UGC Sponsored National Conference on
REDEFINING PROFESSIONAL SOCIAL WORK
EDUCATION AND PRACTICE IN THE PRESENT SCENARIO:
A Multi-disciplinary Perspective

February 8 & 9, 2019
(Friday & Saturday)

Organized by
PG & RESEARCH DEPARTMENT OF SOCIAL WORK
Bishop Heber College (Autonomous), Tiruchirappalli

in collaboration with
INDIAN DEVELOPMENT FOUNDATION
A National NGO committed to Health, Education & Development, Mumbai
RATIONALE OF THE CONFERENCE

“Social work is a practice-based profession and an academic discipline that promotes social change and development, social cohesion, and the empowerment and liberation of people. Principles of social justice, human rights, collective responsibility and respect for diversities are central to social work. Underpinned by theories of social work, social sciences, humanities and indigenous knowledge, social work engages people and structures to address life challenges and enhance wellbeing.

- Definition approved by IFSW General Meeting and the IASSW General Assembly in July 2014:

The 21st-century challenges to social justice, human rights, and citizenship posed by transnational capital, growing global inequality and social exclusion, and multiple forms of violence confront the limits of the social work imagination and call for creative and critical interventions that focus on social justice. There are indications that social work education is currently failing in globally relevant teaching. Global and national standards for social work education should develop appropriate perspectives addressing the negative feelings of communities. If taken seriously, the Global Agenda and the call for more social work impact on global issues puts huge responsibilities on the educational sector to prepare professionals with sufficient knowledge to engage, social work educators needs to prepare students to with a minimum level of global literacy.

In this context, The Post Graduate Department of Social Work, Bishop Heber College, crossing over 35 years of offering qualitative services to the younger generation and the community at large, is organizing a two-days National Conference on ‘Redefining Professional Social Work Education and Practice in the Present Scenario: A Multi-Disciplinary Perspective’ will bring together academics and stakeholders from Education, Industry and the Government and Social Service sectors in India.

I am sure the conference would serve as a platform to examine and contest the ever-changing dimensions of professional social work education -being and also provides opportunity for an open exchange on the changing scenario in social work education and practice with academics and practitioners from the fields of Community Development, Clinical Social Work and Industrial Social Work. They will throw the spotlight on local and regional research findings, empirical cases, and policy experiences.

Dr. A. UMESH SAMUEL JEBASEELAN
Organizing Secretary
ABOUT THE ORGANISING SECRETARY

Dr. A. Umesh Samuel Jebaseelan holds currently the post of Dean of Research and Development & Associate Professor in Social Work, in Bishop Heber College, Tiruchirappalli. Dr. Umesh Samuel was a University Rank holder in MSW and has the credit of having received the first PhD degree awarded from Bharathidasan University in Social Work Discipline in 1995. He has over 33 years of teaching experience in MSW and 27 years in MBA, 22 years in M.Phil and 24 years in PhD. He is a recognized research advisor for guiding MBA programme in 7 Universities. He has published 100 plus research articles in the refereed and peer reviewed national and international journals.

He is a recipient of many awards like Tamilnadu State Award for Best NSS officer (1998), Bharathidasan University Best NSS officer Award (2000) and Best Researcher Award four times (2009, 2013, 2014 & 2016). He has also received “Best Faculty Award in Humanities – 2013” from Nehru group of Institutions, Coimbatore. Recently, he has received 2 awards one from Venus International Foundation for Best Faculty Award in June 2015 and Rajiv Gandhi Gold Medal Award for his "Outstanding Individual Achievement and Distinguished Service in Research and Social Work" in August 2015. He is a recipient of Bharat Ratna Jawaharlal Nehru Gold Medal Awards for his Outstanding Individual Achievement in Social Work in August 2016.

As a Research Advisor for guiding research work leading to the award of Ph.D. degree, he has to his credit of 28 candidates awarded PhD degree in Social Work (one in Management) and more than 67 candidates awarded for M.Phil Degree. He has the credit of producing highest PhD in Social Work discipline in India which is noteworthy to mention.

He had been to Liverpool Hope University, UK twice to deliver lectures to the students of Social Work discipline. He served as a Project Lead, DelPHE Project, Sponsored by British Council – a collaborative research Project between Bishop Heber College, Stella Maris College, Chennai, Madras Christian College, Chennai and Liverpool Hope University, UK. He served as Honorary Project Director for Institute for Applied Social Sciences (IASS) - a UK based research Institute from 2008 - 2011

He also served as the Hon. Project Director for the GFATM round 7 –An Internationally funded Project to train HIV Counsellors in Tamilnadu, Pondicherry and Kerala and received a grant of more than 4 Crores from the Global Fund and recently he received a grant of 13,500 US dollars from United Board, Asia for training the research scholars in social science disciplines on the theme “Recent Trends in Social Science Research”

He had the credit of being the NAAC Steering Committee Co-ordinator twice (Re-accreditation 2nd Cycle and 3rd cycle) where Bishop Heber College was graded A+ in the 2nd cycle and A (3.58 CGP) in the 3rd cycle. He also served as Dean IQAC for 11 years.
ABOUT THE ORGANIZERS

THE UNIVERSITY GRANTS COMMISSION of India (UGC India) is a statutory body set up by the Indian Union government in accordance to the UGC Act 1956 under Ministry of Human Resource Development, and is charged with coordination, determination and maintenance of standards of higher education. It provides recognition to universities in India, and disburses funds to such recognised universities and colleges. V.S. Chauhan is the incumbent chairman. Its headquarters is in New Delhi, and six regional centres in Pune, Bhopal, Kolkata, Hyderabad, Guwahati and Bangalore. UGC is modelled after University Grants Committee of UK which was an advisory committee of the British government and advised on the distribution of grant funding amongst the British universities. The committee was in existence from 1919 until 1989.

BISHOP HEBER COLLEGE is a religious minority educational institution established by the Tiruchirappalli – Thanjavur Diocese of the Church of South India. Its main objective is to cater to the best possible higher education. Bishop Heber College was the first college to be established in Tiruchirappalli. The College was accredited with 5 stars by the National Assessment and Accreditation Council (NAAC) in May 2001 and was Reaccredited with ‘A’ Grade with a CGPA of 3.58 out of 4, during March 2007. Our College has been recognised by the UGC as "College of Excellence" during 2017. The College celebrated its Golden Jubilee during the academic year 2016-2017.

MASTER OF SOCIAL WORK : In 1982, the Bishop Heber College upgraded the course to the postgraduate level and started MA (Social Work), affiliated to the Bharathidasan University. Our Department has an unprecedented 37 Years of glorious and dedicated service in Social Work Education & Practice and we are marching on from strength to strength. Our Concern for Contemporary Social Issues is exemplified by the major and minor projects that we take up for the welfare of the underprivileged. We offer Consultancy Services and have taken up Networking and Collaborative Initiatives towards International Social Work, which is the need of the hour. Forging links towards building sustainable communities is one of our important objectives. We have a special Commitment and concern for our rural brethren and this is reflected in all our endeavours towards their welfare. The Department continues its journey towards reaching the un-reached. Our Department offering a full time two – year Master’s level Social Work programme (MSW), we also offer programmes leading to research degree of M.Phil. and Ph.D., affiliated to Bharathidasan University, Tiruchirappalli.

INDIAN DEVELOPMENT FOUNDATION (IDF) was established as a Charitable Public Trust and Society with the Charity Commissioner, Mumbai in 1984. IDF is a self-reliant NGO in India. IDF has never sought nor taken any Government grant or support from major foreign donor agencies so far. The objectives of the foundation are accomplished through public donations received from various sources. It is one of the largest networking and self-reliant NGOs in India. IDF is a proud partner of 'Stop TB' Partnership of WHO and the Partnership for TB Care and Control in India. IDF offers social internship programmes to students from various Universities / Colleges / Institutes in India and also a few students from International locale. The vision of IDF is to work towards a better India which provides for basic health, education and empowerment for every Citizen, and to support the Government of India in it's Vision 2020 programme.
From the Organizers’ Desk……

Greetings to you all in the name of God Almighty.

It gives us immense pleasure to release the proceedings of the National Conference. This conference has attracted papers of great intellectual and academic value. The intellectual deliberations and exchange of ideas along with the plenary sessions will encourage the participants to contribute towards the success of the Conference. The enormity of theme of the Conference will allow not only the keynote speakers but also the participants to share their innovative ideas on sub-themes related to “REDEFINING PROFESSIONAL SOCIAL WORK EDUCATION AND PRACTICE IN THE PRESENT SCENARIO: A Multi-Disciplinary Perspective”

At this juncture, we would like to express our gratitude to Rt. Rev. Dr. D. Chandrasekaran, Chairman, College Governing Board and Bishop, CSI Tiruchirappalli Thanjavur Diocese, Dr. D. Paul Dhayabaran, Principal and Dr. A. Relton, Associate Professor and Head, Department of Social Work, Bishop Heber College, Tiruchirappalli for continuous support, motivation and for giving us the opportunity to organize this Conference. A special word of thanks to Dr. ARK Pillai, Founder and President, Indian Development Foundation and Dr. Narayan B. Iyer, Chief Executive Officer, Indian Development Foundation (IDF), Mumbai for collaborating with us to organize the event. Our appreciations to our colleagues and Research Scholars for all their support in scrutinizing the Abstracts and Full papers sent by the contributors. Our Sincere thanks to Dr. K. Kaviarasu, Assistant Professor of English, Bishop Heber College for the help rendered in fixing the Journal for Publication

God Bless

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Psychological Contract among the Executives in a Leading Manufacturing Sector at Tamil Nadu

B. BabuPrasath*
Dr. A. Umesh Samuel Jebaseelan**

Abstract
The psychological contract can be defined as "an individual’s beliefs about the terms of the exchange agreement between employee and employer (Rousseau, 1989). Psychological Contract is the fulfillment of unwritten expectations from employees and the employer at the employment situation. Higher the contract denotes higher the ownership that the workforce holds towards the organization. The present study deals with the level of Psychological Contract reflected among the executives in a leading manufacturing sector at Tamil Nadu. The objectives of the study are to find out the Psychological Contract in the dimensions of Employee Obligation, Employer Obligation, Psychological Contract Transition and Psychological Contract Fulfillment. The researcher used a standardized scale developed by Denise M. Rousseau (2008). A total of 40 respondents were taken for the study. The data collected was systematically processed and analyzed. The major findings reveal that nearly half of respondents said that they have average level of Employee Obligation, Employer Obligation, Psychological Contract Transition and Psychological Contract Fulfillment.

Keywords: Psychological Contract; Obligations; Ownership.

1. Introduction
Psychological Contract is defined as an individual’s beliefs concerning the mutual obligations that exist between him/herself and the employer. These obligations arise out of the belief that a promise has been made either explicitly and the fulfillment of promissory obligations by one party is contingent upon the fulfillment of obligations by the other. Therefore, the psychological contract comprises an individual’s perception of mutual obligations that exist in the exchange with his/her employer and these are sustained through the norm of reciprocity.

In tracing the development of the psychological contract, we focus on the seminal works of Argyris (1960), Levinson, Munden, Mandl and Solley (1962) and Schein (1965). The work of Blau (1964) and Gouldner (1960) represents the foundational ideas of social exchange theory upon which subsequent theorizing on the psychological contract draws.

Although Argyris (1960) was the first to coin the term Psychological Contract, the idea of the employment relationship as an exchange can be traced to the writings of Bernard (1938) and March and Simon (1958).

Review of Literature
Suneet Walia (2016) – The employment contract provides a formal, legal agreement between employer & employee and sets boundaries in which employment relationship should be conducted.

Along with the formal contract there arises many hopes and expectation that becomes the threshold of the bond and future relationship between the employer and employee. This is termed as psychological contract. Psychological Contract is a dynamic employment characteristic (Schalk and Roe 2007; Willem, Vos, &Bue lens, 2010).

Psychological contract consist of individuals beliefs regarding the terms and conditions of the exchange agreements between themselves & their organization (Rousseau, 1989; Willem, Vos, &Buelens, 2010).

Psychological contract emerge when individuals believe that their organizations has promised to provide them with certain rewards in return for the contributions they make to the organization (Turnley & Feldman, 2000; Willem, Vos, & Bue lens, 2010).

Further, Psychological contract refers to the relationship between employee & employer in terms of unwritten expectations that exists (Rousseau, 1989; Willem, Vos, & Buelens, 2010).

Aim of the Study:

*Second Year MSW, PG and Research Department of Social Work, Bishop Heber College, Tiruchirappalli
** Associate Professor and Dean (R and D) PG and Research Department of Social Work, Bishop Heber College, Tiruchirappalli.
The aim of the study is to analyze the level of Psychological Contract prevails among the executives in a leading manufacturing sector at Tamil Nadu.

Objectives of the Study:
1. To describe the Socio-Demographic characteristics of the respondents.
2. To study the job related aspects of the respondents.
3. To study the Psychological Contract of the respondents with respect to the dimensions of Psychological Contract such as Employee Obligation, Employer Obligation, Psychological Contract Transition, Psychological Contract Fulfillment.
4. To suggest suitable measures to improve the Psychological Contract in the organization.

2. Research Methodology
A Descriptive Study has been undertaken. Executives from various departments who has accessibility to collect data has chosen. Simple Random Sampling technique by using lottery method was followed.

Collection of samples and sources
A sample of 40 respondents was taken out of 386 executives working in a leading manufacturing organization at Tamil Nadu.

Tools of Data Collection:
The data was collected through a structured questionnaire which had the following dimension namely Employee Obligation, Employer Obligation, Psychological Contract Transition, Psychological Contract Fulfillment. The questionnaire was divided into two parts. First part is about the socio-demographic details of an employee and second part is related to the key factors associated with the Psychological Contract of an employee. The scale was developed by Denise M. Rousseau in the year 2008.

3. Result and Analysis
Table 1. Respondents by their Socio-Demographic Characteristics

<table>
<thead>
<tr>
<th>Socio-Demographic characteristics</th>
<th>Number of Respondents n=40</th>
<th>Percentage (%)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Age</td>
<td></td>
<td></td>
</tr>
<tr>
<td>20 - 30</td>
<td>6</td>
<td>15.0</td>
</tr>
<tr>
<td>31 – 40</td>
<td>7</td>
<td>17.5</td>
</tr>
<tr>
<td>41 – 50</td>
<td>13</td>
<td>32.5</td>
</tr>
<tr>
<td>51 – 60</td>
<td>14</td>
<td>35.0</td>
</tr>
<tr>
<td>Gender</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Male</td>
<td>40</td>
<td>100.0</td>
</tr>
<tr>
<td>Female</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>Educational Qualification</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Technical</td>
<td>28</td>
<td>70.0</td>
</tr>
<tr>
<td>Non-Technical</td>
<td>12</td>
<td>30.0</td>
</tr>
<tr>
<td>Marital Status</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Married</td>
<td>39</td>
<td>97.5</td>
</tr>
<tr>
<td>Single</td>
<td>1</td>
<td>2.5</td>
</tr>
<tr>
<td>Type of Family</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Joint</td>
<td>11</td>
<td>27.5</td>
</tr>
<tr>
<td>Nuclear</td>
<td>29</td>
<td>72.5</td>
</tr>
<tr>
<td>Native Background</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Urban</td>
<td>8</td>
<td>20.0</td>
</tr>
<tr>
<td>Rural</td>
<td>19</td>
<td>47.5</td>
</tr>
<tr>
<td>Semi- Urban</td>
<td>13</td>
<td>32.5</td>
</tr>
</tbody>
</table>

From the above table it is evident that 35 Percent of respondents belong to the age group of 51 – 60. Almost all the respondents are male. 70 Percent of the respondents have Technical Education Qualification.
Almost all the respondents are married. Majority 72.5 Percent of the respondents belong to nuclear family. Nearly half 47.5 Percent of the respondents have rural as their native background.

Table 2. Respondents by their Job related aspects

<table>
<thead>
<tr>
<th>Job Related Aspects</th>
<th>Number of Respondents</th>
<th>Percentage(%)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Department</td>
<td>n=40</td>
<td></td>
</tr>
<tr>
<td>Technical</td>
<td>21</td>
<td>53.0</td>
</tr>
<tr>
<td>Non-Technical</td>
<td>19</td>
<td>47.0</td>
</tr>
<tr>
<td>Designation</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Additional Officer</td>
<td>4</td>
<td>10.0</td>
</tr>
<tr>
<td>Assistant Engineer</td>
<td>17</td>
<td>42.5</td>
</tr>
<tr>
<td>Deputy General Manager</td>
<td>6</td>
<td>15.0</td>
</tr>
<tr>
<td>Deputy Engineer</td>
<td>9</td>
<td>22.5</td>
</tr>
<tr>
<td>Engineer</td>
<td>1</td>
<td>2.5</td>
</tr>
<tr>
<td>Senior Engineer</td>
<td>3</td>
<td>7.5</td>
</tr>
<tr>
<td>Total Years of Experience</td>
<td></td>
<td></td>
</tr>
<tr>
<td>1 – 10</td>
<td>10</td>
<td>25.0</td>
</tr>
<tr>
<td>11 – 20</td>
<td>5</td>
<td>12.5</td>
</tr>
<tr>
<td>21 – 30</td>
<td>12</td>
<td>30.0</td>
</tr>
<tr>
<td>31 – 40</td>
<td>13</td>
<td>32.5</td>
</tr>
<tr>
<td>Years of Experience at present organization</td>
<td></td>
<td></td>
</tr>
<tr>
<td>0 – 10</td>
<td>27</td>
<td>67.5</td>
</tr>
<tr>
<td>11 – 20</td>
<td>2</td>
<td>5.0</td>
</tr>
<tr>
<td>31 – 40</td>
<td>11</td>
<td>27.5</td>
</tr>
<tr>
<td>Monthly Income(in Rupees)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>30000 – 50000</td>
<td>14</td>
<td>35.0</td>
</tr>
<tr>
<td>51000 - 70000</td>
<td>11</td>
<td>27.5</td>
</tr>
<tr>
<td>71000 – 90000</td>
<td>7</td>
<td>17.5</td>
</tr>
<tr>
<td>91000 – 110000</td>
<td>5</td>
<td>12.5</td>
</tr>
<tr>
<td>111000 - 130000</td>
<td>2</td>
<td>5.0</td>
</tr>
<tr>
<td>131000 – 150000</td>
<td>1</td>
<td>2.5</td>
</tr>
<tr>
<td>Number of Companies Served Before</td>
<td></td>
<td></td>
</tr>
<tr>
<td>0</td>
<td>18</td>
<td>45.0</td>
</tr>
<tr>
<td>1</td>
<td>15</td>
<td>37.5</td>
</tr>
<tr>
<td>2</td>
<td>5</td>
<td>12.5</td>
</tr>
<tr>
<td>3</td>
<td>2</td>
<td>5.0</td>
</tr>
<tr>
<td>Number of Training Programmes attended</td>
<td></td>
<td></td>
</tr>
<tr>
<td>0 – 10</td>
<td>30</td>
<td>75.0</td>
</tr>
<tr>
<td>11 – 20</td>
<td>9</td>
<td>22.5</td>
</tr>
<tr>
<td>21 – 30</td>
<td>1</td>
<td>2.5</td>
</tr>
<tr>
<td>Member Of Trade Union/ Professional Bodies</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Yes</td>
<td>14</td>
<td>35.0</td>
</tr>
<tr>
<td>No</td>
<td>26</td>
<td>65.0</td>
</tr>
</tbody>
</table>
From the above table it is concluded that more than half 53 Percent of the respondents belong to the Technical departments. Nearly half 42.5 Percent of the respondents holds the designation as Assistant Engineer. 32.5 Percent of the respondents have total experience between 31 and 40 years. Majority of the respondents have less than 10 years of experience in present organization. 35 Percent of the respondents are earning between Rs.30,000 and 50,000 as their monthly income. Nearly half (45 Percent) of the respondents have no previous work experience. Majority of the respondents have attended less than 10 training programmes. 35 Percent of the respondents are members of Professional bodies.

Table 3. Respondents with respect to various dimensions of Psychological Contract

<table>
<thead>
<tr>
<th>Dimensions</th>
<th>Number of Respondents</th>
<th>Percentage (%)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Employee Obligation</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Low</td>
<td>11</td>
<td>27.5</td>
</tr>
<tr>
<td>Average</td>
<td>19</td>
<td>47.5</td>
</tr>
<tr>
<td>High</td>
<td>10</td>
<td>25.0</td>
</tr>
<tr>
<td>Employer Obligation</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Low</td>
<td>10</td>
<td>25.0</td>
</tr>
<tr>
<td>Average</td>
<td>20</td>
<td>50.0</td>
</tr>
<tr>
<td>High</td>
<td>10</td>
<td>25.0</td>
</tr>
<tr>
<td>Psychological Contract Transition</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Low</td>
<td>12</td>
<td>30.0</td>
</tr>
<tr>
<td>Average</td>
<td>18</td>
<td>45.0</td>
</tr>
<tr>
<td>High</td>
<td>10</td>
<td>25.0</td>
</tr>
<tr>
<td>Psychological Contract Fulfilment</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Low</td>
<td>10</td>
<td>25.0</td>
</tr>
<tr>
<td>Average</td>
<td>19</td>
<td>47.5</td>
</tr>
<tr>
<td>High</td>
<td>11</td>
<td>27.5</td>
</tr>
<tr>
<td>Overall</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Low</td>
<td>10</td>
<td>25.0</td>
</tr>
<tr>
<td>Average</td>
<td>17</td>
<td>42.5</td>
</tr>
<tr>
<td>High</td>
<td>13</td>
<td>32.5</td>
</tr>
</tbody>
</table>

From the above table it is concluded that nearly half of the respondents have average level of Psychological Contract with respect to the dimensions of Psychological Contract such as Employee Obligation, Employer Obligation, Psychological Contract Transition and Psychological Contract Fulfilment respectively.

Table 4. Correlation table represents respondents with respect to Age and the dimensions of Psychological Contract

<table>
<thead>
<tr>
<th>Dimensions</th>
<th>Correlation Value</th>
<th>Statistical Inference</th>
</tr>
</thead>
<tbody>
<tr>
<td>Age&amp; Employee Obligation</td>
<td>-.022</td>
<td>Not Significant</td>
</tr>
<tr>
<td></td>
<td></td>
<td>P&gt;(0.05)</td>
</tr>
<tr>
<td>Age&amp; Employer Obligation</td>
<td>-.144</td>
<td>Not Significant</td>
</tr>
<tr>
<td></td>
<td></td>
<td>P&gt;(0.05)</td>
</tr>
<tr>
<td>Age&amp; Psychological Contract Transition</td>
<td>.223</td>
<td>Not Significant</td>
</tr>
<tr>
<td></td>
<td></td>
<td>P&gt;(0.05)</td>
</tr>
<tr>
<td>Age&amp; Psychological Contract Fulfilment</td>
<td>-.102</td>
<td>Not Significant</td>
</tr>
<tr>
<td></td>
<td></td>
<td>P&gt;(0.05)</td>
</tr>
<tr>
<td>Age&amp; Overall</td>
<td>-.015</td>
<td>Not Significant</td>
</tr>
<tr>
<td></td>
<td></td>
<td>P&gt;(0.05)</td>
</tr>
</tbody>
</table>
It is inferred from the above table that there is no significant relationship between the age of the respondents and perception of Psychological contract with respect to the dimensions of psychological Contract.

Table 5. Correlation table represents respondents with respect to Experience at present organization and the dimensions of Psychological contract

<table>
<thead>
<tr>
<th>Dimensions</th>
<th>Correlation Value</th>
<th>Statistical Inference</th>
</tr>
</thead>
<tbody>
<tr>
<td>Experience at present organization &amp; Employee Obligation</td>
<td>.064</td>
<td>Not Significant P&gt;(0.05)</td>
</tr>
<tr>
<td>Experience at present organization &amp; Employer Obligation</td>
<td>- .228</td>
<td>Not Significant P&gt;(0.05)</td>
</tr>
<tr>
<td>Experience at present organization &amp; Psychological Contract Transition</td>
<td>.172</td>
<td>Not Significant P&gt;(0.05)</td>
</tr>
<tr>
<td>Experience at present organization &amp; Psychological Contract Fulfillment</td>
<td>-.062</td>
<td>Not Significant P&gt;(0.05)</td>
</tr>
<tr>
<td>Experience at present organization &amp; Overall</td>
<td>-.009</td>
<td>Not Significant P&gt;(0.05)</td>
</tr>
</tbody>
</table>

It is evident from the above table that there is no significant relationship between the Years of experience at present organization of the respondents and perception of Psychological contract with respect to the overall dimensions of psychological contract.

**Findings**

The analysis shows that almost all the respondents are Male. It also shows that 35% of the respondents belong to the age group of 51-60. The analysis shows that absolute majority of respondents (67.5%) have less than 10 years of experience in the present organization. 35 Percent of the respondents are earning salary between Rs.30,000 and 40,000 as their monthly income. The analysis shows that 42.5 Percent of the respondents have average level of Psychological Contract with respect to the overall dimensions of psychological contract. It is also evident that there is no significant relationship between age, years of experience and income of the respondents with the dimensions of psychological contract.

**4. Conclusion and Suggestions**

The study shows the importance of Psychological Contract in an organization and the impact that it shows towards the employee’s ownership of organization. The study shows that majority of the respondents have average level of Psychological Contract and suitable measures was given to improvise the condition.

**Suggestions:**

The study suggest that

1. The management shall take measures to explain the aims, objectives and the expectations of the management from the employees in achieving the company objectives.
2. The management shall impart sufficient need based training to enhance the knowledge and skills of the employees towards their assigned task.
3. The organization shall organize sufficient programmes to create awareness about the changing technology likely to be adapted in the company improve contract transition of employees by improving employer & employee relationship.
4. The management shall follow an open door policy in order to have cordial relationship, to express their views and ideas in the context of their job related issues.
5. The management shall address the needs and grievances of the employees now and then to create a sense of satisfaction among the employees.
6. The management shall take extra measures to explain the roles and responsibilities in order to prevent role conflict and role ambiguity.
References

Work-Life Balance among Women Employees in Banking Sector at Ooty

M.Thasneem*
Dr.S.Sangeeta**

Abstract
Work and personal life are inter-connected and interdependent. Spending more time in office allocating with customers and the burdens of the job can delay and affect the personal life, which sometimes make it difficult to even complete the domestic responsibilities. Due to alterations in the labor market and the altering nature of work, Work-Life balance is directly at the pinnacle of the agenda for Government and Private bodies. It is recognized that Work-Life balance can contribute indirectly to productivity gains through increased retention and assists organizations to respond to demands needs more effectively. All this made the researcher to carry out the present study. Researcher adopted Descriptive research design. The aim of the study is to find out the Work-Life balance among Women Employees in banking sector. Entire 100 employees working in different banks in ooty was taken for the study. Therefore census method was used to collect data. Self – prepared interview – Schedule was used as tool for data collection. The secondary data was collected from the books and web resources. Statistical tools like tables and percentage for analyzing and interpretation was used. The major findings will be discussed in the full paper.

Key words: Work-Life balance; Banking Sector; Women Employees.

1. Introduction
Women of the early centuries were mostly confined to their kitchen. Very few women had access to higher education. Earlier time they were forced to be at the mercy of their fathers or husband. After that the fast developing world women had access to higher education, they were employed in factories, farms, shop work etc. Changes in the social, political and economic fabric of societies have influenced and continue to influence both the nature of employment relationship to life outside work. In India, it is taken for granted that economic activities are entirely the privilege of males while domestic work, child bearing and child rearing are the sole occupations of women. Historically, Since times immemorial, women have been burdened with work of all sorts all through their lives. From imitation to all household chores and outside, their role as worker is significant, unique and burdensome. But they are discriminated and exploited all over. Work-Life balance is now at important one of the agenda for Government and private bodies. The work-life balance can lead and help directly and indirectly to improve their family and develop productivity gains through their hard work. In any business and organization activities it is utmost important to have well trained, well groomed and emotionally balanced workers are available to take up employment challenges.

Problem with Work-Life Balance
Everyone talks about the importance of attaining the elusive work-life balance. But in my opinion, trying to find just the thing balance is not possible. In today’s fast-paced workplace, most of us forced to do our work fast and with limited resources. There seems to be more strain to be successful-whether that means than ever before. While doing the job of two or three people at work, we’re probable to be exemplary parents and have a fulfilling personal life in which we rear perfect children. Enjoy our hobbies, volunteer in the community, and take superb care of our bodies, spirits, and judgments. Maintain that while the quest for balance is a wonderful goal, its just not a realistic goal foe most folks. Instead, it has become one more “to-do” on an ever-expanding, guilt-inducing list. Translating that into bigger picture, there are times when we need to work more than usual and other times when we can get more time away. Sometimes we can concentrate more intently on our hobbies and passions; at other times different priorities take precedence. There may be times when we take really good care of ourselves, and other times when that slips a piece. Times where we dedicate a great deal of tending to our family, and other times when there is less energy and daily time to focus on them. And that’s ok; it is as it needs to be. The aim of balance is to live a well-rounded life, to renew and freshen up your

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**Associate Professor, Department of Social Sciences, Faculty of Developing Tamil, Tamil University, Thanjavur
creative energies on a regular base then so you can reach your highest potential.

Importance of Work-Life Balance

Today work-life balance has become an progressively more pervasive apprehension for employers as well as employees. Demographic changes as seen in the increasing number of women in the workplace and dual career families have brought forth increasingly diverse work force and a greater demand of the employees to balance their work and non-work lives (Bharat, 2003). Today’s career women are continually challenged by the needs of full-time work and when the day is done at the office, they extend more of the responsibilities and commitments at home. “Successfully achieving work-life balance will ultimately produce a more satisfied workforce that contributes to productivity and success.

Review of Literature

Rajesh K. Yadav and Nishant Dabhade (2013) in his research state that above mentioned personnel conducted study on Work-Life balance amongst the working women in public sector banks there are so many nationalized public sector banks and schedule private banks all over India. When compare to any other employment work in banks are unique are to women sector. All types of people from ordinary layman to highly educated personal are attending banks. Deal with such people in their daily transaction is a challenge and task of the bank employees. The working women especially manage the visit of customer successfully by required suggestion and guide them properly without getting on to their nerves. Working women are conformance in the work load, transaction of the costumers in a bank when compare to another jobs, further non complicated and non technical work.

Maragatham and Amudha (2016) conducted a research on case work study of working women in both public and private sector employees working in basic level as clark, cashier and manage. Especially the women employees are effected and find difficult in managing their work-life. The study has adopted simple random sampling method has been used to collect the primary information from the 150 bank women employees those whom are married women with the help of administering a questionnaire. The study reveals an existence of substantial relationship between spousal status and personal factors like education, physical and mental health, emotional balance, number of dependents and the like. The study concluded that married women employees are mostly affected and finding difficult in managing their work-life.

Selvakumarv and et al., (2016) conducted research on Work-Life Balance of women employees in commercial banks. The work-life balance is having its responsibilities at work and responsibilities outside paid work. The another comparer the work life and personnel life to two sides of a same coin. Both side one equally important. The women employee has to balance work and has to balance work and life as well. To achieve the support of the organization is very important. The main objective of the research of the factor that lead to work-life balance of the employees of the banking sector

Saloni Pahuja (2016) in his research analyzed Work-Life balance of working females of Axis bank. The analyze is view in banking sector now-a-days the work pressure increased considerably and there is advancement in technology but the above development is inevitable. Normally advancement in technology reduces the burden of work and simplifying the work as far as possible. It may take same more time to adopt the methodology in due course in the work become routine and easy. There is no detained exclamation regarding the role of women are very pathetic obviously carefully handling of money and work conscious balance the work-life balance and it is not so hard as described in the article.

Narayana and Neelima (2017) conducted an empirical study on Work-life balance on women employees in banking sector. This paper presents Work-Life balance of the women employees in the banking sector. The researcher has taken the eight parameters of the study. The researcher collected the data through interview method, by using sampling technique of convenience sampling Method for the study. Through analyze the statistical techniques of Mean and standard Deviation by using SPSS 17.0 version. The results found in this study yields good results for working women managed their work-life balance in banking sector.

2. Methodology

Objectives of the Study

• To measure the employees opinion towards the Work-Life balance
• To suggest the suitable measure based on finding of the study

The aim of the study is to find out the Work-Life balance employees in banking sector at Ooty. They were collected by using self-prepared questionnaire, the questions consist of two parts the socio demographic detail like age, designation, years of service, monthly salary, marital status and so on, has been dealt. The next part of the questionnaire consists of statement to access the women employees work life
balance. It consists of five dimensions viz., Support from family, Childcare, Dependent care, Personal Life expectations, Self-Management and WLB Policies. These dimensions are based on concept of work life balance and its dimensions. There are positive and negative aspects in the questions. Further many discussions with guide, implementing officials of team in the banks. So, the researcher used primary and secondary data for the present study. Through information about Work-Life balance has been studied, and describes their life in terms of their work and so on. This has been made to arrive logical conclusion. In this regard the conceptual structure with in which the research is conducted and constitutes the characteristic of various factors. Hence the research adopted descriptive research design for the present study. Entire 100 employees working in different banks in ooty was taken for the study. Therefore census method was used to collect data.

Finding
- 56 percent of the respondents were fall in high level of support from family.
- 61 percent of the respondents were in low level of childcare and dependent care.
- 51 percent of the respondents were in high level expectations on their personal life.
- 52 percent of the respondents were in low level with regard to Self-Management.
- 60 percent of the respondents were opinion as low with regard to their WLB Policies.
- 52 percent of the respondents were in low level with regard to Overall Over all Work Life.

3. Suggestions and Conclusions

Suggestions
- There should be more feasible timings for the women employees working hours, alternate working hours and so on which has been increase job satisfaction.
- The women employees can be support by providing appropriate technology to aid their day to day tasks.
- The top management should accept and understand the women employees’ duties and responsibilities while taking leaves.
- Job location for them should be according to their preference so that, they can manage their home life as well.
- There should stringent norms for the women employees who face discrimination at work place.

Conclusions
Careful planning and personal effort is the advice from those who have found balance in both career and home life. Improving the balance for employees can improve their overall health and general well-being. It can also help to improve their morale, motivation and general job satisfaction, leading to improved performance in the workplace. In our increasingly hectic world, the work-life strategy seeks to find a balance between work and play. A sentence that brings the idea of work life balance to the point is: “Work to live. Don’t live to work.”

References
Organizational Climate Existences in Rubco Wood Industry in Kannur, Kerala”

Divya Joseph

Abstract
Organizational climate is very important factor to be consider in studying and analyzing the organization because it greatly influence the total performance of the people work in it every management must create a better climate which enhance the capacity and potential of the people in the organization and as whole to flourish the future . A person’s negative perception about the organization not only affect his contribution to the organization but also serves as the seed for the problem creation in future. If organizational climate maintained high in the industry can never have a problem arising because of human resources .The researcher had an enri
tching experience by conducting this study, it was an opportunity for the researcher to know more about organizational climate, and this study tries to systematic analysis of organizational climate existences in Rubco wood industry

Keyword: Organizational climate; Rubco wood industry; Performance;

1. Introduction
According to Campbell, “Organizational climate can be defined as a set of attributes specific to a particular organization that may be induced from the way that organization deals with its members and its environment. A persons perception of organization to which he belongs is organizational climate .it is a set of characteristics and other factors that are perceived by the employee about their organization, it is the human environment in which employees do their work. One cannot see it by one can feel and experience it. It is affected by everything and everyone in the organization like fingerprints, organizations are different from one another. Each organizations has its own culture, tradition and method of action Organizational climate refers the environment, it refers to the environment, it refers to the attitude of top management, company policies and other matters and it is a set of measurable properties of the work environment, that are perceived by the people who live and work in it and that influence their motivation and behavior of the people in the organization. No organization can ignore organizational climate because it influence on the behavior of person.

Organizational climate prevails in all organization, it may differ from each other .A sound organization climate is very important for the attainment or achievement of organizational goal a person’s insights of the organization to which he belongs is organizational climate. It is a set of characteristic and other factors that are perceived by the employees about their organization which serves as a major force in influencing their behavior.

At the present day context organizational climate in some organization climate some organizations are bast
ing and efficient, others are easy going, some are quiet human, other they are hard and cold. But with all these an organization tends to attract and keep people who fits its climate. This study tries to analysis the elements, perception regarding organizational climate.

2. Research Method
Aim.
All organizational theoreticians and researchers unanimously agree that a Social Climate is extremely important for the ultimate achievement of organizational goals. Organizational Climate though abstract in concept, is normally associated with job performance and job satisfaction and morale of the employee’s climate. It is a commonly experienced phenomenon and after referred to by many expressions as atmosphere, surrounding milieu, environmental and culture etc. Organizational Climate is very important factor to be considered in studying and analyzing organization because it has profound influence on the outlook, wellbeing and attitudes of organizational members and thus, on their total performance. The main aim of the study is to analysis the existence organizational climate.
Significance of the study.

*Guru Dev College of Arts and Science, Kerala.
A conductive organizational climate result is the better performance and job satisfaction. Typical elements that contribute to a favorable climate are performance standard, communication flow, reward system, responsibility conflict resolution, organizational structure, motivational level, decision making process, support system, warmth, identity problem, plays a vital role in enhancing organizational effectiveness and organizational development. The present study is one such attempt to study the various contributing factors of an organizational climate and to study the existing organizational climate in RUBCO Wood Industry in Kannur Kerala.

Conceptual frame work

Technology and scientific advancement have led to the growth of industries however it is to be kept in mind that efficient functioning of an industry is determined by the labour force. Organizational climate is the human environment within which organizational employee do their work. Organizational climate is affected by almost everything that occur an organization. Climate of an origination can influence motivation, performance, and job satisfaction. Thus, organizational climate is very important factor to be considered in studying and analyzing organizations because it greatly influence the outlooks, wellbeing and attitude of people working in it and their total performance. Thus a sound climate is a long term preposition. Modern industrial organizations is a complex entity, to meet the challenges and achieve excellence every management must create a climate which increase the capacity or potential of the organization to prosper in the long term. It is essential that the management should be aware of the employee’s feelings about the total system that contribute to form organizational climate.

The Researcher wanted to study the existence climate and how the employees are cope up with this climate. The Researcher conducted this study in Rubcco wood industry, Kerala, Kannur district. The researcher respondents are the workers of the particular company.

3. Findings

Table 1. Distribution of respondents by their total organizational level

<table>
<thead>
<tr>
<th>Total organizational level</th>
<th>No. of Respondents(n=60)</th>
<th>Percentage</th>
</tr>
</thead>
<tbody>
<tr>
<td>Low</td>
<td>30</td>
<td>50%</td>
</tr>
<tr>
<td>High</td>
<td>30</td>
<td>50%</td>
</tr>
<tr>
<td>Total</td>
<td>60</td>
<td>100%</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Gender</th>
<th>No. Of Respondents (N=60)</th>
<th>Percentage</th>
</tr>
</thead>
<tbody>
<tr>
<td>Male</td>
<td>33</td>
<td>55%</td>
</tr>
<tr>
<td>Female</td>
<td>27</td>
<td>45%</td>
</tr>
<tr>
<td>Total</td>
<td>60</td>
<td>100%</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Qualification</th>
<th>No. Of Respondents(N=60)</th>
<th>Percentage</th>
</tr>
</thead>
<tbody>
<tr>
<td>Below 10</td>
<td>8</td>
<td>13.3%</td>
</tr>
<tr>
<td>Plus two</td>
<td>14</td>
<td>23.3%</td>
</tr>
<tr>
<td>Degree</td>
<td>23</td>
<td>38.3%</td>
</tr>
<tr>
<td>P.g</td>
<td>4</td>
<td>6.7%</td>
</tr>
<tr>
<td>Others</td>
<td>11</td>
<td>18.3%</td>
</tr>
<tr>
<td>Total</td>
<td>60</td>
<td>100%</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Status</th>
<th>No. Of Respondents(N=60)</th>
<th>Percentage</th>
</tr>
</thead>
<tbody>
<tr>
<td>Married</td>
<td>47</td>
<td>78.3%</td>
</tr>
<tr>
<td>Un married</td>
<td>13</td>
<td>21.7%</td>
</tr>
<tr>
<td>Total</td>
<td>60</td>
<td>100%</td>
</tr>
</tbody>
</table>

The table shows that half percentage (50%) of the respondents possessed have high level of organizational climate and half of the respondents (50%) possessed low level of organizational climate.
Figure 1. Total organizational Level

Half of the (50%) of the respondents belongs to the age group between 31 to 40. More than half of the respondents (55%) are belongs to the male category. And 38.3% of the respondents are degree holders. Majority (78.3%) of the respondents are married. Half of the respondents have equal and better perception with regard to organizational to organizational climate in the dimensions of performance standard, communication flow, reward, responsibility, conflict resolution, organizational structure, motivational level, decision making, support system, warmth, identity problem, and total level of organizational climate.

Table 2. Distribution of respondents by their different dimensions of organizational climate

<table>
<thead>
<tr>
<th>Dimensions of organizational climate</th>
<th>No of respondents</th>
<th>Percentage (100%)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Performance standard</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Low</td>
<td>36</td>
<td>60</td>
</tr>
<tr>
<td>High</td>
<td>24</td>
<td>40</td>
</tr>
<tr>
<td>Communication flow</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Low</td>
<td>36</td>
<td>60</td>
</tr>
<tr>
<td>High</td>
<td>24</td>
<td>40</td>
</tr>
<tr>
<td>Reward system</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Low</td>
<td>36</td>
<td>60</td>
</tr>
<tr>
<td>High</td>
<td>24</td>
<td>40</td>
</tr>
<tr>
<td>Responsibility</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Low</td>
<td>30</td>
<td>50</td>
</tr>
<tr>
<td>High</td>
<td>30</td>
<td>50</td>
</tr>
<tr>
<td>Conflict resolution</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Low</td>
<td>36</td>
<td>60</td>
</tr>
<tr>
<td>High</td>
<td>24</td>
<td>40</td>
</tr>
<tr>
<td>Organizational structure</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Low</td>
<td>34</td>
<td>56.7</td>
</tr>
<tr>
<td>High</td>
<td>26</td>
<td>43.3</td>
</tr>
<tr>
<td>Motivational level</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Low</td>
<td>31</td>
<td>51.7</td>
</tr>
<tr>
<td>High</td>
<td>29</td>
<td>48.3</td>
</tr>
<tr>
<td>Decision making process</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Low</td>
<td>37</td>
<td>61.7</td>
</tr>
<tr>
<td>High</td>
<td>23</td>
<td>38.3</td>
</tr>
<tr>
<td>Support system</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Low</td>
<td>31</td>
<td>51.7</td>
</tr>
<tr>
<td>High</td>
<td>29</td>
<td>48.3</td>
</tr>
<tr>
<td>Warmth</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Low</td>
<td>39</td>
<td>65</td>
</tr>
<tr>
<td>High</td>
<td>21</td>
<td>35</td>
</tr>
<tr>
<td>Identity problem</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Low</td>
<td>45</td>
<td>75</td>
</tr>
<tr>
<td>High</td>
<td>15</td>
<td>25</td>
</tr>
</tbody>
</table>
The above table shows that half of the respondents have equal and better perception with regard to organizational climate in the dimensions of responsibility and total organizational climate. Whereas lower perception with regard to organizational climate in the dimensions of performance standard, communication flow. Reward, conflict resolution, organizational structure, motivational level, decision making, support system, warmth, and identity problems.

4. Discussion and Conclusion

Discussion

Half of the respondents have equal and better perception with regard to organizational climate in the dimensions of performance standard. Communication flow, reward, responsibility. Conflict resolution. Organizational structure, motivational level, decision making, support system, warmth, identity problem, and total level of organizational climate. But the reality is exactly half of the respondents are not satisfied with the climate of the organization. So for improving the organizational climate the researcher suggested some suitable suggestions may that would be helpful for the management for improving the organizational climate they are: The committed and hardworking employees would be awarded periodically to boost the employees performance. More importance must be given for quality of work life because it covers all aspects ,it should be improved and the periodic training programs should be improved the skills of the employees and to improve the technical as well as perceptual skills of workers .Managerial policies may be clearly laid and communicated to the workers so that the workers have a clear idea about the organizational goals as well as personal goals .Some recreational facilities in the form of indoor games like carom board, chess etc., may be provided for the workers to relax and recharge.

Conclusion

organizational climate is very important factor to be consider in studying and analyzing the organization because it greatly influence the total performance of the people work in it every management must create a better climate which enhance the capacity and potential of the people in the organization and as whole to flourish the future . A person’s negative perception about the organization not only affect his contribution to the organization but also serves as the seed for the problem creation in future. If organizational climate maintained high in the industry can never have a problem arising because of human resources .The researcher had an enriching experience by conducting this study, it was an opportunity for the researcher to know more about organizational climate, this study also gave a chance for the researcher to know how a research study is being conducted. Present study reveals that the fact that there improvement should be needed in organizational climate regarding various dimensions of organizational climate, the researcher conclude with the satisfaction that she had made an attempt to it.

References

5. GuptA S.P. Statistical methods. New Delhi, Sulthan Chand company ltd
Emotional Intelligence among Management Staff in a Manufacturing Sector, Tamil Nadu

K. SarveshVijey*
Dr. A. Umesh Samuel Jebaseelan**

Abstract
Emotional Intelligence is nothing but a capacity to understand one’s feelings, emotions and also helps to manage their emotions in that situation. It also refers to the ability of controlling, defending, perceive and evaluate the emotions. The aim of the present study is to find the emotional intelligence of the management staff in a manufacturing sector in Tamil Nadu. The main objective of the study is to understand and learn about the emotions and how to manage it. The standardized scale consists of 5 dimensions like Self Awareness, Self-Management, Self-Motivation, Empathy and Social Skills. A Sample of 40 executives was taken as respondents for the study. The data collected was systematically processed and analyzed. The salient findings are nearly half of the respondents are having average level of perception in Self Awareness. Half of the respondents are having average level of perception in Self-Management. Nearly half of respondents are having average level of perception in Self-Motivation and nearly half of the respondents are average level of perception in Empathy and nearly half of the respondents are having average level of perception in Social Skills.

Keywords: Emotional Intelligence; Self Awareness; Self-Motivation; Self-Management; Empathy; Social Skills.

1. Introduction

"Emotional Intelligence is the ability to sense, understand, value and effectively apply the power of emotions as a source of human energy, information, trust, creativity and influence" -Daniel Goleman

Emotional Intelligence (EI) must somehow combine two of the three states of mind cognition and effect, or intelligence and emotion. Emotional intelligence refers to the ability to perceive, control and evaluate emotions. Some researcher suggests that emotional intelligence can be learned and strengthened, while other claim it is an inborn characteristic. A number of testing instruments have been developed to measure emotional intelligence, although the content and approach of each test varies. If a worker has high emotional intelligence, he or she is more likely to be able to express his or her emotions in a healthy way and understand the emotions of those he or she works with, thus enhancing work relationship and performance. Emotional Intelligence is not about being soft. It is different way of being smart – having the skill to use his or her emotions to help them make choices in the moment and have more effective control over themselves and their impact on others.

Emotional Intelligence allows us to think more creatively and to use our emotions to solve problems. Emotional Intelligence probably overlaps to some extent with general intelligence. The Emotionally intelligent person is skilled if four areas: identifying emotions, using emotions, understanding emotions and regulating emotions.

Review of Literature
Sanchez-Ruiz, Jose, Carlos, Prez-Gonzlez and Petride (2010)Trait emotional intelligence profiles of students from different university faculties had examined that the trait emotional intelligence (trait EI or trait emotional self-efficacy) profiles of 512 students from five university faculties: technical studies, natural sciences, social sciences, arts and humanities. Using the Trait emotional intelligence Questionnaire, researchers hypothesized that (a) social science would score higher than technical studies in Emotionality, (b) arts would score higher than technical studies in emotionality, (c) arts would score lower than technical studies in self-control and (d) there would be an interaction between gender and faculty, whereby female students would score higher than male students within the social sciences only. Several other exploratory comparison were also performed. Results supported hypotheses (a), (b) and (d), but not hypothesis (c), although the difference were in the predicted direction.

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**Associate Professor & Dean (R&D), P.G and Research Department of Social Work, Bishop Heber College, Tiruchirappalli.
Bar-on’s (1997) The Bar-on Emotional Quotient inventory (EQ-I): “A test of Emotional Intelligence” this study portrays social responsibility and empathy as specific interpersonal skills. Goleman’s 1995 model includes the same empathetic awareness and attunement, this is the skill required recognize emotions in others. Knowing those varying EI models the study of relationship of EI to moral/ethical behavior and to values has been inconsistent. The morale/ethics/values dimensions are often described as part of the basic for educational programs involving EI as well designed empirical research in this area is very much necessity.

2. Methodology

Aim of the Study

An aim of the study is to analyze the Emotional Intelligence among Management Staff in Manufacturing Sector, Tamil Nadu

Objectives of the study

The main objectives of the study are:

- To describe the Socio demographic details of the respondents
- To understand the Job related aspects of the respondents
- To study the Emotional Intelligence in the areas of Self Awareness, Self -Management, Self-Motivation, Empathy, Social Skills
- To suggest suitable measures to enhance Emotional level of the respondents.

The study is descriptive in Nature; relevant data has been collected from both primary and secondary source of information. The universe of the study is 50 Management staff and the researcher was able to collect the data from 40 respondents. The researcher could not collect the data from 10 respondents due to their non-availability and heavy work pressure. The data was collected through structured questionnaire which had the following dimensions namely Self Awareness, Self-Management, Self-Motivation, Empathy and Social Skills. The questionnaire was divided into two parts. First part is about the socio demographic details of an employees and second part is related to the key factors associated with the Emotional intelligence of an employee. The scale was developed by Daniel Goleman 1995 and the reliability of the tool is found to be .943

<table>
<thead>
<tr>
<th>Socio Demographic</th>
<th>Variables</th>
<th>No. of. Respondents</th>
<th>Percentage</th>
</tr>
</thead>
<tbody>
<tr>
<td>Age Group</td>
<td>20-30</td>
<td>29</td>
<td>72.5</td>
</tr>
<tr>
<td></td>
<td>31-40</td>
<td>8</td>
<td>20.0</td>
</tr>
<tr>
<td></td>
<td>41-50</td>
<td>3</td>
<td>7.5</td>
</tr>
<tr>
<td>Gender</td>
<td>Male</td>
<td>36</td>
<td>90.0</td>
</tr>
<tr>
<td></td>
<td>Female</td>
<td>4</td>
<td>10.0</td>
</tr>
<tr>
<td>Educational Qualification</td>
<td>Engineering</td>
<td>20</td>
<td>50.0</td>
</tr>
<tr>
<td></td>
<td>Arts and Science</td>
<td>12</td>
<td>30.0</td>
</tr>
<tr>
<td></td>
<td>Diploma</td>
<td>8</td>
<td>20.0</td>
</tr>
<tr>
<td>Marital Status</td>
<td>Married</td>
<td>24</td>
<td>60.0</td>
</tr>
<tr>
<td></td>
<td>Single</td>
<td>16</td>
<td>40.0</td>
</tr>
<tr>
<td>Type of the Family</td>
<td>Joint Family</td>
<td>16</td>
<td>40.0</td>
</tr>
<tr>
<td></td>
<td>Nuclear family</td>
<td>24</td>
<td>60.0</td>
</tr>
<tr>
<td>Native Background</td>
<td>Urban</td>
<td>12</td>
<td>30.0</td>
</tr>
<tr>
<td></td>
<td>Semi Urban</td>
<td>15</td>
<td>37.5</td>
</tr>
<tr>
<td></td>
<td>Rural</td>
<td>13</td>
<td>32.5</td>
</tr>
</tbody>
</table>

The socio demographic finding of the respondents gives a clear view of the respondent’s background status which also helps the researcher. The findings reveals that absolute majority of the respondents (72.5%) are between the age group of 20-30. Almost all the respondents (90%) are from the male category. Half of the respondents (50%) had completed their education in Engineering. In the Marital status majority of the respondents (60%) are married. Majority of the respondents (60%) are from the nuclear family and more than one-third of the respondent(37.5%) are from the Semi-Urban background.
Table 2. Respondents by their Job related aspects

<table>
<thead>
<tr>
<th>Job related Aspects</th>
<th>Variables</th>
<th>No. of. Respondents N: 40</th>
<th>Percentage</th>
</tr>
</thead>
<tbody>
<tr>
<td>Experience at the Company</td>
<td>0 - 5</td>
<td>27</td>
<td>67.5</td>
</tr>
<tr>
<td></td>
<td>6 - 10</td>
<td>8</td>
<td>20.0</td>
</tr>
<tr>
<td></td>
<td>11 – 15</td>
<td>5</td>
<td>12.5</td>
</tr>
<tr>
<td>Department</td>
<td>Non-Technical Skills</td>
<td>14</td>
<td>36</td>
</tr>
<tr>
<td></td>
<td>Technical Skills</td>
<td>26</td>
<td>65</td>
</tr>
<tr>
<td>Designation</td>
<td>Manager</td>
<td>5</td>
<td>12.5</td>
</tr>
<tr>
<td></td>
<td>Executives</td>
<td>16</td>
<td>40.0</td>
</tr>
<tr>
<td></td>
<td>Engineer</td>
<td>19</td>
<td>47.5</td>
</tr>
<tr>
<td>Monthly Income</td>
<td>Below 20,000</td>
<td>19</td>
<td>47.5</td>
</tr>
<tr>
<td></td>
<td>21,000 - 30,000</td>
<td>14</td>
<td>35.0</td>
</tr>
<tr>
<td></td>
<td>31,000 - 40,000</td>
<td>2</td>
<td>5.0</td>
</tr>
<tr>
<td></td>
<td>Above 40,000</td>
<td>5</td>
<td>12.5</td>
</tr>
<tr>
<td>No of companies served before</td>
<td>0</td>
<td>17</td>
<td>42.5</td>
</tr>
<tr>
<td></td>
<td>1</td>
<td>7</td>
<td>17.5</td>
</tr>
<tr>
<td></td>
<td>2</td>
<td>13</td>
<td>32.5</td>
</tr>
<tr>
<td></td>
<td>3</td>
<td>3</td>
<td>7.5</td>
</tr>
</tbody>
</table>

The job related findings of the respondents give a clear view of the respondent’s background status which also helps the researcher. The findings reveals that majority of the respondents (67.5%) are between 0-5 years of experience. Majority of the respondents (65%) are from the Technical skill department. Nearly half of the respondents (47.5%) are from the designation of Engineer. Nearly half of the respondents (47.5%) are earing monthly salary below 20,000 and more than one third of the respondents (42.5%) have not experienced before.

Table 3. Respondents by their Various Dimensions

<table>
<thead>
<tr>
<th>Dimensions</th>
<th>Variables</th>
<th>No. of. Respondents N: 40</th>
<th>Percentage</th>
</tr>
</thead>
<tbody>
<tr>
<td>Self-Awareness</td>
<td>Low</td>
<td>13</td>
<td>32.5</td>
</tr>
<tr>
<td></td>
<td>Average</td>
<td>17</td>
<td>42.5</td>
</tr>
<tr>
<td></td>
<td>High</td>
<td>10</td>
<td>25.0</td>
</tr>
<tr>
<td>Self-Management</td>
<td>Low</td>
<td>10</td>
<td>25.0</td>
</tr>
<tr>
<td></td>
<td>Average</td>
<td>20</td>
<td>50.0</td>
</tr>
<tr>
<td></td>
<td>High</td>
<td>10</td>
<td>25.0</td>
</tr>
<tr>
<td>Self-Motivation</td>
<td>Low</td>
<td>11</td>
<td>27.5</td>
</tr>
<tr>
<td></td>
<td>Average</td>
<td>18</td>
<td>45.0</td>
</tr>
<tr>
<td></td>
<td>High</td>
<td>11</td>
<td>27.5</td>
</tr>
<tr>
<td>Empathy</td>
<td>Low</td>
<td>10</td>
<td>25.0</td>
</tr>
<tr>
<td></td>
<td>Average</td>
<td>16</td>
<td>40.0</td>
</tr>
<tr>
<td></td>
<td>High</td>
<td>14</td>
<td>35.0</td>
</tr>
<tr>
<td>Social Skills</td>
<td>Low</td>
<td>12</td>
<td>30.0</td>
</tr>
<tr>
<td></td>
<td>Average</td>
<td>16</td>
<td>40.0</td>
</tr>
<tr>
<td></td>
<td>High</td>
<td>12</td>
<td>30.0</td>
</tr>
<tr>
<td>Over All</td>
<td>Low</td>
<td>10</td>
<td>25.0</td>
</tr>
<tr>
<td></td>
<td>Average</td>
<td>19</td>
<td>47.5</td>
</tr>
<tr>
<td></td>
<td>High</td>
<td>11</td>
<td>27.5</td>
</tr>
</tbody>
</table>

From the above table it concludes that majority of the respondents are having an average level of perception in Emotional Intelligence with respect to the dimensions of Self-Awareness (42.5%), Self-Motivation (45%), Empathy (40%) and Social Skills (40%). Half of the respondents are having an average level of the perception in Self-Management (50%).
Table 4. Karl Pearson Co-Efficient of Correlation between the age of the Respondents with various dimensions of Emotional Intelligence

<table>
<thead>
<tr>
<th>Socio Demographic &amp; Dimensions</th>
<th>Correlation Values</th>
<th>Statistical Inference</th>
</tr>
</thead>
<tbody>
<tr>
<td>Age &amp; Self-Awareness</td>
<td>.372*</td>
<td>P &gt; 0.05 Significant</td>
</tr>
<tr>
<td>Age &amp; Self-Management</td>
<td>.251</td>
<td>P &gt; 0.05 Not Significant</td>
</tr>
<tr>
<td>Age &amp; Self-Motivation</td>
<td>.125</td>
<td>P &gt; 0.05 Not Significant</td>
</tr>
<tr>
<td>Age &amp; Empathy</td>
<td>.229</td>
<td>P &gt; 0.05 Not Significant</td>
</tr>
<tr>
<td>Age &amp; Social Skills</td>
<td>.264</td>
<td>P &gt; 0.05 Not Significant</td>
</tr>
<tr>
<td>Age &amp; Overall</td>
<td>.292</td>
<td>P &gt; 0.05 Not Significant</td>
</tr>
</tbody>
</table>

Karl Pearson co-efficient of correlation test was applied and it found that there is no significant relationship between the age of the respondents and the dimensions of Self-Management, Self-Motivation, Empathy, Social Skills and overall Emotional Intelligence and there is significant value between the age of the respondents and the dimension Self-Awareness, however it is understood that there is a positive correlation between age and all the dimension and overall Emotional Intelligence. Hence the management needs to continue awareness and training programmes in Emotional Intelligence.

Table 5. Z-Test between the Genders of the Respondents with various dimensions of Emotional Intelligence

<table>
<thead>
<tr>
<th>Variables</th>
<th>Group</th>
<th>Mean Scores</th>
<th>Standard Deviation</th>
<th>Statistical Inference</th>
</tr>
</thead>
<tbody>
<tr>
<td>Gender &amp; Self-Awareness</td>
<td>Male</td>
<td>41.9444</td>
<td>5.68177</td>
<td>Z = -0.531</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>df = 38</td>
<td>df = 38</td>
</tr>
<tr>
<td></td>
<td>Female</td>
<td>43.5000</td>
<td>3.87298</td>
<td>P &gt; 0.05, Not Significant</td>
</tr>
<tr>
<td>Gender &amp; Self – Management</td>
<td>Male</td>
<td>35.2778</td>
<td>6.15333</td>
<td>Z = 0.084</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>df = 38</td>
<td>df = 38</td>
</tr>
<tr>
<td></td>
<td>Female</td>
<td>35.0000</td>
<td>7.16473</td>
<td>P &gt; 0.05 Not Significant</td>
</tr>
<tr>
<td>Gender &amp; Self-Motivation</td>
<td>Male</td>
<td>36.0556</td>
<td>7.52878</td>
<td>Z = -0.181</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>df = 38</td>
<td>df = 38</td>
</tr>
<tr>
<td></td>
<td>Female</td>
<td>36.7500</td>
<td>2.62996</td>
<td>P &lt; 0.05 Not Significant</td>
</tr>
<tr>
<td>Gender &amp; Empathy</td>
<td>Male</td>
<td>37.7500</td>
<td>7.95478</td>
<td>Z = -1.237</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>df = 38</td>
<td>df = 38</td>
</tr>
<tr>
<td></td>
<td>Female</td>
<td>42.7500</td>
<td>2.62996</td>
<td>P &gt; 0.05 Not Significant</td>
</tr>
<tr>
<td>Gender &amp; Social Skills</td>
<td>Male</td>
<td>37.7778</td>
<td>7.91783</td>
<td>Z = -1.536</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>df = 38</td>
<td>df = 38</td>
</tr>
<tr>
<td></td>
<td>Female</td>
<td>44.0000</td>
<td>4.08248</td>
<td>P &lt; 0.05 Not Significant</td>
</tr>
<tr>
<td>Gender &amp; Overall</td>
<td>Male</td>
<td>188.81</td>
<td>29.47427</td>
<td>Z = -0.875</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>df = 38</td>
<td>df = 38</td>
</tr>
<tr>
<td></td>
<td>Female</td>
<td>202.00</td>
<td>15.12173</td>
<td>P &gt; 0.05 Not Significant</td>
</tr>
</tbody>
</table>
Z-Test was applied and it found that there is no significant relationship between the gender of the respondents and in the dimensions of Self-Awareness, Self-Management, Self-Motivation, Empathy and Social Skills and overall Emotional Intelligence, however it is understood that there is a negative difference between gender and Self-Awareness, Self-Motivation, Empathy, Social Skills and overall Emotional Intelligence and there is a positive relation difference between gender and Motivating Emotions. Hence the management needs to improve the Emotional Intelligence level among the both male and female employees.

3. Result and Analysis

1. Nearly half of the respondents (42.5%) are having average level of perception in Self-Awareness
2. Half of the respondents (50%) are having average level of perception in Self-Management
3. Nearly half of the respondents (45%) are having average level of perception in Self-Motivation
4. 40 percent of the respondents are having average level of perception in Empathy
5. 40 percent of the respondents are having average level of perception in Social Skills
6. Nearly half of the respondents (47.5%) are having average level of perception in Emotional Intelligence in an Organization

4. Conclusion

Self-Awareness has gained good recognition among the individuals but still the awareness level among the employees shall be increased.

Self-Management shall be promoted among the employees and managers by regularly conducting “Emotional Competence” training programme.

The Employees need more training and awareness programmes in Self-Motivation to enhance the Emotional level.

Empathy among the respondents shall be promoted by conducting many training programmes to enhance the Emotional level of the respondents.

The employees need more awareness in Social Skills to develop the Emotional Intelligence level among the respondents.

Emotional Intelligence plays an important role for employees in the organization. This paper has made a better understanding about the various reasons for emotions and better control over the emotion. Handling emotions is an important requirement for a HR and among the employees as well. This will help to increase organizational commitment, improve, productivity, efficiency, retain best talent and motivate the employee to give their best. This study confirms that both emotional intelligence and work life balance together create organizational success and develop competitive advantage for an organization.

From the data collected and on study researcher conclude that the majority of the respondents are having average level in perception of Emotional Intelligence with regards to dimensions of Self Awareness, Self-Motivation, Self-Management, Empathy and Social Skills.

References

Organizational Culture in Multi National Company - A Comparative Study

Gloria Martin*
Dr. M. Daniel Solomon**

Abstract
“The only thing of real importance that leaders do is to create and manage culture.” Organisational Culture is one of the most important construct in management research. It consists of a basic set of values, ideas, preferences and ethics, code of conduct, principles and beliefs, reinforced by logical expectations and assumptions as well as responsive attitudes and ethical norms which create distinctiveness among human groups. Keeping in this view the researcher aim is to study the perception of organizational culture which prevails in Multi National Company (MNC). The present study was undertaken with the objective of i) to compare the organizational culture in MNC of two different region of India (South & North) as perceived by the respondents. ii) To suggest appropriate measures for strengthening organizational culture. The researcher collected 62 data from a MNC in Tiruchirappalli and 62 data from MNC Delhi. The standardized scale by Udai Pareek was used to collect data the scale consist of eight dimension namely openness, confrontation, trust, authenticity, pro action, autonomy, collaboration and experimentation. The data was analyzed using SPSS and the major Finding reveals that Tiruchirappalli MNC has high organizational culture when compared to Delhi MNC.

Keywords: Organizational: Culture: Multi National Company: Delhi: Tiruchirappalli

1. Introduction
Organizational culture is the key to organizational excellence, and the function of leadership is the creation and management of culture. Interpreting and understanding organizational culture is an important activity for managers and consultants because it affects strategic development, productivity and learning at all levels. Organizational theorist began to apply the term culture to corporate/work situations over the past 20 years. Initially the term was used to describe the leadership practices and later in the 80’s management gurus defined culture in terms of symbols, slogans, heroes, rites and rituals etc. these may be elements of culture but they are not the heart of culture. Culture can be defined as a combination of values, acts, beliefs, communication and simplification of behaviour which gives direction to people. The basic idea of culture arrives through sharing of learning processes which is based on the proper allocation of resources. According to Arnold “Organisational culture is the distinctive norms, beliefs, principles and ways of behaving that combine to give each organisation its distinct character”. Every organization has set of principles and policies mandatory for the entire employee to follow. The beliefs, ideologies and practices of an organization form its culture which gives a sense of direction to the executive. The work culture goes a long way in creating the brand image of the organization and making it distinct from its competitors. The executive are the true assets of an organization. They strive hard to deliver their level best and achieve the assigned targets within the stipulated time frame.

Review of Literature:
Chukwu B.A, S.M. Aguwamba, E.C. Kanu, (2017), they study the blow of organizational culture on recital of banking industry in Nigeria. This study investigated the impact of organizational culture on performance of banking sector in Nigeria. Most Nigerian banks are performing below potential not withstanding with their high subsidy due to the fact that they not maneuver under brawny value of corporate culture. The gigantic malfunction in the banking sector which brought about anguish is distinguishable to lack of strong culture. The culture of credit analysis and trust were destroyed. A survey was conducted in this study using questionnaire. The data was collected by analyzed using percentage and multiple regressions. The findings show that a significant and constructive relation lies between the independent variables, cultural fit, reinforcement of pillar of existence, enhancement of organizational effectiveness and dependent variable organizational performance. A significant and negative relation exist between the independent variable consistent pattern of behaviour and dependent variable organizational performance. These results are consistent

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** Associate Professor, PG & Research Department of Social Work, Bishop Heber College, Tiruchirappalli
with the literature. We recommend that organizations should assemble muscular and consistent culture that will help to pattern their expansion and buttress the pillars of its perceptual existence. Organizations should not calculatingly pull down the cultural pedestals upon which organizations stand, just for egotistical interest.

2. Research Methodology

The main aim of the study is to compare the organizational culture at MNC in Delhi and Tiruchirappalli. The researcher likes to find out the difference between the organizational culture of Delhi MNC and Tiruchirappalli MNC and also to provide suitable suggestion to improve the organization culture. The researcher formulated a hypothesis for this present study. The research is comparative in nature because the researcher likes to compare the culture of organization with two MNC. The universe of the study consists with a total number of 638 employees in Tiruchirappalli MNC and 560 employees in Delhi Company. The researcher collected 62 data from a MNC in Tiruchirappalli and 62 data from MNC Delhi from the universe, the researcher adopted simple random Sampling method to collect the data. The standardized scale by Udal Pareek was used to collect data, the scale consist of eight dimensions namely openness, confrontation, trust, authenticity, pro action, autonomy, collaboration and experimentimation. Questionnaire method was adopted to collect the data from the respondents. Statistical Package for Social Science (SPSS) was adopted for analyzing and the results reveals

3. Results &Analysis

Finding based on the respondents in Tiruchirappalli Company says that:

More than half 52.3 percent of the respondents are having high level of openness about organizational culture in Tiruchirappalli, less than half 46.8 percent of the respondents are having low level of openness about organization in Tiruchirappalli. It is clear that more than half 61.3 percent of the respondents are having low level of confrontation about organizational culture in Tiruchirappalli; more than one third 38.7 percent of the respondents are having high confrontation about organization in Tiruchirappalli. It shows that more than half 59.7 percent of the respondents are having low level of trust about the organization in Tiruchirappalli, less than half 40.3 percent of the respondents are having high level of trust about organization in Tiruchirappalli. It is evident that more than half 51.6 percent of the respondents are having high level of authenticity about organization in Tiruchirappalli, less than half 48.4 percent of the respondents are having low level of authenticity about organization in Tiruchirappalli. It is clear that more than half 62.9 percent of the respondents are having low level of pro action about the organization in Tiruchirappalli; more than one third 37.1 percent of the respondents are having high level of pro action about organization in Tiruchirappalli. It shows that half 59.7 percent of the respondent are having low level of autonomy about the organization in Tiruchirappalli, less than half 40.3 percent of the respondent are having high level of autonomy about organization in Tiruchirappalli. It shows that more than half 51.6 percent of the respondents are having low level of collaboration about the organization in Tiruchirappalli, less than half 48.4 percent of the respondents are having high level of collaboration about organization in Tiruchirappalli. It shows that more than half 56.5 percent of the respondents are having high level of experimentitation about the organization in Tiruchirappalli, less than half 43.5 percent of the respondents are having low level of experimentitation about organization in Tiruchirappalli. It is evident more than half 53.2 percent of the respondent are having high level of organizational culture about the organization in Tiruchirappalli, less than half 46.8 percent of the respondent are having low level of culture about organization in Tiruchirappalli.

Finding based on the respondents in Delhi Company says that:

It is found that more than one third 74.2 percent of the respondents are having high level of openness about organizational culture in Delhi, less than one fourth 25.8 percent of the respondents are having low level of openness about organization. It is clear that more than half 69.4 percent of the respondents are having high level of confrontation about organizational culture in Delhi; more than one third 30.6 percent of the respondents are having low confrontation about organization in Delhi. It is found that more than half 51.6 percent of the respondents are having high level of trust value about the organization in Delhi, less than half 48.4 percent of the respondents are having low level of trust about organization in Delhi. It is evident that more than half 59.7 percent of the respondents are having low level of authenticity about the organization in Delhi, less than half 40.3 percent of the respondents are having high level of authenticity about organization in Delhi. It is clear that more than half 64.5 percent of the respondents are having high level of pro action about the organization in Delhi; more than one third 35.5 percent of the respondents are having low level of pro action about organization in Delhi. It shows that less than three fourth 74.2 percent of the respondents are having low level of autonomy about the organization in Delhi, less than one fourth 25.8 percent of the respondent are having high level of
autonomy about organization in Delhi. It shows that less than three fourth 79.0 percent of the respondents are having low level of collaboration about the organization in Delhi, less than one fourth 21.0 percent of the respondent are having high level of collaboration about organization in Delhi. It shows that more than half 56.5 percent of the respondents are having low level of experimentation about the organization in Delhi, less than half 43.5 percent of the respondents are having high level of experimentation about organization in Delhi. It is evident less than three fourth 75.8 percent of the respondents are having low level of culture about the organization in Delhi; more than one fourth 24.2 percent of the respondents are having high level of culture about organization in Delhi.

Findings based on the Differences between the Organizational Culture of Delhi and Tiruchirappalli Companies: The findings in the difference of Organizational Culture among Multi National Companies in Tiruchirapalli and Delhi using OCTAPACE Scale which has 8 dimensions are as follows: the respondents of Delhi Company have high Openness by 21% than Tiruchirapalli Company, the respondents of Delhi Company also have high Confrontation by 30.7% than Tiruchirapalli Company, the respondents of Delhi Company are higher in Trust component by 11.3% than Tiruchirapalli Company, whereas the respondents of Tiruchirapalli Company have higher Authenticity by 8.1% than Delhi Company but the respondents of Delhi Company have better Proaction by 21% more than that of Tiruchirapalli Company, the respondents of Delhi Company have high Openness by 21% than Tiruchirapalli Company, the respondents of Tiruchirapalli Company have high Autonomy by 14.5% than Tiruchirapalli Company, the respondents of Tiruchirapalli Company have high Collaboration factor by 24.7% more than Delhi Company and the respondents of Tiruchirapalli Company have high Experimentation by 13% than Delhi Company. Thus the overall Organizational Culture of Tiruchirapalli Company is higher by 29% than Delhi Company.

Reasons behind the Differences in Organizational Culture’s Between the Two MNC’s

Providing equal opportunities for both male and female candidates at workplace plays a major role in balancing roles and responsibilities at work place as the female gender ratio in Trichy and Delhi is 1:10 which affects the organizational culture.

Often it is the young employees that have more innovative and creative ideas that contribute to the development of better organizational culture and productivity of the organizations. The respondents in the age group till 40 is more in Tiruchirapalli compared to that of Delhi by 21% which definitely boosts up the organizational culture of Tiruchirapalli.

