A Study To Assess The Behavioral Problems Among The Institutionalized Children In A Selected Institution At Salem, Tamilnadu, India

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Abstract- The purpose of the study to assess the behavioural problems among the institutionalized children in a selected institution at Salem. Quantitative descriptive survey approach and research design selected for this study is descriptive survey design. A total of 50 samples were selected from Anmbu Illam orphanage home by non- probability, convenient sampling technique. The finding shows 18% of samples found to have mild behavioral problems, 76% have moderate and 6% found to have severe behavioral problems. Behavioral problems include depression, aggression, anxiety, attention problem, hyperactivity, withdrawal, learning problem. There was no significant association between behavioral problem and their demographic variables (Age, Age of entry into the institution, Duration of staying, Which class you studying?, , Any visitors except your family members?, Any contact with your family members?), and there is significant between percentage in academic, participate in sports. Hence the researcher concluded that most of the institutionalized children have behavioral problems.

Keywords- Behavioral problems, Institutionalized children, Orphanage, Caretaker/warden and Booklet.

I. INTRODUCTION

Childhood is the duration of age from birth to adolescence. As per development psychology, childhood is classified into the development stages of toddler, early childhood, meddler childhood and adolescence or categories in terms of learning to walk, play age, school age and post puberty.

When 20% of the world population is between the age of 0 to 14 years, India has a child population of 440 million from the total population of 31.1% and every year 26 million child population being added. In world, India is considered as youngest country. As per the 1991 Census, there were 1, 98, 81,540 children (0-14 years) in Tamil Nadu, constituting 35% of the State's total population.

Behavioral problem commonly occur during childhood. It is defined as behaviors, thought or feeling differ quantitatively from the norm, and as the result of this differences, the child is either suffering significantly or development is being significantly impaired (David Cottrell 2000).

More prevalent behavioral problems during childhood period are attention deficit disorder and oppositional deficit disorder as well as conduct disorder, anxiety disorder along with mood disorder. Among these common behavioral problems, selected behavioral problems such as attention deficit hyperactive disorder, oppositional defiant disorder and conduct disorder were taken for the research study.

Numerous behaviors considered appropriate at early developmental levels, are obviously pathogenic, when they present at later age. The abnormal behaviors create problems both for themselves and others. The behavioral problems in children are monumental one. Children under 15 years of age constitute approximately one third of the world's population and less number of children are affected by some type of behavioral problems.(Malhotra , 1999).

Behaviour problems in the age group of 6-15 years and distress in adult life. Results show that 40% of children had behavioral problem. Follow up study showed 27% have disturbances in adult life. Buchanan A (2002).

Children living in residential and orphans homes are highly vulnerable than population for mental health problems and disorders because of damaging and violence experience of part which can affect relationship and identify formation , tarnishing the young person view of the world , leading to hopelessness and risk taking behaviors.

An orphan is a child permanently suffering the loss of their parents. In common usage, a child who has lost both father and mother is called an orphan. In United States a legal

definition used is a minor bereft through "death or disappearance of, abandonment or desertion by, or separation or loss from, both parents".

Determining the total number of orphans in orphanages when compared to the total number of orphans living in worldwide or impossible to determine due to various seasons as number of children varies in orphanages due to their ongoing admission as well as due to the improper reporting and monitoring of orphanages.

II. OBJECTIVES OF THE STUDY

1. To assess the behavioral problems among the samples.
2. To find association between the behavioral problems and their selected demographic variables.
3. To develop a booklet regarding management of behavioral problems among children.

III. METHODOLOGY

Research approach

Quantitative descriptive survey approach will be considered as the best to assess the behavioral problems among the institutionalized children between 6 - 15 years of age at Salem.

Research design

Research design helps to observe, describe and explore the aspects of situation. The research design selected for this study is descriptive survey design.

Setting of the study

The study was conducted in Anbu Illam Orphanage, which is located at Nattamangalam, Salem, about 14 Kms from shanmuga college of nursing. The orphanage home is under the management of Christian missionaries. Mother Superior, Sr. Bonyfus was in charge for the home. There are 4 Nun-sisters and five helpers for day and night time. The total bed capacity of the home is 100. At the time of this study 83 inmates were staying in that home, 62 males and 21 females. All the inmates are staying without pay.

Population

The target population of this study is the institutionalized children residing in Anbu Illam Orphanage, Naattamangalam, Salem.

Sampling technique

Sampling is the process of selecting a portion of population to represent the entire population. The sampling technique is non-probability, convenient sampling.

Sample Size

The sample size is 50 individuals who are having the age of 6 -15 and living in Anbu Illam Orphanage, Naattamangalam, Salem.

DISCRIPTION OF THE TOOL AND SCORING PROCEDURE

TOOL 1 – Demographic data

It included the demographic characteristics of the institutionalized children's age, age of entry into the institution, duration of staying in the institution, which class you studying, percentage in academic, participate in sports, anybody visit you except your family members, contact with your family members.

TOOL 2 A - Structured interview for caretaker /warden ofinstitutionalized children at the age of 6 – 10 years.

