



## The Study of Self Esteem and Psychological Distress among Orphan Adolescents

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### Abstract

**Background:** Healthy families affect children's life. Parents' role in character formation is undisputed. Some children lose compassionate, understanding parental care due to the sudden loss of one or both parents. These are orphans. Orphans are children without parents. "Orphan" mean children too young to support themselves. Self-esteem includes ideas and feelings like "I am loved and deserving," "victory," "despair," "pride," and "humiliation." If they don't get psychiatric help, orphaned children and teens are more likely to develop depression, anxiety, tension, and low self-esteem.

**Result:** the result of this study revealed that orphan adolescents had high self esteem then non orphan adolescents and high psychological distress the non-orphan adolescents.

**Conclusion:** The primary psychological issue affecting orphan children that requires serious consideration is emotional discomfort. Self-esteem is the sentiment of contentment with one's personality and skills. Great inner harmony that is based on self-acceptance and a reassuring, soothing perspective of oneself may be considered as evidence of it. Self-confidence, which is largely concerned with what you feel you can do, is significantly different from this. A person's self-esteem may be described as their thoughts about themselves, either positively or negatively. It is an essential tool for people to control stress, protect their health, and improve work satisfaction.

**Recommendations:** Adolescent orphans should receive psychosocial counselling to enhance their psychological well-being and capacity for adaptation.

**Keywords:** Adolescents, self-esteem, psychological distress, orphanages.

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### 1. Introduction

Orphans are children who are too young to care for themselves as referred by Ameachi, A.(2008).[1] A child who has lost one or both parents and is under the age of 18 is referred to as an orphan describe by (George, 2011).[10] According to (Dillon, 2008), Paternal orphans are children who have lost both parents, whereas maternal orphans are children who have lost both parents. People who lost both of their parents are referred to as double orphans. Social orphans, for example, are children who have been abandoned or whose parents have given up on them because of poverty, intoxication, or jail.[2,3] The conviction in one's own abilities or

worth is known as self-esteem. Self-esteem includes thoughts about oneself as referred to Atilola, O. (2017) (as I am loved and deserved) as well as emotions of triumph, despair, pride, and shame. [4]

According to (2007) Smith and Mackie, The way we feel about ourselves, or how we see ourselves, is referred to as self-esteem. Our self-concept is how we see ourselves. Self-esteem is a person's opinion of who they are and how effectively they carry out crucial duties. Children's internal thoughts and emotions have an impact on their sense of self.[5] The greatest levels of self-esteem are experienced by persons who believe they are very near to their "ideal" selves, or the people they desire to be. Children who feel good about themselves find it easier to solve problems, resist peer pressure, and establish friends.[6] They are livelier and more lively, and they often have an upbeat outlook on life. One study found that when family cohesiveness increased, teenagers' self-esteem steadily increased by (Baldwin & Hoffman, 2002).[7] Most orphan research focuses on the most basic requirements. Despite the dearth of literature on the subject, concern about the psychological wellbeing and self-esteem of orphans in Africa is rising (Cluver and Gardner, 2006). Adolescents raised by a single parent who have bad health, a feeling of loneliness, and reduced self-esteem studied by (Khoynezhad, Rajaei, & Mohebean-Raad, 2008). The research contrasted the self-esteem of children who had parents against those who were orphaned. Self-esteem is the feeling of satisfaction with one's character and abilities. It may be seen in a great inner harmony that is built on self-acceptance and a supportive, comforting view of oneself. This is quite distinct from self-confidence, which is basically dependent on what you believe you are capable of by (Ameachi, 2008s).[8] Psychological discomfort: Psychological discomfort is the unpleasant feelings or thoughts that you could have while you're feeling overpowered. These feelings and emotions may obstruct your daily activities and affect how you relate to others around you.[9] Psychological pain is often described as an emotional state of suffering with feelings of worry and despair (Mirowsky J, Ross CE, 2003). A lost year of "healthy" life, or 7.4% of worldwide disability-adjusted life years, is attributed to mental and behavioural problems, according to estimates from the World Health Organisation from 2012 studied by (Murray et al., 2012). [10]

## **2. Review of Literature**

Maslow and Boeree (2006), in his hierarchy of criteria, self-esteem. He provided an upper and lower explanation of the standards of regard. The need for regard for oneself is the highest form of esteem demand, which includes emotions of self-assurance, mastery, independence, competence, success, and freedom. This is because, unlike other people's respect, self-respect is far more difficult to lose once you have it. The want for respect from other people, together with the desires for fame, notoriety, admiration, dignity, glory, and even dominance, is the less significant one. There will be a gap in the field of protection if any parent passes away in certain situations with no other suitable care systems in place. Many attempts have been made to categorise the behavioural and emotional disorders that affect children, but it has come to light that there are multiple axes and directions to these classifications. By classifying behavioural disorders in two categories—external and internal behavioural disorders—the first of which encompasses hyperactivity and attention deficit disorder—they advocated for behavioural and emotional disruption among children living in orphanages from the perspective of their guardians, (2000) Bazh A. A.

