

Impact of Behavioural Intervention on the Adjustment of Inmates of Children Homes.

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Abstract: *The present study was undertaken to study the impact of behavioral intervention on the adjustment of inmates of children homes. The sample for the study comprised of 120 children in the age group of 10-15years from three children homes in Hyderabad of Andhra Pradesh. Information was collected on daily schedule of the inmates. The behavior of selected sample was observed and analyzed. The reason for mal adjustment of inmates was found out through structured interviews and information schedules. Before planning for behavior intervention programme Bell's adjustment inventory was administered to the selected sample. The results were analyzed and behavior intervention programme was developed and given to experimental group for a period of one year. After intervention Bell's adjustment inventory was again administered to both experimental group and controlled group. From the results of the study it was interesting to note that the behavior intervention had impact on adjustment of inmates of children homes. The sample of children to whom the intervention programme was given scored more on Bell's adjustment inventory than the children who didn't receive the intervention.*

I. Introduction

India is the second most populated country in the world and a significant part of the population are kids. Since a major part of the population of India suffers from financial adversities and other societal problems, many kids become destitute or orphans. Like every other social problem, orphan hood is a huge challenge, yet a staggering number of children live with it. Early separation from parents, deprivation of parental care, love, affection, warmth, security, acceptance and discipline during childhood disrupts their normal socio-emotional development. So it becomes necessary to know whether institutionalized children who are devoid of family life with the emotional warmth grow up normally and how well they are able to cope with himself and adjust to the demands of the environment/society around them.

Behavioural interventions are those in which instrumental learning techniques constitute the predominant feature of the intervention approach (Francis, 2005). Grounded heavily in learning theory, behavioural interventions are built on the premise that most human behaviour is learned through the interaction between an individual and his or her environment. It is theorized therefore that human behaviour is both learned and governed by its antecedents and its consequences. Simply put, children are more likely to learn and retain behaviours for which they receive positive reinforcement (reward) and are less likely to learn or maintain behaviours for which they receive no reward (including punishment). Behavioural interventions aim to teach and increase targeted positive behaviours and reduce or eliminate inappropriate or non-adaptive behaviours through careful manipulation of the environment and the provision of contingencies. Therefore the study with the aim to know the level of adjustment of institutionalized children and to know if intervention given for these children has impact on their adjustment levels.

II. Materials and Methods

The population for the present study comprised children residing in children homes in Andhra Pradesh state. Sample of 120 children comprising of 60 boys and 60 girls in age group of 10-15years were selected and were administered Bell's adjustment inventory. Sample of 60 children comprising 30 boys and 30 girls were selected for behavior intervention programme as experimental group and given intervention for a period of one year. Then the Bell's adjustment inventory was again administered to all the 120 children and the results are as follows.

III. Results and Discussion

This modified adjustment inventory developed by Hugh M.Bell (1934) and it is a self reporting questionnaire in 'yes' and 'no' format to measure the total level of adjustment. The scores obtained in each areas like home, health, social and emotional were added together to determine the total level of adjustment. One point is given to every 'yes' responses. The maximum score is 40 and the lowest score is zero and the total adjustment is further divided into 5.

Higher score indicates lesser adjustment in the particular area. In this study, a score of 3 and below would mean that the respondent is well-adjusted and a score of 21 and above would mean that he/ she is poorly adjusted.

The administration of this scale takes 40-45 minutes.

Table.1 Influence of gender on adjustment of institutionalized children (n=120)

S.no		Excellent	Good	Average	Poor	Very poor	mean	S.D	t-test
1.	Home								
	Boys	-	-	20(33.3%)	30 (50%)	20(33.3%)	23.3	5.7	0.2NS
	Girls	-	10(16%)	30(50%)	20(33.3%)	-	20	10	
2.	Health								
	Boys	-	-	20(33%)	30(50%)	10(16%)	20	10	0.5NS
	Girls	-	-	20(33%)	20(33.3%)	20(33%)	20	0	
3.	Social								
	Boys	-	-	-	40(66%)	20(33.3%)	30	14	0.35NS
	Girls	-	-	25(42%)	15(55%)	20(33.3%)	23.3	2.8	
4.	Emotional								
	Boys	-	-	-	30(50%)	30(50%)	30	0	0NS
	Girls	-	-	20(33.3%)	20(33.3%)	20(33%)	20	0	

Figures in parenthesis indicate percentages

The results of the study (Table 1) showed that majority of the institutional children had unsatisfactory social, emotional and educational adjustment. This clearly indicates that institutional children have more social, emotional problems which made them socially more aggressive, emotionally unstable and educationally not interested in studies and these characteristics were responsible for unsatisfactory adjustment of children. It was interesting to note from the study that there is significant difference between boys and girls in level of adjustment.

