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A study to assess the effectiveness of interventional packages on selected psychological problems and coping strategies among orphans residing at selected orphanages Bagalkot

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Abstract

Background of the study: Bereft of parents, the orphan is a child who requires protection, care, and guidance. The orphan thus reveals his or her cultures understanding of both the underage child's essential needs and society's responsibility for meeting them. Because debates about the importance of the child often crystallize around the orphan, the orphan proves to be a figure of concern across culture, throughout history, and in the contemporary world. The orphan is defined by the deprivation of parents, and is commonly understood to be a child who has lost both parents death.

Aims: A Pre-experimental Study with one group pre-test post test without control group design aimed "A Study to assess the effectiveness of Interventional Packages on Selected Psychological Problems and Coping Strategies among Orphans Residing at Selected Orphanages Bagalkot"

Conceptual Frame work:

Based on Ludwig Von Bertalanffy's General System Theory

Methodology: An evaluative research approach was used to assess the effectiveness of interventional package on selected psychological problems and coping strategies Among Orphans Residing At Selected Orphanages Bagalkot. In the present study Pre-experimental with one group pre testpost test without control group design was used. In the present study, a sample of 60 children were selected by disproportionate random sampling technique. Structured close ended questionnaire was used to collect the data.

Results: The overall finding revealed that the post test score 41 ± 9.57 which was 99.52% of total score is more when compared to the pre-test score 30.8 ± 6.56 which was 73.45% of total score. Hence it indicates that interventional package was effective in enhancing the psychological problems, self-esteem and coping strategies.

When paired 't' test was applied to find out the significant difference between pre-test and post test scores it revealed that calculated 't' value (12.34) was much higher than table 't' value (1.96) Thus the hypothesis was accepted.

Chi-square was calculated to find out the association between post test scores of children with their selected socio demographic variables. There is no significant association found between post test scores of children regarding psychological problems, self-esteem and coping strategies and selected socio-demographic variables but there is an association between post test scores and duration of stay in the ashram.

Since many socio-demographic variables were not having significant association between post test scores; H₂- There will be significant association between post test score with selected socio-demographic variables will be rejected.

Interpretation and Conclusion: The overall findings of the study clearly showed that Interventional Packages on Selected Psychological Problems and Coping Strategies among Orphans Residing at Selected Orphanages Bagalkot is effective. This indicates that the Coping Strategies is important for improving the quality of life.

Keywords: DAS, RNT, SD, χ^2

Introduction

Healthy child makes healthy generation. There is a close relationship between unhealthy children to a worsened future of the world. The children are one third of our population and all of our future. There are about 200.6 million children belonging to 6 to 12 years globally. Among them, 40% of middle school children are in India. In Karnataka there are about 22 million children who are going to middle schools ^[1].

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Childhood is the period of dependency. Gradually, children learn to adjust in the environment. But when there is any complexity around them they cannot adjust with that circumstance. Then they become unable to behave in the socially acceptable way and behavioural problems develop with them^[1].

Normal children are healthy, happy and well adjusted. This adjustment is developed by providing basic emotional needs along with physical and physiological needs for their mental well-being. The emotional needs are considered as emotional food for healthy behaviour. So the children are dependent on their parents but in case of loss of parents those children's don't get the love and affection so they are unable to fulfill their emotional needs so orphans are vulnerable to have psychological problems and behavioral problems^[2].

Orphan means child whose parents are dead be made an orphan and the orphanage is one the home which cares for orphans. Children represent the future, ensuring their healthy growth & development to be a prime concern of all societies. Children are vulnerable to any condition of health, many of which can be effectively prevented or treated. An orphan is a child permanently bereaved of or abandoned by his or her parents. In common usage only a child (or the young of an animal) who has lost both parents is called an orphan^[3].