Nevertheless, Juffer, Marinus, and Ijzendoorn (2007), discovered that without parents children had poorer self-esteem than their classmates who are not orphans. It is thought that orphan kids are more likely to have low self-esteem.

Tulivste (2010), claims that institutionalization has a deleterious influence on children's development and functioning, which has a negative impact on measures of resilience components. In research on resilience in 50 orphans and 50 non-orphans, Orphan children had greater resilience than non-orphan children, according to Katyal, S. (2015), who also discovered a significant difference in the resilience of orphan and non-orphan children. Psychological discomfort is linked to a confluence of risk factors, which may be characterized using ecological frameworks like the Social Ecological Model, according to (Atilola, 2017; Cortina et al., 2012).

According to Avni Mishra (2022), Teenagers' resilience and self-esteem are probably influenced by a range of environmental, internal, and external factors in both orphaned and non-orphaned adolescents. The recommendations are followed by a few restrictions that are also found in the study that comes next.

### **3. Objectives**

- To distinguish between psychological distress and self-esteem among teenagers who are orphans.
- To investigate the connection between low self-esteem and psychological suffering among teenage orphans.

### **4. Hypotheses**

With the major tendencies in past research in mind, the following hypotheses are framed:

- **H-1)** There will be significant variations between Self Esteem and Psychological distress among orphan adolescents.
- **H-2)** There will be negative correlation between self esteem and psychological distress among orphan adolescents.

### **5. Material and Methods**

#### **Sample**

The random sample comprised of 30 adolescents belonging to the age range of 13 to 18 years, (15 male and 15 female) of Shimla district of Himachal Pradesh was selected. The orphan adolescents had been drawn from various Child Care Institute (Shimla) run by Women and Child Development Department of Himachal Pradesh.

### **6. Tools**

#### **Self Esteem Inventory**

Self-esteem inventory: Prasad and Thakur's Self-Esteem Inventory (SEI), developed in 1988, was used to gauge each participant's level of self-esteem. The questionnaire, which is a self-evaluation questionnaire, has two components. This inventory's reliability is 0.82 for the personally regarded self and 0.78 for the socially viewed self, respectively. Both tests' re-test reliabilities were determined to be 0.69 and 0.66, respectively.

#### **The Kessler psychological distress scale:**

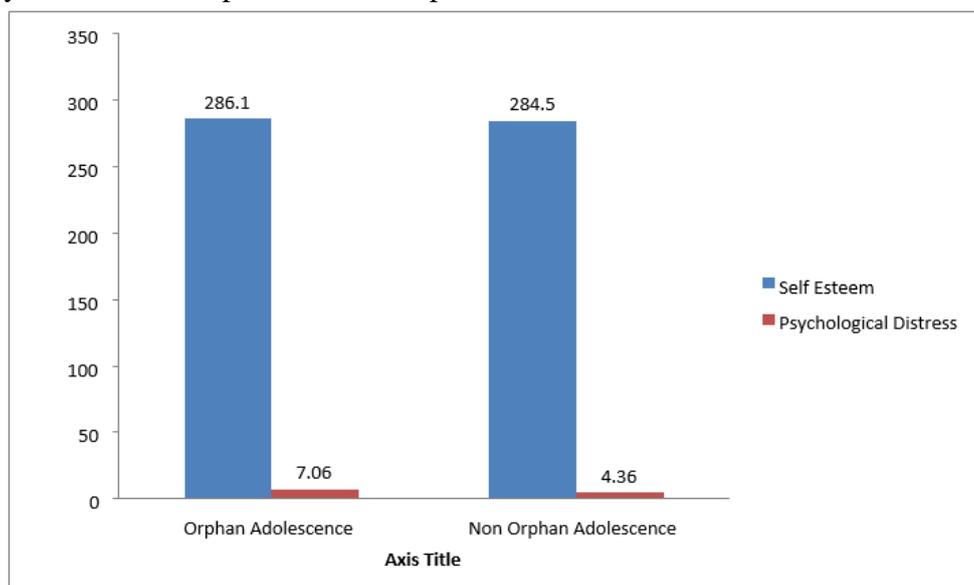
The Kessler Psychological Distress Scale (K10) is a 10-item survey is intended to assess depression and anxiety. Each question has a five-level answer scale and is related to an emotional state The K10 is a reasonably trustworthy instrument, according to the concluding kappa and weighted kappa values, which ranged from 0.42 to 0.74. The K10 is a quick, easy, and reliable tool to identify mental health conditions in the population, despite the need for additional research on the clinical cut-off times and the scoring to determine psychological distress.