Table 1. Association between Tiruchirapalli MNC and Delhi MNC with regard to their organisational culture

<table>
<thead>
<tr>
<th>Dimensions</th>
<th>Trichy</th>
<th>Delhi</th>
<th>Statistical Inference</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. Openness</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Low</td>
<td>29</td>
<td>16</td>
<td>25.8%</td>
</tr>
<tr>
<td>High</td>
<td>33</td>
<td>46</td>
<td>74.2%</td>
</tr>
<tr>
<td>2. Confrontation</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Low</td>
<td>38</td>
<td>19</td>
<td>30.6%</td>
</tr>
<tr>
<td>High</td>
<td>24</td>
<td>43</td>
<td>69.4%</td>
</tr>
<tr>
<td>3. Trust</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Low</td>
<td>37</td>
<td>30</td>
<td>48.4%</td>
</tr>
<tr>
<td>High</td>
<td>25</td>
<td>32</td>
<td>51.6%</td>
</tr>
<tr>
<td>4. Authenticity</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Low</td>
<td>32</td>
<td>37</td>
<td>59.7%</td>
</tr>
<tr>
<td>High</td>
<td>30</td>
<td>25</td>
<td>40.3%</td>
</tr>
<tr>
<td>5. Pro-action</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Low</td>
<td>39</td>
<td>22</td>
<td>35.5%</td>
</tr>
<tr>
<td>High</td>
<td>23</td>
<td>40</td>
<td>64.5%</td>
</tr>
<tr>
<td>6. Autonomy</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Low</td>
<td>37</td>
<td>46</td>
<td>74.2%</td>
</tr>
<tr>
<td>High</td>
<td>25</td>
<td>16</td>
<td>25.8%</td>
</tr>
<tr>
<td>7. Collaboration</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Low</td>
<td>32</td>
<td>49</td>
<td>79.0%</td>
</tr>
<tr>
<td>High</td>
<td>30</td>
<td>13</td>
<td>21.0%</td>
</tr>
<tr>
<td>8. Experimentation</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
It is evident from the above table that among the eight dimensions of Organizational Culture of OCTAPCE Scale Openness, Confrontation, Proaction and Collaboration are significant whereas Trust, Authenticity, Autonomy and Experimentation are non-significant. Therefore, there is significant association between Tiruchirapalli MNC and Delhi MNC with regards to their organisational culture. Further it is also evident that more than half of the respondents (53.2%) have high level organizational culture in Tiruchirapalli. It is evident less than three fourth 75.8 percent of the respondents are having low level of culture about the organization in Delhi. Hence, the calculated value is lesser than table value (p>0.05). The research hypothesis (H₀) is accepted.

4. Suggestions and Conclusion

Suggestions to Tiruchirappalli Company

It is evident that openness is low among executives in Tiruchirapalli Company so it is suggested that company to generate an atmosphere by giving opportunity to executives to articulate their views, ideas and suggestions without trepidation. It also very clear that confrontation is also low so the management should prompt executives to get rid of bashfulness and take up exigent work, provide personality development programs. Trust is low in the organization in order to improve the management should give assurance to the executives that all information are kept confidential.

Suggestions to Delhi Company

As the autonomy is low, the company should give liberty to executives to act in their own and should respect the individuals in decision making. Collaboration is comparably low so the organization should hearten job rotation which will help the executives to carry out work with team spirit. Experimentation factor is also low in the company so it is suggested the company to egg on the executive to try new-fangled and innovative means to solve trouble. To improve the organizational culture, it is suggested to the company to have periodical discussion of matters connecting to the organizations.

Conclusion

The present comparative study was undertaken with view measure the perception of organizational culture in terms of OCTAPACE culture. The study helps in outline out the weaker facet of culture in terms of value that triumph in the industry, which helps the top management of industry to expand and sustain an valuable organizational culture in the longer sprint. Edifice a company culture takes time and vigor. An enormous culture attracts the paramount workers, improves recital, augment on the whole withholding in the organization.

References

Abstract
HRIS is a cutting edge strategy and is incredibly created in the consequence of that, the world has turned into a worldwide town. As of late associations have been performing human asset exercises with the utilization of PC based data frameworks. Thus, Human asset data framework is an imperative component to run any association. The primary aim of the present study is to understand the basic functionality of HRIS: The secondary objective is to study the production of reports and its linkage to business decisions in Gleneagles Global Hospital. The study consists of 4 dimensions of Infrastructure, HRIS Software, Reporting and Sustainability. A sample of 54 executives was taken as respondents for the study. The data collected was systematically processed and analyzed. The salient findings are nearly more than half of the respondents have low access towards basic infrastructure, Nearly half of respondents are having low knowledge in HRIS Software in the respective departments, Nearly more than half of the respondents are not generating reports and using those data for practical decisions in their respective business, More than half of the respondents had not received training on HRIS policies and suggested improvement to HRIS where else majority have reported updates to the system and data security are yet to be incorporated.

Keywords: Human Resource Information System; Infrastructure; HRIS Software; Reporting; Sustainability.

1. Introduction
A HRIS, which is otherwise called, a human asset data framework or human asset the executive’s framework (HRMS). It is fundamentally a crossing point of HR and data innovation through HR programming. This permits HR exercises and procedures to happen electronically. To put it another way, a HRIS might be seen as a way, through programming, for organizations of all shapes and sizes to deal with various exercises, including those identified with HR, bookkeeping, the board, and finance. Much of the time, a HRIS will likewise prompt increments in effectiveness with regards to settling on choices of the HR. The choices made ought to likewise increment in quality—and thus, the efficiency of the two representatives and directors should increment and turn out to be increasingly successful. Data are indispensable fixing to the board. On time, exact and important data is vital for arranging and basic leadership. The ongoing decade has seen a huge development in data innovation (IT). There has been a transformation in equipment, programming, and information the board and correspondence innovation. The data framework is a lot of so here in after alluded as HRIS". HRIS is a database which is otherwise called information bank. HRIS are utilized by the business association to streamline its human capital. HRIS is for the most part a database of worker's records which help HR officials.

Review of literature
Practice of HRIS in select private hospitals in Tamil Nadu, Dr. L. Manivannan and R. S. Jayasakthivel Rajkumar, (2017);The aim of this research paper is to find out the practices of Human Resources Information Systems (HRIS) in the select private hospitals of Tamil Nadu.Out of 216 private hospitals in Tamil Nadu, he has selected 30 HR managers working in 30 private hospitals, distributed structured questionnaires to them and used the five scales Liker technique to investigate opinion of the respondents. The study reveals that 33.3 % hospitals selected have used HRIS to the full extent; 43.4%, some extent and 23.3%, a limited extent. The results of the study are found through the survey that80% hospitals have used HRIS for recruitment and selection; 74.3%, payroll and 40%, assessing and training the employees. This study has disclosed a gap between the expected application of HRIS and present level of use in the select private hospitals and also found

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the high cost, lack of infrastructure and knowledge and insufficient training to the employees as the main reasons that are responsible for not implementing HRIS successfully in the select private hospitals of Tamil Nadu.

2. Research Methodology
Objective of study
The study has the following objectives
- To describe the particular socio-demographic condition of the respondents.
- To describe the job related aspect of the respondents.
- To describe various dimensions of HRIS.
- To describe the basic functionality of HRIS.
- To suggest suitable measures to improve Human Resource Information System in Gleneagles Global Hospital.

A comprehensive Descriptive Study has been undertaken. Fact finding research of different kinds like the sample towards HRIS has studied, which is more Descriptive approach of research- which has been done. Executive from various departments who has accessibility to use HRIS has chosen. Simple Random Sampling technique (Lottery method) was followed. The total universe size is 108. The total sample which has been taken as the sample size for the research is 54.

Description about tool
- The researcher followed a standardized scale by “Capacity Plus”- 2009
- Part I is of the Socio Democratic & Job related aspects of the respondents.
- Part II is of the major four dimensions such as Infrastructure, HRIS Software, Reporting and Sustainability of Human Resource Information System
- Reliability: The reliability of the study is 0.870.

Statistical tool employed
- The collected primary data were analyzed with the help of the following statistical tools to fulfill the objectives of the study. The statistical tools employed are socio-demographic analysis, job related analysis.

3. Analysis and interpretation

<table>
<thead>
<tr>
<th>Socio-demographic</th>
<th>Frequency n=54</th>
<th>Percentage</th>
</tr>
</thead>
<tbody>
<tr>
<td>Gender</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Male</td>
<td>26</td>
<td>48.1</td>
</tr>
<tr>
<td>Female</td>
<td>28</td>
<td>58.1</td>
</tr>
<tr>
<td>Age</td>
<td></td>
<td></td>
</tr>
<tr>
<td>22 - 25</td>
<td>21</td>
<td>38.9</td>
</tr>
<tr>
<td>26 - 30</td>
<td>11</td>
<td>20.4</td>
</tr>
<tr>
<td>31 - 35</td>
<td>22</td>
<td>40.7</td>
</tr>
<tr>
<td>Type of family</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Nuclear</td>
<td>54</td>
<td>100</td>
</tr>
<tr>
<td>No of dependent</td>
<td></td>
<td></td>
</tr>
<tr>
<td>2</td>
<td>37</td>
<td>68.5</td>
</tr>
<tr>
<td>3</td>
<td>17</td>
<td>31.5</td>
</tr>
<tr>
<td>Qualification</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Graduate General</td>
<td>34</td>
<td>63.0</td>
</tr>
<tr>
<td>Master’s Degree</td>
<td>20</td>
<td>37.0</td>
</tr>
</tbody>
</table>

It is inferred from the above table that majority of the respondents (58.1%) are Female, 40 percent of the respondents are between the age group of 31 to 35 years, All the respondents are from nuclear family. Majority of the respondents (68.5%) are having two dependents, Majority of the respondents (63%) are graduate generals.
Table 2. Job related aspects of the respondents

<table>
<thead>
<tr>
<th>Job related aspect</th>
<th>Frequency n=54</th>
<th>Percentage (%)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Department</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Operation’s</td>
<td>20</td>
<td>37.0</td>
</tr>
<tr>
<td>Paramedical</td>
<td>17</td>
<td>31.5</td>
</tr>
<tr>
<td>Nursing</td>
<td>17</td>
<td>31.5</td>
</tr>
<tr>
<td>Total years of experience</td>
<td></td>
<td></td>
</tr>
<tr>
<td>1</td>
<td>17</td>
<td>31.5</td>
</tr>
<tr>
<td>2</td>
<td>05</td>
<td>09.3</td>
</tr>
<tr>
<td>3</td>
<td>06</td>
<td>11.1</td>
</tr>
<tr>
<td>4</td>
<td>17</td>
<td>31.3</td>
</tr>
<tr>
<td>5</td>
<td>09</td>
<td>16.7</td>
</tr>
<tr>
<td>Experience in current organization</td>
<td></td>
<td></td>
</tr>
<tr>
<td>1</td>
<td>28</td>
<td>51.9</td>
</tr>
<tr>
<td>2</td>
<td>17</td>
<td>31.5</td>
</tr>
<tr>
<td>3</td>
<td>09</td>
<td>16.7</td>
</tr>
</tbody>
</table>

It is inferred from the above table that 37 percent of the respondents are from operation’s department, 31.5 percent of the respondents are equally distributed in paramedical and nursing departments, 31 percent of the respondents are having overall one year experience, More than half of the respondents (51.9%) are having one year of experience in the current organization.

Table 3. Respondents by their various dimensions of Human Resource Information System (HRIS)

<table>
<thead>
<tr>
<th>Dimension</th>
<th>Frequency n=54</th>
<th>Percentage (%)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Infrastructure</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Low</td>
<td>39</td>
<td>72.2</td>
</tr>
<tr>
<td>High</td>
<td>15</td>
<td>27.8</td>
</tr>
<tr>
<td>Software</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Low</td>
<td>36</td>
<td>66.7</td>
</tr>
<tr>
<td>High</td>
<td>18</td>
<td>33.3</td>
</tr>
<tr>
<td>Reporting</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Low</td>
<td>34</td>
<td>63.0</td>
</tr>
<tr>
<td>High</td>
<td>20</td>
<td>37.0</td>
</tr>
<tr>
<td>Sustainability</td>
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<td></td>
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<tr>
<td>Low</td>
<td>37</td>
<td>68.5</td>
</tr>
<tr>
<td>High</td>
<td>17</td>
<td>31.5</td>
</tr>
<tr>
<td>Over all</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Low</td>
<td>36</td>
<td>66.7</td>
</tr>
<tr>
<td>High</td>
<td>18</td>
<td>33.3</td>
</tr>
</tbody>
</table>

It is observed from the above table that Majority of the respondents of (72.2%) are having low accessibility to use an internal infrastructure system, Majority of the respondents of (66.7%) are of having low knowledge on HRIS software, Majority of the respondents of (63.0%) are having less usage HRIS reporting system, More than half of the respondents of (68.5%) are having low training in using HRIS, Majority of the respondents of (66.7%) are having low knowledge in basic functionality of Human Resource Information System.

Findings

Majority (58.1%) of the respondents are Female, 40 Percent of the respondents are between the age group of 31 and 35 years, All the respondents are from nuclear family, Majority (68.5%) of the respondents are having two dependents, Majority (63%) of the respondents are graduate generals, 37 percent of the respondents are from operation’s department, 31.5 percent of the respondent are equally distributed in paramedical and nursing departments, 31 percent of the respondents are having an overall experience of one year, More than half (51.9%) of the respondents are having one year of experience in the current organization.
Key variable findings

Majority (72.2%) of the respondents are having low accessibility to use an internal infrastructure system. More than half (66.7%) of the respondents are having low knowledge on HRIS software. More than half (63%) of the respondents are having less usage of HRIS reporting system. More than half (68.5%) of the respondents are having low training in usage of HRIS. More than half (66.7%) of the respondents are having low knowledge in basic functionality of Human Resource Information System.

4. Suggestions and Conclusion

Suggestions

• The hospital shall develop easily accessible and barrier free Human Resource Information internal infrastructure system.
• The hospital could develop a user-friendly Human Resource Information System (HRIS) Software.
• Sufficient trainings in HRIS system is needed in all departments.
• Data security could be improved in Gleneagles Global Hospital.
• The hospital may introduce HRIS in other areas such as Recruiting, applicant tracking, Training and development, Employee interface, Analytics etc...

Conclusion

The study has found out that management has introduced HRIS but the majority of the executives having low knowledge in HRIS implementation. Hence it is suggested; Management should give sufficient training to create awareness on utilization of Human Resources Information System in Gleneagles Global Hospital.

References

Critical Review on Work Life Balance of Working Women

P. Neeraja*
Dr. S. Sasikala**

Abstract
Number of studies has addressed work life balance in various perspectives. Work-life balance is the maintenance of a balance between responsibilities at work and at home. Work and family have increasingly become antagonist spheres, equally greedy of energy and time and responsible for work–family conflict. The reviews resulted in identifying the challenges, limitations faced, the support systems, and strategies utilized by working women as a means of realizing work-life balance and their role in child rearing process. The reviews convey that work life balance of women is associated with quality of life when there is involvement, substantial time, or satisfaction to distribute across different roles. It is also said that becoming workaholic may cause stress and imbalance in their personal and professional life. The reviews resulted in handling the work and life in the following ways like sorting out the priorities, learning the art of delegation and home as well as at the working environment, draw a line between home and work and to make time for themselves.

Keywords: Work life balance; Women employees; Family; Career;

1. Introduction
Various reviews say that work life balance is a term used to describe the balance that an individual needs between time allocated for work and other aspects of life. Women's work life balance is important, especially for working women. It is a challenge for every working woman to their career the dedication it deserves, and still spends quality time with their family. Facing professional and personal challenges in a balancing way is a great task for every working woman. For women who act as a head of institutions face further more challenges in her personal as well as professional life. Identifying the challenges, limitations faced, the support systems, and strategies utilized by female workers as a means of realizing work-life balance and their role in child rearing process are identified. Examining how female workers balance their personal and professional lives is critical because research has shown that women administrators experience burnout and stress due to their tendency to deny their own needs while seeking the satisfaction of others and their needs to cope with family conflict (Lawson, 2008). While denying the personal needs of female administrators may help ensure their livelihood and that of their families, this type of coping mechanism is unlikely to satisfy the needs of the individual and increase the depletion rate of available resources. For example, an individual who chooses to skip meals in order to meet the demands placed by the education system increases his/her risk for health problems to arise. Even in situations where physical ailments may not be a concern, diminished dedicated resources to relationships in one’s immediate family can lead to the development of interpersonal or familial problems which, in turn, creates additional problem areas for the individual to target. Given the deleterious effects of work-life conflicts, the need to identify effective methods for achieving a work-life balance is crucial for any individual, but it is exponentially important for women leaders since they are the recipients of stress not necessarily endured by their male counterparts. For this reason, this study will identify and describe the methods used by female leaders in the local community. The results of the study will also provide a greater understanding of the challenges faced by female workers as well as an understanding of the implications of such experiences for the development of the adaptive coping strategies and how they can impact a woman’s life story.

Work Life Balance of Women
Balance that a women needs between time allocated for work and other aspects of life. Areas of life other than work-life can be, but not limited to personal interests, family and social or leisure activities. Employees today spend most of their time on their job than ever before (White et al., 2003). They are working the equivalent of an extra month per annum. Being overworked can lead to work-home conflict, in which the pressures from work and family domains are mutually incompatible.

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Masako SETO et al, (2004) have examined the effects of work related factors and Work Family Conflict on depressive symptoms among working women living with young children in a Japanese Metropolis. Shahnaz & Jamie (2008) have found that Work Stress and/or Work Life imbalance can occur irrespective of gender. Becoming workaholic may cause stress and imbalance. Today the stereotypical views are changing. Women are focusing more on their career and men are either augmenting family responsibilities or are becoming more family oriented.

Being workaholic is the cause for work stress and work-life imbalance as they are correlated. This is regardless of gender (Aziz and Cunningham, 2008). Job satisfaction and affective commitment are the result of supervisor support and work-family culture.

Mathew and Pachanatham (2009) stated that in the past women participation in the workforce in India was mainly confined to non-managerial, low profile positions or subordinate positions in the past. But now their presence is there in almost all categories of positions, junior, middle and high level cadre in the workplace. These changes in work culture have not brought suitable changes in work and home life. They are added duties and responsibilities to their family and the society they live in. Women make use of flexible work arrangement as a source because women tolerate greater responsibility for domestic chores than men (Davis et al., 2007).

Niharika and Supriya (2010) have studied the work based factors and family related factors that are considered to contribute to work life balance. Work based factors are flexi time, option to work part time and freedom to work from home and the family related factors are child care facility and flexibility to take care of emergencies at home.

(Baral and Bhargava, 2010). The three dimensions having strong connection are between dimensions of the work place, stress and job satisfaction. There are no theories to provide conceptual understanding of these relationships.

In contemporary times, women are as professionally qualified as the men and the incomes they earn are equally significant. Their working hours as well as the stress and strain of work is in no way less than a man (Parmar, 2010).

WLB is a significant predictor of employees’ health and well-being, a major research has been undertaken to check the ancestor of this construct (Chawla and Sondhi, 2011).

Women often neglect to take concern about their own health and personal deeds because of work surplus and time limitations (Mathew and Panchanatham, 2011).

Health problems such as psychological health, gynec health, digestive problems and physical health are negatively correlated with WLB (Sujata and Singh, 2011).

Kumari K. Thiveni et al, (2012) have studied and analysed the significant relationship between the demographic variables and WLB.

The reviewers concluded that the work life balance of women is greatly affected by the work interference with personal life, stress and burnout, poor work performance and ill-health are the outcomes of work life imbalance, family/leisure interference with work and work interference with family/leisure were strongly negatively correlated to emotional intelligence.

Work Life Balance of Women Professionals

Trying to schedule an equal number of hours for each of your various work and personal activities is usually unrewarding and unrealistic. Life is and should be more fluid than that. Traditionally creating and managing a balance between the work-life was considered to be a woman’s issue. Heather S. McMillan et al, (2011) suggested that the individual harmony and its effects has developed a new Harmony based on conflict and enrichment. N. Krishna Reddy et al, (2010) concluded that the married women employees indeed experience Work Family Conflict (WFC) while attempting to balance their work and family lives. Thus, Organization needs to formulate guidelines for the management of WFCs since they are related to job satisfaction and performance of the employees.

Kandel et al studied the nature of specific strains and stresses among married women in their marital, occupational and house work roles. They found that strains and stresses are lower in family roles than in occupational and household roles among the married women. These have more severe consequences for the psychological well-being of women than occupational strains and stresses. Strains predicted distress through role-specific stress, with strains deriving from contribution of role-specific stress.

Organization implements WLB policies and flexible work arrangements that enable women employees to make use of policies and engage more efficiently to contribute to organisation success. Work life programs such as employee assistance programs, child care and elder care programs, fitness and recreation programs, counselling programs (Cascio, 2000; De Luis et al., 2002) and other personal support programs can help employees to manage and balance their work life and personal life effectively (Wang and Verma, 2012).
Vijaya Mani (2013) has revealed the major factors influencing the Work Life Balance of Women professionals in India such as role conflict, lack of recognition, organizational politics, gender discrimination, elderly and children care issues, quality of health, problems in time management and lack of proper social support.

The study conducted by K. Santhana Lakshmi et al. (2013), examined and brought to light that there was an increasing need to address the work life balance issues in educational institutions and the need for special attention towards the women employees. It was concluded that organizations should come up with work life balance policies for its employees.

Karthik R.10 in his paper (2013) had concluded that a successful work life balance strategy could actually reduce stress level, it addressed issues of high absenteeism and high turnover. If implemented in proper manner it could actually increase productivity, job satisfaction and commitment in the employees. The researcher had also suggested various strategies that could be used by the organizations to provide work life balance:-

O.M. Ashtankar3 (2016).Vijaya Mani (2016), had conducted an extensive research based on the factors that influenced the women professionals in India in terms of work life balance. She determined that factors such as lack of proper recognition, gender discrimination at work place, proper social support, problems in time management were a big hindrance in their careers and affected their work life balance adversely.

- Providing work family sensitivity training.
- Limit the number of working hours
- Eliminate Saturday work or provide alternate Saturday off
- Provide flexible work hours
- Consider extended paid leave in genuine cases
- Extend career leave
- Provide reduced work hours for older workers.
- Provide rotation of jobs
- Provide additional financial benefits for those who work in remote locations.

Reviews concluded that the stress was caused by the ever-increasing demands at the workplace as well as employee’s personal commitments towards their families and society while focusing on the women employees, as they needed to provide equal time and commitment in both their work life and family life. Women without children where significantly higher in occupational commitment compared women with children; contrary to this, women having younger children outperformed women having older children. The work related stressors was evidently greater than that of family function associated stressors.

**Work Life Balance of IT Women**

Optimal arrangement of an individual’s on-the-job and private time to facilitate health and personal satisfaction without negatively impacting productivity and professional success. The degree to which an organization promotes a healthy congruence between the professional and personal lives of employees is largely a function of corporate culture and management styles.

Hyman and Summers (2004) classified seven major problems which are associated with current practices over work-life balance these are unevenness of adoption across different sectors and organizations, lack of formalization of policies at organizational level, restricted employee voice over the introduction and implementation of policies are primarily to meet business needs rather than those of employees, there is no evidence of reduction in working hours, tangible and intangible work intrusions into domestic life , domestic responsibilities are still conducted primarily by women irrespective of their employment status.

Workers now are questioning the amount of time and energy devoted to work (Maxwell and McDougall, 2004). Having imbalanced life, strained relationships and passionless life leads to ineffective performance in life both at work and at home (Bobdey, 2010). Many now value the idea of WLB and consider it to be an important criterion of success (Jennings and McDougald, 2007).

Kristiansen, Hellzen and Asplund, (2006) interestingly uses the term environment violence. They describe leadership, education, supervision and reflection as very important variables to reduce the environmental violence. Handled properly they help in boosting job satisfaction and to handle stress. The most common problem is burnout in the teaching profession (Paton and Goddard, 2003).

Gunavathy (2007) in the study of women employees of BPO companies who were married came up with the causes, consequences of work life imbalance. The paper also discussed the interventions for work life balance. According to the study more than two thirds of the respondents reported work life imbalance mainly...
due to work interference with personal life. The results from the study concluded stress and burnout, poor work performance and ill-health are the outcomes of work life imbalance.

In a similar study Sjöberg (2008) tested 153 respondents (94 being men and 59 being women). His hypothesis was based on emotional intelligence being a factor which contributed for the success of life adjustment, and for the successful achievement of a well-balanced life. The two sides of what is described as balance that is “family/leisure interference with work and work interference with family/leisure were strongly negatively correlated to emotional intelligence”. It was concluded that having a greater emotional balance results in good balance of work and life.

Mohanty and Ashok (2011) also dealt with the issue of stress. They explained that “Stress is often developed when an individual is assigned a major responsibility without proper authority and delegation of power, interpersonal factors such as group cohesiveness, functional dependence, communication frequency, relative authority and organizational difference between role sender and focal persons.”

Women employees perceive WLB policies as organizational support to employee’s family life and create a WLB supportive culture in the firm which leads to affective commitment. The goal of understanding and observing various aspects of WLB has been mostly accomplished by the Western European and the Anglo Saxon countries (Chandra, 2012) followed by the Eastern European countries (Shaffer et al., 2011). Gradually, researchers from other nations have recognized the importance of examining the work-family domains.

Sundaresan (2014) reported in their study, Quality of work life is being used by the organizations as a strategic tool to attract and retain the employees and more importantly to help them to maintain work life balance with equal attention on performance and commitment at work.

Child care responsibility is still a constraint for working women as well as it has an influence on labour market assessment of parents, specifically mother with younger children (Wattis et al., 2013).

Women without children where significantly higher in occupational commitment compared women with children; contrary to this, women having younger children outperformed women having older children. The work related stressors was evidently greater than that of family function associated stressors (Balaji, 2014).

Sundaresan (2014) opines that a healthy work-life balance assumes great significance for working women particularly in the current context in which both, the family and the workplace have posed several challenges and problems for women. The dynamics of the work environment have exerted enormous pressure on working women as they need to cope with virtually two full time jobs – one at the office and the other at home.

Bharathiet al. (2015)101 made an attempt to find the professional and personal challenges and enhancers for work life balance amongst working women through a survey of 186 women working in the IT sector in India. The main challenges in professional life were found to be extended/odd working hours, travel time between home and workplace and participation in additional jobs and assignments. In personal life, the main stresses were guilty of not being able to take care of self and elders at home. Social media interaction was found to be stress busters for most women. Most women would prefer flexible timing, and supportive spouse, family and friends as well as an environment conducive for work at the office.

Mohanty & L. Kesar12 (2016), tried to bring out the outcomes of the socio-cultural changes that were taking place and the challenges that Indian employees faced. The paper talked about the increasing levels of stress, which lead to the high attrition rates in the organizations. The stress was caused by the ever-increasing demands at the workplace as well as employee’s personal commitments towards their families and society.

Ashtankari (2016), the relation between work life balance and the employees’ well-being was majorly focused in the research paper. Two variables were taken into consideration for the study. The variables were the work family conflict and the family work conflict. This paper provided an insight into how the two different spheres of work and family interfere in each other and what kinds of problems are faced in such situation. The study was mainly focused on the women employees, as they needed to provide equal time and commitment in both their work life and family life. It was more or less seen everywhere that it was the working women who continuously juggled and struggled to meet the ends.

Reviews concluded that the societal role expectations, women’s career ambitions, and the nature of the IT industry challenges the way they manage their professional and personal lives. While their self-identities primarily lie in their work, they are strongly influenced to perform the roles of homemaker and dependent care provider given the societal expectations; this does require negotiation both at home and at work in terms of how and when work can be done. Reviews have also stated that women without children were significantly higher in occupational commitment when compared to women with children; contrary to this, women having younger children outperformed women having older children. Furthermore, women who had taken a slow track in their career growth, mentioned that this was a conscious choice as they felt their families needed them more at that point in time.
Work Life Balance of Nurses

Taking time each day to do something enjoyable allows nurses to feel refreshed and revitalized, allowing them to then focus on their personal lives. Nurses can have an especially difficult time balancing work and personal life because of the increased amount of physical and emotional stress that nurses experience.

Janssen et al. (2004) [152] in a study of 115 US and 260 Dutch nurses and nurse assistants to test a theoretically derived model of specific relationships between work characteristics and two outcomes (i.e. emotional exhaustion and job satisfaction). The results in the Dutch sample showed that emotional exhaustion was only related to psychological job demands and workplace social support. Job satisfaction was found to be associated with job control and with workplace social support.

Pal and Saksvik (2008) [109] in a cross cultural study of 27 doctors and 328 nurses from Norway and 111 doctors and 136 nurses from India, found that predictors of job stress were different for doctors and nurses in India and Norway. In the case of Norwegian nurses, work family conflict was one of the predictors of job stress while in the case of Indian nurses high family work conflict was one of the predictors of job stress.

The reviews concluded that there are many stressors in the nursing profession which creates an imbalance in the work and life. The most important items among them can be noted as the shortage of nurses, the adverse authorities, developing critical and unpredictable situations, disharmony and poor social status. According to the reviews, the job stressors influence the private and family life of the nurses which makes them have an imbalance in personal and professional life, only when the requirements of the nurses are fulfilled in the place where she works, she can balance the work and family. The work related stressors was evidently greater than that of family function associated stressors. The reviews also suggested that handling the work and life in the following ways like sorting out the priorities, learning the art of delegation and home as well as at the working environment, draw a line between home and work and to make time for themselves.

Work Life Balance of Women workers of unorganized sector

The demands and pressures of work make difficult to stretch time for balancing work-life activities. Women taking up work life balance challenges have an impact on women’s advancement in an unorganized sector.

Anthony P. D’souza (2013) focused the status and contribution of unorganized sector focused more on the challenges and problems faced by the youth in selecting job as self-employment. It is found that larger number of workers was getting their livelihood from this sector and entrepreneur plays a vital role in bringing up unorganized sector at the better position in the country.

A well established finding in the literature is that self employment enables mother to accommodate work and family needs better than when they are engaged in organizational employment. With this result in mind (RocioBonet, Cristina cruz) 2013 investigate within a dual system of job protection. Women under temporary contracts face greater work life conflict than those under permanent contracts. Under a temporary contract increases women’s likelihood of transitioning to self employment upon child birth.

Anuradha, MrinaliniPandey (2016) made an attempt study on “Impact of work life balance on job satisfaction of women doctors”. In the competitive era of today, women have to battle hard to establish their individuality in the society, as well as in professional life. Work-life balance is the major problem in the life of working women.

The reviews concluded that the women working in an unorganized sector have to work for long hours, over time increases the stress level at family needs. The impact of these problems leads to the shift in the family structure, several women loss their mortality, postpone their first child birth. Therefore in order to improve the health and productivity of the workers, employer has to provide supporting facility to women workers.

Work Life Balance of Teachers

Flexible working arrangements that allow both parents and non-parents to avail of working arrangements that provide a balance between work responsibilities and personal responsibilities.

K.Santha Lakshmi et al, (March 2013) have examined that the Educational institutions should address the Work Life Balance related issues among their staff, specifically women and take a holistic approach to design and implement the policies to support the teaching staff to manage their WLB.

Senthilkumar et al. focused on teaching professionals with the objectives of finding the relationship between the demographical variables (such as marital status and partner employment status) and the level of stress in balancing work and life. The study found that 109 (55.3%) respondents belonging to middle age category and their level of stress in balancing work and life, High level of stress perceived is the highest (63.5%) among the female respondents. Majority (90%) of the respondents were not satisfied with their work-life
balance due to their work load. The study concluded that in this modern world, the role of teaching professionals are ever changing and evolving and the new teaching learning environment puts heavy pressure on teaching professionals. This work pressure will have an impact on their personal life and lead to imbalance in their work and life. Hence, teaching professionals’ work life balance is the most important aspect in the success and development of educational institutions. It is vital for any institution to provide facilities to their staff members to get relieved from stress for balancing their work and personal life. The further research may determine the suitable work-life balancing programs for teaching faculty members in higher learning institutions in India.

Lakshmi and Sujatha analyzed the Rotated component matrix it is clear that first component has four factors with heavy loading, viz. marital status, working hours, requirement of flexibility, additional working hours and over time. It is very clear that it is the volume and length of working hours which distort the work life balance. The test result indicated statistically significant relationship between marital status and overtime work. It was also found that among these 30 married women 14 preferred to work in the weekends while the remaining were prepared to work in the morning or evening of every working day. One more finding is that these 37% of the married women mainly work for financial reasons. The study concluded that above discussion, it is reasonable to modern organizations, especially educational institutions should address the Work Life Balance related issues among their staff, specifically women and take a holistic approach to design and implement policies to support the teaching staff to manage their work life balance which would add to the performance of these staff members.

Subha concluded that modern organizations, especially educational institutions, should address the Work Life Balance related issues among their staff, specifically women and take a holistic approach to design and implement policies to support the teaching staff to manage their work or life balance which would add to the performance of these staff members. Achieving a good balance between work and family commitments is a growing concern for contemporary employees and organizations.

Mohammad etal concluded that both family and job of female teachers of Bangladesh are being affected due to work-life balance situation. women in the work place can be blessings only when both family as well as organization will receive proper service from them and they will be able to contribute to both family as well as organization only when the origination will ensure flexible working hours (roistered days off and family friendly starting and finishing times), transport facility, residential facility, child care center, flexible work arrangements or job sharing, reduced working hours & workload and child schooling for the female teachers. Reviews concluded that the role of teaching professionals are ever changing and evolving and the new teaching learning environment puts heavy pressure on teaching professionals. Educational institutions should address the Work Life Balance related issues among their staff, specifically women and take a holistic approach to design and implement policies to support the teaching staff to manage their work or life balance which would add to the performance of these staff members.

2. Conclusion

The reviewers concluded that the work life balance of women is greatly affected by the work interference with personal life, stress and burnout, poor work performance and ill-health are the outcomes of work life imbalance, family/leisure interference with work and work interference with family/leisure were strongly negatively correlated to emotional intelligence. The study also conveys that becoming workaholic may cause stress and creates an imbalance between work and family. Reviews have also stated that women without children were significantly higher in occupational commitment when compared to women with children; contrary to this, women having younger children outperformed women having older children. The work related stressors was evidently greater than that of family function associated stressors. The reviews also suggested that handling the work and life in the following ways like sorting out The priorities, learning the art of delegation and home as well as at the working environment, draw a line between home and work and , to make time for themselves.
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Work Life Balance in a leading Service Sector at Tamil Nadu

A. Franklin Ebenezer*
Dr. A. Umesh Samuel Jebaseelan**

Abstract

Work Life Balance is the term used to describe the balance that an individual needs between time allocated for work and other aspects of life. Areas of life other than work life can be, but not limited to personal interest, family and social or leisure activities. The aim of the present study is to understand and learn about the work life balance and how to manage it. The main objectives of the study are to find the Work life balance in a leading service sector in Tamil Nadu. The study consists of 6 dimensions of Self-Management, Time Management, Stress Management, Change Management, Technology Management and Leisure Management. A Sample of 50 employees was taken as respondents for the study. The data collected was systematically processed and analyzed. The salient findings are Majority of the respondents are having Low level of perception in Self-Management. Majority of the respondents are having Low level of perception in Time Management. Majority of respondents are having Low level of perception in Stress Management, More than half of respondents are having Low level of perception in Change Management, Majority of respondents are having Low level of perception in Technology Management, Almost all the respondents are having Low level of perception in Leisure Management.

Keywords: Work Life Balance; Self-Management; Time Management; Stress Management; Change Management; Technology Management; Leisure Management.

1. Introduction

Work Life Balance is the relationship between time and space of work & non-work in societies where income is predominantly generated and distributed through labour markets. Work life balance is being aware of different demands on time and energy saving the ability to make choices in the allocation of time and energy knowing what values to apply. Work life balance is a concept of the ideal of splitting one’s time and energy between work and other important things of the life.

Employees with work life balance feel their lives are fulfilled both inside and outside of work and they experience minimal conflict between work and non-work roles - (Byrne, 2005).

Review of Literature

Soi and Massey (2011) studied the concept of work life balance and its impact on employment relations and productivity of the employees. Study illuminated the dissymmetry between the work and the life that today’s fast paced working generation is experiencing. It was observed that majority of the respondents weren’t happy with the shape that their lives have taken recently due to imbalance that has crept in their work life.

Doble and Supriya (2010) investigated work life balance across genders and observed that both male and female faced imbalance in family and work life balance like flexible time, work from home, part-time work, availability of child care and flexibility to take care of emergencies at home.

Asadullah and Fernandez (2008) revealed that work life balance practices increased the job satisfaction of the employees irrespective of their gender.

2. Research Methodology:

Aim of the study

The aim of the study is to find out the work life balance among the employees in a leading service sector in Tamil Nadu.

Objective

The main objectives of the study are:

- To describe the socio demographic characteristics of the respondents.
- To understand the Job related aspect of the respondents.
- To study the dimensions associated with the Work life balance of the respondents.
➢ To suggest suitable measures for improving Work Life Balance among the respondents.

Methodology

The study is descriptive in Nature and the relevant data has been collected from both primary and secondary source of information. Simple Random sampling method was used to collect data from 50 respondents out of 127 employees in an organization. The data was collected through structured questionnaire comprising of the following dimensions namely: Self-Management, Time Management, Stress Management, Change management, Technology Management and Leisure Management (Jeff Davidson, 2012). The questionnaire was divided into two parts. First part deals with socio demographic details of the employees and the second part covers the key aspects of Work life balance of employees.

Table 1. Respondents by their Socio Demographic variables

<table>
<thead>
<tr>
<th>Socio Demographic</th>
<th>No. of Respondents N= 50</th>
<th>Percentage</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Age Group</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>up to 25</td>
<td>7</td>
<td>14.0</td>
</tr>
<tr>
<td>26 to 35</td>
<td>30</td>
<td>60.0</td>
</tr>
<tr>
<td>36 to 45</td>
<td>13</td>
<td>26.0</td>
</tr>
<tr>
<td><strong>Gender</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Male</td>
<td>47</td>
<td>94.0</td>
</tr>
<tr>
<td>Female</td>
<td>3</td>
<td>6.0</td>
</tr>
<tr>
<td><strong>Educational Qualification</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>10th/12th</td>
<td></td>
<td></td>
</tr>
<tr>
<td>PG</td>
<td>4</td>
<td>8.0</td>
</tr>
<tr>
<td>UG</td>
<td>4</td>
<td>8.0</td>
</tr>
<tr>
<td>Others</td>
<td>23</td>
<td>46.0</td>
</tr>
<tr>
<td><strong>Marital Status</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Married</td>
<td>33</td>
<td>66.0</td>
</tr>
<tr>
<td>Unmarried</td>
<td>16</td>
<td>32.0</td>
</tr>
<tr>
<td>Widowed</td>
<td>1</td>
<td>2.0</td>
</tr>
<tr>
<td><strong>Family Types</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Nuclear Family</td>
<td>18</td>
<td>36.0</td>
</tr>
<tr>
<td>Joint Family</td>
<td>32</td>
<td>64.0</td>
</tr>
<tr>
<td><strong>Native Background</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Rural</td>
<td>10</td>
<td>20.0</td>
</tr>
<tr>
<td>Urban</td>
<td>18</td>
<td>36.0</td>
</tr>
<tr>
<td>Semi-Urban</td>
<td>22</td>
<td>44.0</td>
</tr>
</tbody>
</table>

From the above table it concludes that absolute majority of the respondents are between the age group of 26-35 years. Almost all the respondents are male. Nearly half of the respondents had completed their education in under graduate level. Majority of the respondents were married. Majority of the respondents are from Joint family. 44 percent of the respondents are coming from Semi-urban background.
Table 2. Respondents by their Job related aspects

<table>
<thead>
<tr>
<th>Job related Aspects</th>
<th>Variables</th>
<th>No. of. Respondents (N= 50)</th>
<th>Percentage</th>
</tr>
</thead>
<tbody>
<tr>
<td>Department</td>
<td>Technical Staffs</td>
<td>40</td>
<td>80.0</td>
</tr>
<tr>
<td></td>
<td>Import</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>Export</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>IT</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>Accounts</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>Admin</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>Non-Technical Staffs</td>
<td>10</td>
<td>20.0</td>
</tr>
<tr>
<td></td>
<td>Weighbridge</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>Transport/HE</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>Import Yard</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Designation</td>
<td>Executive</td>
<td>31</td>
<td>62.0</td>
</tr>
<tr>
<td></td>
<td>Junior Executive</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>Executive Supervisor</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>Customer Service Executive</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>Senior Executive</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>Yard Supervisor</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>Non-Executive</td>
<td>19</td>
<td>38.0</td>
</tr>
<tr>
<td></td>
<td>House Keeping</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>Machine Operator</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>Receptionist</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>Daily Wages</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

From the above table it concludes that sizeable majority (80%) of the respondents are from the departments of Technical staff. More than half (62%) of the respondents are from the designation of Executive.

Table 3: Respondents by their Various Dimensions

<table>
<thead>
<tr>
<th>Dimensions</th>
<th>No. of. Respondents (N= 50)</th>
<th>Percentage</th>
</tr>
</thead>
<tbody>
<tr>
<td>Self-management</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Low</td>
<td>31</td>
<td>62.0</td>
</tr>
<tr>
<td>High</td>
<td>19</td>
<td>38.0</td>
</tr>
<tr>
<td>Time Management</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Low</td>
<td>30</td>
<td>60.0</td>
</tr>
<tr>
<td>High</td>
<td>20</td>
<td>40.0</td>
</tr>
<tr>
<td>Stress Management</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Low</td>
<td>34</td>
<td>68.0</td>
</tr>
<tr>
<td>High</td>
<td>16</td>
<td>32.0</td>
</tr>
<tr>
<td>Change management</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Low</td>
<td>27</td>
<td>54.0</td>
</tr>
<tr>
<td>High</td>
<td>23</td>
<td>46.0</td>
</tr>
<tr>
<td>Technology Management</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Low</td>
<td>38</td>
<td>76.0</td>
</tr>
<tr>
<td>High</td>
<td>12</td>
<td>24.0</td>
</tr>
<tr>
<td>leisure management</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Low</td>
<td>46</td>
<td>92.0</td>
</tr>
<tr>
<td>High</td>
<td>4</td>
<td>8.0</td>
</tr>
</tbody>
</table>
3. Result and Analysis:

Findings from the Socio Demographic values of the respondents:
- The analysis shows that absolute majority (60%) of the respondents are in the age group of 26-35 years.
- Almost (94%) all the respondents are male.
- Nearly half (46%) of the respondents have completed their education up to under graduate level.
- Majority (66%) of the respondents are married.
- Majority (64%) of the respondents are from Joint family.
- 44 percent of the respondents are coming from Semi-urban background.

Findings from the Job related aspect of the respondents:
- 40 percent of the respondents are from the departments of Import.
- 36 percent of the respondents are having designation as Junior Executive.

Findings from the various dimension of the respondents:
- Majority (62%) of the respondents are perceiving low in self-management.
- Majority (60%) of the respondents are perceiving low in time management.
- Majority (68%) of the respondents are perceiving low in stress management.
- More than half (54%) of the respondents are perceiving low in change management.
- An absolute (76%) of the respondents are perceiving low in technology management.
- All most all (92%) of the respondents are perceiving low in leisure management.

4. Suggestion and Conclusion

- Majority of the respondents are unable to balance their work life and the family life. Hence, it is suggested to conduct special programmes on Self-Management to the employees for improving their work life balance.
- Majority of the respondents are spending most of time in the organization. Hence, it is suggested to have time restriction (Hours of Work) on their work.
- The company can also conduct relaxation programmes like Yoga, Exercise and other group Activities in order to relieve their job stress.
- Sufficient orientation programme shall be organized for accepting the changes due to modernization of technology.
- Management shall conduct skill based training programs for the employees to meet the changing technology.
- Periodical get together, tours and other recreation measures shall be introduced to avoid boredom and monotony of work.

The family and work life both are important to employees in any sector and if these two are not maintained properly it creates stress and strain and results into various diseases. This study is found important because it tries to know how the work life and family life interface results into stress. Achieving a good balance between work and family commitments is a growing concern for contemporary employees and organization. Work life balance policies are most likely to be successfully mainstreamed in organizations which have a clear understanding of their business rationale and which respect the importance of work life balance for all employees.
References


Competency Mapping among Executives in a Manufacturing Company in Bangalore

E. Francis*
Dr. M. Daniel Solomon**

Abstract
“If you think you can do, that’s confidence; if you do it that’s competence,” competency mapping is a process an individual uses to identify and describe competencies that are the most critical to success in a work situation or work role. A competence map is a list of individual’s competencies that represent the factors most critical to success in given jobs, departments, organizations, or industries that are part of individual’s current career plan. The main objectives are to study the socio-demographic characteristics and to find their perceive competency of the respondents and to suggest some suitable remedial measures for improving competency level among the executives. A standardized scale with 7 dimensions like foundation competency, midway competency, insightful competency, analytical competency, evaluating competency, functional competency and organizational competency is used for data collection. A sample of 50 executives was taken for the study the data was systematically processed and analyzed. The major findings are nearly half of the respondents are having low level of foundation competency. More than half of the respondents have low level of midway competency. A little more than half of the respondents have low level of insightful competency. Majority of the respondents have low level of analytical competency. Majority of the respondents have low level of evaluating competency. More than half of the respondents have low level of functional competency. And a little more than half of the respondents have low level of organizational competency.

Keywords: Competency; Foundation competency; Midway competency; Insightful competency; Analytical competency; Evaluating competency; Functional competency and Organizational competency

1. Introduction
Competence is a cluster of related abilities, commitments, knowledge, and skills that enable a person to act effectively in a job or a situation. Competence indicates sufficiency of knowledge and skills enable someone to act in a wide variety of situations. Because each level of responsibility has its own requirement, competence may occur in any period of a person’s life or at any stage of his or her career.

Competency has different meanings, and remains one of the most diffuse terms in the management development sector, and the organizational and occupational literature. Competency is sometimes thought of as being shown in action in a situation and context that might be different the next time a person has to act. In emergencies, competent people may react to a situation following behaviors they have previously found to succeed. Competencies are also what people need to be successful in their jobs. Job competencies are not the same as job task. Competencies include all the related knowledge, skills, abilities, and attributes that form a person’s job. Mapping is defined as graphical representation of a procedure, process, structure, or system that depicts arrangement of and relationships among its different components, and traces flows of energy, goods, information, materials, money, personnel, etc.

Competency Mapping is the process to identify key competencies of an organization and or a job and incorporating those competencies throughout the various processes of the organization. A competency is defined as a behavior (communication, leadership) rather than a skill or ability. According to Boyatzis (1982) “A capacity that exists in the person that leads to behaviour of that meets the job demands within parameters of organizational environment and that in turn brings about desired results” Competency mapping identifies an individual's strengths and weaknesses. The aim of this is to enable the person to better understand him and her and to point out where career development efforts need to be directed

Review of Literature:
Sarkar (2013) in her research paper titled “competency based training need assessment approach in Indian companies,” endeavors to build a competency mapping based model for identification of training needs. The paper fulfills its triple objectives of illuminating the existing training scenario of organizations in India, describing the ways in which competency mapping is applied for training purposes and perform gap analysis

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for ascertaining training needs. The research design is exploratory and makes use of both primary and secondary data sources. The scope of the study is limited to manufacturing organizations only. The study draws on the various models, chief among them are: MACH model, OCSC model and Lancaster model. The author points to the fact that use of web resources and technology tool have only enhanced the effectiveness and accessibility of training. Out of a total of 17 surveyed organizations, 12 did not have any formalized process for identifying training needs. Further the sample size for the study was 111 employees of 17 organizations. The nature of sample was supervisor and above and convenient sampling technique was employed for the study. The number of jobs analyzed was 18. The study identified a primary set of 16 competencies and a secondary set of 18 competencies. Multiple Tools were used for data collection like job analysis questionnaire, psychometric questionnaire, direct observation, checklist and training feedback questionnaire. The statistical tests used were reliability test corn bash’s alpha, Annona and correlation co-efficient between ratings of experts and direct observation of the researcher. A radar chart was used to represent the gap analysis between standard and actual competencies of an individual employee for a job post. Data analysis resulted in the alternate hypothesis viz. Competency mapping model is able to identify training needs of individual employees with significant difference being accepted. The second alternate hypothesis viz. there is a significant difference in the median of gap level of competencies after need based training - was also accepted. Thus the research paper makes a strong case for identification of training needs based on competency model.

2. Research Methodology

The aim of the study is to find out the socio demographic characteristics of the respondents and find out the perceived competency by the employees in a manufacturing company. The study is descriptive in Nature; relevant data has been collected from both primary and secondary source of information. The universe of the present study covers the industry situated in Bangalore. The respondents of the present study are executives, managers and Engineers. Simple Random sampling method was used to collect data from 50 respondents in a manufacturing company at Bangalore. The questionnaire was divided into two parts. First part is about the socio demographic details of an employees and second part is for examining the competency mapping of an employee. The data was collected through structured questionnaire with seven dimensions namely foundation competency, midway competency, insightful competency, analytical competency, evaluating competency, functional competency and organizational competency. The researcher formulated there hypothesis for this paper and further the data was analyzed and the result were found.

3. Results and Analysis

From the study it is found that almost half of the respondents 42.0 percent belong to age group of 25-30 more than one third of the respondents 28.0 percent belong to the age group of 31-35 less than one third of the respondents 16 percent belong to the age group of 36-40 meagre off the respondents 10 percent belong to the age group of 41-45 and meagre of the respondents 4 percent belong to the age group of 46-50. It is clear that more than one third 32.0 percent of the respondents are finished automobile engineering, less than one fourth 26.0 percent of the respondents are finished EEE, meagre 14.0 percent of the respondents are finished M.com education, meagre 12.0 percent of the respondents are finished Mech. Engineering remaining 8.0 percent of the respondents are finished B.com and E&I. It is found that more than half 54.0 percent of the respondents are joint family, more than one third 46. Percent of the respondents are nuclear family. It shows that half of the respondents 50.0 percent of the respondents are from Semi-urban background; more than one third 38.0 percent of the respondents are from rural background. Meagre 12.0 percent of the respondents are from urban background. Majority of respondents 90 percent belongs to in campus training and meagre percent of the respondents 10 percent belongs to off campus training programme. Less than one fourth of the respondents 22 percent have 1-3 years of experience. It is found that one third of the respondents 34 percent have experience in managerial work for 4-6 years. Less than one fourth of the respondents 24 percent have 7-9 years of experience. Meagre of the respondents 20.0 percent have more than 9 years of experience. More than one third of the respondents 72.0 percent belong to technical nature of job and 28.0 percent of the respondents belong to non-technical nature of job.

Dimension Findings

More than half 52.0 percent of the respondents are having low level of foundation competency, less than half 48.0 percent of the respondents are having high level of foundation competency.. It is clear that more than half 52.0 percent of the respondents are having low level of midway competency; less than half 48.0 percent of the respondents are having high level of midway competency. It shows that more than half 52.0
percent of the respondents are having low level of insightful competency, less than half 48.0 percent of the respondents are having high level of insightful competency. It is evident that more than one third of the respondents 34.0 percent of the respondents are having high level of analytical competency, majority of the respondents 66.0 are having low level of analytical competency. It is clear that more than half 58.0 percent of the respondents are having low level of evaluating competency; more than half 42.0 percent of the respondents are having high level of evaluating competency. It shows that half 56.0 percent of the respondents are having low level of functional competency, less than half 44.0 percent of the respondent are having high level of functional competency. It shows that more than half 52.0 percent of the respondents are having low level of organizational competency, less than half 48.0 percent of the respondents are having high level of organizational competency. It shows that less than half 48.0 percent of the respondents are having high competence and 52.0 percent of the respondents have high level of competence about the organization.

Table 1. T-Test between natures of Job with regard to Competency mapping

<table>
<thead>
<tr>
<th>Variables</th>
<th>Group</th>
<th>Mean Scores</th>
<th>Standard Deviation</th>
<th>Statistical Inference</th>
</tr>
</thead>
<tbody>
<tr>
<td>Nature of job &amp; Foundation Competency</td>
<td>Technical</td>
<td>39.5833</td>
<td>4.67440</td>
<td>Z = .865</td>
</tr>
<tr>
<td></td>
<td>Non-Technical</td>
<td>38.4286</td>
<td>2.73761</td>
<td>P&gt;0.05 Not Significant</td>
</tr>
<tr>
<td>Nature of job &amp; Midway competency</td>
<td>Technical</td>
<td>35.8889</td>
<td>6.99705</td>
<td>Z = -.093</td>
</tr>
<tr>
<td></td>
<td>Non-Technical</td>
<td>36.0714</td>
<td>3.26907</td>
<td>P&gt;0.05 Not Significant</td>
</tr>
<tr>
<td>Nature of job &amp; Insightful Competency</td>
<td>Technical</td>
<td>11.2778</td>
<td>2.87463</td>
<td>Z = -.631</td>
</tr>
<tr>
<td></td>
<td>Non-Technical</td>
<td>11.7857</td>
<td>1.36880</td>
<td>P&gt;0.05 Not Significant</td>
</tr>
<tr>
<td>Nature of job &amp; Analytical Competency</td>
<td>Technical</td>
<td>12.4167</td>
<td>2.32225</td>
<td>Z = -.811</td>
</tr>
<tr>
<td></td>
<td>Non-Technical</td>
<td>13.0714</td>
<td>3.12470</td>
<td>P&gt;0.05 Not Significant</td>
</tr>
<tr>
<td>Nature of job &amp; Evaluating Competency</td>
<td>Technical</td>
<td>6.1944</td>
<td>1.30536</td>
<td>Z = -.224</td>
</tr>
<tr>
<td></td>
<td>Non-Technical</td>
<td>6.2857</td>
<td>1.26665</td>
<td>P&gt;0.05 Not Significant</td>
</tr>
<tr>
<td>Nature of job &amp; Functional Competency</td>
<td>Technical</td>
<td>15.8889</td>
<td>2.44690</td>
<td>Z = .275</td>
</tr>
<tr>
<td></td>
<td>Non-Technical</td>
<td>15.9286</td>
<td>2.12908</td>
<td>P&gt;0.05 Not Significant</td>
</tr>
<tr>
<td>Nature of job &amp; Organizational Competency</td>
<td>Technical</td>
<td>16.1944</td>
<td>3.42111</td>
<td>Z = .593</td>
</tr>
<tr>
<td></td>
<td>Non-Technical</td>
<td>16.0000</td>
<td>3.18651</td>
<td>P&gt;0.05 Not Significant</td>
</tr>
<tr>
<td>Nature of job &amp; Overall Competency</td>
<td>Technical</td>
<td>1.3744</td>
<td>15.61582</td>
<td>Z = 1.193</td>
</tr>
<tr>
<td></td>
<td>Non-Technical</td>
<td>1.3757</td>
<td>9.31264</td>
<td>P&gt;0.05 Not Significant</td>
</tr>
</tbody>
</table>

It inferred the above table that there is no significant difference between the natures of job of respondents with regards to the dimensions of competency mapping. Hence the researcher hypothesis is rejected and Null hypothesis is accepted.

Table 2. Relationship between Age and Competency mapping

<table>
<thead>
<tr>
<th>Variables</th>
<th>Correlation Values</th>
<th>Statistical Inference</th>
</tr>
</thead>
<tbody>
<tr>
<td>Age &amp; Foundation competency</td>
<td>-0.098</td>
<td>P&gt; 0.05 Not Significant</td>
</tr>
<tr>
<td>Age &amp; Midway competency</td>
<td>0.074</td>
<td>P&gt; 0.05 Not Significant</td>
</tr>
<tr>
<td>Age &amp; Insightful competency</td>
<td>0.033</td>
<td>P&gt; 0.05 Not Significant</td>
</tr>
<tr>
<td>Age &amp; Analytical competency</td>
<td>0.070</td>
<td>P&gt; 0.05 Not Significant</td>
</tr>
<tr>
<td>Age &amp; Evaluating competency</td>
<td>-0.023</td>
<td>P&gt; 0.05 Not Significant</td>
</tr>
<tr>
<td>Age &amp; Functional competency</td>
<td>0.025</td>
<td>P&gt; 0.05 Not Significant</td>
</tr>
</tbody>
</table>
Karl Pearson’s co-efficient of correlation test was applied and it was found that there is no significant relationship between the age of the respondents with regard to Various dimensions and overall competency mapping and there is a negative very low correlation between age and foundation competency and evaluating competency. There is a positive low correlation between age and midway, insightful, analytical, functional, organizational competencies. Hence there is no significant relationship the Null hypothesis is accepted and the researcher hypothesis is rejected.

### Table 3 Relationship between Overall Experience and Competency mapping

<table>
<thead>
<tr>
<th>Variables</th>
<th>Correlation Values</th>
<th>Statistical Inference</th>
</tr>
</thead>
<tbody>
<tr>
<td>Overall Experience &amp; Foundation Competency</td>
<td>.094</td>
<td>P&gt; 0.05 Not Significant</td>
</tr>
<tr>
<td>Overall Experience &amp; Midway Competency</td>
<td>.244</td>
<td>P&gt; 0.05 Not Significant</td>
</tr>
<tr>
<td>Overall Experience &amp; Insightful Competency</td>
<td>.231</td>
<td>P&gt; 0.05 Not Significant</td>
</tr>
<tr>
<td>Overall Experience &amp; Analytical Competency</td>
<td>.284*</td>
<td>P&gt; 0.05 Not Significant</td>
</tr>
<tr>
<td>Overall Experience &amp; Evaluating Competency</td>
<td>.218</td>
<td>P&gt; 0.05 Not Significant</td>
</tr>
<tr>
<td>Overall Experience &amp; Functional Competency</td>
<td>.051</td>
<td>P&gt; 0.05 Not Significant</td>
</tr>
<tr>
<td>Overall Experience &amp; Organizational Competency</td>
<td>-.076</td>
<td>P&gt; 0.05 Not Significant</td>
</tr>
<tr>
<td>Overall Experience &amp; Overall Competency</td>
<td>.239</td>
<td>P&gt; 0.05 Not Significant</td>
</tr>
</tbody>
</table>

Karl Pearson’s co-efficient of correlation test was applied and it was found that there is no significant relationship between the Overall Experience of the respondents with regard to dimensions and overall competency mapping. And there is a negative very low correlation between Overall Experience and Organizational competency. And there is a positive low correlation between age and midway, insightful, analytical, evaluating, functional, organizational competencies. Hence there is no significant relationship the Null hypothesis is accepted and the researcher hypothesis is accepted.

### 4. Suggestions and Conclusion

#### Suggestions

From the study it is evident that the employees have low level of foundation competency that is courage with mental strength, ethical behaviour and quality of work life so the organization can help the employees through job enrichment and job rotation and also through self-managed work groups. And the respondents also have low level of functional competency which involves the professional skills, abilities and technical knowledge in the technical aspects of the work so the management can conduct more training programmes and workshops to improve the functional competency. The respondents also seem to lack in organizational competency this means interest to learn and develop themselves in new set of skills and new knowledge the possible suggestion is that they can be involved in tasks more frequently so that they will try to update their knowledge and skills. The respondents have low level of Insightful competency which refers to use of emotions managing themselves and working with other and job rotation will be a good way to overcome this because in that way the respondents will get to more about their peer group and build a rapport and by this they can manage their emotions and can work with other employees as well.

#### Conclusion

The study was conducted by the researcher with an objective to analyze the competency of the workers in a manufacturing company. The study helped the researcher to get a wider view about the competency mapping and that being the pillar and backbone of an effective worker to give an efficacious performance to improve the organization as the whole. A good competent set of workers improve the reputation of the organization and the life of the employees as well.
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Quality of Work Life among Workers in Manufacturing Sector of Madurai, Tamil Nadu

S. Govindharaj*
Dr. A. Umesh Samuel Jebaseelan**

Abstract
Quality of work life (QWL) refers to the favorableness or unfavourableness of a job environment for the people working in an organization. “The overriding purpose of QWL is to change the climate at work so that the human-technological-organisational interface leads to a better quality of work life.” The aim of the study is to understand a wide range of welfare activities to be undertaken in order to improve Quality Work Life in an organization and to enhance the work life quality of the organization. The main objective of the study is to find the Quality of Work Life among the executives in a manufacturing industry. The study consists of seven dimensions Adequate and fair compensation, safety and health working condition, opportunity for development, opportunity for growth and security, social integration, constitutionalism, work and total life space, social relevance and working life as dimension. A sample of 40 executives was taken as respondents for the study the data collected was systematically processed and analyzed. The major findings of the study are more than half of the respondents have low level of Adequate and fair compensation, majority of the respondents have low level of safety and health working condition and a little more than half of the respondents have low level of opportunity for growth, half of the respondents have high level of social integration, majority of the respondents have low level of constitutionalism, majority of the respondents have low level of work and total life space, majority of the respondents have low level of social relevance and working life.

Keywords: Quality of work life; organization; employee; respondents.

1. Introduction
Quality of Work Life is a relatively new concept which is defined as the overall quality of an individual's working life. QWL is sometimes considered as a sub-concept of the broad concept of quality of work life, which refers to the overall quality of life an individual’s life. Quality of work life includes factors such as income, health, social relationships, and other factors such as happiness and fulfillment. QWL being the main subject of the present study meaning, definition, scope of the QWL in the Indian context, etc., have been discussed in this chapter. Quality of work life parameters which are adopted by the researcher has been discussed at the end of the chapter. The Scientific Management focused mostly on division of labour, close supervision and management principles. These have no doubt brought several benefits to the organization. From then onwards continuous research and investigations have been undertaken to human behavior at work and the ways to improve their job satisfaction, job involvement balanced with the aim of the organizations to work for better productivity and quality with job and employee satisfaction. In order to achieve these twin objectives, different approaches have been developed and applied for improvement of quality of working life of workers.

Review of Literature
Quality of Work Life has always been up in studying organizational behavior. It is evident from the history that direct studies on Quality of Work Life started pouring in after the first paper presentation by Davis in 1972 at Arden House, US and thereafter, there was a greater pressure on Quality of Work Life studies as organizations increasingly adopting the philosophy of making the man happy at work for enhancing their motivation and will to work. In present scenario of high technology world, it has become a great concern for management as well as employees. Quality of working life is the most substantial work-related behavioral phenomenon which has positive impact on production, work culture and effectiveness of the organization. Though lot of work has been done on Quality of Work Life in different areas, but unfortunately a bit attention has been made to variables pertaining to the current research endeavor. Therefore, special attentions of researcher especially have been made on this point. Vijay Anand (2013) in his study assesses the quality of work life among employees in India Textile industry using Walton’s model. The results with regard to fair and
adequate payment shows that among employees’ opinion this component is lower than the average and their salary is not satisfactory and is not associated with their job. Thus, this cause job dissatisfaction among employees.

2. Research Methodology

The study is descriptive in Nature; relevant data has been collected from both primary and secondary source of information. Simple Random sampling method was used to collect data from 40 respondents in an organization. The data was collected through structured questionnaire with dimensions of Adequate and fair compensation, safety and health working condition, opportunity for development, opportunity for growth and security, social integration, constitutionalism, work and total life space, social relevance and working life as dimension. The questionnaire was dived into two parts. First part is about the socio- demographic details of an employees and second part is for examining the Quality of work life of an employee.

Objectives of the study

✓ To describe the socio-demographic characteristics of the respondents with perceived level of QWL by the employees in a manufacturing company.
✓ To understand various dimension involved in finding out the quality of work life of the employees.
✓ To suggest some suitable measures for improving the quality of work life among the employees of manufacturing sector.

Universe

The universe of the present study covers the executives, securities, technicians, non-technicians and Engineers in a manufacturing industry. The size of the universe is 250.

Sample Design

In this study, out of 250 samples the researcher adopted simple random sampling techniques using lottery method to select 40 respondents. Simple random sampling method refers to as each member of the population has a known and equal chance of being selected.

3. Findings

Table 1. Respondents by their Socio – Demographic table

<table>
<thead>
<tr>
<th>Variable</th>
<th>Group</th>
<th>Number of respondents (No.40)</th>
<th>Percentage (%)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Age</td>
<td>19 – 30</td>
<td>24</td>
<td>60.0</td>
</tr>
<tr>
<td></td>
<td>31 - 40</td>
<td>11</td>
<td>27.5</td>
</tr>
<tr>
<td></td>
<td>41 - 50</td>
<td>4</td>
<td>10.0</td>
</tr>
<tr>
<td></td>
<td>51 - 60</td>
<td>1</td>
<td>2.5</td>
</tr>
<tr>
<td>Gender</td>
<td>Male</td>
<td>29</td>
<td>72.5</td>
</tr>
<tr>
<td></td>
<td>Female</td>
<td>11</td>
<td>27.5</td>
</tr>
<tr>
<td>Marital status</td>
<td>Yes</td>
<td>22</td>
<td>55.0</td>
</tr>
<tr>
<td></td>
<td>No</td>
<td>18</td>
<td>45.0</td>
</tr>
<tr>
<td>Native place</td>
<td>Rural</td>
<td>17</td>
<td>42.5</td>
</tr>
<tr>
<td></td>
<td>Urban</td>
<td>19</td>
<td>47.5</td>
</tr>
<tr>
<td></td>
<td>Semi- Urban</td>
<td>14</td>
<td>10.0</td>
</tr>
<tr>
<td>Type of family</td>
<td>Nuclear</td>
<td>24</td>
<td>60.0</td>
</tr>
<tr>
<td></td>
<td>Joint</td>
<td>16</td>
<td>40.0</td>
</tr>
</tbody>
</table>

It is inferred from the above table that more than half, 60.0 percent of the respondents are in the age group of 19 to 30 years, Nearly three fourths, 72.5 percent of the respondents are Male, More than half, 55.0 percent of the respondents are married, Nearly half, 47.5 percent of the respondents are from Urban area, More than half, 60.0 percent of the respondents belong to nuclear family setup.
It is evident from the above table that More than half, 57.5 percent of the respondents are from technical department, More than half, 52.5 percent of the respondents are having Experience in 21-30 years, More than half, 67.5 percent of the respondents are Executives, Nearly half, 45.0 percent of the respondents are earning Monthly income 10000-35000 rupees. More than half, 55.0 percent of the respondents were attended 21-30 training programs.

<table>
<thead>
<tr>
<th>Dimension</th>
<th>Group</th>
<th>Number of respondents (No.40)</th>
<th>Percentage (%)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Adequate and fair Compensation</td>
<td>High</td>
<td>18</td>
<td>45.0</td>
</tr>
<tr>
<td></td>
<td>Low</td>
<td>22</td>
<td>55.0</td>
</tr>
<tr>
<td>Safe and Health Working Condition</td>
<td>High</td>
<td>17</td>
<td>42.5</td>
</tr>
<tr>
<td></td>
<td>Low</td>
<td>23</td>
<td>57.5</td>
</tr>
<tr>
<td>Opportunities for development</td>
<td>High</td>
<td>19</td>
<td>47.5</td>
</tr>
<tr>
<td></td>
<td>Low</td>
<td>21</td>
<td>52.5</td>
</tr>
<tr>
<td>Opportunities for growth and security</td>
<td>High</td>
<td>17</td>
<td>42.5</td>
</tr>
<tr>
<td></td>
<td>Low</td>
<td>23</td>
<td>57.5</td>
</tr>
<tr>
<td>Social Integration</td>
<td>High</td>
<td>20</td>
<td>50.0</td>
</tr>
<tr>
<td></td>
<td>Low</td>
<td>20</td>
<td>50.0</td>
</tr>
<tr>
<td>Constitutionalism</td>
<td>High</td>
<td>18</td>
<td>45.0</td>
</tr>
<tr>
<td></td>
<td>Low</td>
<td>22</td>
<td>55.0</td>
</tr>
<tr>
<td>Work and total life Space</td>
<td>High</td>
<td>13</td>
<td>32.5</td>
</tr>
<tr>
<td></td>
<td>Low</td>
<td>27</td>
<td>67.5</td>
</tr>
<tr>
<td>Social Relevance and working life</td>
<td>High</td>
<td>17</td>
<td>42.5</td>
</tr>
<tr>
<td></td>
<td>Low</td>
<td>23</td>
<td>57.5</td>
</tr>
</tbody>
</table>

It is observed from the above table, More than half, 55.0 percent of the respondents have low level of Adequate and fair Compensation, More than half, 57.5 percent of the respondents have low level of Safe and Health Working Condition. More than half, 52.5 percent of the respondents have low level of Opportunities
for development. More than half, 57.5 percent of the respondents have low level of Opportunities for growth and security. Half, 50.0 percent of the respondents have low level of Social Integration. More than half, 55.0 percent of the respondents have low level of Constitutionalism. More than half, 67.5 percent of the respondents have low level of Work and total life Space, More than half, 57.5 percent of the respondents have low level of Social Relevance and working life.

4. Conclusion:
   - The organization can provide regular medical check-up for improving the medical facilities.
   - The management can conduct career programme to increase the standard of work life.
   - The employees can be rewarded with recognition like fringe benefits, and can be awarded with employee of the year or best employee in the department etc.
   - Training programmes can be conducted to improve the safety measures and precautions in the work place.

The researcher found that more than half of the respondents have low level of all the dimensions of Quality of Work Life, namely, Adequate and fair compensation, safety and health working condition, opportunity for development, opportunity for growth and security, social integration, constitutionalism, work and total life space, social relevance and working life. The management must improve the compensation, benefits, safety in the work environment for the employees to attain better Quality of Work Life.

References

International Human Resource Management (IHRM) in the Asia Pacific Region

Balasubramanian Lakshmi Narayanan*
Dr. D. Nirmala**

Abstract
The landscape of Human Resource management in the international arena has been on constant transformation that is progressive in nature. International HR Management (IHRM) practices evolve based on the organizational, industry specific needs and on the global economic conditions. Over the last 50 years Asia Pacific as a region has become the growth engine of the global economy. Human Resource management has started gaining the confidence of business leaders in supporting them to drive the long-term strategy and execution. Talent Management, Capability Building, Performance Driven Culture, Organization Culture, Business acumen are some of the top priorities of the business leaders where HR professionals are expected to focus and support the business leaders in the Asia Pacific region. Globalization has taken Asia Pacific region to an excellent growth path, where the business challenges and opportunities have a direct influence on the International HR Management (IHRM) practices. This paper aims at explaining the transformation of HR practices from a traditional administration role in the past to a true business partnering role and innovative HR practices in the current global business environment.

Keywords: HRM; IHRM; Asia Pacific; Practices; Challenges; Globalization.

1. Introduction
The landscape of Human Resource management in the international arena has been on constant transformation that is progressive in nature. This endless transformation is warranted to meet the business challenges in the competitive global business environment. Multi-National Corporations (MNCs) strive to achieve the best organizational performance to sustain the business success, amidst the growing volatility in the economic conditions. Multi-National companies set up its structure in different models, viz., executive headquarters in one country with production facilities in multiple global locations, setting up subsidiary companies all around the world with parent company in one nation and the third set up involves setting up headquarters in one country and managing its subsidiaries in multiple global locations and with a diversified industrial segmentations (Tatum. M 2010). According to Edwin B. Flippo, Human Resource Management is defined as “Planning, organizing, directing, controlling of procurement development, compensation, integration, maintenance and separation of human resources to the end that individual, organizational and social objectives are achieved”.

International HR management practices evolve based on the organizational, industry specific needs and on the global economic conditions. Asia Pacific region is one of the key regions that fuel the global economic growth. This conceptual paper attempts to share the common International Human Resource Management (IHRM) practices, and the challenges in the Asia Pacific region.

Significance of the study
Globalization and the continuous protectionist policy approaches taken by global superpowers in the recent past has created an instable and a nervous business environment across the Asia Pacific region. The continuous challenges faced by the businesses in the ever-increasing competitive business landscape, require Human Resource management function to think differently from the traditional approach and to come up with innovative solutions in the war for talent attraction, development and retention. In this context, it is important to understand the need for innovative international HR management practices and its challenges in the Asia Pacific region.

Review of Literature
Changes in labor force demographics and migration is an essential part of the globalization. In the past few decades, there have been significant changes in the labor movement and the migration. It is important

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that MNCs understand the trend of this employee migration to better prepare them for the future manpower requirements. (Vance, Charles M. Paik, Younsun, 2006)

The new MNCs that develop from the emerging countries have a different configuration of internationalization compared to the existing models of MNCs (Ghemawat and Hout, 2008)

Organization culture refers to the way things are done with a set of norms, beliefs, behavior and values that are acceptable or otherwise through an organization’s processes, systems and procedures that are either formal or informal (Sarma A.M, 2009)

A holistic perspective of identifying and incorporating all sources of value, internal and external, also tangible and intangible, helps organizations build and sustain a successful structural model (Shermon, Ganesh, 2009)

The effects of globalization have its advantages and disadvantages. While the liberalization gives opportunities for free trading across boundaries, it increases the competition in the local market due to imports of goods and services. This leads to a direct impact on the labor market due to economic liberalization. The more industrialized countries face the challenge of demand for labor and increased cost, while the less industrialized countries face loss of jobs due to the relocation or moving of the industries to foreign countries. (Mutsuddi, Indranil, 2012)

Researches indicates that one of the best ways to develop leaders is to provide opportunities to high potential employees to learn by doing, in other words, on the job training, stretch assignments, coaching and trainings (HCLI & CCL, Mar 2012)

Knowledge management within MNCs, be it headquarters to subsidiary companies or the other way, is highly critical for the success of the organization. (Sekiguchi, Tomoki & Froese, Fabian & Iguchi, Chie, 2016)

Asia Pacific region economic conditions

Over the last 50 years Asia Pacific as a region has become the growth engine of the global economy. Relatively stable governments and long-term policies in the region support the sustainable economic growth in the region. According to the October 2018 Regional Economic outlook: Asia Pacific report released by International Monetary Fund, Asia and Pacific region’s economic conditions continue to gain momentum compared to the global economic condition. While the region used to completely rely on western countries for technical know-how in the past, a number of developing economies in the Asia Pacific region has advanced significantly in the technology space over the past 20 years. Economic growth of Asia for the year 2019 is projected at 5.6%. However, the global geopolitical tensions, protectionist policies by the leading economies in the world and the global financial situations may have some impact on this outlook.

