



Depression, Anxiety and Stress among Covid - 19 Orphaned Children in an Uncertain World

Dr. J.O. Jeryda Gnanajane Eljo, Associate Professor & ICSSR Project Director, RUSSA Project, Principal Investigator,

Dept. of Social Work, Bharathidasan University, jerydaanand@bdu.ac.in,

Mob: 9443922703

Priya Antony P, Research Scholar, Dept. of Social Work,

Bharathidasan University, priya.antony029@gmail.com,

Mob: 8606344403

Abstract: The whole world has been infected by the COVID-19 pandemic and this infection has laid lots of aftermath even to this day. It has affected all ages of human being. Children is also a victim of COVID-19 pandemic physically and psychologically. This is a research paper based by primary data from 60 Covid 19 orphaned children from the Tamil Nadu district of Pudukkottai. It describes about how depression, anxiety, and stress affect the mental health of COVID 19 orphaned children. The COVID 19 orphaned children with mental health problems will have a residue even when they become an adult. Hence the findings of the research paper will be an eye opener for the society to address the mental health problems like depression, Anxiety and Stress encountered by the COVID 19 orphaned children.

Keywords : Depression, Anxiety, Stress, Pandemic Period, Covid -19 orphaned children

JEL Classification Code : I

1. Introduction

Child and adolescent mental health are a global public health issue, especially in developing nations like India. About 40% of our population—300 million—are children and teens. The COVID-19 pandemic has reached all areas of the population, and it is anticipated to endure a while. Mental health issues cause 16% of disease and injury among 10–19-year-olds. Covid-19 children who lost their parents have the possibility of mental health issues. Experts believe that Covid-19 will increase mental health issues in children. Stigma is a major reason for the treatment gap in developing countries like India. This primary data-based study report used 60 Covid-19 orphaned children from one of the districts of Tamil Nadu. This research covers depression, anxiety, and stress among COVID 19 orphaned children.

1.1 Signs of the Childhood Depression

All children experience sadness and hopelessness. Some kids feel powerless, hopeless, or depressed. This prolonged melancholy and hopelessness may indicate childhood depression.

Parents or carers mourning due to covid and unexpected orphanhood may raise the likelihood of protracted unhappiness and hopelessness. Depression causes youngsters to feel sad, hopeless, irritated, unable to enjoy anything, worthless, useless, and guilty. Eating, sleeping, and energy levels may vary. A child's changing energy may cause tiredness or agitation. Some kids may self-harm. Some kids don't display grief or express hopelessness. Depression can cause a youngster to be unmotivated or unruly, which others may mistake for rebellion or laziness.

1.2 Signs of the Childhood Anxiety

Anxiety can make kids think things are worse than they are and discourage them from enjoying life. Parents and others must reassure anxious kids. Child anxiety is physical and emotional. Physical symptoms include shortness of breath, headaches, feeling faint, racing heart, increased blood pressure, uneasiness, trembling or leg weakness, stomach upset, difficulty sleeping, low appetite, dry mouth, and excessive perspiration or feeling hot. Emotional signs include difficulty focusing, panic, apprehension, overload, out of control, tiredness, and anger. Children have numerous anxiety types. General anxiety, separation anxiety, phobias, social anxiety, and panic disorder are possible. General anxiety is extreme worry about the future and prospective problems. Separation anxiety is being highly scared when apart from your parents. Dogs, bugs, and doctors are phobias. Social anxiety makes people fearful of school and other people. Panic disorder is described by recurrent attacks of abrupt, unexpected, acute terror, followed by symptoms like racing heart, difficulty breathing, dizziness, shivering, or heat. Covid 19 orphans have numerous chances to overcome childhood fear.