It consists of 25 items, which was prepared to collect information regarding the behavioral problems of institutionalized children, each item has 4 options and the answers were given the score of 3, 2, 1, and 0 accordingly. Time given for completion of the questionnaire was one hour.

TOOL 2 B - Self-administered questionnaire to assess the behavior problems among the institutionalized children at the age of 11 – 15 years.

It consists of 25 items, which was prepared to collect information regarding the behavioral problems of institutionalized children, each item has 4 options and the answers were given the score of 3, 2, 1, 0 accordingly. Time given for completion of the questionnaire was one hour.

Degree of behavioral problems among orphan children was assessed and the highest possible score is 105. For the purpose study the degree of behavioral problems among the orphan children were classified as follows: if the score is less than 40 (38%) is mild, 41 – 75 (39 – 71%) is moderate and 76 – 105 (72 – 100%) is severe.

DATA COLLECTION PROCEDURE

The data was collected over a period of 8 weeks from Anbu Illam Orphanage at Salem. The permission for the study was obtained from the Institution authority. Written informed consent was obtained from the samples after explaining the purposes of the study. Data was collected from Monday to Friday between 3.00 pm to 6.00 pm. The investigator went to institution, got the children register from the care taker. After considering the inclusion criteria the samples were selected. 50 samples were selected and the data was collected through interview method and self-administered questionnaire. In first 4 weeks, Interview schedule was administered for the caretakers of 6 – 10 yrs children and next 4 weeks, children in age group of 11 – 15 yrs were assessed with self-administered questionnaire. Booklet on management of behavior problems for institutionalized children was decided to distribute to the caretakers after the statistical analysis of the study.

IV. DATA ANALYSIS AND INTERPRETATION

SECTION -I: Description of socio- demographic data of the samples.

This section deals with the details of analysis about the distribution of samples according to frequency and percentage of distributing the behavioral problems among the institutionalized orphan children in selected institutions at Salem. The selected variables are 1) Age 2) Age of entry into the institution 3) Duration of staying 4) Class you study 5) Rank in academic 6) participation in sports 7) Visitors other than your family members? 8) Contact with family members?

Table: 1 -Frequency and percentage distribution of samples based on their demographic variables for the age group 6-15 years.

n=50

Sl. No	Variables	Frequency	Percentage
1.	Age in years		
a)	6-8	11	22.00
b)	9-11	18	36.00
c)	12-15	21	42.00
2.	Age of entry into the institution		
a)	1-3	11	22.00
b)	4-6	16	32.00
c)	7-9	17	34.00
d)	10 & above	06	12.00
3.	Duration of		
a)	staying in		
b)	institution	17	34.00
c)	1-3 years	18	36.00
d)	4-6 years	11	22.00
	7-9 years	04	08.00
4.	10 years & above		
		11	22.00
a)	Class of study	18	36.00
b)	1-3	21	42.00
c)	4-6		
5.	7-10	04	08.00
a)	Percentage in	14	28.00
b)	academic	24	48.00
c)	<44%	08	16.00
d)	45-59%		
6.	60-79%	28	56.00
a)	80-100%	22	44.00
b)	Participate in		
7.	sports		
	Yes	05	10.00
a)	No	45	90.00
b)	Visitors other		
8	than family	04	08.00
a)	members	46	92.00
b)	Yes		
	No		
	Contact with family members?		
	Yes		
	No		

The table 1 shows:

- 26 % of the sample belongs to the age group of 6-8 yrs, 36 % of the samples belong to the age group of 9-11 yrs, and 42 % of the samples belong to the age group of 12- 15 yrs.
- Age of entry into the institution of these samples are 22% of the sample belongs to the age group of 1-3 yrs. 32% of the sample belongs to the age group of 4-6yrs , 34% of the samples to the age group of 7-

9yrs, 12% of the samples belongs to the age group of 10 years and above.

- Duration of staying into the institution of these samples 34% of the samples belongs to the age group of 1-3 years, 36 % of the samples belong to the age group of 4-6 years, 22% of the samples belong to the age group of 7-9 years, and 8 % of the samples belong to the age group of 10 years and above.
- Among these samples 22 % are studying in 1st – 3rd standards,   36 % are studying in 4th -6th standards, 42 % are studying in 7th – 10th standards.
- Percentage In academic section, 8% of the samples are belongs to less than 40% of mark, 28% of the samples are belongs to 45-59% of mark, 48% of the samples are belongs to 60 – 70 % of mark, 16% of the samples are belongs to 80 – 100% of marks.
- Among these samples 56 % are participating in sports and 44 % are not participating in sports.
- Among these samples 10% are having the visitors except family members and 90% are not having.
- 08% are having contact with their family members and 92% are not having the contact with their family members.

