# STUDY OF THE PROBLEMS OF ORPHAN STUDENTS IN KARAIKAL

### DR. MD. ASAAD RAZA

Assistant Professor
Department of Public Administration
Arignar Anna Government Arts and Science College
Karaikal - 609605 (Puducherry) **INDIA** 

### **ABSTRACT**

Historically, an orphanage is a residential institution, or group home, devoted to the care of orphans and other children who were separated from their biological families. Examples of what would cause a child to be placed in orphanages are when the parents were deceased, the biological family was abusive to the child, there was substance abuse or mental illness in the biological home that was detrimental to the child, or the parents had to leave to work elsewhere and were unable or unwilling to take the child. Though India has a large number of orphans only few are lucky to get a family through adoption. Most of the couples prefer to have their child through surrogacy. In the last two years Orphaned children faced traumatic condition during the pandemic when many children saw their parents die in front of their own eyes. In this article an effort is made to know the real problems of the orphans of Karaikal. Researcher has tried to find the ways to protect children from further exploitation.

Keywords: Orphan, Half Orphan, Abandoned Child, Orphanage, Care Taker, Paternal Orphan

### INTRODUCTION

An 'orphan' is defined as a child under the age of eighteen who has lost one or both parents. A 'maternal orphan' is a child whose mother has died, and a 'paternal orphan' is one whose father is dead. A 'double orphan' is a child who has lost both parents. <sup>1</sup>

India is home to 2.5 million orphans and 1.3 million Children have been orphaned due to AIDS/HIV. More orphans suffer a host of physical, sociological and psychological problems

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including lack of nutrition, education, and abuse. According to United Nations Children's Fund (UNICEF), India has 29.6 million orphaned and abandoned children since 2018. This is more than the population of Sri Lanka. Only a fraction of these children is ending with a family due to low adoption rates in India. 3

There's a child, born to parents who have been poor for generations, not allowed to educate themselves or their children, ostracised from main society for centuries. There's another child, born to some parents, but left with none, thrown in a dumpster, or left in a park, to die or to survive on its own, no idea where to get food from, or even how to get food, nowhere to go, and no one to love him/her.

It would be natural to think that both these children deserve sympathy and affirmative action in some form, if only from the voice of conscience that resides deep within us. That conscience speaks to the Government to take care of the destinies of these siblings in distress.<sup>4</sup>

Many orphans are actually not 'orphans' in the literal sense – they simply have been put into foster care by families who find it hard to take care of them. Often, it is due to an absent or negligent father, and a working mother and a mother who must work and doesn't have the time to provide care. These parents consider an orphanage's care infrastructure to be better than their own home and care. This is because they are unaware of the true conditions of a children's orphanage.<sup>5</sup>

### **OBJECTIVES OF THE ORPHANAGE**

The main objective of the orphanage is to create a positive loving environment in which the often abandoned and neglected children feel at home and cared for, as a basis for social and professional development. In addition, all children are significantly behind their age groups with respect to schooling and education. Today's residential institutions for children, also described as congregate care, include group homes, residential child care communities, children's homes, refuges, rehabilitation centers, night shelters, and youth treatment centers.

### **OBJECTIVES OF THE STUDY**

- To study the psychological aspects of the orphanage children.
- There is a genuine attempt to give values in life that are precious and special.
- ➤ To identify the problem faced by the orphanage children.
- > To protect children from further exploitation.
- To study the impact of behavioral and emotional problem on the childs' life.

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> They have a lack of resources to meet their basic needs of food, shelter, Education and health care.

### RESEARCH METHODOLOGY

AREA OF STUDY

### NAVAKIRAGAORPHANAGE CARE HOME

Navakiraga orphanage care home is run by the Nocome Trust, a non-profit charitable organization, established on 7.02.2005 registered under the Indian Trust Act. Navakiraga orphanage care home has been providing shelter, food education and medical care to 70 orphaned children. Their aim is to provide a safe environment where these children and others have access to their basic rights - of protection, education, healthcare and a happy childhood and a happy life. They admit street children, just kids, sexually abused kids into our home. They got proper medical care from the visiting doctors. They have auspicious prayer hall. The children come together every morning and evening to find solace inprayer.<sup>5</sup>

### **PILOT STUDY**

It is the prime duty of the researcher to conduct a pilot study to determine the feasibility or applicability of the study. The researcher visited the orphanage in Karaikal and met the head of the orphanage to get some base line idea about the orphanage children life style. The visit was very useful in determining the applicability and feasibility of the study.

