

Psychosocial Landscapes of Orphanhood: Navigating the Journey

Dr. Shrruti Sahrawat

Associate Professor, Department of Psychology, Indraprastha College, University of Delhi

Abstract: *Orphanhood constitutes a profound journey marked by unique psychological landscapes. This article delves into the intricate dynamics of orphanhood, exploring the multifaceted dimensions of psychological experiences that shape the lives of individuals bereaved of parental care. Through integrative theoretical research, this paper illuminates the challenges, resilience, and psychological processes inherent in navigating the journey of orphanhood. From the complexities of attachment disruptions to identity formation amidst loss, the psychological terrain of orphanhood offers valuable insights for understanding human adaptation and growth in the face of adversity. By shedding light on these psychological landscapes, this article aims to foster greater awareness, empathy, and support for individuals traversing the path of orphanhood.*

Keywords: Orphanhood, Parent Loss, Mental Health, Psychosocial Development, Bereavement

1. Introduction

Orphanhood is a profound journey that delves deep into the essence of human existence, extending far beyond the mere loss of parents to encompass a vast spectrum of intricate emotions and struggles. When a parent passes away, it's not just the rupture of familiar family bonds; it's a seismic disruption that shakes the very foundation of one's identity and sense of belonging. The journey of orphanhood is akin to riding a tumultuous rollercoaster, characterized by intense waves of profound sadness, overwhelming feelings of isolation, and a bewildering sense of confusion.

In this article, we embark on a profound exploration of the psychological landscapes of orphanhood, endeavouring to shine a light on the experiences of individuals who have bravely traversed this challenging path of loss. By delving deep into the myriad challenges they confront and the remarkable resilience they exhibit, we aim to peel back the layers and uncover the profound complexities inherent in the journey of orphanhood. Through this in - depth exploration, we aspire to achieve a deeper understanding of the intricate tapestry of emotions, thoughts, and coping strategies that intricately shape the lives of orphaned individuals.

With each word and reflection, we seek not only to illuminate the struggles and triumphs of orphaned individuals but also to offer a beacon of empathy and understanding. Through our collective exploration, we hope to foster greater awareness, compassion, and support for those who have walked the path of orphanhood, ultimately contributing to a more empathetic and inclusive society. Orphanhood is a profound journey that touches the core of human existence, transcending the mere loss of parents to encompass a myriad of intricate emotions and struggles. When a parent passes away, it not only shatters the familiar bonds of a family but also disrupts the very essence of identity and belonging. The journey of orphanhood is a tumultuous rollercoaster ride, marked by profound sadness, feelings of isolation, and bewildering confusion.

In this article, we embark on an exploration of the psychological landscapes of orphanhood, aiming to illuminate the experiences of individuals who have traversed this profound path of loss. By delving into the challenges they confront and the resilience they exhibit, we seek to uncover the profound complexities inherent in the journey of orphanhood. Through this exploration, we endeavour to gain a deeper understanding of the intricate tapestry of emotions and coping strategies that shape the lives of orphaned individuals.

Unveiling the Challenge

Who is an Orphan?

In common language orphan is “a child whose parents are dead”.¹ “The Juvenile Justice (Care and Protection of Children) Rules, 2007 Section 2 (k) defines an Orphan as “a child who is without parents or willing and capable legal or natural guardian”.²

For this study, UNICEF defines an orphan as a child under 18 years who has lost one or both parents. UNICEF classified orphans into **three categories** as under:

- a) **Paternal orphans** are those children who have lost their fathers.
- b) **Maternal orphans** are those children who have lost their mothers.
- c) **Double orphans** are those children who have lost their both parents.³

The journey of orphaned individuals is fraught with challenges, with the loss of parental figures serving as a cornerstone of their experience. Studies have shown that orphaned children are at a higher risk of developing psychological issues such as depression, anxiety, and post -

¹ <https://www.merriam-webster.com/dictionary/orphan>

² The Juvenile Justice (Care and Protection of Children) Rules, 2007 Section 2(k)