**Data Analysis**

Mean, SD, T test and correlation have been utilised in this study's goal-achieving.

**7. Result**

The study involved a sample size of 30 orphan adolescents and 30 non-adolescents.



**Table-1:-** T- test conducted to compare the mean scores of self-esteem and psychological distress between the two groups.

Variables	N	Orphan adolescents	Non adolescents	T value
Self esteem	30	M- 286.100 SD-52.76	M-284.5 SD-88.24	<b>0.85</b>
Psychological distress	<b>30</b>	M- 7.066 SD-2.754	M-4.366 SD-1.809	<b>4.488</b>

Table-1 shows the results of the T-test conducted to compare the mean scores of self-esteem and psychological distress between the two groups. The mean score of self-esteem among orphan adolescents was 286.100 (SD=52.76), while non-adolescents scored 284.5 (SD=88.24). The T-value was 0.85, indicating no significant difference in self-esteem between the two groups. However, for psychological distress, the mean score among orphan adolescents was 7.066 (SD=2.754), and among non-adolescents, it was 4.366 (SD=1.809). The T-value was 4.488, indicating a significant difference in psychological distress between the two groups.

**TABLE-2:** Correlations between self-esteem and psychological distress for both groups.

	Self esteem	Psychological distress

Self esteem Pearson Correlation	1	.149
Sig (2 tailed) N	30	.432 30
Psychological distress Pearson Correlation	.149	1
Sig (2 tailed) N	.432 30	30

Table-2 presents the correlations between self-esteem and psychological distress for both groups. The Pearson correlation coefficient between self-esteem and psychological distress was 0.149 for orphan adolescents and 0.149 for non-adolescents, indicating a weak positive correlation between the two variables in both groups.

### 8. Discussion

This research sought to clarify the association between self-esteem and psychological distress in orphaned teenagers as well as the distinction between the two. As a consequence of receiving different counselling skills and training, orphan adolescents may have better self-esteem than non-orphan adolescents.[11] This may be because they feel loved and cared for, which gives them hope and drive. They do better in class or in other areas of their life as a result. Emmanuel (2014) provided support for the research by examining the relationship between basic education students' motivation, self-concept, and academic achievement.[12] Results revealed a significant relationship between self-concept and academic achievement, as well as a higher prevalence of psychological suffering among orphans than non-orphan children, possibly due to the environment of orphanages, which can foster feelings of distrust and insecurity as well as the potential for neglect, abuse, and exploitation.[13] The findings supported the prediction that, among teenagers who are orphans, there would be a substantial difference between self-esteem and psychological distress. One of the potential reasons for this is that resilient orphan adolescents who grow up in supportive, stimulating, and fulfilling environments are more likely to promote long-term sustainable development.[14] In part because of the close bonds and social relationships they develop with their classmates in orphanages, teenagers who are orphaned are also more resilient than their peers who are not orphaned. Due to the many obstacles they have encountered so far in life, they have formed resilient habits. Teenagers without orphan backgrounds often had more stable upbringings with parents who would stand up for them in challenging circumstances.[15] As a result, they are less strong than orphans. Data from a research by Sobana (2018), Katyal (2015), Govender, Reardon, Quinlan, and Geong (2014), Musisi, Kinyanda E, Nakasujja, and Nakigudde, among others, show that orphans are more resilient than non-orphans.[16]

### 9. Conclusion

This research found orphan youngsters suffer more psychological distress than non-orphan youngsters. Most of the researched children enter the facility by their relatives. These outcomes may be because children are left in orphanages when their parents die and their family can't afford or don't want to care for them. Hakeem et al. (2018) found that families admitted almost two thirds of orphan children to the hostel. Also common hostel placement reasons. About half of orphans lost their parents. Orphan children suffer from severe emotional turmoil. Self-esteem is self-satisfaction. Self-acceptance and a loving, comfortable

picture of you create inner peace. Self-confidence focuses on what you can do. Self-esteem may be positive or bad. Stress management, health, and work happiness depend on it. Orphan status did not increase suicide or mental distress risk in vicariate or adjusted models. Orphans have worse mental health outcomes (Atwine et al., 2005; Doku, 2009; Lata & Verma, 2013; Makame, 2002; Musisi, 2007; Nyamukapa, 2008; Ruiz-Casares, 2009), but the correlation between them and depression is not always found (Carbonaro, 2019).

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