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 Tamil Nadu 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 its 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 Dhayabar, 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

Dr. SAM DEVA ASIR RM
Co-Organizing Secretary

Dr. A. UMESH SAMUEL JEBASEELAN
Organizing Secretary
EDITORIAL TEAM

Chief Editor
Dr. A. UMESH SAMUEL JEBASEELAN - Associate Professor of Social Work

Associate Editor
Dr. SAM DEVA ASIR. R.M - Assistant Professor of Social Work

Managing Editor
Dr. A. RELTON - Associate Professor of Social Work & Head

Editorial committee
Dr. B. ARUNKUMAR - Assistant Professor of Social Work
Dr. F. CARTER PREMRAJ - Assistant Professor of Social Work
Ms. M. REENA REBELOW - Assistant Professor of Social Work
Dr. M. DANIEL SOLOMON - Assistant Professor of Social Work & Coordinator
Mr. E. EDWIN FRANKLIN SAMUEL - Assistant Professor of Social Work
Dr. T. GIFTSON - Assistant Professor of Social Work
Dr. M. GABRIEL - Assistant Professor of Social Work

Editorial Assistance
Mr. M. KALAIYARASAN - Doctoral Research Scholar
Mr. G. SAM SANGEETH - Doctoral Research Scholar
Ms. A. NANCY - Doctoral Research Scholar
Mr. C. DHINESH BABU - Doctoral Research Scholar
Mr. P. PADMANABAN - Doctoral Research Scholar
Mr. A. ABIRAMI - M.Phil. Research Scholar
Ms. D. ESTHER ISWARYA - M.Phil. Research Scholar
Ms. NS. JISNA MARY - M.Phil. Research Scholar
Ms. M. THAMIZH MALAR - M.Phil. Research Scholar
Mr. A. VIJAY KRISHNAN - M.Phil. Research Scholar
<table>
<thead>
<tr>
<th>S. No.</th>
<th>TITLE</th>
<th>Author(s)</th>
</tr>
</thead>
<tbody>
<tr>
<td>1.</td>
<td>PROFESSIONAL CHALLENGES FACED BY WOMEN SCHOOL COUNSELLORS – A CASE STUDY ANALYSIS</td>
<td>Semichan Joseph &amp; Dr. D. Nirmala</td>
</tr>
<tr>
<td>2.</td>
<td>INFORMATION AND COMMUNICATION TECHNOLOGIES (ICTS): A NEW RESEARCH SCOPE FOR PROFESSIONAL SOCIAL WORK EDUCATION</td>
<td>Arivanandan Masilamani</td>
</tr>
<tr>
<td>3.</td>
<td>PATTERNS OF CASTE BASED SOCIAL EXCLUSION IN THE DIGITAL ERA</td>
<td>Vijimon Iyyappan</td>
</tr>
<tr>
<td>4.</td>
<td>IMPACT OF VIDEO GAME ADDICTION AMONG COLLEGE STUDENTS</td>
<td>A. Amala Ruba &amp; Dr. F. Carter Premraj</td>
</tr>
<tr>
<td>5.</td>
<td>REFORMING SOCIAL WORK PROFESSION – IMPROVING SOCIAL WORK RECRUITMENT USING E-NETWORKING</td>
<td>Manikanandan S. Preenu Ashok, Swampl Vyas, Vinodhini Subramaniyan &amp; S.Prabakaran</td>
</tr>
<tr>
<td>6.</td>
<td>EMERGING TATTOO CULTURE – AN ANALYSIS</td>
<td>Padmanaban P &amp; Dr. F. Carter Premraj</td>
</tr>
<tr>
<td>7.</td>
<td>FACTORS PROMOTING POSITIVE ADAPTATION AND RESILIENCE DURING TRANSITION AMONG FRESHMEN IN RESIDENTIAL COLLEGES.</td>
<td>Jerylene Priyadharshini &amp; Dr. A Relton</td>
</tr>
<tr>
<td>8.</td>
<td>EFFECTS OF PARENTING STYLE AND DEVIANT BEHAVIOUR AMONG ADOLESCENTS : AN INTROSPECTIVE STUDY</td>
<td>M. Reena Rebellow &amp; Dr. R.M. Sam Deva Asir</td>
</tr>
<tr>
<td>9.</td>
<td>COPING WITH BREAST CANCER</td>
<td>B. Josephine Sudhanthra &amp; Dr. A. Relton</td>
</tr>
<tr>
<td>10.</td>
<td>A STUDY TO ASSESS THE COPING STRATEGIES AND PROBLEMS FACED BY WIVES OF ALCOHOLIC AT POLLACHI TALUK, COIMBATORE DISTRICT.</td>
<td>B. Shankar Anandh &amp; Dr. Anbuselvi</td>
</tr>
<tr>
<td>11.</td>
<td>SELF ESTEEM OF CHILDREN IN OBSERVATION HOME</td>
<td>A. Mohammed Yasser Arafat &amp; Dr. J. O Jeryda Gnanajane Eljo</td>
</tr>
<tr>
<td>12.</td>
<td>SUSTAINABLE URBANIZATION: ISSUES AND CHALLENGES FOR EFFECTIVE URBAN GOVERNANCE</td>
<td>V. Kalyani &amp; Dr. K. R. Murugan</td>
</tr>
<tr>
<td>13.</td>
<td>SOCIAL ENTREPRENEURSHIP AMONG POSTGRADUATE STUDENTS IN BISHOP HEBER COLLEGE: A COMPARATIVE ANALYSIS AMONG SOCIAL WORK AND MANAGEMENT STUDIES TRAINEES</td>
<td>Jisna Mary N. S &amp; Dr. B. Arunkumar</td>
</tr>
<tr>
<td>14.</td>
<td>ORIENTING AND ADAPTING THE SOCIAL WORK EDUCATION AND PRACTICE IN THE CONTEXT OF EMERGING HEALTH CARE DEMANDS AND CHALLENGES IN INDIA</td>
<td>S. Senthil &amp; Dr. G. Kanaga &amp; Karikalan</td>
</tr>
<tr>
<td>15.</td>
<td>STRATEGIES ADOPTED BY PRIMARY SCHOOL TEACHERS TO IMPROVE THE LEARNING OUTCOME OF STUDENTS – A STUDY</td>
<td>G. Geetha &amp; Dr. R.M. Sam Deva Asir</td>
</tr>
<tr>
<td>16.</td>
<td>TEACHERS ROLE IN STUDENT ACHIEVEMENT IN CHENNAI PRIMARY SCHOOL</td>
<td>G. Geetha &amp; Dr. R.M. Sam Deva Asir</td>
</tr>
<tr>
<td>17.</td>
<td>ROLE AND APPROACH OF SOCIAL WORK IN THE PUBLIC HEALTH DOMAIN</td>
<td></td>
</tr>
<tr>
<td>18.</td>
<td>MEDICAL SOCIAL WORK INTERVENTION IN HOSPITAL SETTING: ROLE OF SOCIAL WORK IN DEALING WITH CHRONICALLY ILL PATIENTS</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Damen Queen &amp; Dr. A Umesh Samuel Jebaseelan</td>
<td></td>
</tr>
<tr>
<td>19.</td>
<td>SKILL DEVELOPMENT AS A SOCIAL WORK INTERVENTION FOR UNEMPLOYED YOUTHS AND DROPOUTS</td>
<td></td>
</tr>
<tr>
<td></td>
<td>R. Jenita Rathan</td>
<td></td>
</tr>
<tr>
<td>20.</td>
<td>COMMUNITY ORGANIZATION THROUGH COMMON LIVELIHOOD FEDERATION (CLF): INTEGRATED AGRICULTURAL CLUSTER DEVELOPMENT PROGRAMME FOR EMPOWERMENT OF TRIBAL WOMEN FARMERS</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Dr. N. Rajavel</td>
<td></td>
</tr>
<tr>
<td>21.</td>
<td>PERCEPTION OF SOCIAL WORK TRAINEES ON FEASIBILITY OF PRACTICING SOCIAL WORK METHODS AT FIELDWORK AGENCIES IN TIRUCHIRAPPALLI</td>
<td></td>
</tr>
<tr>
<td></td>
<td>M. Kalaiyarasan &amp; Dr. M. Daniel Solomon</td>
<td></td>
</tr>
<tr>
<td>22.</td>
<td>INFLUENCE OF SOCIAL MEDIA AMONG NAZARETH BUSINESS LEARNING CENTER STUDENTS AT NAZARETH COLLEGE OF ARTS AND SCIENCE – CHENNAI</td>
<td></td>
</tr>
<tr>
<td></td>
<td>J. Angelin Chitra &amp; Dr. A. Umesh Samuel Jebaseelan</td>
<td></td>
</tr>
<tr>
<td>23.</td>
<td>PERSPECTIVES OF SOCIAL WORK STUDENTS TOWARDS SUSTAINABLE DEVELOPMENT GOALS</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Dr. J. Lakshmi &amp; Dr. S. Rachel</td>
<td></td>
</tr>
<tr>
<td>24.</td>
<td>PROMOTING TRANSPARENCY AMONG NON GOVERNMENTAL ORGANISATION</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Antony Joseph Prabakar &amp; Dr. T. Giftson</td>
<td></td>
</tr>
<tr>
<td>25.</td>
<td>TOLERANCE FOR DISAGREEMENT AMONG COLLEGE STUDENTS</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Marystella Palmila &amp; Dr. Esther Rani</td>
<td></td>
</tr>
<tr>
<td>26.</td>
<td>SELF-ESTEEM OF SCHOOL GOING CHILDREN WITH SINGLE PARENT, TIRUCHIRAPPALLI DISTRICT</td>
<td></td>
</tr>
<tr>
<td></td>
<td>V. Madhavan &amp; Dr. B Arunkumar</td>
<td></td>
</tr>
<tr>
<td>27.</td>
<td>ATTITUDE OF POST GRADUATE STUDENTS TOWARDS HOMOSEXUALITY IN BISHOP HEBER COLLEGE, TIRUCHIRAPPALLI</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Jayaprakash Vaishali &amp; M. Reena Rebellow</td>
<td></td>
</tr>
<tr>
<td>28.</td>
<td>“A STUDY ON SUICIDAL TENDENCY AMONG PG STUDENTS IN DRBCCC HINDU COLLEGE, PATTABIRAM, CHENNAI -72”</td>
<td></td>
</tr>
<tr>
<td></td>
<td>S. Priya &amp; Rajan Jayabalan</td>
<td></td>
</tr>
<tr>
<td>29.</td>
<td>ACADEMIC INTEREST OF THE UNDER GRADUATE COLLEGE STUDENTS OF DHARMAPURI</td>
<td></td>
</tr>
<tr>
<td></td>
<td>P. Robert Ramesh Babu</td>
<td></td>
</tr>
<tr>
<td>30.</td>
<td>CHANGING FOOD HABITS AND MALNOURISHMENT IN INDIA</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Dr. Susmitha</td>
<td></td>
</tr>
<tr>
<td>31.</td>
<td>SECURING THE NEXT GENERATION OF MANUAL SCAVENGERS</td>
<td></td>
</tr>
<tr>
<td></td>
<td>A. Gokila &amp; J. Vignesh Sabarikiran</td>
<td></td>
</tr>
<tr>
<td>32.</td>
<td>“A PSYCHOSOCIAL IMPACT OF IPC SECTION 377 ON GAY MEN IN CHENNAI AND BANGALORE”</td>
<td></td>
</tr>
<tr>
<td></td>
<td>R. Sridhar &amp; Nesamani Rahel Jenifer</td>
<td></td>
</tr>
<tr>
<td>33.</td>
<td>SUSTAINABLE DEVELOPMENT IN URBAN AREA</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Avinash C</td>
<td></td>
</tr>
<tr>
<td>34.</td>
<td>SOCIO ECONOMIC IMPACT OF MGNREGA BENEFICIARIES – A CONCEPTUAL STUDY</td>
<td></td>
</tr>
<tr>
<td></td>
<td>A. Vijay Krishnan &amp; Dr. F. Carter Premraj</td>
<td></td>
</tr>
<tr>
<td>No.</td>
<td>Title</td>
<td>Authors</td>
</tr>
<tr>
<td>-----</td>
<td>-------------------------------------------------------------------------------------------</td>
<td>----------------------------------------------------------------------------------------------</td>
</tr>
<tr>
<td>35.</td>
<td>UTILIZATION OF HEALTH SERVICES BY THE SIDDHI TRIBE OF YELLAPUR TALUK, KARWAR DISTRICT, KARNATAKA</td>
<td>R. Ashir Daniel &amp; Dr. F. Carter Premraj</td>
</tr>
<tr>
<td>36.</td>
<td>ANALYSIS ON ALCOHOL TAKING SITUATION AMONG MEN WITH SPECIAL REFERENCE TO ANTHANALLUR PANCHYAT</td>
<td>Dr. M. Daniel Solomon</td>
</tr>
<tr>
<td>37.</td>
<td>PSYCHO – SOCIAL PROBLEMS OF CONSTRUCTION WOMEN WORKERS AND SOCIAL WORK INTERVENTION</td>
<td>Dr. S. Sangeeta</td>
</tr>
<tr>
<td>38.</td>
<td>KNOWLEDGE OF CHILD RIGHTS AMONG SCHOOL TEACHERS - A KEY FOCUS OF SOCIAL WORK PRACTICE IN SCHOOL SETTING</td>
<td>S. Lilly Puspam &amp; Dr. M. Daniel Solomon</td>
</tr>
<tr>
<td>39.</td>
<td>SUICIDAL THOUGHTS AND IDEATIONS AMONG ADOLESCENCE</td>
<td>R. Mithra &amp; Dr. A. Relton</td>
</tr>
<tr>
<td>40.</td>
<td>WELL BEING OF ADOLESCENTS AT SELECTED SCHOOLS IN MADURAI</td>
<td>S. Joyce Jeyarani &amp; Dr. A. Umesh Samuel Jebaseelan</td>
</tr>
<tr>
<td>41.</td>
<td>MENTAL HEALTH OF ADOLESCENT GIRLS</td>
<td>M. Thamizh Malar &amp; Dr. M Daniel Solomon</td>
</tr>
<tr>
<td>42.</td>
<td>A STUDY ON RELATIONSHIP BETWEEN ADJUSTMENT PROBLEMS AND MENTAL HEALTH OF PRE-ADOLESCENT CHILD OF WORKING MOTHERS IN AVADI, CHENNAI</td>
<td>N. Madhumathi &amp; M. Rex Sahayaraj</td>
</tr>
<tr>
<td>43.</td>
<td>PROBLEMS OF SCHOOL CHILDREN IN PRESENT SCENARIO</td>
<td>S. Shanthi &amp; Dr. S. Sasikala</td>
</tr>
<tr>
<td>44.</td>
<td>A STUDY ON ACADEMIC STRESS AMONG HIGHER SECONDARY SCHOOL STUDENTS</td>
<td>A. Louie Hepsiba Roy &amp; Dr. A. Relton</td>
</tr>
<tr>
<td>45.</td>
<td>CHILDHOOD OBESITY: CAUSES AND CONSEQUENCES</td>
<td>A. Abirami &amp; Dr. A. Relton</td>
</tr>
<tr>
<td>46.</td>
<td>ANXIETY AND SELF ESTEEM AMONG URBAN ADOLESCENT PLAYERS</td>
<td>S. Thanapriya &amp; Dr. M. Gabriel</td>
</tr>
<tr>
<td>47.</td>
<td>A STUDY ON SELF-ESTEEM AMONG EARLY ADOLESCENTS</td>
<td>Timothy P. Sekar &amp; M. Reena Rebellow</td>
</tr>
<tr>
<td>48.</td>
<td>PARENTAL BONDING AMONG ADOLESCENTS AT UDUMALPET IN TAMILNADU</td>
<td>R. Godson &amp; Dr. M. Gabriel</td>
</tr>
<tr>
<td>49.</td>
<td>ATTITUDE OF TEACHERS TOWARDS SEX EDUCATION</td>
<td>R. Reshma &amp; M. Reena Rebellow</td>
</tr>
<tr>
<td>50.</td>
<td>SELF ESTEEM OF SCHOOL STUDENTS OF DHARMAPURI</td>
<td>P. Robert Ramesh Babu</td>
</tr>
<tr>
<td>51.</td>
<td>THE CORRELATE OF PERSONAL VALUE AMONG THE COLLEGE STUDENTS IN TRICHY DISTRICT</td>
<td>D. Diana Priya Dharshini &amp; Dr. A. Umesh Samuel Jebaseelan</td>
</tr>
<tr>
<td>52.</td>
<td>WELLBEING AMONG WOMEN LIVING WITH HIV/AIDS IN PUDUCHERRY:</td>
<td>A. M. Laisamma &amp; Dr. B. Arunkumar</td>
</tr>
</tbody>
</table>
Professional Challenges Faced by Women School Counsellors - A Case Study Analysis