1.3 Signs of Stress in Children

Any child's parent's death is traumatic. Both good and unpleasant events can stress kids. This includes parent death, domestic violence, school issues, and more. Meeting new people and making friends at an orphanage can be difficult. Stress in children can cause irritability, anger outbursts, withdrawal from family and friends, neglecting responsibilities, difficulty concentrating, feeling sad and crying, shallow breathing, sweating, a racing heart, headaches, dizziness, trouble sleeping, nausea, indigestion, weight gain or loss, eating issues, aches and pains, and getting sick more often.

2. Review of Literature

Kaur & Vinnakota (2018) studied about Covid orphan's problems. Among children Orphans by COVID-19 predominated by conduct problems (34.90 percent), followed by peer problems (15.80 percent), emotional problems (14.70 percent), hyperactivity (8.60 percent), and poor prosocial behaviour (3.40 percent). **Zhongren Ma et al. (2021)** found that 7.2% of youngsters with PTSD and depression in the context of Covid-19 induced PTSD and sadness in Chinese 7–15-year-olds. **Anuja S Panicker & Chandana Nedungottil (2021)** found that resolving role uncertainty and identity ambivalence between 12 and 19 years old prepares adolescents for self-acceptance and social adjustment in adulthood. **Priyadarshini & Rathnasabapathy (2021)** noted that children who have experienced the loss of one or both parents due to the epidemic are undoubtedly particularly vulnerable. Concerns about the wellbeing and financial security of their loved ones can have an emotional impact on

children. **Vjayanthi & Debanjan Banerjee et.al (2020)**, in their study on the Silent victims of the Pandemic: Children and adolescents during the Covid-19 Crisis, the children from the disadvantaged or marginalized sector of the society like migrants, slum-dwellers, homeless children, orphans, children diagnosed with mental illness, disabilities, children living in institutional or residential care are at a greater risk of succumbing to mental health consequences. **Shweta Singh et al. (2020)** evaluated the mental health effects of Covid-19 and lockout on children and adolescents. This paper showed the need for longitudinal and developmental studies and evidence-based elaborative plans to meet the psychosocial and mental health needs of vulnerable children and adolescents during and after pandemics. **Dalton, Rapa, & Stein (2020)** found that Children were affected by the coronavirus disease (COVID-19) pandemic in a variety of psychological, emotional, physical, social, and cultural ways. **Jacob et al. (2020)** pointed that Such youngsters frequently experience anxiety, depression, sleeplessness, and loss of appetite. Additionally, isolation, traumatic bereavement, and quarantine can all contribute to post traumatic stress disorder.

3.Statement of the Problem

The research paper aims to describes the magnitude of the covid 19 orphaned children and their mental health problems. According to The Lancet (2021), globally 1.5 million children lost a parent or caregiver to COVID-19 pandemic. According to the National Council for Protection of Child Rights 2020 gave a report to supreme court that 9,346 children in India under the age of 17years became orphaned due to covid19 pandemic. UNICEF reports that stigma and cultural barriers prevent South Asian youngsters from discussing mental health and their mental health needs which are unmet. Even though India's public health system is modernized mental health issues is still underserved. Depression, anxiety, and stress among covid-19 orphaned children are rarely studied in India. The post-operational management of Covid 19 is questionable. This study examines depression, anxiety, and stress among COVID-19 orphaned children.

4.Need of the Study

Covid 19 orphans will experience a plethora of negative outcomes, such as being relocated, having to reunite with family members, being institutionalized, being married off at a young age, failing to complete school, going hungry, etc. All of these situations constitute a mental health emergency for orphaned children. Long-term strategies are needed to address issues of mental health and stress. There is just a limited amount of research available at the worldwide stage. Future planning and policy making will benefit from research conducted in India on this topic.

5.Objective of the Study

The objective of this research paper is to find out the level of depression, anxiety, and stress experienced by Covid 19 orphaned children in Pudukkottai District.

6. Hypothesis of Study

H1: There is a significant difference between gender and depression, anxiety, and stress among Covid 19 orphaned children.