### RESEARCHDESIGN

Research design is always considered as the blue print of research. The researcher has selected descriptive type of design for the research. The descriptive design would describe in detail the total life style of the orphanage children.

### UNIVERSE AND SAMPLING

The total capacity of the orphanage children is 70 in mates. The total universe of 70 inmates includes both minor and major children.

### TOOL OF DATA COLLECTION

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Interview schedule is the tool adopted for data collection. The reason is because most of the in mates are minors and moreover, questions method would delay the process of data collection.

### ACTUAL DATA COLLECTION

Actual data collection was done by 18th February 2021 to 16th March 2021.

### ANALYSIS AND INTERPRETATION

**TABLE -1**TABLE SHOWING THE SEX OF THE RESPONDENTS

CI NO	CEV	NO. OF	% OF
SI. NO	SEX	RESPONDENTS	THE RESPONDENT
01	MALE	27	38.57
02	FEMALE	43	61.43
	TOTAL	70	100

The above table clearly explains about the sex of the respondents. Majority of the respondents are female 43 and only 27 of them belongs to the male category.

**TABLE - 2**TABLE SHOWING THE EDUCATION QUALIFICATION OF THE RESPONDENTS

SI. NO.	EDUCATION	NO. OF THE	% OF THE
	QUALIFICATION	RESPONDENTS	RESPONDENTS
01.	Primary level	27	38.57
02.	Secondary level	33	47.14
03.	Higher secondary	10	14.29
	TOTAL	70	100

The above table describes the educational level. The majority of the respondents studied up to secondary level, 27 respondents studied up to primary level and 10 of the respondents have studied up to higher secondary level

**TABLE - 3** 

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TABLE SHOWING THE FREQUENCY OF PHYSICIAN'S VISIT

SI. NO	FREQUENCY	OF	NO.	OF	%	OF	THE
	VISIT		RESPONDENT		RESI	PONDE	ENT
01	Always		40		57.14		
02	Sometimes		24		34.29		
03	Rarely		06		85.71		
	TOTAL		70		100		

The above the table denotes the visit of physician to the orphanage. Most 40 respondents said that they always visit the home but 24 of them told that only sometimes while 6 of the told that they are visit are rare.

**TABLE - 4**TABLE SHOWING THE REAONS FOR JOINING HOME

ST NO	DEACONG	NO. OF	% OF THE
SI.NO	REASONS	RESPONDENTS	RESPONDENTS
01	Food, clothing, and	20	28.57
02	Love and affection	10	14.29
03	Security	40	57.14
	TOTAL	70	100

➤ By analyzing the above table majority 57.14 % of the respondents joined this home for security purpose, 14.29 % of them replied that for love and affection while 28.57 % of them told that for food clothing and shelter.

**TABLE - 5**TABLE SHOWING THE WILLINGNESS TO GO BACK TO THEIR FAMILY

SI. NO	WILLINGNESS	NO. OF THE	% OF THE
51.110		RESPONDENTS	RESPONDENTS
01	Yes	18	25.72
02	No	19	27.14
03	Do not have any family	33	47.14
	TOTAL	70	100

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Majority 33 of them are not willing to go back to home, only 18 of them are willing to go back to their family and 19 of them are not having any family.

TABLE - 6 TABLE SHOWING ABOUT THE PARENTS

SI.NO	PARENTS	NO.	OF WOF THE
SI.NO	FARENIS	RESPONDENTS	RESPONDENTS
01	YES	21	30.00
02	NO	49	70.00
	TOTAL	70	100

> By analyzing the above table majority 49 of the respondents have no parents while 21 of them told that they have parents.

**TABLE - 7** TABLE SHOWING THE STRESS AND STRAINS

SI.NO	EXLENT OF STRE	NO. OF THE	% OF THE
	AND STRAIN	RESPONDENTS	RESPONDENTS
01	To a great extent	20	28.57
02	To some extent	24	34.29
03	Not at all	26	37.14
	TOTAL	70	100

- The above table clearly about the extends of stress and strain of the respondents 20 of the respondents have stress and strain at great extend 24 of them have stress and strain at some extend.
- > But 26 of them have no stress and strain.