³ UNAIDS, U. U. (2004). . Children on the Brink 2004: A Joint Report of New Orphan Estimates and a Framework for Action. UNICEF, New York.

traumatic stress disorder (PTSD).⁴ A study revealed that orphaned children in India are three times more likely to experience psychological distress compared to their non-orphaned counterparts.⁵

On a global scale, the orphan crisis is with an estimated 140 million orphaned children worldwide, according to UNICEF and 25 million orphan children are Indian. The immense magnitude of India's orphan crisis, with an estimated 25 million orphaned children, reveals a profoundly moving story. It portrays the pervasive plight of millions of children bereft of parenthood, longing for love, care, and basic resources needed for a decent life.⁶ Losing a parent and the bereavement that follows is difficult for children, and the effects may not manifest until many years afterwards.⁷

Problems Faced by Orphan Children in India

Orphanhood often brings about a range of complex challenges, such as discrimination, limited access to healthcare and education, insufficient food, sexual abuse, and various other issues.⁸ In traditional societies, care of the orphaned and the destitute child used to be the responsibility of community care i. e. nuclear family member, adoption, foster care, etc. However, now such children are sent to institutional care i. e. orphanages etc. which are organised by state or voluntary agencies. "An orphanage is devoted to the care of orphans and children who, for various reasons, cannot be cared for by their biological families"⁹ but unfortunately due to the high rise in orphan children, these orphanages face a wide variety of problems to devote the care which orphan children deserve such as nutritious food, Shelter, primary education, Health, emotional support etc.

1) Child abuse & Neglect: Child abuse or maltreatment encompasses various forms of harm, including physical and/or emotional abuse, sexual abuse, neglect, or exploitation, resulting in actual or potential harm to the child's well-being, growth, or dignity within a relationship characterized by trust or power.¹⁰ Neglect, a form of abuse, entails withholding adequate food, clothing, shelter, supervision, medical care, and education from a child. This is one of the prominent challenges encountered by orphaned children in India. Both boys and girls nationwide are

susceptible to this issue, particularly within inadequately monitored orphanages and shelters.

According to a survey conducted by the Government of India's Ministry of Women and Child Development in 2007, the occurrence of various types of child abuse is alarmingly high. This includes physical abuse (66%), sexual abuse (50%), and emotional abuse (50%).¹¹ Child Abuse & Neglect exert a multitude of short and long-term effects on children such as regressive behaviours, performance problems at school, elevated levels of post-traumatic stress disorder, aggression, and emotional and mental health concerns, such as anxiety and depression.¹²

According to NCPCR Annual Report 2020 - 2021, 2, 56, 369 children are living in childcare institutes across the country. It is observed by way of inspection and visits to such childcare institutes, that 70% of the orphans of the country are living in Tamil Nadu, Karnataka, Kerala, Andhra Pradesh, Telangana and Maharashtra. In addition, Mizoram and Meghalaya despite having a low population a huge number of children are living in childcare institutes. Reports also stated that the orphans are kept in the child care institutes for some mala-fide intentions.¹³

Institutions tasked with safeguarding and providing a secure environment for children have utterly faltered. In 2018 the Muzaffarpur Shelter Home case came into highlight where 34 out of 42 girls aged between 07 - 17 years were being sexually assaulted and one was killed and buried on the premises of the same shelter home.¹⁴ Yet another but similar case of Deoria Shelter Home, Uttar Pradesh, where 24 girls were rescued and 18 girls are still missing.¹⁵

2) Malnutrition: Undernutrition denotes the insufficient intake of energy and nutrients to meet an individual's needs to maintain good health.¹⁶ Many orphan children in India are more prone to malnutrition or are already suffering from it compared to children staying at home with their parents. Malnutrition arises due to reduced dietary intake, malabsorption, increased nutrient losses or altered metabolic

⁴ UNICEF. (2006). Africa's orphaned and vulnerable generations: Children affected by HIV/AIDS. New York, Vintage Press.

⁵ Verma, S. (2021). Mental Health Of Children Orphaned By COVID-19 In India. *Ilkogretim Online - Elementary Education Online*, 20(6), 3204- 3211.