Table.2 Influence of age on adjustment of institutionalized children (n=120)

Younger age (n=50) Older age (n=70)

S.no		Excellent	Good	Average	Poor	Very poor	Mean	S.D	t-test
1.	Home								
	10-12yrs	-	-	10(20%)	30(60%)	10(20%)	16.6	11.5	0.05*
	13-15yrs			20 (28%)	30(42%)	20(28%)	23.3	5.7	
2.	Health								
	10-12yrs	-	-	-	30(60%)	20(40%)	25	7.07	0.4NS
	13-15yrs	-	-	40(57%)	20(28%)	10(15%)	23	15.2	
3.	Social								
	10-12yrs	-	-	12(24%)	27(54%)	11(22%)	16.6	8.9	0.05*
	13-15yrs	-	-	35(50%)	27(38%)	8(11%)	30	4.3	
4.	Emotional								
	10-12yrs	-	-	14(28%)	28(56%)	8(16%)	16.6	10.2	0.05*
	13-15yrs	-	-	30(42.8%)	27(38%)	13(18%)	29	1.7	

The results of study showed that younger (10-12 years) and older (13-15 years) children differed significantly in the level of social, emotional and home adjustments. Larger proportion of older children showed average adjustment while younger children showed unsatisfactory adjustment (Table 2). This indicated that younger children had more problems in social, emotional and educational areas compared to older children.

This may be due to the fact that adjustment of children improves with advancing age. Their childhood behavior and emotions are replaced by more matured forms of behaviors and their cognitive abilities such as ability to understand, reason, remember and concentrate also improves with advancing age. The findings are in conformity with the earlier studies made by Sujatha et al. (1993), Hiremani et al. (1994) and Dutta et al. (1998)

Table.3 Influence of duration of stay in institution on adjustment of children

S.no		Excellent	Good	Average	Poor	Very poor	mean	S.D	t-test
1.	Home								
	1-3yrs	-	-	8(14%)	27(49%)	20(36%)	18.8	9.6	0.4NS
	3-5yrs	-	-	35(53%)	17(26%)	13(20%)	21.3	11.7	
2.	Health								
	1-3yrs	-	-	10(18%)	30(54%)	15(27%)	18.3	10.4	0.3NS
	3-5yrs	-	-	25(38%)	25(38%)	15(22%)	21.6	5.7	
3.	Social								
	1-3yrs	-	-	7(12.7%)	15(27%)	33(60%)	21.6	13	0.5NS

	3-5yrs	-	-	28(43%)	22(33%)	15(23%)	21.6	6.5	
4.	Emotional								
	1-3yrs	-	-	12(21%)	22(40%)	21(38%)	18.3	5.5	0.3NS
	3-5yrs	-	-	23(35%)	32(49%)	10(15%)	21	11.6	

The findings of the present study (Table 3) also revealed that duration of stay in the institution had no association with social, emotional, home and health adjustment of Children. This indicates that the level of social, emotional, areas of children was almost same irrespective of their duration of stay in the institution. This may be attributed to the fact that institutionalization is a pathological element for the development of children.

Table.4 Mean differences in adjustment level between experimental group and controlled group after one year of intervention

S.no		Excellent	Good	Average	Poor	Very poor	Mean	S.D	t-test
1.	Home								
	Exper grp	25(41%)	35(58%)	-	-	-	30	7.07	0.05*
	Contr grp	-	5(8%)	25(41%)	25(41%)	5(8%)	12	12.2	
2.	Health								
	Exper grp	20(33%)	40(66.6%)	-	-	-	30	14.1	0.04*
	Contr grp	2(3%)	5(8%)	23(38%)	15(25%)	15(25%)	12	8.4	
3.	Social								
	Exper grp	15(25%)	45(75%)	-	-	-	30	21.2	0.05*
	Contr grp	3(5%)	5(8%)	18(30%)	20(33%)	14(23%)	12.2	7.7	
4.	Emotional								
	Exper grp	25(41%)	35(58%)	-	-	-	30	7.07	0.03*
	Contr grp	-	3(5%)	15(25%)	22(36%)	20(33%)	12	9.9	

From the above table we can find the impact of behavior intervention on inmates of children homes. We can find drastic improvement in levels of adjustment. It was interesting to find that there is significant difference in adjustment levels between the experimental group and controlled group. The mechanical type of care must be replaced with personal concern by the staffs who are in charge of the children particularly the house mothers whom is consider as a substitute parent. Stable, reliable and understanding relationship depends primarily on consistent response to child's feelings which develops foundations of trust, confidence, and sense of security. This develops self identity, self respect, a sense of confidence. The Department of social welfare should pay attention to social, emotional, educational problems of children either by providing special training to in-service teachers or through guidance and counseling services in the institution by the counselor.

References

- [1]. Chaudhary, N. and Bajaj, N., 1995, Emotional maturity and occupational aspirations of adolescents staying at home and orphanage. Indian Psychol. Res. 45:21-26.
- [2]. Chaudhary, N. and Uppal, A., 1996, Achievement motivation and emotional maturity of adolescents staying at home and orphanage. Indian Psychol. Res. 46 :27-32.
- [3]. Dutta, M., Baratta, G. and Gowsami, U., 1998, Social adjustment of adolescents. Indian Psychol. Res. 50 : 90.
- [4]. Hiremani, S. G., 1991, A comparative study on emotional maturity and adjustment of destitute and normal girls. M.H.Sc. Thesis, Uni. Agric.Sci., Dharwad (India).
- [6]. Sujatha, S., Gaonkar, V., Khadi, P. B. and Kataraki, P. A., 1993, Factors influencing adjustment among adolescents. Indian Psychol. Res. 40 :35-40.

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