

# Systematic Review on Efficacy of Intervention Programmes in elevating Mental Health of Orphans

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## ABSTRACT

Reviewing several past researches conducted in India and abroad on the effectiveness of the mental health intervention programme it was assured that these programmes are assets in improving and resolving mental health conditions of the vulnerable masses termed as “orphans”. Such programmes comprised of varied strategies and therapies involving group active play therapy, psycho education, psycho spiritual therapy, group narrative therapy, yogic practices, descriptive study using interview questionnaire, rational emotive behavioural group counselling, cognitive behavioural therapy, leisure time activities, spiritual component training and family based economic strengthening. Studies in the similar area have disclosed that when such programmes were administered for a certain period of time on the susceptible groups they improved which was apparent from their pre and post test scores therefore contributing towards the significance of these programmes.

**Keywords :** Mental health, Intervention programmes, Orphans

## I. INTRODUCTION

Mental health as the term suggests not only comprises of mental and physical health of a person but it encompasses a range of emotional and social aspects. A mentally healthy person is described as one who not only is absent from any illness but rather in a broader sense it implies to the individual's overall well-being. It refers to the individual's capacity to combat life's stressful conditions and balancing between all even and odds of daily life routine. A mentally healthy person is characterized by attributes like: optimism, tolerance, confidence, ability to equilibrate positive and negative emotions, maintain healthy relationship with others and realization of one's potential. Several researches conducted in India and abroad indicated that range of humanitarian crises can have adverse effect on person's mental and psychosocial well-being, and

among those one of the biggest crises in one's life is “orphan hood”.

Family is the basic unit of society and parental love, affection and positive family connections are the protective factors which serve as a wall against range of risk behaviours. Family network form a secure emotional base which is paramount for positive development of the child. Children who are deprived of parental love, care and attachment are more prone to encounter mental ill health and problems in later life as they are often exposed to abuse, exploitation, ignorance and neglect. In the past researches too there are evidences of stunted mental health of orphans and those living in the institutionalized setting. Such institutions do not provide measures or programmes to cater the mental health issues of these children and are limited to fulfil their primary needs only.

With the growing number of orphans in recent past years, it is need of the hour that intervention programmes should be made and introduced to quench the psychosocial needs of these vulnerable masses sheltered in such institutions.

Interventions are the programmes involving combination of strategies and activities which are customized and tailor made as per according to the needs of the individual or group which adds to the versatility of these programmes. They target to bring about a change and improvement when implemented for a period of time on the individual or population. These interventions emphasize on enhancing mental health and resolving related issues thus improving quality of life.

## II. OBJECTIVES OF THE STUDY

Study was conducted to meet the following objectives:

1. To review published literature regarding fruitfulness of mental health intervention programmes in alleviating mental ill health of orphans.
2. To identify varied therapies and activities involved within the intervention programmes.
3. To distinguish pre and post outcomes of the intervention programmes.

## III. METHODOLOGY

Present study comprised of assorted national and international researches, published in different online and offline journals.

## IV. REVIEW OF LITERATURE

**Maureen Mabasadi Motepe (2007)** “presented a newly self-developed life skill programme for early adolescent AIDS orphans i.e. (AIDS orphan life skill programme). Study was conducted in two phases (pre-test and post-test). Sample included a total 60

early adolescent AIDS orphan and the empirical data was collected to include two measurements once before and once after the intervention. Results confirmed that there was a statistical difference in the experimental group life skills (i.e. sense of identity and self-esteem, communication, assertiveness, self-awareness, coping and stress management, decision making, problem solving, conflict management and a healthy life style).”

**Deborah Ojiambo (2011)** “investigated the impact of group activity play therapy (GAPT) on displaced orphans aged 10-12 years living in villages of Uganda. Sample included 60 pre-adolescent exhibiting clinical levels of internalizing and externalizing behaviour problems. Participants were randomly assigned to GAPT or RM (reading mentoring) which served as an active control. Average of sixteen sessions were used. Results from teacher report form (TRF) and housemother reports using the child behaviour checklist (CBCL) revealed that GAPT intervention significantly decreased internalized and externalized behaviours in pre and post-test.”

