies when compared to the Gender, and Educational status. There was no association between scores of coping strategies when compared to the language known and duration of institutionalization.

BIBLIOGRAPHY

- 1. Brill Keneth, Thomas Ruth, Children in homes, 7thEd.Camelot press limited, (2009);p.17-36,62
- 2. Bowley H Agatha, The psychology of the unwanted child. Edinburgh publishers, (2011); p.36-41
- 3. Gunnar MR, Van Dulmen MH, Behavior problems in post institutionalized internationally adopted children. Development and Psychopathology, (2007);19(1):P. 129-148
- 4. Ushashree S., Social Disadvantaged Academic Adjustment and Scholastic Achievements.SocialChange,2006;10(1&2):P.23-30
- 5. Minde, The effect of social changes on the behavior and academic performance of school age children. Journal of Child Psychology and Psychiatry, (1998)28(2): 210–218.
- 6. Kulkarni S, Institutional child. Indian journal of psychiatry, (2014);4(3):p.15-19
- 7. Lazzarus RS, Folkmen, Stress appraisal and coping in children. Springer publishing INC, New York.(2001);p.20-50
- 8. UNICEF, UNAIDS, and USAID (2004) Children on the Brink: A joint report of orphan estimate and a framework for action.
- 9. http://www.unicef.org/media/media_45451.html
- James Anthoney, Benede K Therase. Parenthood- a psychology and psychopathology.Little brown and company publishers, New York.(1999); p-16
- 11. Muthopadhyaya Pritha, The orphan hood. Indian journal of clinical psychology, (1996);23(2):p.161-169
- 12. Reddy Narayana, Suma, Institutional children. Chugh publication, Allahabad. (2012);p.11-47, 192-203, 236-249

- 13. Umadevi I, Mayuri, K, Personality profile of adolescent delinquents. Indian Journal of Community Guidance and Research, (2010):18(2):P.157-178.
- Juffer, FV, IJ Zendoorn, M. H. Adoptees do not lack self-esteem: A meta-analysis of studies on self-esteem of Trans racial, international, and domestic adoptees.
 Psychological Bulletin, (2014); 133, 1067–1083.
- 15. Dunne Judy, Problems of the orphan children. Amerian journal of general psychology. (2010);15(4):p.145-152
- 16. Gabel Stewart, Behavioral problems in childhood; A primary care approach. Grunne and straton publishers, New York. (2009);p.440-447
- 17. Zeynep Simsek, Nese Erol, Didemoztopetal. Prevalence and predictors of emotional and behavioral problems reported by teachers among institutionally reared children and adolescents in Turkish orphanages compared with community controls; Journal of Child Youth Serv Rev. 2007 Jul; 29(7): 883–899.
- 18. Sujatha S, Gaonkar V, Khadi PB, Kataraki, PA, Factors influencing adjustment among adolescents. Indian Psychological Review, (2000);40(1-2):P.35-40.
- Luthar, S. Resilience in Development: A Synthesis across Five Decades.Developmental Psychopathology: Risk, Disorder, and Adaptation. D. J. C. D. Cicchetti. New York, Wiley: (2016); 740-795
- 20. Denise F Polit, Bernadette P. Hungler. Nursing research. 6th ed. Philadelphia: Lippincott Company; 1999.P. 155-159
- 21. Kirlinger FN, Foundation of Behavioral Research, 2nd ed. London: Mc.Millan Company; 2016; P.50.
- 22. Kaur R, Vinnakota A, Panigrahi S, Manasa R V. A descriptive study on behavioral and emotional problems in orphans and other vulnerable children staying in institutional homes. Indian J Psychol Med 2018;40:161-8
- 23. Kendall T, Kathleen A., Eckenrode J, The effects of neglect on academic achievement and disciplinary problems: A developmental perspective. Child Abuse and Neglect, (2016);20(3): P.161-169
- 24. Roychaudhury P, Basu J, Parent-child relationship, school achievement and adjustment of adolescent boys. Journal of Community Guidance and Research, (2013)15(2):P.215-226
- 25. Maclean K, The impact of institutionalization on child development. Published in Dev Psychopathal 2013;15(4):853-84.

- 26. Mohan V, Nalwa K, Perception of child rearing practices of deprived and non-deprived adolescent students. Journal of Community Guidance and Research, (2012);13(2):P.191-206.
- 27. Raghvan Veera Gita, Intelligence and personality traits of institutionalized orphan children. Indian psychological review, (2010);8(6):p.40-60
- 28. Biswas Arpita, Kapoor Malavika, Stress full life events and adjustment pattern of psychologically disturbed and non disturbed children of the middle age. Indian Journal of Psychology, (2016); 70(1):P.15-28
- 29. Somen K S, A study of the mental health status of children in orphanage at Bangalore. Indian Journal of Social Work, (2015);XLVII (2):P.137-146.
- 30. Jay P, Singh S, A study of neurotic tendencies as a result of perceived parental rejection. Indian Psychological Review, (2007):37(7):11-18
- 31. RienkeBannink, Suzanne Broeren, etal. Associations between Parent-Adolescent Attachment Relationship Quality, Negative Life Events and Mental Health, JMH, 2012-13; 3(4), 28.

 Available on -https://doi.org/10.1371/journal.pone.0080812
- 32. Kabbur SK, Personality correlates of institutionalized delinquents. Indian Psychology Research, (2012;)34(3-4):P.10-16.
- 33. KotharI S. Joshi K, A comparative study of delinquents and non-delinquents with regard to some personality characteristics. Indian Journal of Psychology, (2011); 67(3&4):P.87-94.
- 34. Vijayalaksmi, Singh G, The personality characteristics of orphans: A Socio psychological study. Psychological Review, (2010);48(1):P.29-31.
- 35. Bron B, The important of parental loss in childhood in depressed and suicidal patient. Kinder psychiatry, (2009): vol-9;P.322-327
- 36. Harris, Depression and situational helplessness mastery in a sample selected to study childhood parental loss. Bastford academic and education limited, London, (2000);P.120-140
- 37. Hiremani SG, Khadi PB, Gaonka R, V Kataraki P. A Comparison of emotional maturity and adjustment of destitute and normal adolescent girls. Indian Psychological Review, (2017); 42(3-4):P.6-11
- 38. <u>Ravneet Kaur, Archana Vinnakota, SanjibaniPanigrahi</u>, A Descriptive Study on Behavioral and Emotional Problems in Orphans and Other Vulnerable Children

Staying in Institutional Homes, <u>Indian J Psychol Med</u>. 2018 Mar-Apr; 40(2): 161–168.

Available on -doi: 10.4103/JJPSYM.JJPSYM_316_17

- 39. Chaudhary N, Bajaj N, Emotional maturity and occupational aspirations of adolescents staying at home and orphanage. Indian Psychological Review, (2016);45:P.21-26.
- 40. Natesan H, A study on the personality and behavior problems of deprived children. Indian Journal of Psychology, (2016); 170(1&2):P.45-48.
- 41. Chaudhary N, Uppal A, Achievement motivation and emotional maturity of adolescents staying at home and orphanage. Indian Psychological Review, (2013); 46(1-2):P.27-32.
- 42. Sigal J john, A psychological and physical consequence in the middle aged adult of underfunded institutional care oh the childhood. American journal of psychology, (2009);22(3):P.34-41