

Research Article

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## Perception of adjustment among institutionalized adolescent girls in selected districts of Karnataka.

**\*M C Sandhyarani & \*\*C Usha Rao**

\*Research Scholar, DOS in Social Work, University of Mysore, Manasagangothri, Mysuru – 570006, Karnataka, India,

\*\*Associate Professor, DOS in Social Work, University of Mysore, Manasagangothri, Mysuru – 570006, Karnataka, India

\*Corresponding Author: [mcsandhyarani@gmail.com](mailto:mcsandhyarani@gmail.com)

### Abstract

Institutional care for adolescent girls can be regarded as a form of care is provided by paid caretakers in group care. It is a temporarily organized residential care for children and adolescents. An institution is a place where alternative care is provided who are in need of care, support and protection. Institutional care for adolescent girls at young age disrupts the normal development. Adolescence stage is referred as a period of stress and storm. It is a time for the occurrence of physical and sexual changes and these changes may cause psychological discomfort among adolescents. Under such circumstances getting adjusted to the institutional care in the absence of parental supervision is a very difficult one. No human being can adopt himself to his own physical environment without proper adjustment. Adjustment is a dynamic and continuous process. It demands the abilities of adolescents to face various challenges in everyday life and if they are able to cope up with the challenges, they will be well adjusted otherwise it may lead to mal adjustment. The present study aimed to determine the different dimensions of adjustment such as home, peer, school, teacher and general adjustment among adolescent girls living in institutions. The result revealed that many of them have adjustment problem while residing in the institution.

### Keywords

Adjustment,  
Institutional care,  
Adolescent Girls.

### Introduction

Institutional care for adolescent girls can be regarded as a form of alternative care is provided with best interests in an organized manner, in order to provide care and protection for children and adolescents. It is a temporarily organized residential care for children up to the age of 18yrs. Institutional care involves the integration of accommodation and personal care. Institutional care has been defined by Browne (2009) as “a group living arrangement for more than ten children, without parents or surrogate parents, in which care is provided by a much smaller number of paid adult carers”. Such type of alternative care would create a

chaos in the institution rather it anticipate for the betterment in the overall development of children in hands of paid caretakers. Further the regimental system of institutional care is highlighted by Browne (2009) in his statement that “residential care implies an organized routine and impersonal structure to the living arrangements for children (ex. all children sleep, eat and toilet use at the same time) and a professional relationship, rather than parental relationship, between the adults and children”. Early separation from parents leads to deprivation of parental care, love, affection, warmth, security, acceptance and discipline during

childhood disrupts not only their normal socio-emotional development' (Hunshal & Gaonkar, 2008)' but also they suffer with mal adjustment in the institution.

Institutional care accommodates a group of children, live together, work together, play together and also grow up as adolescents. Adolescence is a transitional stage in human development during which the individual undergoes marked physiological, psychological and social changes in the process of growing from a child into an adult. The term adolescence is derived from the Latin verb 'Adolescere' which means 'to grow to maturity'. WHO identifies adolescence as the period in human growth and development that occurs after childhood and before adulthood, from ages 10 to 19. It represents one of the critical transitions in the life span and is characterized by a tremendous pace in growth and change that is second only to that of infancy. Biological processes drive many aspects of this growth and development, with the onset of puberty marking the passage from childhood to adolescence (WHO, 2016). Adolescents' experience, rapid biological, social and emotional changes contribute to confusion about their identities, and can lead to social, emotional, and academic difficulties. A continual support is needed for the psychological maturation of the child in the absence of which they (Goodman & Scott, 1999) exhibit adjustment problems.

Adjustment is an act of adopting oneself to the situation/environment. No human being can adopt himself to his own physical environment without proper adjustment. Adjustment is a dynamic and continuous process. Adjustment is a kind of interaction between the individual and his or her environment. According to Lazarus – "Adjustment consists of the psychological process by means of which the individual manage or cope with various demands or pressures". It demands the abilities of adolescents to get adjusted with various challenges faced in the everyday of life. In case of institutionalized adolescents they have to adopt themselves to the different levels of adjustment such as home, peer group, environment, rules and regulations, routine activities, food habits etc. If they are able to cope up with the challenges they are set to be well adjusted or else if the problem persists for a longer time it may lead to maladjustment in the later stage. Hence these problems identified at the beginning stage of adolescents and implementation of interventions to overcome the problems will result in good adjustment.