The first orphanages called Orphanotrophias, were founded in the 1st century amid various alternative means of orphan support (Jewish law for instant prescribed care for the widow and orphan, and Athenian law supported all orphans of those killed in military service until the age of eighteen). The care of orphans was particularly commended to bishops and, during the middle ages, to monasteries. Many orphanages practiced some form of binding-out in which children, as soon as they were old enough, were given as apprentices to households. This would ensure their support and their learning an occupation. Historically certain birth parents were often pressured or forced to give up their children to orphanages: those of children born out of wedlock or into poor families; those with disabilities or of children born with disabilities; and those with girls born into patriarchal societies such practices are assumed to be quite rare in the modern western world, thanks to improved social security and changed social attitudes, but remain in force in many countries^[4].

The term coping is used to refer to the process by which a person attempts to manage stressful demands. It takes two major forms. A person can focus on the specific problem or situation that has arisen, trying to find some way of changing it or avoiding it in the future, this is called problem focused coping strategy helps to resolve or change a person's behavior or situation or manage life stressors. Such as Learning problem solving method, applying the process to identified problem, role playing interactions with other^[5].

Title of the Project

“A Study to assess the effectiveness of Interventional Packages on Selected Psychological Problems and Coping Strategies among Orphans Residing at Selected Orphanages Bagalkot”

Aims of the study

1. To assess the psychological problems and coping

strategies among orphans in selected orphanages Bagalkot.

2. To assess the effectiveness of interventional packages on selected psychological problems and coping strategies among orphans in selected orphanages Bagalkot.
3. To find out the association between post test scores on selected psychological problems and coping strategies with selected socio demographical variables among orphans.

Hypotheses

The following hypotheses are formulated for the study and will be used at 0.05 level of significance.

H₁: There will be significant difference between pre test and post test scores of selected psychological problems and coping strategies among orphans.

H₂: There will be significant association between post test scores on selected psychological problems and coping strategies with selected socio demographic variables.

Conceptual/Theoretical Framework

The conceptual framework of the study is based on General Systems Model. According to the general systems model, a system is a set of interacting elements, all contributing to the overall goal of the system. Any system consists of the input, throughput and output. This study aims at evaluating the effectiveness of interventional package on selected psychological problems and coping strategies among orphans residing at selected orphanages Bagalkot.

The process of assessing psychological problems and coping strategies and socio-demographic variables as the input, the implementation of interventional package as the process and evaluation and feedback in the system as the output.

Methodology

Research Approach: Evaluative Approach

Research Design: Pre-experimental with one group pre-test post-test without control group design.

Samples: Orphans Residing At Selected Orphanages Bagalkot

Sampling Technique: Consecutive Sample Technique for Selection of Orphanages and Disproportionate Random Sampling Technique for Samples

Sample Size: 60 students.

Plan for Data Analysis

Descriptive statistics (frequency, percentage, mean, median and standard deviation) and inferential statistics were used for analysis and interpretation of data.

Setting of the Study

The present study was conducted in selected orphanages of Bagalkot.

- Sikkeri orphanage Bagalkot.
- Baal mandir Navnagar Bagalkot.
- Balika mandir old Bagalkot.

Sampling Criteria

The criteria set by the researcher to selected subjects for the study are as follows.

Inclusion Criteria

The study includes the orphans who are;

- Residing at Baal mandir orphanage, Baalika mandir orphanage, and Sikkeri orphanage Bagalkot.
- Willing to participate in the study.
- Able to read, write and understand the kannada.
- Available at the time of data collection.

Exclusion criteria

The study excludes the orphans who are;

- Sick and not able to provide data.

Content validity

Content validity of the tool was established by obtaining the suggestions from experts. The tool was validated by 8 experts among which two were doctors and six were from Child Health Nursing Department. Minor modifications were made on the basis of recommendations and suggestions of experts. After consulting guide the final tool was reframed. It was found to be valid and suitable. Asst. Prof. Mrs. Janaki has suggested to extend the upper age group of children from 15 years to 16 years and above.

