

. Research Article

## Temperament And Behaviour Problems of Orphan Adolescents

Rajnesh Meena

Research Scholar, Department of Psychology, Mohanlal Sukhadia University, Udaipur"

---

### Abstract:

Purpose of present research was to study the temperament and Behaviour Problems of Orphan Adolescents. The study included a total of 200 school students. The set of variables included Temperament and Behaviour Problems. The two-group design was adopted for the present study. The findings revealed that significant difference was found between institutionalised and non-institutionalised orphan adolescents on temperament as well as behaviour problems.

**Key Words:** Orphan, Adolescent, Temperament, Behaviour Problem.

---

### Introduction:

Adolescence is very vulnerable period which has many phases of development. Adolescence is a phase separate from both early childhood and adulthood. It is a transitional period that requires special attention and protection. He/she realizes that he/she is no longer child but has not become an adult. Many researchers had done enough work on this field in the past but still there is lots of left-over work to discover the answers about some emerging questions like, What does the growing adolescents experience and feel in the different types of living situations? How do he/she cope with the bodily changes as well as psychosocial factors which affects individual personal and social norms? Why does she/he behave the way she/he does? What are some of the psychological characteristics of adolescents? These are some of the questions which are attracts to find out the reliable answers and this is the one objective to take this topic. Another reason is that there is no much more

research work had done in the past on this field and it has been felt that it is required to fostering to welfare activities for orphan adolescents. Adolescents are important part of our population especially; orphan adolescents and they draw attention to study on them. Personality is difficult concept to Understand for one. Everyone their individual personality type. Temperament is the features of our personality that are present at birth to adolescence and it interacts with our surrounded environmental influences to create our personality, so it is very important to understand temperament and find out significant differences between adolescents on that. Temperament and personality type of an individual depicts a lot about his/her nature, good or bad behaviour, liking or disliking, activity level, adaptability, regularity, mood etc. Nowadays in this modern world, adolescents have different kinds of behavioural problems due to cultural and environmental changes that are significantly affecting their temperament and well-being. As well as psychological well-being of adolescents is also Influenced

by their temperament and behaviour controlled in the investigation was the "level of problems. As adolescent girls and boys education of the target groups". It was decided grow, they take on additional to limit the present investigation to the responsibilities, experiment with new ways adolescents of class 9th to 12th only. of doing things and push for independence.

It is a time in which values and skills are developed that have great impact on well-being, because every single orphan adolescent who spend his/her whole life in orphanages is derived from family, they feel loneliness and fear. They are not so optimistic for this life and have negativity towards various aspects of their life. So, it is very important to study deeply temperament, behaviour problems and psychological wellbeing of orphan adolescents. Well-being or happiness of a person significantly affects his level of optimism and these both concepts well-being and optimism affect the resilience of one's. Resilience is able to predict psychological well-being, and optimism plays mediation role in the relationship between resilience and psychological well-being. Psychological well-being is influenced by personal characteristics such as resilience, and the individual's optimism regardless of his/her degree of resilience can to some extent provide for psychological well-being. Measurement of optimism and resilience of orphan adolescents is also very important to study. Optimism about the future may be an incentive for people to overcome their present concerns and work for a better tomorrow.

### **Methodology:**

#### **Variables**

The following variables were used in the present research:

1. Temperament
2. Behaviour problems

### **Research Design:**

Two group design was used to complete the research work. One such variable is the age. As the age increases aggression also increases. It was decided to limit the present investigation by selecting the sample of the age of 13+ to 19 years old. Another extraneous variable

### **Objectives:**

The objectives framed were-

1. To assess temperament among institutionalized (orphan) and non-institutionalized (living with their parents) adolescents.
2. To find out behaviour problems among institutionalized (orphan) and non-institutionalized (living with their parents) adolescents.

### **Hypotheses:**

The following hypotheses were framed in conformity with the purpose of the present study:

1. There would be significant difference on temperament between institutionalized (orphan) and non-institutionalized (living with their parents) adolescents.
2. There would be more behavior problems in institutionalized (orphan) Adolescents.