Semichan Joseph*
Dr. D. Nirmala**

Abstract
Adolescence is an important time for social and emotional development. Having good mental and physical health supports young people in managing the challenges they encounter during their development. Schools can play an important role in the mental health and well-being of their students. Obtaining the skills needed for academic success can contribute to a better quality of life in a student. A positive school environment can promote good mental health in students. School counsellors can contribute a lot in this area. As a mental health professional they are facing a variety of problems and challenges. The present qualitative study using case study design is an attempt to understand the problems and challenges faced by the women school counsellors in the state of Kerala.

Keywords: Mental Health; School Counsellors. Problems and Challenges

1. Introduction
Adolescence is an important time for social and emotional development. Having good mental and physical health supports young people in managing the challenges they meet during their development. Schools can play an important role in the mental health and well-being of their students. Obtaining the skills needed for academic success can contribute to a better quality of life in a student. A positive school environment can promote good mental health in students. School counsellors can contribute a lot in this area. Student counsellor is an essential part of any school management team in the changing scenario. They are acting as promoters of positive change in the life of students. They offer guidance of both their personal and school life. Counsellors make regular assessments of the students' performance and improvement. This allows them to measure their individual necessities. High school counsellors are often accessing with students about their future career path. So their role is a vital part of influential the individuality of the children. Job duties vary depending on the education level they are in. Generally, they are the student advocates. A counsellor will give details and information about their skills and academic performances. They develop programs to educate students on the risks and health hazards of substance abuse. Apart from creating a foreground to a student's future career, a counsellor is their guide to making sound decisions in their academic, social and lives. The state of Kerala has been going through a series of educational reforms over the last decade. As part of these initiatives government of Kerala introduced school counsellors to the educational system. As per the current programme of the government only women counsellors are appointed to give special focus to the girl children. When guidance and counselling is conceptualized, organized, and implemented as a program, it places school counsellors conceptually and structurally in the centre of education and makes it possible for them to be active and involved. As a result, guidance and counselling becomes an integral and transformative program, not a small and supplemental activity. In order to full fill these expectations counsellors need to discuss certain challenges as well. This study will try to explore the professional challenges faced by the women school counsellors in Kerala context. A qualitative research method using case study design was used because it aligned well with an examination of perceptions of school counsellors about their own professional challenges.

Review of Literature
Maxim Pereira and Surya Rekha (2017) in their study they discussed about the various problems, difficulties and challenges of counselling professionals in India. Lack of awareness of counselling among people, inadequate pay, job insecurity, absence of a professional body to regulate counselling, lack of network of counsellors and mental health professionals for seeking supervision and consultation are the major findings.

*Ph.D Scholar, Department of Social Work, Bharathidasan University, Thiruchirappalli
**Assistant Professor, Department of Social Work, Bharathidasan University, Thiruchirappalli
Agrawal (2015) stated that psychologists (including counsellors) face several challenges like poor salaries, lack of job opportunities, lack of licensing, lack of awareness about psychological issues and so on.

Anagbogu et al. (2013) in their study of professional challengers faced by primary school counsellors in Nigeria, found that lack of a counselling clinic, lack of computer for data storage, unavailability of internet facilities, lack of equipment like tape recorder, low counsellor-client ratio, lack of dedicated time for counselling in the school time table were the topmost problems faced by the school counsellors.

Arowolo (2013) found out that secondary school counsellors in Nigeria face the following problems: wrong ideas about counselling by principals and other members of staff, assigning counsellors to duties other than counselling, lack of counselling office, lack of funds to purchase materials for counselling and non-exposure to in service training.

Bain (2012), studied about the current issues of school counsellors in America, stated that school counsellors face problems related to job descriptions, mental health issues, families and communities, student success, leadership and issues in technology and so on.

2. Research Method

Objectives of the study

The prime objective of the study is to examine the perception of women school counsellors regarding the challenges related to their profession. It also proposes suitable suggestions to deal with such problems in the field of school counselling.