Reliability of the tool

The reliability of the tool was obtained by using test-retest method. Karl Pearson's co-efficient formula was used to find the internal consistency and the reliability co efficient for DAS 21 scale was $r=0.96$, the reliability co efficient for Rosenberg self-esteem scale $r=0.98$ and the reliability co efficient for coping strategies inventory scale was $r=0.99$ indicating the tools were highly reliable.

Data collection Instrument

The standardized scales were developed by the investigator for assessing the level of DAS, self-esteem and level of coping strategies. The tool was prepared on the basis of objectives of the study.

The tool was prepared on the basis of objectives of the study. Developing the interventional package which includes all the facts and idea related to psychological problems, self-esteem and coping strategies.

The final format of the tool was comprised into parts.

Part-I: The socio-demographic data consists of information about orphans; age, gender, religion, Educational status, duration of stay in orphanage and source of information.

Part-II: The DAS 21 scale to assess the depression, anxiety and stress. There are 21 items in DAS 21 schedule.

Scoring Patterns: scoring of items as follows;

- 3 - Never
- 2 - Sometimes
- 1 - Often
- 0 - Almost Always

To find out the association between the levels of DAS and socio-demographic variables. The orphans were categorized into different categories based on their level of DAS scores. Categorization as follows;

	Depression	Anxiety	Stress
Very low level	0-4	0-3	0-7
Low level	5-6	4-5	8-9
Moderate level	7-10	6-7	10-12
High level	11-13	8-9	13-16
Very high level	14+	10+	17+

Part-III: The Rosenberg's self-esteem scale to assess the self-esteem. There are 10 items in Rosenberg's self-esteem inventory scale.

Scoring Patterns: scoring of items as follows;

- 3 - Strongly agree
- 2 - Agree
- 1 - Dis agree
- 0 - Strongly dis agree

Levels of Self esteem	Range of score	Percentage
Very high self-esteem	25-30	81-100%
High self-esteem	19-24	61-80%
Moderate self-esteem	13-18	41-60%
Low self-esteem	7-12	21-40%
Very low self-esteem	0-6	0-20%

Part IV: The coping strategies inventory to assess the coping level

Scoring pattern: scoring of the items as follows

- 0: Not at all
- 1: A little
- 2: Some what
- 3: Much
- 4: Very much

Levels of coping strategies	Range of score	Percentage
Very high coping level	33-40	81-100%
High level of coping strategies	25-32	61-80%
Moderate level of coping strategies	17-24	41-60%
Low level of coping strategies	9-16	21-40%
Very low level of coping strategies	0-8	0-20%

Process of data collection was as follows

- Selection of the subjects was done after applying the predetermined inclusion criteria.
- Written consent was obtained from subjects to participate in the study
- Samples are selected by Disproportionate Random Sampling Technique.
- On day 1 the pre test was conducted, later planned teaching program was administered to the participant and post test was conducted on day 8.
- Data analysis was done using descriptive and inferential statistics.

Results**Organization of Findings**

Descriptive and inferential statistics were used to analyse the data that was collected. The findings of data has been finalized and organized in accordance with the plan for data analysis. The collected information was organized and presented in 4 sections as follows:

Section I: Description of socio-demographic characteristics of sample.

Section II: Assessment of depression, anxiety and stress

and level of self-esteem and coping strategies in orphan children.

Section III: Evaluation of the effectiveness of interventional package on psychological problems and coping strategies.

Part-I: Comparison of level of psychological problems and coping strategies in pretest and posttest.

Part-II: Area wise evaluation of effectiveness of interventional package on psychological problems, self-esteem and coping strategies in orphans.

Part-III: Testing of Hypothesis

Section IV: Association between post test score of orphan children regarding psychological problems, self-esteem and coping strategies and selected socio demographic variables.

Section I: Description of socio-demographic characteristics of sample.