⁶ <https://gitnux.org/orphans-in-india-statistics/>

⁷ Benjamin Atwine, E. C.-G. (2005). Psychological distress among AIDS orphans in rural Uganda. *Social science & medicine.*, 61(3): 555-564.

⁸ Getachew H, Ambaw F, Abebe L, Kasahun W. Psychological distress and its predictors in AIDS orphan adolescents in Addis Ababa city: A comparative survey. *Ethiop J Health Dev.* 2011;25(2):132-45

⁹ "Orphanage"- Wikipedia 24.04.2024 <https://en.wikipedia.org/wiki/Orphanage#:~:text=An%20orphanage%20is%20a%20residential,deceased%2C%20absent%2C%20or%20abusive.>

¹⁰ https://iris.who.int/bitstream/handle/10665/65900/WHO_HSC_PVI_99.1.pdf?sequence=1&isAllowed=y
..\..\Downloads\WHO_HSC_PVI_99.1.pdf

¹¹ Study on Child Abuse: India (2007). Ministry of Women and Child Development, Government of India, <https://resourcecentre.savethechildren.net/pdf/4978.pdf/>

¹² Dr. Rajeev Seth, Child Abuse and Neglect India, Indian Child Abuse Neglect & Child Labour (ICANCL) Group, <https://www.icancl.org/pdf/child-neglect.pdf>

¹³ National Commission for Protection of Child Rights (NCPCR) Annual Report 2020-2021 https://ncpcr.gov.in/uploads/165648813162bc00c370bdd_annual-report-2020-2021-11046-kb.pdf

¹⁴ Times of India, 05 Aug 2018, Last visited 26.04.2023 <https://indianexpress.com/article/india/bihar-muzaffarpur-shelter-home-case-bihar-scandal-brajesh-thakur-paratah-kamal-sexual-abuse-under-his-care-5292021/>

¹⁵ Times of India, 6 Aug 2018, Last visited 26.04.2023 <https://timesofindia.indiatimes.com/city/varanasi/up-24-girls-rescued-from-deorias-shelter-home-two-arrested/articleshow/65289926.cms>

¹⁶ WHO. Geneva, Switzerland: WHO; 2018. Undernutrition in Under-Five Children

demands.¹⁷ Undernourished children have lower resistance to infection and are more likely to die from common childhood illnesses such as diarrheal diseases, febrile illnesses, and respiratory infections.¹⁸ The children in orphanages had a significantly higher rate of undernutrition than non-orphanages.¹⁹ In India, orphan children epitomize one of the most prevalent social challenges, susceptible to a range of abuses and exploitations. They face the deprivation of inheritance rights, educational opportunities, access to basic healthcare, and the chance for normal growth and development, alongside the absence of stable shelter.

In a study conducted in Puducherry, it was found that among childcare institution inmates, 39.4% suffered from undernutrition, with dental problems affecting 61% of the population. Additionally, 4.6% reported a persistent cough, and 3.7% had contact with a known case of Tuberculosis.²⁰ A study was also conducted in Bhubaneswar and Cuttack. Among the 146 children aged birth to 72 months living in orphanages, 22.9% experienced stunting, 9.8% suffered from wasting, and 21.3% were underweight. Additionally, 52.1% of the children exhibited developmental delay, with 38.7% of those under 60 months also presenting microcephaly.²¹

In the study orphanage in Kasaragod, 23% of children aged 5 to 16 years were underweight. In comparison, 95% exhibited signs of nutritional deficiency, including 60% with pallor, 34% with nail changes, and 31% with angular stomatitis suggestive of iron deficiency anaemia.²²

Research undertaken within a Delhi-based observation home revealed that skin conditions were the predominant health issue, affecting 31.7% of children, trailed by oral cavity ailments (16%), acute respiratory infections (8.6%), and ear ailments (9.9%).²³ Another study showed similar findings concerning leading morbidities among 297 orphanage children aged 6 to 16 years, found that common morbidities included anaemia (37.4%), skin problems (35.5%), dental problems (28.3%), and malnutrition (23.2%).