The researchers adopted the case study method in which two cases were examined. In-depth interviews were directly conducted by the researcher with the use of semi-structured interview schedule. The cases identified by the researchers are women school counsellors working in higher secondary schools and who already have more than five years of experience in this field.

Case Study Design

The 'Explanatory Case Study Method' was adopted. It is a method can be used to investigate certain phenomena in very complex and multivariate cases (Yin, 1984.; ZaidahZainal, 2007). Case study format described by Budgell (2008); Boeije (2010) was followed for this case study presentation. In this case, what are the professional challenges faced by the women school counsellors in school setting.

3. Results

Case study 1

Introduction

Participant A was a school counsellor working in a government higher secondary school in Cochin City in the central Kerala. She has 10 years of professional experience in her field. The present school washer 3rd workplace. She is married and has two school going children

Case presentation

In the opinion of participant A the lack of support from the school authorities such as principal, senior teachers and other teachers is the major challenge faced by the school counsellors in this era. Many teachers including the head teachers were not aware about counselling and its value. According to participant A, mental health professionals working with school setting should get support from the other stakeholders especially from teachers. This support will help them to perform their duty as a student counsellor in a meaningful way. In her experience parents are receptive towards the suggestions made by the counsellor regarding their children. Demand by institutions and high expectations are another encounter faced by the school counsellor in this point of time. Sometimes management expects too much from counsellors and set unrealistic goals without considering the inappropriate student counsellor ratio in the school. The school were participant A is working has more than 1300 students and the irony is that she is only one student counsellor in the school.

Outcome

The case study revealed that the personality characteristics of the counsellor also have a great role in her professional practice. “Being a mother of two school going children I’m facing difficulties to manage my time. My husband is so cooperative only because of that I’m able to manage the situation. I have to travel 35 km daily to school that is the major reason behind the issue” in her opinion a good number of women counsellors experience this same issue of work life balance.

Discussions
The study clearly highlights that personal attributes such as home environment & mental health were of a great extent influencing participant A’s active involvement as a school counsellor. The study also highlighted that about his school environment and approach of colleagues were not at all supportive.

Case Study 2

Introduction

The researcher had an in-depth interview with Participant B. She is a 30 year old female student counsellor with 5 years of experience in the field. She is not married and living with her own parents. Participant B is working in an aided higher secondary school in Trivandrum, the capital city of Kerala.

Case presentation

Participant B has comprehensive understanding about the difficulties faced by the counsellors in the current school counselling system. “Authorities are forcing the counsellors to do activities other than counselling such as clerical works in the school office, class substitutions, representing school for outside events etc.” This other activities will definitely affect the quality and time spent by the counsellor in counsel the students. According to participant B maintaining confidentiality regarding client’s problems is a great challenge in a school setting. In many occasions class teachers and school authorities asked for information’s revealed from counselling sessions. Adding to the point she also reveals that counselling department is facing difficulty due to insufficient infrastructure facilities in the school. In some schools students were sent for counselling as a way of disciplinary measure. This also creates a bad impression among students and parents on counselling.

Outcome

This case study clearly states that school counsellors are under paid in Kerala. Compared to the other mental health professionals and their teacher colleagues they don’t have many other benefits of a challenging job. “In the changing world student counsellors need to address with complex problems of students so that they need professional on the job training, which is lacking in the current scenario” participant B has a clear outlook regarding the relevance of training.

Discussions

As informed by the respondent, professional development and training needs of school counsellors should address immediately by the concerned. The job satisfaction will definitely reflect in their professional service delivery. It is revealed from the case study that many factors such as pay and infrastructure facilities have negatively influencing the job satisfaction of practicing school counsellors.

4. Conclusion

This study gives a detailed outlook of the difficulties faced by counsellors in schools. Qualitative research method using case study design helped the researcher to conduct a detailed investigation of perceptions of school counsellors about their own professional challenges. It also highlights the point that stake holders need to educate more on the need and relevance of school counselling. Future studies can also be intended at designing interventions to address the difficulties faced by counsellors.

Reference


Information and Communication Technologies (ICTS): A New Research Scope for Professional Social Work Education

Arivanandan Masilamani*

Abstract
Information and communication technologies are magic bullets for the developmental sectors in the present scenario. The technological development is one of the significant goals in the Sustainable Development Goals (SDGs). Among all the technological developments the ICTs are having an important phase in the SDGs. The benefits of ICTs have extended in the field of education also. In this, the professional social work is one of the major courses in the higher education sector. These ICTs are providing enormous helps to this course through teaching, research in academically and practicing in the field. In large scale of the accessibility of ICTs have been providing lots of benefits to the people, at the same time there are some problems due to the misuse and over usage of these technologies. In this platform, this paper would like to describe how far these ICTs are helping the professional social work course in academically and how the society is facing problems due to the ICTs and what kinds of scopes are there in the social work research. The study applies the secondary sources of data for describing this research work. Therefore this study describes the scope of ICTs in teaching, research and practicing in the field of professional social work in the present scenario.

Key words: ICTs, Education, Social Work, Research, Teaching, Learning

1. Introduction
Information and Communication Technology is an umbrella term. It has broadly categories in two major levels ie., old ICTs and new ICTs. The old ICTs are included with news paper, radio, Television, and other print media. The new ICTs are consisting with the latest information technologies such as the Internet, wireless networks, cell phones, and other communication mediums. The ICTs are act as magic bullets in the developmental sectors in the present scenario. Nowadays the ICTs are playing an important role in the education sector, especially in the process the empowering of educational and increasing the knowledge of the students. The accessibility of ICTs in education is escalating the value of teaching and learning by enhancing the educational sectors. The studies are describing the accessibility of the ICTs from primary level to higher level have stimulating and engaging the academic knowledge, greater performance, visual observation, better perception and faster learning than the traditional classroom environment. Among the various ICTs, internet is one of the most powerful information and learning tools in the present information era. The professional social work is one of the courses having lots of scope in the accessibility of the internet. The course itself has different kinds of specializations and every specialization is using the ICTs in very effectively. In addition the ICTs are helping in practice of the social work in the fields. The ICTs are playing an effective role in the changing life style of the society. It has creating lots of the changes in the day to day activities, attitude, and relationship among the people. These kinds of changes are creating both prospers and problems in the human society. Therefore, there is a need to the professional social work course to study of these changes of the society in association with ICTs. Hence the course has major scope in the information and communication technology based research activities. With this concern the paper has formulating the following objectives: To study about the accessibilities of the ICTs in the professional social work course, To analyses the problems of the ICTs in the society and the research scopes in the social work.

Professional Social work Education in India
Social work is an outgrowth of earlier forms of social activities. However the present form of social work does not have any prior roots to 1860. The historical development of the social work course has categorized into five major levels

I. The colonial period (1620-1776)
II. Civil War and Industrial Revolution (1776-1860)

*Assistant Professor, Department of Social Sciences, Tamil University, Tanjavur 613 010
III. Industrialism – the human side (1860-1900)

IV. Social work seeks professional characteristics (1900-1930)

V. Highly professionalizes discipline (1930)

Social work is a professional activity, working for the social development of the human being. Since it is professional activity, it has to follow certain forms of professionalism. Therefore the understanding of the profession is significant one. Profession is an occupation whose core element is work based upon the complex body of knowledge and skills. Its members are governed by codes of ethics and profess a commitment to competence, integrity and morality, altruism, and the promotion of the public good within their domain. These commitments form the basis of a social contract between a profession and society. Professions and their members are accountable to those served and to society. The professionalism in social work started from the date of appointment of the full time staff in the operation of the social welfare programmes and beginning of the training for the volunteers are working in the field. Mary E. Richmond is first professional social worker in the United States of America. She was worked as treasure, social work practitioner, teacher ad theoretician in the field of Social work. In 1898 the charity Organisation of the New York was started to provide training to the workers. Mary E. Richmand was one of the teachers in the organization.

Professional Social Work in India

The social work is not a new form of social welfare activity in India. It has a long history through the charity form of social work. It had done during the vedic period, and also there is evidence in the Upanishad and Mahabharata. The modern structure of social work was introduced by the Christian missionaries in nineteenth century. They were providing houses for the orphan children and destitute women and men. During the same period some of the religious based organizations like AryaSamaj, Prarthanasamaj, Ram Krishna Mission were started and served for the people. Apart from that there were some of the constitutional supports such as Apprentices Act 1850, Reformatory school Act 1870, Juvenile Delinquents Children Act 1920, Abolition widow of Act 1870, Abolition of Sati Act 1829, Abolition of Slavery Act 1843, Abolition of Female infanticide and Human Sacrifices Act 1870, Factory Act 1881 also implemented in the field of social welfare.

The evolution of academic based professional degree course of social work initiated in 1936 in India. The Sir Dorabji Tata Graduate school of Social work was the first educational institution. Now it is renamed as Tata Institute of Social Sciences. After India’s independence there were many schools of social work was started by the government and other private institutes. Currently it is one of the major professional degree courses in India.

Accessibilities of the ICTs in the professional social work

In this information era every field of education have connected with information and communication technologies. In this line the professional social work is having more opportunity to associate with the ICTs. This course has many specializations like community development, medical and psychiatric, human resources management, youth welfare etc. Also it has many fields such as child development, rural development, Industrial development, health, mental health, Education, Social defense, family planning, mental retardation, social development, and environment. Each specialization and field are closely associated with the computer based internet and recently the mobile phone. Through these ICTs, one can send their field work reports and other kinds of documents to various levels in the agencies at a same time. The internet communication can be help the students and faculty in teaching and learning process. Currently, the government and private Engineering Institutions in India are connected through educational network and sharing their academic information such as syllabus, teaching information, methodology, practices in labs through video and audio forms from one institute to others. The students can able get varieties of subject based information and knowledge from local to global levels of sources. The same method can be used in the field of professional social work course also. It will be very useful for the educational enhancement of the social work students. In the field work point of view social work students can be sent their field work reports through email while they are away from the department for the black placement. Also the faculty can be conducted the field work review and field work conference through skyp and video conferencing and video calls and voice calls.

Problems of the ICTs in the society

There is no doubt the information and communication technologies are benefiting a lot to the human society. Every day there are new kinds of inventions and updates are introducing in the field of ICTs. The people are enjoying the benefits of these technologies at extreme level. On the other side the excessive usage of the ICTs are creating major physical, psychological and social problems to the people. Among all the ICTs, the accessibility of internet and mobile/ cell phone is exceptionally promoting and changing the life style of people. However, there is a list of
shortcoming also in the accessibility of the ICTs. The following paragraph is describing the ICT based problems in the society.