SECTION – II: Frequency distribution of samples and their degree of behavior problems.
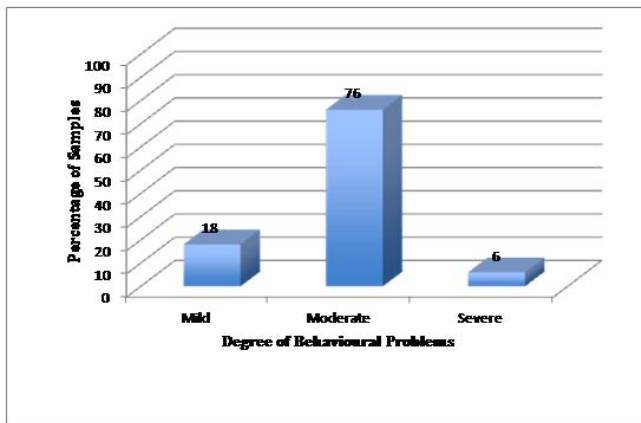

Fig 1 : Bar diagram showing the percentage distribution of samples and their level behavior problems.

Fig.1 shows 18% of samples found to have mild behavioural problems, 76% have moderate and 6% found to have severe behavioural problems. Behavioral problems include depression, aggression, anxiety, attention problem, hyperactivity, withdrawal, learning problem.

Table 2: Degree of behavioral problems among the institutionalized children at the age group of 6-15 years.

n=50

Sl. no	Behavioral problems	Degree of problem					
		Mild	%	Moderate	%	Severe	%
1.	Depression	6	12%	40	80%	4	8%
2.	Aggression	14	28%	34	68%	2	4%
3.	Anxiety	10	20%	40	80%	0	0
4.	Attention problem	6	12%	42	82%	2	4%
5.	Hyper activity	6	12%	44	88%	0	0
6.	Withdrawal	6	12%	44	88%	0	0
7.	Learning problem	8	16%	42	84%	0	0

Data in the table 2 reveals that degree of behavioral problems among the institutionalized children for the age group of 6-15 years. That indicates,

- 6 (12%) of them are mild problem of depression, 40 (80%) children are moderate problem of depression and 4 (8%) are severe problem of depression.
- 14 (28%) are mild aggressive behavior, 34 (68%) are moderate aggressive behavior and 4 (8%) are severe problem of aggression.
- In anxiety, 10 (20%) are in mild, 40 (80%) are in moderate and no severe anxiety problem occur.
- 6 (12%) of children are having mild attention problem, 42 (84%) of children are having moderate attention problem and 2 (4%) are having severe attention problem.
- 6 (12%) of children are mild hyper active, 44 (88%) children are moderate hyper active and there is no severe hyper active children.
- In withdrawal, 6 (12%) are mild, 44 (88%) are moderate and no severe withdrawal problem occur.
- 8 (16%) children are mild learning problem, 42 (84%) are moderate learning problem and there is no severe learning problem children.

SECTION III: Association between the level of behavioral problems among the samples and their demographic variables.

This section deals with the association between the level of behavioral problems among the samples and their variables. It was associated with chi- square test.

Table 3: Chi-Square value on level of behavior problems and their demographic variables

Sl.No	Variables	Chi-square value	df	Table Value	Level Of Significant
01	Age in years	3.51	4	9.49	NS
02	Age of entry into the institution	9.20ns	6	12.59	NS
03	Duration of staying in institution	6.16ns	6	12.59	NS
04	Class you study	5.32ns	4	9.49	NS
05	Percentage in academic	22.23*	4	12.59	S*
06	Participate in sports	8.02*	4	5.99	S*
07	Visitors other than family members	0.36ns	4	5.99	NS
08	Contact with family members?	1.37ns	4	5.99	NS

df-degree of freedom ,NS- not significant at p<0.05 level, *-significant at p<0.05 level

Data presented in table 3 reveals that

- Chi-square value (3.51) is lesser than the table value (9.49), which indicate that there is no significant association between the age and behavioral problems.
- Chi-square value (9.20) is lesser than the table value (12.59), which indicates that there is no significant association between age of entry into the institution and behavioral problems.
- Chi-square value (6.16) is lesser than the table value (12.59), which indicates that there is no significant association between duration of staying in the institution and behavioral problems.
- Chi-square value (22.23) is greater than the table value (12.59), which indicates that there is significant association between rank in academic and behavioral problems.
- Chi-square value (5.32) is lesser than the table value (9.49), which indicates that there is no significant association between which class the sample are studying and behavioral problems.
- Chi-square value (8.02) is greater than the table value (5.99), which indicates that there is significant association between involvement in sports and behavioral problems.

- Chi-square value (.36) is lesser than the table value (5.99), which indicates that there is no significant association between visitors except their family members and behavioral problems.
- chi-square value (1.37) is lesser than the table value (5.99), which indicates that there is no significant association between the contact with their family members and behavioral problems.

V.RECOMMENDATION

1. The study can be replicated on a large sample; thereby findings can be generalized to a large population.
2. The study can be replicated on both gender, thereby findings can be associated with male and female behavioral problem.
3. A study may be assessed among institutionalized children, on other types of behavioral problems like autistic disorder, phobia, knowledge level etc.
4. A similar study could be conducted among the relatives of institutionalized children.

VI. CONCLUSION

The purpose of the study was to assess the behavioral problems among the institutionalized children in selected institutions at Salem and develop a booklet for caretaker to manage the behavioral problems of institutionalized children. The study found that 76% of the samples had moderate behavioral problems. So booklet regarding management of behavioral problem was given to the care taker to improve the knowledge in this aspect

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