7. Research Methodology

This paper adopts descriptive research design

7.1 Sample Selection

The study included 236 Covid 19 orphans in the Pudukkottai district as per the data from the Pudukkottai District Child Protection Office. The research team used convenient sample technique to gather information from 60 Covid 19 orphans living in the Pudukkottai district of Tamil Nadu.

7.2 Period of the Study

The period of the study was from August to October 2022.

7.3 Sources of data

This study includes both primary and secondary data. Primary data was obtained during the months of August to October 2022 with the support of the District Child Protection officer. A meeting was arranged in the District Child Protection office by the Researcher and a small orientation was given to orphan children. Following the orientation, the data was collected by interview method.

7.4 Tools used in the Study

The researchers used Depression Anxiety Stress by Marianna Szabo and Lovibond (2022) for data collection. It is a 21 items standardised scale, Reliability: Depression- 0.89 Anxiety – 0.84 Stress- 0.84. Percentage analysis and ANOVA was used to test the hypothesis to find out the difference between the variables.

8. Data Analysis & Interpretation

8.1 Descriptive Analysis

Table -1 : Gender of Respondents

Variable	Frequency	Percentage
Boys	28	46.7
Girls	32	53.3
Total	60	100.0

Source: Primary Data Computed using SPSS

More than half of the respondents were girls (53.3%) and 46.7% of them were boys.

Table-2: Type of Orphanhood

Variable	Frequency	Percentage
Paternal Orphan	57	95.0
Maternal Orphan	2	3.3
Double Orphan	1	1.7
Total	60	100.0

Source: Primary Data Computed using SPSS

Regarding the type of orphanhood majority 95% were paternal orphan, 3.3% were maternal orphans and 1.7% were double orphan.

Table-3: Immediate Feeling of Orphanhood

Variable	Frequency	Percentage
Sad & Hopeful	50	83.3
Sad & Hopeless	8	13.3
Cried	2	3.3
Total	60	100.0

Source: Primary Data Computed using SPSS

Regarding the immediate feeling of becoming an orphan, majority (83.3%) of the respondents stated that they were “sad but hopeful”, 8% them stated that they were “sad but hopeless”, 2% of them said they “cried”. All the respondents are school goers and there is no school drop outs. 20% of the respondents were by affected Covid 19 during this period.

Table – 4: Stress Level of Covid 19 Orphaned Children

Level	Frequency	Percentage
Normal	46	76.7
Mild	11	18.3
Moderate	3	5.0
Total	60	100.0

Source: Primary Data Computed using SPSS

In this Study from the Table 4 it is understood that majority (76.7%) of the Covid 19 orphaned children are facing normal stress. It is observed from the interaction with the orphans that most of the children got adjusted and accepted the death of parent. On the other hand (18.3%) of the respondents face mild level of stress and (5%) of the respondents face severe stress. So, stress management sessions can be suggested for them for the better future. Anuja S. Panicker and Chandana Nedungottil (2021) found the children and teenagers are the invisible victims of COVID-19 pandemic and even low amounts of stress can harm adolescent cognitive growth.

Table - 5: Anxiety Level of Covid 19 Orphaned Children

Level	Frequency	Percentage
Normal	42	70.0
Mild	7	11.7
Moderate	8	13.3
Severe	1	1.7
Extremely Severe	2	3.3
Total	60	100.0

Source: Primary Data Computed using SPSS

Table 5 shows that 3.3% of children are facing extremely severe anxiety. These Covid 19 orphan children have to be treated clinically. Majority (70%) of the respondents have normal anxiety. These children remain unattended at home, they are confused and uncertain

regarding future after the death of the parent/parents due to Covid 19. 13.3% of them have moderate level of anxiety which is also alarming. They need more mental health attention, assessment and care plans.