Asia Pacific region has strong growth opportunities in the next 5 to 10 years. The region has a strong economic resilience even during the recession that hit the global economy in 2009. A number of countries in the region bounced back with strong growth plans and continue to march in the right direction.
This indicates that corporate and industrial sectors are expected to grow in countries like China, India, South Korea, Singapore, Japan, Indonesia, Thailand, and in Vietnam in a much-accelerated mode in the coming years. While the external environmental factors such as tsunami, typhoons and floods in some of the key markets poses threats to the economic growth in the region, Asia Pacific region always overcome these challenges with the strong domestic demands and a very strong labor pool.

Business expectations on International HR Management

Gone are the days, when Human Resource Management was treated as personnel administration function in organizations. The effect of globalization has made a very positive impact on personnel management that has transformed itself as an integral part of the organization over the last 20 years. The core focus of personnel management on employee relations and welfare has shifted its gear to holistic approach on the employee productivity and capability.

As business world is getting competitive and tougher every day, the challenges of the organizations remain very high. Increasing pressure on sustainable profitability makes organization to think long-term strategy with short-term focus on execution. Human Resource management has started gaining the confidence of business leaders in supporting them to drive the long-term strategy and execution. The following are the major areas where the business leaders expects HR professional to support the business.
Talent Management - Top Priority

Talent management is one of the critical factors that ensures the availability of quality talent pool to the business critical positions in an organization. Research studies show that companies that shine at talent management practices tend to achieve better earnings than the competitors (WITS Business School Journal, 2012). The different characteristics and expectations of Generation X and Generation Y employees warrant the organization to rethink their long-term talent management strategy. The future Generation Z and their expectations from the employers are going to furthermore add challenges to the HR function in Multi-National Corporations. It is imperative that international assignments or employee movements across the borders are becoming a common sourcing and talent management practice globally. However this approach is getting costly and complex, due to regional variations, employment laws and different benefits and tax regulations within Asia Pacific region (Mercer, Dec 2011). According to the 22nd annual global CEO survey conducted by PWC in 2018, 83% of ASEAN CEOs concerned about trade conflicts, while 82% of them concerned about finding the right skills. Availability of key skills is the 3rd top threat in the year 2019, as rated by global CEOs in the 22nd annual global CEO survey by PWC. This shows the importance and challenges of Talent Management in the APAC region as well as globally.

Capability building – Competitive edge

Each organization has its own unique capability in the form of products or services to its end consumers, which is the differentiating factor between a successful and unsuccessful organization. This uniqueness is the result of building the competence of internal talents that gives the competitive edge over other organizations. It is one of the top priorities of the business leaders in today's corporate world to figure that competitive edge over competition through building employee competence. This is clearly an area where Human Resource professionals are expected to deliver consistent result.

Performance driven culture – Result orientation

Human Resource function in Multi-National Corporations is expected to support the business leaders in driving the performance of the organization. A strong, consistent performance driven culture is expected across the different geographies, where a Multi-National Corporation operate. This requires the Human Resource professional to be business savvy and technically strong in the organizational design initiatives that would help them to drive the performance across the organization.

Organizational Culture – Identity

Multi-National Corporations in today’s global environment struggle hard to establish its global organizational culture, which gives an identity to an organization from both internal and external stakeholders perspective. Human Resource function leads this crucial area together with the business leaders in establishing the corporate organizational culture, without compromising the different host country cultures. Despite the fact that all its internal customers mainly influence the organizational culture, HR policies, practices and systems clearly set the foundation for a strong organization culture.

Business Acumen - Partnering

Any practice within Human Resource function that does not support the business strategy is considered as redundant. Human Resource professional are expected to understand the business model and its challenges so that the human resource strategy can directly add value to the overall business strategy. Dave Ulrich grades HR functions as aligning HR and business strategy, re-engineering organization processes, listening and responding to employees, and managing transformation and change. HR Professionals are required to partner with the business leaders in providing HR solutions that enhance the business productivity.

International HR Management (IHRM) Vs HR Management (HRM)

According to MutsumiLindranil, “International Human Resource Management (IHRM) is the process of procuring, allocating and effectively utilizing human resources in Multi National Corporation”. While HRM is practiced within a country context, IHRM spans across the boundaries in different countries. Globalization of businesses requires healthy IHRM practices. While there is no standard IHRM practice that works perfect for the different organizational needs across the world, western IHRM practices were given preferences in the early days (Vance, Charles and Youngsun, 2006). The role of HR strategy in establishing an MNC is highly significant in the context of not only the implementation of an MNC, but the success of its overall strategy. Over the last 20 years, the growth in the Asia Pacific region paved way to new approaches in the IHRM that best suited the Asian way of running the businesses. Western countries adopt several best Asian HR practices in the recent years.

Common Practices and challenges of IHRM in the APAC region

Leadership

Several researches prove that leaders make a big difference in the way organizations are run in successful manner. Leadership in Multi National organizations require a broader understanding of the global
way of working, cultural intelligence, emotional intelligence and being able to lead the employees with a long term vision for the organization. According to Jackson Terrence, “One of the main tasks of successfully building appropriate management of people within the future organization is to develop both an understanding and involvement of stakeholders’ interests, aspirations and needs”. Human Resource professionals are required to nurture leadership competence and capability in potential talents as part of the people agenda of the business. It is relatively easier to find the technical competency in the Asia Pacific region for critical positions. However MNCs do struggle to identify the right leaders for their organizations.

Regional Headquarters Structure

Regional Headquarters Structure is a common approach adopted by majority of the Multi National organizations in the Asia Pacific region. Key MNCs in Consumer Durables, Consumer Electronics and Fast Moving Consumer Goods industries prefer this structure. Companies like Sony, LG, Google, HP, Dell and Electrolux are some of the examples in the Asia Pacific region that have implemented this structure. Regional Headquarters structure help to align the global strategy with the country operating divisions. The intention of this design is to overcome the tension between global drive for efficiency and local operating divisions’ focus on national effectiveness.

The key challenges in this approach are the understanding of the matrix structure and the global strategy on the country operating units’ part. Although some companies manage it very well, quite a number of organizations in the Asia Pacific region face the challenge in finding the balance between global strategies and managing the country effectiveness. Human Resource professionals play a vital role in establishing this structure at a regional level together with the business leaders, while communicating the global strategies to the different country operating units and at the same time allowing the country to play its strength at a local level.

Emerging Technology

Technology has been on the rise globally; ever since the Internet boom started happening. It is quite evident that organizations start to embrace the latest technologies in all parts of the business segments including HR. Since the early 2000, Multi National organizations started investing in technologies in the areas of learning and development, HR Information System, Performance Management, Talent Management, Recruitment and knowledge management tools. Cloud solutions that are trending in the recent years accelerate the use of technology in the HR arena at much viable cost solutions with greater benefits to the organizations. Technology also helps organization to avoid non-value-added HR services that can be outsourced to improve the efficiency of the overall organization. The use of social media is becoming increasingly a common source of tool to identify the right talents from the external market (Nigel Wright, 2011). This helps both the employers and the prospective candidates. A region like Asia Pacific where multiple languages are spoken by its different countries, it is a big challenge for the organizations to find a simple, but yet the right technology to cater to the business needs. HR leaders have an important role to play in deciding the right tools for the business with the buy-in from business leaders.

Diverse Workforce

Workforce diversity is no longer an option or choice for the Multi National organizations, it is the need of the present and future to leverage the best performance of the diverse workforce. According to Early and Mosakowski (2000), workforce diversity could add potential benefits to the organizations in the form of creativity and innovation in the human resource management and development. The extent of workforce diversity will be on the growing side, the more the organizations move from domestic to multi-domestic to Multi National organizations. At the same time, it is important for the leaders and line managers to understand the different behaviors, attitude and socio-cultural background of the diverse workforce that works in the Multi National organizations. This is one of the challenges of the IHRM to make sure that the workforce diversity is adding value to the organization with the proper understanding by all key stakeholders.

Change Management

Change management in IHRM is a critical area that requires the HR Professionals’ competence in Acquisitions, Mergers and Diversifications. With the growing globalization of economies and the competition, the need for a Multi National Corporation to acquire, merge and diversifying the business is inevitable. This implies the necessity for an effective change management practices that is part of the IHRM. Growing economies like China, India, Indonesia and Vietnam in the Asia Pacific region provides ample opportunities for the MNCs to acquire, merge and diversify the businesses. The effective change management practices at the early stage of all the above 3 transformation activities will decide the success of an organization. From the IHRM perspective, this includes several elements such as Total Rewards, Culture, leadership and performance management.

Cultural Element
Cultural element plays a key role in the success of a Multi-National Corporation. According to Elliott Jacques, organization culture is referred as ‘the customary or traditional ways of thinking and doing things, which are shared to a greater or lesser extent by all members of the organization and which new members must learn and at least partially accept in order to be accepted into the service of the firm.’ Asia Pacific region is known to be a multicultural society compared to the other parts of the region in the world, owing to the number of countries and its traditional cultural background. In each of these countries in the Asia Pacific region, there is a strong influence of a local country culture, where the MNCs try to apply a common corporate culture that best suits the organization. It is observed that a perfect blending of the local country culture with the organization’s corporate culture determines the success of the organization to a great extent. IHRM requires a balanced approach of the country culture and the corporate culture. When there is a push for the corporate culture without understanding the importance of the local host country culture, the company values are not followed by its employees fully.

2. Suggestion and Conclusion

The challenges of IHRM in the Asia Pacific region compels an in-depth understanding of the complexities involved in the way the businesses are run in this part of the world together with the understanding of the different cultural elements. HR practitioners are required to act as a HR Business Partners with a focus on long-term objectives, while supporting short-term operational goals of the organization. This means a big step change for the HR practitioners to prepare themselves for a larger challenge and effective contribution in one of the fastest growing regions in the world.

The growing technology aspects and the mounting aspirations of the younger workforce in the APAC region pose a greater challenge and the need for more innovative IHRM practices in the region. The western HRM practices can no longer be the solutions to address some of the unique challenges that the APAC region faces. This warrants further researches to strengthen the IHRM practices in the APAC region. Increasing HR challenges in the APAC region encourages the need for fresh perspective in the way IHRM has been handled and a better understanding of IHRM by the business leaders as well.

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Knowledge Management practices in IT Sector, Chennai Employees’ Perspectives

Dr. T. Giftson

“Knowledge has to be improved, challenged, and increased constantly, or it will vanish”
- Peter Drucker

Abstract

In today’s changing economy, the key to faster, cheaper and better growth is to focus a company’s knowledge on the effort. Knowledge Management (KM) is an important subsystem of management of an enterprise and a valuable element of the strategy. It is the basic tool of the future management. It gives a chance to assure effective knowledge usage. Being the collection of knowledge, experience and intuition, it becomes a tool of the effective quality improvement. Otherwise, KM is a collection of the organizational processes whose aim is the assurance of synergy in the relationship of data and the possibility of information processing technology with innovative capabilities of workers. When KM implemented provides many tangible and intangible benefits for the organization like raising the quality of service, reducing the cost, managing risk, meeting growth expectations and managing virtual teams. In this study the researcher has attempt to study the perceptive of IT employees’ towards the KM practices, in Chennai. A standardized scale framed by Markand Tare was adopted, researcher sample size is 300 and it was collected by using simple random sampling and adopting lottery Method, results and the discussion are in the full paper.

Key words: Knowledge, KM, organizations

1. Introduction

The world is experiencing unprecedented changes in applications of knowledge in every dimension of development, growth, revitalization and organization. With the knowledge wave gathering momentum, Knowledge Management as a discipline has taken strong roots throughout the corporate world. Organizations are getting differentiated on the basis of the knowledge they possess. The realization of the value of Knowledge assets is essential for business executives. Today’s business executives must position themselves within the new economic realities and leveraging brainpower through KM is one way to start the process of change. The business environment has become increasingly uncertain in recent years because of economic downturn, wars, and unfamiliar diseases; therefore, the ability to anticipate problems and solve problems becomes valuable. A successful firm is one that can live with uncertainties and incorporate them with knowledge resided within the organization in the decision- making process. All firms make strategic decision, but smart decision making lies at the heart of organizational knowledge and its management. Knowledge Management is, comparatively a new field of science. It is based on the present and past theories which have already been implemented in the economic practice. Knowledge Management has been regarded as a key factor in enhancing organizational performance in organizations across the globe. Knowledge Management comprises a range of practices used by organizations to identify, create, represent, and distribute knowledge for reuse, awareness, and learning across the organizations. Knowledge Management programs are typically tied to organizational objectives and are intended to lead to the achievement of specific outcomes, such as shared intelligence, improved performance, competitive advantage, or higher levels of innovation.

Implementing Knowledge Management in an Organization

In recent years, Knowledge Management implementation has become popular among companies. Organizational knowledge is considered a highly valuable strategic asset which mainly includes tangible and intangible organization assets. Furthermore, with the good use of information technology, it is likely to result in effective management. The purpose is to stimulate organizational creativity and to increase company competitiveness. Hansen and Tierney (1999) have noted that the strategies companies are determined by key factors such as; types of customers, corporate character and employee attributes. Other key determinants include human resources, information technology and competitive strategy integrated to elicit the greatest efficiency. Knowledge management must be a reflection of the competitive strategy in order to create customers’ value, earn profit for the organization and manage employees.

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Review of literature

According to Ravi Shankar et al., (2006) Knowledge Management involves strategies and processes of identifying, capturing, and leveraging knowledge to enhance competitiveness. The new world of knowledge-based organizations is distinguished from the organizations of the last millennium by its emphasis on monitoring and controlling the organization by shared knowledge derived from internal and external data sources. It believes in continual transformation of the knowledge base according to changing business strategy. The objective of the research is to understand the KM practices in Indian manufacturing organizations, which are going through a major transition in this area. The research reports the findings of a postal survey carried out to access the impact of KM practices in Indian manufacturing industries. Data were collected and analyzed from 71 industries under this category. The results indicate that the main reasons why these organizations are focusing on KM are gaining competitive advantage and creating new knowledge. However, culture and financial constraints are amongst the highest ranked barrier for KM implementation.

Fonseca (2011) concluded that Knowledge Management has been recognized as a crucial component of a proactively managed organization. It creates competitive advantage in today’s competitive business markets. Implementing Knowledge Management, its sustainability, process and initiatives are quite new to Indian IT firms and is not widely considered and accepted as in theory. The purpose of the study was to investigate and study the implementation strategy and the initiatives of the Human Resource towards Knowledge Management. The present study was conducted in one of the IT companies in Tirichirappalli. A standardized scale framed by (Markand Tare, 2003) was adopted by the researcher to study the implementation of Knowledge Management and the initiatives of the Human Resource and the reliability was found to be (Alpha=.9902) and (Alpha=.8983) respectively. The researcher adopted the simple random sampling techniques and selected (75%) of the population which constituted of 102 respondents using Tippet’s number method. It was found that (28% to 31%) of the respondents felt that there is Moderate level of implementing Knowledge Management elements in the dimensions of strategy, process, incentive, culture and overall implementation of Knowledge Management. Majority of the respondents 48% feel that there is moderate level of Human resource initiatives in the organization. The result of the study can serve as guidelines and this information can be used to identify the actual level of practice carried out in the implementation of Knowledge Management by the organization and the role of Human Resource. Capacity building programmes and training programmes pertaining to Knowledge Management could be used to enhance and enable the employees of the organization to leverage the knowledge and it in turn improves the organizational productivity.

2. Research methodology

Statement of the problem: Information technology is a boon to Indian economy. It has changed the life style of many people and progressively increases the economy of our nation. In the earlier stages the IT industry set up a very strong basement so that now the development of IT industry is in the peek. Chennai is the third largest IT services in our Country. The growth and evolution of the IT industry in Chennai face number of complex challenges, growth & competitive advantage has become strategic perquisites for the organizations. In order to achieve sustained growth in today’s Competitive environment, recent years, many organizations have turned their attention towards KM.

Scope of the Study

The present study is initiated for the purpose of investigating the employees’ opinion about KM and its core attributes. The core challenges are that KM is relatively new and remains a broadly defined concept. Getting it right from a practical KM perspective remains a huge challenge. Even getting to the point where one can articulate exactly what KM opportunity to the employees’ are tackling and can be daunting.

Objectives of the Study

- To know the Socio-demographic characteristics of the employees’ in IT sector.
- To study the Implementation of KM practices as perceived by the employees’.
- To understand the relationship between the employees’ socio-economic conditions and their perception about KM practice in the respective companies.

Hypotheses

1. There is a significant relationship between the present experiences of the respondents with regard to the various dimensions of Implementation of Knowledge Management elements in the organizations.
2. There is a significant relationship between the number of training programme attended of the respondents and various dimensions of Implementation of Knowledge Management.
3. There is a significant difference between the gender of the respondents with regard to their perception of Implementation of Knowledge Management elements.
Primary & Secondary Data
The researcher used standardized scale framed by Tare (2003). The reliability as established by the author was found to be: Section One= 0.9839; Section Two Alpha=0.9902 and section three Alpha= 0.8983. The researcher also has framed questions related to socio-demographic and employment details.

The researcher has collected the secondary data from a collection of book, journal, periodicals and web sites constitute the secondary source of data for the study.

Statistical Methods of Analysis
The investigator applied statistical techniques such as Karl Pearsons Co–efficient of Correlation, ‘Z’-test and ANOVA to draw meaningful inferences using the statistical package (SPSS 17).

Limitations of the Study
- This study has been confined only to the Information Technology sector companies, which are located in Chennai alone, thus the conclusions drawn from this study cannot be generalized and universalized.
- In particular, this study used only for employees’ of selected five Companies as the key respondent.
- Employee perception differs based on the Socio-Cultural context. Therefore, the applicability of this study’s findings to firm in a non-Indian Context is not known.

3. Analysis and interpretation

Table 1. Socio demographic characteristics

<table>
<thead>
<tr>
<th>Variables</th>
<th>No. of Respondents</th>
<th>Percentage</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Age</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>21 to 25 Years</td>
<td>59</td>
<td>19.7</td>
</tr>
<tr>
<td>26 to 30 Years</td>
<td>122</td>
<td>40.7</td>
</tr>
<tr>
<td>31 to 35 Years</td>
<td>59</td>
<td>19.7</td>
</tr>
<tr>
<td>36 to 40 Years</td>
<td>42</td>
<td>14.0</td>
</tr>
<tr>
<td>Above 40 Years</td>
<td>18</td>
<td>6.0</td>
</tr>
<tr>
<td><strong>Educational Qualification</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>BE</td>
<td>221</td>
<td>73.3</td>
</tr>
<tr>
<td>MCA</td>
<td>59</td>
<td>19.3</td>
</tr>
<tr>
<td>M.Sc</td>
<td>7</td>
<td>2.3</td>
</tr>
<tr>
<td>B.Tech</td>
<td>13</td>
<td>4.3</td>
</tr>
<tr>
<td><strong>Designation</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Web developer</td>
<td>72</td>
<td>24.0</td>
</tr>
<tr>
<td>Software Engineer</td>
<td>73</td>
<td>24.3</td>
</tr>
<tr>
<td>Test Engineer</td>
<td>45</td>
<td>15.0</td>
</tr>
<tr>
<td>System Architect</td>
<td>48</td>
<td>16.0</td>
</tr>
<tr>
<td>Business Analyst</td>
<td>62</td>
<td>20.7</td>
</tr>
<tr>
<td><strong>Present experience</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Less than 1 year</td>
<td>47</td>
<td>15.7</td>
</tr>
<tr>
<td>1 to 3 years</td>
<td>168</td>
<td>56.0</td>
</tr>
<tr>
<td>4 to 6 years</td>
<td>71</td>
<td>23.7</td>
</tr>
<tr>
<td>Above 6 years</td>
<td>14</td>
<td>4.7</td>
</tr>
<tr>
<td><strong>Domicile</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Rural</td>
<td>35</td>
<td>11.7</td>
</tr>
<tr>
<td>Urban</td>
<td>127</td>
<td>42.3</td>
</tr>
</tbody>
</table>
Semi-Urban 138 46.0

Number of Training Programmes Attended

<table>
<thead>
<tr>
<th>Number of Programmes</th>
<th>Attended</th>
</tr>
</thead>
<tbody>
<tr>
<td>Only One</td>
<td>27</td>
</tr>
<tr>
<td>Two</td>
<td>69</td>
</tr>
<tr>
<td>Three</td>
<td>36</td>
</tr>
<tr>
<td>Four</td>
<td>51</td>
</tr>
<tr>
<td>Five</td>
<td>38</td>
</tr>
<tr>
<td>More than Five</td>
<td>79</td>
</tr>
</tbody>
</table>

It is evident from the above table, that less than half (40.7%) of the respondents are in the age group of 26-30 years. Slightly less than one-fifth of the respondents (19.7%) are in the age groups of 21-25 years and 31-35 years, remaining 14% belong to 36-40 years and 6% of the respondents are above 40 years.

The reason for higher percentage in IT company is mainly because they preference only younger age group considering their performance and efficiency. While analyzing the domicile of the respondents, it was found that less than half (46%) of the respondents hail from semi urban. More than one third (42%) of the respondents are from urban background and rest (11.7%) of them only hail from rural background. It is inferred from the above table, majority (73.3%) of the respondents hold Bachelor degree in Engineering, about (19.3%) of the respondents had completed their MCA. (4.3%) of the respondents are finished B.Tech and a meager percentage (2.3%) of the respondents have done M.Sc Computer science. It is seen that (24.3%) of the respondents are Software Engineer and a little less than one fourth of the respondents (24%) are Web developers, (20.7%) of the respondents are Business Analyst, meager percent of the respondents are as System Architect and Test engineer (15%).

The above table illustrates that more than half (50.3%) of the respondents feel that there is a high degree of Implementation of Knowledge Management Incentives. (37.3%) of the respondents feel that there is a high level of Implementation of Knowledge Management Strategy. (25% to 36%) of the respondents feel that moderate degree of Implementation of Knowledge Management Culture, Knowledge Management Initiatives, Knowledge Management Process, Knowledge Management Documentation/ Maintenance & Protection and Knowledge Management Measurement.
Table 3. Karl Pearson’s co-efficient of correlation between age, present experience & number of training programme attended of the respondents and the implementation of knowledge management

<table>
<thead>
<tr>
<th>Variables</th>
<th>Age</th>
<th>Present experience</th>
<th>Number of training programme attended</th>
</tr>
</thead>
<tbody>
<tr>
<td>KM Strategy</td>
<td>.107</td>
<td>.150</td>
<td>.142</td>
</tr>
<tr>
<td></td>
<td>P &gt; 0.05</td>
<td>P &lt; 0.05</td>
<td>Significant</td>
</tr>
<tr>
<td></td>
<td>Not Significant</td>
<td>Significant</td>
<td>Significant</td>
</tr>
<tr>
<td>KM Initiatives</td>
<td>.090</td>
<td>.153</td>
<td>.236</td>
</tr>
<tr>
<td></td>
<td>P &gt; 0.05</td>
<td>P &lt; 0.05</td>
<td>Significant</td>
</tr>
<tr>
<td></td>
<td>Not Significant</td>
<td>Significant</td>
<td>Significant</td>
</tr>
<tr>
<td>KM Process</td>
<td>.033</td>
<td>.104</td>
<td>.220</td>
</tr>
<tr>
<td></td>
<td>P &gt; 0.05</td>
<td>P &gt; 0.05</td>
<td>Significant</td>
</tr>
<tr>
<td></td>
<td>Not Significant</td>
<td>Not Significant</td>
<td>Significant</td>
</tr>
<tr>
<td>KM Documentation /</td>
<td>.094</td>
<td>.130</td>
<td>.267</td>
</tr>
<tr>
<td>Maintenance &amp; Protection</td>
<td>P &gt; 0.05</td>
<td>P &lt; 0.05</td>
<td>Significant</td>
</tr>
<tr>
<td></td>
<td>Not Significant</td>
<td>Not Significant</td>
<td>Significant</td>
</tr>
<tr>
<td>KM Incentives</td>
<td>.065</td>
<td>.184</td>
<td>.312</td>
</tr>
<tr>
<td></td>
<td>P &gt; 0.05</td>
<td>P &lt; 0.05</td>
<td>Significant</td>
</tr>
<tr>
<td></td>
<td>Not Significant</td>
<td>Significant</td>
<td>Significant</td>
</tr>
<tr>
<td>KM Measurement</td>
<td>.089</td>
<td>.218</td>
<td>.397</td>
</tr>
<tr>
<td></td>
<td>P &gt; 0.05</td>
<td>P &lt; 0.05</td>
<td>Significant</td>
</tr>
<tr>
<td></td>
<td>Not Significant</td>
<td>Significant</td>
<td>Significant</td>
</tr>
<tr>
<td>KM Culture</td>
<td>.132</td>
<td>.167</td>
<td>.254</td>
</tr>
<tr>
<td></td>
<td>P &lt; 0.05</td>
<td>P &lt; 0.05</td>
<td>Significant</td>
</tr>
<tr>
<td></td>
<td>Significant</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Overall Degree of</td>
<td>.096</td>
<td>.152</td>
<td>.266</td>
</tr>
<tr>
<td>implementation</td>
<td>P &gt; 0.05</td>
<td>P &lt; 0.05</td>
<td>Significant</td>
</tr>
<tr>
<td></td>
<td>Not Significant</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

The table shows that there is no significant relationship between the age of the respondents and their perception of Implementation of Knowledge Management elements in the dimensions of Knowledge Management Strategy, Knowledge Management Initiatives, Knowledge Management Process, Knowledge Management Documentation/Maintenance & Protection, Knowledge Management Incentives, and Knowledge Management Measurement. There is a significant relationship between the age of the respondents and the Knowledge Management Culture. From the table we can infer that there is a significant relationship between the Present experience of the respondents and their perception of the Knowledge Management Implementation of various dimensions like Knowledge Management. The table illustrate that there is a significant relationship between the Number of Training Programme attended of the respondents and various dimension of Implementation of Knowledge Management.

Table 4. ‘Z’ test between gender of the respondents with regard to various dimensions of implementation of knowledge management

<table>
<thead>
<tr>
<th>Dimensions</th>
<th>X</th>
<th>S.d.</th>
<th>Statistical inference</th>
</tr>
</thead>
<tbody>
<tr>
<td>KM Strategy</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Male</td>
<td>2.0867</td>
<td>.84295</td>
<td>Z = .351 df= 297</td>
</tr>
<tr>
<td>Female</td>
<td>2.0533</td>
<td>.80089</td>
<td>Sig= 0.726 P&gt;0.05</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>Not Significant</td>
</tr>
<tr>
<td>KM Initiatives</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Male</td>
<td>2.0200</td>
<td>.73704</td>
<td>Z = .543 df= 298</td>
</tr>
<tr>
<td>Female</td>
<td>1.9733</td>
<td>.75036</td>
<td>Sig = 0.587 P&gt;0.05</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>Not Significant</td>
</tr>
<tr>
<td>KM Process</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Male</td>
<td>2.0200</td>
<td>.75503</td>
<td>Z = .470 df= 298</td>
</tr>
<tr>
<td>Female</td>
<td>1.9800</td>
<td>.71859</td>
<td>Sig= 0.639 P&gt;0.05</td>
</tr>
</tbody>
</table>
It is inferred from the above table that there is no significant difference between the Gender of the respondent with regard to their perception of Implementation of Knowledge Management elements in the dimensions of Knowledge Management Strategy, Knowledge Management Initiatives, Knowledge Management Process, Knowledge Management Documentation Maintenance and Protection, Knowledge Management Incentives, Knowledge Management Measurement, Knowledge Management Culture and Overall Implementation of Knowledge Management.

Major Findings

- Less than half (40.7%) of the respondents are in the age group of 26-30 years. Slightly less than one-fifth of the respondents (19.7%) are in the age groups of 21-25 years and 31-35 years, remaining (14%) belong to 36-40 years and (6%) of the respondents are above 40 years.
- Less than half (46%) of the respondents hail from semi urban. More than one third (42%) of the respondents are from urban background and rest (11.7%) of them only hail from rural background.
- (24.3%) of the respondents are Software Engineer and a little less than one fourth of the respondents (24%) are Web developers, (20.7%) of the respondents are Business Analyst and a meager percent of the respondents are as System Architect (16%) and Test engineer (15%).
- More than half (56%) of the respondents were having experience of up to 3 years. Less than one forth (23.7%) of the respondents were having experience of (4-6) years. (15.7%) of the respondents were having experience of 1 year and minimum percentage (4.7%), of the respondents were having experience of above 6 years.
- More than one fourth (26.3%) of the respondents attended more than five training programme, (23%) of the respondents have attended two programmes, (17%) of the respondents have attended four programmes, (12.7%) of the respondents have attended five programmes, (12%) of the respondents have attended three programmes and (9%) of the respondents are attended only one programme.

4. Discussion, Suggestions and Conclusion

The present study on implementation of Knowledge Management perspective among IT employees in Chennai has enabled the researcher to embark upon detailed analysis and meaningful conclusion by carefully interpreting the findings that have emerged through the enquiry. The review of literature was collected from different aspects pertaining to variables. The variable has been discussed with appropriate literature, as presented in the interpretation and findings.

According to the implementation of Knowledge Management, it is evident that there is no significance relationship between the age of the respondents and their perception of implementation of Knowledge Management elements in the dimensions of strategy, initiatives, process, Documentation/Maintenance & protection, incentives, measurement and culture. The result indicates that majority of the respondents (47%) feel that there is a moderate level of implementation of Knowledge Management in the organizations, this is because, Knowledge Management is at an introduction stage in this
The Knowledge Management is a very wide, interdisciplinary problem treating the intellectual capital as the basic attribute of the organizations’ competitiveness. The Knowledge Management is the system solution which makes the radical increase of usage efficiency of possessed implicit and explicit knowledge possible causing that it will be the knowledge of the whole organizations. The researcher has attempted to contribute to developing an understanding of importance of Knowledge Management. As conclude that, employees’ in these organizations believe that KM is in moderate level. The employees’ should be made aware of the benefit of using KM in every work. The new employee should be made to understand the KM efforts of the organizational in the induction itself.

The organizations should give freedom to the human resource department to initiative the new tools and techniques of KM programmes. The human resource department should periodically review the KM process, improving the documentations and check if it efficient and effective and suitable measures should be introduced.

**Conclusion**

The Knowledge Management is a very wide, interdisciplinary problem treating the intellectual capital as the basic attribute of the organizations’ competitiveness. The Knowledge Management is the system solution which makes the radical increase of usage efficiency of possessed implicit and explicit knowledge possible causing that it will be the knowledge of the whole organizations. The researcher has attempted to contribute to developing an understanding of importance of Knowledge Management. As conclude that, employees’ in these organizations believe that KM is in moderate level. The employees’ should be made aware of the benefit of using KM in every work; a new employee should be made to understand the KM efforts of the organizational in the induction itself. KM is an exciting, vibrant field of practice, full of cross-disciplinary applications and the need for innovation. But it is also a field struggling to find its foundations in a sea of communications, demands, and conflicting interests, not all of which are consistent with the need to found a productive discipline based in both theory and practice.

**Reference**

Human Resources Management Practices in Information Technology (IT) Sector

Niveatha.J*
Dr.T.Giftson**

Abstract
The effective HRM practices is vital demand with well-qualified employees at all times. The technology and HRM has a broad influence upon each other. HR professional should be able to adopt technologies for the effective HR function to support organization and work design and also support a proper managerial climate for innovative and knowledge based organization. These technology advances are being driven primarily by strong demands from human resources professionals for enhancement in speed and effectiveness. HRM could support the efforts of technological to achieve high performance. The aim of the present study is to find employee perspectives on Human Resources Management Practices. The present study consists of 6 dimensions like Human Resources Planning, Staffing Practices, Incentives Practices, Performance Appraisal Practices, Training Practices, Team Work and Employee Participation. The Universe of the present study consist of 150 employees among that researcher select 50 samples by simple random sampling. The overall findings of the study shows that 26 percent of the respondents have high level of satisfaction on HR Practices, 48 percent of the respondents have medium level of satisfaction on HR Practices and 26 percent having low level of satisfaction on HR Practices, other major finding will be discussed in the full paper.

Keywords: Human resource management; practices; organization; employee.

1. Introduction
Human Resource Management is a term used to reflect that part of an IT sector activities concerned with the recruitment, development and management of its employees. The modern field of today’s human resource management is attracting a great deal of attention because of its potential impact on IT sector survival and prosperity. HRM practices impact the employee satisfaction is concerned with providing service and programme to develop and felicitate employee satisfaction and growth to give their best effort to the IT sector. HRM consist of all the activity by an enterprise to ensure the effective utilizations of employee towards attaining individual, group and IT sector goal. An IT sector’s HRM function focus on the employee side of management and it consist of HRM practices that help the IT sector to effectively deal with employee issues and activities. The effective HRM practices have been deem by many researcher to be of almost important in providing IT sector with competitive advantage and ability to operate effectively with a competitive IT sector.

IT sectors have particular characteristics across the globe for the effective technology and phenomenal compound growth of about 60 percent per annum. The technological revolution has brought about unexpected opportunities in the field of IT sector. It built up valuable brand equity for itself in global market the sector has lead economic transformation of the company and alter the perception of Sector. There has been much update on skill set of equip themselves with current technology trends so finally it will boil down to IT sectors how fast they are taking up automation. The IT sector will witness a predictable growth from 16 percent last year and falls down to 11 percent. IT sector success is due to a combination of resource endowment and encouragement from a normal intrusive government and good times. There is a need for a total revamping of the infrastructure of the IT sector which unfortunately is pending due to fund unavailability. Fund shortage is also affecting the medium and small IT enterprise which need a basic financial stability for their start up. It is believed that the knowledge and skill after employee in an organization to sustaining higher rate of growth.

Technology and HRM have a broad range of influences upon each other, and HR professionals should be able to adopt technologies that allow the reengineering of the HR function, be prepared to support organizational and work-design changes caused by technology, and be able to support a proper managerial climate for innovative and knowledge-based organizations.

Technology and HRM have a broad range of influences upon each other, and HR professionals should be able to adopt technologies that allow the reengineering of the HR function, be prepared to support organizational and work-design changes caused by technology, and be able to support a proper managerial climate for innovative and knowledge-based organizations.

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Review of literature

Alok mishra & ibrahim akman (2010) Human Resource Management Practices shows the introducing the applications of HR activities in information technology (IT) in the field of human resource management (HRM) in general. This is due to the fact that IT and its wide range of applications have already made their presence in HR. This will be followed by a report on the findings of a survey on the present trends in organizations with in the different sectors in Turkey. Although the impact of IT on HRM has long been attracting the interest of academics, no empirical research has ever been realized in this field in Turkey, as the result IT sector has the impact of all the sector in terms of HRM to certain extent. The empirical result says that these sectors do not apply the technology systematically in the performance of HRM function.

Mishraet.al(2010)The effective HRM practices is vital demand with well-qualified employees at all times. The technology and HRM has a broad influence upon each other. HR professional should be able to adopt technologies for the effective HR function to support organization and work design and also support a proper managerial climate for innovative and knowledge based organization. These technology advances are being driven primarily by strong demands from human resources professionals for enhancement in speed and effectiveness. HRM could support the efforts of technological to achieve high performance. The biggest benefit of using IT in HRM in organization is to freeing the staff from intermediary roles thus enabling them to concentrate on strategic planning in human resource organization and development.

Seyni mamoudou(2014) The top level management realize the power of information technology as the tools for reaching business targets. The IT sector plays as a tools to help not only to fulfill defined company’s goal but to optimize the work process of the employee s well. Trends and result of the contemporary studies constantly confirm contribution of the IT tools in HR activities is to accomplish assigned HR function by using the source of IT capabilities. This study gives a brief description about possibilities of IT usage in HR field for measuring human capital and use of HR information system.

Nagendrababu & girisha(2018) this study says the information technology has been developed and advanced over a time. The rapid growth of electronic management revolution it’s been a necessary to create efficient and effective relationship with HRM practices. The HRM practices is considered as the most significant function in all the activities of the organization. As it consider greatly with intellectual skills. The organizations have replaced the HR administration exercise with electronic HR administrativ. The cost benefit for the organization by implementing HRM practices and as well as to candidates to get job.

2. Research methodology

Aim

To study the Human Resources Management Practices in Information Technology (IT) Sector (with special Reference to Preuthy Software Solution, Chennai- Employee Perspectives).

Objectives of the study

1. To describe the socio-demographic characteristic of the respondents.
2. To study the different factors contributing to HRM Practices.
3. To find out the association and difference between the selected socio- demographic variables and factor contributing to HRM Practices.
4. To suggest suitable measures for improving the existing HRM Practices.

Hypothesis

1. There is a significant relationship between the age of respondent and HRM practices.
2. There is a significant relationship between the year of experience of respondent and HRM practices.
3. There is a significant variance among the department of respondent and HRM Practices.

Research design

In this study the Researcher attempt to describe the various characteristics of HRM Practices and its association with the selected socio demographic variable. So the researcher used descriptive design.
Universe & sampling
The universe of the study constitutes 150 employees of Preethy Software Solutions, Chennai. From the universe the researcher selected 50 samples by simple random sampling by adopting lottery method.

Pilot study
Before conducting the study, the researcher made visit to the company and collected details. The researcher has discussion with the Human Resource manager regarding the topic chosen and the feasibility of conducting with the employees of Preethy Software Solutions, Chennai.

Source of data
The researcher used the questionnaire method to collect the data from the employees, and the secondary source of data were collected from company files, books, journals etc.

Tools of data collection

Limitation of the study
1. Since the manager and employees were busy by the nature of their job, the researcher found it difficult to get the filled in questionnaire, however the researcher was successful in getting filled questionnaire.
2. Though the researcher explained to the respondents that the study was fulfillment of the academic career; the respondents has some misconception that the researcher might report to the management.

3. Result and Analysis

<table>
<thead>
<tr>
<th>Variables</th>
<th>Frequency N=50</th>
<th>Percentage</th>
</tr>
</thead>
<tbody>
<tr>
<td>Age</td>
<td></td>
<td></td>
</tr>
<tr>
<td>21-25</td>
<td>18</td>
<td>36</td>
</tr>
<tr>
<td>26-30</td>
<td>32</td>
<td>64</td>
</tr>
<tr>
<td>Gender</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Male</td>
<td>40</td>
<td>80</td>
</tr>
<tr>
<td>Female</td>
<td>10</td>
<td>20</td>
</tr>
<tr>
<td>Experience</td>
<td></td>
<td></td>
</tr>
<tr>
<td>0-6</td>
<td>33</td>
<td>66.0</td>
</tr>
<tr>
<td>7-12</td>
<td>17</td>
<td>34.0</td>
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<tr>
<td>Native Background</td>
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<tr>
<td>Urban</td>
<td>43</td>
<td>86</td>
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<tr>
<td>Rural</td>
<td>7</td>
<td>14</td>
</tr>
<tr>
<td>Designation</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Trainee</td>
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<td>12</td>
</tr>
<tr>
<td>Process Executive</td>
<td>18</td>
<td>36</td>
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<tr>
<td>Senior Process Executive</td>
<td>13</td>
<td>26</td>
</tr>
<tr>
<td>Acting Team Leader</td>
<td>13</td>
<td>26</td>
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<tr>
<td>Monthly Income</td>
<td></td>
<td></td>
</tr>
<tr>
<td>10000-20000</td>
<td>37</td>
<td>72</td>
</tr>
<tr>
<td>20001-30000</td>
<td>13</td>
<td>26</td>
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</table>

Majority(64%)of the respondents in the age group of 26-30, Majority(male 80%) of the respondents, Majority(66%) of the respondents are having 0-6 years of experience, Majority(86%) of the respondents are in the urban, Majority(36%) of the respondents are process executives Majority(72%) of the respondents are earning 10000 to 20000.

<table>
<thead>
<tr>
<th>Variables</th>
<th>Low</th>
<th>Medium</th>
<th>High</th>
</tr>
</thead>
<tbody>
<tr>
<td>Human resources planning</td>
<td>28</td>
<td>28</td>
<td>44</td>
</tr>
<tr>
<td>Staffing Practices</td>
<td>38</td>
<td>14</td>
<td>48</td>
</tr>
<tr>
<td>Incentives Practices</td>
<td>28</td>
<td>34</td>
<td>38</td>
</tr>
<tr>
<td>Performance Appraisal</td>
<td>40</td>
<td>32</td>
<td>28</td>
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</tbody>
</table>
44% of the respondents have high level of human resources planning. Nearly half 48% of the respondents have high level of staffing practices, 38% of the respondents have high level of incentives practices, 28% of the respondents have high level of performance appraisal, 38% of the respondents have high level of training practices. 34% of the respondents have high level of team work and 30% of the respondents having high level of employee participation.

Table 3. Karl Pearson’s co-efficient of correlation between the respondent’s age and various dimensions of human resources management practices

<table>
<thead>
<tr>
<th>Variables</th>
<th>Correlation Values</th>
<th>Statistical Inference</th>
</tr>
</thead>
<tbody>
<tr>
<td>Age and Human Resource Planning</td>
<td>.032</td>
<td>P&gt;0.05</td>
</tr>
<tr>
<td>Age and Staffing Practices</td>
<td>.012</td>
<td>P&gt;0.05</td>
</tr>
<tr>
<td>Age and Incentives Practices</td>
<td>.046</td>
<td>P&gt;0.05</td>
</tr>
<tr>
<td>Age and Performance Appraisal Practices</td>
<td>.007</td>
<td>P&gt;0.05</td>
</tr>
<tr>
<td>Age and Training Practices</td>
<td>.306*</td>
<td>P&lt;0.05</td>
</tr>
<tr>
<td>Age and Team Work Practices</td>
<td>.142</td>
<td>P&gt;0.05</td>
</tr>
<tr>
<td>Age and Employee Participation Practices</td>
<td>.131</td>
<td>P&gt;0.05</td>
</tr>
<tr>
<td>Age &amp; Overall</td>
<td>.082</td>
<td>P&gt;0.05</td>
</tr>
</tbody>
</table>

From the above table using Karl Pearson’s co-efficient of correlation it is found that there is a significant relationship between age and training practices and no significant relationship between the respondents age and various dimension of human resources management practices like human resources planning, staffing practices, incentives practices, performance appraisal practices, team work, employee participation and over all human resources management practices.

Table 4. Karl Pearson’s co-efficient of correlation between the respondents experience and various dimensions of human resources management practices

<table>
<thead>
<tr>
<th>Variables</th>
<th>Correlation Values</th>
<th>Statistical Inference</th>
</tr>
</thead>
<tbody>
<tr>
<td>Experience and Human Resource Planning</td>
<td>.087</td>
<td>P&gt;0.05</td>
</tr>
<tr>
<td>Experience and Staffing Practices</td>
<td>.016</td>
<td>P&gt;0.05</td>
</tr>
<tr>
<td>Experience and Incentives Practices</td>
<td>.215</td>
<td>P&gt;0.05</td>
</tr>
<tr>
<td>Experience and Performance Appraisal Practices</td>
<td>.126</td>
<td>P&gt;0.05</td>
</tr>
<tr>
<td>Experience and Training Practices</td>
<td>.239</td>
<td>P&gt;0.05</td>
</tr>
<tr>
<td>Experience and Team Work Practices</td>
<td>.088</td>
<td>P&gt;0.05</td>
</tr>
<tr>
<td>Experience and Employee Participation Practices</td>
<td>.155</td>
<td>P&gt;0.05</td>
</tr>
<tr>
<td>Experience and Overall</td>
<td>.138</td>
<td>P&gt;0.05</td>
</tr>
</tbody>
</table>
From the above table using Karl Pearson’s co-efficient of correlation it is found that there is no significant relationship between the respondents experience and various dimension of human resources management practices like human resources planning, staffing practices, incentives practices, performance appraisal practices, training, team work, employee participation and overall human resources management practices.

Table 5. Oneway analysis of variance among the respondents department and human resources management

<table>
<thead>
<tr>
<th>Dimensions</th>
<th>Variance</th>
<th>Mean Square</th>
<th>Sum of Square</th>
<th>Mean</th>
<th>df</th>
<th>Statistical Inference</th>
</tr>
</thead>
<tbody>
<tr>
<td>Departments and human resource planning</td>
<td>Between Group</td>
<td>1.011</td>
<td>4.043</td>
<td>G1= 19.8750</td>
<td>G2= 19.1765</td>
<td>49</td>
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<tr>
<td>Departments and staffing practices</td>
<td>Between Groups</td>
<td>4.181</td>
<td>16.722</td>
<td>G1=24.5000</td>
<td>G2=25.0000</td>
<td>49</td>
</tr>
<tr>
<td></td>
<td>Within Groups</td>
<td>5.017</td>
<td>225.778</td>
<td>G3=23.5556</td>
<td>G4=23.7778</td>
<td>G5=24.0000</td>
</tr>
<tr>
<td>Departments and incentives practices</td>
<td>Between group</td>
<td>5.880</td>
<td>23.519</td>
<td>G1=24.3750</td>
<td>G2=24.1765</td>
<td>49</td>
</tr>
<tr>
<td></td>
<td>Within group</td>
<td>6.688</td>
<td>300.981</td>
<td>G3=22.4444</td>
<td>G4=24.2222</td>
<td>G5=24.1429</td>
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<tr>
<td>Department and performance appraisal</td>
<td>Between group</td>
<td>2.490</td>
<td>9.961</td>
<td>G1=25.0000</td>
<td>G2=24.3529</td>
<td>49</td>
</tr>
<tr>
<td>Department and training practices</td>
<td>Between group</td>
<td>8.396</td>
<td>7.951</td>
<td>G1=25.120</td>
<td>G2=24.4118</td>
<td>49</td>
</tr>
<tr>
<td>Department and team work</td>
<td>Between group</td>
<td>3.721</td>
<td>14.883</td>
<td>G1=24.5000</td>
<td>G2=24.0000</td>
<td>49</td>
</tr>
<tr>
<td></td>
<td>Within group</td>
<td>7.421</td>
<td>333.937</td>
<td>G3=23.0000</td>
<td>G4=24.4444</td>
<td>G5=24.5714</td>
</tr>
<tr>
<td>Department and employee participation</td>
<td>Between group</td>
<td>4.777</td>
<td>19.108</td>
<td>G1=21.5000</td>
<td>G2=20.5294</td>
<td>49</td>
</tr>
<tr>
<td></td>
<td>Within group</td>
<td>6.804</td>
<td>306.172</td>
<td>G3=21.5556</td>
<td>G4=22.0000</td>
<td>G5=20.4286</td>
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<tr>
<td>Department and overall</td>
<td>Between group</td>
<td>38.105</td>
<td>152.418</td>
<td>G1=1.6488E2</td>
<td>G2=1.6165E2</td>
<td>49</td>
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<tr>
<td></td>
<td>Within group</td>
<td>57.404</td>
<td>2583.202</td>
<td>G3=1.5889E2</td>
<td>G4=1.6178E2</td>
<td>G5=1.6200E2</td>
</tr>
</tbody>
</table>

G1= Finance  G2=Developing  G3=Designation  G4=Testing  G5=HR

From the above table it is clear that there is no significant variance among the department of respondents and in the dimensions of human resource planning, staffing practices, incentives practices,
performance appraisal, training, team work employee participation and overall human resources management practices.

4. Findings and Conclusion

Findings

Majority 64% of the respondents are in the age group of 26-30. Majority 80% male of the respondents are 44% of the respondents have high level of human resources planning. Nearly half 48% of the respondents have high level of staffing practices, 38% of the respondents have high level of incentives practices. 40% of the respondents low level of performance appraisal. 38% of the respondents have high level of training practices. 38 % of the respondents have medium level in team work practices. Nearly half 44% of the respondents are medium level of employee participation practices. Nearly half 48 % are medium level of overall of the human resources management practices.

Suggestion

➢ Human Resource Planning should to improved high for the future employee to increase the organization growth.
➢ Staffing Practices need to work for the manpower analysis the future employee development.
➢ Incentives Practices is to be improved for the employee in the organization to sustain and make them work sincerely in the organization.
➢ Performance appraisal Practices should be done in a periodic invertal to know the performance of the employee and indentify their lacking areas.
➢ Training Practices should be given to the employee to update the current technology and to get knowledge about the work
➢ Team work need to be improved so that the employee can be unity on doing the assignments
➢ Employee Participation Practices have to revised in order to make the employee to participate in all the activities of the organization.

Conclusion

The HRM practices that are now days commonly being used in all the emerging companies as well developed companies too. The study reveals that the employees of preethy software solution Chennai are providing all factors which are leading to overall to the employees .The study of HRM practices help the management to know about the company .From this study researcher came to know that the majority of the employee come forward to share about the organization activities and few employee are not able to do so. The company can concentrate on the HR practices to enhance the employee morale activities. The HR practices are at the satisfactory level in the organization. The satisfactions of the employee are taken into consideration as the fact that they are the key stone of the organization development.

References

1. Dr. K Nagendraabu and Girisha M, 2018, Associate professor, Department of studies in Commerce, university of Mysore, Government College.
2. Dr.Seyni Mamoudou, 2014 global journal of business management and information technology, impact of information technology in Human Resources Management, faculty of law, economics and management FADEG university of Tahoua Niger
Employees Retention among Management Staff in a Manufacturing Sector at Tiruchirappalli

L. Harini*
Dr. M. Daniel Solomon**

Abstract

The employee retention is overall strategy or ability of an organization to retain its best employees. Every organization invests time and money to groom new joinees. The present study aims to understand and learn about the retention strategies and supportive relationship between employees and management. The main objectives of the study are to find the reason for employee retention and to provide suitable suggestion to retain the employee in the organization. A standardized scale developed by Ms. P. Thilaka, the scale consist of 7 dimensions namely Retention strategies, Retention problems, Satisfaction, Support career goals, Sufficient Recognition, Training and Development. A Sample of 60 executives was taken as respondents from a private industry located in Tiruchirappalli District, Tamil Nadu, India. The researcher used the simple random sampling in order to get the data. Overall finding of the study reveals that the more than one fourth 27 percent of respondents are having low level of Retention strategies. Nearly half of the respondents are having moderate level of Retention strategies, and 30 percent of the respondents are having high level of Retention strategies.

Keywords: Retention strategies; Retention problems; Satisfaction; to support career goals; Sufficient Recognition; Training and Development.

1. Introduction

In India over the past few years, the industrial sectors has been growing in leaps and bounds like any other sectors. Today one of the most critical and emerging issues facing by the organizations is to retain the employees especially in the industries. Even though there are more and more industries are coming up, the turnover rate is considerably high when compared to other industries. The companies in India as well as in other countries face a formidable challenge of recruiting and retaining talents. Losing the talents and employees result in the performances losses, which can have long term negative effect on companies especially if the departing talents leaves gaps in its execution capability and human resources functioning. Retaining the employee is very important in any organizations. It’s very much important to retain the key performers. For achieving individual as well as organization, is very much essential to retain talented employee. Talented and good employees are assets of an organization. Retaining talented employee is highly important for the long term growth as well as success of the business. Successful organizations recognized the worth of retaining their best employees and continuously look for their growth.

Employees are the important in running a business; without them the business would be unsuccessful. According to bureau of labour statistics, more and more employers today are finding the employees remains for approximately 18 to 24 months. It has become a key challenge in organization to retain the best and most desirable employees.

Employee retention is an effort by a business to maintain a working environment which supports current staffs in remaining with the company. Many of the employee retention policies are aimed at addressing the various needs of the employees to enhances their job satisfaction and reduce the substantial cost involved in hiring and training new staff. Retention strategy helps the organization provide effective employee communication to improve commitment and enhances workforce support for key corporate initiatives.

Review of Literature

Rao, Aparna, K (2012), “A Study on Employee Retention Strategies”. The researcher has brought out the Retention approaches, Strategies for knowledge workforce for achieving competitive advantage. Researcher explored all aspects related to workforces stability issues in the employment market with a focus on retaining employees. It was found that Employee Retention was the most critical issues facing corporate leaders as a result of the shortage of skilled labor, economic growth and employee turnover. Researcher

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concluded that employee retention can be practiced better by motivating the employees in the aspects of open communication which enforces loyalty among employees.

Masibigiri, V. and nienaber H. (2011), “The Factors affecting retention of employee” the researcher has focused on the factors which influencing the retention of employees. The study reveals that factors that affects are work content, utilizations of skills, career development, work life balances, compensation, security needs, leadership and drive. It was found that the retention problems was worse for the public sectors. It is suggested that retaining the employees in particular was important for both public and private sectors.

2. Research Methodology

The main aim of the study is to examine the Employees Retention among Management Staff in a Manufacturing Sector at Tiruchirappalli District. The researcher like to analyze the relationship between the employees and management and to examine the level of retention strategies in the organization and the factors influencing the employee retention and the researcher like to provide suitable suggestion to reduce the employee retention, For which a standardized scale develop by Ms.P.Thilaka in the year 2011 was adopted and the scale consist of 7 dimensions namely Retention strategies, Retention problems, Satisfaction, Support career goals, Sufficient Recognition, Training and Development. A Sample of 60 executives were taken as respondents from a private industry located in Tiruchirappalli District, Tamil Nadu, India. The researcher used the simple random sampling in order to get the data. The researcher formulates three hypotheses and analysis was done using the help of SPSS software.

3. Findings and Interpretation

The socio demographic findings of the respondents give a clear view of the respondent’s background status which also helps the researcher. The findings reveals that more than half of the respondents 51.7 percent are between the age group of 20-30, one third of 33.3 percent of the respondents are between the age group of 31-40 and more than one tenth 11.7 percent of the respondents are between the age group of 41-50. While analyzing the education qualification Majority of 70 percent of the respondents completed their Degree, Less than one forth of 20 percent have completed their Diploma and Meager of 3 percent of the respondents are having qualification in ITI and Meager of 6 percent of the respondents are having other qualifications. In the marital status majority of the respondents 63.3 percent are married and more than one third of 36.7 percent of the respondents are single.

The quartile deviation was applied in order find out the difference between the different dimensions and the result show that the majority 68.3 percent of the respondents are having low level of retention effort, one forth 25 percent of the respondents are having high level of retention effort, Meager 6 percent of the respondents are having average level of retention effort. While analyzing the retention problem, it reveals that more than one third 40 percent of the respondents are having low level of retention problem one third 33.3 percent of the respondents are having average level of retention problem, more than one third 26.7 percent of the respondents are having high level of retention problem. While analyzing the satisfactory fulfilled, it is found that less than half 41.7 percent of the respondents are having average level of satisfaction, less than one third 31.7 percent of the respondents are having low level of satisfaction, more than one forth 26.7 percent of the respondents are having high level of satisfaction.

While analyzing the support career goal, it reveals that more than half 55 percent of the respondents are having high level of support career goal, more than one forth 26.7 percent of the respondents are having low level of support career goal, more than one tenth 18.3 percent of the respondent are having average level of support career goal. After analyzing recognition the result shows that majority 63.3 percent of the respondents are having recognition, more than one forth 28.3 percent of the respondents are having low level of recognition, meager 8.3 percent of the respondents are having average level of recognition. While analyzing the training and development, it is found that less than half 48.3 of the respondents are having average level of training and development, less than half 48.3 of the respondents are having average level of training and development, more than one forth 27.3 of the respondents are having low level of training and development, one forth 25 percent of the respondents are having high level of training and development. While analyzing the overall retention strategies, it is found that less than half 43.3 percent of the respondents are having average level of overall retention strategies, more than one forth 30 percent of the respondent are having high level of overall retention strategies, more than one forth 26.7 percent of the respondents are having low level of overall retention strategies.
Major Finding

Table 1. Karl Pearson co-efficient of correlation between the age of the respondent with various dimensions of retention strategies

<table>
<thead>
<tr>
<th>Dimension</th>
<th>Correlation</th>
<th>Statistical Inference</th>
</tr>
</thead>
<tbody>
<tr>
<td>Age &amp; Retention Effort</td>
<td>-.220</td>
<td>P&gt;0.05</td>
</tr>
<tr>
<td>Age &amp; Retention Problems</td>
<td>-.187</td>
<td>P&gt;0.05</td>
</tr>
<tr>
<td>Age &amp; Satisfaction Fulfilled</td>
<td>-.229</td>
<td>P&gt;0.05</td>
</tr>
<tr>
<td>Age &amp; Support Career Goal</td>
<td>-.092</td>
<td>P&gt;0.05</td>
</tr>
<tr>
<td>Age &amp; Recognition</td>
<td>.061</td>
<td>P&gt;0.05</td>
</tr>
<tr>
<td>Age &amp; Training and Development</td>
<td>.061</td>
<td>P&gt;0.05</td>
</tr>
<tr>
<td>Age &amp; Overall</td>
<td>-.208</td>
<td>P&gt;0.05</td>
</tr>
</tbody>
</table>

Karl Pearson co-efficient of correlation test was applied and it found that there is no significant relationship between the age of the respondents and in the dimensions of Retention Effort, Retention Problems, and Satisfaction Fulfilled, Support Career Goal, Recognition, Training and Development and overall Retention Strategies, however it is understood that there is a negative very low correlation between age and supportive career goal and there is a positive very low relation between age with recognition, training and development dimension. There is a negative low correlation between age of the respondent with retention effort, retention problem, Satisfaction fulfilled and overall. Hence the management needs to continue recognition to the employee and provide training and development. Thus the null hypothesis is accepted and the research hypothesis is rejected.

Table 2. One Way ANOVA among The Educational Qualification with various Dimensions of Retention Strategies
Table 3. Karl Pearson Co-Efficient of Correlation between the Income of The Respondent with various Dimensions Of Retention Strategies

<table>
<thead>
<tr>
<th>Education Qualification</th>
<th>Dimension</th>
<th>Correlation</th>
<th>Statistical Inference</th>
</tr>
</thead>
<tbody>
<tr>
<td>Retention Efforts</td>
<td>Income &amp; Retention Effort</td>
<td>-0.431</td>
<td>P&lt;0.05 Highly Significant</td>
</tr>
<tr>
<td></td>
<td>Income &amp; Retention Problems</td>
<td>0.171</td>
<td>P&lt;0.05 Not Significant</td>
</tr>
</tbody>
</table>

One-way Anova test was applied and it found that there is no significant relationship among the educational qualification of respondents with regards to dimensions Retention Effort, Retention Problems, Support Career Goal and overall Recognition, Training and Development. Thus the null hypothesis is accepted and the research hypothesis is rejected.
Karl Pearson coefficient of correlation test was applied and it was found that there is High significant relationship between the income of the respondents and in the dimensions of retention effort, it was found that there is significant relationship between the income of the respondents and in the dimensions of recognition. And there is no significant relationship between the income of the respondents and in the dimensions of Retention Problems, Satisfaction Fulfilled, Support Career Goal, Training and Development and overall Retention Strategies. However it is understood that there si a negative moderate correlation between income and retention effort and there is a positive low correlation between income of the respondent and in the dimension of retention problem and recognition. It also observes the negative low correlation between income of the respondent satisfactory fulfilled and there is a negative low relationship between income of the respondent with dimension support career goal, training and development and overall retention strategies. Thus the null hypothesis is accepted and the research hypothesis is rejected.

4. Suggestion and Conclusion

Suggestion

1) Management has to made effort to retain the employee in specific and creative ways
2) To take measurable steps to solve the problems which are influencing the employees to leave the organizations
3) Better career development opportunity should be given to the employees for the improvement.
4) Organization should provide free working environment for the employees like flexible working hours, job sharing.
5) The Skill and knowledge of the employees should be rewarded by the organization by their best performance by giving periodical raise in salary and promotion,
6) Organization should helps the employee to attain their career goal and give them a satisfaction feel and motivating them

Conclusion

The company should always listen to the needs of the employees and should try to solve it and should motivate the employees for a longer time, if they concentrate on the further development and can achieve a very good position in the competitive market. The Employees turnover increases the attrition rate and reduces the retention of employees. Retention of the employees reduces the cost of the product, increase the productivity and condense brain drain of the organization.

References

Job Satisfaction among the Contract Labors in a Manufacturing Industry in Hosur

K. Kamal Bharathi*  
Dr. T. Giftson**

Abstract
Job satisfaction reflects the extent to which people find gratification or fulfillment in their work. A person having negative attitude shows a personality disposition which is inclined to experience nervousness, tension, worry, upset and distress, whereas those with positive attitude will feel happy with themselves, others, and with their work. The main objectives are to find out the job satisfaction of the contract labors in a Manufacturing Industry in Hosur and to give suitable suggestions for improving their Job Satisfaction. The study consists of 11 dimensions: Quality and Customer Focus, Respect for Management, Purpose and Direction, Trust, Teamwork and Cooperation, Communication, Compensation, Stress and Workload, Employee Involvement, Induction and training, Fairness. The universe of the present study consists of 150 contract labors and 50 samples are taken by using simple random sampling adopted by lottery method. Major findings will be discussed in full paper.

Keywords: Job satisfaction; respondents; trust; fairness; high; low.

1. Introduction
Human resource is considered to be the most valuable asset in any organization. It is the sum-total of inherent abilities, aptitudes of the employed persons who comprise executives, supervisors and the rank and file employees. The human resources should be utilized to the maximum possible extent, in order to achieve individual and organizational goals. It is thus the employee’s performance which ultimately decides the attainment of goals. Hence, the employee’s performance is to a large extent influenced by motivation and job satisfaction. Job satisfaction is all about how one feels about (or towards) one’s job. An employee who expresses satisfaction is said to have a positive attitude towards the job, unlike a dissatisfied employee who has a negative attitude towards the job. A person having negative attitude shows a personality disposition which is inclined to experience nervousness, tension, worry, upset and distress, whereas those with positive attitude will feel happy with themselves, others, and with their work. Job satisfaction reflects the extent to which people find gratification or fulfillment in their work. Job satisfaction shows that personal factors such as an individual needs and aspirations determine his/her attitude, along with group and organizational factors such as relationships with co-workers and supervisors and working conditions, work policies, and compensation. A satisfied employee tends to be absent less often, to make positive contributions, and to stay with the organization. The effect of job satisfaction goes beyond organizational setting. Satisfied employees are more likely to be satisfied citizens. These people will hold a more positive attitude towards life in general and make for a society of more psychologically healthy.

Review of Literature
Rajwantkaur (2006) made an attempt to highlight the importance and conceptual definitions of Job Satisfaction. The article revealed that the correlation between motivation and job satisfaction by mentioning the motivational theories. He also described specific organizational and personal variables which determine satisfaction of a person and pointed out the need for contented and well satisfied librarians to make libraries more serviceable to their clientele. The author strongly felt that the Job Satisfaction is a complex concept and difficult to measure objectively and despite many theories and studies it is still a challenge for employees to manage an organization. He suggested the ways to improve satisfaction such as paying employees fairly, quality supervision, decentralization of power and matching people of jobs that fit their interests.

2. Research Methodology

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The process used to collect information and data for the purpose of making business decisions. The methodology may include publication research, interviews, and could include both present and historical information.

Aim

The Aim of the present study is to find out the Job satisfaction among the contract labour in a manufacturing company in hosur.

Objective of this study

- To find out the job satisfaction level among the contract labors in a manufacturing company.
- To suggest suitable remedy for improving the contract labors working condition.

Research Design

In this study the researcher attempts to describe the various characteristics of job satisfaction and its association with the selected socio demographic variable. So the researcher used descriptive design.

Universe & Sampling

The universe of the study constitutes 150 labors and 50 samples are taken by simple random sampling by adopted lottery method.

Tools of data collection

The primary data and self prepared questionnaire consists of eleven dimensions of Job Satisfaction. Quality and Customer Focus, Respect for Management, Purpose and Direction, Trust, Teamwork & Cooperation, Communication, Compensation, Stress & Workload, Employee Involvement, Induction & Training, Fairness.

Source of data

The researcher used the questionnaire method to collect the data from the employees.

Limitation of the study

Since the manager and employees were busy by the nature of their job, the researcher found it difficult to get the filled in questionnaire, however the researcher was successful in getting filled questionnaire. Though the researcher explained to the respondents that the study was fulfillment of the academic career; the respondents has some misconception that the researcher might report to the management.

Hypothesis

- There is a significant relationship between the age of respondent and job satisfaction.
- There is a significant variance among the educational qualification of respondent and job satisfaction.
- There is a significant variance among the year of experience of respondent and job satisfaction.
- There is a significant relationship between the salary of respondent and job satisfaction.

3. Analysis and Interpretation

Table 1. Karl Pearson’s co-efficient of correlation between the respondents age and various dimensions of contract labor

<table>
<thead>
<tr>
<th>Variables</th>
<th>Correlation Values</th>
<th>Statistical Inference</th>
</tr>
</thead>
<tbody>
<tr>
<td>Age and Quality and customer Focus</td>
<td>-.315*</td>
<td>P&lt;0.05 Not Significant</td>
</tr>
<tr>
<td>Age and Respect for Management</td>
<td>-.235</td>
<td>P&lt;0.05 Not Significant</td>
</tr>
<tr>
<td>Age and Purpose and Direction</td>
<td>.076</td>
<td>P&lt;0.05 Not Significant</td>
</tr>
<tr>
<td>Age and Trust</td>
<td>.071</td>
<td>P&lt;0.05 Not Significant</td>
</tr>
<tr>
<td>Age and Teamwork and cooperation</td>
<td>-.071</td>
<td>P&lt;0.05 Not Significant</td>
</tr>
<tr>
<td>Age and Communication</td>
<td>-.108</td>
<td>P&lt;0.05 Not Significant</td>
</tr>
<tr>
<td>Age And Compensation</td>
<td>.166</td>
<td>P&lt;0.05 Not Significant</td>
</tr>
<tr>
<td>Age And Stress and Workload</td>
<td>-.070</td>
<td>P&lt;0.05 Not Significant</td>
</tr>
</tbody>
</table>
From the above table using Karl Pearson’s co-efficient of correlation it is found that there is no significant difference among the Age and various dimension of Quality and Customer Focus, Respect for Management, Purpose and Direction, Trust, Teamwork and cooperation, Communication, Compensation, Stress and Workload, Employee Involvement, Training and induction, Fairness, Overall of contract Labor.

Table 2. One way ANOVAs analysis of variance among the respondent’s educational qualification and contract labor

<table>
<thead>
<tr>
<th>Dimensions</th>
<th>Variance</th>
<th>Mean square</th>
<th>Sum of square</th>
<th>Mean</th>
<th>D f</th>
<th>Si</th>
<th>F</th>
<th>P</th>
</tr>
</thead>
<tbody>
<tr>
<td>Educational Qualification and Quality and customer</td>
<td>Between</td>
<td>6.778</td>
<td>27.113</td>
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<td>F=2.707</td>
<td>P&lt;0.05</td>
<td>Not Significant</td>
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<tr>
<td></td>
<td>Groups</td>
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<td></td>
<td>G2=20.5000</td>
<td></td>
<td></td>
<td></td>
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<td></td>
<td></td>
<td></td>
<td></td>
<td>G3=22.0000</td>
<td></td>
<td></td>
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<td></td>
</tr>
<tr>
<td></td>
<td>Within</td>
<td>2.504</td>
<td>112.667</td>
<td>G4=21.0000</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>Groups</td>
<td></td>
<td></td>
<td>G5=21.6667</td>
<td></td>
<td></td>
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<tr>
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<td>Between</td>
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<td></td>
<td></td>
<td></td>
<td>G3=16.0952</td>
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<tr>
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<td>Within</td>
<td>3.224</td>
<td>145.071</td>
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<td></td>
<td>Groups</td>
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<td></td>
<td>G5=14.333</td>
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<tr>
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<td>Between</td>
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<td>12.881</td>
<td>G1=14.5000</td>
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<td></td>
<td>Groups</td>
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<td></td>
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<td></td>
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<tr>
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<td>Within</td>
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<td>117.119</td>
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<td>Groups</td>
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<td>G5=15.333</td>
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</tr>
<tr>
<td>Educational Qualification and Trust</td>
<td>Between</td>
<td>2.066</td>
<td>8.263</td>
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<tr>
<td></td>
<td>Groups</td>
<td></td>
<td></td>
<td>G2=12.6000</td>
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<td></td>
<td></td>
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<td>G3=12.2381</td>
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<tr>
<td></td>
<td>Within</td>
<td>4.117</td>
<td>185.257</td>
<td>G4=11.5714</td>
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<td>Groups</td>
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<tr>
<td>Educational Qualification and Teamwork and cooperation</td>
<td>Between</td>
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<td>5.585</td>
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<td></td>
<td>Within</td>
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<td>Groups</td>
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<td></td>
<td>G5=15.0000</td>
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</tr>
<tr>
<td>Educational Qualification and Communication</td>
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<td>41.791</td>
<td>G1=13.0000</td>
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<td>P&lt;0.05</td>
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<tr>
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<td>Groups</td>
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<tr>
<td></td>
<td>Within</td>
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<td>151.029</td>
<td>G4=12.8571</td>
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<td>Groups</td>
<td></td>
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<td>G5=12.833</td>
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</tbody>
</table>
From the above table using one way ANOVAs that there is no significant difference among the Department and various dimension of Quality and Customer Focus, Respect for Management, Purpose and Direction, Trust, Teamwork and cooperation, Communication, Compensation, Stress and Workload, Employee Involvement, Training and induction, Fairness, Overall of contract Labor.

Table 3. Karl Pearson’s co-efficient of correlation between the respondents Experience and various dimensions of contract labor

<table>
<thead>
<tr>
<th>Si.No</th>
<th>Variables</th>
<th>Correlation Values</th>
<th>Statistical Inference</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
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<td>-.132</td>
<td>P&lt;0.05 Not Significant</td>
</tr>
<tr>
<td>2</td>
<td>Experience and Respect for Management</td>
<td>-.148</td>
<td>P&lt;0.05 Not Significant</td>
</tr>
<tr>
<td>3</td>
<td>Experience and Purpose and Direction</td>
<td>-.148</td>
<td>P&lt;0.05 Not Significant</td>
</tr>
<tr>
<td>4</td>
<td>Experience and Trust</td>
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<td>P&lt;0.05 Not Significant</td>
</tr>
<tr>
<td></td>
<td>Variables</td>
<td>Group</td>
<td>Mean Scores</td>
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<tr>
<td>---</td>
<td>-----------------------------------</td>
<td>----------------</td>
<td>-------------</td>
</tr>
<tr>
<td>5</td>
<td>Experience and Teamwork and</td>
<td>9000 - 11000</td>
<td>21.8235</td>
</tr>
<tr>
<td></td>
<td>cooperation</td>
<td>11001 - 15000</td>
<td>21.1875</td>
</tr>
<tr>
<td>6</td>
<td>Experience and Communication</td>
<td>9000 - 11000</td>
<td>16.0000</td>
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<td></td>
<td></td>
<td>11001 - 15000</td>
<td>14.4375</td>
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<tr>
<td>7</td>
<td>Experience And Compensation</td>
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<td>14.0294</td>
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<td></td>
<td>11001 - 15000</td>
<td>14.5625</td>
</tr>
<tr>
<td>8</td>
<td>Experience And Stress and Workload</td>
<td>9000 - 11000</td>
<td>12.3529</td>
</tr>
<tr>
<td></td>
<td></td>
<td>11001 - 15000</td>
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<tr>
<td>9</td>
<td>Experience and Employee Involvement</td>
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<td>14.2500</td>
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<td>10</td>
<td>Experience and Training and induction</td>
<td>9000 - 11000</td>
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<tr>
<td></td>
<td></td>
<td>11001 - 15000</td>
<td>13.8125</td>
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</table>

Table 4. T-test of variance among the respondents salary and contract labor

<table>
<thead>
<tr>
<th></th>
<th>Variables</th>
<th>Group</th>
<th>Mean Scores</th>
<th>Standard Deviation</th>
<th>Statistical Inference</th>
</tr>
</thead>
<tbody>
<tr>
<td>5</td>
<td>Experience and Teamwork and</td>
<td>9000 - 11000</td>
<td>.039</td>
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<td>P&lt;0.05, Not Significant</td>
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<tr>
<td></td>
<td>cooperation</td>
<td>11001 - 15000</td>
<td>.170</td>
<td></td>
<td>P&lt;0.05, Not Significant</td>
</tr>
<tr>
<td>6</td>
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<td>9000 - 11000</td>
<td>-.189</td>
<td></td>
<td>P&lt;0.05, Not Significant</td>
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<td>11001 - 15000</td>
<td>.028</td>
<td></td>
<td>P&lt;0.05, Not Significant</td>
</tr>
<tr>
<td>7</td>
<td>Experience And Compensation</td>
<td>9000 - 11000</td>
<td>-.205</td>
<td></td>
<td>P&lt;0.05, Not Significant</td>
</tr>
<tr>
<td></td>
<td></td>
<td>11001 - 15000</td>
<td>.286*</td>
<td></td>
<td>P&lt;0.05, Not Significant</td>
</tr>
<tr>
<td>8</td>
<td>Experience And Stress and Workload</td>
<td>9000 - 11000</td>
<td>.072</td>
<td></td>
<td>P&lt;0.05, Not Significant</td>
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<tr>
<td></td>
<td></td>
<td>11001 - 15000</td>
<td>-.169</td>
<td></td>
<td>P&lt;0.05, Not Significant</td>
</tr>
</tbody>
</table>

Table 4. T-test of variance among the respondents salary and contract labor
From the above table that there is no significant difference among the Salary and various dimension of Purpose and Direction, Trust, Teamwork and cooperation, Compensation, Employee Involvement, Training and induction, Fairness. And there is significant difference among salary and stress and work load, salary and communication, salary and respect for management and salary and quality and customer focus and salary and overall dimensions of job satisfaction.