### **Sample:**

To have homogenous and unbiased sample, the adolescents studying in 9th to 12th standard of Govt. Hindi medium schools of Jaipur district, were selected for this study. Hence the exhaustive list of all the Hindi medium Govt. schools of Jaipur district, was obtained from the authoritative sources. to get proper representation to the population involved in the present investigation with due consideration of the requirements to control over some of the extraneous variable namely age, level of education and socio-economic status as much as possible. The sample consisted of total two hundred (200) subjects. There were, fifty (50) girls and fifty (50) boys from Institutions (orphanages) and fifty (50) girls and fifty (50) boys from non-institutions (living with parents). Their age group was 14 to 19 years.

### **Tools Used:**

1. Dimensions of temperament scale (DTS) by Chaddha and Chandna (1984)
2. Behavioural deviance scale (revised) by Chauhan and Aurora (1989)

**Procedure:**

After the selection of appropriate measuring tools for the research work, visited to the various Govt. schools and orphanages of Jaipur district to selection of relevant sample. After explaining the nature of the study, permission was taken from the principals of each of the selected schools and from the secretaries of the orphanages to administer the questionnaires to the adolescents of 9th to 12th standard. To enhance the willingness and to encourage true responses of the Subjects, an effort was made to impress upon the subjects that cooperation and honesty on their part were essential to reveal a lot of important facts.

**Statistical Analysis**

After the scoring of the entire sample on each test, the raw scores were further put for statistical treatment. For the analysis of obtained data Mean, Median and t-test were used to compare both the groups of adolescents.

**Results and Discussion**

**Hypothesis 1**

**Table 1: Showing difference between Institutionalized (Orphan) and Non-Institutionalized (living with their parents) Adolescents on Temperament**

Variable	N	Mean	SD	t	Level of Significance
Institutionalized (Orphan)	100	112.60	14.65	4.76	0.01
Non-Institutionalized (living with their parents)	100	101.04	13.77		

Mean value of institutionalized (orphan) and non-institutionalized (living with their parents) adolescents on temperament is 112.60 and 101.04 respectively. Standard Deviation of institutionalized (orphan) and non-institutionalized (living with their parents) adolescents on temperament is 14.65 and 13.77 respectively. A significant mean difference was found between institutionalized (orphan) and non-institutionalized (living with their parents) adolescents on temperament with t value of 4.76, that is significant at .01 level. It clearly shows that there is a significant difference on temperament between institutionalized (orphan) and non-institutionalized (living with their parents) adolescents. Thus, the hypothesis that there would be significant difference on temperament between institutionalized (orphan) and non-institutionalized (living with their parents) adolescents is proved here.

**Hypothesis 2**

**Table 4.7: Showing difference between Institutionalized (Orphan) and Non-Institutionalized (living with their parents) Adolescents on Behavioural Deviance**

Variable	N	Mean	SD	t	Level of Significance
Institutionalized (Orphan)	100	122.36	12.15	5.06	0.01
Non-Institutionalized (living with their parents)	100	108.24	11.37		

Mean value of institutionalized (orphan) and non-institutionalized (living with their parents) adolescents on behavioural deviance is 122.36 and 108.24 respectively. Standard Deviation of institutionalized (orphan) and non-institutionalized (living with their parents) adolescents on behavioural deviance is 12.15