## **Research Methodology:**

Aim: is to study the perception of adjustment among institutionalized adolescent girls in selected two districts (Mysuru & Hubballi) of Karnataka.

## **Objectives**

1. To know the socio-demographic details of the respondents
2. To assess the levels of adjustment among the adolescent girls.
3. To compare the level of adjustment of adolescent girls residing in two different districts
4. To suggest measures for better adjustment from social work point of view

## **Universe and Sampling:**

The universe comprises of 103 adolescent girls aged between 13 to 18years residing in two Government institutions (Hubballi - 48 and Mysuru -55 adolescent girls). Purposive sampling method has been adopted to collect the data from the adolescent girls. Descriptive research design has been chosen to describe the opinion and problems with regard to adjustment among adolescent girls residing in institutional care.

## **Tools of data collection**

Socio-demographic details were collected through a structured interview schedule prepared by the researcher. Pre-adolescent Adjustment Scale (PAAS) developed by Pareek et. al., (1976) was applied to find out the different dimensions of adjustment among institutionalized adolescent girls. This scale contains 40 items, measuring adjustment towards home, school, peers, teacher and general. This is a 40 item scale that measures adjustment as defined by the individuals orientations towards home, peers, school, teacher and general adjustment in terms of the interpersonal satisfaction derived separate scores are available for the five areas of adjustment. An overall score for total adjustment can also be obtained. Scoring key available which gives 5 scores and 5 areas and an overall adjustment score. The total adjustment scores ranges from -46 to +34. Positive scores on this scale indicate adjustment and negative scores indicate mal adjustment. Test – retest reliability co-efficient to range from 0.08 to 0.06 for all areas except home. Co-efficient for the home area were negative (ranging from -0.04 to 0.07). Inter-co-relation between the areas was reported to be significant at the 0.01 level. Means for two divisions such as Hubballi and Mysuru district were compared. Statistical tests for significance (ANOVA test) were done and results compiled.

## Results

**Table no. 1 Socio-demographic details of the respondents**

Details		N=103 (Percent)
Age (in years)	13-15	59 (53)
	16-18	44 (47)
Education	Studying in high school	48 (46)
	School dropout	41 (40)
	PUC	14 (14)
Domicile	Rural	59 (57)
	Urban	44 (43)

The table no. 1 represents the socio-demographic details of institutionalized adolescent girls in selected districts of Karnataka. Among 103 adolescents, a majority of 59 (53%) respondents were between 13-15 years of age and 44 (47%) girls were belonged to 16-18 years of age. The mean age of the respondents was

15.14 years. As many as 48 (47%) adolescents were studying in high school level, 14 (14%) adolescents were enrolled to post-metric and 41 (40%) were said to be school dropouts. Nearly half of 59 (57%) adolescent girls from rural areas and only 44 (43%) girls hailed from urban areas.

**Table No. 2 Details related to admission of the respondents**

Details		N=103 (Percent)
Living status before institutionalization	Home	61 (59)
	Institution	26 (25)
	Lived with partner	13 (13)
	Public place	3(3)
Persons accompanied during admission	Parents	52 (50)
	Rescued by Police	28 (27)
	Self	14 (14)
	Rescued by NGO	3(3)
	Neighbour	2 (2)
	Rescued by DCPO	1(1)
	Teacher	1(1)
	Public	1(1)
	Not known	1(1)
Length of stay	Below one year	5 (5)
	1-3yrs	72 (70)
	4-6yrs	17 (17)
	7-9yrs	5 (5)
	10-12yrs	4 (4)