**TABLE - 8** TABLE SHOWING THE HEALTH PROBLEMS

SI. NO	HEALTH	NO. OF THE	% OF THE
S1. NO	PROBLEMS	RESPONDENTS	RESPONDENTS
01	Yes	32	45.71
02	No	38	54.29
	TOTAL	70	100

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- Majority 38 of them not affected by any health problems.
- > 32 of them affected by the health problems.

**TABLE - 9**TABLE SHOWING THE PSYCHOLOGICAL STATE

SI.NO	STATE OF MIND	NO. OF THE RESPONDENTS	% OF THE RESPONDENTS
01	DEPRESED	8	11.43
02	ENTHUSIATIC	52	74.29
03	A BALANCE OF	10	14.29
	TOTAL	70	100

Nearly 52 of the respondents are enthusiastic, 8 of the respondents are depressed. Only 10 of the respondents are both enthusiastic and depressed.

**TABLE - 10**TABLE SHOWING ABOUT THE QUALITY OF SERVICE

SI.NO	SERVICE	NO. OF THE RESPONDENTS	% OF THE RESPONDENTS
01	GOOD	46	65.71
02	SATISFACTORY	24	34.29
	TOTAL	70	100

Majority 46 of the respondents said that the quality of service is good while 24 of the respondents said the quality of service is satisfactory.

**TABLE - 11**TABLE SHOWING THE FACTOR INFLUENCING RESPONDENTS MIND

SI.NO	FACTORS	NO. OF THE RESPONDENTS	% OF THE RESPONDENTS
01	Thought of family	19	27.14
02	Being an inmate	21	30.00
03	Loneliness	15	21.43
04	Other problems	15	21.43

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Most 19 of the respondents are influenced by thought of family, 21 of them are influenced by being an inmate 15 of them are influenced by other problems and 15 of them are influenced by loneliness.

TABLE -12
TABLE SHOWING THE BEHAVIOURAL CHANGE AFTER JOINING HOME

SI.NO	OPINION	NO. OF THE RESPONDENTS	%OF THE RESPONDENTS
01	YES	58	82.86
02	NO	12	17.14
	TOTAL	70	100

Majority 58 of the respondents' behavior was changed after joining the home while 12 of the respondents' behavior was not changed after joining the home.

**TABLE - 13**TABLE SHOWING ABOUT THE CARE NEEDED FOR THEIR LIFE

SI.NO	PERSON	NO. OF THE RESPONDENTS	%OF THE RESPONDENTS
01	FAMILY CARE	38	54.29
02	INSTITUTIONAL	22	31.43
02	ВОТН	10	14.29
	TOTAL	70	100

Nearly 38 of the respondents responded that their care is to improve through family, 22 of them told that their care is to improve by institution and 10 of them told their care is to be improved by family and institution.

**TABLE - 14**TABLE SHOWING ABOUT RAPPORT WITH THE CO-INMATES

SI. OF	QUALITY (	OF	NO. OF	THE	% OF THE
	RAPPORT		RESPONDENTS		RESPONDENTS
01	GOOD		49		70.00
02	SATISFACTORY		11		15.71
03	POOR		10		14.29
	TOTAL		70		100

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Nearly 49 of the respondents are having good rapport with co-inmates, 11 of them are having satisfactory and 10 of them told that they are not having good rapport with co-intimates.

TABLE -15
TABLE SHOWING CONTACT WITH THEIR RELATIVES

SI. NO	CONTACT	WITH	NO.	OF	THE	% OF THE
	YOUR RELAT	IVES	RESPO	ONDENT	ΓS	RESPONDENTS
01	YES		31			44.29
02	NO		39			55.71
	TOTAL		70			100

Nearly 39 respondents are not having contact with your relatives while 31 of them are having contact with our relatives.

**TABLE - 16**TABLE SHOWING ABOUT THEIR PARENTS

SI.NO	REMEMBER YOUR	NO.OF	% OF THE
	PARENTS	RESPONDENTS	RESPONDENTS
01	YES	33	47.14
02	NO	37	52.86
	TOTAL	70	100

From the above table majority 37 of the respondents don't remember their parents and 33 of the respondents are remember your parents.

**TABLE - 17**TABLE SHOWING ABOUT SIBLING

SI.NO	SIBLING	NO. OF THE RESPONDENTS	%OF THE RESPONDENTS
01	YES	32	45.71
02	NO	38	54.29
	TOTAL	70	100

From the above the majority 38 said that they have no siblings while 32 of the respondents have siblings.