Table- 6 : Depression Level of Covid 19 Orphaned Children

Level	Frequency	Percentage
Normal	36	60.0
Mild	5	8.3
Moderate	15	25.0
Severe	3	5.0
Extremely Severe	1	1.7
Total	60	100.0

Source: Primary Data Computed using SPSS

The table 6 explains that majority 60% of the Covid 19 children have normal level of depression. 8.3% have of depression mild level and 25% of the have moderate level of depression. 5% of the Covid 19 orphan children have severe depression and 1.7% of the Covid 19 orphan children have extremely severe depression. Altogether we could observe that children are facing depression at different level. The finding revealed the mix of result of hope and hopelessness. The majority is under normal level, which is highly hopeful whereas the remaining percentages are not satisfactory and needs mental health care. Covid 19 orphaned children living with their single parents, care givers, orphanage authorities and Government official needs more attention and education in this area.

8.2 Hypothesis Testing

Table – 7: Hypothesis Testing - Gender & DAS- Depression Anxiety and Stress Covid 19 Orphaned Children – ANOVA- Test

DAS (Depression, Anxiety, Stress)					
TOTAL	Sum of Squares	df	Mean Square	F	Sig.
Between Groups	303.601	1	303.601	4.475	.039
Within Groups	3934.732	58	67.840		
Total	4238.333	59			

Source: Primary Data Computed using SPSS

ANOVA test was adopted to identify significant difference between gender of the respondents and Depression Anxiety and Stress. From statistical test (Table 7) it is inferred that there is significant difference between gender and Depression Anxiety and Stress ($F=4.475$, $p(0.039)<0.05$).

9. Findings of the Study

From the study we could find that more than half of the respondents were girls (53.3%). More than half of the respondents are studying in the Tamil medium schools. Majority (95%) of the children are paternal orphan, 3.3% belongs to maternal orphan and 1.7% belongs to double orphan. Concerning immediate feeling when they became an orphan majority (83.3%) of the respondents stated that they were “sad but hopeful”. 85% of the respondents get food three times a day. There is no school drop outs. 18.3% of the respondents have nail biting habit and 16.7% of the respondents become angry frequently. 15% of the respondents feel that they are not receiving respect from society. 20% of the respondents are affected by Covid 19. Majority of the Covid 19 orphaned children (76.7%) are face normal stress. Majority of them Covid 19 orphaned children (70%) are in front of normal anxiety level. Majority of the Covid 19 orphaned children (60%) are at normal level of depression.

10. Suggestions

Understand the emotional needs of the covid 19 orphaned children with empathy. Provide Covid 19 orphaned children with opportunities to express their emotions, implement Indoor and outdoor recreation activities, Practice them progressive muscle relaxation technique for reducing tension and stress levels. There may be lots of confusions and conflicts in the mind of Covid 19 orphaned children so encourage them to express their worries and ask questions. Provide periodical counselling support, behaviour assessment and develop well-being plan.

11. Conclusion

Covid 19 Orphaned Children have mental health problems that persist as them grow older. Future manifestations of mental illnesses like depression, anxiety, and drug use disorders are among them. It negatively affects Covid 19 Orphan's scholastic success and functional outcomes into adulthood, which necessitates urgent public health attention. The Corona pandemic is a diverse situational catastrophe that calls for great bravery, understanding, and teamwork. A whirlwind of consequences, including child displacement, family separation, reconstituted families, institutionalization, child marriage, school dropouts, malnutrition, etc., will result from Covid-19 orphanhood. Children who are Covid 19 orphans will experience a mental health catastrophe in all of these circumstances. We need to find long-term solutions to these problems with mental health.

11. Limitation of the Study

The limitation of the study was very difficult to get permission from authorities and time consuming. Interviewing the children, without affecting emotional realm was also challenging.

12. Scope for Further Research

Adjustment issues, copying patterns, need of urgent actions, risk factors of orphanhood, resilience, Vulnerability of Covid 19 Orphanhood, Social Support, mental health promotion, Emotional health impact of Covid 19 orphanhood and life skills intervention studies in Covid 19 orphaned children are all areas for further research.

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