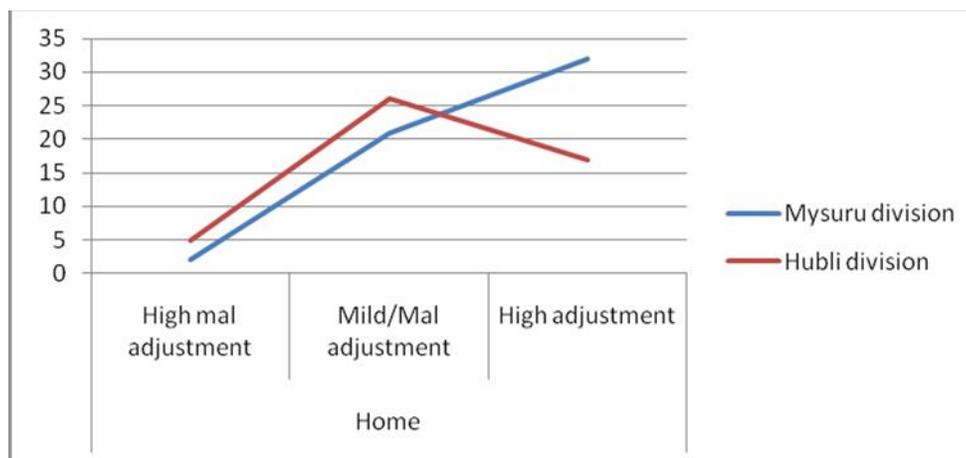
The above table represents the information related to admission to institution. The living status of adolescent girls before getting admitted to the institution shows that as many as 61 respondents i.e., 59% were living at home, 26 (25%) were living in Government institutions, 13(13%) adolescent girls reported that they had eloped and lived with their partners. Only three respondents were found at public places found begging on the street near bus stand.

The persons accompanied at the time of admission shows that majority of 52 (50%) adolescent girls were brought to the institution by their own parents, where as 28 (27%) respondents were rescued by police personnel. 14 (14%) adolescent girls had admitted to the institution voluntarily. Three respondents were rescued and brought by personnel from an NGO. Two (2%) respondents were referred by neighbors as they were orphans, one respondent each were rescued by

personnel from DCPO and referred by a school teacher. Another child was referred by the public as it turned out to be a case of child marriage. One respondent neither could remember from where she came nor did she have any record of who accompanied her during admission. With regard to length of stay of

the respondents, a majority of adolescent girls i.e., 72 (70%) were living in institution since 3years, 17 (17%) respondents living since 6 years, five respondents each, since 9 years and below one year and the remaining four living since 9 years in the institution respectively.

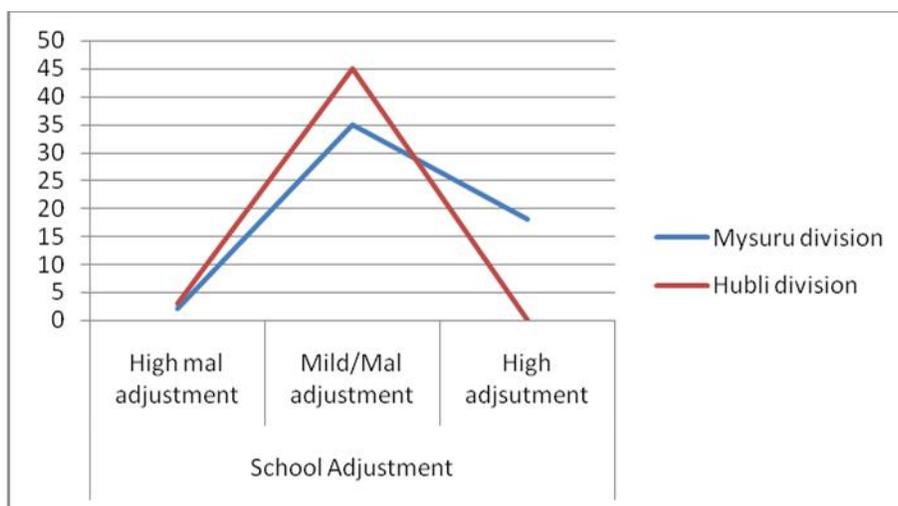
**Graph no. 1 Home adjustment of adolescent girls at Mysuru and Hubballi institutions**



The graph no. 1 represents the opinion on home adjustment of adolescent girls in Mysuru and Hubballi division. Few adolescent girls from both the division have reported high mal adjustment. Though there is high mal adjustment the trend is moving upward to

mild/mal adjustment to high adjustment among adolescent girls from Mysuru division, this shows better high adjustment. However adolescent girls from Hubballi division show high adjustment along with mild/mal adjustment is still prevalent.