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TABLE - 18
TABLE SHOWING ABOUT WHO BROUGHT YOU IN THE ORPHAN HOME

SI. NO	BROUGHT YOU IN	NO. OF THE	% OF THE
SI. NO	THE ORPHANGE	RESPONDENTS	RESPONDENTS
01	RELATIVES	27	38.58
02	DON'T KNOW	18	25.71
03	UNKNOW PERSON	25	35.71
	TOTAL	70	100

In the above table majority 27 of the respondents are brought by relatives in the orphanage home, 18 of the respondents don't know who brought them in the orphanage and remaining 25 of them are brought by unknown persons in the orphanage.

**TABLE - 19**TABLE SHOWING IF THEY WERE ABANDONED

SI.NO	ABANDONED AGE	NO. OF THE	
		RESPONDENTS	RESPONDENTS
01	FROM BRITH	18	25.71
02	1-5	15	21.43
03	6-10	22	31.43
04	ABOVE 11	15	21.43
	TOTAL	70	100

The above table indicates that 18 of the respondents are abandoned since birth, 15 of the respondents' abandoned age is 1-5 while 22 of the respondents' abandoned age is 6-10 and 15 of the respondents' abandoned age is above 11.

#### **FINDINGS**

- More than half of the inmates' age is around 21 years.
- ➤ 61.43 % of the respondents are female.
- > 38.57 % of the respondents are male.
- > 57.14 % of the respondents expressed that physician visits always.
- > 57.14 % of the respondents are security purpose for joining home.
- ➤ 47.14 % of the respondents don't have any family.
- > 28.57 % of the respondents have stress and strain at great extent.
- ➤ 45.71 % of the respondents are affected by the health problem.

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- > 74.29 % of the respondent are enthusiastic.
- ➤ 65.71 % of the respondent are responded that the quality service good.
- > 82.86 % of the respondent behavior was changed after joining home.
- > 27.14 % of the respondent are not willing to go back to their home.
- ➤ 25.72 % of the respondents are willing to go back to their family.
- > Cent percentage of the respondent have various health problem.
- More than 38 % of the respondents are satisfied at high level.
- > 34.29 % of them respondents that the quality of service is satisfactory.
- ➤ 45.71 % of the respondent are affected by the health problem.
- ➤ 11.43 % of the respondent are depressed
- ➤ 54.29 % of the respondents are not affected by any health problem.
- > 34.29 % of the respondents have stress and strain at some extend.
- ➤ 28.57 % of the respondents joined home for food, clothing, and shelter.
- > 27.14 % of the respondent are influenced by thoughts of family.
- ➤ 21.43 % of the respondents are influenced by loneliness.
- ➤ 42.84 % of the respondents are influenced being an inmate.
- ➤ 14.29 % of the respondents have the reason for joining home for love and affection.
- ➤ 22 % of the respondents said that their care is to be improved by institution.
- > 92.85 % of the respondents are opined that the food provided by the home is good.
- > 54.29 % of the respondents said that their care is to be improved by the family.
- > 78.57 % of the respondents are not having a care taker.
- > 52.86 % of the respondents don't remember their parents.
- ➤ 45.71 % of the respondents they have siblings.
- ➤ 38.58 % of the respondents are brought by relatives in the orphanage.
- > 54.29 % of the respondents they have no siblings.
- ➤ 25.71 % of the respondents abandoned from his/her birth.
- ➤ 45.71 % of the respondents have relative.
- > 35.71 % of the respondents are brought in orphanage by unknown person.

### **CONCLUSION**

The research problem on the lifestyle of orphanage children with special reference to Karaikal was undertaken with certain specific objects. An extensive survey of literature was made to get a better orientation on the lifestyle of orphanage children. After reviewing the available literature, the interview schedule was prepared with utmost care. The research design adopter for the study is descriptive cum diagnostic design. The sampling technique adopted is census study. The data was collected through the interview schedule. Then the collected data were carefully analyzed through different methods and application of statistical tool was made.

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Genuine and valuable finding have been made which give a clear picture about the life of orphanage children and what far they joined home and also expresses their feeling. As we all know the charity begins at home in the same way each and every child should be taken care of by each and every home or family. Since change is the very slow and steady process, a better chance is waiting for a better tomorrow.

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