Findings related to Socio – demographic

From the study it is found that more than one third of the respondents 38.0 percent belong to age group of 21-25 less than one third of the respondents 32.0 percent belong to the age group of 19-20 meager of the respondents 18 percent belong to the age group of 26-30 meager 6 percent of the respondents are finished ITI, less than one fourth 20 percent of the respondents are finished 12th, meager 14 percent of the respondents are finished Diploma Mach, meager 6 percent of the respondents are finished Diploma Automobile meager 6 percent of the respondents are finished 10th. It is found that vast majority 82.0 percent of the respondents are unmarried, meager 18.0 Percent of the respondents are married. It shows more than half of the respondents 60.0 percent of the respondents are from rural background; more than one third 40.0 percent of the respondents are from urban background. Half of the responds 50 percent have 7-10 months of experience. Less than one third of the respondents 32 percent have 1-6 months of experience. Meager of the responds 18 percent have 1 year of experience. It is found that less than half of the respondents 44 percent are working as helper less than one fourth of the respondents 24 percent are working as welder less than one fourth of the respondents 22 percent are working as fitter meager 8 percent are working as machine operator meager 2 percent are working as supervisor. It is found that half of the respondents 50 percent are attended 2 training programme, less than one fourth of respondents 20 percents are attended 3 and 1 training programme, meager 10 percent are attended 4 training programme. Majority of the respondents 68 percent get salary of 9000 – 11000 less than one third of respondents 32 percent get salary of 11001 – 15000.
Findings related to various dimension of Job Satisfaction

This study reveals that 68 percent of the respondents have low level and 32 percent of the respondents have high level of Quality and Customer Focus. It is shows that 50 percent of the respondents have high and low level of respect for management. It is shows that 50 percent of the respondents have low and high level of purpose and direction. It is clear that 66 percent of the respondents have low level and 34 percent of the respondents have high level of Trust. This study found that 56 percent of the respondents have low level and 44 percent of the respondents have high level of Teamwork & Cooperation. It is shows that 58 percent of the respondents have low level and 42 percent of the respondents have high level of Communication. In this study, 66 percent of the respondents have low level and 34 percent of the respondents have high level of Compensation. It is clear that 82 percent of the respondents have low level and 18 percent of the respondents have high level of Stress & workload. It is found that 58 percent of the respondents have low level and 42 percent of the respondents have high level of Employee Involvement. Studies shows that 54 percent of the respondents have low level and 46 percent of the respondents have high level of Induction & Training. It is found that 76 percent of the respondents have low level and 24 percent of the respondents have high level of Fairness. Through this study 52 percent of the respondents have low level and 48 percent of the respondents have high level of Overall.

4. Suggestions and Conclusion

Suggestions

From the study it is evident that the employee has low level of employee involvement that is affect employee participants so the management should involved the Labors in the decision making and meetings. And also the labors have low level of training which affects the work process, in this way the company should hire the professional trainers to provide more effective training programme. The labors have low level of trust and communication it leads to the company dominates the labors so the researchers suggest to the labors to help & support each others to maintain reliable situation. Recognize the labor's performance through appraisal Management should properly communicate most of the information regarding their job. Proper grievance committee should be made.

Conclusion

From the above study and analysis, the researcher conclude that more than half of respondents are having low level of job satisfaction with regards to dimension Quality and Customer Focus, Respect for Management, Purpose & Direction, Trust, Teamwork & Cooperation, Communication, Compensation, Stress & Workload, Employee Involvement, Induction & Training, Fairness and Overall of Contract Labor.

Reference

5. University Libraries in Karnataka, DESIDOC Journal of Library & Information
Reward Management at a Private Sector, Tiruchirappalli

S. Suganthi*
Dr. M. Daniel Solomon**

Abstract
Reward is an incentive plan to reinforce the desirable behaviour of workers of employees and in return service to the organization. The primary objectives of organizations is giving rewards is to attract, maintain and retain efficient high performing and motivated employees. Pay off efficient and effective performance may be regarded as reward. The aim of the present study is to know about the effectiveness of rewards and recognition given to the employees in a private sector at Tiruchirappalli District. The main objective of the study is to find the how well the employees are recognized for the service rendered by them. The Standardized scale with 6 dimensions were taken for the study and 50 data were collected using simple random sampling method and the data was analysed and the results reveals that majority 60 percent of the respondents are having low level of perception in Reward management and 40 percent of the respondents are having high level of perception in reward management.

Keywords: Reward management; Recognition of efforts; Work spirit and appreciation; Factors for award.

1. Introduction
According to Armstrong (2010), management is defined that reward management is known as the strategy, policies, and procedures necessary to guarantee that the value of people and their contributions for the organisation is recognized and rewarded.

Armstrong & Stephens (2006) defined reward management as the process of formulation and implementation of strategies and policies in order to create a fair and continuous reward system consistent with their value to the organization. It also deals with the design, implementation and maintenance of reward processes and practices aimed at improving the organisation group and individual activities.

Reward is an incentive plan to reinforce the desirable behaviour of workers or employers and in return for their service to the organization. Rewards can be monetary in the form of salary or non-monetary in the form of awards or some special services to the company. Or simply giving an employee a work which he enjoys doing. The primary objective of organizations in giving rewards is to attract, maintain, and retain efficient, high performing and motivated employees. Reward is a pay provided by an employer to the employees. It is a thing given in recognition of service, effort or achievement. It consists of packages of pay, benefits, services etc. It can be broadly defined as the material and psychological efforts for performing tasks in the workplace. The principle goal of reward management is to increase people’s willingness to work in one’s company, to enhance the productivity. There can be various types of rewards an organization can give its employees like Money, grade, performance based incentive or performance pay, increment, gift cards, recognition or awards, profit- sharing, holiday packages, medical coverage, promotion, bonuses etc. Rewards are given mainly to appreciate the performance of the employees and to motivate them. This is because motivated workers lead to higher productivity and the organisation as a whole prospers. If the workers are unmotivated they can lead to the failure of the organization by disrupting and de-motivating other workers as well. Rewards are considered as separate from salary but there may be monetary and have a cost to company. Rewards are generally aligned to organizational goals, when an employee helps the organization to achieve any of its organizational goals he/she is rewarded. Broadly the reward can be divided into following types, Intrinsic and Extrinsic rewards.

Financial and Non-Financial rewards, Performance and membership based rewards.

Review of Literature
Stajkovic and Luthans,(1997)Rewards and recognition of employees mainly come from management and non-management sources. Since, employee’s behaviour is also influenced by social exchange needs and other factors apart from their regular compensation, rewards and social recognition cannot be related to pay. On the contrary, successful rewards and recognition are dependent on behaviour must be instrumental and must be close in time to be desired response.

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John A. Byrne, January (2002) if businesses are to grow their way out of the current economic malaise, they will have to get more productivity out of their people not by cutting and slashing, but by nurturing, engaging and recognizing.

2. Research Methodology

The researcher would like to describe the characteristics of rewards and recognition given to the employees in a private sector at Tiruchirappalli District hence the study is descriptive in nature; relevant data has been collected from both primary and secondary source of information. The main aim of the study is to find out how well the employees are rewarded and recognized in the organization. The researcher would like to study the socio demographic characteristics of the respondents and to find the various dimension involved in finding out the reward system of the employees and to suggest the suitable remedial measures for improving reward system among the employees. The standardized question developed by Jerome.

A Coletta (2001) was used to test the employee reward management system. The research questionnaire contains two parts, the first part contains socio demographic details of the respondents, the second part of his questionnaire contains questions which focused on six dimensions namely Recognition of efforts, Work spirit appreciation and growth, Superior’s Support, Motivational factors, Organisation rewards and recognition and factors for awards.

Universe

The universe of the present study covers the industry situated in Tiruchirappalli. The respondents of the present study are executives, managers and Engineers. The researcher has taken 50 respondents using simple random sampling method. The researcher formulated three hypothesis for this paper. The data was further analysed by using SPSS version 20.

3. Major findings

When analysing the age of the respondents less than one third 30 per cent of the respondents are between the age group of 46-50, less than one fourth 24 per cent of the respondents are between the age group of above 50 years, less than one fourth 18 per cent of the respondents are between the age group of 41-45. More than one tenth 14 per cent of the respondents are between the age group of 36-40 and below 35 years. It is shown that vast majority of the respondents 88 per cent were married and remaining 12 per cent of the respondents are unmarried. With regard to rewards received by the respondents more than half 58 per cent of the respondents have received rewards from the management and the remaining 42 per cent of the respondents never received any rewards from the management.

While analysing the recognition of rewards more than half 60 per cent of the respondents were found low level in the recognition of effort, more than one third 40 per cent of the respondents were found to be recognized for their efforts. It was found that majority 68 per cent of the respondents were low level in their work spirit appreciation, less than one third of the respondents 32 per cent are found high level in their work spirit and appreciation. While analysing the superior’s support more than half 58 per cent of the respondents shows lower level of their superior’s support, less than half 42 per cent of the respondents shows high level in their superior’s support. It shows that more than half of the respondents 58 per cent were low level in organization rewards and recognition, less than half 42 per cent of the respondents shows high level in organization rewards and recognition.

While analysing the motivational factors less than three fourth 74 per cent of the respondents shows low level in their motivational factors, more than one third 34 per cent of the respondents shows high level on the motivational factors. It was found that majority 66 per cent of the respondents shows low level in their factors for award, more than one third 34 per cent of the respondents are high level in their factors for award. While analysing the overall dimensions of reward management, it shows that more than half 60 per cent of the respondents are low level in their reward management, more than one third 40 per cent of the respondents shows high level in overall reward management.
Statistical inference

Table 1. Karl Pearson co-efficient of Correlation between the Age of the respondents with various dimension of Reward management.

<table>
<thead>
<tr>
<th>Variables</th>
<th>Correlation Values</th>
<th>Statistical Inference</th>
</tr>
</thead>
<tbody>
<tr>
<td>Age &amp; Recognition of effort</td>
<td>.200</td>
<td>P&gt;0.05 Not Significant</td>
</tr>
<tr>
<td>Age &amp; work expectation and growth</td>
<td>.278</td>
<td>P&gt;0.05 Not Significant</td>
</tr>
<tr>
<td>Age &amp; superior’s support</td>
<td>.022</td>
<td>P&gt;0.05 Not Significant</td>
</tr>
<tr>
<td>Age &amp; motivational factors</td>
<td>-.189</td>
<td>P&gt;0.05 Not Significant</td>
</tr>
<tr>
<td>Age &amp; organizational reward&amp; recognition</td>
<td>-.043</td>
<td>P&gt;0.05 Not Significant</td>
</tr>
<tr>
<td>Age &amp; Factors for award</td>
<td>-.049</td>
<td>P&gt;0.05 Not Significant</td>
</tr>
<tr>
<td>Age &amp; Overall</td>
<td>.038</td>
<td>P&gt;0.05 Not Significant</td>
</tr>
</tbody>
</table>

Karl Pearson’s co-efficient of correlation test was applied and it found that there is no significant relationship between the age of the respondents with regards to the various dimensions and overall reward management, it also observed there was a positive very low correlation between Age and superior’s support dimension and Overall reward management and there is negative very low correlation between Age and Organisation rewards and recognition and factors for award and also it is observed that there is a positive low correlation between age and recognition of effort and work expectation and growth dimension and there is negative low correlation between age and motivational factor. The average age of the respondents was 45 years which reveals that majority of them are having high experience. Hence, there is no significant relationship the null hypothesis is accepted and the research hypothesis is rejected.

Table 2. T-Test the difference between the Marital Status of the Respondents with various dimensions of Reward Management

<table>
<thead>
<tr>
<th>S.No</th>
<th>Variables</th>
<th>Mean</th>
<th>Standard Deviation</th>
<th>Standard Error Mean</th>
<th>Statistical Inference</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Recognition of efforts</td>
<td>Married</td>
<td>13.5000</td>
<td>1.56265</td>
<td>Z=-.978</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Unmarried</td>
<td>14.1667</td>
<td>1.60208</td>
<td>P&gt;0.05 Not Significant</td>
</tr>
<tr>
<td>2</td>
<td>Work expectations and growth</td>
<td>Married</td>
<td>21.2727</td>
<td>2.09500</td>
<td>Z=-2.557</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Unmarried</td>
<td>23.5000</td>
<td>.83666</td>
<td>P&lt;0.05 Significant</td>
</tr>
<tr>
<td>3</td>
<td>Superior support</td>
<td>Married</td>
<td>12.4318</td>
<td>1.06526</td>
<td>Z=-.842</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Unmarried</td>
<td>12.8333</td>
<td>1.32916</td>
<td>P&gt;0.05 Not Significant</td>
</tr>
<tr>
<td>4</td>
<td>Motivational factors</td>
<td>Married</td>
<td>49.1364</td>
<td>3.17396</td>
<td>Z=.857</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Unmarried</td>
<td>48.0000</td>
<td>1.54919</td>
<td>P&gt;0.05 Not Significant</td>
</tr>
<tr>
<td>5</td>
<td>Organization rewards and recognition</td>
<td>Married</td>
<td>19.2273</td>
<td>1.90304</td>
<td>Z=1.867</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Unmarried</td>
<td>17.6667</td>
<td>2.06559</td>
<td>P&gt;0.05 Not Significant</td>
</tr>
<tr>
<td>6</td>
<td>Factors for rewards</td>
<td>Married</td>
<td>12.7045</td>
<td>1.60782</td>
<td>Z=.424</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Unmarried</td>
<td>13.0000</td>
<td>1.54919</td>
<td>P&gt;0.05 Not Significant</td>
</tr>
<tr>
<td>7</td>
<td>Overall</td>
<td>Married</td>
<td>128.2727</td>
<td>5.13249</td>
<td>Z=.417</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Unmarried</td>
<td>129.1667</td>
<td>2.48328</td>
<td>P&gt;0.05 Not Significant</td>
</tr>
</tbody>
</table>
The t-test represents that it is found that there is a significant difference between the marital status of the respondents and the dimension of work spirit appreciation and growth. It also represents that there is no significant difference between the marital status of the respondents with regards to recognition of efforts, superior’s support, motivational factors, organisation rewards and recognition and overall dimensions of reward management. Hence, the researcher hypothesis is rejected and Null Hypothesis is accepted.

<table>
<thead>
<tr>
<th>Variables</th>
<th>Group</th>
<th>Mean Scores</th>
<th>Standard Deviation</th>
<th>Statistical Inference</th>
</tr>
</thead>
<tbody>
<tr>
<td>Rewards received &amp; Recognition of efforts</td>
<td>Yes</td>
<td>13.6207</td>
<td>1.76096</td>
<td>Z = .214P&gt;0.05</td>
</tr>
<tr>
<td></td>
<td>No</td>
<td>13.5238</td>
<td>1.28915</td>
<td>Not Significant</td>
</tr>
<tr>
<td>Rewards received &amp; Work expectations and growth</td>
<td>Yes</td>
<td>21.7241</td>
<td>2.16954</td>
<td>Z = .721 P&gt;0.05</td>
</tr>
<tr>
<td></td>
<td>No</td>
<td>21.2857</td>
<td>2.05287</td>
<td>Significant</td>
</tr>
<tr>
<td>Rewards received &amp; Superior’s support</td>
<td>Yes</td>
<td>12.5172</td>
<td>1.05630</td>
<td>Z = .281 P&gt;0.05</td>
</tr>
<tr>
<td></td>
<td>No</td>
<td>12.4286</td>
<td>1.16496</td>
<td>Not Significant</td>
</tr>
<tr>
<td>Rewards received &amp; Motivational factors</td>
<td>Yes</td>
<td>49.1034</td>
<td>2.25745</td>
<td>Z = .280 P&gt;0.05</td>
</tr>
<tr>
<td></td>
<td>No</td>
<td>48.8571</td>
<td>3.92792</td>
<td>Not Significant</td>
</tr>
<tr>
<td>Rewards received &amp; organizational reward and recognition</td>
<td>Yes</td>
<td>18.8276</td>
<td>1.83359</td>
<td>Z = .895 P&gt;0.05</td>
</tr>
<tr>
<td></td>
<td>No</td>
<td>19.3333</td>
<td>2.15252</td>
<td>Not Significant</td>
</tr>
<tr>
<td>Rewards received &amp; Factors for awards</td>
<td>Yes</td>
<td>12.7931</td>
<td>1.58968</td>
<td>Z = .275 P&gt;0.05</td>
</tr>
<tr>
<td></td>
<td>No</td>
<td>12.6667</td>
<td>1.62275</td>
<td>Not Significant</td>
</tr>
<tr>
<td>Rewards received &amp; overall</td>
<td>Yes</td>
<td>128.5862</td>
<td>4.13623</td>
<td>Z = .348 P&gt;0.05</td>
</tr>
<tr>
<td></td>
<td>No</td>
<td>128.0952</td>
<td>5.85581</td>
<td>Not Significant</td>
</tr>
</tbody>
</table>

T- Test represents that there is no significant difference between the rewards received by the respondents and recognition of efforts, work spirit appreciation and growth, superior’s support, motivational factors, organisation rewards and recognition and overall dimensions of reward management. Hence the Null Hypothesis is accepted and Researcher Hypothesis is rejected.

From the study it is found that 30% of the respondents belongs to the age group of 46 – 50, majority of the respondents are male, sizeable majority(88%) of the respondents are married, an absolute majority(72%) of the respondents belongs to nuclear family. Nearly half of the respondents (48%) qualified in Diploma. Nearly half of the respondents (52%) belongs to production department.

Findings related to the various dimensions of reward Management

From the study 60%of the respondents have low perception about the dimension of recognition of efforts. 68% of the majority respondents have low perception about the dimension of work spirit and appreciation. More than half of the respondents 47% have low perception on superior’s support. 42% of the respondents have low perception on work expectations and growth. Half of the respondents 52% have low perception on motivational factors. Nearly half of the respondents have low perception on factors for awards.

4. Recommendations and conclusion

Recommendations

Rewards have been known to have a positive effect on employees performance. However, no reward system is found perfect. The employees are lacking in motivational level. More the reward, more the productivity. Likewise, When there is a proper motivation, it automatically directs the employees to improve their performance, this in turn helps the employees to achieve more productivity of the organisation. The
organisation can provide more rewards to the married people than the unmarried people in order to increase their effective performance. The management can further more concentrate in providing fringe benefits like festival bashes, coffee breaks, picnic dinner with boss, birthday treats etc, and the knick knacks of desk accessories, company watches, tie pin broaches, calendars, wallets etc, and also the management can provide award systems by issuing trophies, plaques, citation, certificates, scrolls, letter of appreciation for improving the performance of the employees to increase the productivity.

Conclusion

The study concludes that cash bonuses had no significant effect on employees performance. Those who had received rewards and those who had not received it affect their performance. It is observed that employees who are getting cash bonuses are not seemed to be more satisfier than those who get no reward. Hence, inspite of cash bonuses, the management can motivate the employees through appreciation. Motivation from the superiors can help the employees highly satisfies them and stimulates them to improve their performance instead of providing cash bonuses.

References

Self-esteem among Persons with Disabilities in Tiruchirappalli District

Dr. S. Vidhya*
S. Monisha**

Abstract
Disability is an impairment that may be cognitive, development, intellectual, mental, physical, sensory, or some combination of these. It substantially affects a person's life activities and may be present from birth or occur during a person's lifetime. Disability is not just a health problem or attribute of individuals, but it reflects the problems individuals experience in their interaction with society and physical movements. Disabled persons remain neglected part of society and they also experience various barriers due to restriction of participation. The common characteristic in physical disability is that some aspect of a person's physical functioning, usually their mobility, dexterity, or stamina, is affected. Self-esteem is a term used to assess self worth. It is how a person assess their own capabilities. It may be more positive or more negative and it is not set in stone. This research aims to find out the self esteem among persons with disabilities irrespective of their disability. Descriptive Design was adopted and convenient sampling method was used to collect data from the sample size of 130. The findings reveal that 49% of the respondents have low level of self esteem and 51% of the respondents have high level of self esteem.

Keywords: Self esteem; Disability; Impairment; Intellectual; Physically Challenged.

1. Introduction
Self-esteem is a term used to describe how we view ourselves. It is how we view our worth as a person. It may be more positive or more negative and it is not set in stone. Thus, if someone has low self-esteem, he or she can do things to boost his or her self-concept. When someone has a healthy or more positive self-esteem, he or she is able to accept him or herself “as is.” This means acknowledging that we all have both strengths and weaknesses - and that's OK! Healthy or positive self-esteem does not mean that someone has an inflated or self-righteous view of him or herself. One added challenge for a person with a disability may be viewing him or herself as a person first. A disability is only one facet of a person. Thus, for people with disabilities, it's important to allow yourself to view your disability as one component of your life, not the only component. Another issue for people with disabilities may be dealing with discrimination and stereotypes from society. Our society places emphasis on looks, speed, and being the same as everyone else. Thus, people with disabilities might place additional pressure on themselves to try to meet society's impossible standards.

Problems faced by Persons with disabilities

- One billion people, or 15% of the world’s population, experience some form of disability, and disability prevalence is higher for developing countries. One-fifth of the estimated global total, or between 110 million and 190 million people, experience significant disabilities.
- Persons with disabilities are more likely to experience adverse socioeconomic outcomes than persons without disabilities, such as less education, poorer health outcomes, lower levels of employment, and higher poverty rates.
- Barriers to full social and economic inclusion of persons with disabilities include inaccessible physical environments and transportation, the unavailability of assistive devices and technologies, non-adapted means of communication, gaps in service delivery, and discriminatory prejudice and stigma in society.
- Poverty may increase the risk of disability through malnutrition, inadequate access to education and health care, unsafe working conditions, a polluted environment, and lack of access to safe water and sanitation. Disability may increase the risk of poverty, through lack of employment and education opportunities, lower wages, and increased cost of living with a disability.
- The 2030 Agenda for Sustainable Development clearly states that disability cannot be a reason or criteria for lack of access to development programming and the realization of human rights. The Sustainable Development Goals (SDGs) framework includes seven targets, which explicitly refer to persons with disabilities.

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disabilities, and six further targets on persons in vulnerable situations, which include persons with disabilities. The SDGs address essential development domains such as education, employment and decent work, social protection, resilience to and mitigation of disasters, sanitation, transport, and non-discrimination – all of which are important areas of work for the World Bank.

Review of literature
National study on disability (2006), estimated the expressed need for improved access to a range of services (160). People with disabilities in the study expressed a strong need for better access to health care services (55.3%), medications (21.3%), and technical devices (17.5%), and financial help for basic needs (52.5%). A study on unmet needs in Tonga found that 41% of people with disabilities reported a need for medical advice for their disability – more than twice the proportion of people who received such advice (161). Some 20% of people with disabilities needed physiotherapy, but only 6% received it.

2. Research Method
Objectives of the study:
● To find out socio-demographic Profile of the respondents
● To assess the respondents socio-economic status.
● To find the impact of physical disability on activities of daily living.
● To study the awareness about government schemes available for the respondents.
● To Know the level of self-esteem.

Hypotheses
● There is significant relationship between Age and overall self-esteem.
● There is significant association between Gender and overall self-esteem.
● There is significant association between Marital status and overall self-esteem.
● There is significant association between Employment and overall self-esteem.

Research design: The present study describes the self-esteem of the respondents. Hence Descriptive Design was used in the present study. Universe: The universe of the present study constituted 1100 Persons who have registered in District Disabled Rehabilitation Office. Sampling: Convenient Sampling method was adopted based on the respondents’ willingness and availability. Tools of Data Collection: A structured interview schedule was used to collect the necessary data. The researcher used Self-Esteem (Heatherton-1991). The scale consists of various dimensions, such as performance self-esteem, social self-esteem and appearance self-esteem.

3. Results and Analysis

Table 1. Distribution of the respondents based on Socio-demographic Profile

<table>
<thead>
<tr>
<th>Variables</th>
<th>No. of Respondents (N = 130)</th>
<th>Percentage (%)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Age (In years)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Below 20</td>
<td>12</td>
<td>9</td>
</tr>
<tr>
<td>20-40</td>
<td>64</td>
<td>49</td>
</tr>
<tr>
<td>40-60</td>
<td>46</td>
<td>35</td>
</tr>
<tr>
<td>60 &amp; Above</td>
<td>8</td>
<td>6</td>
</tr>
<tr>
<td>Gender</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Male</td>
<td>79</td>
<td>61</td>
</tr>
<tr>
<td>Female</td>
<td>51</td>
<td>39</td>
</tr>
<tr>
<td>Native Place</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Rural</td>
<td>107</td>
<td>82</td>
</tr>
<tr>
<td>Urban</td>
<td>23</td>
<td>18</td>
</tr>
<tr>
<td>Marital Status</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Married</td>
<td>87</td>
<td>67</td>
</tr>
<tr>
<td>Unmarried</td>
<td>43</td>
<td>33</td>
</tr>
<tr>
<td>Types of Disabilities</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Orthopedically</td>
<td>63</td>
<td>48</td>
</tr>
<tr>
<td>Vision impairment</td>
<td>39</td>
<td>30</td>
</tr>
<tr>
<td>Hearing impairment</td>
<td>18</td>
<td>14</td>
</tr>
<tr>
<td>Other impairment</td>
<td>10</td>
<td>8</td>
</tr>
</tbody>
</table>
The age of the respondents ranged from 15 years to 76 years. Less than half of the respondents (49 percent) belonged to age group of 20-40 years. More than one third (35 percent) of the respondents belong to the age group of 40-60 years while meagre percent of the respondents (9 percent belong to age group of below 20 years and very few of the respondents (6 percent) belong to the age group of 60 years and above.

With regard to the gender of the respondents, majority of the respondents (61 percent) were males and more than one third of the respondents (39 percent) were females. According to 2011 Census, the Sex ratio of Men is higher when compared to Women. In total 21% of persons with disability, 14% were Male and 7% were Female. In regard to domicile it shows that vast majority of the respondents (82 percent) belonged to Rural area and Less than one fifth of the respondents (18 percent) belonged to Urban area.

It has been inferred that majority of the respondents from rural area utilizes the services provided by the Government. The marital status shows that majority of the respondents (67%) were married and one third of the respondents (33%) were unmarried. With regard to the type of disability less than half of the respondents (48 percent) were orthopedically impairment while One third of the respondents (30 percent) were visually impaired. Less than one fifth of the respondents (14 percent) had hearing impairment. Very few of the respondents (8 percent) were other impairments such as mentally ill, speech impairment.

Table 2. Level of self-esteem of the respondents

<table>
<thead>
<tr>
<th>Various dimensions of Self-esteem</th>
<th>No. of Respondents (N=130)</th>
<th>Percentage</th>
</tr>
</thead>
<tbody>
<tr>
<td>Performance Self-esteem</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Low</td>
<td>55</td>
<td>42</td>
</tr>
<tr>
<td>High</td>
<td>75</td>
<td>58</td>
</tr>
<tr>
<td>Social Self-esteem</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Low</td>
<td>65</td>
<td>50</td>
</tr>
<tr>
<td>High</td>
<td>65</td>
<td>50</td>
</tr>
<tr>
<td>Appearance Self-esteem</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Low</td>
<td>55</td>
<td>42</td>
</tr>
<tr>
<td>High</td>
<td>75</td>
<td>58</td>
</tr>
<tr>
<td>Overall level of Self-esteem</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Low</td>
<td>64</td>
<td>49</td>
</tr>
<tr>
<td>High</td>
<td>66</td>
<td>51</td>
</tr>
</tbody>
</table>

The above table reveals that more than half of the respondents (58 percent) perceived high level of self-esteem while less than half of the respondents (42 percent) perceived low level of self-esteem with regard to performance self-esteem. With regard to social self-esteem half of the respondents (50 percent) perceived high and low level of self-esteem respectively. More than half of the respondents (58 percent) perceived high level of self-esteem while less than half of the respondents (42 percent) perceived low level of self-esteem with regard to appearance self-esteem. The overall score reveals that more than half of the respondents (51 percent) perceived high level of overall self-esteem and less than half of the respondents (49 percent) perceived low level of overall self-esteem.

Table 3. Karl Pearson’s Co-Efficient Correlation between Age and Various Dimensions of Self-Esteem

<table>
<thead>
<tr>
<th>Dimensions of self-esteem</th>
<th>Correlation Value</th>
<th>Statistical Inference</th>
</tr>
</thead>
<tbody>
<tr>
<td>Age and Performance Self-esteem</td>
<td>-0.081</td>
<td>X²=0.359 P&gt;0.05</td>
</tr>
<tr>
<td></td>
<td></td>
<td>No Significant</td>
</tr>
<tr>
<td>Age and Social Self-esteem</td>
<td>-0.042</td>
<td>X²=0.638 P&gt;0.05</td>
</tr>
<tr>
<td></td>
<td></td>
<td>No Significant</td>
</tr>
<tr>
<td>Age and Appearance Self-esteem</td>
<td>0.003</td>
<td>X²=0.0971 P&gt;0.05</td>
</tr>
<tr>
<td></td>
<td></td>
<td>No Significant</td>
</tr>
<tr>
<td>Age and Overall level of Self-esteem</td>
<td>-0.084</td>
<td>X²=0.341 P&gt;0.05</td>
</tr>
<tr>
<td></td>
<td></td>
<td>No Significant</td>
</tr>
</tbody>
</table>
The above table shows that there is no significant relationship between Age and overall level of self-esteem. Similarly there is no significant relationship between Age of the respondents with regard to dimensions performance self-esteem, social self-esteem and appearance self-esteem. Here it is inferred that the Age of the respondents is not influenced the various dimensions of self-esteem of the respondents.

Major Findings

- Less than half of the respondents (49 percent) belonged to age group of 20-40 years.
- Majority of the respondents (61 percent) were males.
- Vast majority of the respondents (82 percent) belonged to rural area.
- Majority of the respondents (67%) were married.
- Majority of the respondents (64 percent) had children.
- Majority of the respondents (61 percent) belong to medium sized families which had 4-5 members.
- Less than half of the respondents (40 percent) were illiterates.
- More than half of the respondents (51 percent) were not going for work.
- More than one fourth of the respondents (27 percent) were daily wages.
- Less than half of the respondents (45 percent) monthly income Rs.1000-Rs.20,000.
- Vast Majority of the respondents (85 percent) were attending government exams.
- There is significant association between Gender and overall self-esteem.

Findings Related to Hypotheses

- There is no significant relationship between Age and overall self-esteem.
- There is no significant association between Gender and overall self-esteem.
- There is no significant association between Marital status and overall self-esteem.
- There is no significant association between Employment and overall self-esteem.

4. Suggestions and Conclusion

In the present study it was found that less than half of the respondents (40 percent) were illiterate and the few respondents have completed their school education and graduation. It shows that the majority of respondents have not even thought about education. Even though government allocated free education to disabled people, still it is not effectively implemented. Hence the government can take initiatives to focus more on their education. In the present study it was found that vast majority (85 percent) have not attended any government exams. For their betterment, Government can provide training and coaching to undergo competitive exams by availing coaching centers and increase employment opportunities for them so that their employment opportunities in government sectors may be increased. Awareness about government schemes can be created for illiterates in District Rehabilitation office. In this present study it was found that sizable number of respondents revealed that they were struggling to understand the reading materials as it was of high standard. Government can take initiatives for the education to the disabled people who needed and it would be better if government appointed facilitator in DDRO office.

Conclusion

This study suggests that the disabled are hesitant about disclosing their disability when applying for a job or being a bit more apprehensive in sharing it. This will, among other things, lead to more openness about disability, and eventually contribute to greater social changes, such as equalizing the balance of power between employer and job seekers where increased knowledge of adaptations and disability in general will give employers less concern or feelings of risk when employing disabled people. It has also provided recommendations for action towards achieving a society that is inclusive and enabling, providing equal opportunities for each person with a disability to fulfill their potential. Almost all jobs can be performed productively by someone with a disability, and given the right environment, most people with disabilities can be productive.

References

The Impact of Spouse Relationship in Families of Differently Abled Child

S. Lidia Susan*
Dr. R. M. Sam Deva Asir**

Abstract
The researcher made an attempt to study the environment of family having differently abled child. Parenting plays an important role in family environment. The children do what they see and the spouse relationship results in parenting. Sometimes mother undergo so much of stress in caring special child. When she does not see progress in development of differently abled child and prevailing social stigma may make her more depressed and she may unable to concentrate on the family. Her husband support at those times will be a booster to her and encourage her to get back to her routine life. This study tries to highlight the relationship between the spouse and the relationship between the siblings which is the base for family environment and adjustment and adaptation for differently abled child.

Keywords: Parenting; Family Adjustment; Differently abled child; Spouse relationship; Siblings relationship.

1. Introduction

Children with special needs may have been born with terminal illness, profound cognitive impairment, syndrome or serious psychiatric problems. These children may have difficulty that includes struggling with learning disabilities, allergies due to food, delay in developmental, or panic attacks. “children with special needs” are children who may have challenges which a typical child do not face and it may possibly last a lifetime. These children with special needs will need extra support, and additional services. They will have distinct goals, and with proper guidance it may help them meeting academic, emotional, social and sometimes medical milestones. Persons with special needs while dealing with everyday activities and issues like employment, housing, social involvement and finance may need lifetime guidance and support.

Parenting Disabled Child

Parenting a child with disability is challenging tasks. Parents will come across so much of stress, frustration knowing that their child is disabled. At the same time they should also realize that they are not alone and at any stage they should not give up. Many researchers found that having disability child in a family results a significant risks psychological well being of the family. Greenberg et al., (1997) has told in his study that having a child with a disability poses a significant risk to parents’ physical and emotional well-being Specifically, parents who have a child with a disability reported significantly more somatic symptoms than parents of non-disabled children. Jung-Hwa et al., (2011) in his study found that most parents had to make changes in their social life and majority of the parents expressed strong belief in the child’s future.

Family Environment and Adjustment

Family environment centers the children and it becomes the primary agent of socialization. The family environment involves the social climate conditions within the family. Every family is unique with different individuals and settings. Environment differs in many way. Family with good economic conditions differ from family with low economic conditions. Family with good communication has good relationship and share responsibilities with the family members and these cannot be seen in family with poor communications. Family with disabled child undergo various problem but when there is a healthy relationship among family members, disabled child will be centered and the whole family will adjust the family structure for the child.

Impact of Spouse Relationship with Family

The relationship with the spouse plays a major role in family environment and adjustment. The children do what they see. If the relationship between the spouse are good the children will also be in harmonious relationship. If there is no proper relationship between the spouse the impact can be seen in children. Siblings rivalry is common in all families but the children from the families with harmonious relationship can be seen in taking care of their siblings. The responsibilities also will be shared among the family members.
2. Methodology

Objectives
- To study the socio-demographic details of the respondents
- To analyze the parenting and family adjustment in the families having a disabled child
- To execute the impact of spousal relationship in a family environment and sibling relationships

Hypothesves
- There is an association between Siblings rivalry with various dimensions of Parenting and Family Adjustment.
- There is an association between respondent’s relationship with husband with various dimensions of Parenting and Family Adjustment.

Research Design
- The researcher used descriptive research design with the intention to describe the impact of spousal relationship on parenting and family adjustment and relationship among siblings. The researcher used descriptive research design.
- Universe and sample size
  - The researcher respondents are mothers of children who are differently abled. Tiruchirappalli Corporation has 32 special schools. The Sample size of the research is 186 which is drawn from the universe of 453 using convenient sampling method.
- Tools for data collections
  - Self prepared questions are used to collect social, demographic, economic details of the respondents.
  - The researcher has used Parenting and Family Adjustment scale (PAFAS) by sanders et al (2014) and followed the interview schedule for collecting data.

3. Results and Analysis

Major Findings
- The majority (84.9 percent) of the respondent’s family members shares responsibility in taking care of the child.
- More than half (54.5 percent) of the respondent’s husbands are helping in taking care of the child.
- The majority (85.9 percent) of the respondent’s husband supports them during hard times.

Table 1. Association between sibling’s rivalry and various dimensions of parenting and family adjustment

<table>
<thead>
<tr>
<th>Siblings Rivalry</th>
<th>Level of Parenting and Family Adjustment</th>
<th>Statistical Inference</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Low</td>
<td>High</td>
</tr>
<tr>
<td>Level of overall PAFAS</td>
<td>n:98</td>
<td>n:88</td>
</tr>
<tr>
<td>Yes</td>
<td>33</td>
<td>30</td>
</tr>
<tr>
<td>No</td>
<td>51</td>
<td>33</td>
</tr>
<tr>
<td>Not applicable</td>
<td>14</td>
<td>25</td>
</tr>
</tbody>
</table>

The above table illustrates the association between levels of Parenting and Family Adjustment and sibling rivalry. The table shows that the Low level of parenting and family adjustment has higher levels of sibling rivalry. It is observed that there is a Significant association between level of Parenting and Family Adjustment and Sibling rivalry.

Table 2. Association between relationship with husband of the respondents and various dimensions of parenting and family adjustment

<table>
<thead>
<tr>
<th>Relationship with Husband</th>
<th>Level of Parenting and Family Adjustment</th>
<th>Statistical Inference</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Low</td>
<td>High</td>
</tr>
<tr>
<td>Level of overall PAFAS</td>
<td>n:98</td>
<td>n:88</td>
</tr>
<tr>
<td>Good</td>
<td>67</td>
<td>39</td>
</tr>
<tr>
<td>Average</td>
<td>22</td>
<td>27</td>
</tr>
<tr>
<td>Poor</td>
<td>3</td>
<td>13</td>
</tr>
<tr>
<td>Not applicable</td>
<td>6</td>
<td>9</td>
</tr>
</tbody>
</table>

The above table illustrates the association between relationship with husband and various dimensions of parenting and family adjustment. The table shows that the Good level of relationship with husband has higher levels of parental adjustment and sibling rivalry. It is observed that there is a Highly Significant association between level of Parenting and Family Adjustment and Relationship with Husband.
The above table illustrates the association between levels of Parenting and Family Adjustment and relationship with husband. From the table it is understood that even when the level of Parenting and Family Adjustment is low, there is a good relationship between respondents and their husband. The majority (85.9 percent) of the respondents has previously reported that their husbands support them during hard times. When the respondent was unable to carry out the work effectively due to external stresses, their husbands were supportive and maintained a good relationship with the respondents. So, it is inferred that there is a High significant association between relationship with husbands of the respondents and Parenting and Family Adjustment.

4. Discussion and Conclusion

Discussion

The study reveals that how much a spouse relationship and parenting can make impact on the family adjustment and relationship among siblings. This study proves that family with high level of parenting and family adjustment has less siblings rivalry when compared to the family with low level in parenting and family adjustment. But in Controversy the study show that family with low score in parenting and family adjustment shows high level of good relationship with the husband. This is because the even when the mother is unable to perform her work and concentrate on family due to external stressors, the husband supports her. Majority(89 percent) of the respondents has already reported that their husband support them during hard times. This relationship between the couples results in less siblings rivalry

Conclusion

This study clearly reveals that mother is the primary care taker of the Disabled child who sacrifices her interest, career etc and much influential person in a family, at the same time the study also proves that husband support during hard times have a great impact on mother parenting which results in harmonious relationship among family members.

Reference

Attitude and Social Support Prevailing in the Society which Influence the Mothers Caring Children with Special Needs

S. Lidia Susan*
Dr. R. M. Sam Deva Asir**

Abstract
The study subjects were mothers of children with special needs. The research was conducted at special schools at Tiruchirappalli district. The researcher highlighted the challenges of having a child with special needs and the support mothers receive from the special school and society in bringing up the child. The researcher also discussed about the various supporting system provided by the special schools and the beneficial roles of coping strategies which is being taught in the special schools. This study made an attempt to analyze the social support and attitude prevailing in the society about the special children and how and why it influences the mothers of children with special needs and the efforts she has taken to overcome and the primary source of ventilation for the mother.

Keywords: Mothers of children with special needs; Caretake; Attitude; Social support; Social stigma

1. Introduction
Children with special needs may have been born with terminal illness, profound cognitive impairment, syndrome or serious psychiatric problems. These children may have difficulty that includes struggling with learning disabilities, allergies due to food, delay in developmental, or panic attacks. “children with special needs” are children who may have challenges which a typical child do not face and it may possibly last a lifetime. These children with special needs will need extra support, and additional services. They will have distinct goals, and with proper guidance it may help them meeting academic, emotional, social and sometimes medical milestones. Persons with special needs while dealing with everyday activities and issues like employment, housing, social involvement and finance may need lifetime guidance and support.
Families of children with special needs
Typically, families of children with special needs are on a lifetime journey which is both emotionally and financially challenging. They experience a myriad of emotions upon diagnosis and they also experience anger, grief, loss, and denial. These emotions are a natural part of the families with special child. They take time to accept the things happening around them and soon after acceptance, they as a family focus on beginning the process of helping the child with special needs achieve its fullest potential.
Parents of child with special needs begin a journey filled with strong emotion, difficult and different choices, interactions with many different people, professionals and specialists, and an ongoing need for services and information. The initial shock will lead to a period of denial, and then followed by grief, fear about the child’s life, guilt, disappointment, confusion, rejection and powerlessness.
Social stigma and Social Support
A child with special needs becomes a stigmatizing factor for both the family and child itself. Stigma is the earliest definition given by goffman(1963) on stigma.
Edwinra & Jacob et.al(2010) in their experimental research has found that most of the family members and caregivers reported their experiences of stigma based on their association with the stigmatized individual.
Attitudes of family members towards the child’s diagnosis

Some of the parents experienced a ‘positive attitude’ from their family members but some other parents were encountered with a ‘negative attitude’ from their family members towards their children’s with special needs. Mercy, pity, and material and spiritual support are faced by parents who encountered with positive attitudes while the parents who faced sadness nervousness and maltreatment has encountered negative attitudes.

2. Research Methodology

Objectives

• To study the socio-demographic details of the respondents
• To analyse the attitude of the neighbours
• To determine the social stigma prevailing in the society

Hypotheses

• There is a significant Difference among attitude of the neighbours of the respondents with regard to various dimensions of social support.

Research Design

The researcher want to just describe the present scenario of the attitude and stigma prevailing in the society. So the researcher used descriptive research design.

Universe and sample size

The researcher respondents are mothers of children with special needs who are admitted at special schools at Thiruchirappalli district. 32 special schools comes under Trichy corporation. The universe of the study is 453. The researcher sample size is 186. The researcher has used convenient sampling method for collecting the samples.

Tools for data collections

To collect the socio demographic detail of the respondents, self prepared question is used along with that the researcher has used The Multidimensional Scale of Perceived Social Support by Zimet GD et al(1988) for data collections.

3. Results and Analysis

Major Findings

• Vast Majority (94.6 percent) of the respondents admitted their child in the institution for training.
• Vast majority (96.2 percent) of the respondents claimed that parents teachers meet and counseling sessions are the great strength and supportive system of the school.
• More than half (54.8 percent) of the respondents were blamed for giving birth to the child
• Less than half (44.6 percent) of the respondents says that they get good support from their neighbours.

Table 1. One-way analysis of variance among attitude of the neighbours of the respondents with regard to various dimensions of social support

<table>
<thead>
<tr>
<th>Neighbors attitude</th>
<th>df</th>
<th>SS</th>
<th>MS</th>
<th>X</th>
<th>Statistical Inference</th>
</tr>
</thead>
<tbody>
<tr>
<td>Overall social support</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Between Groups</td>
<td>2</td>
<td>6.043</td>
<td>3.022</td>
<td>G1=1.70</td>
<td>F=13.668 P&lt;0.01 Highly Significant</td>
</tr>
<tr>
<td>Within Groups</td>
<td>183</td>
<td>40.457</td>
<td>0.221</td>
<td>G2=1.31</td>
<td></td>
</tr>
</tbody>
</table>

The mean social support score is compared among respondents neighbor attitude. It is observed that there is a high significant difference in social support with regards the neighbor attitude. In spite of getting support from the institution and friends, respondents believe that her neighbours are the main source of social support. This is because the neighbour see the suffering and effort taken by the respondents to bring up the child and in country like India neighbours are the immediate source of ventilation. The respondent also believe that the neighbor may understand and encourage her better than any other group in the society. Their attitude about their child is so much important to the respondents.

Discussion

From research highlighted in the literature it is understood that families with intellectually disabled children experience sadness and guilt. And most of the respondents in this study expressed that they are shocked and frustrated when they learnt that their child is a special kid. In this research, some of the respondents stated that after the birth of the child, they didn’t get proper support and completely stopped communication with their
community. At the same time they have reported that their neighbours were sympathetic and thoughtful toward them which is a major support for them.

4. Conclusion

In this study, respondents stated that they were blamed by both family members and outsiders for giving birth to special child. These respondents also reported that the special school is providing them with various supportive system like counselling, parents teachers meet and all respondents are fully satisfied with the training. Even though the special school provide them with so many services the mother believes that these services helps her to understand the child's condition and accept the child but it does not change any social stigma prevailing in the society and she also believes that the neighbour may understand and encourage her better than any other group in the society as they see the problem faced by the respondents and efforts taken by the respondents to bring up the child. So this study reveals that the respondents believe that their biggest social support are the neighbours and the social stigma which prevailing in the society stops them from communicating with their community.

Reference

Attitude towards Inclusive Education among Teachers of Intellectually Challenged Children

C. Dhinesh Babu*  
Dr. B. Arunkumar**

Abstract
Initially special needs children were treated as unwanted and segregated from normal children in our country. Later special needs children’s education was carried out in special schools. Nowadays the special needs children are included in normal schools. But, the reviews revealed that until now parents, teachers and peer groups are having a negative attitude towards inclusive education. So, the aim of the present study is to measure the attitude towards inclusive education among teachers of Intellectually Challenged Children. For the purpose of this study, 34 special educators participated from both Block Resource Centers & Special Schools in Villupuram District. The data collected by using Scale of Teachers’ Attitude towards Inclusive Classroom. In this descriptive study results revealed that both Block Resource Centers & Special Schools Teachers are having a negative attitude towards inclusive education. Salient findings and suggestions pertaining to the study is discussed in the full paper.

Keywords: Special Educators; Challenged Children; Inclusive Education; Attitude; Teachers;

1. Introduction
The importance of education is growing tremendously and is considered as the second important sector after agriculture which guides the country on the path of development. But still, the children with intellectual disabilities are not encouraged and given opportunity to make their attempts in getting equal access to education. Initially, intellectually challenged children were treated as unwanted and segregated from normal children in our country. Later special needs children’s education was carried out in special schools. Nowadays the special needs children are included in normal schools.

Inclusive Education is the implementation of the `policy and process' that allows all children to participate in all programmes. ‘Policy’ means that disabled children should be accepted without any restrictions in all the educational programmes meant for other children. It denotes equality, and accepts every child with his own unique capabilities. This principle must be accepted by all the international, national and local programmes. Inclusive education imparted without discrimination of caste, sex or physical status. The special needs children come together to acquire knowledge and education in the same class room. This policy is based on a belief that education is the birth right of every individual and nobody can be denied of this right.

Objectives of policies on inclusive education
1. The governments have to give the highest policy and budgetary priority to improve their education systems to enable them to include all children regardless of individual differences or difficulties.
2. The governments have to adopt as a matter of law or policy the principle of inclusive education, enrolling all children in regular schools unless there are compelling reasons for doing otherwise.
3. The training programmes for the teachers have to include the education of disabled children.
4. All children have access to general education system, to expand the coverage to reach the un-reached population.

“Section 26 of the Persons with Disabilities Act, 1995 stipulates that the appropriate governments and the local authorities shall ensure that every child with a disability has access to free education in an appropriate environment till he/she attains the age of eighteen years; endeavor to promote the integration of students with disabilities in the normal school”.

Inclusion in education is an approach to educating students with disabilities. Under the inclusion model, students with disabilities spend most or all of their time with non-disabled students. When children with disabilities learn in the same school as their non-disabled peers with the support necessary for them to be successful there, then the society is said to be “inclusive”. All students in a school, regardless of their strengths and weaknesses in any area become part of the school community. Inclusive Education helps children with disabilities to prepare for full participation in community life.

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** Assistant Professor in Social Work, Bishop Heber College, Tiruchirappalli, Tamil Nadu, India
Review of Earlier Studies

Dickens-Smith (1995) conducted a study on the attitudes of both regular and special educators towards inclusion. Here both groups of represents reveal more favourable attitudes towards inclusion after their in-service training. They concluded that staff development is the key to the success of inclusion.

Monahan, R.G et al (1996), in their study pointed out that, the majority of teachers felt that regular education teachers do not have instructional skills and educational background to teach students with special educational needs and they fell scared at the thought of having students with disabilities in their classes.

Cochran (1998) conducted a study differences in teachers’ attitudes towards inclusive education. The study revealed that special education teachers scored higher on the scale of teachers’ attitudes toward inclusive classrooms (STATIC) than general education teachers. Higher scores on the STATIC indicated more positive attitudes towards inclusion.

Nayak (2008) examined the attitude of both parents and teachers towards inclusive education. Results of the study reported that teachers look forward to teaching in an inclusive environment and are ready to face the challenges and the parents are having negative attitude towards inclusive education.

Das, Kuyini and Desai (2013) examined the current skill levels of regular school teachers in Delhi, India in order to teach students with disabilities in inclusive education settings. They reported that nearly 70 percent of the regular school teachers had neither received training in special education and 87 percent of teachers did not have access to support services in their classrooms.

2. Research Method

Aim of the study

The main aim of the present study is to measure the attitude towards inclusive education among teachers of intellectually challenged children in Villupuram District.

Objectives of the study
1. To describe the socio-demographic characteristics of the special educators.
2. To measure the attitude towards inclusive education among the special educators.
3. To analyse the relationship between teachers’ years of experiences and their attitude towards inclusive education.
4. To provide suitable suggestions based on the Findings

The study was conducted in Villupuram District and the researcher adopted Descriptive Research Design. Ninety three special educators were appointed under the scheme of Sarva Shiksha Abhiyan (SSA) and 20 special educators working in Special Schools in Villupuram District. A total of 34 special educators were selected from 113 special educators using Simple Random Sampling Method (Lottery Method) for the study.

![Figure 1. Sampling Design](image-url)
Tools of data collection

The data collected by using Scale of Teachers’ Attitude towards Inclusive Classroom (STATIC) prepared by H. Keith Cochran, PhD 1999 to measure the attitude towards inclusive education. The Scale of Teacher’s Attitudes towards Inclusive Classrooms (STATIC; Cochran, 1999) consists of 20 items that were designed to measure a teacher’s attitude towards students with special needs in the general education classroom. The response format is a 5-point Likert-type scale ranging from “Strongly Disagree” to “Strongly Agree,” with five reverse coded items. According to the author of the STATIC, the sum score of the 20 items is indicative of teachers’ attitudes towards inclusion (Cochran, 1998). Higher scores indicate positive attitudes, whereas lower scores indicate negative attitudes towards inclusion. There are no specific cut off scores.

Four factors for the scale: Factor 1: Advantages and Disadvantages of Inclusive Education; Factor 2: Professional Issues Regarding Inclusive Education; Factor 3: Philosophical Issues Regarding Inclusive Education; and Factor 4: Logistical Concerns of Inclusive Education. Cronbach’s alpha reliability coefficients were calculated for each factor. Factor one evidenced a reliability coefficient of .87, Factor two .83, Factor three .57, and Factor four .62. Factor one and two were found to have good internal consistency.

Hypothesis

Higher the teachers years of teaching experience, higher the positive attitude towards inclusive education

3. Results and Analysis

![Figure 2. Socio – Demographic Characteristics of the Special Educators](image)

The above figure explained that, more than one fourth (29.41%) of the respondents are below 25 years, less than one fifth (17.65%) of them are 26-30 years and rest (23.53%) of them are in the age group of 31-35. With regard to the gender of the respondents, majority (85.30%) of them are female and rest (14.70%) of them are male. Based on the marital status two third (67.60%) of the respondents are married and rest (32.40%) of them are unmarried. It is observed that regarding Teachers’ years of experience, less than half (41.17%) of them are having below 5 years of experience, nearly one third (32.35%) of them are having 6-10 years of experience and more than one fourth (26.47%) of them are having above 11 years of experience.
The above figure explained that, more than one third (38%) of the respondents only having positive attitude and rest (62%) of them are having negative attitude towards inclusive education. It clearly shows that majority of them are having negative attitude towards inclusive education.

Table 1: Relationship between teachers’ years of experience and their attitude towards inclusive education

<table>
<thead>
<tr>
<th>Variable</th>
<th>Value</th>
<th>Statistical Inference</th>
</tr>
</thead>
<tbody>
<tr>
<td>Years of Experience and Attitude towards Inclusive Education</td>
<td>0.346</td>
<td>P&lt;0.05 Significant</td>
</tr>
</tbody>
</table>

The above table explained that, there is moderately positive relationship between teachers’ years of experience and their attitude towards inclusive education.

Findings related to Hypothesis:
- Research Hypothesis
  - Higher the teachers’ year of experience, higher the positive attitude towards inclusive education
- Null Hypothesis for Research Hypothesis
  - There is no relationship between teachers’ years of experience and their attitude towards inclusive education

Result
- The researcher applied co-efficient of correlation test to analyze the relationship between teachers’ years of experience and their attitude towards inclusive education. The results revealed that, the significant level is lesser than 0.05 and there is a moderate level of positive relationship between teachers’ years of experience and their attitude towards inclusive education. Hence, the null hypothesis rejected.

4. Conclusion

The study found that only one third of the special educators are having positive attitude towards inclusive education. Rest of the special educators’ opinion is that general education teachers don’t have sufficient time to spend with special children and they don’t know how to handle those children. Further, their opinion is that required teaching equipment along with specialized trained teachers are available in special schools than normal schools. So, they can easily learn in special schools. Das, Kuyini and Desai (2013) examined that regular education teachers did not have access to support services in their classrooms. The researcher concludes that, majority of the special educators are having negative attitude towards inclusive education because of lack of specialized trained teachers and required teaching equipment in normal schools. Based on the findings, the researcher suggests that, the government should need to improve the infrastructure facilities in government schools for all the children to learn easily. Government should conduct orientation programme for the general education teachers to learn the specialized education and to handle children with disabilities.
References

A Study on Abuse and Depression among Elderly in Institutional Settings at Chennai, TamilNadu

M. Rex Sahayaraj*  
Dr. RM Sam Deva Asir**  
A. Nikitha***

Abstract
Elder Abuse is predicted to increase as many countries since ageing population increasing rapidly. The global population of people aged 60 years and above will be more than double from 900 million in 2015 to about 2 billion in 2050. Elder abuse can lead to serious Physical Injuries and long-term Psychological Consequences. Elder Abuse appears to be non-fulfillment of Expectations, Mal-Treatment, Poor Health Care and verbal and non-verbal abuse which elderly people are facing during old age. The study aims to reveal the reasons behind Depression and level of Abuses among the Elderly in Institutional Setting in Chennai. The data is collected from 50 respondents through interview method using a Standardized Checklist and Geriatric Depression Rating Scale (GDS-30) by using Descriptive Research Design.

Key words: Elder Abuse; Depression; Institutional care.

1. Introduction
The international network for the prevention of elder abuse states that: “Elder abuse is a single or repeated act, or lack of appropriate action, occurring within any relationship where there is an expectation of trust which causes harm or distress to an older person.” Such abuse is generally divided into the following categories:
- Physical abuse: Hitting, pushing, kicking & inappropriate use of drugs or restraints
- Financial exploitation: Misusing or stealing a person’s money or assets
- Sexual abuse: Sexual contact without consent
- Neglect or abandonment: Not providing food, housing, or medical care
- Psychological or emotional abuse: Insults, threats, humiliation, controlling behavior, confinement and isolation.

Depression
Depression is a common mental disorder, characterized by persistent sadness and a loss of interest in activities that you normally enjoy, accompanied by an inability to carry out daily activities, for at least two weeks. In addition, people with depression normally have loss of energy; a change in appetite; sleeping more or less; anxiety; reduced concentration etc.

Review of literature
Daliya Sebastian, TV Sekher (2018) in their study on Are Elderly People Safe in their Own Households? New Evidence from Seen States of India: They found that 10% of them reported having been mistreated after the age of 60. Among those who had ever experienced abuse after turning 60, 90% faced verbal abuse and 45% were victims of economic abuse. Around 35% were victims of physical abuse. The main perpetrators were neighbors (46%), sons (41%) and relatives (32%). Wide inter-state variation exists with nearly one-third of seniors from Maharashtra reporting abuse and neglect compared to only 2% in Tamil Nadu and 3% in Kerala.

Ravindra Yallappa Mandolikar Poonam Naik, MD Shoeb Akram, Abhay Subhashrao Nirgude (2017) in their study on depression among the elderly: a cross-sectional study in an urban community: Prevalence of depression was found to be 75.5% among the elderly population. Out of the total individuals with depression, mild depression was found to be present in 84.97%. 53.3%, 49.8%, and 34.5% of the study participants were having diabetes mellitus, hypertension, and muscular skeletal problems,

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Sangeeta Kumari Gupta, TV Sekher (2017) in their study on Vulnerability and coping Mechanism Elderly Widows in Jharkhand: The study has shown that elderly widows face discrimination within their houses and within the community. They have very limited or no role in family decision-making and are economically dependent on others. Lack of property and savings, loss of husband, and poor health make them vulnerable to abuse. The family as a fundamental unit of society needs to be strengthened along with social security measures to take care of elderly widows.

Mahtab Alizadeh-Khoei, Farshad Sharifi, Syeda Zakia Hossain, Hossein Fakhrzadeh, Zahra Salimi (2014) in their study on elder abuse: Risk Factors Of Abuse In Elderly Community-Dwelling Iranians: Elder mistreatment was reported by 14.7% of the participants. Physical (70.4%) and neglect (61.4%) were the most common subtypes of total mistreatments. Univarsssssssiate analysis showed the most consistent associations of abuse types to be with being female, with education, and with dependency on children for an income to live.

Srinivasan Chokkanathan (2014) in his study on the Factors Associated with Elder Mistreatment in Rural Tamil Nadu, India: The Multivariate results reveal that elder mistreatment is related to several factors associated with the perpetrator and the family environment. Perpetrator factors include middle age, a tertiary education (protective), alcohol consumption and the mistreatment of other family members. Family environment factors include family stress and low cohesion. Among the factors related to older adults, only physical abuse of family members was associated with exposure to mistreatment.

2. Research Methodology

Introduction

In this chapter the researcher has given the methodology for carrying out the present study. It includes title of the study, statement of the problem, significance of study, aim and objectives of the study, assumption, research design, sampling design, tools of data collection.

General objective of the study

“A Study on Abuse and Depression among Elderly in Institutional Settings in at Chennai”

Statement of the Problem

The world has now focused its attention on the aged as they are growing in number and one in four vulnerable elders are at risk of abuse but the elder itself don’t know about that they are abused because of these abuses they got depression. Everyone should need aware about the elderly abuse and try to avoid it by understanding their feeling.

Need for the study

This study brings some awareness to the new generation and also bring some changes in the way of approaching with elderly person.

Aim of the study

The present study aims to knowing the Abuses faced by elderly and Mental Health condition of the Elderly people.

Specific Objectives

1. To study about the demographic details.
2. To know about the abuses faced by elderly in institutional settings.
3. To assess the depression level among the elderly
4. To know various problem faced by the elderly.
5. To study about family support to the elderly.

Hypothesis

- Elders in Rural Residency have less depression problem then their counterpart in Urban.
- Male respondent having less abuse problem then female respondent.

Research Design

The researcher has adopted Descriptive Design for the study. Descriptive research gives a better and deeper understanding of a phenomenon on the basis of an in depth study of the phenomenon.

Universe

The researcher collected data from old age home in Chennai, which are run by either NGO or private institution in Chennai.

Sampling

The researcher used Simple Random Sampling to collect data. The Sample size is 30.
Tools of Data Collection

The researcher used Standardized Scale and GRS (Geriatric Depression scale) to collect data. It helps to know about the elder’s mental stability, what are the Crisis situation they faced from the society and their family members through interview schedule.

Conceptual clarity

Elder Abuse

According to Barry kidd (2010) “Elder Abuse is the maltreatment of an older or elderly individual.” World health organization defined as “A single or repeated act, or lack of appropriate action, occurring within any relationship action, occurring within any relationship where there is an expectation of trust which causes harm or distress to an older person.”

Depression

According to American psychiatric Association “Depression is a common and serious medical illness that negatively affects how you feel, the way you think and how you act.

Old age home:

A place where a old people can lie together and be cared for when they are too weak or ill to take care of themselves.

Limitation:

1. Some of the institutions did not allow collecting the data.
2. Some Respondent took much time to give the answer.
3. Researcher face quite difficulties in find the route of institution.
4. Researcher got limited male respondent when compare to female

3. Data Analysis and Interpretation

Table 1. Mann Whitney U Test

<table>
<thead>
<tr>
<th>Gender</th>
<th>Test</th>
<th>Significance</th>
<th>Decision</th>
</tr>
</thead>
<tbody>
<tr>
<td>Geriatric Depression</td>
<td>Mann Whitney U Test</td>
<td>.866</td>
<td>Accepted</td>
</tr>
<tr>
<td>Vulnerability abuse</td>
<td>Mann Whitney U Test</td>
<td>.471</td>
<td>Accepted</td>
</tr>
</tbody>
</table>

The above table shows that Geriatric depression scale and vulnerability abuse scale is not significant with gender category. Hence null hypothesis is accepted.

Table 2. Mann Whitney U Test

<table>
<thead>
<tr>
<th>Type of residential area</th>
<th>Test</th>
<th>Significance</th>
<th>Decision</th>
</tr>
</thead>
<tbody>
<tr>
<td>Geriatric Depression</td>
<td>Mann Whitney U Test</td>
<td>.866</td>
<td>Accepted</td>
</tr>
<tr>
<td>Vulnerability abuse</td>
<td>Mann Whitney U Test</td>
<td>.471</td>
<td>Accepted</td>
</tr>
</tbody>
</table>

The above table shows that Geriatric depression scale and vulnerability abuse scale is not significant with types of residential category. Hence null hypothesis is accepted.

4. Findings, Suggestions and Conclusion

Findings

❖ This study reveals that both rural and urban areas elderly people were uniformly depressed
❖ 50% of the respondent was unaware about the Welfare Programs and Act but most of the elder people were not able to get their Welfare Scheme because of their health condition.
❖ 36.7% of the respondent in institutional setting is above age of 80.
❖ Majority of the respondents in Institutional setting are from Urban Area.
❖ 46.7% of the respondents have no source of income.
❖ There is 56.7% of respondents are unaware of the offspring’s income
❖ 50% of the respondent was educated up to secondary school level.
Suggestions

In institutional setting like old age home have to fulfill their basic needs of elderly people make them to feel better and providing some recreational activity and any spiritual or motivational speech helps them more to free from depression and also make some relief from negative thoughts. Welfare schemes and their procedures are quite difficult to reach the elderly people. So it must be simplified and suggest Government can give awareness on the Welfare Scheme and Programs through institutional settings.

Conclusion

Elderly people are facing more depression because of their physical health and most of the elderly people were trust their friends more than that their family members. They are happier while spending time with their grand son or daughter.

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7. https://www.psychiatry.org/patients-families/depression/what-is-depression
8. https://www.slideshare.net/meachef/elder-abuse-36099735
9. ICD 10 CM by national center for statistics.
The Impact of Severity of Alcohol Dependence among Wives of Alcoholics: An Increasing Family Burden

Nancy Arulappan*
Dr. R. M. Sam Deva Asir**

Abstract
Alcoholism is a major threat to the individual as well as the society and the maximum burden of the illness is borne by the family. This study aimed at assessing the pattern of burden on the wives of alcohol dependents and at assessing the relationship between the severity of dependence and the burden on wives of alcohol dependents. Descriptive study conducted among 30 wives of alcohol dependents at a Deaddiction centre in Tiruchirappalli District. Alcohol dependence is considered as a “family disease.” Alcohol dependence affects the individual as well as those around them in terms of occupational and social dysfunction, physical and emotional distress and financial burden which has a serious impact on the lives of the significant others. The study demonstrates that wives of alcohol dependents reported significant objective burden and subjective burden. Furthermore, the severity of alcohol dependence and the domains of burden such as financial burden, disruption of family interaction, and disruption of family routine activities were positively correlated with high level of significance.

Keywords: Family burden; Severity of alcohol dependence; wives of alcohol dependents; Alcohol dependence.

1. Introduction
Family plays a key role in handling a Alcohol Dependent. This is especially very true in India because of various factors like the tradition of interdependence, the concern for the family, and the lack of social support. Alcohol dependence has been a major social and personal threat in most countries. According to Global Status Report on Alcohol, Alcohol Use Disorders (AUDs) account for 1.4 per cent of the global disease burden. Alcohol dependence is considered as a “family disease.” Chronic, recurrent, and excessive alcohol consumption is a well-documented cause of substantial social and health-related burden on society. Chronic alcohol consumption can result in both tolerance to alcohol and dependence on it. In this respect alcohol is similar to many other psychoactive drugs. Dependence has interrelated physical and psychological components and implies an alteration in drinking behaviour that develops partly as a learnt response to certain cues, such as a particular drinking environment, and also to alleviate withdrawal symptoms. The physiological and prognostic importance of dependence was emphasised in the 2014 report of the World Health Organisation Scientific Group on Alcohol-Related Disabilities.

Alcohol dependence affects the individual as well as those around them in terms of occupational and social dysfunction, physical and emotional distress and financial burden which has a serious impact on the lives of the significant others. Being primary care giver wives of alcohol dependents experience burden in the family.

Family Burden includes the financial burden where the families may take loans to incur to heavy expenditure to treatment. There will be disruption of routine activities due to the patient's irrational demands and due to the care of the patient. There will be stopping of the normal recreational activities. Caring for a alcohol dependent causes considerable strain and this affects the physical health of the spouse.

Review of literature
Chandra (2004) the author made a study Burden and coping in caregivers of men with alcohol and opioid dependence. The author compare the family burden of patients with schizophrenia, alcohol dependence, and opioid dependence by using the Family Burden Interview Schedule (FBIS) showed moderate to severe burden in all the three groups.

Shyangwa PM et al (2008) in their study on Family burden in opioid dependence syndrome in tertiary care centre. The results showed both subjective and objective family burden was perceived as "severe" by subjects' spouses. The relationship between spouses' perceived burden and socio-demographic variables including duration of substance abuse were not correlated. Hence it was found that opioid dependent subjects cause considerable amount of distress to their care providers.

Mattoo et al (2013) the authors made a study on Family burden with substance dependence: a study from India assessed the family burden using FBIS in 120 subjects of alcohol and/or opioid dependence reported

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that almost all (95–100%) caregivers had severe burden and more for ‘disruption of family routine’, ‘financial burden’, ‘disruption of family interactions’ and ‘disruption of family leisure’.

Vaishnavi et al. (2017) the authors found that there is significant burden for caregivers. In addition, the caregiver burden and severity of dependence were positively correlated with high level of significance. They pointed out while treating alcoholics, it is important to alleviate the burden of the caregivers which in turn will lead to better treatment effectiveness.

2. Research methodology

Aim
To study severity of alcohol dependence its influence on family burden among wives of alcoholics.

Objectives
• To find out the socio-demographic details of the respondent’s.
• To assess the level of family burden experienced by the wives of alcohol dependents
• To assess the level of severity of alcohol dependence among the alcoholic patients
• To find out the association and correlation between the dependent and independent Variables.

Hypotheses used for testing
There is no significant correlation between Duration of care giving and various coping strategies

Research Design
The researcher in this study has described the Severity of alcohol dependence among alcohol dependents and family burden of the wives of alcohol dependents. Hence the researcher adapted descriptive research design.

Universe
The universe of the study belongs to wives of Alcohol Dependents between the age group of 26 to 53 admitted in Integrated Rehabilitation Centre for the addicts at Kajamalai, Tiruchirappalli.

Sampling
This research adopted 30 respondents as samples from the universe. Sampling technique adopted by the researcher is simple random.

Tools for data collection
Tools of data Collection consists of a semi structured interview covering the socio demographic variables such as age, gender, education, occupation, marital status, type of family, economic status, duration of illness etc

Family Burden Interview Schedule: The schedule consist of 24 items classified into 6 different categories such as financial burden, disruption of routine family activities, disruption of family leisure, disruption of interaction, effect on physical health of others, effect on mental health of others. This interview schedule was developed and standardized by PAI and KAPUR (1982).

Severity of alcohol dependence: The schedule consists of 20 items by Tim Stockwell, Denis Murphy, Ray Hodgson (1983). It is divided into five sections, corresponding to physical symptoms of withdrawal, craving and withdrawal relief drinking, typical daily consumption and rapidity of reinstatement of symptoms after a period of abstinence.

3. Results and Statistical Analysis
Karl Pearson's co-efficient of correlation test was used to analyze the data.

Table 1. Socio demographic characteristics

<table>
<thead>
<tr>
<th>Variable</th>
<th>Frequency</th>
<th>Percentage</th>
</tr>
</thead>
<tbody>
<tr>
<td>Age</td>
<td></td>
<td></td>
</tr>
<tr>
<td>29-36</td>
<td>12</td>
<td>40</td>
</tr>
<tr>
<td>37-48</td>
<td>10</td>
<td>33</td>
</tr>
<tr>
<td>49-57</td>
<td>8</td>
<td>27</td>
</tr>
</tbody>
</table>
Table 2: Correlation between duration of alcohol dependence and dimensions of family burden

<table>
<thead>
<tr>
<th>Variables</th>
<th>Correlation Value</th>
<th>Statistical Inference</th>
</tr>
</thead>
<tbody>
<tr>
<td>Duration of alcohol dependence and Financial burden</td>
<td>0.152*</td>
<td>P&lt; 0.05 Significant</td>
</tr>
<tr>
<td>Duration of alcohol dependence and Disruption of family activities</td>
<td>0.129</td>
<td>P&gt;0.05 Not Significant</td>
</tr>
<tr>
<td>Duration of alcohol dependence and Disruption of family leisure</td>
<td>0.248**</td>
<td>P&lt;0.01 Highly Significant</td>
</tr>
<tr>
<td>Duration of alcohol dependence and Disruption of family interaction</td>
<td>0.160</td>
<td>P&lt; 0.05 Not Significant</td>
</tr>
<tr>
<td>Duration of alcohol dependence and Burden on physical health</td>
<td>0.183**</td>
<td>P&lt;0.01 Highly Significant</td>
</tr>
<tr>
<td>Duration of alcohol dependence and Burden on mental health</td>
<td>0.142*</td>
<td>P&lt; 0.05 Significant</td>
</tr>
<tr>
<td>Duration of alcohol dependence and overall coping strategies</td>
<td>0.156*</td>
<td>P&lt;0.05 Significant</td>
</tr>
</tbody>
</table>

The above statistical inference shows that as duration of alcohol dependence increases, the dimension of financial burden, disruption of family leisure, burden on physical health and burden on mental health increases.

There is no significant relationship found between duration of alcohol dependence and the dimension on disruption of family activities and disruption of family interaction. It statistically proves that wives of alcoholics have undergone financial burden, disruption of family leisure, burden on physical health and burden on mental health due to the severity of alcohol dependence of the spouse.
Figure 2. Distribution of respondents by various dimension of family burden

4. Conclusion, Limitations and Recommendation for future studies

Conclusion
These results of family burden among wives of alcohol dependents have important implications for planning early prevention and intervention model for the wives of alcohol dependents. This can be used as methods of handling stress and reducing stress.

Limitations
As it was a hospital based study results cannot be generalized for community sample.

Recommendations for future studies
More studies should be carried out in coping along with family burden and psychological wellbeing and more Interventions or models should be framed for the respondents to overcome their burden.
References
Coping Behaviour among Wives of Alcohol Dependents

Nancy Arulappan*
Dr. R. M. Sam Deva Asir**

Abstract
Alcohol is an addictive potential which causes various physical and psychological hazards. Alcohol consumption is the world's third largest risk factor for disease and disability (WHO 2011). The International Classification of Diseases 10th revision (ICD-10) defines alcohol dependence syndrome (ADS) as "a cluster of behavioural, cognitive and physiological phenomena that develop after repeated alcohol use and that typically include a strong desire to consume, difficulties in controlling its use, persisting in its use despite harmful consequences, a higher priority given to alcohol use than to other activities and obligations, increased tolerance, and sometimes a physical withdrawal state". Alcohol dependence has been considered as a major social problem which not only affects the alcohol consuming individual but also the family and society. While including the family of the alcohol dependent wife has been considered as the primary caregiver of the alcohol dependents. They use to overcome a variety of problems while this study focuses on the burden, their coping abilities and psychological well being. 30 wives of alcohol dependents were assessed on Burden Assessment Schedule, Coping checklist, and Psychological Well Being questionnaires.

Keywords: Wives of alcohol dependent; Burden; Coping; Psychological well being; Family burden

1. Introduction
Alcohol is an addictive potential which causes various physical and psychological hazards. Alcohol consumption is the world's third largest risk factor for disease and disability (WHO 2018). The International Classification of Diseases 10th revision (ICD-10) defines alcohol dependence syndrome (ADS) as "a cluster of behavioural, cognitive and physiological phenomena that develop after repeated alcohol use and that typically include a strong desire to consume, difficulties in controlling its use, persisting in its use despite harmful consequences, a higher priority given to alcohol use than to other activities and obligations, increased tolerance, and sometimes a physical withdrawal state". Alcohol dependence has been considered as a major social problem which not only affects the alcohol consuming individual but also the family and society. While including the family of the alcohol dependent wife has been considered as the primary caregiver of the alcohol dependents.