Sl. No	Demographic variables	Percentage (%)
1.	Age (in yrs)	
	a) 9-11	13.3
	b) 12-15	66.66
	c) >16	20
2.	Gender	
	a) Male	66.6
	b) Female	33.3
3.	Religion	
	a) Hindu	91
	b) Muslim	8.33
	c) Christian	0
	d) Others	0
4.	Educational Status of Children	
	a) Primary School	17
	b) High School	80
	c) PUC	3.33
5.	Source of Information	
	a) Mass Media	16
	b) Health Personnel	3.33
	c) Arsham Workers	80
	d) Others	0
6.	Duration of Study	
	a) 1-5	8.33
	b) 5-10	16.66
	c) 10-15	50
	d) >15	25

Section-II: Assessment of psychological problems, Self-esteem and coping strategies.

Percentage wise distribution of children according to level of DAS in pre-test reveals that out of 60 subject's highest percentage (50%) had moderate level of DAS, 30% had high level of DAS, and lowest percentage 20% had low level of DAS. It reveals that majority of children had moderate level of DAS.

Percentage wise distribution of children according to level of self-esteem in pre-test reveals that out of 60 subject's higher percentage (50%) had moderate level of self-esteem, 23.33% had low level of self-esteem, and 18.33% had very low self-esteem, 8.33% of high self-esteem, and lower percentage. It reveals that majority of children had moderate

level of self-esteem.

Percentage wise distribution of children according to level of coping strategies in pre-test reveals that out of 60 subject's highest percentage (46%) had moderate level of coping strategy, 26.66% had low level of coping strategy, and 16.66% very low coping strategy, 10% had high coping level and no children had very high coping level. It reveals that majority of children had moderate level of coping strategy.

Section III: Evaluation of the effectiveness of interventional package on psychological problems and coping strategies.

Part-I: Comparison of level of psychological problems and coping strategies of orphan children in pre-test and post-test.

Comparison of level DAS of orphan children in pre-test and post test: Comparison of children in pretest and post test scores of DAS reveals the following results. In pre-test, out of 60 subjects majority of (50%) had moderate level of DAS, 30% had high level of DAS, 20% had low level of DAS, followed by no children have fallen in very high level of DAS and very low level of DAS. However after Interventional package (posttest) 61.66% had very low level of DAS, 20% subjects had moderate level of DAS. Followed by 18.33% had high level of DAS, and No children had fallen in very high level of DAS. Hence there was marked improvement in level of DAS from pretest to posttest

Comparison of level self-esteem of orphan children in pre-test and post test

Comparison of children in pre-test and post-test scores of self-esteem reveals the following results. In pre-test, out of 60 subjects majority of (50%) had moderate level of self-esteem, 23.33% had low level of self-esteem, 18.33% had very low level of self-esteem, 8.33% had high level of self-esteem. However after Interventional package (posttest) 60% had very high level of self-esteem, 23.33% subjects had moderate level of self-esteem. Followed by 16.66% had high level of self-esteem. Hence there was marked improvement in level of self-esteem from pretest to post test

Assessment of level coping strategies of orphan children in pre-test and post test

Comparison of children in pretest and post test score of coping strategies reveals the following results. In pre-test, out of 60 subjects majority of (46.66%) had moderate level of coping strategy, 26.66% had low level of coping strategy, 16.66% had very low level of coping strategy and 10% had high level of coping strategy. However after Interventional package (post test) 65% had high level of coping strategy, 18.33% subjects had very high level of coping strategy. followed by 16.66% had moderate level of coping strategy, and No children had fallen in level of low coping strategy and level of very low coping strategy. Hence there was marked improvement in level coping strategy from pretest to post test

Part-II: Area wise evaluation of effectiveness of interventional package regarding psychological problems and coping strategies.