and 11.37 respectively. A significant mean difference was found between institutionalized (orphan) and non-institutionalized (living with their parents) adolescents on behavioural deviance with t value of 4.76, that is significant at .01 level. It clearly shows that there is a significant difference on behavioural deviance between institutionalized (orphan) and non-institutionalized (living with their parents) adolescents and institutionalized (orphan) adolescents were scored higher in comparison to the non-institutionalized (living with their parents) adolescents. Thus, the hypothesis that there would be significant difference on behaviour problems between institutionalised and non-institutionalized adolescents is proved here. Scientific studies of the orphan hood began in the 18<sup>th</sup> century and continue to the present day. It was found that children who have undergone family deprivation, have a variety of negative features. According to studies, these children and adolescents develop a number of negative characteristics: slow rate of mental development (Mukhamedrakhimov, 2006), low IQ (Bardyshevskaya & Lebedinsky, 2003), emotional and regulatory disorders (Koltinova, 2013), instable and inadequate self-esteem (Karnaukh, 2006), anxiety and hostility to adults and low sociometric status in the group of peers (Karnaukh, 2006), poor skills of self-control (Chuprova, 2007) and of socially acceptable behavior (Muhamedrahimov et al., 2008), distorted identity and family image (Shubina, 2013; Shulga & Tatarenko, 2013). Psychologists also notice communication disorders and impaired mental function of orphans, attribute neuropsychological origins to their affective deficiency (Tottenham et al., 2011), mark a wide range of mental health disorders (Nelson et al., 2007). Psycho physiological studies run by N. Tottenham et al. (2011) show that traumatic childhood events continue to influence the development of the brain of an adolescent, manifesting themselves in acute depressive episodes (Fetiskin et al., 2002). Debord mentioned that behaviors are learned, and aggression is learned behavior.

Aggression as any intentional behavior that results in physical or mental injury to any person. Aggression in children is a serious problem. The roots of childhood aggression have varied (Debord, 2000). Children act out if they are unable to express frustration. Anger may occur in response to life stressors such as loss of parents or divorce. Some children learn to use physical aggressive behaviours for getting what they want. Childhood aggression symptoms include fights with others, disobedience, destructive, verbal hostility and bullying other children. Children who suffer highly aggressive behavior in childhood may be at highly risk for significant disturbance in adulthood, including criminal behavior, alcohol, drugs abuse, and mental illness (Warner et al., 2000).

### Major Findings

1. There was a significant difference on temperament between institutionalized (orphan) and non-institutionalized (living with their parents) adolescents. Thus, the hypothesis that there would be significant difference on temperament between institutionalized (orphan) and non-institutionalized (living with their parents) adolescents is proved here.
2. There was a significant difference on behavioral deviance between institutionalized (orphan) and non-institutionalized (living with their parents) adolescents and institutionalized (orphan) adolescents were scored higher in comparison to the non-institutionalized (living with their parents) adolescents. Thus, the hypothesis that there would be more behavior problems in institutionalized (orphan) adolescents are proved here.

### Reference:

1. Albano, A. (2002). Social phobia in children and adolescents. *Journal of Cognitive Psychotherapy*, 14, 1-11.

2. Brand, C. and Conner, L. (2004). School refusal: It takes a team. *Children and School*, 26(1), 54-64.
3. Glueck, S. & Glueck, E. (1962). *Family Environment and Delinquency*. Boston: Houghton Mifflin.
4. Gold, M. (1963). *Status forces in Delinquent boys*. Ann Arbor, Michigan: Institute of Social Research.
5. Gough, I., & McGregor, J. (2007). *Wellbeing in developing countries: from theory to research*: Cambridge Univ Pr.
6. Larsen, R. J. and Eid, M. (2008). Ed Diener and the science of subjective well-being, in *The Science of Subjective Well-Being*, eds Eid M., Larsen R. J., editors. (New York, NY: The Guilford Press;), 1–13.
7. Putnam. S. P., Sanson, A. V. and Rothbart, M. K. (2002). Child temperament and parenting. In MH Bornstein (ed). *Handbook of parenting* (2nd ed). New Jersey: Lawrence Erlbaum Associater.
8. Sanson, A., Hemphill, S. and Smart, D. (2002). *Temperament and social development*. In PK Smith & CH Hart (eds). *Handbook of childhood social development*. London: Blackwell.
9. Ugoani, J. N. N. and Ewuzie, M. A. (2013). Imperatives of Emotional Intelligence on Psychological Wellbeing among Adolescents. *American Journal of Applied Psychology*, 1(3), 44-48.
10. Wagnild, G. M., & Young, H. M. (1993). Development and psychometric evaluation of the Resilience Scale. *Journal of Nursing Measurement*, 1, 165-178.
11. Youngblade, L. and Mulvihill, B. (1998). Individual differences in homeless schoolers' social behavior. *Journal of Applied Developmental Psychology*, 19(4), 593-614.