Alcoholism is considered as a major health as well as a social problem. It generally refers to an uncontrolled consumption of alcoholic beverages to such an extent that it turns out detrimental to the drinker's health, the personal relationships, and overall social functioning. As per the "alcohol alliance policy," it is estimated that there are around 62.5 million alcohol users in India. The consumption rates of alcohol are so high in India, that it has been identified as the third largest market for alcoholic beverages in the world. The problem of alcoholism though defined in context of an individual affects the family as a whole. When one member of the family abuses alcohol, it causes disruption and disharmony within the family and thus, every member suffers. The impact of alcoholism on the family is so marked that it leads to the absolute breakdown of family as an entity. The family members of alcoholics often report various negative emotional states ranging from guilt, shame, anger, fear, grief, and isolation.

When there is mental break down, the human being grasps at ways of coping with crisis and so does the wives of alcoholics. Coping strategies used by the wives of alcoholics are the concerted efforts both behavioral as well as psychological which are employed by them to master, tolerate, reduce, or minimize the stress associated with their husband's drinking. Traditionally, such coping is thought to involve two major focuses: emotion-focused and/or problem focused. The problem focused coping involves some active action to alleviate stressful circumstances, and the emotion-focused coping involves the efforts to regulate the emotional consequences of stressful events. The coping processes were long back studied by Jackson in 1954, who, outlined seven successive stages of family adjustment to alcoholism which voyages from denial of the problem to disorganization to escape and last the reorganization.

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Coping strategies in families of alcohol dependents

Coping is an adaptive or otherwise successful method of dealing with individual or environmental situations that involve psychological and physiological stress or threat. The psychological definition of coping is the process of managing taxing circumstances, expending effort to solve personal and interpersonal problems, and seeking to master, minimize, reduce or tolerate stress or conflicts.

Two general coping strategies have been distinguished:
1. Problem solving strategies: these are efforts to do something active to alleviate stressful circumstances.
2. Emotion focused coping strategies: these involve efforts to regulate the emotional consequences of stressful or potential stressful events.

Review of literature

Kaur and Ajinkya (2014) the authors concluded in their study that an alcoholic is so obsessed with drinking that he ignores the needs and situations of other family members and is unable to take up his expected roles and responsibilities. In such scenario, the functions which are normally carried by husbands often fall on the wives that further add to their burden and suffering.

Sekii and Shimizu (2005) the authors explore in their study that wives of alcoholics are most adversely affected. The wives of alcoholics undergo intense trauma and stress in their domestic environment which brings about major psychological problems in them. The high levels of anxiety, depression, neuroticism, and poor self-esteem are a few in the slope. Domestic violence, emotional violence, and financial violence are some of the frequently occurring and well-recognized problems faced by wives of alcoholics.

Oxford and Gutherie (1976) the authors conducted an empirical investigation on Self-reported coping behavior of wives of alcoholics and its association with drinking outcome. Their study reveal five interpretable components which they labelled attack, withdrawal, protection, acting out, and safeguarding family interests.

The frequency of the use of coping behavior by wives of alcoholics was found to be related to their husband's drinking outcome. In general, a high frequency of coping behavior was associated with a poor outcome, but some components of coping behavior were more likely than others to be linked with a poor prognosis.

2. Research methodology

This study attempts to find out the various coping behaviour adapted by wives of alcohol dependents.

Significance of this study

Through various review of literature the researcher exposed towards various coping behaviours that are handled by wives of alcohol dependents which includes Problem solving, Positive distraction, Negative distraction, Acceptance, Religion, Denial, Emotion focused and Social support.

Title of the study

Coping Behaviour among Wives of Alcohol Dependents at Tiruchirappalli (with special reference to Integrated Rehabilitation Centre for Addicts)

Aim of the study

To study the patterns of coping behaviour among wives of Alcohol Dependents.

Objectives

• To find out the socio-demographic details of the respondent’s.
• To assess various patterns of coping behaviour among wives of Alcohol Dependents.
• To find out the association and correlation between the dependent and independent Variables.

Hypotheses used for testing

There is no significant correlation between Duration of care giving and various coping strategies.

Research design

Descriptive research design

Universe

The universe of the study belongs to wives of Alcohol Dependents between the age group of 26 to 53 admitted in Integrated Rehabilitation Centre for the addicts at Kajamalai, Tiruchirappalli.

Sampling

This research adopted 30 respondents as samples from the universe. Sampling technique adopted by the researcher is purposive Sampling.

Tools for data collection

The researcher used Coping checklist developed by Kiran Rao et al. (1989). It has 70 items describing a broad range of behavioural, emotional and cognitive coping responses that an individual might use to handle stress. The responses are scored dichotomously in a yes/no format, indicating whether a particular coping
behaviour is present or not. The CCL was used for the present study to assess and understand the type of coping strategies used by the caregivers to deal with stress of care giving. It is comprehensive, easily administered and covers coping behaviours specific to the social and cultural context as it was developed in the Indian setting.

Statistical test Karl Pearson Correlation Test was used for interpreting the data.

3. Results and Analysis

Table 1. Socio demographic characteristics’ of respondents

<table>
<thead>
<tr>
<th>Variable</th>
<th>Frequency</th>
<th>Percentage</th>
</tr>
</thead>
<tbody>
<tr>
<td>Age</td>
<td></td>
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<td>26-34</td>
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<td>33</td>
</tr>
<tr>
<td>35-43</td>
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<td>37</td>
</tr>
<tr>
<td>44-53</td>
<td>9</td>
<td>30</td>
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<tr>
<td>Family Type</td>
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<td></td>
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<tr>
<td>Joint</td>
<td>17</td>
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<tr>
<td>Nuclear</td>
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<td>43</td>
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<tr>
<td>Residence</td>
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<td></td>
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<tr>
<td>Rural</td>
<td>12</td>
<td>40</td>
</tr>
<tr>
<td>Urban</td>
<td>12</td>
<td>40</td>
</tr>
<tr>
<td>Semi-Urban</td>
<td>6</td>
<td>20</td>
</tr>
</tbody>
</table>

Figure 1. Distribution of respondents by Deterioration in Standard of living

Table 2. Correlation of coping strategy with duration of care

<table>
<thead>
<tr>
<th>Variables</th>
<th>Correlation Value</th>
<th>Statistical Inference</th>
</tr>
</thead>
<tbody>
<tr>
<td>Duration of care and Problem solving</td>
<td>-0.227**</td>
<td>P&lt; 0.01 Highly Significant</td>
</tr>
<tr>
<td>Duration of care and Positive distraction</td>
<td>0.373</td>
<td>P&gt; 0.05 Not Significant</td>
</tr>
<tr>
<td>Duration of care and Negative distraction</td>
<td>0.198**</td>
<td>P&lt; 0.01 Highly Significant</td>
</tr>
<tr>
<td>Duration of care and Acceptance</td>
<td>0.176*</td>
<td>P&lt;0.05 Significant</td>
</tr>
<tr>
<td>Duration of care and Religion</td>
<td>0.373</td>
<td>P&gt; 0.05 Not Significant</td>
</tr>
<tr>
<td>Duration of care and Denial</td>
<td>0.256**</td>
<td>P&lt; 0.01 Highly Significant</td>
</tr>
<tr>
<td>Duration of care and Emotion focused</td>
<td>0.188**</td>
<td>P&lt; 0.01 Highly Significant</td>
</tr>
<tr>
<td>Duration of care and Social support</td>
<td>0.384</td>
<td>P&gt; 0.05 Not Significant</td>
</tr>
<tr>
<td>Duration of care and overall coping strategies</td>
<td>0.252**</td>
<td>P&lt; 0.01 Highly Significant</td>
</tr>
</tbody>
</table>
The above statistical inference shows that as duration of care increases, problem solving ability decreases, and at the same time when the duration of care increases, negative distractions also increases. Duration of care showed a significant relationship between acceptance, denial and emotion focused. Duration of care doesn’t show a significant relationship between Positive distraction, Religion and Social support.

![Figure 2. Distribution of respondents by various dimension of coping behaviour](image)

4. Conclusion, Limitations and Recommendation for future studies

Conclusion

These results of coping behaviour have important implications for planning early prevention and intervention model for the wives of alcohol dependents. This can be used as methods of handling stress and reducing stress. As coping strategies play a major role in handling day to stress encountered by the wives of alcohol dependents.

Limitations

As it was a hospital based study results cannot be generalized for community sample.

Recommendations for future studies

More studies should be carried out in coping along with family burden and psychological wellbeing and more Interventions or models should be framed for the respondents to overcome their burden.

References

Study on the Eleventh Hour Committal of Every Academic Institution to Surge for a Wholesome Education

Dr. Anitha*
Dr. A. Umesh Samuel Jebaseelan**

Abstract
Education provides an opportunity to reflect upon the social, economic, cultural, and moral issues facing by a human being. India needs to focus on education for more educated and efficient people to drive our nation. Education is a very important factor for the development of a country. We should make it appropriate according to the time and changing scenario of the world. To develop India as a digital nation or to become a prosperous partner in global development, India has to strengthen higher education with research and development. This paper is mainly focused on the students who are the prime investment of all the academic institutions to be the prestigious unit and the reflection of overall scenario of higher education in India.

This paper aims to identify issues and challenges of the adolescent college students in the field of higher education in India for new makeover to all the Education Institution. Finally, the paper concluded that jointly effort of the student, teacher and parent to get the epitome of the problem to water down for a better field for higher education and career focussed platform.

Key words: Adolescent students; Academic institution; Achievement motivation; Wholesome education; Higher education.

1. Introduction
Flammer & Alsaker, 2002 in their studies apparently quoted that, adolescent age is considered as a transitional phase, and a “status passage” between childhood and adulthood. Adolescence can be divided into two stages: puberty (approximately between the years 12-18), and after puberty (about 18-24 years). The meaning of adolescence has changed during the last century as education; social relationships and the importance of peer relations have undergone a considerable change over a period of generations. Professional training and schooling often last up into the age of twenty and the pressure of achievement of family standards has become stronger. Advancing and supporting the physical, enthusiastic, social, and scholarly improvement of a tyke from early stages to adulthood is a wonder specified as child rearing, and it is parts of bringing up a tyke beside the natural relationship. Anitha, 2017 in her article cited the study conducted by Spinath, Harlaar, & Plomin, (2006), who stated that Achievement motivation is considered a prerequisite for success, not only in academic, but also in sports- and job related situations. In academic settings, the interest in motivation is partly inspired by the notion that Students' motivation, operationalized, e.g., as their competency beliefs and value beliefs, could be more malleable than their cognitive ability, and as such could prove to be a potential lead for the educational system for improving learning and achievement processes in students. Amandeep Bhupal (2018), mentioned in an article posted by Vivek Gupta about the “Higher Education in India”, states that the disappointment of Indian instruction framework is distinct when found in light of the way that a large number of understudies each year travel to another country for school training and the courses are obsolete, workforce is bumbling, uneducated to the progressions around them. Starting at 2014, there are 677 colleges, 37,204 schools and 11,443 remain solitary establishments in India, according to the insights from the site of India's HRD service.

Propelled training is in rot at all levels, the incoherency is that these numbers are touted as an indication of the capacity of our guideline structure. Not a sign that this brisk mushrooming has made a building that is decimating a hopeful class. There is alongside no discourse and trade in transit that our propelled training structure has completely fell. So what will the lakhs of understudies in a considerable number of colleges doing? In case they are not related with helping the nation building exercise than we have a significantly all the more concerning issue accessible. In case India does not look at the fall of its propelled training eagerly not only will we lead another psyche drain yet a fold of wants. This is especially of stress to the new government that has come to control on the rising of this idealistic class as - we are in the Eleventh hour!

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Review of literature

Tamminen & Holt, (2012), studies that at the present time, there is little empirical evidence to explain why coping may change during adolescence, and the impact that maturational processes has upon coping. That is, lot of exploration is needed to study the relationship between coping and cognitive, social, and emotion maturity. Understanding more about the relationship between maturity and coping is important for the development of theory and coping interventions.

Sukhadeo Thorat,(2015 and 2016) writes an article on “the blue print for higher education” in ‘THE HINDU’ points out the problems that confront higher education in India today are low rates of enrolment, unequal distribution and receiving of, poor quality of infrastructure and lack of recognition. He also propagates that with new moves being moved toward the approach front, it is important to discover solid arrangements and expand on prior endeavours” yet more of risk that graves India is, the disparities in taking up education, especially in terms of economic class, gender, caste and ethnic and religious belonging S.N.Kumar (2018) in his book titled “Education and Me” rightly points that, the problems that confront education today are low rates of enrolment, unequal access, and poor quality of infrastructure and lack of relevance.

2. Research methodology

Scope and significance of the study

“The first Chapter of the Education Commission” authored by Abdul Mannan Bagulia, (1964-66), which is known as the Kothari Commission, Education and National Objectives that “The destiny of India is now being shaped in her classrooms. Puja Mondal shared an article about “the Education system in India”", that in a world based on science and technology, it is education that determines the level of prosperity, welfare and security of the people. But in the current scenario it’s not so. What bothering the individual is immediate respond to their adrenalin gush, can’t tolerate the delay in achievement. Youth with high scholastic accomplishment are considered to accomplish their personality in the general public, get great professional openings, get acknowledgment from associate, guardians and educators, create administration characteristics, and improve their fearlessness and confidence. The study concerned about the counter part of the excellent students who need a push to excel what he supposed to and not what the institution offers. The study mainly focus to insist that a customised education has to be offered leaving behind the conventional study mode. We search for alternatives in gourmet, hosieries, men can choose the way he want to live as the dynamism of live changes but why not an education can take some mutation to form a form to fit the under achievers and poor performers.

Research Design

Descriptive research design was adopted by the researcher as the study focused on describing the characteristics of the population.

Aim and objectives

To study the need to rush on the eleventh hour committal of every academic institution to surge for a wholesome education.

• To study the relationship between emotional maturity, social maturity and achievement motivation of the adolescent college students
• To learn the relationship between social maturity, achievement motivation and parenting styles of the adolescent college students.
• Intercorrelation between overall achievement motivation and the overall parenting styles score of the adolescent college students
• To highlight and suggest the need of the hour to evolve a change in the education institution to offer a wholesome education without disparity on any creeds and class

University and Sampling

Autonomous boys college and autonomous girls only college and autonomous college and  autonomous college and autonomous college and autonomous college in Trichy district were selected as universe and from that using multi stage Random sampling, a sample of 300 was extracted for the study.

Tools of Data Collection

• Achievement Motivation Scale (50 items)-0.56 Reliability-Prof.Prathibba and Dr.Asha(2002)
• Social Maturity Scale (90 items)-0.79 reliability-Dr.Nalini Rao (1986)
• Emotional Maturity Scale (48 items)-0.75 Reliability-Dr.Singh and Bharagava (1999)
• Parenting Scale (40 items) - 0.72 Reliability-R.L.Bharadwaj (1998)
3. Analysis and Interpretation

Table 1. Intercorrelation between overall emotional maturity other key variables

<table>
<thead>
<tr>
<th>Overall Emotional Maturity</th>
<th>Correlation Value</th>
<th>Statistical Inference</th>
</tr>
</thead>
<tbody>
<tr>
<td>Overall Social Maturity</td>
<td>0.240**</td>
<td>P &lt; 0.01 Significant</td>
</tr>
<tr>
<td>Achievement Motivation</td>
<td>0.013</td>
<td>P &gt; 0.05 Not Significant</td>
</tr>
<tr>
<td>Overall Parenting Styles</td>
<td>0.207**</td>
<td>P &lt; 0.01 Significant</td>
</tr>
</tbody>
</table>

* 0.05 level of significance; ** 0.01 level of significance

According to the arrangement, that delineates the Intercorrelation between the key factors of the investigation, the general passionate development has a critical connection with the general social development. At the point when all there is an expansion in the level of passionate development level, there will be an ascent in the general level of the social development. Arrangement of a good example and parentkid connections and communications block the development of enthusiastic self of youthful grown-ups (Linda 2009). Muller (2002) expressed that while passionate insight can be educated, enthusiastic development is a decision. Enthusiastic development and social development, both are imperative for achieving achievement and bliss throughout everyday life. Youths start to state more self-governing control over their choices, feelings and activities, and begin to separate from parental control. Social and enthusiastic development is equal, so a push to create one space would naturally prompt advancement in other area. Babli Roy, and et al (2013) considered the "Enthusiastic Intelligence and Academic Achievement Motivation among Adolescents and endeavored to look at connection between passionate knowledge and scholarly accomplishment inspiration among youths. There is a critical connection between the general passionate development and the child rearing style. Juvenile's psychosocial development has incredible effect of the style of child rearing. Substantiating past examination, it can be underlined that enthusiastic development has high noteworthy connection with the child rearing style of the respondents.

Table 2. Intercorrelation between overall social maturity and the other key variables

<table>
<thead>
<tr>
<th>Overall Social Maturity</th>
<th>Correlation Value</th>
<th>Statistical Inference</th>
</tr>
</thead>
<tbody>
<tr>
<td>Overall Achievement Motivation</td>
<td>0.148*</td>
<td>P &lt; 0.05 Significant</td>
</tr>
<tr>
<td>Overall Parenting Styles</td>
<td>0.073</td>
<td>P &gt; 0.05 Not significant</td>
</tr>
</tbody>
</table>

* 0.05 level of significance; ** 0.01 level of significance

The table measurably demonstrates that there is critical connection between generally social development and the general accomplishment inspiration. Strangely Mickelson, (2001) experienced an examination and inferred that, If the general public supports of his/her conduct, his/her methods for adapting in this manner, with himself and his condition might be more compelling. In this way, he/she might be mentally solid or balanced. Wilbum and Smith, (2005), attests that Social development is one of the major formative state in which youths go through amid their transitional period from adolescence to adulthood. The establishment of socialization, which is laid amid the adolescence, assumes a critical part in social development, social learning and social modification. Empowering social development is certain jolt as it furnishes kid with a vital arrangement of social aptitudes that improves the probability that he or she will appreciate a rich, important, and effective life. Getting substantial confirmations through the above investigates, the present finding gets reinforced to state that there is a critical connection between social development and child rearing styles. The intercorrelation table clarifies that there is no noteworthy connection with the general child rearing styles as a few scientists like Querdo Warner and Eyeberg, (2002) calls attention to the factor of powerful child rearing on growing early social development, Democratic child rearing comprises of enthusiastic help, bidirectional correspondence, firm cut off setting and responsiveness.

Table 3. Intercorrelation between overall achievement motivation and the overall parenting styles

<table>
<thead>
<tr>
<th>Overall Achievement Motivation</th>
<th>Correlation Value</th>
<th>Statistical Inference</th>
</tr>
</thead>
<tbody>
<tr>
<td>Overall parenting styles</td>
<td>0.294**</td>
<td>P &lt; 0.01 Significant</td>
</tr>
</tbody>
</table>

* 0.05 level of significance; ** 0.01 level of significance
Zahra Zahed Zahedani, et al., (2016) entitled as “The impact of child rearing style on scholarly accomplishment and profession way”, talked about in conclusion that self-governance, parental contribution and warmth are noteworthy indicators for scholastic accomplishment. Likewise, there is a positive critical connection between firm child rearing style and understudy's scholarly accomplishment. Erlanger A. Turner, (2009), considers the relations among child rearing style, scholarly execution, self-adequacy, and accomplishment inspiration which was inspected in an example of understudies. The outcomes exhibit that parental impact assumes an essential part in youthful grown-ups' scholarly execution accomplishment rate, notwithstanding amid a period of progress to life far from home need a parental association. The above examination bolster the announcement that here is a critical connection between the general accomplishment inspiration and the child rearing style.

4. Suggestion and Conclusion

Suggestion
In the light of the findings of this study, the following recommendations are made to ensure effective for the development of the right level of achievement motivation towards academic success among students:
✓ Focus on Skill Based Education
✓ Reward Creativity, Original Thinking, Research And Innovation
✓ Conduct periodic parent student forum were teachers can also be accountable
✓ Implement Massive Technology Infrastructure For Education
✓ Re-Define The Purpose Of The Education System
✓ Convert the education system to be useful and keep live
✓ Take Mediocrity Out Of The System
✓ Personalize Education – One Size Does Not Fit All
✓ Allow Private Capital In Education
✓ Make Reservation Irrelevant

Conclusion
The quality society can be produced only through quality education provided through universities and other degree awarding institutions Kumar, S.A. (2014). Kainuwa, A. et. al. (2013) states that the mechanism should pay attention on refining diversifying, and upgrading higher education and research programmes. This highlights that quality should outnumber the quantity in offering any courses in college level. Effectiveness should overcome the number of courses which stagnates only for the higher achievers. Tailor made or individualised education pattern which qualifies the Individual student’s motivational level, area of interest and personal abilities alone can succeed for achievements leaving behind the age old practicing with chalk and boards with one man speaking the invisible things

References
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Mental Health Level Correlates among Farmers in Cuddalore District

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Dr. A. Relton**

Abstract
Agriculture is the back bone of the Indian economy and agriculture occupies a place of pride. Even many of the industries still depend on the agricultural sector for market as well as raw materials. A farmer is a person who is responsible for growing crops, raising and breeding livestock, poultry and other animals and marketing farm products. Farmers can work in farms that they own themselves or as laborers on land owned by others. Indian agriculture and farmers are now facing new challenges such as Small and fragmented land-holdings, Seeds, Manures, Fertilizers and Pesticides, Irrigation, Lack of mechanisation, Soil erosion, Agricultural Marketing, Inadequate storage facilities, Inadequate transport, Financial Support etc. Farmers demands were not taken into count this affect their mental health that will lead to farmer suicide. Farmer’s suicide has become a national problem in our country. The purpose of the study has been to find the mental health levels among farmers. Descriptive research design was used. A sample of 60 farmers have been selected for the present research using convenient sampling method and the required data was collected. The data was systematically processed and analyzed. Tools used for data collection is Mental Health Inventory which is a developed and standardized instrument by Dr.Jagdish and Dr.A.K.Srivastava(1983). More than half (51.7) of the farmers have low level of mental health. The results will be shared in the full paper.

Keywords: Mental Health; Farmers; Descriptive research design; Standardized instrument.

1. Introduction
The term Agriculture is comes from two Latin words ager or agri meaning soil and cultura meaning cultivation. It is a gift from god and nature .The practice or science of farming, including growing crops, cultivation of the soil and animals rearing. Agriculture is a primary activity which is also closely related to the natural environment. Agriculture is also called husbandry or farming. Agriculture is the most important enterprise in the world. In India agriculture mainly contributes to National income, state revenue, providing employment, food supply, industrial inputs and Trade. An Indian farmer is very busy throughout the year by engaging in ploughing, sowing the seeds, watering the fields, harvesting the crop and then taking it to the market for sale. For him there is no rest and is very hard working. Though, he is very poor. He is being exploited by government servants, the middlemen and the money-lenders, Even their needs are simple and few and yet they are not met. Most of the Indian farmers are tenants. He is the soul of our country. India cannot prosper if Indian farmers are poor and miserable. He is as important as other professionals like soldier, a doctor or an engineer. Mental health describes a psychological well-being or an absence of a mental disorder. Stress may be due to risk factors ranged from those beyond farmers control such as weather, disease, and government regulations, to those more within their control such as managing workloads, finances and their physical health. Farmers or farmers families are the ones having challenged life either mentally or physically or both. The importance of maintaining good mental health is crucial to living a long and healthy life. Good mental health can enhance one’s life, on the other hand poor mental health can prevent someone from living a normal life. In this study researcher want to emphasis few of theories which is relevant to mental health of farmers.

Review of Literature
Depression and anxiety in farmers Article in Primary Care Psychiatry January 1998 C.S. Eisner The objective of this study was to establish whether there was a difference in depression and anxiety between farmers and non-farmers, and to establish farmers’ beliefs about current issues and problems in farming, in order to postulate whether these factors may be contributing to depression and anxiety. Farmers identified difficulty in getting a day off, fear of letting the family down and lack of interest by non-farmers in farming

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issues as the most important themes, and did not find the National Farmers Union a great source of help. Farmers may be at more risk of anxiety and depression than other occupational groups. Strategies need to be developed to try to ensure that mental health problems in farmers are recognized and treated early.

Satapathy C. and Mishra B. (2012) focuses on farmers’ suicides in western part of Orissa. The paper represents crop failure, debt burden, weak psychology of farmers, exploited market structure, government policy, lack of social and family communication, low economic condition of farmers, pressure of credit agency to repay the loan and unsuitable technological development for small and marginal operational holdings are increasing vulnerability among farmers’ community and leads to committing suicide.

K Narayana Gowda (9 January 2009) Rebuilding the Confidence of Farmers-Experiences of an Innovative Extension Project Article in Indian Research Journal of Extension Education. According to available data and feedback from several quarters, farmers in general and farm youth in particular are losing confidence in farming. In a progressive state like Punjab where the farmers are relatively well assured with resources compared to majority of other states in the country are losing confidence in farming it is difficult to imagine the mindset of farmers in other parts of the country. The situation is more or less same in many developing and few developed countries. In the process farmers are losing confidence in the recent days. Once the farmers’ conditions are improved, it will have chain reaction in improving the conditions of other segments of rural people leading to rural prosperity.

2. Methods and Materials
Objective of the study
➢ To study the Socio Economic background of the farmers.
➢ To find out the mental health level of farmers.
➢ To suggest suitable measures to improve the Mental health level among the farmers.

The researchers have used “descriptive research design”. The universe for studying “The Mental Health Level of Farmers” in this research is infinite hence the researchers have selected sixty respondents by convenient sampling to assess the Mental Health Level of Farmers. To collect the socio-demo graphic details of the respondents the researchers has used self-prepared questionnaire. To assess the level of mental health among farmers the instrument Mental Health Inventory (1983) by Dr.Jagdish and Dr.A.K.Srivastava has been used and the required data has been collected.

3. Analysis and interpretation
Less than half of the farmers 41.7% belongs to the age group of 31-40 years and more than half of the farmers (51.7) are female than comparing to male and most of the farmers (88.3) have Tamil as their mother tongue. Exactly 50% of farmers belongs to nuclear family. Above 41.7% have not even crossed their primary education. More than half of the percentage (65%) of framers have income which is less than Rs10,000. Vast majority 86.7% of farmers are living in their own house. Above 58.3% of the farmers are involved in agriculture for more than fifteen years. Majority (73.3%) of farmers are rice cultivators and 40% of farmers got financial support from government and 56.7% of them market their crop through middlemen.

Table 1. Distribution of farmers level of mental health based on various dimension

<table>
<thead>
<tr>
<th>Dimensions</th>
<th>Low</th>
<th>High</th>
</tr>
</thead>
<tbody>
<tr>
<td>Positive self evaluation</td>
<td>58.3</td>
<td>41.7</td>
</tr>
<tr>
<td>Perception of reality</td>
<td>70</td>
<td>30</td>
</tr>
<tr>
<td>Integration of personality</td>
<td>50</td>
<td>50</td>
</tr>
<tr>
<td>Autonomy</td>
<td>51.7</td>
<td>48.3</td>
</tr>
<tr>
<td>Group oriented attitudes</td>
<td>63.3</td>
<td>36.7</td>
</tr>
<tr>
<td>Environmental mastery</td>
<td>50</td>
<td>50</td>
</tr>
</tbody>
</table>

Table 2. Level of Mental health among farmers

<table>
<thead>
<tr>
<th>Mental health</th>
<th>Frequency</th>
<th>Percentage</th>
</tr>
</thead>
<tbody>
<tr>
<td>Low</td>
<td>31</td>
<td>51.7</td>
</tr>
<tr>
<td>High</td>
<td>29</td>
<td>48.3</td>
</tr>
<tr>
<td>Total</td>
<td>60</td>
<td>100.0</td>
</tr>
</tbody>
</table>

It is interfered from the above table that less than half of the farmers are having high mental health and the more than half of the farmers are having low mental health.
4. Suggestions and Conclusion

Suggestions
➢ More research should be conducted in this area to find out more mental health level of farmers, as we all people depend on agriculture it necessary that farmers should have good mental health.
➢ Creating more awareness among community members to provide opportunity to come to the field of agriculture.
➢ Popularization of agriculture is much and some mechanism should be adopted to popularize the agriculture field.
➢ All facilities should be provided to farmers by both the central and state governments.
➢ Awareness should be given to all members of the society about agriculture and its importance.
➢ Farmers should be aware about all the schemes provided to them by the governments.
➢ The government should provide periodic free mental and physical checkups and treat them.

Conclusion
Farmers are the backbone of our country and they should to treated with respect. So the government should ensure their utmost care and protection to farmers. This study also found that farmers are facing severe depression either by occupation, climate or by family. Unpredictable elements play a greater role in mental health of farmers like weather, fire, pests and diseases. So when farmers struggle financially, despite working hard they sometimes see themselves as failures. For many farmers is not just a profession it is an identity. Hence not only government every citizen of our country should support the farmers in all aspects.

References
Risk of Alcohol Reuse among Alcoholics under Treatment

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M. Reena Rebellow**

Abstract
Alcohol dependency is a universal problem in all classes of society. Alcoholism is a chronic, psychotic, somatic or psychosomatic illness, which manifest itself as a disorder of behavior. Alcoholism is the disease associated with high rates of relapse. Several factors can cause a relapse and it is common for people recovering from alcohol addiction to relapse multiple times before achieving long time sobriety. It’s important to understand that relapse is normal and can be overcome.

The main aim of the study is to find the risk of alcohol reuse among alcoholics in treatment. The researcher has used descriptive design to explain the study and has used Alcohol Relapse Risk Scale to find the level of risk among the respondents. The universe of the research is 116 alcoholics in treatment in six different de-addiction centers at Tiruchirappalli. Out of 116 the selected sample size was 58. The study reveals that nearly half of the respondents have high risk of alcohol reuse.

Keywords: Alcohol; Relapse; Addiction; Reuse; Alcoholism; Risk factors.

1. Introduction
 Alcohol is a universal problem found in all classes of society. A common man sees “alcoholism” as a weakness of character. After the extensive research the American Medical Association came to the conclusion that alcoholism is a “Disease” in the year 1956.

“Alcoholism is a chronic, psychotic, somatic or psychosomatic illness, which manifest itself as a disorder of behavior” was defined by keller’s(1962). It affects the reward, memory and motivation systems of the brain. It leads to dysfunction in physical, mental, emotional, social and spiritual health of the individual. Men are more affected by alcohol dependency than women.

The person who cannot live without alcohol is called as alcoholic. The World Health Organization (1952) defines that “Alcoholics are those excessive drinkers whose dependence on alcohol has attained such a degree that it shows a noticeable mental disturbance or an interference with their bodily and mental health”. They develop physical and psychological dependence on alcohol and they will have no control on their drinking, for a short duration, and will definitely go back to obsessive drinking. The WHO recommended that the term “Alcoholism” be discarded and substituted by “Alcohol Dependence Syndrome”(ADS) and this term has been used in the ninth revision of the International Classification of Disease(ICD-9) published by it in 1978. Alcohol contains ethanol / ethyl alcohol. It is made up of grains, fruits or vegetables through a process called fermentation.

Alcoholism is the disease associated with high rates of relapse. Several factors can cause a relapse and it is common for people recovering from alcohol addiction to relapse multiple times before achieving long time sobriety. It’s important to understand that relapse is normal and can be overcome. Anupama Korlakunta, et.al.,(2017) did the study on “Reason for Relapse in Patients with Alcohol Dependence”. This study was under taken for better understanding of the causes for relapse and improve outcome for individuals with alcohol dependence. The study was conducted on patients with alcohol dependence in the inpatient psychiatric ward. The sample was collected from 190 in-patients with Alcohol Dependence Syndrome (ADS) using a semi structured interview containing socio demographic variables and the reasons for relapse. Craving was noted as most common cause for relapse in alcohol dependent patients. There is significant association between age at first drink, age at dependence, duration of dependence, other Co-morbid diagnosis of patients and the relapse. Asghar Mohammad poorasl,et.al.,(2012) did a study on “Addiction Relapse and its Predictors: a Prospective Study” to estimate relapse rate and determine its predictors in Iran. In this research, they studied 436 patients referring voluntarily to an addiction treatment center in Margate, Iran. Logistic regression model was used in order to identify the predictors of relapse in the sample. The results of logistic model indicate that smoking, having a drug user in the family, having lower hope to quit, unemployment and staying connected with drug user friends after quitting were factors associated with relapse.

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** Assistant Professor, PG & Research Department of Social Work, Bishop Heber College, Tiruchirappalli.
2. Research Methodology

- To study the risk of alcohol reuse among alcoholics under treatment.

The researcher has adopted descriptive research design to describe the study. The Universe of the study is 116 alcoholics presently under treatment in six de-addiction centers in Trichirappalli District. Out of 116 patients the selected sample size was 58. The sample design used in the study is stratified random sampling with six strata, each de-addiction centre serving as a stratum. Self prepared questionnaire was used to study the socio demographic profile of the respondents. The researcher used Alcohol Relapse Risk Scale, developed by Tokyo Metropolitan University of Medical Science, to study the risk of alcohol reuse among alcoholics who were undergoing treatment. The scale has 32 items and 5 dimensions. The dimensions are Stimulus Vulnerability, Emotional Problems, Compulsivity of Alcohol, and Lack of Negative Expectancy for Alcohol and Positive Expectancy for Alcohol.

3. Result & Analysis

Table 1. Distribution of respondents based on their marital status

<table>
<thead>
<tr>
<th>Marital status</th>
<th>Frequency (N=58)</th>
<th>Percentage (100%)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Married</td>
<td>45</td>
<td>78%</td>
</tr>
<tr>
<td>Unmarried</td>
<td>13</td>
<td>22%</td>
</tr>
</tbody>
</table>

It is observed from the above table that, an absolute majority (78%) of the respondents were married and less than two fifth of respondents were unmarried. This infers that majority of the respondents who were married involved in substance abuse. Struggling to cope with family issues or responsibilities could be a reason for this situation.

Table 2. Distribution of respondents based on their reason for consuming alcohol

<table>
<thead>
<tr>
<th>Reason for consuming alcohol</th>
<th>Frequency (N=58)</th>
<th>Percentage (100%)</th>
</tr>
</thead>
<tbody>
<tr>
<td>family problem</td>
<td>31</td>
<td>53%</td>
</tr>
<tr>
<td>peer pressure</td>
<td>8</td>
<td>14%</td>
</tr>
<tr>
<td>Enjoyment</td>
<td>19</td>
<td>33%</td>
</tr>
</tbody>
</table>

It is clear from the above table that more than half of the respondents (53%) were consuming alcohol because of their family problem and 33% of the respondents were consuming for enjoyment and 14% of respondents were consuming due to peer pressure. It reveals that there is an inter link between table 1 and table 2. Hence the alcohol dependency has become an inefficient coping strategy used to deal with family related issues.

Table 3. Distribution of respondents by their friends being a reason for alcohol consumption

<table>
<thead>
<tr>
<th>Convinced by friends</th>
<th>Frequency (N=58)</th>
<th>Percentage (100%)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Yes</td>
<td>37</td>
<td>64%</td>
</tr>
<tr>
<td>No</td>
<td>21</td>
<td>36%</td>
</tr>
</tbody>
</table>

It is seen from the above table that more than half of the respondents (64%) were convinced by their friends to consume alcohol for the first time while the remaining respondents were consuming it by their own interest. This reveals that having a friend who is an alcohol user makes an individual vulnerable for substance abuse.
Table 4. Distribution of respondents based on their risk of alcohol reuse

<table>
<thead>
<tr>
<th>Risk</th>
<th>Frequency (N=58)</th>
<th>Percentage (100%)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Stimulus vulnerability</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Low</td>
<td>30</td>
<td>52%</td>
</tr>
<tr>
<td>High</td>
<td>28</td>
<td>48%</td>
</tr>
<tr>
<td>Emotional problems</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Low</td>
<td>29</td>
<td>50%</td>
</tr>
<tr>
<td>High</td>
<td>29</td>
<td>50%</td>
</tr>
<tr>
<td>Compulsivity of Alcohol</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Low</td>
<td>32</td>
<td>55%</td>
</tr>
<tr>
<td>High</td>
<td>26</td>
<td>45%</td>
</tr>
<tr>
<td>Expectancy for Alcohol</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Low</td>
<td>29</td>
<td>50%</td>
</tr>
<tr>
<td>High</td>
<td>29</td>
<td>50%</td>
</tr>
<tr>
<td>Positive Expectancy for Alcohol</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Low</td>
<td>39</td>
<td>67%</td>
</tr>
<tr>
<td>High</td>
<td>19</td>
<td>33%</td>
</tr>
<tr>
<td>Overall Risk</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Low</td>
<td>32</td>
<td>55%</td>
</tr>
<tr>
<td>High</td>
<td>26</td>
<td>45%</td>
</tr>
</tbody>
</table>

It is shown from the above table that less than half of the respondents (48%) have high stimulus vulnerability and more than half of the respondents (52%) have low stimulus vulnerability, half of the respondents (50%) have low emotional problems and other half of the respondents have high emotional problems, less than half of the respondents (45%) have high compulsivity to alcohol and more than half of the respondents (55%) have low compulsivity to alcohol, half of the respondents (50%) have high lack of negative expectancy for alcohol and another half of the respondents have low lack of negative expectancy for alcohol and 30% of the respondents have high positive expectancy for alcohol and more than half of the respondents (67%) have low positive expectancy for alcohol.

The study reveals nearly half of the respondents (45%) have high risk for alcohol reuse after treatment and more than half of the respondents (55%) have low risk for alcohol reuse.

4. Suggestions and Conclusion

Findings related to Socio demographic characteristic of respondents:

- An absolute majority (78%) of the respondents are married.
- More than half of the respondents (53%) were consumed alcohol because of the family problem.
- More than half of the respondents (64%) were convinced by their friends to consume alcohol for the first time.

Findings related to the risk of alcohol reuse:

- Nearly half of the respondents (48%) have high stimulus vulnerability.
- Half of the respondents (50%) have high emotional problems.
- Nearly half of the respondents (45%) have high compulsivity to alcohol.
- Half of the respondents (50%) have high negative expectancy for alcohol.
- 33% of the respondents have high positive expectancy for alcohol.
- The study reveals that nearly half of the respondents (45%) have high risk for alcohol reuse after treatment.

Suggestions

The following are the suggestions given to alcohol dependents to effectively overcome their relapse and to stay abstinent.

- Regular follow up.
- Attending the AA meeting regularly.
- Avoiding friends who were addicted to alcohol and drugs.
- Engaging in new activities and interests.
- Taking a personal conviction everyday to live an alcohol free life.
- Availing professional counseling to cope with their family issues.

Conclusion

In today’s context the relapse rate was increased and only few percentages of patients who receive treatment for alcoholism remain alcohol free. It is proved in this study that nearly half of the respondents have high risk for alcohol reuse. Participation in 12 step recovery group prevents the person from alcohol reuse to live an alcohol free life.
References

3. Is Alcoholism a Disease &amp; Can It Be Cured?" lcohon.org, www.alcohol.org/alcoholism/can-it-be-cured/.
Psychological Competency among Women Informal Carers of Persons with Neuro-Cognitive Disorder in Rural Thiruvananthapuram

G. Sam Sangeeth*
Dr. M. Daniel Solomon**

Abstract
The aim of this scientific paper is to portray the psychological competencies of women informal carers of persons with late onset neuro cognitive disorder (NCD) in rural Thiruvananthapuram. The informal carers are essential as the population is increasing. The informal carers are family members to assist the care recipients in their desperate need in the terms of functional loss or disability. The informal carers are not recognized by many stakeholders and making them sustainable is vital. Informal carers are invisible in the society where initiatives have to be taken to mainstream them and bring into inclusion. The psychological competency is operationalized as resilience in this study. The researcher has adopted descriptive study design. The researcher has attempted to describe the women informal carers’ psychological competency in care labour. The population consists of women carers caring late onset neuro cognitive disorders. Universe of the study is two hundred and seven career registered in District Mental Health Programme, catering services to rural Thiruvananthapuram where the researcher has used Morgan’s sample size calculator and espoused one hundred and thirty five samples as sample size for investigation. The pilot study was conducted. The researcher has used in-home interview technique to investigate on the phenomena in the community. The researcher has used interview schedule for collection of data. The standardized tool was used resilience scale. Finding alarms that there is no correlation between age and psychological competency. There is no significant mean difference between psychological competencies and migration status and significant variance between psychological competencies and religious of the respondents. The researcher concludes that training on psychological competency has to be incorporated among the carers of persons with mild and major Neuro-cognitive disorders in the community. Community based intervention should be mandatory for the empowerment of informal care givers in the community. This approach fostering strength and capacities through social workers among informal carers can be said to be “positive social work practice” which is imbied from “positive psychology”.

Keywords: Care labour, Informal care, Care skill, Psychological competencies, late onset NCD

1. Introduction
Aging is related with declining of physic-psycho-social alterations or decline, Srinivasan N. Tirupati & Rebecca N. Punitha (2005). Cognitive impairment or decline is predominately connected with age, Bhatt and S. Irudaya Rajan (1990) Kerala ranks first in demographic transition. The demographic dividend of the country is increasing more due to shifts in demography. Prakash Om & Kukreti Prerna (2013) expresses that in India, Longevity is rapidly growing where dependency is booming as impending problem. In India, scarcity of resources or minimal services to compliment the rapid growth and challenges of ageing population are felt. Care scarcity is the crisis emerging in present times. Inadequacies are traced out in term of education, training, human resources, policy making and implementation, curriculum in gerontology and its serious issues. Care models in terms of indigenous practice are the escalated need in care science emerging and human services in terms of informal care. Inadequacies have to be rectified in terms of care innovation. Human relations are vital in promotion of care practice

CW Zhu, M Sano (2006) Study visibly states that there increase in ageing population may lead to economic crisis in terms of health care. Health economics in neurocognitive disorder are posing major obstacles in development of the nation. Out of packet expenditure and social care are going be match word because one causes the other by posing low quality of life which affects both the carer and care recipients. The psychological competency has to be installed in carers to meet crisis and social workers must play a role in preparing carer to be psychological firm through respite care and supportive intervention.

Want of Care signals policy makers has to be inclined to preparedness through developing skilful human resources, allied workers, informal service development for long term care, care in home based care with person centered approach, research development in care, youth engagement in dementia care. Innovation in care by government, private, public-private partnership and corporate social responsibilities are obligatory to deal

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dementia care. The challenges of care may hamper the development of the country in term of late onset neurocognitive disability.

According to (Dementia report 2010; Jahnavi S Kedare, Chetan D Vispute 2016) highlights that the Neurocognitive disorders occurrences are traced among older adult’s population. The prevalencecare increasingly bifurcated in developed countries spreading its increasing existence in developing countries like India. Asia is more prone to late-onset neurocognitive disabilities. The Indian states like Kerala, Goa, Punjab, Haryana, Tamilnadu and Karnataka has more prevalence in the country. Dias A Patel V (2009).highlighted Neurocognitive disorder is a chronic public health problem. Raj Kumar S, Kumar S, Thara R. (1997). Emphasized reality that rural estimates of neurocognitive disorders are higher than urban estimates. More focus must be on emancipation and prevention through precautionary measures like life style modifications, promotion of bilingualism, eradicating illiteracy, preventing deficiencies have to be taken into consideration for slowdown of neuro cognitive disorders in rural community.

Hindustan Times (2017) Neurocognitive disorder formerly known as Dementia. Globally, India ranks the second in prevalence of individuals suffering from neurocognitive disorders, formerly known as dementia with an estimated 4.1 million people suffering from it as mentioned in ‘Dementia India’ report published by the Alzheimer’s and Related Disorders Society of India. This is expected to double by 2035. Maharashtra and Uttar Pradesh alone are expected to house more than 5, 00,000 patients by 2026.

Violeta Fernández-Lansac V, Crespo López M, Cáceres R, Rodríguez-Poyo M (2012) emphasis that Women carers in the workforce are negatively affected psychologically. Women carers must be assertive to seek for psychological aid to put on psychological competencies to promote wellbeing. The majority carers of neurocognitive disability (previously known as dementia) carers are female and majority of victims of neurocognitive disorder are females due to feminization of ageing. It is inferred that female population are trapped with vulnerability with no paid livelihood assignments. So recue is needed for carers in terms livelihood opportunity or carer’s pension in the labour market has to be ensured. Government has to consider the invisible agony of carers in the family system. The psycho-social gerontological service delivery has to be drafted as the policy frame work for promotion and sustainability of long time care and government voice out for care of bedridden and chronic disease individuals and their family career (Informal carer without pay). Dementia care is different from late adulthood care.

According to DSM 5 Neuro-cognitive disorders are bifurcated into major and minor. It express significant cognitive decline, Interferes with independent functionality of individuals. Mild Neuro-cognitive disorder reflect moderate cognitive decline, not interfere with the independent functioning. The cognitive domain includes complex attention, executive functioning, learning and memory, language, perceptual motor and social cognition. The neurocognitive disorders accompany behavioral disorders and functional limitation causing disability. According to American psychiatric association(2013).The Neuro-cognitive disorder includes mild and major Alzheimer’s disorder, mild and major vascular disorder, mild and major frontal lobe disorders and mild and major Lewy body disorders. Mild or Major Alzheimer’s disease: Buildup of abnormal amyloid protein plaques & misshapen neurofibrillary tangles evitable. B-Amyloid cause’s toxicity to neurons, tangles can’t transport nutrients/waste. Mild or Major Vascular Dementia: Large vessel relatively large but localized injury on/near outer surface of brain leading to sudden onset of discrete cognitive impairments cause stroke. Small vessel manifest tiny injuries deep in brain that amass over time leading to gradual cognitive decline, often with frontal lobe-like symptoms causing stroke. Mild or Major Parkinson’s disease: Collection of α-Synuclein protein (Lewy Bodies) in upper brainstem (SubstantiaNigra). Lewy bodies’ changes nerve cell structures leading to tremor, rigidity, and slowed movement are observed. In 25% of cases, Lewy bodies spread to cortical areas (especially frontal) and to Basal Nucleus to cause cognitive decline. Etiology is unknown. Mild or Major Lewy Body Disease; Lewy bodies originates in cortical areas, often also features β-Amyloid plaques as seen in Alzheimer’s disease. Mild or Major Fronto-temporal Disease: Collections of tangled Tau protein (Pick bodies) in anterior frontal and temporal lobes are found where Brain contraction occurs in affected areas, Pick’s Disease (DSM-IV) is just one form of FTD. Slightly more common in female. A mild and major neurocognitive disorder depends on level of functionality. Every ones thoughts are culmination of positive and negative feelings. The investigation which investigates on strength aspects enables the women carers of persons with neurocognitive disorder to focus on positive aspects like hope, wellbeing, happiness, resilience etc. The psychological competencies are building blocks of a life with positive outlook in the face despair and burden. Positive psychology has fosters a study of flourishing, positive emotional dynamics, and character strengths and virtues which are three mandatory of carers existence and development which social work also mimics .The emotional dynamics has to be stabilized by positive and negative emotions Piedmont Ralph (2012). A psychological competency improves the internal resources inculcated in the individual carer which in turn improves the quality of life. Resilience is process of adapting trauma, adversity
treads or tragedy. Promotion of resilience can be through trainings otherwise by capacity programmes module based intervention can be administered for family carers.

Mastering life challenges or curbing crisis and returning to pre-crisis are termed as resilience in other words psychological competencies. The carer can be resilient by being optimistic, having healthy social network and support from family, friends and significant others, by being adoptable and flexible through problem having skills, must have will power or staunch attitude to accomplish care work skillfully, self-control in changing adverse situation, carer must be have planned, organized and focused goal and execution. Self-confidence and belief of accomplishing care task, Entertaining humor while frustrations in care labour engulf, monitoring the emotions and dealing with it. Resilient person can be identified through good mental ability, enhanced support system, responding external changes through positivity.). Sue jones et al (2017) found the respondents had more psychosocial competence in terms of resilience than stress.

2. Research methods

The aim of this scientific paper is to understand the level of psychological competencies of women informal careers of persons with late onset neurocognitive disorder (NCD) in rural Trivandrum. The Objectives of the study are: To describe the socio-demographic characteristics of the respondents, to assess the level of psychological competency of the respondents, to find out the significant relationship between age of the respondents and psychological competency, to find out the significant mean difference between the migrants status in the family and psychological competency and to find out the significant mean variance among religion of the respondents and psychological competency. The Hypotheses of the study are: There is a significant relationship between age of the respondents and psychological competency, there is a significant mean variance among religion of the respondents and psychological competency.

The researcher has adopted descriptive study design. The researcher has attempted to describe the women informal carers’ psychological competency in care labour. The research setting is rural Trivandrum. The universe of the study consist of two hundred and seven women carers of persons with late onset neurocognitive disorders, registered in outreach programme of District Mental Health Programme catering to the needs of the rural population. The simple random sampling technique using lottery method was adopted. The researcher has used morgons sample size calculator and espoused one hundred and thirty five samples as sample size for investigation. Pretest was conducted. Semi-structured questions were added as socio-demographic questions in the schedule. The standardized tool was used by the researcher was resilience scale developed by Gail M. Wagnild (2003) was administered with 25 items. The ethical clearance was received from District Mental Health Programme, Mental Health Centre at Oolampara, Trivananthapuram, Kerala. The written informed consent was received. The researcher had used in-home interview technique in the community to collect the data. Statistical analysis were carried out using SPSS Software package and following test like Karl Pearson’s correlation, Z-test and one way annova were performed and results were extracted.

3. Results

Findings related to socio-demographic characteristics of the respondents

While analyzing, It was found that age of the respondents represents less than one third of the respondents (24.4 percent) belong to below 40 years of age, more than one third of the respondents (31.7 percent) belong to 41-50 years of age, one fourth (25.9 percent) belong to 51-60 years of age and respondents, Less than one fourth of the respondents (20percent) belong to above 60 years of age. With regard to religion of respondents, more than one third of the respondents (29.6 percent) belong to Hindu religion, more than third of the respondents (39.3 percent) belong to Muslim religion and more than one fourth of the respondents (29.3 percent) belong to Christian religion. It was found on the basis of occurrence to migration that, less than half of the respondents have migrants (45.2 percent) in the families and more than half of the respondents have no migrants (54.8 percent) in their families.

Findings related to key variable in the study

It is evident from above table that less than one fourth (30.4 percent) of the respondents have low Psychological competency, more than half (51.9 percent) of the respondents have moderate psychological competency and one fourth (25.2 percent) of the respondents have high psychological competency.

Findings related to hypothesis formulated in the study:

Research Hypothesis-I

- There is a significant relationship between age of the respondents and psychological competency
- Null Hypothesis for research hypothesis:
There is no significant relationship between age of the respondents and psychological competency

Statistical Inference:

Karl person co-efficient of correlation test was applied to test the above research hypothesis. It has been inferred that there is high level of significant relationship between age of the respondents and psychosocial competence. Hence null hypothesis is rejected.

Research Hypothesis-2

There is a significant difference between migrant status in the family and psychological competency

Null Hypothesis for research hypothesis:

There is no significant difference between migration status in the family and psychological competency,

Statistical Inference:

Z-test was applied to test the above research hypothesis. It has been inferred that there is no significant difference between migration status in the family and psychosocial competence. Hence Null hypothesis is accepted.

Research Hypothesis-3

There is a significant variance among religion of the respondents and psychological competency

Null Hypothesis for research hypothesis:

There is no significant variance among religion of the respondents and psychological competency

Statistical Inference:

One way analysis of variance was applied to test the research hypothesis. It has been inferred that there is no significant variance among religion of the respondents and psychological competency. Hence null hypothesis accepted.

4. Discussion and Conclusion

Discussion

Care is a growing industry in the present times. The importance of care is emerging in recent years is concern empirical investigation today. In this study the most of the participants are female careers has moderate psychological competency. This moderate level of competency has to be improved in the female carers. The female carer has to be supported by stake holders to develop the intrinsic resources of carers. The carers have to be supported with psychological aid when involved in care labour. Psychological competence plays vital role in sustainable development of informal carers. Fernández-Lansac V, CrespoLópez M, Cáceres R et al., (2012) found that study supports that carers had moderate level of resilience. The significant Pearson’s correlation coefficient value r=-.264 confirms that direction of the relationship is weak negative relationship between Care recipient psychosocial competency and age of the respondents. The correlation value -264 denotes 26.4 percentage of relationship. When the Care recipient age increases the psychosocial competency increases. It may be reason that experience and exposure is leading to resilient being. Resilience is the armor of life to the female carers in difficult circumstance which is positive sign of development. In terms of resilience, the calculated value is 2.921 is lesser than the table value 2.99. In addition, the mean value obtained in relevance to mean scores Christians (119.10) has more resilience than Hindus (116.80) and Muslim (106.00).

The small difference may be due to the praise, worship, forgiveness and clinging on God and promises may increase resilience in Christian than other religion carers. Religious beliefs can emancipate female carers from care challenges in small difference but religion cannot bring more changes in the resilience in female carer. There are many other intrinsic and extrinsic factors which play significant role in building up resilience during care labour of female informal carers. The calculated value is 2.819 is greater than and the table value is 2.66. When mean scores of the respondents whose has migrants in their family has more resilience than family the psychosocial competencies are slightly more in families with no migrants in the family. The presence of individual in the family or absence of person does not determine resilience there are many factors which develop resilience in families with migrants. Migration status does not make more difference in psychological competence among female informal carers (family carers known as primary carer). There are many other means to develop resilience of the carer. So differences there no differences in terms of migration status in the family of primary carers.

Conclusion

It is high time to recognize the emotional hunger and thirst of the informal carers and mediating with them. They are hidden carers in the fringes of the society, where skills and psychological competency care has to be increased to empower them. The measures which can be taken are the female informal carers have to use the provision of respite care in rural setting by sensitizing the need. Community gathering promoting healthy
interaction in rural areas in the cool of the day can be encouraged. Recreational therapy, yoga, prayer and worship, diversional therapy, Helpline, awareness campaign on ageing, training for informal carers can be conducted in every panchayat and telephonic counseling be fostered for informal carers provides as psychological aid for women informal carers in rural community also tribal for promoting resilience rather than being a prey of psychological distress.

Acknowledgement
I thank my ethical committee members headed by Dr. Kieran for their knowledge support and guidance. I from the depth of my heart thank ICSSR Doctoral Fellowship for extending financial assistance. Finally I thank my respondents who gave their response.

References
HIV-AIDS Awareness among Female Sex Workers”-Descriptive Study

A. Sakthivel Pille*
Dr. S. Sasikala**

Abstract
HIV (Human Immunodeficiency Virus) is a virus that attacks the immune system, the body's natural defence system. Without a strong immune system, the body has trouble fighting off disease. The very high risk groups who all are prone to be infected with HIV-AIDS virus are LGBT, truck drivers and female sex workers. Among those the research has selected female sex workers for the study. Female sex workers are the persons who are engaged in the sexual activities. Some sex workers are salaried to engage in sexually explicit behaviour which involves varying degrees of physical contact with clients. In addition, choosing to use the term sex worker rather than prostitute shows ownership over the individual’s career choice. Describing someone as a sex worker recognizes that the individual may have many different sides, and are not necessarily defined by their job. In this study the researcher used descriptive research design to study the female sex workers, regarding the awareness of HIV-AIDS and safe sex practices. The required data was collected through questionnaire method.

Keywords: Sex workers, Prostitute, HIV-AIDS, Clients.

1. Introduction
A sex worker is a person who is engaged in the sex industry. The term is used in reference to all those in all areas of the sex industry including those who provide direct sexual services as well as the staff of such industries. Some sex workers are paid to engage in sex acts or sexually explicit behaviour which involves varying degrees of physical contact with client’s pornography models and actors engage in sexually explicit behaviour which is filmed or photographed. Phone sex operators have sexually-oriented conversations with clients, and do additive sexual role play.

Using the term sex worker rather than prostitute also allows more members of the sex industry to be represented and helps ensure that individuals who are actually prostitutes are not singled out and associated with the negative connotations of "prostitute." In addition, choosing to use the term sex worker rather than prostitute shows ownership over the individual’s career choice. Some argue that those who prefer the term sex worker wish to separate their occupation from their person.

Types of Commercial/Female Sex Workers
“Cage Girls” In “Pillow Houses”: The worst brothels are called “pillow houses”, where prostitutes are separated by cloth dividers in tiny rooms. Visitors are charged and strict vigil is maintained to discourage prostitutes from talking to their customers. Payment is made to the brothel owner who keeps the money, and allows as many as forty visitors a day during “peak” season. Escape is never an option because there is a nexus between criminal gangs, pimps, brothel owners and the local police who share the major part of the CSW’s income.

Call Girls: Call girls are commercial sex workers who are part-timers and are usually more educated, carry cell-phones, and are well groomed and cannot be compared to those living in brothels. They have more mobility, earn higher incomes and have some freedom in choosing their clients who are mostly from the middle and upper classes of society.

Escort girls: The costliest end of the supply chain operates with high-class escort girls recruited from women’s colleges and from India’s burgeoning fashion and film industries. These CSWs offer services for large sums of money and usually operate by way of a discreet introduction service.

Devadasi system: Devadasi tradition or “sacred prostitution” is a form of sex work that dates back several centuries with the ritual found in written records even in the 12th century. The tradition involves a religious rite, in which girls and women are dedicated, through marriage, to different gods and goddesses. It is seen now as a ruse to do temple duties, which mainly involve providing sexual services to priests and patrons.
of the temples. Though abolished now as illegal, the practice continues in areas in Maharashtra, Karnataka and Andhra Pradesh to this day.

Child Prostitution: The ugliest face of the sex trade in many Asian countries is child prostitution. A 2004 UNICEF report estimates 500,000 child sex workers in India alone. Given the phenomenal increase in sex tourism, poor families are tricked into selling their children to such work. Their family members thrust sometimes girl children who are victims of incest into this trade.

Causation of prostitution in India

➢ Economic causes: Through the economic compulsions constitute the major factor in the causation of prostitution; it is by no means the only and exclusive causes of the phenomenon. It is not the cause that every prostitute accepts money for her services or that all prostitutes hail from indigent homes.

➢ Poverty: As referred to earlier, the poverty is the main economic factor responsible for prostitution. A woman who is unable to get any gainful employment and who has no supporter must either starve to death or earn her livelihood through prostitution.

➢ Under-age employment: Many females have to work in hotels, officers, industry and shop at immature age, at this impressionable age they are easily misled by lust-seekers.

➢ Bad working conditions: In India many women are able to get employment through intermediaries. These intermediaries and agents recruit women and keep them at their mercy whenever opportunity offers itself they exploit it fully and often succeed in receiving sexual bribe.

➢ Immoral Traffic in Children Women: Many tender girls are kidnapped from their homes by unscrupulous gangsters. They properly train them in the art of prostitution and when these girls mature they are sold.

➢ The Social Causes: The social causes are extremely important factors in encouraging and promoting prostitution. The social factors are comprised of: i. family causes, ii. Marital factors, iii. Bad neighbourhood and IV. Illegitimate motherhood.

Review of literature

BidhubhusanMahapatra (2018) did a descriptive study on “Measuring vulnerability among female sex workers in India using a multidimensional framework”. In this study the author revealed that measuring vulnerability and identifying determinants of vulnerability are key to designing interventions for marginalized groups like sex workers. The study found that 55% of FSWs were multi-dimensionally vulnerable with 48% of intensity in vulnerability. The overall value of multidimensional vulnerability index was 0.265. FSWs in Maharashtra were most vulnerable (82%). Lack of financial security contributed mostly to FSWs’ vulnerability. Findings suggest that structural, social and financial vulnerabilities of FSWs need to be addressed concurrently.

G.Ragesh (2015) did a study on “Human Rights Violations against Female Sex Workers by Police Personnel”. In this study the author mentioned that after enacting the Immoral Traffic (Prevention) Act 1956 in India, the vulnerability of female sex workers (FSWs) to exploitation, violence and harassment by police were aggravated. The current study made an effort to understand the nature of human rights violations faced by FSWs by the police personnel. The results showed that FSWs have undergone serious human rights violations in different forms from police authorities and it has an impact in their mental health.

Subadrapanchanadeswaran (2010) did a descriptive study among “Abused Female Sex Workers in India”. In this study the author presented the profiles of abused female sex workers (FSWs) in Chennai, India. Of 100 abused FSWs surveyed using a structured questionnaire, severe forms of violence by intimate partners were reported by most (98%) respondents. Of the total sample, 76% experienced violence by clients. Sexual coercion experiences of the FSWs included verbal threats (77%) and physical force (87%) by intimate partners and forced unwanted sexual acts (73%) by clients. While 39% of the women consumed alcohol before meeting a client, 26% reported that their drunkenness was a trigger for violence by clients. The findings suggest that there is an urgent need to integrate services, along with public-health interventions among FSWs to protect them from violence. Recognition of multiple identities of women in the contexts of intimate relationships versus sex work is vital in helping women to stay safe from adverse effects on health.

2. Methodology

Aim of the study is to assess the ‘HIV-AIDS’ awareness among Female sex workers

Objectives

● To know about the socio-demographic profile of the respondents
● To study about the attitude of female sex workers towards HIV-AIDS and Condom usage.
● To give suitable suggestions for female sex workers.
Research Design and Sample
Descriptive research design was employed by the researcher to study the female sex workers in Tiruchirappalli district. Tiruchirappalli district has been divided into three blocks namely - Tiruchirappalli, Tiruverambur and Lalgudi. The researcher selected Tiruchirappalli block and used convenient sampling method (Non-Probability sampling) and the sample size is 25.

Tools of Data Collection
The researcher has used the self-prepared questionnaire to study the female sex workers awareness of HIV/AIDS and safe sex practices. The required data was collected by questionnaire method.

3 Analysis and major findings
Table 1. Distribution of the respondents on the basis of personal details

<table>
<thead>
<tr>
<th>Particulars</th>
<th>Frequency</th>
<th>Percentage (%)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Age</td>
<td></td>
<td></td>
</tr>
<tr>
<td>20-30</td>
<td>18</td>
<td>72%</td>
</tr>
<tr>
<td>30-40</td>
<td>05</td>
<td>20%</td>
</tr>
<tr>
<td>Less than 40</td>
<td>02</td>
<td>8%</td>
</tr>
<tr>
<td>Educational Status</td>
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<td></td>
</tr>
<tr>
<td>Illiterate</td>
<td>03</td>
<td>12%</td>
</tr>
<tr>
<td>Primary level</td>
<td>03</td>
<td>12%</td>
</tr>
<tr>
<td>Higher secondary level</td>
<td>19</td>
<td>76%</td>
</tr>
<tr>
<td>Family Status</td>
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<td></td>
</tr>
<tr>
<td>Nuclear family</td>
<td>20</td>
<td>80%</td>
</tr>
<tr>
<td>Alone</td>
<td>05</td>
<td>20%</td>
</tr>
<tr>
<td>Domicile</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Urban</td>
<td>16</td>
<td>64%</td>
</tr>
<tr>
<td>Rural</td>
<td>09</td>
<td>36%</td>
</tr>
<tr>
<td>Marital Status</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Married</td>
<td>20</td>
<td>80%</td>
</tr>
<tr>
<td>Widow</td>
<td>02</td>
<td>8%</td>
</tr>
<tr>
<td>Separated</td>
<td>03</td>
<td>12%</td>
</tr>
</tbody>
</table>

More than half of the respondents (72%) belong to the age group of 20-30 years. Majority of the respondents (76%) have pursued higher studies. Vast majority of the respondents (80%) are from nuclear family background. More than half of the respondents (64%) are from urban area. Vast majority of the respondents (80%) are married.

Table 2. Distribution of the respondents on the basis of Work nature

<table>
<thead>
<tr>
<th>Particulars</th>
<th>Frequency</th>
<th>Percentage (%)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Work type</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Full time</td>
<td>05</td>
<td>20%</td>
</tr>
<tr>
<td>Part time</td>
<td>20</td>
<td>80%</td>
</tr>
<tr>
<td>Work place</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Brothel</td>
<td>04</td>
<td>16%</td>
</tr>
<tr>
<td>Home</td>
<td>19</td>
<td>76%</td>
</tr>
<tr>
<td>Lodge</td>
<td>02</td>
<td>8%</td>
</tr>
<tr>
<td>Travel to other place</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Yes</td>
<td>18</td>
<td>72%</td>
</tr>
<tr>
<td>No</td>
<td>07</td>
<td>28%</td>
</tr>
<tr>
<td>Customer age</td>
<td></td>
<td></td>
</tr>
<tr>
<td>26-40</td>
<td>21</td>
<td>84%</td>
</tr>
<tr>
<td>41-60</td>
<td>04</td>
<td>16%</td>
</tr>
</tbody>
</table>
Vast majority of the respondents (80%) do their business as part time. Majority of the respondents (76%) do their business at home. Majority of the respondents (72%) go to other cities for business. Vast majority of the respondents (84%) attends the customer between the age group 26-40 year.

Table 3. Distribution of the respondents based on the awareness of HIV/AIDS

<table>
<thead>
<tr>
<th>Particulars</th>
<th>Yes</th>
<th>No</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Frequency</td>
<td>Percentage (%)</td>
</tr>
<tr>
<td>HIV spreads through Blood</td>
<td>23</td>
<td>92%</td>
</tr>
<tr>
<td>HIV spreads through mosquito bite</td>
<td>00</td>
<td>8%</td>
</tr>
<tr>
<td>HIV is treatable</td>
<td>02</td>
<td>8%</td>
</tr>
<tr>
<td>Spread from infected mother</td>
<td>20</td>
<td>80%</td>
</tr>
<tr>
<td>Spread through used injection needles</td>
<td>21</td>
<td>84%</td>
</tr>
</tbody>
</table>

Vast majority of the respondents (92%) spreads through blood. All the respondents (100%) know that HIV/AIDS doesn’t spread by mosquito bites. Vast majority of the respondents (92%) know that HIV/AIDS is not treatable. Majority of the respondents (80%) know that HIV/AIDS can spread through infected mother. Vast majority of the respondents (84%) know that HIV/AIDS can spread by used injection needle. Vast majority of the respondents (88%) know that HIV is a Virus. All the respondents (100%) know that HIV spreads through unprotected sex. Vast majority of the respondents (92%) thinks that AIDS is a disease. Vast majority of the respondents (92%) know that HIV/AIDS can be identified by blood test. Vast majority of the respondents (88%) know that ART is treatment. Vast majority of the respondents (80%) goes to Regular Medical Check-up. Majority of the respondents (72%) know that STI is a sexual infection. More than half of the respondents (60%) are infected by STI. Majority of the respondents (72%) thinks that awareness of HIV/AIDS must be given to FSWs.

Table 4. Distribution of the respondents on the basis of HIV/AIDS Status/Condom usage/Reproductive health

<table>
<thead>
<tr>
<th>Particulars</th>
<th>Frequency</th>
<th>Percentage (%)</th>
</tr>
</thead>
<tbody>
<tr>
<td>HIV-AIDS status</td>
<td>15</td>
<td>60%</td>
</tr>
<tr>
<td>Uninfected</td>
<td>10</td>
<td>40%</td>
</tr>
<tr>
<td>Condom usage by customers</td>
<td>18</td>
<td>72%</td>
</tr>
<tr>
<td>NO</td>
<td>07</td>
<td>28%</td>
</tr>
<tr>
<td>If No, what will you do</td>
<td>20</td>
<td>80%</td>
</tr>
<tr>
<td>Avoid sex</td>
<td>05</td>
<td>20%</td>
</tr>
<tr>
<td>Extra charge</td>
<td>20</td>
<td>80%</td>
</tr>
<tr>
<td>Avoid pregnancy</td>
<td>05</td>
<td>20%</td>
</tr>
<tr>
<td>Yes</td>
<td>20</td>
<td>80%</td>
</tr>
<tr>
<td>No</td>
<td>05</td>
<td>20%</td>
</tr>
<tr>
<td>If yes, which method</td>
<td>02</td>
<td>8%</td>
</tr>
<tr>
<td>Female condom</td>
<td>03</td>
<td>12%</td>
</tr>
<tr>
<td>Oral tablets</td>
<td>20</td>
<td>80%</td>
</tr>
<tr>
<td>Male condom</td>
<td>15</td>
<td>60%</td>
</tr>
<tr>
<td>Undergone abortion</td>
<td>10</td>
<td>40%</td>
</tr>
</tbody>
</table>

More than half of the respondents (60%) are infected by HIV. Majority of the respondent’s (72%) customer use condom. Vast majority of the respondents (80%) does not have sex if the client do not use condom. All the respondents (100%) know that condom is an instrument for safe sex practice. Vast majority of the respondents (84%) use one condom at a time. Vast majority of the respondents (96%) have children. Vast majority of the respondents (80%) are using male condom for avoiding pregnancy. More than of the respondents (60%) have undergone abortion. Vast majority of the respondents (80%) have some general health issues.

Findings related to Socio-demographic details:

➢ More than half of the respondents (72%) belong to the age group of 20-30 years.
➢ Majority of the respondents (76%) have pursued higher studies.
Vast majority of the respondents (80%) are from nuclear family background.
More than half of the respondents (64%) are from urban area.
Vast majority of the respondents (80%) are married.

Findings related to Work nature:
Vast majority of the respondents (80%) do their business as part time.
Majority of the respondents (76%) do their business at home.
Majority of the respondents (72%) go to other cities for business.
Vast majority of the respondents (84%) attends the customer between the age group 26-40 years.

Findings related to HIV/AIDS Awareness:
More than half of the respondents (60%) are infected by HIV.
Vast majority of the respondents (92%) spreads through blood.
Vast majority of the respondents (92%) know that HIV/AIDS is not treatable.
Majority of the respondents (80%) know that HIV/AIDS can spread through infected mother.
Vast majority of the respondents (84%) know that HIV/AIDS can spread by used injection needle.
Vast majority of the respondents (88%) know that HIV is a Virus.
Vast majority of the respondents (92%) thinks that AIDS is a disease.
Vast majority of the respondents (92%) know that HIV/AIDS can be identified by blood test.
Vast majority of the respondents (88%) know that ART is treatment.
Majority of the respondents (72%) know that STI is a sexual infection.
More than half of the respondents (60%) are not infected by STI.

Findings related to Condom usage:
Majority of the respondent’s customer (72%) use condom.
Vast majority of the respondents (80%) does not have sex if the client do not use condom.
All the respondents (100%) know that condom is an instrument for safe sex practice.
Vast majority of the respondents (84%) use one condom at a time.

Findings related to Reproductive health:
Vast majority of the respondents (96%) have children.
Vast majority of the respondents (80%) are using male condom for avoiding pregnancy.
More than of the respondents (60%) have undergone abortion.
Vast majority of the respondents (80%) have some general health issues.

Limitations of the Study:
The area of the study is restricted only to Tiruchirappalli block. Hence the result cannot be generalized.
The sample size is comparatively less for this study.

4. Suggestions and conclusion
Sex workers are legally marginalized by a system which has in essence criminalized prostitution. Prostitution is currently a contentious issue in India and the number of prostitutes has doubled in the last decade. In this study the researcher concludes that, majority of the respondents have the basic knowledge of HIV/AIDS and also aware about the ways of transmission of the virus. More than half of the respondents know the importance of condoms for safe sexual practice and likewise more than half of the respondents regrets to be a sex worker. Though the samples are aware about HIV/AIDS but still we can’t generalize the fact because of the small number of samples. The government have to spread more awareness and allocate more funds towards HIV/AIDS awareness to the local community. The government can provide them micro credit/loan facilities to start an own business. In this process NGOs plays a major role and through NGOs, government can succeed in this mission. NGOs can provide frequent counselling and skill training programmes to bring them out from that business.
References

Social Work Interventions for Children with Attention Deficit Hyperactivity Disorder (ADHD) in Educational Settings

Dr. S. Prescila Sharon*

Abstract

Attention-deficit hyperactivity disorder (ADHD) is a condition marked by a constant display of inattention and/or hyperactivity-impulsivity that hampers with functioning or development. ADHD symptoms can modify over time as a person ages. In young children with ADHD, hyperactivity-impulsivity is the most leading symptom. As a child reaches elementary school, the symptom of inattentiveness may become more noticeable and cause the child to struggle academically. The management of ADHD usually involves counseling or medications either alone or in combination. While treatment may mend long-term outcomes, it does not get rid of negative outcomes entirely. ADHD drugs also improve tenacity and task performance in children with ADHD. When a child has ADHD, many people must come together to ensure that the child has coordinated care. The staple ADHD team is made up of 1. The Parent 2. The Child's Teacher 3. The Child’s Physician and 4. Social workers/Psychologists to provide guidance counseling. As school children with ADHD are a varied group, there is no specific intervention (or set of interventions) that will improve the classroom functioning of all of these students. Thus, it is recommended that classroom modifications, as well as modifications in the home environment to be tailored to cater the unique needs of each student. This can be achieved through the joint undertaking of the parent, teacher and social worker. Thus the present paper has identified the role of these people in modifying the lives of ADHD children in educational settings, as well as, their contribution in influencing the lives of these children are discussed in detail.

Keywords: Attention deficit hyperactivity disorder (ADHD); Teachers, Social workers, Interventions.

1. Introduction

Attention deficit hyperactivity disorder (ADHD), a childhood disorder with an early onset, is characterized by hyperactivity, attention problems and impulsivity (American Psychiatric Association, 2013). The pervasiveness of this disorder in school age children is reported to be 3-5%. Attention-deficit/hyperactivity disorder (ADHD) is a protracted condition that affects millions of children and often endures into adulthood. ADHD includes a mixture of persistent problems, such as difficulty with attention, hyperactivity and impulsive behavior.

Children with ADHD also may struggle with low self-esteem, disturbed relationships and poor performance in school. Symptoms sometimes lessen with age. However, some people never completely outgrow their ADHD symptoms. But they can learn strategies to be successful. While treatment won't cure ADHD, it can help a great deal with symptoms. Treatment usually involves medications and behavioral interventions. Early diagnosis and treatment can make a big discrepancy in outcome.