Table 1: Area wise Mean, S.D and Mean percentage of the scores in pretest and posttest. N=60

Levels	Max. score	Pre-test (O ₁)		Post-test (O ₂)		Effectiveness (O ₂ -O ₁)	
		Mean ± SD	Mean %	Mean ± SD	Mean %	Mean ± SD	Mean %
Level of DAS	63	12.8±5.73	30.47	20.03±4.15	47.69	7.23±1.58	17.21
Level of self esteem	30	6.91±1.79	16.45	17.4±2.16	41.42	10.5±0.37	25
Level of coping strategies	44	10.38±3.1	24.71	28.31±3.8	67.40	17.9±2.7	42.61
Total	137	30.8±6.56	73.45	41.8±9.57	99.52	11±3.01	26.19

Part-III: Testing of Hypothesis

To evaluate the effectiveness of interventional package testing was done.

H₁:- There will be significant difference between the pretest

and post scores of psychological problems among orphans. Paired t’ test was used to find out the significant of the difference between the pretest and post test scores of orphan children regarding psychological problems, self esteem and coping strategies.

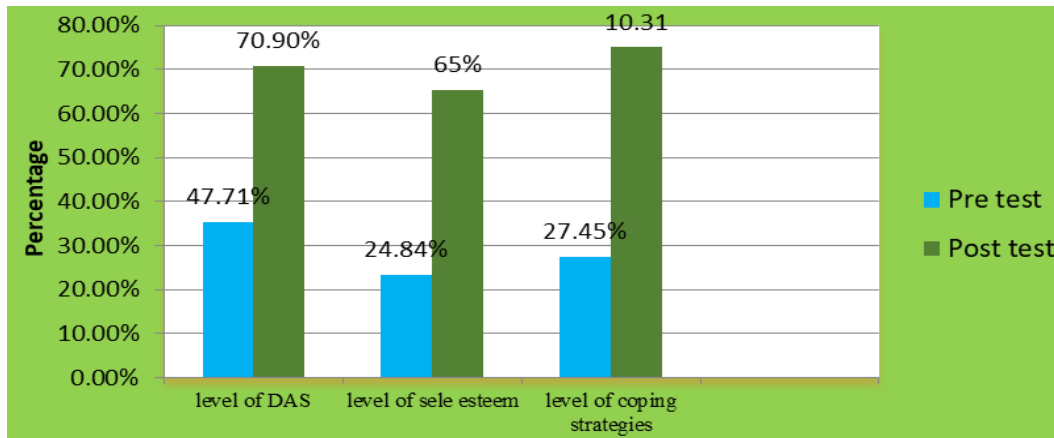


Fig 1: Percentage wise comparison of mean of pre test and post test scores of psychological problems, self-esteem and coping strategies.

Table 2: Significant difference between the pre test and post test scores of orphanage children.

Test	Mean	Std Error	Mean Diff	SD Diff	Paired t-value	Table value
Pre-test (o ₁)	30.8	1.46	1.3	1.552	12.34	1.96
Post-test(o ₂)	41.8					

As the calculated t value (12.34) was much higher than table ‘t’ value (1.96) the hypothesis:

H₁ -there will be significant difference between the pretest

and post test scores of orphans children regarding psychological problems and coping strategies is accepted. Findings revealing the presence of significant difference between pre-test and post-test scores, hence the interventional package is proved to be effective. (Table 5.8)

Section IV: Association between post test scores of orphan children regarding psychological problems and coping strategies and selected socio demographic variables.

Table 3: Post test scores and selected socio demographic variables.

Sl. No.	Socio demographic variables	Df	Chi-square value	Table value	Level of significance	Association
1	Age	1	2.21	3.84	0.05	Not significant
2	Gender	1	0.56	3.84	0.05	Not significant
3	Education status	1	4.01	3.84	0.05	Significant
4	Religion	1	0.400	3.84	0.05	Not significant
5	Duration of stay	1	1.76	3.84	0.05	Not significant
6	Source of information	1	0.05	3.84	0.05	Not significant

Chi-square was calculated to find out the association between post test scores of orphan children with their selected socio demographic variables.

There is no significant association found between post test scores of children regarding psychological problems, and coping strategies and selected socio-demographic variables like children age, gender, educational status, religion, duration of stay in ashram, source of information. But there is an association between posttest score sand educational status.