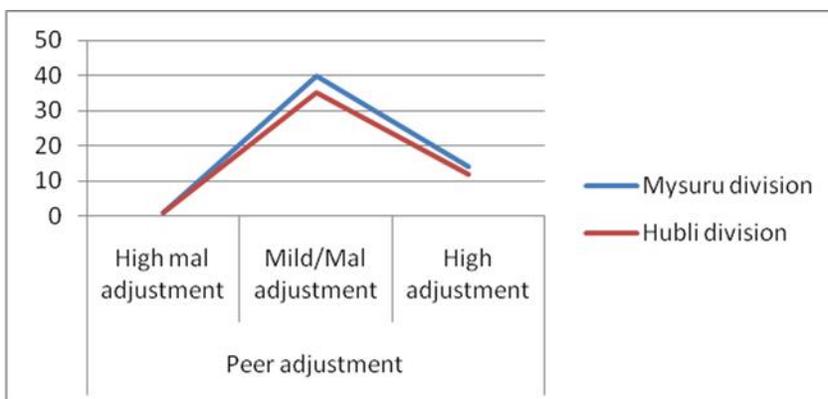
**Graph No. 2 School adjustment of adolescent girls between two divisions**



The graph no. 2 shows opinion on school adjustment of adolescent girls from Mysuru and Hubballi division. Majority of adolescent girls from both the division reported mild/mal adjustment on school.

Though the adolescent girls from Mysuru division are highly maladjusted are yet to make adjustment, whereas adolescent girls from Hubballi division are not at all adjusted to school.

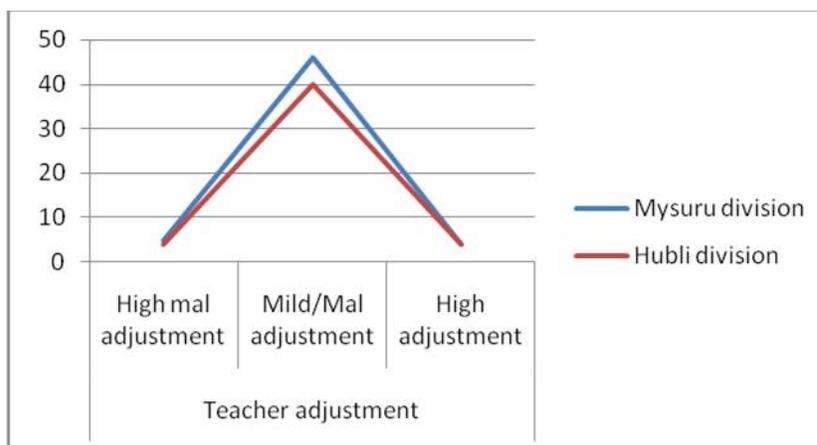
**Graph No. 3 Peer adjustment of adolescent girls at Mysuru and Hubballi institutions**



The graph no. 3 depicts on the adjustment towards peer among adolescent girls from Mysuru and Hubballi division. It is clear that majority of

adolescent girls from both the division reported mild/mal adjustment and adolescent girls from both division don't show any signs of adjustment on peer.

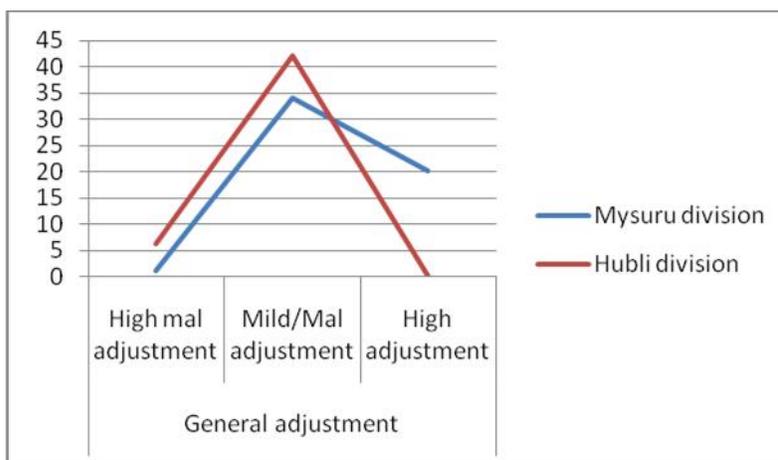
**Graph no. 4 Teacher adjustment of adolescent girls between two divisions**