Characteristics of ADHD

Major characteristics of ADHD include a persistent pattern of inattention and hyperactivity which perseveres for 6 months or longer and is developmentally tactless for the child’s age level. Symptoms will interfere with functioning in several environments and be present before age 12. The disorder is classified into two major types, inattentive and hyperactive/impulsive, with a combined type when a child exhibits both inattention and hyperactivity simultaneously. Inattentive ADHD is categorised by being off task, lacking constant focus, and being disorganized. According to (Barkley, DuPaul & McMurray, 1990) Hyperactive ADHD is categorized by excessive gross or fine motor activity such as talkativeness, fidgeting, and tapping of hands and/or feet, while impulsivity is categorized as an inability to control impulses that may result in extremely harmful situations. The signs and symptoms of ADHD often rise between ages 3 and 6; however, many children may not be recognized until they enter school and teachers notice the behavior patterns associated with the disorder. Diagnosis of ADHD is chiefly conducted through observation and behavioral assessments accomplished by parents, teachers, physicians, and mental health professionals.

Helping ADHD children in an Educational setting

Affecting three to five percent of the population, Attention Deficit /Hyperactivity Disorder (ADHD) is one of the most common of the childhood behavior disorders. A study by Erk, 2000) suggests that linked with this disorder's core symptoms of inattention, hyperactivity and impulsivity are a variety of disruptive

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classroom behaviors (e.g., calling out, leaving seat, interrupting activities, etc.). Therefore, it is not surprising that these students are at possibility for school failure. ADHD is a complex disorder, and treating it is also complex. When a child has ADHD, many people need to come together to confirm that the child has coordinated care.

The staple ADHD team is made up of:

- The Parent
- The Child’s Teacher
- The Child’s Physician
- Social workers/Psychologists to provide guidance, counseling

Role of Parents

Parents have several roles in helping their child with ADHD:

Parents should be the supporter for their child. This includes observing early signs of ADHD, getting a proper assessment, seeing that a treatment plan is in place, and observing their child’s progress. Parents can generate a supportive, structured environment and aid their child cope with school, homework, and social communication.

Finally, parents are the most vital basis of support, comfort, and security for their children. Children with ADHD often face a lot of criticism and distress. If a child with ADHD is made to feel self-assured and worthy, she/he will be in a better situation to cope with the challenges she faces.

Parents can follow the following tactics to help the child:

1. Admit the fact that their child — like all children — is imperfect.
2. Don’t believe all the “bad news” about the child.
3. Don’t overrate the importance of medication.
4. Make sure you know the variance between discipline and punishment.
5. Never punish a child for behavior that he is incapable to control.
6. Stop accusing other people for your child’s difficulties.
7. Be careful to distinct the deed from the doer.
8. Don’t be too quick to say “no.”
9. Pay more responsiveness to your child’s positive behavior.
10. Learn to anticipate potentially explosive situations.
11. Be a good role model.
12. Pursue help from others.

Role of Teachers

Children with ADHD are at peril academically and socially, and they can be tough to manage in the classroom. Interventions to fix those difficulties are desirable and since teachers work with these children for quite a few hours each day, they are in a situation to be able to implement strategies in the context of the school environment. According to (Herr, 2009) teacher-led educational interventions chiefly consist of handling academic events or adapting the physical environment. Regardless of the how’s and why’s of ADHD, as teachers it is important that they support the students on their academic journey. The following are few strategies to follow to upkeep parents and students who are affected by ADHD.

1. The Department for Children, Schools and Families should ponder providing more education to trainee teachers about ADHD by working with the Training and Development Agency for Schools (TDA) and suitable health service organisations to produce training programmes and guidance for supporting children with ADHD.
2. Teachers who have received training about ADHD and its management should afford behavioural interventions in the classroom to help children and young people with ADHD.
3. Seat the student away from doors and windows that may divert him or her. The student may work best nearby the teacher.
4. When possible, teachers should provide academic tutoring to these students with ADHD in the morning. Evidence commends that on-task behaviors of a student with ADHD get worse over the course of a day.
5. Provide regular breaks for the student to get a drink or walk around the room.
6. Allow the student with ADHD to run tasks or have them be in charge of doing classroom errands.
7. Teachers can mark the schedule of the day on the student’s desk and allow him or her to cross off each item as it is accomplished.
8. Provide an assignment book for the student to keep track of homework and daily work. Encourage this book to be signed by parents so parents know what is going on in the classroom. Converse with the parent as much as possible.

9. Permit the student with ADHD to work in a quiet zone within the classroom. This should be a place in the room that is noiseless and free from visual stimulation.

10. When giving instructions, make eye contact with the student and be as brief as possible.

11. Provide precise, well-defined rules to the student with ADHD. Write these rules down and tape them to the student’s desk. These rules should have vibrant consequences.

12. Most importantly, students need guidance, empathy and understanding from their parents and teachers as they route the path of dealing with ADHD. It isn’t their mistake that they have been diagnosed with ADHD.

Physicians and other health care professionals

A family physician, paediatrician, or child psychiatrist will be involved in detecting ADHD and prescribing medication. He/She may be the child’s regular doctor or another physician. Medications used include stimulants, atomoxetine, alpha-2 adrenergic receptor agonists, and sometimes antidepressants. While medical treatment may improve long-term outcomes, it does not get rid of negative outcomes entirely (Hoffman, 2009).

Role of the Social worker

Professional counselors in community agency and school settings may help child clients with ADHD and their families through a array of interventions. Though academic impairment is often addressed directly by teachers, professional school counselors may precisely help children learn to cope with social damages that occur with ADHD in order to treat the full range of symptoms (Bowley, Walther, 1992). Investigations on counseling children with ADHD suggests that action-oriented tactics are vital and that play therapy may be effective when working with young children surviving with ADHD symptoms. Although there are many categories of psychological therapies the major types used to treat ADHD in an educational setting is:

Cognitive Behavior Therapy (CBT) - CBT techniques have been comprehensively used with the aim of helping to develop motor behaviour, inattention and impulsivity. CBT helps children realize links between thoughts, feelings and behaviours and how these may result in unhelpful, incongruous or maladaptive consequences. A second component of the therapy is learning to change these thoughts, feelings and behaviours to yield more desirable outcomes (Shillingford, Lambie, & Walter, 2007).

Behaviour therapy

The foremost technique involves the use of rewards or reinforcers that are judged likely to encourage the child with ADHD to implement targeted alterations in motor, impulse or attentional control. This may involve solid rewards such as extra time for recreational and leisure activities or the means to obtain items that the child values. Systems using ‘tokens’ (such as stars, chips, marbles, and so on) may be the rewards for younger children, whereas for older children tokens may be swapped for items of value to them. Added type of reward is social approval such as praise or achievement certificates and this may also comprise self-praise.

The second utmost common technique is ‘time out’ which involves the children being placed away from the attention of others for a set period during which time they are anticipated to be quiet and co-operative, otherwise the procedure is applied again. This specific approach is helpful where it is felt that inapt, overactive or impulsive behaviour is being maintained by the attention of others such as parents, siblings or peers.

Teacher Training

School counselors can offer teachers with strategies related to those taught to parents to surge apt behavior in the classroom. Providing teachers with evidenced-based classroom management strategies helps the teacher in aiding a child with ADHD manage his/her behavior in the classroom setting. Token systems and reaction cost systems are evidenced-based practices that are operative with children who have ADHD. Token systems that reward positive behaviour by noting when the child is engaging in appropriate behavior are an actual evidence-based practice for children with ADHD (Kamali, Looyeh, 2013). The school counselor can work with the teacher to improve small goals for the student to meet and with parents to regulate appropriate rewards.

Parent training

Parent-effectiveness training intents and purposes, a behaviour therapy intervention, in that it imparts the parents to use behaviour therapy techniques with their child. The main purposes of parent-training programmes are to impart the principles of child behaviour management, surge parental competence and
confident in raising children and to increase the parent/carer-child relationship by using good communication and positive attention to help the child’s development.

Social skills training

Social skills training teaches the micro skills of social interaction such as eye contact, smiling and body posture. Children who have ADHD often present with challenging family relationships and may have deprived social skills and peer relationships. Social skills are described as the behaviours and skills required to engage in developing and maintaining constructive social relationships. Social skills training practises techniques from cognitive and behavioural approaches and is conducted within groups (Webb, Myrick, 2003). In addition to social skills training, problem-solving tactics have been established and are concerned with the child and young person’s capability to self-regulate (the capacity of the child and young person to start, delay, modify or modulate the amount or intensity of a thought, emotion, behaviour or psychological response and handle with stress.

Conflict Resolution

Children with ADHD get into relational conflict and rejection at home, school and other social environments as they are inept to be attentive, being off task, and difficulty controlling talking or other impulses. Teachers redirecting students back to discrete work, parents repeating instructions, and peers expressing different ideas may be extremely challenging for a child with ADHD and lead to conflict and possibly aggressive behaviour. Thus, helping children with ADHD develop conflict resolution skills and strategies may help lessen the interpersonal difficulties that they frequently experience. Peer mediation programs in school settings have revealed a high degree of effectiveness in helping children resolve conflicts with peers, teachers, and parents. Elementary and secondary children who do not obtain training in peer mediation programs recurrently fail to resolve interpersonal conflicts and further strain their social relationships. Nevertheless, after peer mediation training, children learn to successfully employ negotiation and mediation skills and have more fruitful outcomes in their relationships with others. Similarly, helping children with ADHD and their parents attain aids to resolve disputes in the home setting can be especially important to highlight conflict resolution skills in multiple environments. Finally, assisting children with ADHD develop conflict resolution skills helps lessen social isolation and improves their self-esteem and a sense of self-efficacy.

Motivation and Self-Efficacy

Motivation apprehensions affect children with ADHD in a variety of environments. In school, children with ADHD regularly do not complete assignments, submit messy or incomplete assignments, which adults may infer as being due to low motivation. Children with ADHD likewise generally struggle to complete activities such as schoolwork or homework that require continuous mental focus and attention and they may avoid them altogether. In the home atmosphere, motivational challenges for children with ADHD include following through household chores, finishing games or other activities, and habitually losing things. Children with ADHD often struggle with self-efficacy distresses that may result from recurrent experiences of failure and rejection in school and at home. Though motivation is considered part of the primary energy directed towards an activity, it is the child’s feelings of potential success (i.e., self-efficacy) that defines how long he or she will continue to utilise energy on the activity (Bandura, 1977). Professional counselors can deal with motivation and self-efficacy by helping children with ADHD to identify and stimulate strategies to engage in, and successfully complete, activities both at school and at home. In specific, helping these children improve intrinsic motivation through the counselling process is perilous to help children gain confidence in their abilities and desire to try new behaviors (Watts, Cashwell, & Schweiger, 2004). For older children and adolescents, cognitive-behavioral interventions may be of use in helping evaluate self-talk and negative self-statements that may add to low motivation. A child who spontaneously moves from one activity to another might be challenged to scrutinize thoughts that precede the desire to switch activities and come up with different self-statements that will encourage the completion of the initial task.

School counselors need to assess for low self-esteem and challenge clients’ patterns of thinking and behavior that lead to negative feelings about the self (Shillingford-Butler, & Theodore, 2013). In addition, the progress of a strong therapeutic alliance in child-centered play therapy has been recommended as an effective counseling intervention to help improve self-esteem in young children (Portrie-Bethke, Hill, & Bethke, 2009). Finally, providing children with ADHD chances to experience leadership roles during therapeutic group activities can help develop their confidence and self-esteem.

2. Conclusion

Children with ADHD face innumerable of difficulties within the educational setting. Parents and teachers similarly may struggle in providing effective assistance to allow these children to succeed.
Professional school counselors can help deliver comprehensive behavioral support to confirm the lifelong success of children with ADHD. As our knowledge of ADHD grows, it is to be anticipated that so too will the school counselor’s ability to provide effective, evidence-based interventions to support all who are affected by ADHD. As students with ADHD are a varied group, there is no particular intervention (or set of interventions) that will develop the classroom functioning of all of these students. Thus, it is suggested that classroom amendments be tailored to the unique needs of each student. In emerging these modifications it is per-haps best to begin by probing how the classroom environment might be changed to set up the student with ADHD for success. In doing so it is vital to remember that behavior management programs must be consistently applied. Further, it is essential to avoid excessive use of negative concerns (such as reprimands, time-out). In all cost programs, it is significant to avoid the use of impractical standards that result in excessive point or privilege loss. Students must experience success. In other words, it is essential that students be recurrently reinforced for what we want them to do, rather than simply rebuked for what we do not want them to do.

References
Study on Physical and Mental Wellbeing among Persons Living with Breast Cancer

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Dr. A. Relton**

Abstract
Breast cancer is second most common cancer among the female (American institute for cancer research). Worldwide breast cancer incidence has increased by more than 20 percent. Mortality has increased by 14 percent according to the world cancer Research Fund international. The aim of the study is to assess the level of physical and mental wellbeing among person living with breast cancer. In order to achieve the overall aim of the study the following objectives were framed that, to measure the level of mental wellbeing such as stress, depression, anxiety, suicidal thoughts, hopelessness, stress among person living with breast cancer, to measure the level of physical wellbeing such as loss of weight, loss of hair, unhealthy appearance, fatigue, constipation, nausea and other physical inabilities among person living with breast cancer. The research has adopted descriptive research design. A 50 patients living with breast cancer were selected in a private hospital in Tiruchirappalli by adopting convenient sampling method. A self structured questionnaire was prepared by the researchers and was used. The interview method was adopted to collect the data from the respondent.

Keywords: Breast cancer; Physical and Mental; Stress; Depression; Anxiety.

1. Introduction
Breast cancer is the most common invasive cancer in women, and the second main cause of cancer death in women, after lung cancer. Spending huge amounts of money on diagnosis and treatment yet need to know the ongoing impact of diagnosis. “We're trying to determine how we optimize the lives of women diagnosed so they do not become depressed, so their marriage doesn't break down and so the impact on their children is minimized.” Breast cancer treatments today are likely to cause less physical deformity from surgery than a half-century ago, but are more complex and extend over a longer period of time. Women today are often well informed about the details of their cancer diagnosis and prognosis, and are increasingly involved in shared decision-making regarding treatment. Although serious depression is not seen in the majority of breast cancer patients and survivors, many will experience treatment-related distress, fear of recurrence, changes in body image and sexuality, as well as physical toxicities that result from adjuvant therapy. This paper discusses the importance of identifying the physical and psychological health, particularly as it pertains to breast cancer, is well documented. According to studies cited by the American Psychological Association (APA), mortality rates were found to be nearly "26 times higher in patients with depressive symptoms and 39 times higher in patients who had been diagnosed with major depression." Additionally, a "decrease in depression symptoms was associated with longer survival in patients with metastatic breast cancer." Though people respond differently, patients who receive a cancer diagnosis often experience a number of common emotions, including various levels of stress, anxiety, and fear related to uncertainty about what the future holds and self-image. Such emotions have a significant impact upon psychological health.

Review of Literature
Walter et al (1989) define depression as a mood disturbance characterized by feelings of sadness, despair, and discouragement resulting from and normally proportionate to some personal loss or tragedy. It is characterized by exaggerated feelings of sadness, melancholy, dejection, worthlessness, emptiness, and hopelessness that are inappropriate and out of proportion to reality (Mosby’s Medical Dictionary, 1984).

Ajay(1990) states that breast cancer is a rapidly invasive disease that tends to spread outside the confines of the breast itself. This makes it a dreaded disease. Hence diagnosing cancer at an early stage, the chances of complete cure. Family members of elective surgical patients were reported to have very high anxiety levels. This finding is alarming considering the lack of nursing interventions directed at this population.

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Preoperative nurses recognize that family members experience anxiety during preoperative period. Ironically, it is during this period that little or no meaningful communication occurs between family members and health professionals. Family requires information about how to provide postoperative care and this will reduce their anxiety problems, nutritional problem, nausea and vomiting (Laske, 1993; Lookinland, 1998; Fortin, 1976).

Objectives of the study

➢ To describe the socio-demographic characteristics among persons living with breast cancer.
➢ To measure the level of mental and physical well-being among persons living with breast cancer.
➢ To suggest suitable measures to improve their physical mental wellbeing among persons living with breast cancer.

2. Methods and Materials

The research design used in this study is Descriptive research design. A 50 patients living with breast cancer were selected in a private hospital in Tiruchirappalli by adopting convenient sampling method. A self-structured questionnaire was prepared by the researcher and was used. The interview method was adopted to collect the data from the respondent.

3. Analysis Findings and Discussion

More than half 64.0 percent of the respondents have high level of physical wellbeing. More than one fourth 36.0 percent of the respondents have low physical wellbeing. More than half 58.0 percent of the respondents have high level of mental wellbeing. Less than half 42.0 percent of the respondents have low mental wellbeing. Less than half 51 to 60 by their age. More than half 28.0 percent of the respondents have 51 to 60 by their age. Meager 14.0 percent of the respondent belongs to above 61 by their age. Less than half 44.0 percent of the respondents have primary educational qualification. Meager 14.0 percent of the respondent belongs to illiteracy, middle, and secondary educational qualification. Vast Majority 96.0 percent of the respondents got married. Less than half 2.0 percent of the respondents are unmarried. More than half 58.0 percent of the respondents are unemployed. Considerable numbers 20.0 percent of the respondents are self employment. Less than half 12.0 percent of the respondents are government job. More than one fourth 36.0 percent of the respondents are belongs to semi urban and rural. More than one fourth 30.0 percent of the respondents are belongs to urban.

<table>
<thead>
<tr>
<th>Religion of the respondents</th>
<th>Physical well-being</th>
<th>Statistical Inference</th>
</tr>
</thead>
<tbody>
<tr>
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<tr>
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<td>5</td>
</tr>
<tr>
<td>Muslim</td>
<td>5</td>
<td>0</td>
</tr>
</tbody>
</table>

\( x^2 = 8.767, df=2, P< 0.05 \) Significant

The above chi square analysis table shows that there is a significant association between religion of the respondents and physical well being.

4. Suggestions and Conclusion

Suggestions

➢ The middle age group women are to be supported financially for free screening and treatment by the state and central Government.
➢ Lot of awareness program should be conducted by the social workers to the young and middle aged women.
➢ The chances for breast cancer in rural and semi urban area are comparatively higher than urban areas hence the private and government hospital should organize health camp with help of Rotary, YWCA and NGO in rural and urban areas.
➢ Educated people have low chances as they are aware of it compare to the illiterate and therefore government should support women for their higher education.

Conclusion

Be effective, it must never be developed in isolation. It needs to be linked to an early a plan for the diagnosis and treatment of cancer is a key component of any overall cancer control plan. Its main goal is to cure cancer patients or prolong their life considerably, ensuring a good quality of life. In order for a diagnosis
and treatment programme to detection programme so that cases are detected at an early stage, when treatment is more effective and there is a greater chance of cure. It also needs to be integrated with a palliative care programme, so that patients with advanced cancers, who can no longer benefit from treatment, will get adequate relief from their physical, psychosocial and spiritual suffering. Furthermore, program should include a awareness-raising component, to educate patients, family and community members about the cancer risk factors and the need for taking preventive measures to avoid developing.

Reference

Perspectives on Social Work Education and Professional Practice: The Kerala Scenario

Ms. Anithamol Babu*
Dr. Sonny Jose**

Abstract
The gap between social work education and professional practice is a point of contention among academicians and professionals. However there is a need to assess its magnitude and suggest specific solutions. The purpose of this study is to assess the gap between social work education and professional practice and suggest changes to social work education. For the purpose of the study, 16 cases are selected from three colleges from the three regions- North, Central and South of Kerala. The study adopted purposive sampling technique to select the participants. The data was collected through in-depth interviews. The participants felt that the absence of accreditation and standardisation of quality was a problem. The absence of a body capable of representing social work as a united front resulted in poor awareness among the public about the profession; social work is still equated with social service. Often the job demands did not match job description. Trainees who chose professional social work neither had the aptitude nor had the attitude and hence took Social Work as a job rather than a career. Social work trainees did very little to enrich their job environment by making use of creative selves nor the breadth and depth of the curriculum learnt. Other suggestions for the improvement of social work education included addition of indigenous materials in the syllabus, updates in theories and curriculum, practice and skill-oriented teaching within the school or institution, engagement in activities, research and workshops related to social issues and inclusion of professional skill development training.

Keywords: Social work education, Practice, Profession, Social Worker

1. Introduction
Social work is a relatively new profession which came to prominence in the early years of the 19th century. The core spirit and mission of social work is ‘to help people to help themselves’. The ‘clients’ include individuals, families, group, organizations and communities (Braody & Nair, 1995). The competence of professional social workers depends on the quality of Social Work education. The supervised field training is the signature pedagogy of Social Work Education which makes Social Work different from other Social Sciences disciplines (CSWE, 2008). Hence, the development of social work education is closely linked with the development of social work profession which is entrusted with professional social workers (D’Souza, 1978). Social Work Education in India dates back to 1936. Sir Dorabji Tata Graduate School of Social Work, now popularly known as the Tata Institute of Social Sciences (TISS, Mumbai) was established in Mumbai under the leadership of Dr. Clifford Manshard, an American (Mathur, 2007). Naturally, TISS, Mumbai School was based on the pattern of Schools of Social Work in the United States of America. Social work education in India was a generic program in the pre-independence period (1936–46) (Singh et al., 2002). The introduction of specializations in social work emerged in the post-independence period primarily under the American influence and partly due to the felt need (Singh et al., 2002). All the subsequent Schools of Social Work started in post-independence period borrowed the TISS’s model of Social Work Education (Singh, 2006). Due to the proliferation of American model of education the indigenous practice realities were neglected and this led to non-realization of an Indian Model of Social Work Education in the budding stage of Social Work Education in India.

According to the second UGC review committee (1980), existing syllabi for social work training were not relevant to the profile of the country and there was hardly any scope for practice. Social work curriculum in India remains rather westernized and seems to be missing the components of indigenous social work. Till now, Social work curricula lacked response to the Indian realities and over emphasized the remedial, rehabilitative, residual model which focused on problems of the individual, families and communities at micro level rather than problems of individual and society in the context of development (Desai, 2013). Social Work is no different even today as it was in the last century as it spread from the west to the rest with its colonizing...
civilizing mission replacing local, indigenous healing practices and communitarian values (Grey & Webb, 2015). Gray, et al., (2008) feels that ‘it is essentially about the development of culturally relevant social work for, with, and by indigenous people’. Therefore the social work trainee believes that this study will bring changes in social work education through the suggestion given by professional social workers. The objectives of this study are: (1) To understand the employment history of Professional Social Workers from selected Schools of Social Work in Kerala, (2) To understand the extent of application of social work education - knowledge, skills, methods and values - to professional social work practice in Kerala, (3) To suggest changes to Social Work Education from the perspectives of professional social workers.

2. Methodology

For the study purpose the researcher(s) used qualitative research approach. For getting a generalized result the researcher(s) adopted a cross-sectional research design and selected samples from three different social work colleges from three regions - North, Central and Southern Kerala using expert analysis. The study pursued a purposive sampling technique in identifying participants. The data was collected by way of in-depth interviews. 16 professional social workers with up to 10 years of experience, were interviewed to assess their employment status, application of the social work methods, benefits of the knowledge gained from the subjects, usefulness of field practicum and documentation, association activities, seminars, conferences, mentoring, work schedules, etc. Below given are the cases interviewed.

3. Analysis and Results:

The 16 respondents did 38 jobs in their career. Among the 38 jobs, 3 jobs are in medical setting and 35 jobs are in CD setting. From the Pie chart, it is clear that the 12 respondents were worked as project manager or project coordinator and 5 participants worked with child line or DCPU while 5 engaged as program manager or coordinator. The most of the social work jobs in Kerala which the respondents engaged are in community development setting even though half of the respondents are from medical and psychiatric specialization, since community development was a common paper in the MSW course they are eligible to apply for Community specialized jobs.

A shift from the specialization is visible while moving through their current employment. Eleven participants are still engaged in community setting and while two are working in medical setting, four participants are engaged with their doctoral studies and two participant are doing part time Ph.D program.
Among the eleven participants worked in the community setting, six are working as project manager or coordinator while two others are teachers. Hence we can interpret as more social workers are working in projects and it is an emerging scope. The half of the respondents was serious about their continuous professional development. Among the 12 different courses, five respondents did one additional course, while others did more than one courses after their social work graduation. Four respondents did M.Phil, Three did diploma in counselling while two others did diploma in therapies like NLP. Those Social Workers who did engage wholeheartedly in Fieldwork practicum benefitted most during their later years in serving the profession better. They also applied creatively the basic methods to suit their settings. This applied to other skills as well, especially documentation and social work administration. These came in handy in NGO settings where documentation was a serious priority. Only a few ventured to integrate research in their domain of activity; thus research received the least priority.

2.4 Pie chart and bar chart depicting continuous professional development of respondents

Fifteen participants were able to make good use of the 2 primary methods such as social group work and community organization while 14 participants used social case work in their professional life. It is clear that social action is the method which the respondents used in less than minimum level. The respondents said that from their field work practice, they were able to learn many things especially time management, networking, communication skills, resource mobilization, program coordination, social interaction, rapport building skills etc. and they are using that learning in their current professional life. But half of the respondents said that they are not using the documentation skills now, since their job is not demanding that. The respondents said that they were not familiar with the action research while studying as well as in their professional life.

Case 11: “Association helped him to ‘plan and organize programs’ and to understand the importance of ‘role clarity’ ”
CASE 2:“ my mentor is the person who moulds me as what I am. Whether it is personal or professional, good thing or bad thing , I used to share with my mentor “
Case 4: “The Street play and Field Work interactions equipped him with the courage to face any situation”

CASE 5: “Association helped him to ‘plan and organize programs’ and to understand the importance of ‘role clarity’ ”

CASE 9: “It was very difficult for me to manage time, while I was studying MSW. But I recognized the benefit of managing time only after I got a job, and when I observed others working hard and so stressful I feel proud of myself as I have become an expert in managing time“

The respondents said that from their field work practice, they were able to learn many things especially time management, networking, communication skills, resource mobilization, program coordination, social interaction, rapport building skills etc. and they are using that learning in their current professional life. But half of the respondents said that they are not using the documentation skills now, since their job is not demanding that. The respondents said that they were not familiar with the action research while studying as well as in their professional life. Here we tried to understand whether the respondents are benefited from the application of co-curricular activities in the respective colleges. Most of the respondents were able to make good use of the application of co-curricular activities like exposure visits and mentoring. All the participants cited that block placement was benefited in their career, while 10 participants stated that they did not benefited from workshops and 10 felt like they are benefited from association activities. Not many appreciated the workshops included during their MSW program because they felt that this did not serve the purpose of addressing certain definite skills. They strongly recommended that Workshops be provided with the objective of imparting specific and allied skills.

Case 6: “MSW alone won’t do good it is also important to do additional courses in order to ensure our sustainability”

CASE 14: “In my perception, workshops in the colleges did not help the students, because it did not provide for “augmenting the student’s professional skills.”

Case 7: “Theory which I studied is ‘different from what I learned from the field practicum and employment experience.’ The social workers need not get the opportunity for applying social work methods everywhere; at that time it is important to use common sense and logical reasoning”

Results

Post their MSW course, the trainees sought jobs, not based on their specializations. There is was a possibility of a shift from medical and psychiatric social work setting to community development setting, since community organisation was a general paper quite similar to community development. However, it was the general experience that social workers specilising in community development were not allowed to work in medical and psychiatric settings. Among the 16 participants, 11 of them are working in the community development setting even though 5 of them are from specialized in medical and psychiatric social work. Those specialising in community development were more suited to or preferred in project management settings some among the professionals interested in academic pursue higher education after the MSW course.

Inclination for continuous professional development is very moderate among the social work professionals; most of them prefer to focus on work. Almost all the social workers interviewed were able to make good use of the various methods in all their employment setting; however, it was evident the incorporation depended much upon their individual passion and creativity. Application of social work methods vary depending on the setting of employment profession and more specifically on their passion at work. The more passionate social workers did manage to apply the various methods wherever necessary. However, the setting perhaps may be yet another limitation. The application of primary methods of social work is applicable for all most all the settings which the respondents worked. The application of the method “social action” is almost absent the professional practice; more over it does not work much given the nature of social development in Kerala. Since field action project was not a part of their curriculum in most institutions, those studied were notconfident enough to initiate nor implement action projects.

Documentation skill was very useful for those who are working in NGO settings as well as the private sectors. The social work professionals were able to manage their time frame, as well as use various skills: networking, resource-mobilization, communication, interpersonal and social interaction skills as well as program coordination skills. Looking at the various possible learning opportunities, it was found that all the social workers benefited from block placements. However, a majority of the people did not get an opportunity for mentoring. Even in institutions that encouraged such practices the trainees were not comfortable to be mentored for various personal reasons. Not many appreciated the workshops included during their MSW program because they felt that this did not serve the purpose of addressing certain definite skills. They strongly recommended that Workshops be provided with the objective of imparting specific and allied skills. Those Social Workers who did engage wholeheartedly in fieldwork practicum benefited most during their later years.
in serving the profession better. They also engineered and applied creatively the basic methods to suit their settings (eg. Group work to the context of official meetings). They made good use of other skills as well, especially documentation and social work administration. These came in handy in NGO settings where documentation was a priority. Only a few ventured to integrate research in their domain of activity; thus research received the least priority. The engagement in various co-curricular and extra-curricular activities during the course, research and workshops related to social issues and inclusion of professional skill development training in the curriculum will make changes in social work education and professional practice.

4. Suggestion, Conclusion and Future direction

Suggestions

Teachers recruited should have ‘minimum practical experience’ in their subjects; then teachers should be able to instruct the subject by providing examples from their own experiences. Resource persons need to invited for providing extra knowledge to the trainees; they should have practical knowledge and expertise in their respective fields/subjects, rather than educational qualification. Absence of accreditation and standardization of quality was a threat for the improvement of social work education and professional practice. The absence of a body capable of representing social work as a united front resulted in poor awareness among the public about the profession; social work is still equated with social service. The teachers should be able to provide clear clarification between the social work methods and theories; this will help the students to link between theoretical knowledge and practical experience. The private authorities should provide reasonable rewards to the teachers working in their colleges, so that it will prevent the movement of teachers from one school to another, and the students benefit from consistent supervision as well as instruction in each subject.

There is a need to revising the selection process of MSW trainees. According to sangeeth GS & Solomon MD (2016) insists on the need of the hour is to make a call for innovations in education and practice. As observed over the years, trainees who choose professional social work neither had the aptitude nor had the attitude; hence took Social Work for a job rather than a career. The reason is a person who studied MSW is known as social worker and the opportunities in social work field, is increasing day by day. The addition of indigenous materials in the syllabus will make changes in social work education and professional practice, since the students will be able understand the development of social work in their own context and they will be able understand what are their duties when a social crisis unfurls. Update in the theory and curriculum is the another importa nt concern to standardise social work education to suit international standards. There should be at least two therapies in the syllabus, so that there is no role confusion between social worker and psychologist. The need of continuous professional development should be a concern of social work professionals as well as academicians. Awareness creation about professional social work services, since social work is equated with social service. Addition of indigenous literature to the syllabus.

Conclusion and Future research

While concluding this study the researcher wants to give some thoughts to the minds of young professionals in Kerala. The first thought is that ‘what makes the society to equate professional social work with social welfare activities?’ Secondly ‘what are the factors which led to the negligence of social work as a profession in Kerala or India?’ The last thought is ‘Is it possible to rebuild the reputation of the profession and how?. Social work being a practice profession, it is important to take steps to select individuals who have the aptitude to ‘empower individuals to help themselves’ and the right attitude. This is necessary because otherwise individuals without passion come in and take social work for a job rather than career. The attitude is also reflected in their willingness to develop themselves professionally as well as stand by the profession.

Due to the proliferation of schools of social work in Kerala over last 20 years is very high. Since most of the schools of social work are private, the quality of teaching and supervision is one of the major threads. There is a need of quality analysis for social work education like syllabus revision workshop in every schools of social work. So that the teachers will be able to understand the merits and demerits of their teaching and they can also take feedback from the students to improve their quality of teaching. Lack of professional experience of the teachers and resource persons coming for taking sessions are also a challenge to the field of social work education. The researcher is suggesting that the alumni associations in each schools of social work should be taken care by any teacher from the college, so that the teachers will be able to select resource persons among the alumni and it will help the social work trainees to be proud about their profession and college. And it will also help the profession by accepting the feedbacks of the professional social worker with experience. Although this study is an attempt to assess the gap between social work education and professional practice in Kerala, there is much that could be done to understand specifically how each method is practiced in terms of settings. There could be an evaluation as to the understanding of various theories and its implications, as social work acknowledges that ‘theory must inform practice’ much in line with evidence based practice (EBP). Future
research needs to attend to the limitations by recruiting a larger sample. Future studies could be undertaken to evaluate different approaches to bridge the theory-practice gap.

Reference
Proactive Coping Behavior among Wives of Alcoholics and Wives Of Non-Alcoholics – A Comparative Study

Dr. S. Prescila Sharon*

Abstract

Husband’s alcohol use has found to be related to husband-to-wife marital problems. Research has demonstrated an important link between husband alcohol use and marital dynamics among couples. Thus, the researcher has undertaken a study on 'Proactive Coping Behavior among wives of alcoholics and wives of non-alcoholics' (A comparative study), to understand the level of proactive coping and among the wives of alcoholics and wives of non-alcoholics. A total sample of 300 respondents was selected of which 150 were wives of alcoholics and 150 were wives of non-alcoholics. Data was collected from each group using self-prepared questionnaire and standardized scales as proactive coping scale. The relationships of this variable within itself as well as its association with socio-demographic background variables of the respondents were investigated. The research design adopted was ‘Ex- Post Facto’ research design. Statistical tests such as mean, standard deviation, median, chi-square, ‘z’ test, one- way analysis of variance, and Karl Pearson’s co-efficient of correlation were applied to interpret the data to draw meaningful inferences. Major findings of the study and the conclusions drawn from them indicate that the wives of alcoholics have significantly less proactive coping when compared with the wives of non-alcoholics. The study also revealed that there is a significant correlation between the subject variables. Implications of the study with general recommendations are discussed in the paper.

Keywords: Proactive coping; Alcoholism; Wives of alcoholics; Social workers.

1. Introduction

Alcoholism is a complex illness involving psychological, medical, social, cultural and religion areas and it has function reaching repercussions on the alcoholic family, his employers, society in general and even the economy of the nation. Having an alcoholic at home leads to the depletion of family resources, frequent marital conflicts and breaking away of the marital bonds. The bond between the alcoholic and the wives because of the problem of alcoholism, tries to establish a new homeostasis. In the process the relationship turns to be dysfunctional.

According to Patti son and Kaufman, alcoholism is an economic drain on family resources, threatens job security, causes conflict, and demands adaptive and adaptive responses from family members. Aruna (1988) reports that families of alcoholics are more disturbed in all areas of their family environment and family burden when compared to non-alcoholic families. The central thrust of this study is to ascertain whether the manifestation of the selected marital dimensions is different in wives of alcoholics and those of non-alcoholics. One marital dimension namely Proactive coping behavior has been selected for this investigation.

Review of Literature: Proactive coping behavior

Chandrasekaran and Chitraleka (1998) studied on the Patterns and determinants of coping behavior of wives of alcoholics.100 wives of alcoholics with a confirmed diagnosis of alcohol dependence syndrome according to DCR 10 were considered with "coping with drinking questionnaire", "Avoidance" was the most commonly endorsed coping behaviour. There was a significant correlation between all the coping modules and alcohol associated problems. It is evident from the study that both personality and situational variables play a role in determining the coping behavior of the wives of alcoholics.

Sreedevi, Gangadhariah and Benegal (2000) studied the consequences of living with an alcoholic family member. Spouses of 75 alcohol dependent individuals, admitted in the de-addiction centre at NIMHANS were chosen. High levels of stress were seen in wives of alcoholics. Wives with higher levels of domestic violence showed higher level of stress. The major coping styles adopted were Avoidance (53%), Discord (51.5%), fearful withdrawal (40.4%), and sexual withdrawal (25.8%).

Helena Hansson et al., (2004) studied on the outcome of coping skills training, group support and information for spouses of alcoholics. This study was done with 39 spouses of alcoholics(36 women and 3 men) with an average age of 47 years (ranging from 23 to 60 years) who were erratically consigned to one of the three interventions: Coping Skills Training, Group Support, and Information. Follow-up interviews were

* Social Worker, Chennai.
conducted 12 and 24 months after completing the programme. Results of the study were, Improvements of coping behavior, psychiatric symptoms and hardship.

2. Research Methodology

Objectives

To determine and compare wives of alcoholics and wives of non-alcoholics with regard to proactive coping.

Hypothesis

There is a significant difference between the wives of alcoholics and wives of non-alcoholics with regard to overall proactive coping.

Materials and methods

The present study was undertaken to find out if there is any significant difference between the wives of alcoholics and wives of non-alcoholics with regard to two marital dimensions namely proactive coping behavior. After careful investigation it was decided to choose the De-addiction cum Rehabilitation centre in Khajamalai Ladies Welfare Association, Trichy from where the wives of alcoholics were chosen. A self prepared interview schedule, consisting of questions relating to personal data and socio-demographic characteristics and standardized scales available for the chosen variables was used to collect data. Data collection was continued as soon as the patients were diagnosed by the Psychiatrist and registered as an in-patient, following this, the questionnaire was incorporated as part of the regular intake procedure of the agency. The control group respondents were contacted on the referral by the study group respondents. After ensuring that the control group respondents’ husbands were non-alcoholics by administering DSM IV, data was collected from their wives. Ex-post facto research design was used for the study. No Sampling procedure was used and hence Census method was adopted with individuals’ complete enumeration of all the items in the Universe. A total of 300 respondents, 150 of wives of alcoholics and 150 of wives of non-alcoholics were interviewed to collect data. The data thus collected were put to statistical tests such as, chi-square, ‘z’ test, one-way analysis of variance and Karl Pearson’s Co-efficient of Correlation.

Tools for data collection

PROACTIVE COPING INVENTORY(Esther Green glass, Ralf and Steffen 1999). The Proactive Coping Inventory comprises of seven scales and a total of 55 items, which implement, on a cognitive and behavioral level, a way of coping based on resourcefulness, responsibility, and vision. The seven scales of the PCI are: The Proactive Coping Scale, the Reflective Coping Scale, Strategic Planning, Preventive Coping, Instrumental Support Seeking, Emotional Support Seeking, and Avoidance Coping. Scoring procedure for PCI is, 1 is assigned to “not at all true, 2 to “barely true”, 3 to “somewhat true” and 4 to “completely true”. In addition 3 items of the proactive coping subscale are reverse scored. That is, a score of 1 should be recoded to a score of 4, a score of 2 should be recoded to a score of 3, a score of 3 should be recoded to a score of 2, and a score of 4 should be recoded to a score of 1. Responses should be added to obtain a summed score for each of the 7 subscales. If the total score is less than 162, the coping is classified as low proactive coping and if the total score is 163 and above the coping is classified as high proactive coping.

3. Major findings and Interpretation

<table>
<thead>
<tr>
<th>Level of Overall Proactive Coping</th>
<th>Type of Respondents</th>
<th>Wives of Alcoholics</th>
<th>Wives of Non Alcoholics</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>N(150)</td>
<td>%</td>
<td>N(150)</td>
</tr>
<tr>
<td>Low</td>
<td>100</td>
<td>66.7</td>
<td>51</td>
</tr>
<tr>
<td>High</td>
<td>50</td>
<td>33.3</td>
<td>99</td>
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The above table depicts that majority (66.7%) of the wives of alcoholics have low level of overall proactive coping whereas almost an equal percentage (66%) of the wives of non-alcoholics have high level of overall proactive coping.
Table 2. ‘Z’ test between wives of alcoholics and wives of non alcoholics with regard to various dimensions of proactive coping

<table>
<thead>
<tr>
<th>Type of Respondent</th>
<th>X</th>
<th>S.D</th>
<th>Statistical Inference</th>
</tr>
</thead>
<tbody>
<tr>
<td>Overall Proactive Coping Score</td>
<td>155.61</td>
<td>18.68</td>
<td>z = 5.650</td>
</tr>
<tr>
<td>Wives Of Alcoholics</td>
<td>167.93</td>
<td>19.09</td>
<td>P&lt;0.01 Significant</td>
</tr>
<tr>
<td>Wives Of Non Alcoholics</td>
<td></td>
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The overall proactive coping score shows a significant difference between the two groups. The wives of non-alcoholics exhibit higher proactive coping (167.93) than the wives of alcoholics (155.61) in their marital life. Thus it is found that the wives of alcoholics’ exhibit lower proactive coping than the control group.

Suggestions
Prevention: the prime concern
Primary Prevention
The concern here is to target large populations of individuals (e.g. Wives of alcoholics) who may or may not have experienced marital problems due to their husbands drinking. These programmes attempt to educate participants by providing information about prevalence of marital problems, refuting myths and stereotypes and challenging attitudes that support these problems Secondary Prevention
In contrast, secondary prevention programmes concentrate on individuals deemed at risk for marital problems. Programmes at this stage strive to create highly relevant interventions, focusing on skills and education as it pertains to the participants being treated.

Importance of spouse involvement in therapy
The involvement of the spouse in therapy is important owing to the family system dynamics that caused, enabled or perpetuated the dependency, observes Coleman (1987). It is relevant to keep in mind that the spouse may be a more reliable source of information about drinking problems than the alcoholic spouse himself.

Couple based intervention is effective on three counts. First, to motivate an initial commitment to change, in the alcoholic, second to help stabilize the marital relationship and support in the alcoholics drinking following treatment and third to reduce deterioration and support maintenance of marital and drinking gains during long term recovery, observes O’Farell (1991).

Marital family therapy
Marital counseling, therapy or intervention programmes must address issues pertaining to alcohol use among couples while concurrently providing information about healthy relationships and helping couples develop skills to attain them.

Behavior couples therapy
Behavioral couples therapy with alcoholics and remission after individual alcoholism treatment have been associated with improved family functioning in a variety of domains, including reduced family stressors; improved marital adjustment; reduced domestic violence and verbal conflict; reduced risk of separation and divorce; improvement in important family processes related to cohesion, conflict and caring; reduced emotional distress in spouses, say O’Farrell &Feehan (1999) in another study which vouches for the efficacy of BCT.

Dealing with affected spouse
Economic empowerment of women: Improve women’s access to and control of income and assets, recognize her shared right to the family home and matrimonial property, and incorporate the principle of division of community property into divorce laws. Productive assets and property are critical to strengthening the economic and social status of women, providing income opportunities and improved respect for women outside marriage and family.

Integrate Child Support Services with Protection Services for Women: All intervention programmes need to better address the needs of children affected by violence. Shelter homes must be made more accessible to women with children in both principle and practice; for example, through providing child care facilities. Although some shelters have a provision for allowing children, it is not encouraged.

Increase Collaboration Among Service Providers: Greater collaboration among state agencies, NGOs, and the corporate sector is essential. Effective networking to build a coordinated public response can result in an expansion of the range of services and a better utilization of existing resources.
Promote Involvement of Corporate Sector: The corporate sector is an un-addressed stakeholder in the context of the wives of alcoholics/ under focused community in alcohol awareness campaigns, and this could be tapped for its potential to financially support preventive and supportive services to redress alcoholism. Financial incentives in the form of tax breaks or subsidies could be introduced to encourage corporate sector funding of such activities.

Rural Outreach and Extension: Coverage of services and programmes needs to be expanded to rural areas. Apart from interventions such as lokadalats and the village panchayat, grievance redressal mechanisms for women facing alcoholic problems in rural areas are few or simply absent. The voluntary sector has attempted interventions in rural areas successfully but their efforts are hampered by the non-availability or limited access to referral and health services.

Role of social workers

The social worker is an important constituent of the multi-disciplinary team and is in a vantage position from the view point of intervention since his/her professional responsibilities entail not only working with the alcoholic but also in close proximity with his family.

Prevention is the major arena for psychiatric social workers intervention. At primary level educating all the school children about the ill effects of alcohol through life skills approach is required. Sensitizing the youth to the burgeoning problem of alcohol dependence through media posters and campaigns is the primary responsibility of the social worker.

At the secondary level early identification of families’ where men have started regular drinking. Specific intervention like family counseling, referrals to the state run or NGO run de-addiction centers/ clinics.

At the tertiary level people with alcohol dependency syndrome can be referred to treatment centers. The social workers can provide effective interventions for families of alcohol dependence, to the spouses and children by organizing group meetings for care givers of alcohol dependent and also self help groups.

The social workers should work towards integration of alcohol sensitization program along with other workers, facilitation of formation of self-help groups among the wives of alcoholics in the community, there by creating a platform to share their common concerns at the community level; this in turn strengthens their support system. They should promote self-reliance for the wives of alcohol dependents by training them on entrepreneurial endeavors.

4. Conclusion

This study compared proactive coping behavior among wives of alcoholics and non-alcoholics. The findings of the study have two major implications for de-addiction management. First, they point towards the need for specific spouse directed therapy to enable her overcome her personality deficits and psychological problems. Second, for better de-addiction outcome, it is imperative for family therapists to take into account the aberrations manifested in the couples marital functioning and to work towards their resolution. Thus the need is to provide a holistic intervention package involving both spouses, that besides dealing with the physiological and psychological issues of the alcoholics but also focusing on the marital dimensions of both spouses.

References

Breast Cancer Awareness among the Graduate Students

P. Robert Ramesh Babu*  
Sushmita Kerketta**

Abstract
Breast cancer is the malignant tumour (a tumour with the potential to invade other tissues or spread to other parts of the body) that starts in the cells of the breast. It occurs both in men and women. However male breast cancer is rare. Breast cancer is the commonest cancer in women worldwide. The developed countries with a small proportion of the world population account for almost 50% of breast cancers diagnosed worldwide. Breast cancer is the most common cancer in women in India and accounts for 14% of all cancers in women. The incidence rates in India begin to rise in the early thirties and peak at ages 50-64 years. Overall, 1 in 28 women is likely to develop breast cancer during her lifetime. In urban areas, 1 in 22 women is likely to develop breast cancer during her lifetime as compared to rural areas where 1 in 60 women develops breast cancer in her lifetime. For every 2 women newly diagnosed with breast cancer, one woman dies of it in India. In 2018, 1,62,468 new cases and 87,090 deaths were reported for breast cancer in India. Breast cancer awareness programs are more concentrated in the cities and have not reached the remote and rural parts of the country. Women often do not present for medical care early enough due to various reasons such as illiteracy, lack of awareness and financial constraints. Owing to the lack of awareness of this disease and in absence of a breast cancer screening program, the majority of breast cancers are diagnosed at a relatively advanced stage. The aim of the study is to find the level of awareness among college students of Dharmapuri, about knowledge on breast cancer, its risk factors, Self-examination methods, screening procedures and treatment methods.

Keywords: Breast cancer; Self-examination; Mammography; Graduate students; Awareness

1. Introduction
According to the statistical report of Globocan database 2018, an estimate of 162,468 (14%) annual incidences and mortality of 87,090 females of breast cancer were reported in India. Breast cancer today has become the 1st cancer type to effect Indian women of all ages. Many low and middle income countries now face a double burden of breast and cervical cancer which represent top cancer killers in women over 30 years old.

Breast cancer awareness is an effort to raise awareness among people about the unique characteristics of the cancer, causes, symptoms, prevention and treatment to reduce the stigma related to it. Rising general public awareness on the breast cancer problem and the mechanism to control are the key strategies for breast cancer control (WHO). Most studies have also revealed that greater knowledge can help the society be socially aware about the disease and thus decrease the mortality rate.

As early detection is the main key to cure breast cancer, it’s the sole responsibility of the individual himself/ herself to identify the early signs of the disease. Breast Self-examination makes a women more “breast aware” which in turn may lead to an earlier diagnosis of breast cancer. Although the cancer usually develops after the age of 45 years, the age of onset is decreasing and more young women’s are affected (Gwarzo et al.).
Young women’s cancer is generally more progressive and results in lower survival rates which again indicate the aspect of early detection is even more important (Cancer Council, Australia).

In the present scenario breast cancer awareness campaigns have been initiated by lot of agencies and organisations all over the world. The month of October is celebrated as Breast cancer month indicated by the colour pink. A Pink ribbon is usually taken as its symbol which is associated with the use of the pink ribbon. This study on awareness of breast cancer among graduate students mainly attempted to understand the level of awareness about breast cancer and draw necessary inferences to look for new avenues of social work intervention.

2. Research methodology
A study was carried in a group of graduate students in Dharmapuri to determine the awareness of breast cancer among both the male and female. The study area contained graduate students from the background of arts and humanities. The researcher used descriptive research design. A structured and pretested

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questionnaire was adopted and used consisting of both open-ended and closed-ended questions. The research data’s were collected through questionnaire method. The samples were chosen by convenience sampling method. The sample size is 77. The main domains of the study were Socio-demographic details, Knowledge on breast cancer awareness, Breast cancer prevention, Knowledge on Breast self-examination and Clinical breast examination and Mammography

3. Findings of the study
Socio-demographic details
A total of 77 respondents participated, the mean belonged to the age group of 19-29 years and 34% were male and 43% were female. 85% of the participants belonged to rural background while only 15% belonged to urban background.

Knowledge on Breast cancer
Out of 77 participants, 72%(n=56) of the participants have heard about breast cancer. The source of information of 54% of the respondents was through media and 40% the respondents got knowledge through lecture. There were also 3% of the respondents whose family members were diagnosed with Breast cancer.

Breast self-examination knowledge and practise
Out of all the participants 54% of them have heard of Breast self-examination and also agrees that it is a useful tool for early detection of cancer. Only 22% of them have been taught to do Breast self-examination. 17% of the respondents knew that BSE had to be done monthly.

Clinical breast examination
60% of the respondents have not heard of clinical breast examination out of which 45% of the respondents have no idea on how it’s done.

Knowledge on mammography
Only 44% of the participants have heard about mammography. 65% of them had no idea of how frequently and from which age it should be done. Only 1% of the respondents knew that mammography has to be done yearly after 40 years of age.

Discussions
From the above statistical data it is clear that 72% of the respondents are aware of breast cancer. But when proceeding further to a breast screening, Clinical breast examination and mammography the level of knowledge is very low where only 54% respondents are aware of breast self-examination. While only 15% practise BSE monthly. The study revealed that there is a huge gap between the level of awareness and their level of education. Huge disparity can also be seen among the respondents who know Breast self-examination but don’t practise it. Breast cancer is the abnormal development of cells in the breast tissue. Also known as carcinoma of breast, the cancer not only affects the females but also the males. However male breast cancer is very rare.

The breast is an integral part of the body. The main function of the breast is to produce milk. A mature breast is mainly made up of connective tissues, fat and lobules which produce milk. In the normal breast tissue there consist millions of cells which forms, divides and dies in an orderly manner. The process is called apoptosis. But when the cells are affected by abnormal cell development the cell become cancerous and becomes insensitive to the growth inhibitors resulting in uncontrolled growth of cells of its kind. When cancerous cells starts to grow the most common and simple symptom usually is a formation of tumour which may not be painful. Hence it’s very important for a person to be aware of one’s breast and examine it often. Mammograms whether benign or malignant can easily be detected through Self-examination of the breast. Most of the breast cancers are invasive or metastasis which means it has the ability to spreads quickly to neighbouring as well as. If not aware of the tumour it can increase its size and may spread to the armpit, collar bone and other parts of the body.

Social work intervention
The requirements to prevent the disease and the role of social workers fit very appropriately. Social workers

- Translation of information’s on breast cancer into regional language and distribute to the people to create more awareness.
- Organise conferences, seminars and interactive sessions on Breast cancer in educational institutions. This can be started from the undergraduate student group onwards
- Identification of women groups and self-help groups, working women hostels and workplaces to educate them on breast cancer.
- Door to door campaigns can be arranged to create awareness with the help of the student volunteers.
- Through the usage of social media reach as many people possible to spread the awareness.
4. Conclusion
Indian women need a lot of awareness about breast cancer. They need to be given more knowledge on the risk factors so that preventive measures can be undertaken. There is an urgency that we need to give breast cancer awareness to nationwide, state wise, district wise and community wise. It has to join hands with Nagos, CBOs and volunteers to take this awareness to every part of India. Many training centres have to be established. More of informations about the risk factors have to be put in the regional languages and distributed to people to work on preventive measures. Through colleges and schools the breast cancer literacy has to be given. Better health care has to be established in every state and districts. Students of nursing and medicines have to be given the option to go to the rural areas to spread awareness on health issues. If all of us put our heart, mind and energy to fight against breast cancer definitely one day we can achieve breast cancer free India. Let everyone join together to spread awareness on breast cancer.

References
Delivery Practices of Traditional Birth Attendants in Palliyar Tribes of Dindigul District

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A. ZunathaBanu****

Abstract

Tribes are a part of the society and increasing institutional birth is an important strategy for attaining millennium development Goal-5. An alarming number of deliveries in India are carried at homes by Traditional Birth Attendants (TBAs). Tamil Nadu has lower number of home deliveries when compared to other states in India. This article highlights the delivery practices of TBA and factors associated for home delivery, only in Palliyar tribal area of Dindigul district in Tamil Nadu. Snowball technique was used in this Qualitative study by In-depth interviews among ten TBAs, using semi-structured guide and thematically analyzed. This study highlights the delivery practices provided by unskilled TBAs, cutting the cord by blade, clamping umbilical cord by white thread and initiation of colostrums immediately after birth were observed. Trust and accessibility on TBAs is the main reason for home delivery. Findings will be useful to policy makers to design appropriate training of TBAs, by which reduction of maternal and neonatal mortality as well as morbidity in tribal area of Tamil Nadu. The findings will provide clue for further improvement in the maternal and childcare practices, which will in turn, reduce the respective mortality. With this background, a preliminary study was carried out to assess the delivery practices among the Palliyar tribes living in Dindigul district in Tamil State in India.

Key Words: Traditional Birth Attendances (TBA); Umbilical cord; Colostrums.

1. Introduction

The tribal population of the country, as per 2011 census, is 10.43 Crore, constituting 8.6% of the total population (Ministry Of Tribal Affairs, 2013). Their distribution across the country is varied from a mere <1% of the total population in a state to a majority population in many of the North Eastern States (Mohanty PK., 2006). Tamil Nadu is one of the states with lowest percentage (1.1%) of tribal population along with Uttar Pradesh, Bihar, Kerala and Uttarakhand and there are 36 tribal communities living in Tamil Nadu (Directorate of Family Welfare, 2015; Ministry of Home Affairs., 2011a; Ministry of Tribal Affairs, 2013; Mohanty PK., 2006). Some of the major tribal communities who live in Western and Eastern Ghats and adjoining plains are Kaniyan, Sholagar, Vedar, Malayali, Palliyar, Muthuvan, Muthuvar, Kadar, MalaiMalasar, Toda, Kota, Paniya, Kattunayakkan and Kurumban. (Ministry of Home Affairs. 2011b).Although, there are some published literature, but, mostly on the ethno botany, and very few on health issues in tribal communities (Maruthupandian, 2012; Ministry Of Tribal Affairs, 2013; Revathi, 2010; Sekar, 2007; Viswanathan MB., 1989).Ministry of Tribal Affairs in India has laid more emphasis on their development through Tribal Sub Plans in each Ministry including Health Ministry to improve their overall development (Ministry Of Tribal Affairs, 2013). Indian Council of Medical Research (ICMR) has prioritized tribal health research to identify the research priorities and address the gaps in knowledge about the diseases affecting these populations by setting up twelve Tribal Health Research Unit (THRU) in its institutes across India (Planning Commission., 2011). One such Unit has been created at National Institute Epidemiology (ICMR-NIE) with the objective to undertake research studies by identifying health issues in tribal populations of Tamil Nadu in 2013 (Planning Commission., 2011).Increasing institutional delivery is an important strategy for reducing maternal mortality, which is a major target of millennium development Goal -5 (Planning Commission., 2011).Institutional delivery is preferred in Tamil Nadu and the State is having very low level of infant and maternal mortality (Directorate of Family Welfare., 2015). However, delivery is mostly domiciliary among tribal populations as mentioned in the published literature from other areas in India (A.K. Jana., 2005). Neonatal care given among tribal community of Odisha was given by 80% of Tribal TBA (Sanghamitra et al., 2006). Some of the major tribal communities who live in Western and Eastern Ghats and adjoining plains are Kaniyan, Sho...
al., 2014). In India, when compared to North to South, South India has low number of TBAs (Zoe Matthews et al., 2001). To further increase the institutional delivery rates and to reduce the maternal mortality, it is important to understand the distribution and causes for domiciliary delivery, which is a common practice in the Palliyar tribes (Maruthupandian et al., 2012). The role of the traditional birth attendants is important in providing care during pregnancy as well as postnatal (Purnima et al., 2010). Hence it is very important to assess and understand the delivery practices of the tribal populations particularly those who live in the hilly and forest areas in Western Ghats of Tamil Nadu, where the access to the health facility is limited. The findings will provide clue for further improvement in the maternal and childcare practices, which will in turn, reduce the respective mortality. With this background, a preliminary study was carried out to assess the delivery practices among the Palliyar tribes living in Dindigul district in Tamil State in India. We have recorded the role of the traditional birth attendants in maternal and child health care among the Palliyar tribes. The findings of the study are presented in this manuscript.

2. Materials and Methods

Study design and setting

A cross-sectional qualitative study among the Palliyar population living in the Western Ghats in Dindigul district in Tamil Nadu was carried out between October-November 2015. Since, limited data about the distribution of the Palliyar tribe with the district administrators of Dindigul, with the help of an anthropological consultant, we identified one of the hamlets of Palliyar tribes and subsequently the other hamlets were identified using guidance obtained from the Palliyar living in that hamlet. We identified the following Palliyar hamlets, Velapanmai, Puliyankasam, Korankombu, Kuravanachodai and BodhaMalai Villages of Dindigul District. Simultaneously we prepared a list of TBA in the identified hamlets and adopted in-depth interview (IDI) technique to collect data, but, could not carry out FDG due to minimal in these populations.

Study participants

A person was considered as TBAs if she was accepted as maruthuvachhi (Traditional Dai) by the community and had at least five years of experience in conducting deliveries at home in the community. The TBA were identified by the elders in the community in a village and lactating mothers for whom the TBA had conducted deliveries and also indentified other TBA in the neighboring hamlets, with their reference. The formalities of consent form were processed and their willingness was ensured to participate in IDI. We interviewed all the available TBA in that selected village, and also conducted IDI

Data collection and Procedures

A team consisting of an experienced public health expert, two professional qualified Social workers, were involved in data collection. In-depth interviews (IDI) were conducted among the study participants in a common place convenient of the respondents and free from distractions. Preplanned, at par with the objective of the study, an interview guide was used to acquire an insight into delivery practices by TBAs, which includes the delivery practices, breast feeding practices, identification of danger signs during antenatal period delivery, handling the difficult situations, advice during post partum care, reasons for the home delivery were major themes of IDI and each interview lasted for about 45- 60 minutes. With their prior permission, the IDI were audio recorded. The moderator encouraged the participants to share their experiences and discuss openly, professional social worker and public health expert moderated the discussions and recorded the keynotes.

Data Management and analysis

Individual ID numbers were provided/ used for each respondent to ensure anonymity during transcription and translation. Left thumb impressions of the illiterate respondents were obtained in the presence of a witness, after explaining the purpose of the study. The recordings were stored in pen drive under the custody of the Principle Investigator (PI), with limited access for maintaining confidentiality. The audio data were transcribed as verbatim, translated into English and back to back from Tamil by the note taker and validated by a moderator. The public health expert and the professional social worker reviewed the audio recordings for ensuring the accuracy of the transcriptions. All the field notes and interviews (with or without audio recording) were considered for data analysis process. The data were systematically indexed, synthesized and interpreted to provide explanations for the findings. The sections were treated in a similar process of data processing and finalized data was entered in qualitative software ATLAS.ti version 5.6.3. Attributes were tabulated in the software to quantify demographic variables of location, typology, age, and delivery experiences.

Initially the themes were identified deductively from the interview guide and inductively from the data. Following the iterative process of reading, final themes were developed using the grounded theory
approach (Glaser et al., 1967). The data was coded by two researchers, first independently and then by discussions. The codes and the descriptors were shared with the public health expert, social scientist and their interpretations were included to preserve the local meanings. The coded data was analyzed, which informed the next iteration of data collection until strong theoretical understanding was attained and these are described as emerging themes. Thematic analysis was performed to analyze the data pertaining to the delivery practices of TBAs and factors associated for home delivery of Palliyars living in the hilly areas of Tamil Nadu.

3. Results
General profile of the TBAs

The IDI process was carried out in all the five villages namely Velanpannai (2), Boodhamalai (2), Puliyankasam (3), Koran Kombu (2) and Kuravanachiodai (1), and all 10 identified TBA were interviewed. Basically, there is a general taboo that female doctor or dhais or TBA are only can allow to perform deliveries, in the same way all the identified TBA are women from Palliyar community, their mean age is 55 years (SD ±10 years), with 5 to 18 years of experiences as asmarathuvachhi (Traditional Dhai) and learnt this profession from their family elders. Strange to notice that none of the TBAs had received any formal training on safe delivery practices from the state health department.

Table 1. Demographic details

<table>
<thead>
<tr>
<th>S. No</th>
<th>Name of the village</th>
<th>No. of TBAs</th>
<th>Occupation</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Velanpannai</td>
<td>2</td>
<td>Plantation workers</td>
</tr>
<tr>
<td>2</td>
<td>Boodhamalai</td>
<td>2</td>
<td>Plantation workers</td>
</tr>
<tr>
<td>3</td>
<td>Puliyankasam</td>
<td>3</td>
<td>Plantation workers</td>
</tr>
<tr>
<td>4</td>
<td>Koran Kombu</td>
<td>2</td>
<td>Plantation workers</td>
</tr>
<tr>
<td>5</td>
<td>Kuravanachiodai</td>
<td>1</td>
<td>Plantation workers</td>
</tr>
</tbody>
</table>

Mean age of TBAs: 55 years
The range Experience in conducting delivery: 05 years
No. of participants in IDI were 10

TBAs delivery practices

IDI disclose that, three out of ten TBAs stated that they conduct deliveries only when they were approached by pregnant women or her family members. (On call), in some cases, it is the decision of the family to conduct the delivery at home as then, when they approach them. Four TBAs stated that if there is a delay or emergency, when a woman cannot reach the nearby institution, the TBAs would support the pregnant women and carry out the delivery. If the TBA fells that there is a complication or problematic situation and beyond their scope of work/regular procedure, they will advise and send the women to the nearby hospital without any hesitation. Seven TBAs stated that they will conduct delivery on a new bed sheet and this observation was common among all the TBAs.

The general practices of the TBAs are that they used to inform the family members in advance to ensure the availability of new and clean bed sheet during delivery. Four TBAs reveals that previously deliveries were conducted in caves, but now, the TBAs prefer in a separate room in the house for the delivery. One TBA stated that once she had conducted delivery without any electricity, she conducted safe delivery with an oil or kerosene lamp (lantern) for lighting inside the forest. The entire ten TBAs stated that for the clamping the umbilical cord, they mostly use rough clothes and white thread. New shaving blades, household sickle and sharp knives were also used for cutting the umbilical cord. It’s an excellent to note that majority of the TBAs stated that they are immersed blade, or sharp knife, or household sickle into the hot water for cutting the umbilical cord, but now, the TBAs prefer in a separate room in the house for the delivery. One TBA stated that once she had conducted delivery without any electricity, she conducted safe delivery with an oil or kerosene lamp (lantern) for lighting inside the forest. The entire ten TBAs stated that for the clamping the umbilical cord, they mostly use rough clothes and white thread. New shaving blades, household sickle and sharp knives were also used for cutting the umbilical cord. It’s an excellent to note that majority of the TBAs stated that they are immersed blade, or sharp knife, or household sickle into the hot water for cutting the umbilical cord during delivery. All TBAs recommended and suggested the family members to bath the new born after the placenta was delivered and soon after the umbilical cord was cut and removed from the baby. Interesting to note that for easy expulsion of placenta, massing the abdomen with castor oil was practiced by the TBAs. In case of retained placenta, applying pressure over abdomen was practiced for manual removal of placenta. All TBAs used to bury the placenta in the courtyard of the same house as a matter of practice without knowing the reason behind this practice.

a) “I use a thread, torn up from white cloth and tie the umbilical cord. We will cut the Umbilical cord using blade only” –IDI
b) “I will cut the cord using a blade, that was boiled in water” – IDI
c) “We will put castor oil and will massage to initiate delivery” – IDI
Breast feeding practices

Majority (10) of the TBAs stated that they will advice the mothers to breastfeed, as soon as the baby was born. Quite interesting to note that four TBAs testimony that they will advice the mother to feed the baby for a period of one year continuously and three of the TBAs stated that she will advice the mother to breast feed the baby up to one and a half years.

“Giving the first milk (Colostrum) gives strength to child: it will give resistance against diseases. We will advice to give breast feeding till one year or two year. For mothers here there is no limit for feeding” – IDI

Identifying danger signs and symptoms in antenatal period and delivery

Without any formal institutional practice, to conduct a delivery is not an easy task. However, in the hilly areas the TBAs are conducting the deliveries by ages learnt from their ancestors. To identify the danger sign and symptoms in the antenatal and delivery process, it required constant observation and examination. Only one of the TBAs stated that she will identify the swelling over legs during antenatal period; pain in abdomen before nine months is a danger sign and symptoms during pregnancy. Two TBAs stated that they would massage the abdomen to correct the position of the fetus if it has shifted, by applying castor oil or coconut oil for delivery. Among the all ten TBAs interviewed, only one had openly expressed that she is aware and do know about the danger signs and symptoms of pregnancy, rest of the nine TBA’s accepted that they are not aware and do not know about any danger sign and symptoms of pregnancy.

Handling the difficult situation by the TBAs

The baby presentation will be either cephalic, breech or shoulder presentation and each presentation there are many sub class of presentation. Nevertheless, one TBA stated that during delivery process, baby’s leg came out first, and then she pushed it back inside womb, put her hands into the womb, straightened the legs and assisted the baby to come out. Four of the TBAs were reported that after delivery they will give a drink (made of Palluvikeerai) to stop excessive bleeding.

a) “I’ll cut the nails and wash hands; inserting two fingers into womb slightly, I will move the baby and take it out.” IDI
b) “Palluvikeerai, Hmm... It will be like a creeper in forest. We will keep soups using those leaves and will give to mothers after delivery means it will stop bleeding” – IDI.
c) “People here call us in emergency situations also (if the presentation is cross). During that time we give them massage to get the fetus back to the place.” – IDI

TBAs advice to the mother after delivery

Principally, after the delivery process is completed; there will be a short note or advice by the doctor or nurse to the mothers. Same as we found out that majority of TBAs (nine) advised the mother to have herbal drink (Palluvikeerai), which is the most commonly, utilized plant among all the Palliyar tribe for stop bleedings. They also make soup from that greens and pose and given to mothers after delivery, in order to clear the womb contents. It’s quite interesting to note that they say that it will strengthen the mother’s immunity and milk secretion.

Reason for the home delivery

Majority of the TBAs (eight) are reported that there was poor accessibility of transportation and vehicles, due to dreadful road in certain areas or no proper roads in hilly areas. Apparently, the delay by the Village Health Nurses to reaches the spot and some time and lack of skilled personnel to carry out the delivery are the key reasons, which leading to conduct the home delivery or preference to invite/call TBAs. Of course, it has been indicated that there are barriers in the health system for institutional delivery.

a) “There are no transports available here, this is the biggest problem, it is very difficult for us to reach it. Roads are not good; and pregnant woman was carried in cot by other males to road for nearly two to three kilometers even in emergencies.” – IDI
b) “The road is damaged here, and road facility also not available; it's like this if 108 ambulance comes means, we have to carry them and go down from here”– IDI

Other reasons for Home delivery

The researcher can able to enumerate the other reasons for home delivery through IDI. Out of ten TBAs, four are able to state other reasons of home delivery. a) Delay in decision making on part of the pregnant women and her family to inform about labour pains and follow up. b) Delivering at home is easier and more
comfortable rather than going to the hospitals and spending three days there and c) Even better off people in their area may not be able to afford the high cost of delivery at hospitals or clinics.

a) “People here feel that it is good to have delivery at home; because it costs less at home and costs much higher at other places (hospital) outside the home. We do not get money from them for seeing delivery.” – IDI

b) “People here feel they have to spend from Rs:1000/- to Rs: 30000/- for a delivery in hospital. And they couldn’t afford much and hence it’s good to have delivery at home.” – IDI

Trusts on TBAs

Trust is the most important in the life of human being. It was observed that TBAs are the members of the tribal community and majority of them were senior in their age and experiences, the rest of the community members trusting the TBAs. The main factor for choosing the TBAs to conduct the delivery for their daughter is absolute trust and faith on TBAs. They also expressed that when it comes to conducting deliveries, the people do know that it’s best to conduct it in an institution, but still prefer us for delivery. In case, if they decide on for hospital delivery will consult the TBAs and request her to accompany with them.

a) “People here go to hospitals only when there is a complication in delivery. Otherwise they prefer giving birth at home only.” - IDI

b) “Village people have trust on us; since they see us and think that we are trained and have been conducting deliveries for a long time.” – IDI

c) “People here think that we are skilled, and providing good services, hence they call us to assist. We also have lots of experiences in assisting many deliveries without facing any difficulties.” - IDI

d) If any critical situation arises, and the pregnant mother or her family members approaches the TAB, then only, the TAB will visit the family for consultation and the problems are mainly limited to “Pain” and “Shifting of the fetus” or “fetus moving down” – IDI

Table 2. Delivery Practices of TBAs with relevance to Child Birth

<table>
<thead>
<tr>
<th>Category</th>
<th>Findings</th>
</tr>
</thead>
<tbody>
<tr>
<td>Delivery practices</td>
<td>The key findings suggests use of clean new bed sheet for delivery, a new thread or old rough clothes to tie the cord, blade/ knife to cut the cord. The deliveries were conducted in separate rooms, if available. Massages to correct the position of the fetus if it has shifted its position; by applying coconut oil or castor oil and massaging the abdomen for safer delivery</td>
</tr>
<tr>
<td>Breast feeding practices</td>
<td>Initiation of colostrums, breast feeding to be done immediately after bathing the new born. Pre-lacteal feeds were rarely given.</td>
</tr>
<tr>
<td>Identification of Danger signs in antenatal period</td>
<td>Swelling over legs during antenatal period; pain in abdomen before nine months is a danger sign during pregnancy.</td>
</tr>
<tr>
<td>Reason for the home delivery</td>
<td>Delivering at home is easier and more comfortable rather than going to the hospitals and spending three days there; delay in decision making on part of the pregnant women and her family to inform about labour pains and follow up. Poor accessibility for vehicles due to bad road in certain areas, no roads in hilly areas for vehicles, lack of skilled personnel to conduct delivery at facilities, which cause a delay in reaching the Village Health Nurses (VHNs)</td>
</tr>
</tbody>
</table>

Significant Observations:

It has been practice of the Palliyar tribal to go to forest in pairs as a couple, (including pregnant women nearing term) for periods varying between two to three weeks to forage of forest produce for their livelihood. During such visits it is common for such pregnant woman who accompanies her husband to the forest, with
sudden onset of labour pain, deliver her baby inside of the forest with the help her husband in the nearest cave and return with the new born cutting short their visit. During our visit, we observed one such couple.

![Figure 1. Outside view of the cave](image1)

![Figure 2. Inside view of the cave](image2)

Some of the mothers who delivered their babies in such a manner informed us that they did not get the direct cash transfers (such as “Muthulakshmi Reddy Scheme”, “JananiSurakshaYojna” and PradhanMatriMatriitvaVandanaYojana”) because the VHNs informed them that they did not have their deliveries in the government hospitals. These women stated that it is difficult for them to come down from forest to the Primary Health Centre (PHC), due to lack of transportation, and high out of pocket expenses. They stated that they had little or no savings and they cannot met the food expenses of the accompanying person who is either the mother in law or mother and her husband, incidental expenses in the hospital, cost of returning home with the new borne child a car and loss of income above all they find it inconvenient or shy to interact with the locals in the new surroundings. Some other observations that were made on their wide-range of belief amongst them are excessive salt in the food will conserve for longer duration or periods, which is a cause for prevalence of hypertension in them.

Limitation of the study includes that as the Palliyar hill tribes are living in small clusters/villages, only few number of TBAs from a selected geographical area were interviewed in the study. Hence generalization of delivery practices to the entire community is a limitation.

4. Suggestions and Conclusion
Suggestions
To create awareness about preventive and curative medical care through traditional and modern health care systems.

- Awareness must be and understanding about healthy food habits and food processing.
- Sensitizing the tribal Cleanliness and sanitation.
- To educate the tribal depletion of herbal resources.
- To create Awareness consequences of traditional based medicine should be launched by the government and voluntary agencies should be involved in the work.

Conclusion

This study has shown that most of the TBAs claim safe practices to conduct deliveries but, in the actual delivery situation, sometimes they use unsafe and usage of unhygienic materials or substances to cut the Umbilical cord, which are not in accordance to maternal and newborn care and may also increase the risk of infection. The insufficient knowledge related to recognition of danger signs and symptoms during antenatal period and during intra-partum period are seen among TBA’s. Therefore, by creating awareness about identifying the danger signs and symptoms, the need for providing reproductive and child health care and about proper and hygienic conductive of deliveries is of great importance. By giving adequate training to conduct deliveries among TBAs, along with disposable kits may be given on experimental basis to examine such feasibility. This will certainly bring down the risk of maternal and neo natal deaths, if any in the tribal’s, who live in isolated pockets in the hilly forest areas of Tamil Nadu. Further research should explore integrating services of TBAs, through skill based training, acknowledging their roles in the tribal area.