Key:

NS: Not significant at *p*<0.05

χ²-chi square

df: Degree of freedom

Discussion

The findings are the four sections.

Section I: Description of socio-demographic characteristics of sample.

Percentage wise distribution of children according to their age groups reveals that out of 60 subjects, the highest percentage (66.66%) of the subjects belong to age group of 12-15 years, followed by 20% in the age group of 16 years above and the lowest percentage 13.33% in the age group of 9-11years. It reveals that majority of orphan children under

this study belong to age group 12-15 years.

A descriptive study was done in Uganda in 2005 to assess the psychological problems and coping strategies and behavioral distress in orphaned children. The sample size was 123 orphaned children (age 10-15 years) who had lost one or both parents to AIDS were selected by random sampling technique, and 110 children of similar. The result shows that orphan status was the best predictor of distress. Orphans 10-15 age group greater risk for higher levels of anxiety, depression and anger. The study concluded that the children had both fears and hopes about their future. Some children feared that their lives would be worthless now that they did not have their parents support and protection, most felt pessimistic about the future. In my study result showed that majority of orphan children (60%) were in the age group of 12-15 years, hence this study supports my study.

Section II: Description of level of psychological problems and coping strategies

Comparison of level of psychological problems of children in pre-test and post-test.

Comparison of children in pre test and post test scores of DAS reveals the following results. In pre-test, out of 60 subjects majority of (50%) had moderate level of DAS, 30% had high level of DAS, 20% had low level of DAS, followed by no children have fallen in very high level of DAS and very low level of DAS. However after Interventional package (post test) 61.66% had very low level of DAS, 20% subjects had moderate level of DAS. Followed by 18.33% had high level of DAS, and No children had fallen in very high level of DAS. Hence there was marked improvement in level of DAS from pretest to posttest

The descriptive study was done in Israel governorate, the aim of this study was to determination of emotional, depression, anxiety and stress and developmental disorders among orphanages children in sharkia governorate. All children aged between 6-12 years old, from both sex and have no social limitation. All participants were subjected to psychiatric assessment for depression by child depression inventory, anxiety by revised children's manifest anxiety scale, self-esteem by Rosenberg's self-esteem scale and paediatric assessment for developmental disorder by paediatric symptom checklist. The result shows that the prevalence rate of depression was 21%, anxiety was 45%, low self-esteem was 23% and developmental disorder was 61%. Hence in my study the 55% children had moderate level of DAS.

Section III: Evaluation of the effectiveness of the interventional package on psychological problems and coping strategies.

Part-I: Comparison of psychological problems and coping level of children in pre-test and post-test.

The overall finding reveals that the posttest mean score 41.8 ± 9.57 which was 99.52% of total score is more when compared to the pretest score 30.85 ± 6.56 which was 73.45% of total score. Hence it indicates that interventional package was effective in enhancing the psychological problems, self-esteem and coping strategies

This result is supported by study conducted in Brazil. The result indicated that the overall response rate was 70%. The researcher concluded that to reduce the psychological problems and to improve level of self-esteem and coping

level the orphans must need the programs like yoga and meditation.

Part-II: Area wise evaluation of effectiveness of interventional package regarding psychological problems and coping strategies.

Percentage wise distribution of children according to level of DAS in pre-test reveals that out of 60 subject's highest percentage (50%) had moderate level of DAS, 30% had high level of DAS, and lowest percentage 20% had low level of DAS. It reveals that majority of children had moderate level of DAS

Percentage wise distribution of children according to level of self-esteem in pre-test reveals that out of 60 subject's higher percentage (50%) had moderate level of self-esteem, 23.33% had low level of self-esteem, and 18.33% had very low self-esteem, 8.33% of high self-esteem, and lower percentage. It reveals that majority Percentage wise distribution of children according to level of coping strategies in pre-test reveals that out of 60 subject's highest percentage (46%) had moderate level of coping strategy, 26.66% had low level of coping strategy, and 16.66% very low coping strategy, 10% had high coping level and no children had very high coping level. It reveals that majority of children had moderate level of coping strategy of children had moderate level of self-esteem.