The graph no. 4 reveals the opinion on adjustment towards teacher among adolescent girls from Mysuru and Hubballi division. The adolescent girls from both the division reported equal distribution of frequencies in high mal adjustment as well as high adjustment towards teacher. On the other end a slightly higher

number of adolescent girls from Mysuru division reported mild/mal adjustment towards teacher when compared to Hubballi division. The result indicates there is no sign of high adjustment towards teacher in both the division.

**Graph no. 5 General adjustment of adolescent girls at Mysuru and Hubballi institutions**



The graph no. 5 shows opinion on general adjustment of adolescent girls from Mysuru and Hubballi division. Majority of adolescent girls from both the division reported mild/mal adjustment on general.

Though very few adolescent girls from Mysuru division have reported high maladjustment and are yet to make adjustment, whereas adolescent girls from Hubballi division are not at all adjusted to general.

**Table no. 3 Different dimensions of adjustment among institutionalized adolescent girls**

Sl. No.	Dimensions	Mysuru Division (Mean & Variance)	Hubballi Division (Mean & Variance)	F	p value
1	Home adjustment	5.67 (17.29)	3.70 (17.29)	5.181	.025*
2	School adjustment	1.76 (10.77)	-1.12 (5.60)	25.55	.000**
3	Peer adjustment	1.10 (10.98)	1.18 (10.24)	.015	.903
4	Teacher adjustment	-.52 (9.47)	-.27 (6.98)	.203	.653
5	General adjustment	2.50 (5.81)	-1.31 (4.30)	73.26	.000**

(\*Statistically significant/ \*\*Highly significant)

**Home adjustment:** The result reveals the comparison of home adjustment level of adolescent girls in Mysuru and Hubballi institutions. The data reveals that there is significant difference in both the divisions on home adjustment among adolescent girls. The difference was found to be statistically significant (p value =.025\*). This shows adolescent girls from Mysuru division have shown better adjustment in terms of infrastructure, spacious and well maintained building compared to Hubballi division with regard to home adjustment.

**School adjustment:** the data in the table reveals that there is significant difference in Mysuru and Hubballi division on school adjustment. The adolescent girls from Hubballi division reported negative scores (-1.12) towards school adjustment when compared to Mysuru division. The difference was found to be highly significant (p value = .000\*\*). This indicates that adolescent girls from Mysuru division have shown better adjustment towards school.

**Peer adjustment:** with regard to peer adjustment the adolescent girls from both the divisions i.e., Mysuru and Hubballi division found similar scores. However no statistically significant difference was found in two divisions (p value =.903). The result indicates that the adolescent girls from both division represents mild/mal adjustment towards peer group.

**Teacher adjustment:** The adolescent girls from both divisions have reported negative adjustment towards teacher. Adolescent girls from Mysuru division have shown slightly high negative adjustment towards teacher compared to their counter parts. The scores

revealed no much significant differences in frequencies (p value =.653) in both divisions.

**General adjustment:** The scores revealed highly significant difference among adolescent girls in Mysuru and Hubballi division on general adjustment. It is revealed that adolescent girls from Hubballi division found to have negative general adjustment (-1.31) and adolescent girls from Mysuru division reported mild adjustment better than negative adjustment. The scores in frequencies also found highly significant difference (p value =.000\*\*).

## Discussion

Care from parents/guardians is better than institutionalization of young adolescent girls. There must be provision for children to be raised under parental supervision during their younger age till they reach adolescence. During this age, an individual under parental supervision gets an opportunity to learn certain skills, abilities, capacities, attitude, behaviour, socialization, life styles, language, learns to perceive things in both directions (positive and negative) etc., helps every adolescents in such a manner that shapes the personality of the adolescents which is long lasting. Unfortunately institutionalization of girls increasing, as a substitute to natural family environment. The present study has covered adolescent girls between 13 to 18 years of age. Similar age group were found in Mota & Matos (2013) found that adolescents' age ranged from 13 to 18 years with a mean age of 16.19 years. Further, Simsek et.al., (2008) covered 40% adolescent girls were between 12 to 18years age. In the study among 103 subjects, a majority of 53% adolescent girls were between