The digital divide – in the information world, the problem of digital divide is one of the major concerns for the human development index. There is huge developmental gap between the people who have access to ICTs effectively and those who do not. This has created major handicap in the social, economic and knowledge based developments. In the process of the development those who effectively access these technologies are having higher status than others in the current situation. In addition this situation is closely associated with education and economic condition of the people. Therefore, the digital divide creates a social divide in the developing society. As mentioned by Persaud (2001) the knowledge gap is ten times better than the income gap. Today ICTs based service sectors are placing in better position than any other sectors. Those who have knowledge in accessing the ICTs in their business or occupation are having a privileged position in the society and those who have less knowledge and not having knowledge of accessing the ICTs keep reaming poor status in the present generation and even in the future also.

The mass media and the social media are providing better phase for the people to express their own views about social and economic and even personal aspects. But the unlimited accessibility of the channels are misleading and controlling the mindset of the people. The sensitive, unauthorized and fake information are telecasting from the TV channels and disseminated by the internet through whatapps and facebook and other mode of information are creating major problems in the society some times. These kinds of information are creating narrow mindset and controlling the analytical understanding of the social issues. These have creating many social, economical and law and order problems in the society.

Some of the commercial television channels programmes are totally exploiting analytical understanding and self interest of the people. A major percentage of the people in all levels from child to aged are ad- dictated by the various kinds of children shows, drama serials, and political discussions. These factors are not good for the developing society like India.

The accessibility of internet based mobile phones are absolutely controlled all age group of the people in both gender. There is no doubt the internet and mobile phone are providing extreme assistants to the people in the way of communication. At the same time these technologies are creating problems in the process of socialization, relationships with fellow people, health and psychological disorders, lack of interest in education etc.

Research scopes in the social work

The professional social work is one of the finest courses to understand and analyses the problems of society through practical way. The researchers in the field of social work can be deeply analysed the root causes of the social problems. In this line the problems related with information and communication technologies in the currents society is one of the urgent research needs of the society. Hence, the following points could give a broad design to do research in the field of ICTs and society to the professional social work researchers.

- ICTs in social development
- ICTs in educational enhancement
- Role of ICTs in health and health care of human being
- ICTs and economic empowerment
- Problems of mass media in the society
- Problems of social media in the society
- ICTs and child health
- Impact of Internet in the society
- Psycho social problems of children’s shows in Television and mobile phone
- Problems of video games in child development
- ICTs and social and economic inclusion
- Cyber crime and social development

2. Conclusion

In the current scenario the accessibility of information and communication technologies are unavoidable tools. The human beings are receiving a lots of benefits from these technologies. At the same time some are using these technologies in an improper way. Therefore many social, psychological, economical, security and educational related problems are arising in the society. Those are not healthy for the developing society like India also in the global level. Hence, there is emerging needs to find out and analyse the root causes of the problems and try to provide solutions
and suggestions for them. The professional degree course has a major role in this aspect. Therefore the social work degree course has to focus on the ICT related research in present and future as well.

References
7. Rengasamy .S, Introduction to professional Social Work, Reading material to supplementary class teaching
Patterns of Caste Based Social Exclusion in the Digital Era

Vijimon Iyyappan*

Abstract
Socially produced disability of dalits is redesigned by the digital conniving of the socio-economic and political conditions of the society. Exclusion is earmarked and the underpinnings are unchangeable or woven with technological patterns that resemble closely on caste based social exclusion. This paper intends to discuss the ‘brahmanical’ notion that systematically excludes certain communities out of the mainstay of anything old and new. Brahmanical here refers the system of social exclusion based on the dogmatic binaries normal/abnormal, cultural/un-cultural, traditional/modern etc. Dalits, the lower rung, of the society is at the receiving end not part of the deciding unit as the criteria for exclusion in the ‘varnashrama’ is still at work that set the tone of discrimination. Digital explosion even today embraces only the elites of the society practically and for the most part exclude the drop outs, illiterates, unorganized labourers who are majorly constituted by the dalits. Even the educated often strive to meet the standards of digital updates and innovations. Government policies, banking institutions and other techno-bound programmes that cover the entire population through less/nil viable alternatives accelerate the exclusion and life threatening hazards that prey the dalits invariably. The caste driven population composition of India produced a socially disabled group that could never compete with the upper castes for centuries and still counts. The digital present too has the stories untold in opport

Keywords: Social Exclusion, Dalits, Casteism, Brahmanical, Digital Era.

1. Introduction
Digitalization breaks through all walks of life limiting not the social lives any less. The integration of physical world with the virtual world seems to be appropriate majorly for the affluent castes and classes of the society than the rung at the lower. Indian society is not so surprisingly redeemed at caste hierarchy based on ‘brahmanical’ principles. Life at present, though it is said to have the characteristics of digital era, encompassed with programmed caste practices that are deeply rooted in Brahmanism. The intention here is to sensitize the underpinnings of the mechanism that impedes marginalization of dalits in the time of digital era. The supersized virtual digital platforms make human interactions a social reality whereby all human activities are convened digitally. It further intervenes in the socio-cultural world of today with its tantalizing as well as consequential effect (Royakkers, L., Timmer, J., Kool, L. et al, 2018). The digital platform shares the chores of life extensively and it is expected that the future life and experiences would essentially be through these digital platforms. Zeroing the differences between online and offline merging it into a singular entity as online, rightly quoted by Floridi (2015), would animate the lives of tomorrow. Institutions that facilitate the human environment have been taken over either partially or completely by techno-driven organizations that function only on digital platforms. (Frenken and Schor 2017).

Historical & Documented Pattern of Exclusion
The pattern of discrimination well acquainted to Indians is the four folded system of work based casteism that had been ingrained concretely in the society. The varna society bounded each with its own characteristics that would lay the qualities of the births each had according to the tradition. The priests’ community constituted brahmans, in fact they interpreted and illustrated the rest through their scholastic domination in sanskritizedvedic texts. kshatriyas were warriors, vaisyas, the business sections and the servant groups, shudras. The untouchables even fallen below the stated division as panchamas, the out-casted untouchables (Dumont, L 1970) (Maria. 2004). The offshoots of the system still challenge the lives of dalits and renovated it as Brahmanism as a pattern of social exclusion in any form that synonymously of today.

Brahmanism and Social Exclusion
Social exclusion spreads its wings dynamically through the society and the patterns scrupulously have been interwoven with elitist vedic ideology though the discrimination of any scales is constitutionally prohibited. Caste after the independence categorically turned a political phenomenon that creates an imbroglio for the ones those who

*Research Scholar, Centre for study of Social Exclusion and Inclusive Policy, Bharathidasan University, Tiruchirappalli
find solace in religious solution for the social problems. The socially produced disability is mostly rooted in the caste practices that disabled dalit communities from owning land, enjoying freedom, dignity of labour and emasculated them politically by denying access to resources to make them resourceful (Thorat and Chittaranjan, 2007). Non-dalits families travelled long with facilities at par with global elites but dalits were/are crippled systematically through brahmanic karma and rebirth theories. The adversities marginalized dalit communities face are results of the skimpy economic, social, political and cultural capitals they could obtain through the difficulties; in other words the same had been ruthlessly taken away from them with the support of the brahmanical caste theories.

Brahmanical interventions are visible today in the form of casual labours constitute around 60 per cent of the dalits live in rural areas. Nearly 72 per cent of them have no access to capital assets as compare to 44 percent among the non-dalit groups. Literacy rate too shows that about 49 per cent of the dalits are illiterate as compare to their counterparts with 38 per cent (Thorat and Chittaranjan, 2007). Moreover, the brahmanical notion of preferences in well paid, responsible, socially graded occupations are, both in public and private sectors, exclude the lower castes educated and qualified human resources. Brahmanical prerequisites demand the dalits to be aesthetically coloured, culturally classic brahmanic and affluent which the upper castes had stolen from the lower castes through centuries. Considering candidates with attributes designed by the corporate or government high caste officials with the unconsciously driven caste-mind would definitely provide platforms for the non-dalits as the severity is deep rooted beyond imagination. In general, studies lined up with the factors that marginalize the dalit communities include adverse economic conditions, poor and poverty ridden family backgrounds, caste based discrimination, linguistic difficulties, alienation due to difficult syllabus and curriculum, unaffordable private educations system, ineffective governmental interventions etc. (Dr Lata DD 2017).

The question here is would the communities that trail behind education as well as marginal portion of them are uneducated be able compete with others in terms of rampant technological and digital transitions. What matters more is the percentage of dalits working in government offices even after the implementation of Mandal Commission is alarmingly low though the qualification of them does not demand or required reservation in the digital era. Available data on the presence of dalits in the top brass of administration i.e. the secretarial level is meager and the positions bearing higher importance at all levels are inaccessible for the marginalized communities to a larger extent.

Digital Ubiquity and Accessibility by the Dalits

Advent of digital era marked it in the 1970s and the following decade given way to computerization of the economy to certain extent. But the opening of 21st century witnessed adorning of digital technology to its fulcrum with boundless innovations in all walks of life individualizing its easy employability. The present experiences digital as an inherent practice that leaves no stones in the process of life untouched including education, health, business, media, administration etc. Indian Diasporas across the world contribute qualitatively in building up the technological base of different countries, in contrast, the representation of dalits in the same are not so apparent as compared to other communities. Caste plays its role when an organization sorts the candidates for scheduling the meeting (AnuOza, 2015). The attributes preordained would possibly align only with the classic conditions of the society. The digital mode of selection too favour people who are affluent in digital technology by which exclusion is well written on the board for many who are synonymously outcastes.

A close monitoring of the digital interventions would provide us with amble inputs for understanding its brahmanical affinity theoretically by crippling the illiterates out of digital transactions. Literacy in digital life itself is a challenge for many educated persons as the changes occur in the field are swift and short in most of the cases. Reading and writing of literature do not match much with the handling of technological inventions as well as their interactions with the society. People at affluent positions even need digital literacy to cope up with the time and inventions in the field. Unfortunately, there are no viable alternatives to increase the digital literacy among the marginalized population though the government proposed programmes such as digital India and National Digital Literacy Mission.

Digital Literacy, Dependency & Denial of Rights

World Bank’s World Development Report 2016: Digital Dividends, discusses the issues wide ranging and stated that the accessibility of internet and the digital benefits worldwide is restricted only with 40 per cent of the total population. The same document also noted that the polarization and inequality are naturally characterized by the digital interventions and would intensify the affluent communities reap the most out of the competitive world. Neo-liberal
socio-economic transactions are technologically built and accessibility to such organizations is a challenge for the deprived classes. The subtleties of the digital transactions require basic foreign language skills or critical vernacular language skills with needed management skills in the techno-driven machine languages and knowledge on its way of functioning.