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Abstract
Health is a state of complete physical, mental and social well-being and not merely an absence of disease or infirmity (WHO 1946). The contribution of social work professionals in the field of health is enormous. Medical social work is the field where the social workers work in health care setting performing various roles. Social workers as transplant coordinators play a challenging role with the transplant team, the social workers take up roles of educator, facilitator, and grief counselor, and they bridge the gap between the patients, doctors, and hospital management. Social workers in Health care, work with multidisciplinary team consisting of physicians, surgeons, neurologist, urologist, anesthetist, cardiologist, pulmonologist, dietitian, nurses and paramedical staff, the social worker in this multi disciplinary team play various roles for the well being of the patients. This paper throws light on the roles played by the social workers, their challenges and the scope for the profession.

Keywords: Medical social worker; Transplantation coordinator; roles; challenges.

1. Introduction
Changing health status, lifestyle diseases on the rise, have paved the way to gain more importance on health care management. A Study conducted by Shuchi Anand (2015) have concluded that one in twelve persons in the two large cities i.e Chennai and Delhi have Chronic Kidney Disease. With more number of people suffering from kidney disease and failure, the social worker in the transplantation Department works for the retrieval of health for the patients.

As transplant surgery estimates lakhs together, the social worker has to perform multiple roles. The social worker is expected to do a detailed financial assessment, have to orient on pre and post operative workup, the social worker liaisons between the government, hospital administration, patients and transplant team. Grief counseling is one of the major role played by the social worker during cadaver transplantation, social workers come across lot of hurdles in caring out organ transplantation, convincing donor families to enable for a cadaver transplant is a real challenge.

Utilizing various skills and techniques of the profession, the social worker works hard towards the betterment of the patients. The social worker with extreme tolerance and due respect make the cadaver donor families understand about organ donation and its importance.

Role of social workers in Transplantation
The Transplantation of Human Organs (Amendment) Act in 2011 defines a Transplant Coordinator “as a person appointed by the hospital for coordinating all matters relating to removal or transplantation of human organs or tissues or both and for assisting the authority for removal of human organs”.

A transplant social worker is a professional who is specialized in coordination towards organ transplantation. They facilitate the whole procedure for the patients and donor family. The social workers should have medical and surgical knowledge to deal with the transplant team and patients. Social workers and Living related Transplant

Pre evaluation: The transplant coordinator completes the pre evaluation with the guidance of nephrologists and surgeons. Pre evaluation includes, blood and tissue type tests, test for hepatitis, HIV, Prostate exam (for men), mammogram and pap smear for women, lungs and heart examination, liver and kidney tests and colonoscopy.

Educator: As an educator makes the patient understand about the medical and surgical aspects towards transplant. Patients who have multi organ failure or single organ failure are considered as potential recipients for transplant.
Ward rounds: The transplant coordinator go for grand rounds with the transplant team to the wards, dialysis unit to identify potential recipient for transplant, later the social worker enables the patient to have an idea about transplant and its benefits.

Liaison: The transplant coordinators liaise between the hospital management and the Government (Directorate of Medical Education) to get approval for Transplant.

Discussion: Soon after the approval, the transplant team discusses to perform the surgery.

Role of Social workers and cadaver Transplant

When it comes to cadaver transplant, the social workers work 24/7 as a brain dead donor is expected anytime to trauma centre, the TRANSTAN (Transplant authority of Tamilnadu) is a convener who maintains a registry for patients who wait for cadaver organs, All transplant hospitals are allowed to register their patients who don’t have living donor.

Grief counseling: Mukesh (2016) The social workers play a role like the axis of a wheel and plays a vital role at every stage of organ donation and transplantation. Social workers play active role as grief counselors. The neurologists look for brain stem reflexes, who have sustained injuries to the brain which results from traumatic causes such as road accidents, falls, blows to the head, drowning, carbon monoxide poisoning etc. The social workers remain with the donor family till the deceased person is taken from hospital. After counseling, consent forms are duly filled for organ donation, consents will be taken for cornea, heart, liver, lungs kidneys, pancreas, hand, intestines, they coordinate to deliver the retrieved organs to transplant recipient hospitals.

Postoperative care: not just stopping with preoperative care, the role of social worker post operative is also imperative in post operative care.

Training

Social workers also get exclusive trainings from organization like MOHAN foundation (Multi Organ Harvesting Network) NGOs which promotes and educates about Organ donation.

Challenges faced by social workers

- Difficult to understand medical terms: The social workers come from non medical discipline which could be challenging to understand the medical and surgical concepts related to transplants.
- Becoming Vulnerable: The social workers are put to vulnerable situations where they become weak target for the patient families during difficult situations.
- Grief counseling: It is difficult to cope up as a grief counselor as the transplant coordinators may need to address deceased donors and families, 24/7 on call work, any time they should be available to receive cadaver donor call.
- Stress: Stress in handing multi disciplinary team to coordinate and facilitate arrangements towards transplant.
- Over conscious: Social workers are not supposed to make mistakes during coordination as it would be life threatening for the recipients

Scope for Transplant Coordinators

With various life style diseases on the rise, paving way for the Non Comunicable Diseases to overgrow the Communicable Diseases, the role of social workers in this field has become more vital.

- Transplant coordinators are high in demand all over, as their role is considered as unique and challenging.
- Trained Professionals from MSW background are more suitable for this post than any other disciplines, can become trained grief counselors,
- Transplant hospitals cannot get license for transplant without a social worker in the team.
- Social workers can be placed in agencies working for organ transplantation for field work and block placement.
- Jha V et al., (2016). In spite of growing importance, kidney disease needs more visibility. Knowledge on renal failure deaths is highly essential for public health response. The social workers can create awareness towards organ donation in their communities to promote organ donation.
2. Conclusion

With increase in technology and innovations, human beings are also going through a tough phase to fight against diverse health related issues. Holistic health care is possible only with multidisciplinary approach. Social worker in the health care team working for transplantation has more responsibility to enable the patient to reach the optimum health. Full fledged training coupled with utilization of appropriate skills and techniques will surely be a contributing factor for a healthy community.

References

Level of Mental Health among the Adolescents of Dharmapuri

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Abstract
Health is defined as a state of complete physical, mental and social well-being and not merely the absence of disease or infirmity. A sound mind in a sound body has been recognized as a social ideal for many centuries. Mental health is an important aspect of one’s total health status; it is a basic factor that maintains physical health as well as social effectiveness.

WHO defines mental health as, “A state of well-being which every individual realizes his or her own potential, can cope with the normal stresses of life, can work productively and fruitfully, and is able to make a contribution to her or his community”. Adolescence and the early years of adulthood are a time of life when many changes occur, for example changing schools, leaving home, and starting university or a new job. For many, these are exciting times. They can also be times of stress and apprehension however. In some cases, if not recognized and managed, these feelings can lead to mental illness. Half of all mental illness begins by the age of 14, but most cases go undetected and untreated. In terms of the burden of the disease among adolescents, depression is the third leading cause. Suicide is the second leading cause of death among 15-29-year-olds. Harmful use of alcohol and illicit drugs among adolescents is a major issue in many countries and can lead to risky behaviours such as unsafe sex or dangerous driving. Eating disorders are also of concern. Much can be done to help build mental resilience from an early age to help prevent mental distress and illness among adolescents and young adults, and to manage and recover from mental illness. Prevention begins with being aware of and understanding the early warning signs and symptoms of mental illness. Based on this, the present study focused on the level of mental health among the adolescents of Dharmapuri. In this study, For the purpose of data collection the standardized questionnaire was used to collect the data from the respondents. Mental health barriers by Dr. Arun Kumar Singh was used for data collection. It has five dimensions like emotional stability, over all adjustment, autonomy, security – insecurity and self-concept.

KeyWords: Mental Health; Adolescents; Emotional Stability; Security

1. Introduction
Mental health is a fundamental indicator of quality of life. It is a positive sense of well-being that helps an individual realize his/her own capabilities, can cope with the normal stressors of life, can work productively and fruitfully, and is able to make a contribution to his/her community (World Health Organization, 2004). The primary aim of mental health activity is to enhance people’s wellbeing and functioning by focusing on their strengths and resources, reinforcing resilience and enhancing protective external factors (WHO Europe Declaration, 2006). The WHO-World Health Organisation (2009) defined Mental Health as “a state of well-being in which every individual realizes his or her own potential, can cope with the normal stresses of life, can work productively and fruitfully, and is able to make a contribution to her or his community. Mental health is concerned with the process of adjustment of a person's potential in an expressed in a balanced way and motivation towards the goal. Hadfield considers that “In general terms we may say that mental health is the full harmonious functioning of the whole personality.” (Hadfield: mental and psychoneurosis, p-1).

Mental health is the springboard of thinking and communication skills, learning, emotional growth, resilience and self-esteem. It is how people think, feel, and act as they face life's situations. It affects how people handle stress, relate to one another, and make decisions. Mental health influences the way individuals look at themselves, their lives, and others in their lives. Like physical health, mental health is important at every stage of life. Adolescence is a wonderful time of life, filled with new feelings, a higher level of self-awareness and a sense of almost unlimited horizons to explore. It is a time of paradox. Adolescence can be defined as a transitional stage in human development in which the individual undergoes marked physiological, psychological and social changes in the process of growing from a child into an adult. Adolescence is commonly divided into three periods: early adolescence (11 – 14 years); middle adolescence (14 – 17 years) and late adolescence (17 – 20 years). Their mental health is really important and we need to help them to have good mental health.

Dr Margaret Chan, the WHO Director-General, described the new Comprehensive Mental Health Action Plan 2013–2020 as a landmark achievement: it focuses international attention on a long-neglected problem and is firmly rooted in the principles of human rights. The action plan calls for changes. It calls for a

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change in the attitudes that perpetuate stigma and discrimination that have isolated people since ancient times, and it calls for an expansion of services in order to promote greater efficiency in the use of resources.

The four major objectives of the action plan are to:

- Strengthen effective leadership and governance for mental health.
- Provide comprehensive, integrated and responsive mental health and social care services in community-based settings.
- Implement strategies for promotion and prevention in mental health.
- Strengthen information systems, evidence and research for mental health

For the first time, world leaders are recognizing the promotion of mental health and well-being, and the prevention and treatment of substance abuse, as health priorities within the global development agenda.

Within the health goal, two targets are directly related to mental health and substance abuse. Target 3.4 requests that countries: “By 2030, reduce by one third premature mortality from non-communicable diseases through prevention and treatment and promote mental health and well-being.

Review of literature

Srinivas (1999) indicate that in adequate study facilities, fear of failure, teacher pupil relationship, inter personal inadequacy are the reasons for academic stress in the students. Sood. P (1998) concluded that, students low on stress used more direct coping strategies. Girls more often used direct coping and suppression as coping strategies when compared to Boys. Biswas et al (1995) concluded that the disturbed group children experienced more adjustment problems in area of health, school and home with higher number stressful life events. K. Dubat & others (2007) stated that the adolescents experienced stress in the categories of family stress, ego threat, bereavement, personal set back, health and other issues. Dr. V. Srikanth Reddy & others (2005) highlighted that adolescent girls experienced less stress when compared to adolescent boys.

2. Research Methodology

Objectives of the study

The present study has been undertaken having the following objectives in mind.

1. To study the level of mental health of higher secondary school students.
2. To find out the difference between Gender and level of mental health
3. To find out the difference between family type and level of mental health

Hypotheses of the study

Based on the above objectives the following hypotheses have been framed.

1. The level of mental health of high school students is moderate.
2. There is no significant difference between gender in their level of mental health.
3. There is no significant difference between family type of the respondents and their level of mental health.

Methodology

In order to achieve the objectives of the present investigation, survey method was employed. The researcher has adopted descriptive research design.

Sample

For the study, respondents were selected randomly from one of the private hr. sec. school, in Dharmapuri. The data was collected from 100 adolescents of both sexes (Male & Female) of 11th & 12th std students.

Tools of data collection

In this study, For the purpose of data collection the standardized questionnaire was used to collect the data from the respondents. Mental health battery by Dr. Arun Kumar Singh scale was used for data collection. In the present study the variable of mental health has been analyzed through five health indices – emotional stability, over all adjustment, autonomy, security – insecurity and self-concept.

Statistical techniques used

To analyse and interpret data, the statistical techniques such as mean, standard deviation and ‘z’ – test were used.

Analysis and interpretation of data

For analysis and interpretation of data, the relevant input and analytical findings and inference derived have been presented in different tables and diagrams.
It is observed from the figure 1 that 42 percent of the respondents have moderate level of mental health. Therefore hypothesis – 1 that “the level of mental health of respondents is moderate” is accepted.

From the above table using ‘Z’ test it is found that there is no significant difference between the gender with the level of mental health of the respondents. Hence hypothesis 2 is proved that gender has no significant difference in the level of the mental health of the respondents.

From the above table using ‘Z’ test it is found that there is no significant difference between the family type with the level of mental health of the respondents. Hence hypothesis 3 is proved that family type has no significant difference in the level of the mental health of the respondents.

Findings of the study
- 84 percent of the respondents were age group between 15-16 years.
- 67 percent of the respondent’s family has their own business.
- 43 percent of the respondent’s mothers were illiterate.
65 percent of the respondents’ mothers are housewives.
79 percent of the respondents are from nuclear family.
42 percent of the respondents have moderate level of mental health.
There is no significant difference between the gender with the level of mental health of the respondents.
There is no significant difference between the family type with the level of mental health of the respondents.

4. Discussion and Conclusion
Discussion
While analyzing the mean scores, it is found that male respondents have little more level of mental health in the dimensions of emotional stability and overall adjustment than female respondents. It’s found that female respondents have little more level of mental health in the dimension of autonomy and security – insecurity than male respondents. It is found that the both male respondents and female respondents have equal level of mental health in the dimension of self-concept. Based on the mean score it is identified that in the dimension of overall mental health, respondents from male and female seems to have almost equal amount of mental health level.

While analyzing the mean scores, it is found that in the dimensions of emotional stability, autonomy and self-concept mental health level of respondents who are from joint family and nuclear family has equal level of mental health. In the dimensions of overall adjustment respondents who are from nuclear family have more mental health level. In the dimensions of security – insecurity respondents who are from joint family have more mental health level. Based on the mean score it is identified that in the dimension of overall mental health respondents from joint family and nuclear family seems to have almost equal amount of mental health level.

Conclusion
Mental health is very important factor for higher secondary school students as they are in the turning point of their life in academic aspect and personal aspect. This study reveals that the higher secondary school students have moderate level of mental health. The educational institution can device certain programs to enhance the level of mental health of the students.

References:
Suicide Attempts among Women: An Analysis of Case Studies

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Abstract
71.2% of suicide deaths among women in India were in the 15-39 age group and married women account for the highest proportion of suicide deaths in India. Suicide attempts among women need to be addressed and understand their crying for help. The objectives of the study are (i) to study the socio demographic characteristics of the respondents, (ii) to know the method of suicide attempts, (iii) to know the reason or the factors behind their suicide attempts, (iv) to understand the care from family and society and (v) to provide suitable suggestions and social work interventions. The researcher adopted case study method by an intensive qualitative analysis with descriptive in nature. The data was gathered from the women respondents who were attempted suicide and hospitalised for their suicide attempts. Empowerment of women in education and employment bring changes in the society. Suicide attempts with or without intention need help and interventions to prevent women from future suicide completion.

Keywords: Suicide attempt, Women, Case Study

1. Introduction
Suicide is a multifactorial disease. Every year close to 800 000 people die due to suicide and 18th leading cause of death in 2016. For every suicide, there may be more than 20 suicide attempts which indicate that a prior suicide attempt is the single most important risk factor for suicide in the general population (WHO, 2016). 2.5 lakh Indians committed suicide in 2016 and women in India accounting for nearly 37% of suicides across the world. 71.2% of suicide deaths among women in India were in the 15-39 age group and married women account for the highest proportion of suicide deaths in India (Dandona, 2018). In India, suicide attempts are common among women due to psycho social stressors such as arranged and early marriage, young motherhood, low social status, domestic violence, and economic dependence. (Vijaya Kumar L, 2015). Significance of the study
Various studies are evident that suicide attempts are common among women than men and suicide attempts are the predictive factor for future suicide completion. The couple relationship problem, family problem, dowry disputes, economic problem and alcoholism in a family are the triggering factors for women to attempt suicide. Suicide attempts with or without intention among women need to be addressed and understand their crying for help. Hence the present study helps to understand the factors behind the suicide attempts.

Reviews
Vijayakumar L (2015) stated that suicide is a global public health problem. Approximately one million people die by suicide, 10–20 million people attempt suicide. The burden of female suicidal behaviour, in terms of total burden of morbidity and mortality combined, is more in women than in men. Women's greater vulnerability to suicidal behaviour is likely to be due to gender related vulnerability to psychopathology and to psychosocial stressors. Suicide prevention programmes should incorporate woman specific strategies. More research on suicidal behaviour in women particularly in developing countries are needed.
Radhakrishnan and Andrade (2012)explored the historical, epidemiological and demographic factors of suicide in India and examined the strategies aimed at the prevention of suicide. Marital status is not a protective and the female: male ratio in the rate of suicide is higher. Attempted suicide was as high as 1.2 times higher in women relative to men. Widowed, separated and divorced individuals were commoner among cases of completed suicide and young married women were common among cases of attempted suicide. Preventive strategies can be implemented at a community level and identifying vulnerable individual maybe more effective than global strategies.

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2. Materials and Methods

The case study aims (i) to study the socio demographic characteristics of the respondents, (ii) to know the method of suicide attempts, (iii) to know the reason or the factors behind their suicide attempts, (iv) to understand the care from family and society and (v) to provide suitable suggestions and social work interventions. The researcher adopted case study method by an intensive qualitative analysis with descriptive in nature. The data was gathered from the women respondents who were attempted suicide and hospitalised for their suicide attempts. By adopting In-depth interview, data was collected from the respondents. The respondents are three women who were attempted suicide and hospitalised due to family conflict, infidelity and alcoholism of spouse. Case study format described by Budgell (2008); Boeije (2010) was followed for this case study presentation.

Case Study 1

Introduction

Mrs. A, 19 years old, studied up to 12th standard, married her mother’s brother, 2nd trimester pregnant women, belonged to lower middle class and living in extended family.

Case presentation

The researcher recognised the factors that led to the respondent’s to attempt suicide. She consumed cow dunk powder to commit suicide due to family conflict. The age difference between her and her husband is 12 years. Even though she pampered and brought up in the same family, she expressed her disinterest towards marriage. Her parents advised and compelled her for marriage because her husband is getting old. Her wish was to study well and get employed. She seems underweight due to lack of nourishment since unwanted pregnancy. On the day of suicide attempts, she had quarrel with her husband due to burden of household chores. She consumed cow dunk powder and conveyed her suicidal act. The family members rushed to nearby PHC and transferred to General hospital because of her pregnancy. She was convinced by her parents and family members. She feels shame and guilty of her suicidal act.

Outcome

The case revealed that she expressed her interest to study well and get employed. The underweight shows that she does not want to be pregnant. Her parents pushed her into social and financially dependent to her husband. She may be impulsive to get attention and depressive due to unwanted pregnancy.

Discussions

Because of socio cultural constraints, she is indecisive about her future even though her parents and family members are supportive. Various studies are evident that pregnancy is protective factor among women, but this case study showed that unwanted pregnancy is the reason to attempt suicide.

Case Study 2

Introduction

Mrs. B, 32 years old, studied up to 4th standard, mother of two, residing in rural area and working as daily wage labourer.

Case presentation

The researcher recognised the factors that led to the respondent’s to attempt suicide. She consumed pesticide poisoning due to alcoholic spouse. She and her husband used to go for stone cutting work in quarry. Sometimes, they do not get regular work. Meanwhile, her husband spends his earnings fully for alcohol and not supporting family financially. She finds it difficult to manage her household expenditures. She feels depressed to cope with her poor economic conditions and frequent quarrels due to her husband’s addiction to alcohol. On the day of her suicide attempts, she had conflict with her husband and literally she was beaten up by her husband. She found unconscious by her mother and rushed to PHC and transferred to General Hospital because of her pregnancy. She was convinced by her parents and family members. She feels shame and guilty of her suicidal act.

Outcome

The case revealed that poor socio economic condition and alcohol addiction of her husband are the major reasons for her suicide attempt. Her husband is not co-operative either to quit alcohol by de addiction treatment or giving his earnings to the family.

Discussions

Alcoholism in a family is the reason for conflict between husband and wife, relationship problem, physical abuse, verbal abuse and financial problems which results adverse effects among family members.
Case Study 3

Introduction
Mrs. C, 36 years old, studied up to 8th standard, mother of two, home maker and residing in urban area.

Case presentation
The researcher recognized the factors that led to the respondent’s to attempt suicide. She consumed drug overdose due to infidelity of her spouse. She had frequent conflict with her husband due to her husband’s extra marital affair. She expressed her anger through quarrel with her husband and his girlfriend. She depressed because of her husband’s affair. On the day of her suicide attempt, she quarreled with her husband’s girlfriend and for the same, she was beaten up by her husband. She consumed all the available pills in front of her husband to commit suicide. They rushed to nearby private hospital and transferred to General Hospital. She reported that ‘I want to die’ and ‘I do not want to leave my husband to another woman’. Then she realized her suicide attempts as a guilt ’My children become abandoned, if I die’.

Outcome
The case revealed that husband’s extra marital affair is the major reason for her suicide attempt. The primary level of education is not adequate for her to get employed and became economically independent. Her husband is not co-operative.

Discussions
Women are socially and financially dependent towards her husband because of socio structural and socio cultural constraints. Women must be empowered in education and employment.

3. Suggestions and Social work Interventions
It is urgent need of effective and evidence-based interventions to address suicide and suicide attempts among women. The following are the major suggestions and social work interventions to prevent suicide.

- Socio economic and cultural determinants of suicide must be addressed at community level.
- Empowerment of women in education and employment bring changes in the society.
- Family support acts as protective factor for suicide. Hence family counselling can be provided to the family members to identify the warning signs and provide emotional support.
- Social networks and good social skills can be enhanced among women to overcome their depression.
- Removal or Restriction to access the hazardous pesticides and drugs may be helpful to prevent suicide.

4. Conclusion
Effective Strategies and Interventions are needed at national level to prevent suicide and suicide attempts. Early identification and multifactorial interventions are helpful. Suicide attempts with or without intention need help and interventions to prevent women from future suicide completion.

References
Psycho-Social Wellbeing of Orphan Children in Tiruchirappalli District

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Abstract
The Juvenile Justice (Care and Protection of Children) Act, 2015 has paved a way to improve the psychological and social well-being of the Children who are in need of care and protection. This act comes to aid of orphan children and help them to improve their psycho-social wellbeing through various means. The objective of this research paper is to analyse the psycho-social wellbeing of orphan children with special reference to Tiruchirappalli District. The researcher has adopted qualitative approach and the paper is descriptive in nature. The researcher has used Secondary Source to draft the paper. The research article will reveal the measures taken by child welfare stakeholders and child care institutions that are involved in the well being of orphan children. The other information are discussed in detail in the full paper.

Keywords: JJ Act; Stakeholders; Orphans; Well being.

1. Introduction
Orphans are said to be Children of God but they lack love and care from the people in reality. They lack psychological and social support, keeping this in mind the government has partnered with various NGOs and has been working on enhancing the psycho-social wellbeing of the Orphans.

According to UNICEF and global partners define an orphan as a child under 18 years of age who has lost one or both parents to any cause of death. By this definition, there were nearly 140 million orphans globally in 2015, including 61 million in Asia, 52 million in Africa, 10 million in Latin America and the Caribbean, and 7.3 million in Eastern Europe and Central Asia. This large figure represents not only children who have lost both parents, but also those who have lost a father but have a surviving mother or have lost their mother but have a surviving father. Of the nearly 140 million children classified as orphans, 15.1 million have lost both parents, but also those who have lost a father but have a surviving mother or have lost their mother but have a surviving father. Of the nearly 140 million children classified as orphans, 15.1 million have lost both parents. Evidence clearly shows that the vast majority of orphans are living with a surviving parent grandparent, or other family member. 95 per cent of all orphans are over the age of five.

A new study by an international charity for orphaned and abandoned children found that India is home to 20 million orphans, a figure projected to increase by 2021. A new study by an international children’s charity has found that 4 per cent of India’s child population of 20 million are orphans. Most of these children have been abandoned by their parents. In fact, the charity estimates that only 0.3 per cent of these orphans are children whose parents have actually died (National Family Health Survey-3 (2005-2006)). Under the terms of the study, “orphans” was defined as a child who has been abandoned or has lost both parents.

The high proportion of abandoned children among orphans highlights the fact that poverty is a major reason behind the situation. Indeed, the study found that states such as Uttar Pradesh, Bihar and West Bengal had more orphans than India’s richer states. Generally, the country’s central and eastern regions were found to be worse affected than the north and the south. Orphaned children are greatly in need of care in protection, being among the most vulnerable to poverty, child labour and child trafficking. Governmental and non-governmental agencies working on child rights must jointly work towards addressing the needs of these children by providing them with nutrition, education and protection. Save the Children, India’s leading child rights NGO believes in empowering communities with the capabilities to provide basic care to children. It is enabling families to access essential information, nutrition, and health care services. Institutional care should be the last resort, the NGO believes. The Childline India foundation has provided a toll free emergency services for children need of Care and protection (Toll free Number 1098) National Family Health Survey-3 (2005-2006).

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Review of Literature

(Muluken et al 2018) Of 370 children, 185 (50%) were orphans. Among orphaned children, only 62 (33.5%) scored high on the total psychological wellbeing scale whereas 107 (37.8%) of their non-orphaned peers scored highly. The non-orphaned children had about 10.8 higher mean psychological wellbeing scores than their orphan counterparts (P<0.001). The mean (±SD) psychological wellbeing of the non-orphaned children was 164.0 (17.2) vs. 153.2 (17.2) in the orphaned group.

(Azoulay Y 2014) Orphan children experience high rates of psychological problems and social problems with his own life or others he /she kept under isolated from the society. In general, Orphan children seem socially deprived and they tend to encounter higher emotional distress, hopelessness, depressive and anger than non-orphan children.

(G. Padmaja 2014) Most of the research conclusively states that institutionalization of children has an adverse impact on their development, growth, and health. Institutionalized care becomes the only option to some children owing to several conditions like poverty, helplessness and others. Under such circumstances it is believed that institutional care is beneficial to them and a better option than home based care. The present study was intended to determine the role of type of care and gender on psychosocial problems and wellbeing in children.

2. Research Methodology

Objectives

- To analyze the psycho-social wellbeing status of the orphan children
- To examine the welfare measures provided by the government

The researcher has used qualitative approach and the design adopted is Descriptive. The researcher has used secondary data to explain the psycho social wellbeing condition of the orphans; the data was retrieved from Books, Journals, News article and online articles.

Role of Government and NGOs

The role of government and NGOs are enormous in the life the orphans an it is discussed briefly below

Integrated child protection scheme (ICPS):

ICPS brings together multiple existing child protection schemes of the Ministry under one comprehensive umbrella, and integrates additional interventions for protecting children and preventing harm. ICPS, therefore, would institutionalize essential services and strengthen structures, enhance capacities at all levels, create database and knowledge base for child protection services, strengthen child protection at family and community level, ensure appropriate inter-sectoral response at all levels.

The scheme would set up a child protection data management system to formulate and implement effective intervention strategies and monitor their outcomes. Regular evaluation of the programmes and structures would be conducted and course correction would be undertaken.

Child Welfare Committee:

CWCs are the most critical district-level bodies for ensuring appropriate implementation of the JJ Act. The law empowers CWCs to be the final authority for the care, treatment, protection, development and rehabilitation of children in need of care and protection and for disposing all complaints related to these children while ensuring that their basic rights and needs are met. In the current setting as has been detailed above, it is therefore vital to focus on the ways in which the CWCs can be strengthened to perform their responsibilities with greater efficiency.

Child Welfare Police Officer and Special Juvenile Police Unit.

1. In every police station, at least one officer, not below the rank of assistant sub-inspector, with aptitude, appropriate training and orientation may be designated as the child welfare police officer to exclusively deal with children either as victims or perpetrators, in co-ordination with the police, voluntary and non-governmental organizations.
2. To co-ordinate all functions of police related to children, the State Government shall constitute Special Juvenile Police Units in each district and city, headed by a police officer not below the rank of a Deputy Superintendent of Police or above and consisting of all police officers designated under sub-section (1) and two social workers having experience of working in the field of child welfare, of whom one shall be a woman.

3. All police officers of the Special Juvenile Police Units shall be provided special training, especially at induction as child welfare police officer, to enable them to perform their functions more effectively.

4. Special Juvenile Police Unit also includes Railway police dealing with children.

District Child Protection Unit (DCPU)

ICPS envisages setting up a District Child Protection Unit (DCPU) in each district as a fundamental unit for the implementation of the scheme. Every district shall have a District Child Protection Unit (DCPU) under the Chairpersonship of the Chairperson, District Magistrate. District Child Protection unit has been established in each District from July 2012.

Role of Social worker as a counselor in ensuring the wellbeing of Orphans

- Receive referrals from the person-in-charge for children who require constant counseling sessions.
- The counselor should provide inputs on each child being counseled during the monthly Management Committee meeting.
- The counseling should inform the Probation Officer/case worker/CWO and in case the child shows symptoms of any psychological ailment/condition and a decision on the next course of action should be taken by the Superintendent/Person-in-charge with the requisite approvals from the Board/Children's Court.
- The counselor should give inputs to the Probation Officer/CWO/case worker for each child receiving counsel or as required—periodic reports to the Board/Children's Court, while updating the case file, for modification of ICP.
- The counselor should ensure the child’s rights are safeguarded and the child is in a safety environment

3. Discussion and Conclusion

In the present world, children face a lot of problem despite being with parents or guardians. The situation of orphan children is much worse than them. The Juvenile Justice Act 2015, the child protection stakeholders and the NGOs, Child care institutions play a vital role in ensuring the psycho social wellbeing of the orphan children. They ensure they are rescued and submitted before the child welfare committee, followed by admitting them in the right child care institutions and ensure their education and psycho social wellbeing in our society. As mentioned above the role of social worker is not limited to counseling but they also ensure periodical support care services.

References

Alternative Occupation to Women Employees in Fire Work Industries - The Need of the Hour

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Dr. S. Sangeeta**

Abstract
Society has become highly competitive and technologically advanced ever before. The life style of people has changed significantly. To cope up this phenomenon, people in all walks of life, irrespective of gender, are force to engage in some occupation based on their education, experience and skills. People in fire work industries, especially women, are not exempted from this new phenomenon. At present, fire work industries have closed down due to the uncertainty created by the ban on firecrackers. The ban on firecrackers has turn out to be an unavoidable and sensitive issue and it has become the cause for several inconveniences in the lives of women employees in the fire work industries. In this paper, the effects of ban on crackers on the livelihood of women employees, socio economic problems of women employees, efforts taken to address the issue are analysed critically and possible alternative occupations are identified. Well-designed pre-test questionnaires are used for data collection of primary data. The required primary data of this study has been collected from 30 women employees in fire work industries in and around Sivakasi. The nature of the universe is homogenous and the issue could be studied further with greater intensity. Hence, the researcher adopted the convenient sampling method and the sampling size has been restricted. The nature of the study is descriptive. Statistical tools like cross table, chi – square test have been used to analyse the collected data. Findings and suggestions will be discussed in the full paper.

Keywords: Alternative occupation; Women employee; Social work perspective;

1. Introduction
Women are at the heart of development. In general, the contribution of women employees, in the process of growth and development of the nation, is highly commendable. Today, educated women have made a landmark in the non-conventional fields like consultancy, marketing, advertising, garment exporting, and interior decoration and in considerable higher category occupations like civil service, judiciary, Foreign Service, medicine, architecture and in organized sectors like banking, insurance, communication and air transport etc. They are marching towards their self-development and financial independence.

However, the scenario is not the same for the women employees in firework industries. Due to lack of education and professional skills, they face a lot of problems in seeking employment. They are usually below the executive level, hired by another to perform a service especially for wages or salary to uphold their families and their livelihood. They remain significantly poor and far less legally protected. Moreover, the ban on crackers made them to lose their occupation and face a lot of inconveniences in their day-to-day lives. This study tries to analyse their present condition and suggest some alternative occupations through which their livelihood will be enhanced.

Review of Literature
Prabhu, M. (2018) in ancient India, particularly during the Vedic period, women enjoyed a high status in the society. In the post Vedic period, the status of women declined. Problems like child marriage, polygamy and dowry system that entered in the social system during the Mauriyas and Guptas period degraded the status of women in the society. The efforts of social reformers helped considerably to liberate Indian women from the various social issues. The government of India has taken enormous efforts to improve the status of women. The six and seventh five year plans made converted attempts to improve the socio-economic conditions of women as well as the various constrains which hindered women’s progress.

Women in the workforce, earning wages or salary, are part of a modern phenomenon. Since women comprise half of the world population, any growth and development lay on the contribution of women workforce. Production of firecrackers is one of the major segments which engage direct and indirect employment. The role of the women in firework industries cannot be isolated. Lack of water and failure of monsoon, lack of education and professional skills, poverty, less physical involvement are some of the causes

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which force them to work in the firework industries in spite of knowing well that by nature they are hazardous industries.

Statement of the Problem

The government of India is keen on women empowerment. Developmental schemes and policies are being implemented to accomplish the purpose. Voluntary organizations like NGO’s, CBO’s and other civil societies played a very vital role in the promotion and development of the economy. It is well known to be a hazardous industry. Sivakasi, one of the Taluk headquarters of Virudhunagar district in the state of Tamil Nadu, accounts for 90% of fireworks production of the nation. The ban of online selling of the firecrackers and the direction laid down by the Supreme Court of India on bursting firecrackers for the festival of Diwali, Christmas and New Year celebrations on the ground of air pollution and health of the citizens made the proprietors to shut their 840 firework industries in and around Sivakasi which is the hub of firework industries in India. Almost 8 lakh employees, who involved either directly or indirectly in manufacturing firecrackers, have lost their job. These employees are mostly unskilled workers and they are neither educationally qualified nor technically experienced. They could learn and get knowledge only by doing the work. They get wages on the basis of their performance in terms of output or by time.

The socio-economic profile of the person in the society is determined by the type of occupation in which s/he gets involved. Having no occupation implies that s/he is in the state of vulnerability and incapability of earning stable income to the family, losing one’s own identity in the society, indignity in life and become incompetent of achieving the goals and aspiration in life. Hence, the present scenario of having women employees in fire work industries becomes significant. Moreover, it also invites for a scientific study and for a critical analysis to explore innovative strategies for the identification of alternative occupation for women with which they could retain the stable revenue to the family and have a dignified life in the society.

Objectives

- To study the socio and economic profile of the women employees in fire work industries in and around Sivakasi.
- To analyse the effect of the ban on the firecrackers on the livelihood of the women employees in fire work industries.
- To identify alternative occupation for women employees in fire work industries.

Hypothesis of the Study

1. There is no association between the adequate salary and the saving of the respondents.
2. There is no association between the adequate salary and the advance the respondents receive from the organization.
3. There is no association between the adequate salary and the family well-being of the respondents.

Important Definitions

Alternative Occupation

Alternative occupation is defined as ‘a state or position in the same or a related field to the original occupation’.

Women Employees

Women employees are ‘a group of people involving themselves in the activities or workforce in view of earning wages or salary for the sustenance of their family and livelihood’.

Social Work Perspective

Social work perspective means ‘thinking or viewing in a wise and reasonable way about a situation or problem that affects people based on the social work principle’.

2. Methodology

The universe of the study is women employees in firework industries in and around Sivakasi in Virudhunagar district. Standard questionnaire was prepared; pre-test was conducted and incorporated the necessary correction. Convenient sampling technique was adapted and the primary data were collected from
30 women employees who had worked in different firework industries near Sivakasi by using the interview schedule method by standard questionnaire. The secondary data for this study were collected from books, journals, research articles, leading newspapers, articles from workshops and digital media. Collected data were processed and edited with the help of the computer. Cross tables and Chi-Square test were used to analyse the data to find the percentage of the variance and the statistical significance of differences observed between two equivalent sets of categories, which resulted from the field survey and experiment.

Limitations of the Study
- Firework industry provides employment opportunity for both men and women. Nevertheless, this study is confined only to women employees.
- The data collected from the sample respondents were first hand information. In the course of the field survey, some of the respondents were indifferent in providing data.
- Since the area of the study is contemporary and very sensitive, it was difficult for the researcher to collect the review of the literature.

3. Results and Analysis

<table>
<thead>
<tr>
<th>Categories</th>
<th>Number of Respondents</th>
<th>Percentage (%)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Age (31-40 &amp; above)</td>
<td>26</td>
<td>86.66</td>
</tr>
<tr>
<td>Education (Below 10th)</td>
<td>25</td>
<td>83.33</td>
</tr>
<tr>
<td>Occupation (Daily wagers)</td>
<td>30</td>
<td>100</td>
</tr>
<tr>
<td>Marital Status (Married)</td>
<td>30</td>
<td>100</td>
</tr>
<tr>
<td>Type of family (Nuclear)</td>
<td>28</td>
<td>93.33</td>
</tr>
<tr>
<td>Annual Income (Below Rs. 1,00,00,000)</td>
<td>30</td>
<td>100</td>
</tr>
</tbody>
</table>

The above table clearly elucidates the demographic details of the sample respondents. It is found that 86.66% of the respondents are in the age group of 31 to 40 above. 83.33% of the respondents have done their primary education. 100% of the respondents are daily coolies and all of them are married. 93.33 % of the respondents are belonging to the nuclear family. The annual income of the respondents is below Rs. 100,000. Hence the socio and economic profile of the respondents are relatively low.

<table>
<thead>
<tr>
<th>Problems Faced by the Respondents</th>
<th>Yes</th>
<th>Percentage (%)</th>
<th>No</th>
<th>Percentage (%)</th>
<th>Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>Chronic Respiratory Problems</td>
<td>15</td>
<td>50.00</td>
<td>15</td>
<td>50.00</td>
<td>30</td>
</tr>
<tr>
<td>Back/Joint Pain</td>
<td>30</td>
<td>100.00</td>
<td>0</td>
<td>0.00</td>
<td>30</td>
</tr>
<tr>
<td>Skin Problem</td>
<td>18</td>
<td>60.00</td>
<td>12</td>
<td>40.00</td>
<td>30</td>
</tr>
<tr>
<td>Eye Infection</td>
<td>15</td>
<td>50.00</td>
<td>15</td>
<td>50.00</td>
<td>30</td>
</tr>
</tbody>
</table>

The above table reveals the various health problems faced by the respondents. It is found that 100% of the respondents are affected by back or joint pain, followed by 60% of the respondents are affected by skin problems and 50% of the respondents are facing chronic respiratory problems and eye infection. Hence, it can be concluded that every respondent working in the firework industries in and around Sivakasi is affected by some health problems.

<table>
<thead>
<tr>
<th>Adequate Salary</th>
<th>Savings</th>
<th>Total</th>
<th>Percentage (%)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Yes</td>
<td>15</td>
<td>17</td>
<td>57</td>
</tr>
<tr>
<td>No</td>
<td>0</td>
<td>13</td>
<td>43</td>
</tr>
<tr>
<td>Total</td>
<td>15</td>
<td>30</td>
<td>100</td>
</tr>
</tbody>
</table>

Chi-Square value = 22.941 df = 1 Sig = .000
The chi-square test was applied to examine the association of two variables namely, adequate salary and their savings. The result shows that these variables were found to be at highly significant level (P< 0.001). Therefore, the null hypothesis is rejected.

**Table 4. Cross Tabulation between Adequate Salary and Advance**

<table>
<thead>
<tr>
<th>Adequate Salary</th>
<th>Advance</th>
<th>Total</th>
<th>Percentage (%)</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Yes</td>
<td>No</td>
<td></td>
</tr>
<tr>
<td>Yes</td>
<td>16</td>
<td>1</td>
<td>17</td>
</tr>
<tr>
<td>No</td>
<td>1</td>
<td>12</td>
<td>13</td>
</tr>
<tr>
<td>Total</td>
<td>17</td>
<td>13</td>
<td>30</td>
</tr>
</tbody>
</table>

Chi-Square value = 22.408  df = 1  Sig = .000

The chi-square test was applied to examine the association of two variables namely, adequate salary and getting advance from the organization. The result shows that these variables were found to be at highly significant level (P< 0.001). Therefore, the null hypothesis is rejected.

**Table 5. Cross Tabulation between Adequate Salary and Family Well-being**

<table>
<thead>
<tr>
<th>Adequate Salary</th>
<th>Family Well-being</th>
<th>Total</th>
<th>Percentage (%)</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Yes</td>
<td>No</td>
<td></td>
</tr>
<tr>
<td>Yes</td>
<td>15</td>
<td>02</td>
<td>17</td>
</tr>
<tr>
<td>No</td>
<td>00</td>
<td>13</td>
<td>13</td>
</tr>
<tr>
<td>Total</td>
<td>15</td>
<td>15</td>
<td>30</td>
</tr>
</tbody>
</table>

Chi-Square value = 22.941  df = 1  Sig = .000

The Chi-square test was applied to examine the association of two variables namely, adequate salary and family well-being. The result shows that these variables were found to be at highly significant level (P< 0.001). Therefore, the null hypothesis is rejected.

Main Findings
- The socio-economic profile of the respondents is relatively low.
- Respondents are affected by many health problems such as chronic respiratory, back/joint pain, skin problem, and eye infection.
- Salary or wages of the respondents is just sufficient to meet the both ends. Hence, the respondents find difficult to save for their future and sustain their families.
- The respondents have lost their occupation as the consequence of the restriction on bursting and online selling of the firecrackers.
- Due to lack of education and professional skills, the respondents become incapable of finding any other alternative occupations for their livelihood.
- The respondents are in need of alternative occupation with a greater gender justice.

4. Suggestions and Conclusion

Suggestions
- Skill trainings and income generation programmes could be introduced for the well-being of the respondents.
- The fire work industries could organize health related programmes frequently to provide better health facilities and to avoid employee’s turnover.
- Adequate salary and other welfare schemes such as annual increment, special incentives, and medical insurance are to be provided on a regular basis to ensure better future for the family of the respondents.
- The government needs to enter into dialogue with the proprietors of the industries to tackle the issue amicably.
- The government could explore possible alternative occupation with greater gender justice for women employees in firework industries.

Conclusion
The life condition of women employees in firework industries would be definitely enhanced when the above mentioned suggestions, and efforts at various level like women employees, proprietors of the industries, government departments, NGO’s and other voluntary organizations, etc., are synergized. A willingness to take
up alternative occupation among the women employees in firework industries and a workable co-operation among these people could produce the desirable results.

References
Abstract

Transgender people are individuals of sex whose appearance, personal characteristics or behaviors differ from stereotype about how men and women are supposed to be. They have strength like men and intelligence like women so they can do any work. The transgender mostly fulfill their everyday needs by performing sex work or by seeking alms or through begging in public places like railway station, moving train, in the market places and in shopping complexes etc. They are mostly facing the problems in society like unemployment, no public toilet, and lack of education facilities. Unemployment is the major issue of transgender. Almost half of the transgender people are unemployed due to lack of job opportunities and many settled for dismal salaries. No federal law provide explicit legal protection for transgender workers based on gender identity as a result transgender works face high rates of unemployment. So in this process every transgender is not only faced with struggle and hardship for existence but also vulnerable to ragging, criticism etc. The companies should encourage trans people to apply for jobs. This paper describe about the problems faced by the transgender and measures that can be taken to regain their role in the society.

Keywords: Legal, job opportunities, unemployment.

1. Introduction

The contemporary term ‘transgender’ arose in the mid 90’s, transgender is an umbrella term used to describe people whose gender whose identity or expression does not conform to that typically associated with the sex they were born as or assigned to at birth. This includes transsexuals, cross-dressers and people who feel like their biological sex fails to reflect their true gender. People who do not identity as transgender can be called as ‘cisgender’.

They suffer from scrutiny and judgments from their peers, and thus many hide their identity from family and society. Unlike any other community the transgender community is pushed out of their homes during teenagers. This is one of the common prejudice present in society because of which people disown their children to suffer alone in this world. They can identify the change of physical appearance in the age of 12-15. Their normal life is the biggest struggle in the society. They live in groups of their own community for safety, security and creating artificial family. The festival that takes place at the koothandavar temple dedicated to aravan. The participants marry the lord koothandavar reenacting an ancient myth of lord Vishnu/Krishna who married him after taking the form of a women called mohini. The next day of the festival they make them widows in the temple itself. In the olden days, they were trusted to be guards for the women even in the royal families. During mughal rule Tran’s people were given important posts of security and decision making. In Hindu mythology, there were trans people who were called kinnars. they were placed alongside yakshas and gandharvas. Also we come across characters like shikandi, ila, mohini etc to name a few important roles. The ardhnareshivara form of divine energy created by merging Shiva and parvati is worshipped in Hinduism.

If you ask people in India what they know about transgender people, most of them only answer that they have seen them begging near traffic signals & inside trains. Some start complaining about their ‘bad’ behaviour. This is the harsh reality for many trans people in India. But the fact we often ignore or don’t even realize is that directly or indirectly we as a society are responsible for their condition. Being disowned by their own families’ harsh treatments from other people is society leads to their so called ‘bad’ behaviour. Lack of access to education & non availability of jobs often forces them to take begging and prostitution. But still almost all these adversities there are some transgender persons who are brave enough to make their way to the main stream, achieve their goals and prove that trans people are capable and deserving as any other Indian thus breaking the stereotype. It takes a lot of strength for trans-people to come to terms with who they are many trans people feel depressed when they are figuring out how to deal with gender misalignment or dysphoria. trying to achieve their dreams in a country where people routinely mock and harass them makes their life even more difficult.

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Some people are polite enough and feel sympathy or pity towards Tran’s people but never do anything helpful for them. It's really sad that it took so long for Tran’s people to get their legal recognition in India. Many transgender speak a language of their own which is derived majorly from Urdu. The language is called ‘hijra farsi’. This is far from the truth. While those who are ignorant and insensitive often use hijra as a derogatory term to mock and abuse effeminate boys & transgender individuals. Most people in India don’t realize that the hijra community is a socio-culture community comprising of transgender people who may belong to India and even a few neighboring countries. They have their own set of rules, customs and only a transgender person who accepts to become a part of their community can only be called ahijra. While not all transgender may follow this ritual but as per their tradition, a hijra’s funeral is carried out at night and no one other than their own community can be present. It is superstition that if anyone else sees the ritual, they will be born as one in their next birth. Thus every transgender person is not a hijra.

Gender equality

The Gender Equality places an obligation on public bodies to have due regard to the need to eliminate unlawful discrimination and harassment, including gender reassignment discrimination and harassment, and to promote equality of opportunity between women and men. It applies to transsexual people with respect to employment and vocational training and in the context of goods, facilities and services. Although trans men and women will benefit from the general requirement to promote equality of opportunity between men and women, there is currently no equivalent duty to promote equality of opportunity for those intending to undergo, undergoing or who have undergone gender reassignment. This omission was a political decision when the gender duty was introduced in the Equality Act 2006, but is likely to be addressed in the forthcoming Equality Bill.

Meaning of transgender

Transgender people have a gender identity or gender expression that differs from their assigned sex. Transgender people are sometimes called transsexual if they desire medical assistance to transition from one sex to another.

Definition

“Transgender” is an umbrella term that describes people whose gender identity or expression does not match the sex they were assigned at birth.

Review of literature

Lawrence (2004) contended a different connection between sexual orientation and gender identity. He examined autogynephilia, defined as “a male’s propensity to be sexually aroused by the thought or image of him as female”. This study also examines only biological males. Autogynephilia can be considered a sexual orientation of its own. Many autogynephiles are more than just sexually aroused by the idea of himself as female; he is comforted, inspired, and transformed to something that makes sense. GID may provide “the ‘push’ toward [SRS], … autogynephilic sexual desire provides the ‘pull’” (Lawrence, 2004, p. 75). The medical community accepts as a valid reason to pursue SRS (Lawrence, 2004). Autogynephiles meets the criteria set forth by the DSM-IV-TR for GID and the treatment that typically follows. The autogynephilia model is not without critics.

Herman (2013) studied on Gendered Restrooms and Minority Stress: The Public Regulation of Gender and its Impact on Transgender People’s Lives. Transgender and gender non-conforming people report being denied access to gendered restrooms, and experiencing verbal harassment and physical assault in these spaces at alarming rates. The Washington, DC- based survey, conducted with the DC Trans Coalition, found that 70 percent of survey respondents report experiencing verbal harassment, assault, and being denied access to public restrooms. The study identifies the impact that transgender people’s negative experiences in gendered restrooms can have on their education, employment, health, and participation in public life. Findings show that 27 percent of those who worked in Washington, DC, experienced problems using restrooms at work that, in some cases, caused them to change jobs or leave their employer entirely. 54 percent of all respondents reported having some sort of physical problem from trying to avoid using public restrooms, such as dehydration, kidney infections, and urinary tract infections. 58 percent reported that they have avoided going out in public due to a lack of safe public restroom facilities. 10 percent of survey respondents who attended school in Washington, DC, reported a negative impact on their education, including having excessive absences and dropping out of school due to issues related to restroom access. People of color and people who have not medically transitioned fared worse in some measured survey outcomes.

Mantia (2018) explicit transgender protections in the workplace are still relatively new. To enacted legislation allowing individuals to use their preferred name instead of their legal name, Mantia notes this is
amended the law that requires employers to provide mandatory anti-harassment training to employees, to require anti-harassment training focused on gender identity and expression, as well as sexual orientation. And the state Gender Recognition Act has legally acknowledged nonbinary gender. With this newly introduced legislation, she believes that more states and jurisdictions will be passing similar legislation in the future.

2. Research methodology
Secondary data was used for the research study. Library books, journals, newspaper clippings were referred. Descriptive research design was adopted

Problems faced by transgender people
1. Even when qualified recruiters are against employing them
2. No equality in public
3. Looked down as degraded and unworthy to live
4. Rejection of Entry directly or indirectly at some Public Places like Hospitals, Hotels, Malls, Restaurants, Dance Floors, Theaters, Shopping Complexes
5. Raped & Abused orally and physically
6. Forced to leave Parental Home if identified as a Transgender
7. Unwanted attention is given to their presence

3. Conclusion
Transgender suffer from scrutiny and judgments from their peers, and thus many hide their identity from family and society. Unlike any other gender, the transgender community is being pushed out of their homes during teenagers. This is one of the perception prevailing in society because of which people disown their children to suffer alone in this world. The measures that can be taken is to give a comprehensive sex education program should be included as a part of the school curricula that alters the heterosexist bias in education, vocational training centers should be established for giving the transgender new occupational opportunities. The media should issue guidelines to ensure sensitive and respectful treatment of these issues. One of the most important points is to change the attitude of the society and ignorance towards transgender.
Rehabilitation as a Social Work Intervention for Women Victims of Human Trafficking

S. Janani*

Abstract

Human trafficking involves recruitment, harboring or transporting people into a situation of exploitation through the use of violence, deception or coercion and forced to work against their will. In other words, trafficking is a process of enslaving people, coercing them into a situation with no way out, and exploiting them. People can be trafficked for many different forms of exploitation such as forced prostitution, forced labor, forced begging, forced criminality, domestic servitude, forced marriage, and forced organ removal. Women Victims were given importance since they were more vulnerable to trafficking. According to the United Nations Office for Drugs and Crime Estimates, 51% of identified victims of trafficking are women and 72% people exploited in the sex industry are women. There are so many other statistical data that prove Women are more vulnerable to Human Trafficking. Also, Women Victims are stigmatized and discriminated. They are facing physical, mental and economic challenges in their day to day life. This Conceptual study will give an overview on the rehabilitation of Women victims of Human Trafficking as a Social Work Intervention. Also, this study will help to understand the ways to prevent Human Trafficking.

Keywords: Human Trafficking; Social Work; Women Victims;

1. Introduction

Evolution of Human Trafficking

Human Trafficking involves exploitation of people without their knowledge for the purpose of prostitution, bonded labor, begging, forced criminality, domestic servitude, forced marriage, camel jockey, organ transplant and surrogacy. The United Nations defines “human trafficking as the recruitment, transportation, transfer, harboring, or receipt of persons by improper means (such as force, abduction, fraud, or coercion) for an improper purpose including forced labor or sexual exploitation”.

Human Trafficking has seen its evolution as form of Slavery in the beginning. In 1400, people from Africa have been transported to Portugal for being used as slaves. In 1600, many countries like Spain, North America, Holland, France, Sweden, Danmark, etc., have joined the European Slave Trade. In 1700, Humans were trafficked for sexual purpose which is called as ‘White Slavery’.

In 1800, the transatlantic slave trade was declared illegal. In 1910, around 13 countries joined together to make the White Slave trade illegal and signed the International Convention for the Suppression of White Slave Trade. After the World War I in 1927, League of Nations was formed in which women and children are identified as a vulnerable group.

Phases of Human Trafficking

➢ Origin
➢ Transit
➢ Destination

Origin is the place where the victims are identified and recruited. Transit is the exchange phase where the victims are detained for the purpose of transfer. Destination is the final phase where the Victims are completely and permanently exploited through various forms whereas in origin and Transit, the exploitation takes places temporarily for a short period. India is a country which is an Origin, Transit and Destination for Women subjected to Human Trafficking especially for Sexual Exploitation and Forced Labor.

Condition of Human Trafficking in Current Scenario

➢ According to United Nations Office on Drugs and Crime (UNODC), 79% of Human Trafficking involves sexual exploitation in which Women and Girl child are the risk group. The most pathetic situation is that women are mostly trafficked by Women rather than Men.

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Around 30 million women have been trafficked in South East Asia in the last decade.

Around 35,000 children have been reported missing in 2011 in India out of which 11,000 children are from West Bengal.

It is estimated that every year, around 300 Human Trafficking cases has been reported in the states of South India.

In India, Human Trafficking cases has been filed more in the states of West Bengal, Rajasthan, Gujarat, Maharashtra and Tamil Nadu. But in Andaman and Nicobar, Chandigarh, Sikkim, Arunachal Pradesh and Mizoram, cases reported are very low (National Crimes Record Bureau, India).

There is a 10% increase in Reported Human trafficking cases in 2013 which is 3,940 as compared to 2012 which is 3,554 as estimated by National Crimes Record Bureau 2013 report.

In 2013, it is estimated that 80% of Trafficking is done for the purpose of Sexual exploitation globally.

According to Walk Free Foundation Global Survey Index in 2014, around 14 million people are the victims of Human Trafficking in India.

In the year 2016, around 8132 cases on Human Trafficking have been filed in India. This proves that India is one of the destinations for Human Trafficking.

There was a 13 percent increase in the reported cases of Human Trafficking in 2017 than 2016. 8759 human trafficking cases have been filed to National Human Trafficking Hotline (NHTH) in 2017.

According to the Human Trafficking report 2017 released by Polaris, the average age for trafficking is identified as 19 years.

Major causes of Women’s Trafficking

Communication plays a major role in Trafficking and among Traffickers. Traffickers can communicate easily with anyone as they are well trained in many languages. When a person who is new to the particular place, then the trafficker identifies that person and approaches them in a very friendly manner in their own language. By this way, the traffickers use communication to recruit the Victim.

Poverty

Women who are under the condition of Poverty always want to come out of that. This becomes the easier way for the traffickers to approach women who are in the need of work and money. The Traffickers gives false...
hope that they will help the women to find a way to get out of poverty and build a trust-worthy relationship.

➢ Migration

Migration is the process of people shifting from one country to another country because of Unemployment, War, Natural Disasters, etc. In this case, during their shifting phase, many people are being trafficked. For example, during the mass migration of Rohingya Refugees in 2015, thousands of people have been trafficked.

➢ Sex-Tourism

The demand in Sex-Tourism is increasing day by day in countries like Brazil, Southern Europe, Egypt, Turkey, Thailand, etc. The major reason for the demand in Sex-tourism is the rise in Male Migration to urban areas and its stressful work life. Thus, more and more female are required in sex-tourism which results in trafficking.

➢ Organ Trade

Organ Trade has become a growing illegal commercial activity worldwide. It is because of the increase in the demand of organs. Many people especially squatters have been trafficked and murdered for Organ Transplantation.

Effect of Trafficking on Women Victims

➢ Psychological Effect

The victims who have been involved in trafficking will become mentally unstable. This happens because of Anxiety and Depression. This may also lead to any form of Addiction. The victims will completely lose Hope and Trust on their life which sometimes may result in Suicide.

➢ Physical Effect

Victims of Trafficking are more likely to carry Sexually Transmitted Infections like HIV/AIDS and other opportunistic infections. Also, there is a possibility of change in their physical appearance that is abnormal weight loss or weight gain.

➢ Social Effect

Human Trafficking victims tend to face Stigma and Discrimination in their day to day life. It starts from their family. After being rescued, even the close circle of the victim will not accept them. Even in the society, the victims are not treated well and they will be neglected.

➢ Economic Effect

The victims after being rescued will not be able to go out and find any work as they are discriminated in many ways. Moreover, they are not willing to go for work as they have lived such a luxurious life after being trafficked.

Social Work Intervention for Women Survivors

➢ Prevention

Creating awareness among Children, Students and Women through the live examples of Trafficking survivors. The Awareness on trafficking involves the clear explanation on what is Human Trafficking and its forms and how to prevent themselves from being trafficked.

➢ Protection

As a first step of Rehabilitation, the victims are legally rescued. The rescued victims are sent to Protection home (Shelter home) immediately and will be provided with basic needs.

➢ Rehabilitation

The victim will be immediately given an emotional support through counseling sessions. This phase will make victim as a survivor where the victim will be identified with their needs and Intervention will be given. Also, in this phase, the survivors are provided with the training on any Income generation Program according to their requirement. The survivors will be given a support till they are able to self-sustain.

➢ Re-Integration

After being rehabilitated, the next process will be reintegrating the survivor with their family. But this will happen only with the consent of the survivor. Also, the survivors will be reintegrated only if the family can completed accept them.

Application of Maslow’s Hierarchy of Needs Theory
Maslow’s Hierarchy of needs theory is one of the famous motivational theories that speak about the hierarchy of Human needs from Safety to Self-actualization needs. This theory is applied to the Social work intervention of women victims of Human Trafficking. Maslow has said that Physiological needs are the very basic need to the Human Being. But when the women are being trafficked, she has been denied of her basic needs such as proper shelter, food and water. After this, she immediately loses her second basic need which is safety and Security. The third need which is the Belongingness and love needs will become impossible in case of trafficking victims as they enter into trafficking because of the people they trust (sometimes even by parents and husband). So, this will make them not to trust or build a relationship with anyone. And the last two needs will become a huge question mark in their life as they were not recognized and they will be discriminated after being rescued by the society.

2. Conclusion

Trafficking should be considered as the National crime as equal as terrorism and the traffickers should be given the higher level of punishment by the court of law. Media is the greatest platform to influence people easily. So the media shouldn’t portray women as an attraction tool, instead media should be an agent that helps women to prevent from trafficking and other kinds of violence. Women should not be considered as a buying and selling product. The law should be strong enough to make the traffickers think about the consequences before getting into trafficking. The most important way of prevention starts from each individual by preventing themselves and their surroundings.

References

Crime against Women

Prabhu Arulnathan*

Abstract
The paper will focus on the crimes committed against women in society. It deals with the crimes that can be dealt with formal legal norms. Most of these crimes such as foetus killing, rape, sexual harassment, dowry harassment, immolation of widows, etc., are reflection of the low status of women assigned to women in a patriarchal society. The meaning of violence against women and the crimes often committed against women. Various forms of violence against women, To contextualize violence against women in the wider social, economic and political arena of power relations in the society; and The legislative measures available to get protection from crime against women. Crime against Women: Crime against women arises as a direct result of violence against them. The issue of violence against women has been the most important issue of women’s movement in India since 1974-75. First it was the ever-increasing number of ‘dowry deaths’. Then, from 1980, different rape cases foregrounded rape as a major issue. This was followed by the revival of the ancient custom of Sati. The limelight next shifted to female infanticide as well as female foeticide. There was the advent of ultra-modern medical forms of violence against females through bio medical practices, such as amniocentesis. Domestic violence, sexual harassment at workplace are also forms of violence against women. Women, Social Movements and Change: Crimes against women, like all other acts of violence and crimes have to be seen in the social, economic and political contexts of power relations. It occurs within class and caste because of patriarchal social relations under which male power dominates. A narrow view of crime and violence sees it merely as an act of illegal, criminal use of physical force. But a broader view includes exploitation, discrimination, upholding of unequal economic and social structures, the creation of an atmosphere of terror, threat or reprisal and all forms of religio-cultural and political violence. UN Declaration on Elimination of Violence against Women: The United Nations General Assembly adopted the Declaration on the Elimination of Violence against Women in 1993. It testifies to the international recognition and understanding that violence against women is a violation of their human rights and a form of discrimination against women. The UN underlines a few important points while making this declaration: Violence against women is an obstacle to the achievement of equality, development and peace. Violence against women constitutes a violation of the rights and fundamental freedoms of women and impairs or nullifies their enjoyment of those rights and freedoms. Violence against women is a manifestation of historically unequal power relations between men and women, which have led to domination over and discrimination against women by men and to the prevention of the full advancement of women. The violence against women is one of the crucial social mechanisms by which women are forced into a subordinate position compared with men. Following UN initiatives the Platform for Action, adopted by the Fourth World Conference on Women held in Beijing in 1995, identified violence against women as one of the 12 critical areas of concern requiring special attention of governments, the international community and civil society. Conclusion: In this paper, we shall see some of the important crimes, which are regarded as ‘violence against women’. We will look at the crimes identified in the Indian Penal Code (IPC) and also those which come under Special Law (SL). Different crimes related to various forms of violence against women are discussed in detail.

Keywords: Female Foeticide; Indian Penal Code; Trafficking; Crime; Women.

1. Introduction
The paper will focus on the crimes committed against women in society. It deals with the crimes that can be dealt with formal legal norms. Most of these crimes such as foetus killing, rape, sexual harassment, dowry harassment, immolation of widows, etc., are reflection of the low status of women assigned to women in a patriarchal society. The meaning of violence against women and the crimes often committed against women. Various forms of violence against women, To contextualize violence against women in the wider social, economic and political arena of power relations in the society; and The legislative measures available to get protection from crime against women.

2. Results
Crime against Women
Crime against women has been a bane of India’s development efforts. With arcane customs like sex being a taboo in India, Sati, and Dowry, and the overall lower status of women further exacerbates these crimes. From the last decade’s crime statistics, we see sharp number of crimes registered under ‘Cruelty by Husband and his Relatives’. It also appears that the same category has had the most dramatic rise over the years. This is a surprising insight since the popular media is rife with news of rapes, which appear to be the most rampant

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and high profile of all the crimes. No other crime has been given as much attention in the media than Rape, with a significant increase in the last few years owing to cases like the Delhi Gang Rape, Scarlett Keeling Case in Goa, etc. which made international headlines. (Menon, Savarna)

Assault on women by their husbands is a psycho-social problem which,

✓ Breaks the family harmony and at times terminates in death or divorce.
✓ Disseminates adverse effects on all the family members of both the spouse.
✓ The young members (Specifically the children) are the maximum sufferers.
✓ Damages the social psychology.

Crime and Law

It deals with the crimes that can be dealt with formal legal norms. Most of these crimes such as foetus killing, rape, sexual harassment, dowry harassment, immolation of widows, etc., are reflection of the low status of women assigned to women in a patriarchal society. The meaning of violence against women and the crimes often committed against women; Various forms of violence against women; To contextualize violence against women in the wider social, economic and political arena of power relations in the society; and The legislative measures available to get protection from crime against women.

Crime against women arises as a direct result of violence against them. The issue of violence against women has been the most important issue of women’s movement in India since 1974-75. First it was the ever-increasing number of ‘dowry deaths’. Then, from 1980, different rape cases foregrounded rape as a major issue. This was followed by the revival of the ancient custom of Sati. The limelight next shifted to female infanticide as well as female foeticide. There was the advent of ultra modern medical forms of violence against females through bio medical practices, such as amniocentesis. Domestic violence, sexual harassment at work place are also forms of violence against women.

Women, Social Movements and Change

Crimes against women, like all other acts of violence and crimes have to be seen in the social, economic and political contexts of power relations. It occurs within class and caste because of patriarchal social relations under which male power dominates. A narrow view of crime and violence sees it merely an act of illegal, criminal use of physical force. But a broader view includes exploitation, discrimination, upholding of unequal economic and social structures, the creation of an atmosphere of terror, threat or reprisal and all forms of religio-cultural and political violence. In this unit we discuss some of the important crimes, which are regarded as ‘violence against women’. We will look at the crimes identified in the Indian Penal Code (IPC) and also those which come under Special Law (SL). Different crimes related to various forms of violence against women are discussed in detail. (Oldenburg)

UN Declaration on Elimination of Violence against Women

The United Nations General Assembly adopted the Declaration on the Elimination of Violence against Women in 1993. It testifies to the international recognition and understanding that violence against women is a violation of their human rights and a form of discrimination against women. The UN underlines a few important points while making this declaration: Violence against women is an obstacle to the achievement of equality, development and peace. Violence against women constitutes a violation of the rights and fundamental freedoms of women and impairs or nullifies their enjoyment of those rights and freedoms. There is a long-standing failure both of the national and international community to protect and promote those rights and freedoms in the case of violence against women. Violence against women is a manifestation of historically unequal power relations between men and women, which have led to domination over and discrimination against women by men and to the prevention of the full advancement of women. The violence against women is one of the crucial social mechanisms by which women are forced into a subordinate position compared with men. Following UN initiatives the Platform for Action, adopted by the Fourth World Conference on Women held in Beijing in 1995, identified violence against women as one of the 12 critical areas of concern requiring special attention of governments, the international community and civil society.

The Beijing Declaration and Platform for Action identified three strategic objectives for addressing violence against women: Take integrative measures to prevent and eliminate violence against women. Study the causes and consequences of violence against women and the effectiveness of preventive measures. Eliminate trafficking in women and assist victims of violence due to prostitution and trafficking.

Crime against Women: Meaning

“Significant numbers of the world’s population are routinely subject to torture, starvation, terrorism, humiliation, mutilation and even murder simply because they are female. Crimes such as these against any other group be recognized as civil and political emergency” (Bunch and Carillo). United Nations defines
violence against women as “any act of gender-based violence that results in, or is likely to result in, physical, sexual or mental harm or suffering to women, including threats of such acts, coercion or arbitrary deprivation of liberty, whether occurring in public or in private life”. This encompasses, inter alia, “physical, sexual and psychological violence occurring in the family and in the community, including battering, sexual abuse of children, dowry-related violence, rape, female genital mutilation and other traditional practices harmful to women, non-spousal violence and violence related to exploitation, sexual harassment and intimidation at work, in educational institutions and elsewhere, trafficking in women, forced prostitution, and violence perpetrated or condoned by the state” (www.un.org).

The Rights to Equality and Freedom

In India, women are guaranteed the rights to equality, freedom, opportunity and protection by the Constitution and several legislations. Despite all this, they continue to be victims of various forms of violence because of the male dominated society, media representation of violence, the increasing crime in society as a result of poverty, illiteracy and ignorance, poor enforcement of legal provisions, increasing consumerism and traditional values. Over the past decades, crime against women has been on increase. Along with this, there has been a growing awareness about this and the registration of crimes has also increased and the awareness of legal provisions of women’s rights has also gone up. In India, three major Acts govern legal trials, which are: • The Indian Penal Code (IPC) • The Criminal Procedural Code (CrPC) • The Indian Evidence Act (IEA)

Crimes Identified Under the Indian Penal Code

The following forms of violence against women are identified as crimes under the Indian Penal Code.

• Rape (Section 376 IPC) • Kidnapping and Abduction for different purposes (Section 363-373 IPC) • Homicide for Dowry, Dowry Deaths or their attempts (Section 302/304-B IPC) • Torture, both mental and physical (Section 498-A IPC) • Molestation (Section 354 IPC) • Sexual Harassment (Section 509 IPC) • Importation of Girls (up to 21 years of age) (Section 366 B IPC)

Women, Social Movements and Change

The Indian Penal Code (IPC) provides a penal code for all of India excluding Jammu and Kashmir. A penal code is that part of the state’s laws that deal with defining the elements of particular crimes and specifying the punishment for each crime. The code applies to any offence committed by anyone anywhere in India and on any Indian registered ship or aircraft (This law does not however apply to the armed forces or supersed any other Acts). The Indian Penal Code came into force in 1862 (during the British Raj) and is regularly amended.

Crimes Identified Under the Special Laws

There are specific offences identified which are committed under the garb of social practices and which are punishable under special social enactments to safeguard women and their interest. These offences like sati, dowry demand, indecent representations of women, female foeticide, domestic and other forms of violence have been the issues of agitation by social activists, and the government of India has responded by enacting new laws or amending existing ones providing for stringent punishments. Sati, the custom of burning widows on the funeral pyre of their husbands was banned through legislation in 1829. RoopKanwar’s Sati case in 1987 raised this issue again. There was large protest by women’s organisations all over the country against Sati and its glorification. As a consequence in December 1987, Parliament passed Commission of Sati (Prevention) Act 1987.

Different Crimes against Women

The problem of violence against women remains a pervasive issue in all societies. Unfortunately, this violence takes many forms and occurs across national, cultural, racial, and religious borders. Violence against women takes various forms. It includes: domestic violence, rape, trafficking in women and girls, forced prostitution, and violence in armed conflict, such as murder, systematic rape, sexual slavery and forced pregnancy. It also includes honour killings, dowry-related violence, female infanticide and prenatal sex selection in favour of male babies, female genital mutilation, and other harmful practices and traditions. Let us see some of the common crimes committed against women in the domestic arena as well as in society at large.

Domestic Violence

Domestic Violence One of the most heinous crimes against women is the sexual, physical and psychological violence that they experience at home and in most cases is committed by someone the women know and are intimate with. In 48 population-based surveys around the world, between 10 to 90 percent of women reported being physically assaulted by an intimate partner at some point in their lives. In some countries one in four women report sexual violence by an intimate partner, and up to a third of girls report forced sexual initiation.
Sexual violence crosses race, class and religious divides. In the U.S., a woman is beaten in every 18 minutes. Domestic violence is the leading cause of injury among women of reproductive age. In Paris, 70 per cent of all crimes reported to the police involve women beaten by their husbands. The practice of ‘honour killings’ — where relatives kill a woman for alleged adultery or sexual misconduct — are still common in many societies. In Bangladesh and India women are killed or burnt with acid for not bringing enough dowry into the husband’s family when they marry.

Domestic violence is manifested in the form of wife battering in most of the cases. One of the important outcomes of the anti-rape and anti-dowry campaigns in India was the realization that violence in many forms may exist for a long time before it is recognized. Wife battering is invisible because it is hidden in the many intimate, intricate and complex layers of the relationship between husband and wife with overtones of romanticism, sexuality and patriarchy. However, the apprehension of treading into a very personal, private territory is quickly dissipated when the nature and extent of this violence is investigated, although there is no hard data to go by in case of domestic violence as the police does not register what they consider to be a ‘private matter’. The law does not recognize wife beating except under the general category of manhandling or assault.

Wife battering does not even have social cognizance. By and large neighbours do not interfere even when they hear screams for help. However, one of the main reasons for the invisibility of wife battering is the acceptance and attitude of women themselves to this violence. Most of the women feel they must have failed as good wives. In that they seek to explain their husband’s violence or alcoholism or unemployment or sorrow or evil habits acquired from friends.

Protection of Women from Domestic Violence

Protection of Women from Domestic Violence Act, 2005 President A.P.J. Abdul Kalam has given assent to the Protection of Women from the Domestic Violence Act, 2005, which seeks to provide protection to victims of violence within the family. The Act will be applicable to all States and Union Territories except Jammu and Kashmir. It aims at protecting women from verbal, emotional, economic and sexual abuses and offers free legal service to such victims. Under the new Act, any woman subjected to mental or physical injuries, physical abuse, criminal intimidation or force, sexual abuse (any conduct of a sexual nature that abuses, humiliates, degrades or otherwise violates the dignity of a woman), will be covered under domestic violence. Domestic violence, as per the Act, constitutes physical or mental harm, including sexual, verbal, emotional or economic abuse by a male member of the family or anyone living under the same roof. Harassment of the victim with a view to coercing her or any other person related to her to meet any unlawful demand for dowry or property is also covered under the new law. The victim can approach a police officer, protection officer, service provider or magistrate for relief by way of a protection order; have right to free legal services under the Legal Services Authorities Act, 1987, and to file a complaint under Section 498A of the Indian Penal Code, wherever relevant.

Dowry Related Crime In India

The Dowry Prohibition Act, 1961, defines dowry as “any property or valuable security given or agreed to be given either directly or indirectly a) by any party to a marriage to the other party; or b) by the parents of either party to a marriage or by any other person to either party to the marriage or the other person, at or before or after the marriage”. The Act says that any person who gives or takes or who abets the giving or taking of dowry shall be punished with a jail term which may extend to six months or with fine or with both. It is also an offence to demand, directly or indirectly from the parents or guardians of a bride any dowry and shall be similarly punished. However, presents in the form of cash, ornaments, clothes and other articles are excluded by the Act from its purview.