13-15 years of age. Similar results were found in Morgan & Brodie (2008) covered adolescents ranging from 13-17 years with a mean age of 14.8 years. With regard to education, as many as 47% respondents were studying in high school level, which is very crucial and critical in every adolescents academic life where completion of matriculation play a vital role in the choice of career in the future. This result is in consistent with Morgan & Brodie (2008) study found that majority of 67% adolescent girls were studying in high school level. It is reported that in the present study 59% respondents had lived in their respective home before institutionalization, similar results were found in Simsek et al., (2008) found that 55% adolescents had lived in their respective family before institutionalization. A majority of 70% were living in institution since 3 years, similar results were found in Suzuki & Tomoda, (2015) study that mean years spent in institutional care are 5.7years with the duration range from 0-15years. Elebiary et al., 2010 found that the duration of stay among institutionalized children ranged between below 5years to 10 and above years. Nearly half of 50% adolescent girls were admitted to the institution by their own parents due to the reasons such as poor economic condition, daily wage earners, to get education to their children and basic needs which is required for their life.

Home is a secure place for an individual, provides protection from external threats. A well structured home holds a satisfaction of living. Unfortunately many institutionalized adolescent girls are having problem of adjustment being at temporary home. Many of them have developed a kind of maladjustment because of dilapidated structure, less space, congested rooms. Added to this, adolescent girls from Hubballi division reported high mal adjustment towards home compared to their counterparts, indicates large number of adolescents in institutions generate higher levels of noise, less personal space and privacy, (Kumar et. al., 2015) and more interpersonal friction, peer violence and bullying' (Barter, Renold, Berridge, & Cawson, 2004; Gibbs & Sinclair, 1999). School is the second milestone in the life of adolescent girls. But for many adolescent girls school has become some sort of indecisiveness to them. The adolescent girls from Hubballi division reported negative school adjustment may be some of them certainly have complaints with regard to school environment, lack of seating arrangement, congested class room, regulations, method of teaching and many adolescent girls neglects to complete their school work etc., impedes in school truancy or absenteeism, academic failure and

behavioural problem in the classroom. If such situation persists would lead to under achievers, truants or school dropouts among institutionalized adolescents.

Peer group exert an important role in all stage of an individual's life. They provide emotional support. The role of friend is stronger and much time is spent with friends during adolescence (Meeus et al., 2005). But there are adolescents who donot like the company of peer group because they had suffered/struggled physically and psychological problems with their group. The result also revealed that adolescent girls from both the divisions had reported similar scores implied high mal adjustment towards peer group.

A teacher is the most important person in the school who can help in modifying the children's personalities. He/She is the most powerful source of stimulation for the child. On the other hand, effects of prejudicial treatment on the part of teachers can make the child lose self confidence and develop low self esteem. Teacher often have higher expectation for high ability students than low ability students. This might be true for institutionalized adolescent girls, where the girls from both the division reported negative adjustment towards teacher, among them girls from Mysuru division scored highly negative compared to Hubballi division.

The general adjustment indicates the adjustment in general aspects in the institution. The adolescent girls from Hubballi division reported negative adjustment towards general adjustment compared to their counter parts. General adjustment includes adjustment of self towards general aspects in the institution. But a majority of adolescent girls from Hubballi division lack in pro-social behaviour, aggressive in nature, talkative, jalousie of others, feels alone, would like to be at home rather than going to school, habit of quarreling with others.

## **Conclusion**

To conclude, many adolescent girls in institutional setting are maladjusted towards different dimensions (Home, School, Peer, Teacher and General adjustment) of adjustment. Mainly adolescent girls from Hubballi division represented negative adjustment towards the different dimensions, compared to Mysuru division. It is important to note that the adolescent girls who are admitted to institution are from diverse family background could become a challenge to get adjusted with the different dimensions. Therefore it is important that the concerned personnel /counselor /house mothers

responsibility to identify such adjustment problems before it persists further and to come out with measures to mitigate the problems of institutionalized adolescent girls with suitable intervention strategies to overcome problems.

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