This is a classical example for exclusion of the illiterates and other groups who struggle without the essential skills and can assimilate with the hierarchy of social exclusion seen in brahmanical order and system. The stakeholders often constitute the dalit communities not much from the general categories and thereby problematize the concept; for example, banking institutions have become the mainstay of all economic transactions that forced the poor and illiterates to acquire affiliations with them rather forcefully than willingly that mandated the communities fall prey for poaching in the daylight under capitalistic roofs. Moreover, the job market today, even for low paid jobs; works through the digital space where the accessibility is possible only through the designed platform that clears all the formalities of the employer employee transactions clearly deny the opportunities of the deprived classes (Kamath & Kumar 2017). Even if they manage to get through the well-to-do communities would have already been placed resembling the social structure, brahmanical, the first to reach to the best since birth.

Dependency on digital devices is a kind of violation of the fundamental right i.e. right against exploitation as the service providers continuously updates their services catering to the needs of the elitist in the market driven economy and completely neglect the equitable accessibility of the facilities provided whereby the communities in the lower rung are threatened to update themselves according to the tune of the market. Service and tariff declarations and levy characterize caste once it turns monopolistic that blatantly violate the rights of customers who are unaware of the terms and conditions. Indian caste peculiarities restrain dalits representation in all spheres of administration across the country and the nature of exclusion primarily static as the affirmative action of the governments put them mostly present only in the lower grades of employment that furthers the graded inequality. According to World Bank’s World Development Report 2016 accessibility of internet alone would not be an impediment to socio-economic growth and development, for which the prerequisite is an accountable government that functions by accommodating the analogue foundations of the society. Digital technology is a hurdle which requires unhindered accessibility practices in an innately caste-driven Indian society. Available data also proves the wrangle uncovered due to the underestimation or negligence in considering caste dynamism in the digital India.

Automation VS Life Skills

Digital life demands not life skills rather focus on monitored and directive displays instead of dialogical and more reasoning life transactions. Humanly emotions or socio-emotional acceptance would act as a myth in the digital era that gives way for mechanical interactions whereby suppressive and fascist tendencies would dominate the life if not countered effectively through plausible mechanisms that garner better social outcomes. Deciphering and decoding the digital language demands digital cognizance out of every person which is tacitly adjudicated within the reminiscent of caste system. Automation is not a solution as long as the humans depend creatively on each other for their lives and livelihoods; therefore, it is not advisable to embrace the digital mode without constitutional control and directives.

2. Conclusion

Digital transformation, to stay away from social exclusion, should immediately counter the challenges that creep into the lives of commons without violating human rights. Legitimate government in power must act responsively with accountability to ensure the subjects as well as the rules and regulations pertained clear to the public so that alienation of the poor can be lessened through amiable alternatives. Constitutional support along with skilling of the people across the sections might reduce the vulnerability of the deprived castes to a greater extent. Possible risks discussed in the World Development Report 2016 such as concentration power around the market shall be checked for reliable and trustworthy programmes to ensure equality, competence and inclusive and sustainable development.

References


11. Sources: Telecom Regulatory Authority of India; IDC; ITU; news articles; EY analysis


Impact of Video Game Addiction among College Students

A. Amala Ruba*
Dr. F. Carter Premraj**

Abstract
Today, video games are accessible with a swipe on a smartphone, putting immense computing power at anyone’s fingertips. That temptation can urge significant overuse. More students are playing video games, which leads to peer pressure to join in. (WHO 2017 census) reveals an alarming data that college age students, 18 to 24, are playing a game on the internet. The video game industry shows no signs of slowing down in providing new fodder for players. The age group signifies that youth population have more videogames addiction. According to BeranuyMarta (2018), reveals that once addicted to video games, youths are more likely to become depressed, anxious, and have lower academic achievement which promoted the researcher to investigate on this phenomenon. The objective of the study is to know the impact of Video game addiction among college students in Trichy District. The researcher adopted descriptive Research Design for the study. The researcher had used Questionnaire method to be administered with the youth. While administering the questionnaire, concern was received from the participants. The data received had been analysed through SPSS Software. The result showed, the respondents having this problems had change in sleeping pattern, relationships problem, weight gain, failing in grades are some of the outcomes research, and further the details of the study will be discussed in the full paper.

Keywords: Gaming; Video game addiction; College students;

1. Introduction
Addiction is the habitual use of an element or act of a behaviour that is independent of withdrawal. Addiction can occur in the absence of need and need can occur in the absence of addiction, although the two offer hit together. An addiction shows certain characteristics, such as mood modification, compulsivity and withdrawal. Video games are associated with compulsive use of computer games or video games that interferes with a person’s everyday life, which leads to social isolation, mood swing, diminished imagination, and hyper-focus on in-game achievements, to the exclusion of other events in life.

The World Health Organisation include “gaming disorder’ within the 11th revision of its International Statistical Classification of Diseases and Related Health Problems as of June2018. Impacts of video game addiction is similar to other addiction in terms of the account of time spent playing, the strong emotional attachment to the activity, and the patterns of social difficulties experienced by game addicts. It disrupts family and other area of life, such as college. College students begin playing video game to develop dependence behaviour. The addictive behaviour some gamers feel unable to reduce the time they spending.

Review of Literature
A 2007 Harris Interactive online poll of 1,187 United States youths aged 8–18 gathered detailed data on youth opinions about video game play. About 81% of youths stated that they played video games at least once per month. Further, the average play time varied by age and gender, from eight hours per week (responses from teen girls) to 14 hours per week (responses by teen boys). "Tweens" (8–12-year-olds) fell in the middle, with boys averaging 13 hours per week of reported game play and girls averaging 10. Harris concluded that 8.5% “can be classified as pathological or clinically ‘addicted’ to playing video games.

Many describe video game addiction to be a global mental health problem and that gamers who gain characteristics of addiction show decreased functioning in school, social, family, occupational and social domains of their lives in addition to their social lives. Once addicted to video games, these youth are more likely to become depressed, anxious, and have lower academic achievement. In a qualitative analysis of online gaming addicts done by Marta Beranuy, Xavier Carbonell and Mark D. Griffiths, which dived deeper into the source of gaming addiction, one interviewer described gaming as a method of stress relief. In July 2018, a study published by LSU’s Pennington Biomedical Research Centre.
2. Research Methodology

Title of the study: A Study on Impact of Video Game Addiction among College Students in Tiruchirappalli District.

Aim: To study the impact of video game addiction among college students in Trichy District.

Objective of the study

- To describe the socio-demographic characteristic of the respondents
- To study the various influence factors associated with video game addiction like strained relationship, consuming time factors, change in behaviour and attitude, health issues.
- To suggest suitable measures for minimizing video game addiction.

Tools of data collection:
The data was collected via a structural questionnaire.

Universe
The universe of the present study covers the arts and science college students studying in Tiruchirappalli District.

- The respondents of the present study general degree and master degree.
- The researcher has taken 60 respondents and using Multistage sampling method. In the first stage the researcher used Convenient Method and the second stage Snowball Technique.

Sample Size:
They are 60 college students who are addicted to video games and who agreed to participate in this study.

Source of Data Collection
- Data collected from both primary and secondary data
- For primary data researcher used the structural questionnaire
- For secondary data researcher used the journal and books

3. Results and Analysis

Table 1. Distribution of Respondents by their Socio – Demographic details

<table>
<thead>
<tr>
<th>Socio-Demographic</th>
<th>Number of Respondents</th>
<th>Percentage (%)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Gender: Male</td>
<td>30</td>
<td>50.0</td>
</tr>
<tr>
<td></td>
<td>Female</td>
<td>30</td>
</tr>
<tr>
<td>Age: 18</td>
<td>8</td>
<td>13.3</td>
</tr>
<tr>
<td></td>
<td>13</td>
<td>21.7</td>
</tr>
<tr>
<td></td>
<td>14</td>
<td>23.3</td>
</tr>
<tr>
<td></td>
<td>18</td>
<td>30.0</td>
</tr>
<tr>
<td></td>
<td>7</td>
<td>11.7</td>
</tr>
<tr>
<td>Type of family: Joint</td>
<td>26</td>
<td>43.3</td>
</tr>
<tr>
<td></td>
<td>Nuclear</td>
<td>34</td>
</tr>
<tr>
<td>Domicile: Rural</td>
<td>19</td>
<td>31.7</td>
</tr>
<tr>
<td></td>
<td>Urban</td>
<td>40</td>
</tr>
<tr>
<td></td>
<td>Sub-urban</td>
<td>1</td>
</tr>
<tr>
<td>Qualification: Graduate</td>
<td>14</td>
<td>23.3</td>
</tr>
<tr>
<td></td>
<td>Master’s Degree</td>
<td>45</td>
</tr>
<tr>
<td>Religion: Hindu</td>
<td>23</td>
<td>38.3</td>
</tr>
<tr>
<td></td>
<td>Christian</td>
<td>25</td>
</tr>
<tr>
<td></td>
<td>Muslim</td>
<td>12</td>
</tr>
</tbody>
</table>

It is inferred from the above table shows that both male and female respondents are equally addicted to video games (50%), a majority of the respondents are the age group 21 (30 %) over using, nearly half of the respondents are nuclear family (56.7%), more than half of the college students from urban area (66.7%), and more than half of the respondents (75.7%) are Master’s Degree who are addicted to video game addiction.
Table 2. Respondents by their various influencing factors in video game addiction