**Jean M. Saporito, C.Ryan et al (2011)** “examined the effectiveness of an intervention to reduce explicit and implicit stigma relevant attitude towards mental illness and treatment seeking and behavioural indicators of willingness to seek treatment. Adolescents were randomly assigned to the experimental (education about mental illness and treatment involving psycho-education and contact (via DVD) with an affected individual) or control intervention (education about tobacco). Findings suggested that stigma intervention was effective at reducing explicit but not implicit stigma-relevant attitudes. Participants receiving the experimental intervention reported less explicit stigma towards treatment and greater openness to seek treatment”.

**Sandhya Diwedi (2011)** “studied the effect of psycho spiritual therapy on emotional intelligence and inferiority – insecurity feeling of orphans. 50 subjects (25 girls and 25 boys) were taken with the help of quota sampling. Age of subjects ranged from 12-19

years. Pre and post design was used. Independent variables were (auto suggestion, pranayama, prayer, diary writing, psychodrama) whereas dependent variables were emotional intelligence, inferiority feeling and insecurity feeling. Results showed effectiveness of psycho spiritual therapy in favour of significant high level of emotional intelligence and low level of insecurity feelings.”

**Ali Zadeh Mohammadi et al (2013)** “carried out investigation to study the effects of group narrative therapy on enhancing self-esteem and self-efficacy of 20 orphan male Iranian adolescents of age group 13-18 years of age. Tools used for the investigation was Rosenberg self-esteem inventory and the Scherer self-efficacy scale questionnaire. Results revealed that ten week of group narrative therapy led to significant increase in the self-esteem and self-efficacy of the orphans.”

**Kathryn Alloway Culver (2014)** “evaluated the effectiveness, feasibility and acceptability of an eight week yoga intervention to reduce trauma related symptoms and emotional and behavioural difficulties among children living in orphanages in Haiti. Case control study was used with random assignment to yoga or aerobic dance plus a non-randomized wait list control group. Results revealed that participation in either eight weeks of yoga or aerobic dance classes predicted a reduction in trauma related symptoms and emotional and behavioural difficulties, though not statistically significant. The average yoga classes attended was 14.65 (SD=2.17) out of sixteen classes. 92% of respondents (N=26) reported being satisfied with the yoga programme and all reported positive changes in well-being.”

**P.S. Nadam and H. Sylaja (2014)** “investigated scientifically the effect of yogic practices on mental health of orphan children. Sample size consisted of 60 (boys and girls) orphan children from one of the orphan homes of Jalandhar, Punjab. Subjects were divided into group of two i.e.: yogic group (experimental) and control group (non-experimental). Training of yogic practices was given to experimental

group for eight weeks. No training was imparted to control group. Results showed significant effect of yogic practices on the different parameters of mental health i.e. over all adjustment, emotional stability, autonomy, security, insecurity, intelligence and self-concept.”

**Sharon M. Kirkpatrick (2014)** “viewed the perceptions of orphans, their caregivers and teachers related to the implementation of grief support intervention programme. Descriptive study using interview questionnaire was conducted among 74 participants who included 32 orphans, 32 caregivers and 10 teachers in the Cooper belt Province of Zambia. Results revealed that small group interventions alleviated some of the manifestations of grief in the orphans who participated. They reported feeling happier, less lonely, less angry and more confident. Caregivers and teachers perceived positive changes in orphan’s behaviour.”

**Shimelis Keno Tulu (2014)** “examined the effectiveness of rational emotive behavioural group counselling for post traumatic disorder in orphan children in Ethiopia. Pre and post-test was used. Participants aged 12-17 years and were randomly assigned to the control and treatment groups. Participants in the treatment received twelve sessions of rational emotive behavioural group counselling for four successive weeks. Results revealed that there was significant reduction in the level of post-traumatic stress symptoms among the treatment group.”

**Julia Gallegos Guajardo et al (2015)** “studied the effectiveness of the Spanish version of the FRIENDS program, a CBT (cognitive behavioural therapy treatment) based resilience program, with 57 girls from low SES that were living in an orphanage. Participants received the program for ten consecutive weeks and pre and post-test measures were collected. Measures evaluated participant’s anxiety symptoms, level of self-concept, hope, coping skills and psychological difficulties. Social validity was also assessed. Results showed positive changes, including

a decrease in anxiety symptoms and psychological difficulties and an increase in their proactive coping skills. Several subscales and items of the self-concept and hope outcomes measures also reported statistically significant improvements.”