3) Psychological Functioning: Emotional and behavioural challenges are more prevalent among orphans and other vulnerable children due to their exposure to abuse, exploitation, neglect, and the absence of parental love and care. A study conducted in Terengganu, Malaysia, involved

sampling 240 orphan adolescents and 240 non-orphan adolescents to evaluate their mental health. The results revealed that orphaned children exhibited notably higher levels of mental health issues, such as depression, anxiety, and stress, compared to non-orphans.²⁴

“The absence of a parent provokes emotional turmoil. The orphans are susceptible to long-term psychological problems including depression, anger, anxiety, and feelings of sadness, and are inclined to withdraw and self-isolate.”²⁵ In a research endeavour undertaken in Visakhapatnam City, it was discovered that 49 out of 292 children and adolescents, constituting 16.78%, exhibited behavioural and emotional challenges. Conduct problems emerged as the most common issue at 34.90%, trailed by peer problems at 15.80%, emotional problems at 14.70%, hyperactivity at 8.60%, and low prosocial behaviour at 3.40%. Another study was conducted to assess emotional and behavioural issues among 50 institutionalized street children aged between 11 and 18 years. The findings revealed that 56% of the respondents reported experiencing emotional and behavioural problems.²⁶

Orphan children are socially isolated and lack skills for interaction and expression and their psychosocial requirements remain more or less unaddressed.²⁷ In a survey carried out in Kashmir, it was found that about one-third of orphaned individuals experienced emotional distress during the conflict. Among them, 38 per cent expressed feelings of despair and uncertainty about the future, while 32 per cent reported anxiety triggered by sudden loud noises or encounters with people in battle attire.²⁸

4) Shelter

“Shelter” describes “the physical place or structure of the home or institution where the child lives and the extent to which the structure provides security, comfort and protection from weather. The quality of shelter provided by orphanages in India can vary widely. While some orphanages maintain high standards of care, others may struggle with overcrowding, inadequate facilities, and limited resources. The living conditions of orphaned children are a critical factor shaping their holistic development and well-being. The child should have a stable shelter that is adequate, dry, and safe. According to the data from the fourth round of India's National Family Health Survey (NFHS - 4) conducted in

¹⁷ Rodriguez L, Cervantes E, Ortiz R. Malnutrition and Gastrointestinal and Respiratory Infections in Children: A Public Health Problem. *Int J Environ Res Public Health*. 2011;8:1174-205

¹⁸ Unicef. Progress for Children: A Report Card on Nutrition. New York, NY, USA: UNICEF; 2016.

¹⁹ Global H. C. Nutrition report: nourishing the SDGs: development initiatives. 2017.

²⁰ Madhu Karam, S. K. (2021). Malnutrition status and other common comorbidities among inmates of childcare homes in puducherry, India - An Analytical Cross-Sectional study. *Clinical Epidemiology and Global Health*, 12, 100837.

²¹ Meher, B. K. (2015). Growth and development among children living in orphanages of odisha, an eastern Indian state. *IOSR Journal of Dental and Medical Sciences*, 14(4):38-41.

²² Haleemath Soudhabi KS, B. B. (2017). Assessment of nutritional status in children of an orphanage. *Indian Journal of Clinical Anatomy and Physiology*, 4(2):156-159.

²³ P Chhabra, S. G. (1996). Health and nutritional status of boys aged 6 to 12 years in a children observation home. *Indian Journal of Public Health*, 40(4), 126-129.

²⁴ Sanurizwanie Mat Sahad, Z. M. (2017). Differences of Mental Health among Orphan and Non-Orphan Adolescents. *International Journal of Academic Research in PSYCHOLOGY*, 4(1), 20-29.