<table>
<thead>
<tr>
<th>Dimension</th>
<th>Variables</th>
<th>Number of Respondents n = 60</th>
<th>Percentage (%)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Relationship</td>
<td>They form a new relationship with peer group or fellow gamer</td>
<td>Yes</td>
<td>45</td>
</tr>
<tr>
<td></td>
<td></td>
<td>No</td>
<td>15</td>
</tr>
<tr>
<td>Time factors</td>
<td>Neglect important work to spend more time in gaming</td>
<td>Yes</td>
<td>44</td>
</tr>
<tr>
<td></td>
<td></td>
<td>No</td>
<td>16</td>
</tr>
<tr>
<td>Spending more hours in video game addiction</td>
<td>Less than five hours</td>
<td>Yes</td>
<td>17</td>
</tr>
<tr>
<td></td>
<td>More than five hours</td>
<td>No</td>
<td>23</td>
</tr>
<tr>
<td>Some games make to excited to increase your time</td>
<td>Yes</td>
<td>Yes</td>
<td>40</td>
</tr>
<tr>
<td></td>
<td>No</td>
<td>No</td>
<td>20</td>
</tr>
<tr>
<td>Behaviors</td>
<td>Cause to game addiction</td>
<td>Dependence</td>
<td>26</td>
</tr>
<tr>
<td></td>
<td>Attraction</td>
<td>Yes</td>
<td>14</td>
</tr>
<tr>
<td></td>
<td>Others</td>
<td>Yes</td>
<td>20</td>
</tr>
<tr>
<td>Work performance or productivity suffer because of video gaming</td>
<td>Yes</td>
<td>Yes</td>
<td>46</td>
</tr>
<tr>
<td></td>
<td>No</td>
<td>No</td>
<td>14</td>
</tr>
<tr>
<td>They upset because of losing the game</td>
<td>Yes</td>
<td>Yes</td>
<td>27</td>
</tr>
<tr>
<td></td>
<td>No</td>
<td>No</td>
<td>33</td>
</tr>
<tr>
<td>First opportunity to play video game</td>
<td>Yes</td>
<td>Yes</td>
<td>35</td>
</tr>
<tr>
<td></td>
<td>No</td>
<td>No</td>
<td>25</td>
</tr>
<tr>
<td>Health issues</td>
<td>Gamers have suffered physical pains from intense</td>
<td>Yes</td>
<td>36</td>
</tr>
<tr>
<td></td>
<td>No</td>
<td>No</td>
<td>24</td>
</tr>
<tr>
<td>Having sleeping difficulties and change in sleeping pattern</td>
<td>Yes</td>
<td>Yes</td>
<td>32</td>
</tr>
<tr>
<td></td>
<td>No</td>
<td>No</td>
<td>28</td>
</tr>
<tr>
<td>Gaming to release from anger/stress/depressed</td>
<td>Yes</td>
<td>Yes</td>
<td>45</td>
</tr>
<tr>
<td></td>
<td>No</td>
<td>No</td>
<td>15</td>
</tr>
<tr>
<td>Academic</td>
<td>Game addiction affect college grade</td>
<td>Yes</td>
<td>21</td>
</tr>
<tr>
<td></td>
<td>No</td>
<td>No</td>
<td>39</td>
</tr>
<tr>
<td>Video game decreasing academic works and performance</td>
<td>Yes</td>
<td>Yes</td>
<td>31</td>
</tr>
<tr>
<td></td>
<td>No</td>
<td>No</td>
<td>29</td>
</tr>
<tr>
<td>Neglecting their important responsibilities in college.</td>
<td>Yes</td>
<td>Yes</td>
<td>44</td>
</tr>
<tr>
<td></td>
<td>No</td>
<td>No</td>
<td>16</td>
</tr>
</tbody>
</table>

It is inferred from the above table shows that an absolute majorities (75%) of the respondents are form a new relationship with peer group. An absolute majority (73.3%) of the respondents are neglecting important work to play video games. Nearly half of the respondents (38.3) spending more than five hours to play video games. More than half of the respondents (66.7%) are excited to increase their time. Nearly half of the respondents (43.3%) are cause to game addiction. More than half of the respondents (51.7%) play game to feel better. An absolute majorities (76.7%) of
the respondents are suffer because of video gaming. Majority of the respondents (55%) upset while losing game. more than half of the respondents (58.3%) are first opportunity to play. More than half of the respondents (60 %) are suffered physical pains from intense. Majority of the respondents (53.3%) are having difficulties in sleeping and change in sleeping pattern. An absolute majority of the respondents (75%) while gaming to release from anger/stress/depressed. More than half of the respondent grades didn’t affect the study. Majority of the respondents (51.7%) showed decreasing academic work and performance. An absolute majority of the respondents (73.3%) neglecting important college work.

Findings
- 75% of respondents have high level of formation of peer group in relationship
- 73% of respondents are neglecting important work to spend more in game
- 53.3% of respondents have a source of impact from home
- 57.7% of respondents feel better to play games
- 53.7% of respondents have sleeping difficulties and change in sleeping pattern
- 51.7% of respondents having game addiction affect college grade

4. Conclusion

Video game addiction can effectively perform an assessment to determine what level of care is most appropriate.

- Video game addiction can be very detrimental to one's health and social life.
- Accept responsibility.
- Identify the impact.
- Set limits.
- Find something else to do.

The researcher concluded that who are addicted to video games try to minimize their usage of the video games.

When gamers unable to come out the video game addiction, to manage their time scheduling to reduce their addiction.

Make other physical activity or outdoor sports a part of their life.

References
Reforming Social Work Profession- Improving Social Work Recruitment Using E Networking

S. Manikandan*
Preeunu Ashok**
Svapnil Vyas***
Vinodhini Subramanian****
S. Prabakaran*****

Abstract
Social workers play an essential and often unrecognised role in the lives of some of the most vulnerable people in our society. For individuals and families who come into contact with them, the services and guidance they provide can be essential, providing guidance, support, and access to vital services. For these professional services to be effective, every sector should have enough skilled, motivated, and qualified staff. Unfortunately, the long-term outlook for the social work workforce is bleak. The profession faces two key problems: the recruitment of qualified social workers with the right skills and retaining the most effective and experienced social workers. More importantly, failing to develop an effective social work workforce this means that vulnerable groups in society do not get the support or help they need. The Professional Social work graduates faces barriers such as High vacancy Rates, Poor recruitment of new social workers, Long term supply and shortages and Shortage of high quality placement with underrated salary packages, limited promotion of opportunities. Network of Professional Social workers –India, widely known as NPS-INDIA was an initiatives started voluntarily by a group of social workers from Chennai on 9th March 2016 as a solution to all these issues. NPS functions through Digital Network (Whatsapp, Facebook Linked-in Etc) The main aim of NPS was to Connect Indian Social workers Globally and to put them on an international Platform. Using the Snowball technique one whatsapp group was started with 256 members grew to be 16 whatsapp groups with 4096 Members and 3746 Members in Facebook Across India. NPS has Posted 4380 employment vacancies in this Past 3 years with more than 2000 recruitments and 2 per day.

Keywords: Social work, E-Network, Employment.

1. Introduction
Social workers play an essential and often unrecognised role in the lives of some of the most vulnerable people in our society. For individuals and families who come into contact with them, the services and guidance they provide can be essential, providing guidance, support, and access to vital services. (Nikolaou, June 2014)

A challenged system for social services to be effective, they must have enough skilled, motivated, and qualified staff. Unfortunately, the long-term outlook for the social work workforce is bleak. The profession faces two key problems: the recruitment of social workers with the right skills and retaining the most effective and experienced social workers. More importantly, failing to develop an effective social work workforce this means that vulnerable groups in society do not get the support or help they need.

Barriers in Social Work Profession With Regard To Employment

• Newly-qualified social workers have difficulty finding employment despite high vacancy rates.
• High vacancy rates: The demand for the profession and the employment opportunity is wide with respect to social work profession
• Limited opportunities and lack of information related to the existing opportunities in the respective field of social work.

*Member, Network of Professional social work.
**Member, Network of Professional social work.
***Member, Network of Professional social work.
****Member, Network of Professional social work.
*****Member, Network of Professional social work.
Insufficient experience and training. A key problem is that many potential employers are reluctant to take on newly qualified social workers. This is because of the inadequate experience and knowledge they obtain. A shortage of high-quality placements including salaries, Reputed companies, preferred roles. (Gaskell, 2011)

Combined, these issues present significant issues for the social work profession, from short-term issues around turnover to the longer-term need to ensure newly qualified social workers are appropriately trained, recruited and experienced. Most importantly, without a reform these circumstances could increasingly damage the consistency and quality of services of the profession.

E-Networking and Social Work Profession

Networking for social workers involves building, maintaining, and leveraging professional contacts in the field. You can network at large conferences hosted by professional associations or by having coffee with a colleague who works in your department. Networking began with a face-to-face connection previously. Recent days the internet has shifted the way we establish networks and contacts and yet still continue professional relationships.

The social networks such as Whatapp, Facebook, Linkedin, Instagram etc., can be used as the strategy for Networking that social workers have used for decades to connect to people with shared interests and exchange useful information. (Ed Holmes, 2013)

For recent graduates, networking can help you find your first job even when you lack experience. For young professionals, growing your network can help you learn about and pursue new career paths within your field. For seasoned social workers, networking offers the means to share best practices and develop new skills.

Types of Professional Networks In Social Work

Professional networks can be divided into three categories: operational, personal, and strategic. First, operational networks often exist within organizations. They consist of your coworkers, managers, employees, clients, and vendors. Developing positive and productive relationships with these individuals helps you succeed on a day-to-day basis. Second, personal networks exist across organizations and fields. Your personal network may comprise friends, former colleagues, teachers, and members of your community. While you can call upon this network for advice in your current role, most people tap personal networks when looking for a new job. Third, strategic networks span companies and industries. People often use these to pursue a broader goal than finding a new job. For example, a social worker may call upon political leaders within his strategic network to fix a policy that disadvantages clients. Social workers benefit from all three types of networks, though early-career professionals should focus on developing operational and personal networks.

Networking Events in Social Work

Attending social work networking events can help you meet new people and expand your professional circle. These events often take place at large venues, such as convention centers and hotels. Social work networking events often feature lectures, seminars, and discussions of interest to those working in the profession. For example, a conference for social workers may feature a presentation on a community health project or a panel of experts debating how to reduce homelessness in urban areas. (Ed Holmes, 2013)

In addition, these events provide an opportunity to connect with other social work professionals. Depending on the nature of the event, you may meet others through structured group discussions or in more informal ways, like during coffee breaks or cocktail hours. Remember to pack plenty of business cards, and follow up on the connections you make at these events.

Elevator Pitches in Social Work

Through an "elevator pitch," you briefly introduce yourself, discuss your professional background, and articulate a goal. For example, at a networking event, you may meet the person in charge of hiring for a large hospital. Using your elevator pitch, you would tell this person who you are, that you have extensive experience working with individuals with physical limitations, and that you want to use your skills to help people leaving a hospital after surgery. (Hitchcock, 2018).

Social networking sites and apps for social workers
Although the strongest professional networks involve in-person connections, social media platforms like WhatsApp, Facebook play an increasingly important role in maintaining social work networks. For example, if you meet a connection at an event, but forget her name before you have the opportunity to follow up, you can search online using the name of her organization or other information. Social networking sites also allow you to determine who in your network can facilitate a connection to a particular person or recommend you for a given job. (Hitchcock, 2018)

**Benefits of networking**

First, it allows you to easily create and share content with others in real time, offering tools that enable you to meaningfully contribute to professional conversations and public discourse.