**Neelam K Sharma et al (2015)** “investigated the effect of leisure time activities on mental health status of orphan children. For conducting experiment sample size constituted of 15 orphan boys and girls of 13-18 years of age group from Guru Nanak Anath ashram, Jalandhar. A programme of leisure time activities was prepared, which was based on the interest of samples. Training of selected leisure time activities were imparted to subjects up to twelve weeks to the experimental group and not to the other control group of 15 boys and 15 girls of same age group. Results of the investigation showed that there were positive effects of leisure activities over various dimensions of mental health i.e. emotional stability, overall adjustment, autonomy, security-insecurity, self-concept and intelligence.”

**Marziyeh Rouhalamini et al (2016)** “conducted a study to determine effectiveness of spiritual components training on life satisfaction of Persian orphan adolescents. Sample consisted of female adolescents of two orphanages of Iran. The sample was divided into two experiment and control group each of ten members. Experimental group received spiritual training in 10 sessions (special training included components such as image of God, relationship with God, Tawwakul, searching for meaning during difficulties and pain). Results revealed that special components training had a significant positive effect on life satisfaction of the experimental groups as compared to the control one.”

**Ravishankar Tehvani et al (2016)** “assessed the effect of yoga intervention on anxiety, depression and self-esteem of adolescents and young adults residing in orphanage. Sample consisted of 27 males and 7 females ranging from 12-20 years of age who underwent two week of yoga intervention programme which comprised of different yogic

postures: pranayama, dharana- dhyana for one hour over fifteen days. Tools used for the study was hospital anxiety and depression and Rosenberg self-esteem scale for pre and post study. Results showed that there was reduction in anxiety, depression and significant improvement in self-esteem at the end of two week yoga intervention programme.”

**Apollo Kivumbi et al (2019)** “examined the effect of family-based economic strengthening intervention in improving mental health wellbeing among female adolescent orphans in Uganda. Data was collected at baseline, 12-24 months post intervention initiation. Tools used for mental health functioning was: (1) the Child Depression Inventory; (2) Beck Hopelessness Scale; and (3) Tennessee Self Concept Scale. Results show an improvement in mental health functioning over time among female participants receiving the intervention compared to their control counterparts.”

**Emily Chepngetich Sitienei and Jace Pillay (2019)** “explored the psycho-educational and social interventions provided for orphans and vulnerable children (OVC) in a community-based organisation (CBO) in Soweto, South Africa. The study involved 12 OVC (males = 40%, and females = 60%; aged 10 to 18 years). Data was collected using individual interviews, focus group discussions, and autobiographies. The thematically analysed data revealed that the OVC received psychological interventions through mentorship and peer-group support in the CBO. Results reflected that social interventions were addressed by empowering the OVC with life skills and providing economic support for their families. The major contributions of this study were to note the importance of the CBO in addressing issues related to the lack of counselling, the stigmatisation of OVC by community members and the need for empowerment of their families by providing income-generating activities.”

**Masego Katisi et al (2019)** “investigated the efficacy of the Balekane EARTH program, a two week therapeutic intervention in Botswana for children who have been orphaned. A quasi-experimental pre-

test, post-test design was used. Sample consisted of participants (n = 650) aged 11–17 years from communities across Botswana. Tools used for the study was a questionnaire containing contextualised versions of the Child and Youth Resilience Measure (CYRM-28), the Inventory of Complicated Grief, the Future Aspirations/Peer Leader scale, the Conduct Problems subscale of the Strengths and Difficulties Questionnaire, and questions pertaining to school engagement. Results reported improvement in resilience, problems related to grief and future aspirations. The half of the participants who scored most poorly on measures of resilience, problems with grief, and future aspirations (those most at-risk) were found to report the biggest gains on these measures following the intervention.”

## V. CONCLUSION

Thus in a nut shell it could be sum up that loss of biological parents is a calamity in one's life which left an individual in deep distress and misery and hence he/she is likely to suffer from poor mental health. In such scenario mental health intervention programmes are remedy to improve mental health state and overall well-being so early detection is always helpful in overcoming further consequences.

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- Akshita Singh, Dr. Suvidha, "Systematic Review on Efficacy of Intervention Programmes in elevating Mental Health of Orphans", *International Journal of Scientific Research in Science and Technology (IJSRST)*, Online ISSN : 2395-602X, Print ISSN : 2395-6011, Volume 6 Issue 1, pp. 554-559, January-February 2019. Available at doi : <https://doi.org/10.32628/IJSRST20724>  
Journal URL : <http://ijsrst.com/IJSRST20724>

**Cite this article as :**