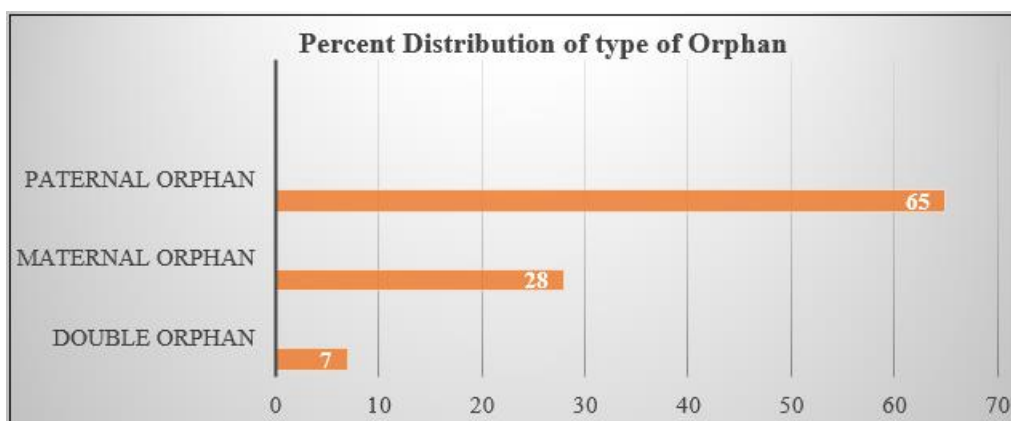
²⁵ Ntuli, B. M. (2020). The psychosocial wellbeing of orphans: The case of early school leavers in socially depressed environment in Mpumalanga Province, South Africa. *PLoS One*, 15(2), .

²⁶ Shanthi.K, J. J. (2014). Emotional And Behaviour Problems Of Institutionalized Street Children. *INDIAN JOURNAL OF APPLIED RESEARCH*, 4(12), 135-137.

²⁷ Abhishek Saraswat and Sayeed Unisa (2017) An In-Depth Study of Psychosocial Distress Among Orphan and Vulnerable Children Living in Institutional Care in New Delhi, India and Their Coping Mechanisms, IUSSP, Capetown

²⁸ Dar Sameena, K. R. (2016). A Study on the Mental Health Status of Children Living in Orphanages in Kashmir. *International Journal of Science and Research*, 5(10), 1125-1129.

2015 - 16, Approximately 5 percent (specifically 4.92 percent) of the total number of children were identified as orphans, constituting a sample size (N) of 49, 958.²⁹



Children living in care institutions as well as orphanages are considered more vulnerable to psychological and social effects on a long - term basis than children are in foster care.³⁰

Homelessness goes beyond the absence of shelter, as scholars attribute it to the lack of access to socio - economic opportunities necessary for human survival. This includes access to job opportunities, healthcare, education, and various other essential services.³¹

2. Conclusion

The journey of orphanhood in India is a deeply poignant one, marked by complex challenges that encompass psychological, social, and physical dimensions. With an estimated 25 million orphaned children in the country, the scale of the crisis underscores the urgent need for attention and action.

Orphaned children in India face a myriad of challenges, ranging from the trauma of parental loss to the pervasive risks of abuse and neglect within institutional settings. The incidence of child abuse, exemplified by events like those witnessed in the Muzaffarpur and Deoria Shelter Home cases, emphasizes the urgent requirement for systemic changes and increased supervision to safeguard the welfare of at - risk children.

Malnutrition further compounds the plight of orphaned children, exacerbating their vulnerability to illness and hindering their overall development. The prevalence of undernutrition among orphanage residents underscores the systemic inequalities that perpetuate the cycle of deprivation and marginalization among orphaned populations.

Psychologically, orphanhood takes a toll on mental health, with orphaned children exhibiting higher levels of depression, anxiety, and stress compared to their non - orphaned peers.

Social isolation and the absence of nurturing parental relationships exacerbate emotional distress, hindering healthy psychosocial development.

Moreover, inadequate shelter exacerbates the challenges faced by orphaned children, depriving them of the stability and security necessary for holistic development. Homelessness, whether literal or figurative, perpetuates a cycle of marginalization, denying orphaned children access to essential resources and opportunities for growth.

In conclusion, addressing the multifaceted challenges of orphanhood demands a comprehensive approach that encompasses systemic reforms, community support, and targeted interventions. Empowering orphaned children with access to education, healthcare, and psychosocial support is essential to nurturing resilience and fostering positive outcomes. By shedding light on the psychological landscapes of orphanhood, this article seeks to inspire greater awareness, empathy, and advocacy for the millions of orphaned children in India and beyond.