Second, you can develop a network of trusted resources (individuals, organizations, and publishers) that you can access at almost any time. While learning from other professionals is nothing new, social media expands the number and variety of content, people and groups that you can access such as professionals from other countries, open-access peer-reviewed scholarship, and first-hand accounts of other people's experiences. Because social media platforms are available 24/7, you can connect with your network when you want and from most any digital device including a laptop, tablet, or smartphone.

Thirdly, you can easily stay up to date on any professional interest and quickly add or expand an interest on your network.

Fourth, we can find volunteer opportunities, networking events, career advice, a job bank, information on what other social work alumni are doing and the e-newsletter etc.

**Rise of Network of Professional Social Workers - India**

NPS India is a National Voluntary Network of Social workers, Institution of Social work education, Organisation Supporting, Social work Education, Etc. On March 11 2016, using Electronic Media and Social Networking such as Whatsapp and facebook, A system to connect social workers across India was established. It started with 256 Professional Social workers from Tamil Nadu. Like a ripple effect, The members started to become part of NPS_INDIA. More and More people were being added across the country. Hence was decided that This Platform will be used to bring Professional Social workers across India.

**2. Research Methodology**

Objective of NPS

- To promote and Develop Excellence in Social work education, Research and Employment Nationally and Globally in order to enhance human Well Being.
- To Create and Maintain a Dynamic Network of Professional Social workers
- To support and facilitate Participation in Mutual Exchanges of information and Expertise.
- To represent Social Work Education and Practice at an International Level.

<table>
<thead>
<tr>
<th>Year</th>
<th>Members in WhatsApp Group</th>
<th>Facebook Followers</th>
</tr>
</thead>
<tbody>
<tr>
<td>2016</td>
<td>256</td>
<td></td>
</tr>
<tr>
<td>2017</td>
<td>2048</td>
<td>1560</td>
</tr>
<tr>
<td>2018</td>
<td>4096</td>
<td>3746</td>
</tr>
</tbody>
</table>

Education qualification

The data Shows that among the 4096 Members 83% of them are MSW graduates from Colleges across India like Tata Institute Of Social Sciences Mumbai, Madras School Of Social Work Chennai, Sacred Heart College, Thiruputur. Bishop Heber College, Telangana University, Assam Don Bosco University, Nirmala Niketan, Indore Mahavidyalaya, Bhopal School Of Social Science, Pune University, Delhi School Of Social Work, Xavier Institute Of Social Science, Rajagiri College Of Social Sciences, Kerala Nimhans, Bangalore, Gujarat Vidhyapith Ahmedabad, National Institute Of Social Work And Social Science, Utkal University, Bhubaneswar, Orissa. And So On
Every Employment vacancy of NPS is processed through a Three different stages. First, The received Notice is Verified by the verification Team, on the authenticity of the vacancy, the salary and Reliability of the source. Secondly, The editing Team will edit the Post according to a standardized format. Thirdly, The NPS networking team will post the employment and follow up the placement to make sure the vacancy is closed. The data Shows a positive outcome were the notification received, posted and Place has a gradual increase.

3. Conclusion
It is once again cleared that using digital platform for networking professionally will result in creating a community of virtual contacts which can provide critical information on field trends, possible employment openings and also a bridge for recruiters with the resources available in the field. E networking is important in personal as well as career development of a professional. This article provided insight for present social work students and professionals in the field towards digital networking personas and accountability of information displayed on social networking app (Whatsapp). Whatsapp plays at least a nominal role in the daily lives of social work professionals and students, which is consistent with social networking usage. Faculty members and administrators need to be aware of these new “e-professionalism” issues in order to educate and train social work.
References

Emerging Tattoo Culture – An Analysis

P. Padmanaban*  
Dr. F. Carter Premraj**

Abstract
Normal is boring, a common idea which is perceived by many of us. This leads to various body modifications done to the human body and also change in behaviour and attitude of an individual. This research paper focuses on the tattoo culture which is booming in the contemporary society among the present generation youngsters. The main objective of the study is to analyze whether the tattoo culture is sign of deviance or self-expression. The researcher has adopted qualitative approach and drafted the paper with the help of Primary sources in the form of case studies and various secondary sources. The risks involved in tattooing and the beliefs related to medical values is also mentioned in this paper. The answer to the research question is discussed in detail in the full paper.

Keywords: Tattoo; Deviance; Self-expression;

1. Introduction
Archaeological evidence says that the marking of tattoos has been practiced across the world since the Neolithic era. It is believed that tattoos are like jewellery, which cannot be stolen by anyone even if they end up losing all their worldly possessions. While a large population of people believe that the marking of tattoos is a kind of ornament, the Apatani tribe of Arunachal Pradesh use tattoos (for protection) to make their young girls look unappealing, so that they will not be kidnapped by the neighbouring tribes. The marking of tattoos differ from one tribe to another. People involved in war, tattooed themselves in order to be recognized after death in a war or fatal accidents, besides it also served to establish their tribal identity.

In Northern and North Eastern part of India it is called ‘Gudna’, which means ‘burying under the skin, whereas in southern part of India the permanent tattoos are called ‘Pachakuthu’. Especially in Tamilnadu it was famous before 1980s. The nomadic community people (Kuravan-Kurathi) go around in search of clients for tattoos.

Tattoo Design
A Sinuous Labyrinthine design believed to ensnare evil beings, is inked on bodies to permanently keep the tattoo bearers safe and secure, until they get reunited with their deceased ancestors in their afterlife. Over the ages, Indian body art has undergone a great transformation – from tattooing for beauty and tradition, to tattooing for fashion and beliefs. Nowadays, tattoos are a blend of creativity and fashion and they are no longer just about identity and territory (Sanchari Patel, 2016).

2. Methodology
This qualitative paper is written with the aid of both primary and secondary data. The primary data comprises of two case studies collected from school students and the secondary data was collected by reviewing the past literature, news articles, websites, books etc.

Objectives:
● To bring out the changing trend in tattoo (culture).
● To enumerate the risks involved in tattooing.
● To ascertain whether it is a sign of self-expression or sign of deviance.

Review of the Literature
A news article published in the official website of The Hindu (2018) reports, that the ‘Narikuravar’ tribe travel different places for days, weeks or even months for trading purpose. They believe that this ‘pachaikuthu’ will help in identification of bodies in case they fall prey to any misfortunate accident.

In an article published by NEWS18 (2018) in their official website, it is reported that tattoos may be fancy wearable and as forms for many, but for students in several government schools in the Cuddalore district of Tamilnadu,
these symbolizes their caste identities and deep rooted prejudices. Tattooing of a single star or a mango, symbolism of the rival parties, are among the other means used by students to exhibit their caste affiliations.

Sign of Deviance:

Tattoo bearers are found to be strongly associated with deviant behaviour. Substance abuse, suicide and overall antisocial behaviour (Adams, 2009; Armstrong, 2006) A German study concluded that more than women, men with tattoos are frequently associated to be adventure seekers and to having multiple sexual partners (Wohlrah 2009). Numerous studies support the deviant marker proposition, whereby tattoo bearing youths are often associated with antisocial behaviour such as the usage of marijuana, alcohol and recreational drugs (Nathanson et al 2005), sexual promiscuity, cheating on school work. (Koch et all 2010)

Supporting this literature, the theory of differential association by Edwin H. Sutherland says that the environment plays a major role in deciding which norms people learn to violate. Specifically, people within a particular reference group provide norms of conformity and deviance, and thus heavily influence the way other people look at the world, including how they react. People also learn their norms from various socializing agents-parents, teachers, ministers, family, friends, co-workers, and the media.

Sign of Expression

Instead of viewing tattoos as merely symbols of association with certain groups or as signs of deviance, many studies regard tattoo as a method of an individual’s self-expression or as an art form (Pitts 2003; Williams 2003), besides it proclaims the psychological and social place of the tattoo bearer (Ellis 2006)

Beliefs related to medical values

The ‘Narikuravars’ believe that the entire body is an easel for the art of ‘Pachaikuthu’. Pachaikuthu done around the temples on both sides relieves them of the nagging pain in the forehead. Likewise pachaikuthu on the leg helps them get relieved from the pain in the knee or ankle and it was reported that those with recurring gastric pain get pachaikuthu done below the chest. (The Hindu, 2018)

Risks involved in tattoo marking

Contradictory to the above mentioned fact, another report says that, tattooing in this era is increasingly a common form of self-expression and also it is an important means of self-identity for adolescents and young adult populations. On the other hand, they are not completely aware of the risks involved in tattooing. Following are the risks involved in tattoo bearing.

i. Allergic reactions: Chemicals found in tattoo dyes – especially red, green, yellow and blue dyes, can cause/trigger allergic skin reactions.

ii. Skin infections: Tattoo dyes leads to Staph infections. Sometimes inflammation known as ‘granuloma’ can form around tattoo ink and it can cause keloids (thazhumuthadimum)

iii. Blood borne diseases: If and when the tattoo equipment used is contaminated with infected blood (not sterilized properly) and used directly on others, there are chances of getting hepatitis B, hepatitis C and also HIV/AIDS.

iv. Interference with future magnetic resonance imaging (MRI).

v. Burning and swelling at the tattoo site (Medically reviewed by the University of Illinois, Chicago, School of Medicine on August 8, 2016- Written by Valencia Higuera and the Healthline Editorial team)

Case 1

A boy named Rajesh (name changed), aged 16, studying in a government school located in Chennai. He has a symbol of a Star tattooed on his forearm. It is observed that he had been influenced by his peers, hence wanted to have one like them. Since he could not afford to have it tattooed from a professional tattoo artist owing to financial crisis, he opted for a roadside tattoo shop near marina beach, where they charged him very less comparatively. When asked whether a new needle was changed he replied he was not aware of it.