Rape

Rape is the most frequently occurring crime against women cutting across caste, class and religion. It is the most heinous crime that takes place in the society. Rapes are mostly committed by acquaintances, not strangers as is commonly believed. It is not a random but a premeditated act on the part of men. Neighbours pick out the most vulnerable woman who will not be able to complain or fight back, or men as a group may decide to demoralize another set of men of another caste or religion by dishonouring family izzat (honour) through the act of rape. Rapes that take place by family members are almost never reported. The extreme vulnerability of women, the sexual nature of the crime, societal attitudes regarding chastity, the indifference of the police and judicial procedures interact with each other to reverse the roles of the victim and violator.

3. Conclusion

Perpetuation of violence against women in India continues as a result of many systems of sexism and Patriarchy in place within Indian culture. Beginning in early childhood, young girls are given less access to education than their male counterparts. 80% of boys will go to primary school, where as just over half of girls
will have that same opportunity. Gender based inequality is present even before that however, as it is reported that female children are often fed less and are given less hearty diets that contain little to no butter, milk, or other more hearty foods. Even when girls are taught about the inequity they will face in life, boys are uneducated on this and are therefore unprepared to treat women and girls as equals. Later in life, the social climate continues to reinforce inequality, and consequently, violence against women. Married women in India tend to see violence as a routine part of being married. Women who are put in a situation where they are being subjected to gender-based violence are often victim shamed, being told that their safety is their own responsibility and that whatever may happen to them is their own fault. In addition to this, women are very heavily pressured into complicity because of social and cultural beliefs, such as family honor.

Even when a woman who is a victim of gender-based violence or crime does decide to report the incident, it is not always likely that she will have access to the support she would need to handle the situation properly. Law enforcement officers and doctors will often choose not to report a case, due to fear that it might in some way damage their own honor, or otherwise bring shame to them. In the case that she gets help from a doctor, there is no standard procedure for determining whether a woman is a victim of Sexual assault and doctors often resort to highly invasive and primitive methods such as the infamous "two-finger test" which can worsen the problem and are can be psychologically damaging for the victim.

References

Health Status of Women with Polycystic Ovarian Syndrome (PCOS)

Angel Gnana Prakasam*
Dr. A. Relton**

Abstract
The aim of the study was to understand the health status of women of with PCOS. Studies now show that polycystic ovary syndrome is a metabolic, hormonal, and psychosocial disorder that impacts a woman’s quality of life. It is extremely important to holistically treat these women early on to help them deal with the emotional stress that is often overlooked with polycystic ovary syndrome. A descriptive study design was adopted for the present study. The study was conducted among a sample size of 40 respondents from a private hospital in Tiruchirappalli. A survey method using the Polycystic Ovary Syndrome Questionnaire (PCOSQ) developed by Cronin et al. in 1998 was used. It contains 26 items that measure five PCOS-related subscales, namely Emotional Disturbance, Body Hair, Weight Difficulties, Infertility and Menstrual Difficulties. Each item is associated with a seven-point scale in which a score of seven denotes no problems and a score of one indicates maximum impairment of Quality of Life on that item. The data for the present study has been statistically analysed and majority of the respondents (45%) have less concern related to weight. All of the respondents have low level of emotional disturbance. More than half of the respondents (55%) have high concerns relating to body hair. Vast majority of the respondents (92%) have concerns relating to infertility whereas menstrual problem is the major difficulty faced by all the respondents. Further findings pertaining to the study shall be discussed in the full article.

Keywords: PCOS; PCOSQ; Quality of Life; Menstruation.

1. Introduction
PCOS was first described in 1935 by Stein and Leventhal as the combination of hirsutism (a condition of male-pattern terminal hair growth in women), amenorrhoea (absence of menstruation), chronic anovulation and infertility, obesity and enlarged cystic ovaries. Polycystic ovarian syndrome (PCOS) is the most common endocrine disorder among women of reproductive age groups and is defined as a hormonal disorder characterized by the presence of at least one polycystic ovary (presence of multiple cysts) accompanied by ovulatory dysfunction and excessive secretion of androgens. It is one of the leading causes of poor fertility. PCOS is associated with a wide spectrum of presenting features, including anovulation, obesity and abnormal facial and skin hair growth (hirsutism). Research shows that both physical health consequences and the emotional impact of PCOS have been ignored. PCOS and its influence on quality of life is an issue that needs to be taken seriously as this syndrome affects many women across the world. Patients were formerly treated primarily on their symptoms of PCOS, but current studies have shown that patients need to be treated more holistically, as PCOS can affect a woman’s mind, body, and her identity with herself as a woman. A majority of experts acknowledge that the psychosocial burden in women with PCOS cannot be ignored, and should be treated as a secondary symptom. It has been well documented that women with PCOS have higher levels of psychological distress. Symptoms of PCOS such as obesity, hirsutism and infertility have a strong influence on the psychosocial experience of women. Additionally, women with PCOS have been found to have higher levels of depression and overall psychological morbidity and decreased quality of life in overall health and sex. Although not all women (specifically adolescents) with PCOS may be sexually active, at some point in their lives they may be and sexual satisfaction may become important to them. Obesity and diabetes have increased dramatically worldwide during the last decade. Not only does obesity act as a risk factor for other health problems, it has been shown that obesity and weight gain are likely to lead to loss of self-esteem and poor body image, resulting in a decreased quality of life and psychological morbidity. PCOS is not just an endocrine disorder, but a combination of metabolic and psychosocial detriments. Not addressing all the aspects of PCOS, such as depression, may delay the treatment of the “primary” issues such as fertility and hyperandrogenism. The World Health Organization (WHO) states that one in every 4 couples in developing nations is affected by infertility. Age at marriage and first pregnancy has risen. Lifestyle changes have gone from bad to worse, and
include increasing age at marriage, increasing number of working women who delay pregnancy, rising alcohol and tobacco consumption, sedentary lifestyle coupled with fast food consumption, and disturbing levels of obesity. More educated women are more likely to postpone marriages and childbirth. Therefore, PCOS is one of the rising concerns of women that needs to be addressed with a holistic approach. The present study has been carried out with the intention to understand the effects and causes of quality of life among women with PCOS in better light.

Review of literature

The objective of the study was to assess the knowledge about PCOS in young women. Cross sectional study was performed on 400 women of age group 18-30 years. Among 400 participants, only 41% of the women were aware of the term PCOS. 46% of the subjects who were aware about the organ system involved in this disease. Most of the people know about this disorder through friends or relatives. 49% of the women knew about the various signs and symptoms associated with PCOS. The results of this study show that very few of the young women understand what PCOS is and the earliest symptoms that should alarm them to consult a physician. (Jaya Patel ,Shailesh Rai, (2018) Polycystic ovarian syndrome (PCOS), a common endocrinial disorder of reproductive age characterized by heterogeneous complications, is nowadays prevailing among females at adolescent stage. Infrequent or prolonged menstrual periods, excess hair growth, acne, and obesity can occur in women with PCOS. In adolescents, infrequent or absence of menstruation may raise chances for this condition. The increased prevalence of PCOS among general population throughout the world is found to be 5%-10% in the women of reproductive age, and about 40% women with PCOS experience depression, particularly young girls.

The exact cause of PCOS is unknown. Early diagnosis and treatment along with weight loss may reduce the risk of long-term complications. Depression and anxiety are common in women with PCOS but are often overlooked and therefore left untreated. Along with the physical disturbances, many mental problems are also associated with PCOS. Therefore, PCOS not only has problems associated with reproduction but also has associated crucial metabolic and psychological health risks with increasing age of the patients. Because of the increased number of cases with PCOS around the world in present times, with prominent symptom of, specifically, depression at the adolescent stage, it is important to highlight the disease.(Sadeeqa S, Mustafa T, Latif S,( 2018)

2. Research methodology

Objectives
➢ To understand the socio-demographic details of the respondents.
➢ To understand the health status of women with PCOS and its impact on their Psychological Well-being.
➢ To suggests measures for Healthy Living.

A descriptive research design was adopted for the present study. The study was conducted among a sample size of 40 respondents (n=40) from a private hospital in Tiruchirappalli. A convenient sampling method has been used. The researchers have used self-prepared questions to collect the socio-demographic data of the respondents. The Polycystic Ovary Syndrome Questionnaire (PCOSQ) developed by Cronin et al. in 1998 was also used to collect the required data. It contains 26 items that measure five PCOS-related subscales, namely Emotional Disturbance, Body Hair, Weight Difficulties, Infertility and Menstrual Difficulties. Each item is associated with a seven point scale in which a score of seven denotes no problems and a score of one indicates maximum impairment of Quality of Life on that item. The data was processed using the statistical package SPSS 16.0.

3. Analysis and Interpretation

The present study was conducted to find out the quality of life among 40 respondents with PCOS in a private hospital in Tiruchirappalli district. The major finding of the study is that more than half of the respondents (55%) are below 25 years of age, nearly 37% of the respondents have attained their puberty at 13 years of age, majority of the respondents (75%) have been diagnosed with PCOS post marriage, more than half of the respondents (52.5%) are married for less than 2 years, majority of the respondents (67.5%) have had no miscarriages, more than half of the respondents (55%) have been taking treatment for less than 6 months and majority of the respondents (70%) feel that the level of progress in treatment is improving. According to the demographic details it is inferred that majority of the respondents (55%) are below 25 years of age, nearly 37%
of the respondents have attained their puberty at 13 years of age, vast majority of the respondents (75%) have been diagnosed with PCOS post marriage, more than half of the respondents (52.5%) are married for less than 2 years, majority of the respondents (67.5%) have had no miscarriages, more than half of the respondents (55%) have been taking treatment for less than 6 months and majority of the respondents (70%) feel that the level of progress in treatment is improving.

Table no. 1 Distribution of table based on the dimensions in the scale.

<table>
<thead>
<tr>
<th>Dimensions</th>
<th>Low</th>
<th></th>
<th>High</th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>n</td>
<td>%</td>
<td>n</td>
<td>%</td>
</tr>
<tr>
<td>Weight</td>
<td>22</td>
<td>55.0</td>
<td>18</td>
<td>45.0</td>
</tr>
<tr>
<td>Infertility</td>
<td>3</td>
<td>7.5</td>
<td>37</td>
<td>92.5</td>
</tr>
<tr>
<td>Emotional disturbances</td>
<td>0</td>
<td>0</td>
<td>40</td>
<td>100.0</td>
</tr>
<tr>
<td>Menstrual Disturbances</td>
<td>0</td>
<td>0</td>
<td>40</td>
<td>100.0</td>
</tr>
<tr>
<td>Body Hair</td>
<td>18</td>
<td>45.0</td>
<td>22</td>
<td>55.0</td>
</tr>
</tbody>
</table>

It is inferred from the above table based on the distribution of dimensions of the scale that majority of the respondents (45%) have less concern related to weight. All of the respondents (100%) have low level of emotional disturbance. More than half of the respondents (55%) have high concerns relating to body hair. Vast majority of the respondents (92%) have concerns relating to infertility whereas menstrual problem is the major difficulty faced by all the respondents (100%).

4. Conclusion

More researches should be conducted in this area to find out more PCOS cases so that complication later in life due to PCOS will be prevented. Increasing awareness among parents to ensure that they provide their children with an active childhood that comprises of more outdoor activities and also that they provide more of healthy food and reduce the level of junk intake thereby preventing the complications of obesity in childhood itself. To include physical exercise as a part of day to day living activity. Also increase awareness among adolescent girls to have report to gynaecologist in case of continuous irregular menstruation for a longer duration. Health education should be included in the curriculum which will provide an awareness towards the disorder, lifestyle modification and dietary habits. Pay more attention to the secondary symptoms of PCOS that is the psychosocial burden associated with it. Women in the reproductive age group should make regular health check-ups. They should include healthy diet and practice more of physical activities. Government should conduct health campaigns and screenings periodically to assess health of women in the reproductive age group.

References
Health Profile and General Well Being among Adolescent Girls at Tiruchirappalli District

S. Keerthanaa*
Dr. M. Gabriel**

Abstract

Adolescence is a transitional stage of physical and psychological development that generally occurs during the period from puberty to legal adulthood. Adolescence is usually associated between ages 13 to 19. The biological transition of adolescence or puberty is perhaps the most observable sign that adolescence has begun for an individual. General well-being is not just the absence of disease or illness. It is a complex combination of a person’s Physical, Mental, Emotional and Social Health factors. Well-being is strongly linked to happiness and life satisfaction. The present study has been conducted with the aim to know the Health Profile and General Well-being of Adolescent girls in Tiruchirappalli District. The researchers have adopted Descriptive research design and have collected data from 40 respondents by using simple random sampling method Using Self prepared questionnaire for collection of socio demographic details. Health profile among the adolescent girls have been assessed by using the instrument Glucometer, to find out Diabetes Mellitus, Mid upper Arm Circumference Test was been used to find out the level of Malnutrition, Sphygmonanometer was been used to find out the level of Blood Pressure and PGI General Well Being Scale S.K Verma and Anita Verma (1977) to collect the required data. Collected data has been analysed statistically. The results and findings of the study shall be shared in the full article.

Keywords: Adolescents; Health; Diabetes Mellitus; Blood Pressure; General well-being.

1. Introduction

The World Health Organization defines mental health as a “state of well-being whereby individuals recognize their abilities, are able to cope with the normal stresses of life, work productively and fruitfully, and make a contribution to their communities.” Applying such adult based definitions to adolescents and identifying mental health problems in young people can be difficult, given the substantial changes in behaviour, thinking capacities, and identity that occur during the teenage years. The impact of changing youth subcultures on behaviour and priorities can also make it difficult to define mental health and mental health problems in adolescents. Although mental disorders reflect psychiatric disturbance, adolescents may be affected more broadly by mental health problems. These include various difficulties and burdens that interfere with adolescent development and adversely affect quality of life emotionally, socially, and vocationally.

Review of literature

Mohammad Habibur Rahman, Md Saiful Islam and Bidhan Chandra Surtradhar (2018) - An 50% of school going children are vitamin A-deficient. One of the Bangladesh National Nutrition Survey (1995 - 96), illustrates that average per-capita energy intake by village adolescent girls is almost 95% of their Recommended Dietary Allowance (RDA) for age. Research estimates that protein, iron, and calcium are most important nutrients for growth and development in adolescence. In Bangladesh nearly 60% of school going adolescent girls aged between 10 - 16 years consumes protein, iron, and calcium just about 75% of the Recommended Dietary Allowance (RDA) for age.

The high prevalence of chronic energy and micronutrient deficiencies of today’s adolescent girls is directly linked to the health status. UNICEF India (2013) - Findings from the National Family Health Survey 3 (NFHS-3) indicate that as many as 56% of females and 30% of males in the 15–19 age group are anaemic (IIPS and Macro International 2007). The high prevalence of anaemia among females in India is of great concern as it is directly associated with maternal and perinatal mortality. In the above study, the author has highlighted the importance of Health and General Well Being and its impact on the adolescent wellbeing. In order to improve the standard of research, the researcher has reviewed the previous studies related to the topic for better understanding and clarity. Significance of the study

Adolescence is the time to learn and adopt healthy habits to avoid many health and nutritional problems in later life. The psychological aspects of life also start to rejuvenate only during the adolescence. So the study is concerned only to know about the health and general wellbeing of adolescent girls in urban area.
2. Research Methodology
Objective of the study
1. To describe the Socio Economic background of the respondents.
2. To find out the various levels of general wellbeing and health of the adolescent girls.
3. To find out the factors that are closely associated with health.
4. To find out the relationship between health and general wellbeing of adolescent girls.
5. To suggest appropriate measures to improve health and general well-being.

The research design used in this study is Descriptive research design. The universe of the present study is to assess the Health Profile and General Wellbeing of Adolescent girls. The sampling design used in this study is Simple random sampling. The information required for the study has been collected from 40 respondents through Primary and Secondary data.

3. Results and Analysis

Table 1. Distribution of respondents based on their frequency of balanced diet

<table>
<thead>
<tr>
<th>Balanced Diet</th>
<th>Number of Respondents N=40</th>
<th>Percentage</th>
</tr>
</thead>
<tbody>
<tr>
<td>Never</td>
<td>4</td>
<td>10.0</td>
</tr>
<tr>
<td>Sometimes</td>
<td>7</td>
<td>17.5</td>
</tr>
<tr>
<td>Rarely</td>
<td>15</td>
<td>37.5</td>
</tr>
<tr>
<td>Daily</td>
<td>11</td>
<td>27.5</td>
</tr>
<tr>
<td>Very often</td>
<td>1</td>
<td>2.5</td>
</tr>
<tr>
<td>Weekly twice</td>
<td>2</td>
<td>5.0</td>
</tr>
</tbody>
</table>

From the above table it is found that 37.5% of the respondents consume balanced diet rarely, 27.5% of the respondents consume balanced diet daily.

Table 2. Distribution of respondents based upon the consumption of beverages

<table>
<thead>
<tr>
<th>Age</th>
<th>Number of respondents N=40</th>
<th>Percentage</th>
</tr>
</thead>
<tbody>
<tr>
<td>16</td>
<td>24</td>
<td>60.0</td>
</tr>
<tr>
<td>17</td>
<td>11</td>
<td>27.5</td>
</tr>
<tr>
<td>18</td>
<td>3</td>
<td>7.5</td>
</tr>
<tr>
<td>19</td>
<td>2</td>
<td>5.0</td>
</tr>
</tbody>
</table>

From the above table it is found that one third of the respondents consume coffee and milk as their routine beverage.

Table 3. Distribution of respondents based on their age

<table>
<thead>
<tr>
<th>Consumption of Beverages</th>
<th>Number of Respondents N=40</th>
<th>Percent</th>
</tr>
</thead>
<tbody>
<tr>
<td>Milk</td>
<td>13</td>
<td>32.5</td>
</tr>
<tr>
<td>Coffee</td>
<td>15</td>
<td>37.5</td>
</tr>
<tr>
<td>Tea</td>
<td>8</td>
<td>20.0</td>
</tr>
<tr>
<td>Others</td>
<td>4</td>
<td>10.0</td>
</tr>
</tbody>
</table>

From the above table it is found that majority of the respondents are 16 years old.

4. Conclusion
Adolescence is generally regarded as a period of great stress and strain. It is so because of the nature of the physical, social, mental and emotional development during the period. Changes in all direction naturally give rise to certain psycho-physical needs never experienced by them previously. Importance of balanced diet should be emphasized. Skipping of meals should be avoided. Time must be allotted for physical exercise.
Awareness must be created about false food fads and beliefs. Mental health of the adolescents should be focussed.

References

Challenges Faced by Unemployed Social Workers in Chennai

S. Manimozhi*

Abstract
Unemployment is also known as Joblessness. It is the situation in which a person constantly looking for a job but couldn’t find any. Social Work is the professional course that was still in an emerging phase in India and Tamil Nadu level. The scope of Social Workers was not even recognized by the Organizations that are based on Social Work. So, there was always a condition where the social work graduates who are well trained and skilled could not find an appropriate job/work. So, they ended up in Unemployment and sometimes underemployment. Thus, there were so many challenges faced by Social Workers during Unemployment that are needed to be studied.

This study was chosen because when Unemployment was taken into Consideration in General, It was always Social Workers who were left out. So, through this Quantitative Research, Challenges faced by the Unemployed Social workers in their day to day life will be presented. Following are the objectives of the Study

➢ To study the demographic profile of the Respondents.
➢ To study the Respondent’s field experience regarding Social work.
➢ To study psychological effect of Unemployment on Respondents.
➢ To study the Respondent’s esteem as an effect of Unemployment.
➢ To study the Respondent’s ability to tackle the Financial Needs.

The study is quantitative and descriptive in design. Snow ball sampling was used and the sample size is 50 Unemployed Social workers from Chennai.

Keywords : Unemployment, Challenges, Social Workers.

1. Introduction
Unemployment is also known as Joblessness. It is the situation in which a person constantly looking for a job but couldn’t find any. Unemployment is measured using a Unemployment rate. Unemployment rate was calculated as a percentage by dividing the number of unemployed individuals by overall individuals presently in the work force.

Definitions of unemployment/unemployed people
According to Bureau of Labor Statistics, “Unemployment is defined as people who do not have a job, have actively looked for work in the past four weeks, and are currently available for work. Also, people who were temporarily laid off and were waiting to be called back to that job are included in the unemployment statistics”.

Unemployment in India
In India, Unemployment rate has been increased to 3.52% in Dec 2017 from 3.51% in Dec 2016. It was around 2-3% Unemployment rate for several years. But it was increased to 5% in 2015.

Unemployment in Tamil Nadu
Tamil Nadu’s Unemployment rate is 3.8% which is higher than the National Unemployment rate that is 3.7%. Number of unemployed people in India is increased by 0.5% between 2013-14 and 2015-16.

Social work
Social Work is the profession that promotes social change, development, social cohesion, empowerment, human rights and helps those who are in need to help them-selves.

Definition
According to International Federation of Social Workers “Social work is a practice-based profession and an academic discipline that promotes social change and development, social cohesion, and the empowerment and liberation of people. Principles of social justice, human rights, collective responsibility and respect for diversities are central to social work. Underpinned by theories of social work, social sciences, humanities and indigenous knowledge, social work engages people and structures to address life challenges and enhance wellbeing. The above definition may be amplified at national and/or regional levels.” This definition is also considered to be the Global definition”.

Specializations in social work

*Student, Postgraduate in Social Work, Patrician College of Arts and Science, Chennai.
In Chennai, the major specializations carried out are Medical & Psychiatric Social Work, Community Development and Human Resource Management. Specializations like Human Rights, Youth Development and Disability Studies are offered in few Institutions. Since, the study is done in Chennai, researcher will focus on the social workers with above mentioned major specializations.

**Statement of the problem - unemployment in social work**

Social Work is the professional course that was still in an emerging phase in India and Tamil Nadu level. The scope of Social Workers was not even recognized by the Organizations that are based on Social Work. So, there was always a condition where the social work graduates who are well trained and skilled could not find an appropriate job/work. So, they ended up in Unemployment and sometimes underemployment. Thus, there were so many challenges faced by Social Workers during Unemployment that are needed to be studied.

Need for the study

This study was chosen because when Unemployment was taken into Consideration in General, It was always Social Workers who were left out. So, through this Quantitative Research, Challenges faced by the Unemployed Social workers in their day to day life will be presented.

**Review of literature**

BonganiNkosi, Thousands of social work graduates still unemployed, March 26, 2018. Gauteng is one of the nine provinces and smallest of South Africa. In this Country, Thousands of Social workers who are trained are being unemployed. Also, it is referred as there were so much of struggle with drug and alcohol abuse in the country where the social workers needed to be in action. But still there were so many social workers who cannot find Employment. Also, some graduates felt that the Social work course is a curse to them and they also felt that it was completely a time waste. The Government officials explains that even though there is a Unemployment prevailing in Social work field, it is important to not stop the training as there is always the need for Social work. It was also recommended to open the vacancies for Social workers in Prison.

Michael W. Sherraden, Chronic unemployment: A social work perspective, September –October 1985. In this article, it is referred as Unemployment may result in Economic deprivation, Social strain, Psychological stress and Physical health problems. All these problems were likely to be addressed by social workers. Also, it is important for the social workers to fight for the effective employment policies. But, it doesn’t happen or happen in a smaller amount. It is social worker’s responsibilities to involve themselves in employment policies process.

Katherine Hooper Briar, Helping the unemployment client, November 1980 This article talks about the Social Worker’s responsibilities to deal with the problems and challenges of Unemployment as a whole. According to this article, it is important for the Social workers to concentrate on Joblessness condition of the client rather concentrating on the effects of Unemployment. Also, it is the unemployment which is the major cause of other problems of the client.

Thea Brown, Unemployment among social work graduates, 15 April 2008. In this article, the author Thea Brown has referred as higher level of unemployment will definitely affect the graduates that to Social work graduates who are in a high risk. She said that there should be a manpower planning and mechanism for achieving the Social work employment opportunities after conducting the study in Melbourne University which is sending out the highest number of Social Work graduates every year.

Johanna Kallio Helena Blomberg Christian Kroll, Social Workers’ attitudes towards the unemployed in the Nordic Countries, 08 June 2012. The Nordic countries or the Nordics are the regions in Northern Europe and the North Atlantic such as Denmark, Finland, Iceland, Norway and Sweden, including their associated territories. In those regions, Social workers have become the Policy makers in reducing the Unemployment. Those policies tell that one should take responsibility for their unemployment status. There should be an individualistic attitude towards unemployment and it is different between and within the country.

**2. Research methodology**

- Research design used in this project is “Descriptive Research”.
- Sample technique used in this project is Snow ball sampling.
- The sample size of the Research is 50.
- Universe of the study is Social Work graduates and the area of the study is Unemployed Social workers in Chennai.
- The researcher used questionnaire (Online) for Data collection.
- The researcher used Microsoft Excel for entering data, coding the data, performing Analysis.
3. Analysis and interpretation

Table 1. Socio-demographic profile of the Respondents

<table>
<thead>
<tr>
<th>Variables</th>
<th>Frequency (n=50)</th>
<th>Percentage</th>
</tr>
</thead>
<tbody>
<tr>
<td>Age (in years)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>21-25</td>
<td>19</td>
<td>38</td>
</tr>
<tr>
<td>26-30</td>
<td>22</td>
<td>44</td>
</tr>
<tr>
<td>31-35</td>
<td>8</td>
<td>16</td>
</tr>
<tr>
<td>Above 35</td>
<td>1</td>
<td>2</td>
</tr>
<tr>
<td>Gender</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Female</td>
<td>15</td>
<td>30</td>
</tr>
<tr>
<td>Male</td>
<td>35</td>
<td>70</td>
</tr>
<tr>
<td>Marital status</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Married</td>
<td>15</td>
<td>30</td>
</tr>
<tr>
<td>Unmarried</td>
<td>35</td>
<td>70</td>
</tr>
<tr>
<td>No. of family members</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Less than 4 members</td>
<td>25</td>
<td>50</td>
</tr>
<tr>
<td>4-6 members</td>
<td>21</td>
<td>42</td>
</tr>
<tr>
<td>More than 6 members</td>
<td>4</td>
<td>8</td>
</tr>
<tr>
<td>Family income (per month)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Below 10,000</td>
<td>3</td>
<td>6</td>
</tr>
<tr>
<td>10,000-20,000</td>
<td>22</td>
<td>44</td>
</tr>
<tr>
<td>20,000-40,000</td>
<td>14</td>
<td>28</td>
</tr>
<tr>
<td>40,000 and above</td>
<td>11</td>
<td>22</td>
</tr>
<tr>
<td>TOTAL</td>
<td>50</td>
<td>100</td>
</tr>
</tbody>
</table>

Figure 1. Classification of respondents based on specializations

Major Findings
Social Work Profession and Field Experience

Out of 50 respondents, 24% of the respondents have chosen the Social Work Profession as result of no other choice and 6% of the respondents have got into the profession by compulsion. Majority of the Respondents think that the major reason for Unemployment in Social Work Profession is because of Limited opportunities and resources (44%).

Psychological effect

84% of the respondents feel that Unemployment increases Social Anger. 34% of the respondents feel frustrated while searching for a job. 10 out of 50 respondents have told that Unemployment brings them to the state of addiction to Mobile, Social Media and Alcohol.

Self-esteem and Relationship

82% of the respondents feel that Unemployment affects their relationship with their family. 66% of the respondents have lost the hope to fulfill their family’s expectation in future because of Unemployment.
out of 50 respondents have been ignored from family’s decision making process. 74% of the respondent’s Unemployment condition affects their family’s status and esteem in the society. 40 out of 50 respondents feel that Unemployment is major reason that delays marriage. 

Financial needs and issues

The main source of sustenance for 84% of the respondents is their parents and 46% of them don’t feel free to ask money from their parents. 30 out of 50 respondents are borrowing money from others to tackle their financial needs because of Unemployment.

4. Conclusion

As Social Work Profession is still in emerging phase in India, it is the social work based Government and private Organization’s responsibility to bring it up. Also, Social work based organizations should recruit only social workers who are professionally trained and skilled rather recruiting people from other streams. Also, Social workers should be recognized and rewarded with the reasonable salary. Social Work education should keep updating to the new trends in the profession so that it will help the social work graduates to get exposure and know about the available job opportunities.

Reference

A Study on Problem Faced By Women Domestic Workers at MGR Nagar- Trichy

V. Daisy Rani*

Abstract
Domestic Workers, or the employment of people for wages in their employer's residence, was sometimes simply called "Workers". It evolved into a hierarchical system in various countries at various times. A domestic worker is someone who works within the employer's household. Domestic workers perform a variety of household services for an individual or a family, from providing care for children and elderly dependents to cleaning and household maintenance, known as housekeeping. Responsibilities may also include cooking, doing laundry and ironing, food shopping and other household errands. Some domestic workers live within the household where they work. The main aim of the study is to analyze the problem faced by women domestic workers at MGR Nagar, Trichy. The objectives of the study is to know about the demographic conditions of the respondents, and to find out their psychological & economic problem. The researcher used descriptive research design, and the universe of this study is female domestic Workers in MGR Nagar, Trichy. The data was collected through convenience sampling method, the sampling size is 50. The findings of the study are more than half of the respondents (54%) work due to poverty and the vast majority of the respondents (92%) face physical inability to do their work.

Keywords: Employers, Domestic workers, psychological & emotional problem.

1. Introduction
A domestic worker is someone who works within the employer's household. Domestic workers perform a variety of household services for an individual or a family, from providing care for children and elderly dependents to cleaning and household maintenance, known as housekeeping. Responsibilities may also include cooking, doing laundry and ironing, food shopping. Some domestic workers live within the household where they work. The conditions faced by domestic workers have varied considerably throughout history and in the contemporary world. In the course of twentieth-century movements for labour rights, women's rights and immigrant rights, the conditions faced by domestic workers and the problems specific to their class of employment have come to the fore.

Problems Faced by Domestic Workers at Work Place
The general problems faced by the female domestic servants at work place are as under:
1. The domestic workers are not satisfied with their present wages and they expect more.
2. The workers often express their grievances for imposing extra work burden by the employers while guests come. The extra money for that additional work is not sufficient. A lump sum amount is paid for extra work. Often, the employer does not pay anything.
3. Few employers have a tendency to deduct wage for absence in work.
4. The employers do not permit any extra leave. As a result, they have to attend work regularly leaving any urgent personal necessity.
5. Many workers face sexual harassment by their male employers. Verbal sexual harassment by the male employers is something that is generally very common.
6. The female domestic workers have to face a lot of problems at the work place which include low level of wage, a minimal pay or no pay for extra work, absence of leave facility, sexual harassment by male employer etc.

These problems can never be overcome until the concept of unionism is developed among the female domestic workers.

Some immediate interventions can be made at the following levels:
1. The organization of domestic workers among themselves is very important. A systematic mobilization is needed to help them in making their own associations and unions so that they can share some solidarity and build their own leadership.

*Assistant Professor in Social Work, Holy Cross College, Tiruchirappalli.
2. There is a need to create public opinion on behalf of domestic workers to grant them the status of workers and dignified working conditions. A proper mutual dialogue may be useful in developing a suitable legislative mechanism.

3. The problems of women domestic workers have still not received adequate attention by researchers, members of voluntary organizations and other social activists as yet. A collaboration frequent interaction and wider networking with the people and organizations working on the similar issue is required to intensity the movement of improving the overall condition of domestic workers.

4. There is also an urgent need to sensitive the wider society regarding their attitude towards ‘Servant-Master’ relationship and change it into a respectable ‘Employee – Employer’ relationship.

5. Therefore it is extremely important to create an environment where the domestic workers may enjoy their rights, duties and interests like other segments of the society.

The National Domestic Worker Alliance Demands a Decent Work for Domestic Workers

Working and Living Conditions and Social Security
- Fair terms of employment as well as decent working conditions and, where applicable, living conditions;
- Safe and secure workplace; and
- Social security, including maternity protection, for both full-time and part-time workers with multiple employers
- Equality with other workers in minimum labour standards and in some instances, establish a higher standard to account for the special conditions facing domestic workers and the inability for domestic workers to collectively bargain under most national labour relations laws.
- Access to information about rights and organizations that can provide information and support for them as migrants (consulates) and workers (worker rights organizations)
- Employers should inform domestic/household workers of their terms and conditions of employment, such as the type of work to be performed, including tasks not to be performed; the normal hours of work, etc.
- Protection against all forms of abuse and harassment, including physical, verbal, sexual and mental abuse and harassment
- Workers are not bound to remain in the household during the period of daily or weekly rest
- Periods of standby should be regarded as hours of work to the extent determined by national laws and regulations, collective agreements or any other means consistent with national practice
- Worker should be in possession of own documents.

Review of Literature

Hemalata, 22 December (2006) conducted a study on Hazards Faced by Women Domestic Workers, OUT of the total 397 million workers in India, 123.9 million are women. Of these, roughly 106 million women work in rural areas and the remaining 18 million work in urban areas. Overall, the female domestic workers participation rate has increased from 19.7 per cent in 1981 to 25.7 per cent in 2001. In the rural areas, it has increased from 23.1 per cent to 31 per cent and in the urban areas from 8.3 per cent to 11.6 per cent. Although more women seek work, without any job security or social security. This is because of the increasing unemployment and under employment among the male members of the family and the increasing cost of living as a result of the neo liberal economic policies.

Sister Josephine AmalaValarmathi, (2008), conducted a study on The Work of Domestic Workers in India educate workers about their rights and advocate at the local, national, and international level for women pulled into this industry as a result of poverty, displacement or trafficking. Domestic work is often not viewed by society and government as "real" work. They are usually referred to as "maids," "servants," or "helpers." This social stigma has undermined the self-esteem of domestic workers. But there has been a shift over the years in the awareness and recognition of domestic work as work. The term "domestic worker" itself intends to give dignity, status and respect to the occupation. The empowerment of domestic workers and the struggle for fair working conditions has contributed to this shift in attitudes by some employers as domestic workers have come to be valued as employees and human beings.

2. Research Methodology

Significance and Scope of the Study:

It is found that among all categories in the informal sector, earnings of domestic servants are lowest and their problems are many. They are being employed generally for household tasks which include washing...
utensils and clothes, fetching water, sweeping and cleaning house along with a few outdoor tasks like irregular marketing, grocery shopping, ration drawing even childcare activity. In fact, many of these women are looking after more than one household but spend more time and work more for their employer’s than working in their own household. This study tries to understand the problems faced by the domestic workers and educate them about their schemes. This study is being done with the domestic workers. The researcher studies the problems faced by them and their difficulties in day-to-day life.

Aim of the Study
“A Study on Problem faced by women domestic workers at mgr Nagar, Trichy”

Objectives
❖ To find out the demographic of respondents
❖ To study the psychological problems of respondents
❖ To study the emotional problems of domestic workers
❖ To study the how they are being ill treated by the house owners
❖ To find out the how much they are being paid
❖ To study the increase of their stress level
❖ To educate them about the government welfare schemes for them

Research Design
The research design adopted by the researcher is Descriptive Research Design. Descriptive research studies are those which are concerned with describing the characteristics of a particular individual or group.

Universe: The universe of this study is Female Domestic Workers in mnr Nagar, Trichy”. Sample Size: The sample size for this study is 50. Sampling Technique: The sampling technique adopted for this study was convenience sampling where the researcher collected the data from the respondents whoever present in the field.

Tool for Data Collection: The researcher used interview schedule method to collect the primary data from the respondents.

3. Results and Analysis

Table 1. Distribution of Respondents by Their Number of Working Houses per Day

<table>
<thead>
<tr>
<th>No of working Houses</th>
<th>No of respondents n:50</th>
<th>Percentage</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>34</td>
<td>68</td>
</tr>
<tr>
<td>2</td>
<td>16</td>
<td>32</td>
</tr>
<tr>
<td>3</td>
<td>50</td>
<td>100</td>
</tr>
</tbody>
</table>

The above table explains the distribution of respondents by their number of working houses per day. The majority of respondents (68%) work in 2 houses and one third of respondents (32%) work in 3 houses.

Table 2. Distribution of Respondents by Their Reason to Work as Domestic Workers

<table>
<thead>
<tr>
<th>Reason to work</th>
<th>No of respondents n:50</th>
<th>Percentage</th>
</tr>
</thead>
<tbody>
<tr>
<td>Traditional work</td>
<td>07</td>
<td>14</td>
</tr>
<tr>
<td>Poverty</td>
<td>27</td>
<td>54</td>
</tr>
<tr>
<td>Family situation</td>
<td>16</td>
<td>32</td>
</tr>
<tr>
<td>Total</td>
<td>50</td>
<td>100</td>
</tr>
</tbody>
</table>

The above table explains the distribution of respondents by reason to work as domestic workers. More than half of the respondents (54%) work due to poverty, one third of the respondents (32%) work due to family situation and some of the respondents (14%) are traditional workers.

Table 3. Distribution of Respondents by Their Safety Measures at Work Place

<table>
<thead>
<tr>
<th>Safety measures</th>
<th>No of respondents n:50</th>
<th>Percentage</th>
</tr>
</thead>
<tbody>
<tr>
<td>Yes</td>
<td>09</td>
<td>18</td>
</tr>
<tr>
<td>No</td>
<td>41</td>
<td>82</td>
</tr>
<tr>
<td>Total</td>
<td>50</td>
<td>100</td>
</tr>
</tbody>
</table>
The above table explains the distribution of respondents by their safety measures at work place. The vast majority of respondents (82%) have no safety measures at their work place and some (18%) of the respondents have safety measures.

<table>
<thead>
<tr>
<th>Physical Inability</th>
<th>No of respondents n:50</th>
<th>Percentage</th>
</tr>
</thead>
<tbody>
<tr>
<td>Yes</td>
<td>46</td>
<td>92</td>
</tr>
<tr>
<td>No</td>
<td>04</td>
<td>8</td>
</tr>
<tr>
<td>Total</td>
<td>50</td>
<td>100</td>
</tr>
</tbody>
</table>

The above table explains the distribution of respondents by their facing physical inability. The vast majority of the respondents (92%) face physical inability and few of the respondents (8%) do not face any physical inability.

Major Findings
1. The majority of respondents (68%) work in 2 houses
2. More than half of the respondents (54%) work due to poverty
3. The vast majority of respondents (82%) have no safety measures at their work place.
4. The vast majority of the respondents (92%) face physical inability

Suggestions
➢ The domestic workers should be given equal human rights.
➢ More schemes should be provided to them.
➢ The domestic workers should not be compelled to take responsibility of house owner’s mistake.
➢ A separate association must be formed by government for the welfare of domestic workers.
➢ Discrimination should be avoided
➢ Fixing wages to keep pace with other paid work in the informal sector.
➢ Providing support service like day meal to all domestic workers irrespective of their nature of work.
➢ Providing the workers some degree of flexibility in working hours.
➢ Minimizing degree of command over the workers by the employers and imposing acceptable workload to the workers.
➢ Building up proper understanding between workers and employers over worker’s failure to attend at work.
➢ Setting up formal domestic workers unions, this can look after their interests.
➢ Providing equitable extra wages for extra workload due to arrival of employer’s guests on holidays and festivals.
➢ Providing annual incremental benefit to all workers.
➢ Providing minimum leave facilities to the workers.
➢ Passing out legislations for the welfare of the workers.

4. Conclusion
The relationship between the domestic worker and her employer is basically a women-to-women relationship. Of course, it is guided and protected under the shadow of patriarchy. Women, whether employer or employee, are to be viewed across cultures from their distinctive spheres. For women, the primary location is their family and their household. They may have other structural sites for activity, especially in the market company. The world market economy views all societies under the capitalistic model and sees women’s role in the social system only to the degree that their labour is a part of capitalism that is they are within capitalist production and markets.
References

7. Social Protection for Domestic Workers: Need for Innovative Approaches. Shalini Sinha
Middle Age Women, Menopause their Health Concern in Life

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Abstract
According to Oxford English Dictionary middle age is between 45 and 65. Middle age is the period beyond young adulthood but before the onset of old age. The most common discomfort and health issues related to this age women is menopause and menopause transition. Menopause is an important phase in women’s life which most often goes unnoticed. Menopause is defined as the time when ovaries cease functioning and menstrual periods stop, making end of reproductive years. Menopause is a term derived from the Greek words men (month) and pausis (cessation). The terms pre-menopause, perimenopause, menopause transition are often used the whole time before menopause from menarche, the period beginning with the first clinical, biological and endocrinical features of the approaching menopause. This menopausal transition occurs due to changes in levels of follicle stimulating hormones (FSH). Thus this presentation aims at findings clarifying prevalence of discomfort level in menopausal women, awareness about menopause and menopausal problems during menopausal transition in middle age women.

Keywords: Middle age; Menopause; Menopausal transition (Perimenopause); Endocrinal features.

1. Introduction
Middle age is the period beyond young adulthood but before the onset of old age. Women nearly spend more or less complete twenty years in middle age. The holistic health and wellbeing of middle-aged women has become a major health concern globally. Many women experience physical and psychological symptoms in these years which affects their quality of life. Thus creating awareness and educating women on the early identification of symptoms in menopause can increase coping mechanism in day today life. Exercise, eating right food, relaxation technique are some common phenomenon to be introduced. Aging brings weight gain and your chances for getting high blood pressure, diabetes, heart disease and stroke increases. Half of all cancers happen when you jump to 50 or in between 50-65 years. One a may feel less pleasure or interest in activities as they did before. Person may feel lonely, as such “Talk therapy” can help. Thus going out, not siting too long, talking to friends and family, connecting with others, doing voluntary work for society, will enrich your body and spirit.

Significance of the Study
Turning 45 or more is the time to put all of your hard earned, healthy living knowledge to work. One should know when to get health screened, and know the importance of exercise and good nutrition. Awareness about menopause brings women in evaluating her own health status. It also teaches her that she is not the only person who undergoes this phase but all women has to was like stages of life. Midlife brings special health challenges to women and none of those challenges have to stop you from living a vibrant and productive life for decades to come. This is the age to keep yourself best of health.

Review of Literatures:
J. Rukumani, (2015) A cross sectional descriptive study conducted to assess knowledge on menopause among perimenopausal women at selected area of Puducherry. The results showed that women were in poor knowledge of ovulation, menopausal problems, medication, nutrition and coping strategies but moderately adequate knowledge in meaning of menopause and adequate knowledge in the aspect of psychological problems.

Jadhav A et al. (2017) An epidemiological study of the perimenopausal and menopausal health problems in women living in an urban area of Mumbai, Maharashtra conducted by A Ashwin Jadhav and Yogita Bavaskar conclude in their study that there is high burden of menopausal symptoms in women and the menopausal symptoms are affected by various socio-demographic factors like marital status, parity (equality), tobacco chewing etc...

Poomalar GK and Bupathy, Arounasalame(2013) A cross sectional study was done at Sri Manakular Vinayagar Medical College and Hospital, Puducherry. Five hundred women in the age group of 40-

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65 years from rural area were included. The study showed scores of vasomotor domain were significantly more in menopause transition. [Vasomotor domain includes hot flashes and night sweat] scores of physical domain were significantly more in late post-menopausal women [physical domain includes the physical activity performed].

Nabarun Karmakar (2017) Quality of life among menopausal women, a community based study in a rural area of West Bengal showed results that 60% had hot flashes, 47% reported sweating. Most prevalent psychosocial symptoms were feeling of anxiety and nervousness. Depression reported about 88% women, and lack of energy in 93% women, 5% reported facial hair growth.

BenerA et al. (2016) the study International studies included Depression, Anxiety and stress symptoms in menopausal women (Arab women). This cross sectional descriptive study showed that there were statistically significant differences between menopausal stages with regards to age, ethnicity, educational status, occupational status, and place of living. A large number of factors were associated with experiencing menopausal and psychosocial problems which had negative effects on the quality of life among Arabian Women.

Min-Ju Kim et al (2014) conducted a study on Association between physical activity and menopausal symptoms in perimenopausal women. This study was conducted in Kangbuk Samsung hospital in perimenopausal Korean women. The study concluded that moderate level of physical activity was associated with reduced psychosocial and physical menopause symptoms.

2. Results

Menopausal health demands priority in Indian Scenario due to increase in life expectancy and growing population. A study on post-menopausal women in Urban Puducherry was conducted among post-menopausal women showed that they suffered psychological problems and poor quality of life. On an average, an Indian woman spends almost one-third of her life span in the post-menopausal phase enduring the consequences of hormonal decline. This makes them vulnerable to a new set of health and mental problems. It further add that in India, most studies are related to age at menopause, but in Western countries women are better informed about the implication on menopause. Unlike reproductive health programme Indian government should concentrate on menopausal women’s health services. National health programs must include health programs for women over the age of 40 years. An online study on work outcomes in midlife women results showed that work outcomes were not associated with menopausal status but were significantly associated with job stress and aspects of work environment such as demand, control and support, frequency and problem-rating were not significantly associated with work outcomes.

Their results challenges assumption about the menopause transition by providing evidence that the menopause does not impact on women’s self-reported work performance and absence. However, support for women with problematic HFNS (Hot Flashes and night Sweats) at work may be beneficial, as might addressing working environment issues for mid-aged women.

Middle age

Id age is the period of life between youth and before old age. There is no fixed age, but most people think it begins when someone is 40 years old (Wikipedia).

Menopause

Process through which woman ceases to be fertile. It is a normal part of life and is not considered a disease on a condition. Symptoms may occur years before a woman’s final period. Some women may experience symptoms for months on years afterward. A reduction in estrogen level can lead to the symptoms of menopause.

Peri-menopause

During this phase a women’s estrogen level drops significantly. Peri menopause is the 3 to 5 year period before menopause. Women can experience depression and low mood. Menopause can affect cognitive functions, such as concentration.

Other symptoms of menopause include

- A build-up of fat in the abdomen, sometimes leading to overweight and obesity.
- Hair loss and thinning hair

Menopause complications includes

- Cardiovascular diseases
- Osteoporosis
- Urinary incontinence
- Breast cancer
Most women do not require medical advice. However, if it affects her quality of life women should visit a doctor.

Endocrinal features

A reduction in levels of the hormones estrogen and progesterone triggers the effects of menopause. Estrogen regulates menstruation, and progesterone is involved with preparing the body for pregnancy. When a women reaches her late thirties these two hormones becomes less (Production in ovaries), over time they shut down completely. This changes is gradual in most women, but some find that their menstrual cycle continues as normal and then suddenly stops (Medical Newstoday.com Sep 2017).

3. Suggestions and Conclusion

Suggestions
✓ “Beginning of the end” or “end of the beginning” – Tradition and culture has taught much to women. She is a “power house” and stands strong like a pillar. In Indian scenario not much is focused about menopausal health. And this era is turning out much on girl and women empowerment. So every ones reflection will add great value. According to individual women’s personality, stress handling, and other inter-related factors has a greater effect on how women deal with menopause. “Celebrate Menopause” too.
✓ Life style changes like physical exercise, pelvic floor exercise, walking, bicycling, dancing, gardening, yoga, meditation, vigorous house or yard work will serve well. If you a beginner, start with ten minutes of light activity, slowly boosting physical intensity becomes easier. Indulge in artistic outlet.
✓ Painting, knitting, joining group activities, can give a sense of achievement and satisfaction. According to centre for Disease Control and Prevention, Women younger than 65 should spend at least 150 minutes a week one mild-moderate-intensity exercise.

Conclusions
Thus care for women’s health should be given importance. In this middle age children would have gone out of home for studies on any often reason. So she might feel lonely. Thus engaging herself in alternate activities can keep her fit.

References
Best Practices of Social Case Work; Recording

J. Lakshmi*

Abstract
Social work is a regulated profession with a high degree of legal and moral accountability. Social work is a professional course wherein we have different scientific methods of social work such as primary methods and secondary methods to solve societal problems. But when we look into the success of those methods in our Indian context, it is very less and not properly recognized otherwise it is not widely used by Indian people. But few methods are widely recognized and at the same time those recognized methods are not properly documented. Social work documentation is a very important and essential component of professional, ethical, and experienced practice in organizational, community, private settings and especially to practice case work. In fact recording considered as a heart of social work training and integral component of social work practice. The focus of recording is decreasing and technology and concerns about defensive practice changing the nature of social work recording. Social workers must be well-known with best practice standards and law making requirements impacting on all aspects of practice including documentation. This paper attempts to understand the importance of case work recording and standards in social case work documentation.

Keywords: Practice of social case work; Case work; Recording.

1. Introduction
The interviewing process is over, the caseworker has the responsibility to record the interview has to be translated into the language of the record (file, forms, and computer). Recording is an extremely important method to learn social work practice. In fact the very purpose of field work and the heart of social work training. A record exactly means ‘a formal writing of any fact or proceedings’ and when used as verb means ‘to set down in writing or other everlasting form’. However, from the above report one should not end that case recording is an easy, routine and simple task, far from it; it’s a highly skilled and complex task. Recording is an important and fundamental part of casework procedure and is an output of the activity of the casework. The implication of recording lies together in the process as well as the product. A question repeatedly asked is, why do we need to write records? Do they really serve any purpose? The importance of case records can be ascertained when we look at their role and the varied purposes they serve.

The Social Work Dictionary (2014) defines recording as “the process of putting in writing and keeping on file relevant information about the client; the problem; the prognosis; the intervention plan; the progress of treatment; the social, economic, and health factors that contribute to the situation; and the procedures for termination or referral”. A social work record refers to a written or electronic document that contains client information, professional observations, clinical decisions, intervention strategies, and outcomes generated throughout the delivery of social work services. Social work documentation is an integral and essential component of social work practice.

The purpose of social work recording
➢ An understandable statement of social work assessment, intervention, and decision-making
➢ Professional accountability and transparency to the client and organization and in keeping with relevant legislation.
➢ Opportunity for critical thought and indication on professional practice and service delivery
➢ Pertinent information to facilitate service delivery, continuity of care and termination of services
➢ Information for the purposes of supervision
➢ Documentation for the purposes of research and program evaluation
➢ Information for risk management and quality assurance
➢ A record to facilitate inter-disciplinary communication and collaboration

Principles of recording
Accuracy: the information given by the case worker must be precise and must not be changed by any means for the profit of the worker. It must contain all the actual and true communication. Entries must be
accurate and must distinguish between facts, opinions, assessments, judgments and decisions. Records should distinguish between first-hand data and information obtained from third parties:

- Objectivity: the data must be objective and must have all the options of taking as a working of the project. The information must be applied truly in every situation.

- Simplicity: the facts must be presented in an uncomplicated and clear and it should understand by the professional people. The information which is not serving/supporting the individual or the process of problem solving has to be avoided. The recording should not be making difficult the situation as well the process of case work.

- Clarity: Recording should be understandable and chronological. The reader should not be left with an interpretation of a recording that varies from the author’s meaning; and the worker must be clear about the circumstances and also create a clearer situation in the mind of the person who is reading the reports. He should be able to clarify all the essential information and the data with his reports. Recording should be carrying out with a clear view of the reader in mind i.e. the service user. Care should be taken with both the content and the language; Service users’ records should not contain unnecessary material, messages or notes. Duplicate information be supposed to be kept to a minimum;

- Timeliness: Entries must be written within three working days of the proceedings actually occurring. Entries will be recorded by the date of the occurrence, not the date of writing up, where appropriate;

- Legibility: All recording must be written concisely, in plain English and avoid the use of professional jargon;

- Confidentiality: Service users must be certain that information held about them will only be disclosed to others with their approval or when there is a lawful duty or power to do so. In realistic terms this means that information will be shared with other professionals who are concerned in considering and take action to the needs of the individual;

- Information will only be kept confidential from a service user for precise reasons e.g.
- Where revelation of the information is likely to result in serious damage to their physical or mental health or to that of another individual (including a member of staff);
- Where disclosure would recognize a third party who has not consented to being identified (this does not apply to third parties who have provided data in a professional capacity);
- Where disclosure would be likely to prejudice the prevention or detection of crime.

- Consent: Written consent must be gained from a service user before any private information relating to them is sought from other sources. However, a service user's permission to disclose their personal information or seek information from other agencies is not required in an example where the law or public interest overrides their right to confidentiality. These include:

- If there is a concern about an individual's security;
- Where the magistrates have made an order;
- To stop, detect or prosecute a serious crime.

- Sharing of information: In circumstances where an appeal is made to or by another organisation, to share information and the decision to share or not to share regarding who made the decision and the reasoning behind this, should be recorded;

- Management oversight must be evidenced: The line manager should regularly audit files in accordance with Case File Audit Programme. Relevant sections of the record must be endorsed, and issues of concern of proceedings identified during the course of the review recorded on the appropriate record;

- Recording of decision-making: To highlight the basis for the decision-making and the decisions made, including assessing risk and why other decisions were not made, should be clear. All of the people who take such decisions should be recognized and where necessary a copy of the signed decision should be uploaded onto Care Director. Each and every decision arrived at between supervisor and worker, whether in a formal or informal supervision session, must be recorded in the service user's case recording at the time of the decision being made. Managers must also employ supervision to make sure that the case record is being maintained in a reasonable state;

- Anti-discriminatory practice: All records must show an anti-discriminatory perspective and must not include any critical comments by the author on ethnicity, race, culture, gender, age, religion, language, communication, sensory impairment, disability, family make-up and sexual orientation;

### 2. Standards of social case work recording

Standard 1: Documentation is an integral part of social work practice and grounded in the values, ethics and principles of the social work profession.
It is therefore imperative that social workers document all interference in an ethical and competent manner. The values and principles that direct professional social work practice. These values include:

1) Respect for the Inherent Dignity and value of Persons
2) Maintain Social Justice
3) Humanity Services
4) Integrity in Professional Practice
5) Confidentiality in Professional Practice
6) Competence in Professional Practice

Social work documentation standards is relevant to all specialization of social work practice including medical, community development, management and supervision, research, education and policy development.

Standard 2: Social workers preserve records of social work intervention(s).

Social workers have an ethical and lawful responsibility to maintain social work records. Documentation of social work interventions with clients must be contained in one file. The records may be paper, electronic or both. Social workers should not maintain client data that is not relevant to the service delivery. Social work documentation should only contain data that addresses the clients’ needs and meets legislative, ethical and organizational requirements.

It is the responsibility of the social worker to update clients about what information is being recorded, how it is being used, and who will have access to this information as part of the informed consent process. Social workers must also be aware of organizational policies and legislation regarding access to the professional record and rights of appeal. Social workers in private practice are accountable for developing these policies.

Standard 3: Social workers make certain records are in a set-up that facilitates monitoring and evaluation of the social work intervention(s).

Social work documentation is finished in a timely and chronological in order to make sure accuracy, credibility and clarity of the information. Recordings must be completed following the intervention or as soon as reasonably possible afterwards. Social workers use professional decision to determine if records need to be completed more expeditiously. The need to file a record more immediately may depend on the intricacy of the case, degree of risk, impact on service delivery, and/or legislative requirements. Where organizational standards exist, social workers should be conscious of and adhere to policies and timelines for documentation to be completed.

Social work records must contain all data that is clinically relevant and important to the service delivery. At a minimum, records must include the following:

- Client’s name and contact information
- Presenting issue and explanation of professional service requested
- Client’s consent form
- Keeping pertinent documents (e.g., referrals, letters, court documents, etc.)
- Professional assessment, goals, interventions, and outcomes
- Progress notes
- Communication with other professionals and collateral contacts
- Clear statement of when and why the professional relationship is terminated
- Fee for service agreements (for those in private practice)

Records that are not clinically focused should include at the minimum contact information for applicable partners and stakeholders, assessments, planning and implementation notes, records of meetings and communication with stakeholders, appropriate consent forms, pertinent research, and evaluations. The nature of the interference or service delivery and organizational policies will outline the format and content of the social work record.

Social workers should keep documentation policies with the best interest of the client and standards for the profession. Records that are completed on a dissimilar date from which the intervention occurred must clearly identify when the intervention or client contact occurred. Social workers sign all records using their name, professional designation and should not sign records or reports authored by another social worker or professional. Social workers may cosign records where appropriate. Social work records should be free from jargon and sensitive or critical language. Short form should only be used after the term is explained the first time it is used in the record.

Consultations with a supervisor, coworker, or consultant that is pertinent to the service delivery must be documented in the client’s record. Clients must be informed that data may be shared with a supervisor or internal consultant as part of the social work service delivery when appropriate. Knowledgeable consent is needed when client information is released to an outside consultant.
Standard 4: Social work records shall comprise a clear assessment, intervention strategy and termination plan. Documentation and assessment skills are interrelated. Unfinished or inaccurate records can lead to insufficient services for the client. Assessments are based upon facts that should be evidently documented in the client file. Only facts that are necessary and appropriate to the assessment or service delivery should be recorded. The type of information considered relevant will depend on the circumstance of practice and professional judgment of the social worker. All professional opinions require to be supported with facts, and professional observations must be distinguished from information provided directly by the client. 

On-going records should clearly recognize the services to be provided, the client objectives for intervention, and outcomes. The client is considered the primary source of data. In conditions where the client is not able to provide information to direct the intervention, social workers seek guidance from local statutes and organizational policies on who should be speaking on behalf of the client (e.g., next of kin, power of attorney, substitute decision-maker, etc.). Client information from referring organizations, professionals involved in the client’s care, and collateral contacts must also be included in the social work record. 

Social work is a complex profession burdened with ethical and practice dilemmas. It is significant that social workers document ethical decision-making processes when working through an ethical dilemma or issue with a client or client system in the social work record. Examples of moral issues that may be important to document in the client record include conflicts of interest, professional boundaries, dual and multiple relationships, and professional self-disclosure.

When social work relationships are ended, the record should comprise a clear statement to indicate the end of the professional service. Social workers follow managerial policies and best practices guidelines regarding the retention of social work records after the professional relationship has ended. Social workers in personal practice are responsible for developing policies pertaining to the preservation of social work records. Social workers are responsible for informing clients of the extent of time in which records will be stored, security measures, and how clients can access them if needed during this time period.

Standard 5: Social workers keep client confidentiality and make sure that clients are aware of the limits of the confidentiality of social work documentation before initiating the social work relationship and throughout the relationship as needed.

Social workers take initiatives for protecting the confidentiality of a client’s written or electronic record. It is vital that social workers “take rational initiatives to make sure that clients’ records are kept in a secure location and that clients’ records are not available to others who are not authorized to have access”. When social workers offer services to more than one individual in a client system (e.g., families, couples and groups), it is important that all parties are informed of each individual right to confidentiality and the confidentiality of data shared by others, and how records are being upheld. This information should be clearly documented in the client folder. Clients being seen individually, in addition to the family, group or couple’s work, must have their own social work record.

The rules for disclosure of client data and records:

a) With the knowledgeable approval of clients. This approval, written or verbal, should be documented in the client record.

b) When disclosure is essential to prevent serious, foreseeable, and imminent harm of the client or others. Social workers use their professional judgment to decide how much client information needs to be disclosed to prevent harm.

c) When required by federal and local laws or regulations. The CASW Guidelines for Ethical Practice states that where the “consent of clients is not required, social workers attempt to notify clients that such access has been granted, if such notification does not involve a risk to others”.

When disclosure of social work records is required by a court order or subpoena, social workers should be well-known with the nature of the request, look for consultation, take care not to discharge more information than is required, update the client where appropriate, and strive to protect confidential client information from unreasonable public exposure. This may engage applying to the court for some client information to be withheld from the public record; however, consultation with a supervisor or manager would be careful in this situation.

Standard 6: Social workers are familiar with best practice rule pertaining to technology use and documentation.

Within the existing context of technological advances, it is vital that social workers take safety measures to ensure and maintain the confidentiality of information transmitted to other parties through any form of electronic communication. Social workers must be aware of and inform clients of the limits to confidentiality that may be relevant to these forms of communication. The following are some areas for consideration:
The date received through electronic communication from clients that have clinical or therapeutic significance should be documented in the clinical file.

Framing policies around documentation to use electronic modes of communication for recording

It is important that social workers should maintain password when using electronic forms of documentation to secure data of the client.

Getting consent from the client is necessary on which type of information can communicate through electronic forms and efforts must be made to ensure the security of client private matters and it should be clearly documented in the client file.

Standard 7: Social workers are well-known with best practice guidelines for completing social work documentation and engage in continuing professional education.

Social workers are responsible for being well-known with standards and best practice guidelines leading social work practice and documentation. As part of on-going professional development, social workers continue to evaluate their knowledge of social work documentation through self-reflection and discussion with peers, managers and/or supervisors and to connect in professional development opportunities to foster sustained learning and competency.

Standard 8

Documentation of community development project planning, processes, policy development, and research is grounded in the values, ethics, and philosophy of the profession. Social workers working in community organizations and consulting work, document their work with clients, families, groups, communities, employers and stakeholders in accordance with the profession.

3. Conclusion

Recording helps in learning, as one while recording gets an opportunity to reflect back upon his/her interaction and locate the wrong committed by him/her. Recording serves administrative and research purpose also. Anyone can work on these records to see how different approaches used is helpful to serve the clientele and what modifications are required in the approaches to achieve the desired results. A record also serves teaching purposes to evaluate appropriateness of the process used. Recording provides an opportunity to the caseworker to develop insight into his own personality and social functioning leading to a desirable change in him or her. Therefore maintaining and keeping standards for recording is very much needed for achieving a greater status in the society.

References

PSYCHO – SOCIAL PROBLEMS OF THE ELDERLY

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Abstract
A major demographic issue for India in the 21st century is population ageing, with the changing demographic indicators India will move from being a young country to an old country over the next few decades. Presently, India has around 90 million elderly people and by 2050, the number is expected to increase to 315 million, constituting 20 percent of the total population (Global Report on Ageing, 2012). Elders are dependent on others due to increasing health problems and other age related problems. This study was conducted to gain insights into the psycho-social problems faced by elderly persons in Chennai. A descriptive design with simple random sampling was adopted and the analysis reveals that most of the respondents coming from nuclear families were in the old age homes because their children could not take care of them at home. Elder abuse in the form of disrespect and neglect has been experienced by some. Proper and sensitive care will add life to years for the elderly. The programmes for the elderly need to be both, developmental and humanitarian with multiple strategies targeted at all stakeholders. Young people and communities should be sensitized and family support systems needs to be strengthened. Every stakeholder must contribute to make the society friendlier for elderly persons.

Key Words: Elderly; Elderly Abuse; Problems of Elderly.

1. Introduction
Over the last few decades with the rapid changes in socio-demographic indicators, India is certain to move from being a young country to an old country over the next few decades. Presently, India has around 90 million elderly persons and by 2050, the number is expected to increase to 315 million, constituting 20 percent of the total population. Nearly 70 percent of rural elderly are dependent on others, and their health problems increase with age. In addition to problems of unemployment, illiteracy, disabilities and widowhood, older people also face life-long gender based discrimination, resulting in differential patterns of ageing among men and women. The Global Report on Ageing (2012) in India reinforces that there is multiple discrimination experienced by older persons, particularly older women, including in access to jobs and health care, denial of the right to own and inherit property, subjection to abuse, and lack of basic minimum income and social security (UNFPA & Help Age International, 2012).

However, with the rapid changes in recent years in the social, economic and cultural scenario and the emergence of nuclear family set-ups in India the elderly people are likely to be exposed to physical, emotional and financial insecurity. This has drawn the attention of the central and state government’s policy makers and administrators, civil society and voluntary organizations. Most of the elderly people who have worked in organized sector get pension and other retirement benefits after attaining the age of 60/65 years. In addition to problems of unemployment, illiteracy, disabilities and widowhood, older people also face life-long gender based discrimination, resulting in differential patterns of ageing among men and women. The Global Report on Ageing (2012) in India reinforces that there is multiple discrimination experienced by older persons, particularly older women, including in access to jobs and health care, denial of the right to own and inherit property, subjection to abuse, and lack of basic minimum income and social security (UNFPA & Help Age International, 2012).

Review of literature
‘By 2026, North India population would be younger compared to the South’ as quoted by Central Statistics Office, Government of India. As per details from Census 2011, Tamil Nadu has population of 7.21 crores, an increase from 6.24 crore in 2001. According to the National Rural Health Mission, State Health Society of Tamil Nadu, the Elderly population (60+ years) accounts for 8.8 percent of the total population of Tamil Nadu. Given the trend of demographic transition in the country, the older population faces a number of...
problems and adjusts to them in varying degrees. These problems range from their dependents to ill health, absence of ensured and sufficient income to support themselves, absence of social security, loss of social role and recognition and the lack of opportunities for creative use of free time. According to their age, the needs and problems of the elderly vary significantly based on their socio-economic status, living status, health, and other such background characteristics. The longer people live and into much advanced age (75 years and over), they need long term and more intensive care, which will increase the financial stress on the family.

Among the several problems of the elderly, economic problems occupy asignificant position. Mass poverty is a reality in India and with vast majority of the families having less income is not even able to ensure a reasonable standard of living.

In India inadequate income is a major problem of elderly. The most vulnerable are those who do not own productive assets, have little or no savings or income from investments made earlier, not taken care of by their children and who have no pension or retirement benefits; or they live in families that have low and uncertain incomes and a large number of dependents.

Nearly half of the elderly are fully dependent on others, while another 20 percent are partially so (NSSO, 1998). Dependency ratio of the elderly is very high and more so among elderly females. 70.6 percent and 75.7 percent of the urban women are totally dependent. The demands of the elderly from the support systems are higher due to their dependency resulting in a conflict between elderly and the support systems. For elders living with their families still the dominant living arrangement, their economic security and well-being are largely contingent on the economic capacity of the family unit. Particularly in rural areas, as their occupations are seasonal in nature families suffer from economic crisis.

More elderly men participate in the economic activities compared to women and their participation is comparatively higher in rural areas. Women are more likely to dependent on others, given lower literacy and higher incidence of widowhood. The most vulnerable are those who do not own productive assets have little or no savings or income from investments made earlier, have no pension or retirement benefits, and are not taken care of by their children; or they live in families that have low and uncertain incomes and a large number of dependents.

Ageing is a problem in the lower upper class and middle class as these groups go for modernization of their institutions at a greater speed than the other population categories. With the increasing cost of living and the materialistic way of life families of this class are becoming more self-centric in nature. They are reluctant to take care of people who are not productive. Migration is an added problem in this category and states like Kerala experience this type of old age problem.

While the government continues its efforts to introduce programmes for the welfare of the elderly, it is the non-governmental organisations which have played a key role in bringing to the forefront the problems of the older people to the society at large and through its various services it has sown the seeds for a forum whereby the voice and the concerns of the elderly can be addressed.

Objectives of the study
The study focussed on the psycho-social problems of elderly in related to the following areas;

- To understand the situation of elderly persons in family.
- To comprehend the incidence and types of elderly abuse.
- To understand role of civil societies in providing services to elderly persons.
- To study the role of government in protecting and safeguarding the rights of elderly persons.

2. Research methodology
The universe for the study was two old age homes located in Chennai, there were a total 155 elderly people living in these homes which basically are working for elderly destitute women and run a day care as well. Under probability method, a simple random sampling technique using lottery method was adopted for selection of 50 samples. An interview schedule was used for data collection.

Findings and discussion
This research has provided understanding on various psycho-social problems faced by elderly persons living in an old age home. Most of the respondents come from middle class family. Despite having children they were staying in an old age home because nobody is there to take care of them at their home. They felt neglected and their grandchildren spent hardly time anytime with them. Few of them faced abuse mainly disrespect and verbal torture. Their conditions have improved in the old age home when compared to their home but still they all missed their families:

Socio Economic Conditions: Forty two percent of the elderly people from the chosen old age homes belong to age group 70-74 years while ten percent of them belong to age group 75 and above. The study reveals...
that more than half (58%) of the elderly people living in the old age home were from nuclear families and 78 percent had children. Sixty percent of the respondents were Hindu and 54 percent were from backward class. Forty two percent of them were illiterate and only 14 percent had done high school and 16 percent were intermediate pass. Forty four percent of the elderly were widow and 60 percent of the respondents were not getting their pension.

Situation of Elderly Persons in Families: The study reveals that 74 percent of the respondents felt neglected in their families. Majority 83.3 percent expect that children should treat elderly people with respect. Sixty six percent of the respondent’s children spent time once or twice in a week with them. Thirty two percent feel that they cannot freely discuss their problems with their children. More than 60 percent had mentioned that their children or family members used to help them in taking to hospital during illness and providing a proper diet. Half of the respondents (50%) cited that their grandchild use to spent time only on some occasions and 54 percent agreed that, today’s education system has put lot of pressure on the children and therefore they spend less time with them. Fifty two percent agreed that parents sometimes encourage the grandchildren to spend time with them. Only 36 percent have mentioned that their relatives use to advise their children not to neglect the presence of their parents.

Abuse of Elderly Persons: In trying to understand the causes of abuse happening amongst the elderly people, it was evident that 44 percent of the respondents were abused in some form and 63 percent of such abused elderly persons, did not report the matter. The most common form of abuse experienced was disrespect (70.8%) followed by verbal abuse (58%). Sixty four percent of the elderly were facing abuse for 5-10 years, while 36 percent have been experiencing abuse for the last 1-5 years. The son has been reported as a primary perpetrator of abuse (27.10%) followed closely by relatives and family members (23.70%). In terms of reporting abuse, it was found that 83.10 percent approached their community leaders while 64.3 percent had approached other family members. Elderly shared about the abuse experienced at home to the community leaders and family members because 60.7 percent had confidence in the ability of those persons to help in dealing with their problems. The elderly has not approached outsiders because they (57.1%) wanted to maintain the confidentiality of these family issues. The analysis reveals that 91.7 percent of the respondents did not approach any person or agency to report abuse only because they accepted it as their fate. Majority of 66.7 percent had no awareness about their rights and organizations working for elderly persons rights. The major reasons cited by the respondents for prevalence of elder abuse include: emotional dependence of the elderly (54%), lack of adjustment (22%) and economic dependence of elderly (10%).

Role of Civil Societies in Providing Services to Elderly Persons: The major reason for the elderly to join an old age home is because nobody is there to take care of them (82.10%). Majority (70%) of the respondents are not aware of organizations working for the rights of the Elderly Persons. Eighty two percent of the elderly were referred to an old age home either by their family or friends or neighbours. Majority (78%) agree that their situation in the old age home has improved compared to their homes. Its saddening that 92 percent of elderly person’s family members never come to see them in the old age home. Most of the services provided by the old age home include shelter, food, clothing, regular health check-ups, and recreational activities. Majority (90%) felt that the services provided in their old age homes were good. Twenty four percent of the respondents felt discomfort in the old age home and the reason was because they missed their families and the facilities provided in the old age home were not up to their expectations. In terms of the elderly expectations with regard to the services provided at the old age home, 25 percent expect more recreational activities, 23 percent expect frequent outings, 18 percent want better treatment by the inmates and nearly 13 percent expect better infrastructure facilities.

Role of Government in Protecting and Safeguarding the Rights of Elderly Persons: Majority 82 percent of the respondents are not aware of the helpline working for elderly persons in India. Almost everyone (96%) of the respondents is not aware of the Maintenance and Welfare of Parents and Senior Citizens Act, 2007 and its benefits. Ninety one percent of the respondents who faced abuse didnot file case against the abuser. It was also revealed that 82 percent do not agree in punishing their children in case if they have abused their parents due to mainly emotional attachment of parents.

3. Suggestions and Conclusion
Suggestions
Understanding the need of the hour, as the life expectancy in India tends to be increasing every decade. It has become more important than ever for a real effort to be made in improving the lives of elderly persons.

- One way to deal with the situation would be to ensure that the elderly have enough money on which to live and not becoming dependent on others. Obviously, when a person stops working, they still require a source of income to cover their basic needs such as food, accommodation and clothing. A clear solution to the problem is for the government to make sure that the state pension is adequate for these needs.
- There are many elderly persons in urban areas, who are fit to work but are denied opportunities for work after their officially prescribed retirement age. Hence, there is a need to introduce part-time work (re-employment) for them.
- The lives of elder people could also be improved if attempts were made to address the problem of social isolation which so many of them face. Old age homes can organize trips for the elderly to visit various community centres, visits from social workers to old age homes or free bus passes to allow pensioners greater mobility, the effect would be to alleviate the problem of loneliness which marks the lives of so many old people living alone and far from their families.
- The study also revealed the lack of awareness amongst the elderly people on various helplines, non-government organisations, government policies working for the rights and safety of elderly persons which itself suggest a major effort to be put in the same direction to sensitize regarding elder abuse and corrective mechanisms working in the country.
- Lastly, the existing family care and support of the elderly persons should be strengthened by providing additional support from the community.

Conclusion

Considering the above findings, most of the elderly belonged to the age group 70-74 years and a large percentage were widow. The study reveals that most of the respondents had children but still they were in the old age homes. Disrespect, neglect and verbal abuse are the three forms of abuse experienced by the elderly. Sons are reported as a primary perpetrator in most cases of abuse followed by relatives and daughter-in-law. From the perspective of the elderly, the major reasons for such abusive behaviour include: emotional dependency, lack of adjustment and economic dependence of the elderly. Thus, action needs to be taken against situations which make life difficult for the elderly. The extent of reporting of abuse is low and this can be attributed to maintaining confidentiality of family matter and lack of awareness of their rights. Old age homes are working towards the rehabilitation of the elderly but surely it cannot be the substitute for their own family. All stakeholders should work together in order to improve the existing scenario to improve the condition of elderly in families. Social security of elderly should be taken care of, they should be given opportunity for income generation, programmes to sensitize children and young adults and involvement of society at large against elder abuse should be initiated. It also involves the work of the gerontological and geriatric centres, advisory offices and government services to help the elderly, construction of recreational and care centres. Taking care of the elderly commonly involves the fulfilment of their physical needs; however, their psychological demands should also be satisfied. But above all, the family system must be strengthened so that the basic support systems of the elderly population will work smoothly and elder care should become the basis of our social system in view of rapid ageing of humankind.

References

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