References

- [1] Abhishek Saraswat, S. U. (2017). An In - Depth Study of Psychosocial Distress Among Orphan and Vulnerable Children Living in Institutional Care in New Delhi, India and Their Coping Mechanisms. *IUSSP, Capetown*.
- [2] Asif Mahmood, F. U. (2020). Problems of Orphan Children in State - Sponsored Orphanages of Khyber Pakhtunkhwa, Pakistan. *Liberal Arts and Social Sciences International Journal (LASSIJ)*, 4 (1), 102 - 113.
- [3] Benjamin Atwine, E. C. - G. (2005). Psychological distress among AIDS orphans in rural Uganda. *Social science & medicine*, 61 (3): 555 - 564.
- [4] Dar Sameena, K. R. (2016). A Study on the Mental Health Status of Children Living in Orphanages in

Liberal Arts and Social Sciences International Journal (LASSIJ), 4(1), 102-113.

³¹ Monde Makiwane, T. T. (2010). Homeless individuals, families and communities: The societal origins of homelessness. *Development Southern Africa*, 27(1), 39-49.

²⁹ India National Family Health Survey (NFHS-4) <https://dhsprogram.com/pubs/pdf/fr339/fr339.pdf>

³⁰ Asif Mahmood, F. U. (2020). Problems of Orphan Children in State-Sponsored Orphanages of Khyber Pakhtunkhwa, Pakistan.

- Kashmir. *International Journal of Science and Research (IJSR)*, 5 (!0), 1125 - 1129.
- [5] Haleemath Soudhabi KS, B. B. (2017). Assessment of nutritional status in children of an orphanage. *Indian Journal of Clinical Anatomy and Physiology*, 4 (2): 156 - 159.
- [6] Madhu Karam, S. K. (2021). Malnutrition status and other common comorbidities among inmates of childcare homes in puducherry, India - An Analytical Cross - Sectional study. *Clinical Epidemiology and Global Health*, 12, 100837.
- [7] Meher, B. K. (2015). Growth and development among children living in orphanages of odisha, an eastern Indian state. *IOSR Journal of Dental and Medical Sciences*, 14 (4): 38 - 41.
- [8] Monde Makiwane, T. T. (2010). Homeless individuals, families and communities: The societal origins of homelessness. *Development Southern Africa*, 27 (1), 39 - 49.
- [9] Ntuli, B. M. (2020). The psychosocial wellbeing of orphans: The case of early school leavers in socially depressed environment in Mpumalanga Province, South Africa. . *PLos One*, 15 (2),.
- [10] P Chhabra, S. G. (1996). Health and nutritional status of boys aged 6 to 12 years in a children observation home. *Indian Journal of Public Health*, 40 (4), 126 - 129.
- [11] Pathak, A. U. (n. d.). Child Abuse in India – An Analysis. *India Think Council*.
- [12] Ravneet Kaur, A. V. (2018). A Descriptive Study on Behavioral and Emotional Problems in Orphans and Other Vulnerable Children Staying in Institutional Homes. *Indian Journal of Psychological Medicine*, 40 (2), 160 - 168.
- [13] Sanurizwanie Mat Sahad, Z. M. (2017). Differences of Mental Health among Orphan and Non - Orphan Adolescents. *International Journal of Academic Research in PSYCHOLOGY*, 4 (1), 20 - 29.
- [14] Shanthi. K, J. J. (2014). Emotional And Behaviour Problems Of Institutionalized Street Children. *INDIAN JOURNAL OF APPLIED RESEARCH*, 4 (12), 135 - 137.
- [15] UNICEF. (2006). Africa's orphaned and vulnerable generationss: Children affected by HIV/AIDS. . *New York, Vintage Press*.
- [16] Verma, S. (2021). Mental Health Of Children Orphaned By COVID - 19 In India. *Ilkogretim Online - Elementary Education Online*, 20 (6), 3204 - 3211.