Area wise comparison of mean and standard deviation of the scores of the pretest and posttest reveals an increase in the mean score of the children after interventional package. Comparison of area wise mean and SD of the scores in the area of "Regarding DAS" shows that the pretest mean score was 12.8 with SD ± 5.73 which was 30.47% of total score of this area, whereas post-test mean of score in this area was 20.03 with SD ± 4.5 which was 47.69% of total score of this area.

A descriptive study was conducted in Nigeria to assess the stress and depression among the orphans based intervention is yoga and exercise. Researcher concluded that depression and stress can be reduced by daily yoga and exercise among orphans. And helps the children to live healthy life.

In the area of regarding on "level of self-esteem", pre-test mean score was 6.91 with SD ± 1.79 which was 16.45% of total score of this area, where as post-test mean score was 17.4 with SD ± 2.16 which was 41.42% of total score of this area. In the area of regarding coping strategies of pre-test mean score was 10.38 with SD ± 6.5 which was 24.71% of total score of where as post-test mean score was 28.31 with SD ± 3.8 which was 67.40% of total score of this area

The overall finding reveals that the post test mean score 41.8 ± 9.57 which was 99.52% of total score is more when compared to the pretest score 30.85 ± 6.56 which was 73.03% of total score. Hence it indicates that interventional package was effective in enhancing the psychological problems, self-esteem and coping strategies

A similar pre experimental study was conducted to assess the effect of meditation and yoga on stress and anxiety among orphans. With a sample of 45 orphans was done in selected orphanage of Kashmir. Data was collected by using standardized tools including the structured questionnaire for 'Demographic and selected variables' and pre-test questionnaire. The subjects were exposed to meditation and yoga. There was significant difference in mean score of orphans before (8.61) and after (17.20) the administration of meditation and yoga on stress and anxiety. As in the present

study significant difference in mean score of children before (14%) and after (23%) the administration of meditation and yoga on stress and anxiety. hence this study support the present study.

Part-III: Testing of Hypothesis

To evaluate the effectiveness of interventional package the testing was done. As the calculated t value (12.34) was much higher than table 't' value (1.96) the hypothesis:

H₁ - There will be significant difference between the pre-test and post test scores of children regarding psychological problems is accepted. Findings revealing the presence of significant difference between pre-test and post-test scores, hence the interventional package is proved to be effective.

There is no significant association found between post test scores of children regarding psychological problems and selected socio-demographic variables like age, gender, education, religion, duration of stay in ashram and source of information. But there is an association between post test scores and educational status of children.

Since many socio-demographic variables were not having significant association between post test scores;

H₂- There will be significant association between post test score with selected socio-demographic variables was rejected.

Chi-square test was used to find the association between the socio demographic variables and post test score of subjects regarding psychological problems. Significant association was found that is Educational status. But No significant association was found between the children and their socio-demographic variables: age, gender, religion, duration of stay in ashram and source of information.

Similar findings were observed by Uday Narayan Yadav, Sharadha parsekar, Vidya Prabhu, Udapi taluk, Karnataka the result shown that among 15.8% of the children there was low self-esteem. Researcher concluded that there was statistically significant association ($p < 0.001$) between self-esteem and standards of the study of orphans.

Conclusion

The conclusions drawn from the study are as follows

- Majority 66.66% of the subjects belong to the age group of 12-15 years.
- Majority 66.66% of the subjects were males.
- 91.00 % were belongs to Hindu.
- 80.00% of the subjects were studying in high school.
- Majority 80% were gained the information from ashram workers.
- Majority 50.00% of subjects were stayed in ashram is 10-15 years.
- The interventional package was effective to improve the level of DAS, self-esteem and level of coping strategies.

Ethical clearance: Study was approved by the Institutional Ethical Committee, Formal administrative permission was obtained.

Conflict of Interest: Nil

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