Case 2

There is another similar case, where a boy named Stephen, (name changed) aged 15, studying in the same school was found with two alphabets tattooed on his forearms (M&K). When asked the reasons, he stated that they are the initials of his parents. Just like the first case, he opted to get his tattoo done from a beach side tattoo shop, since he could not afford the expenses charged by professional tattoo artists. When asked whether he was aware of the health complications/ consequences that arises from using the same needle, he replied that he was not aware of such things. He also mentioned that he was not aware whether the needle used on him was new or not.
3. Conclusion and Discussion

Apart from being a sign of self-expression, tattoos have become a fashion, a style statement, peer pressure, desire to appear different from others, tendency to portray themselves as rowdy, so that nobody comes in their way to mess with them (as a mark of intimidation). Keeping all things aside, it is alarming to know that young adults wishing to get tattooed are not aware of the consequences of using the same needle. Before it is too late, as social workers it is high time for us to put an end to their unwary behavior towards tattoos. It is mandatory to make them aware of the end results, so that they can be vigilant in future and thus keep them safe and secure. As social workers we have the added advantage of visiting schools voluntarily or we can associate with NGOs who work for school children. It is equally important to spread this awareness among the general public to keep them away from risks involved in tattooing. On analyzing the fact whether tattoos are a sign of deviance or self-expression, it can concluded by saying that it all depends upon the mindset of the tattoo bearers.

References
Factors Promoting Positive Adaptation and Resilience during Transition among Freshmen in Residential Colleges

J. Jerylene Priyadharshini*
Dr. A. Relton**

Abstract
The transition to a residential college can be a difficult time as students adjust to new social and academic demands while adapting to new living circumstances in a residential environment. The ability of students to cope with the stress of such a transition and display positive outcomes despite challenges has important implications for psychosocial well-being as well as academic success. The present study examined the relative impact of four domains that have been shown to promote resilience in the face of stress in order to determine the extent to which each factor predicted student stress independent of all other factors. Freshmen students from two residential colleges completed measures assessing their perceived level of stress as well as their social connectedness, self-care behaviors, cognitive style, and life skills. Results revealed that social support and cognitive styles characterized by optimism significantly and uniquely predicted lower stress among students. Findings are discussed in relation to the development of university-based programs to promote the skills and characteristics that are most likely to result in positive outcomes for students during the transition to college.

Keywords: Resilience; Stress; Residential College; Adjustment.

1. Introduction
At the heart of positive psychology is the notion that psychological research would benefit from focusing on the building of positive qualities in normal functioning individuals rather than psychology’s long-standing pursuit of identifying conditions and variables associated with repairing or avoiding negative outcomes (Seligman & Csikszentmihalyi, 2000). Gable and Haidt (2005) defined positive psychology as “the study of the conditions and processes that contribute to the flourishing or optimal functioning of people, groups, and institutions” (p. 104).

From this perspective, positive psychologists suggest that studying the variables that promote positive growth and resilience in individuals without psychological distress may be as beneficial as studying the treatment of individuals who are already experiencing difficulties. With this in mind, the present study sought to identify factors that promote positive adaptation and outcomes during a life transition faced by millions of people every year adjusting to life. The transition can be an exciting, albeit stressful, time in students’ lives as many move away from friends and family and must adapt to new and increasingly demanding academic, social, and financial pressures, all while adjusting to life in an unfamiliar environment. As a result of this transition, freshmen students tend to experience greater stress, anxiety, and psychological distress (e.g., depression) relative to upperclassman (Bayram & Bilgel, 2008). However, students display varying levels of resilience in their ability to have positive outcomes in the face of such a transition. Research supports the existence of a number of factors that have been associated with positive responses in the face of stress, including social support and having a close social network, taking care of one’s self physically as well as mentally, possessing particular skills (i.e., self-regulation, cognitive flexibility), and the style with which one thinks about past and future events (i.e., optimism, pessimism). Moreover, such factors seem to have a cumulative effect on stress such that persons possessing a greater number of protective factors are more likely to adapt positively in the face of stress and display resilience (Howard, Dryden, & Johnson, 1999). Importantly, the extent to which students are able to cope with stressors during the first year of college has important implications not only for their social-emotional adjustment and well-being, but also for the likelihood of academic success and persistence in education (An-drews & Wilding, 2004; Pritchard & Wilson, 2003; Zajacova, Lynch, & Espenshade, 2005). Little is known, however, with respect to the relative strength of the effects of various factors that promote positive adaptation in the face of student stress. The findings of such an examination have significant implications for the development of practices and programs to promote positive psychological adjustment and, ultimately, academic

*Research Scholar, PG and Research Department of Social work, Bishop Heber College, Tiruchirappalli.
** Associate Professor& Head, PG and Research Department of Social work, Bishop Heber College Tiruchirappalli.
success and retention by providing researchers, faculty, and administrators with information concerning the factors that are most likely to promote resilience and positive adaptation in the face of stress. The present study aimed to explore and compare the effects of several resilience-promoting domains that have been shown to be associated with more positive outcomes in stressful situations among college students to determine if possessing resources in any particular domain was more strongly associated with positive stress related outcomes than other domains when compared concurrently. The four resilience factors included in the present study were selected following an examination of the literature that revealed that one’s social connections, self-care behaviors, cognitive style, and life skills (e.g., regulatory and coping skills) tended to be the domains most commonly identified as impacting feelings of and responses to stress.

Resilience-Promoting Factors

Social connections. For first-year College students, developing social connections and avoiding social isolation is a crucial task during the transition and has important implications for students’ academic performance and persistence as well as their psychological well-being. Not only have feelings of belongingness been suggested to be a basic human need (Baumeister & Leary, 1995), but the lack of positive relationships with others has been found to predict academic under-achievement (Walton & Cohen, 2007, 2011) and poor physical health (Cohen & Janicki-Deverts, 2009; Uchino, 2006), as well as depressive symptomology, greater stress, and higher levels of anxiety (Hall-Lande, Eisenberg, Christenson, & Neumark-Sztainer, 2007; Sax, Bryant, & Gilmartin, 2004). Further, the quality of peer relationships and social support has been suggested to be one of the most important predictors of psychological health and well-being during adolescence (Rubin, Bukowski, & Parker, 1998).

In an effort to explain the association between social support and stress during periods of change, Cobb (1978) suggested that major transitions in life (e.g., beginning college) put people at risk for increased stress. However, individuals who interpret interactions and communications with others as indicative of being cared for, valued, and part of a social network were likely to experience less negative and more positive psychological outcomes in the face of stressful events. In this way, social support may buffer individuals from stress by affecting the manner in which the stressful situation is appraised. Additionally, having persons to discuss stressful situations which has been shown to reduce the likelihood of negative affective or behavioral responses to stressful events (Lepore, Silver, Wortman, & Wayment, 1996), perhaps by offering a solution to dealing with the stressor, decreasing the perceived salience of the stressor, or distracting one from the stressor (Cohen & Pressman, 2004).

As students transition from towards a residential school or college and find themselves in unfamiliar environments with new and more demanding responsibilities. Social support as an effective and valuable resource to aid students in combating stress and anxiety promotes positive adjustment and well-being. As such, students who perceive themselves as having high levels of social support may be buffered from some of the deleterious effects of stress during the transition phase.

Self-care. During times of stress, the extent to which individuals engage in health-promoting behaviors and maintain a healthy lifestyle has been found to positively impact their psychological well-being. Evidence supports the existence of a mind-body connection by which physical functioning and health are associated with mental and emotional well-being (Astin & Forys, 2004). Specifically, physical activity has been found to benefit mental health and decrease symptoms of depression and anxiety (see Penedo & Dahn, 2005, for a review). Exercise has also been shown to reduce stress and promote self-esteem and long-term cognitive and emotional well-being (Berchtold, 2008; Edenfield & Blumenthal, 2011; Hays, 1999). To the extent that students engage in self-care behaviors, such as healthy eating and exercise, they may experience greater lower distress during the transition phase.

In addition to promoting positive responses to stress, self-care behaviors are often negatively impacted by stress. For example, some people tend to eat more whereas others tend to eat less when under stress (Stone & Brownell, 1994). Restrictions of caloric intake as well as over-indulgence both result in negative outcomes for physical and psychological well-being. At a neurophysiological level, eating unhealthy, high-fat, palatable foods has been found to be associated with opioid release, and opioid release increases the consumption of palatable foods. Given that opioid release has a strong effect on reducing stress, it is possible that unhealthy eating may become an addictive response to stressful situations in an attempt to cope with stress (see Adam & Epel, 2007). Moreover, self-caring, including maintaining a healthy diet (Cartwright et al., 2003), getting sufficient sleep (Meerlo, Sgoifo, & Suchecki, 2008; Wheatley, 1993), and treating one’s self with compassion, care, and kindness (see Neff, 2009 for a review) have been found to lower stress and promote positive psychological well-being. Broadly, positive health-related behaviors that
involves taking care of one’s self, such as exercise, a healthy diet, adequate sleep, and positive self-cognitions are important for lowering stress and may promote psychological adjustment for students during the transition phase.

Regulatory and coping skills. Personal, social, and behavioral abilities also play a role in the manner in which persons manage stressful situations. For example, evidence suggests that lower levels of stress may be associated with skills or abilities, such as self-regulation (i.e., controlling one’s emotions, thoughts, and behaviors) which has been shown to be associated with better adaptation in the face of stress (Buckner, Mezzacappa, & Beardslee, 2003). The regulation of positive emotions has also been linked to resilience to the extent that they counteract negative emotional experiences and enhance thoughts and actions (Fredrickson, 2001; Tugade & Fredrickson, 2007). As such, students who possess better self-regulatory capabilities and are in greater control of their emotions, thoughts, and behaviors during stressful times should experience more positive outcomes and greater resilience than their counterparts with poorer self-regulation.

Additionally, the ability to be flexible in the use of coping strategies that are adaptive and effective in response to specific negative events has been found to relate to lower levels of anxiety and depression (Fresco, Williams, & Nugent, 2006; Lam & McBride-Chang, 2007). Research suggests that students who are able to selectively engage particular strategies in the service of coping with stress during the transition period should experience more positive outcomes and experience lower rates of dropout than students who lack such flexibility (Gan, Shang, & Zhang, 2007). The ability to recruit coping resources that match the needs of a particular situation are more effective at dampening stress compared to persisting in the use of an unsuccessful or ineffective strategy in a stressful situation.

Cognitive style. We define cognitive style as the manner in which students explain their personal successes and failures, as well as their level of confidence in their own abilities and the nature of their outlook for the future (i.e., optimistic/pessimistic). Negative ways of thinking that relate to one’s self, world, and future have been found to be indicative of latent depressive cognitive styles (Beck, 1987), and these patterns of thought have been found to be stable over time (LaGrange et al., 2011). Persons who tend to view their selves, abilities, and actions negatively tend to struggle to adapt to and overcome stressful circumstances. Conversely, individuals who possess positive cognitive styles that involve feeling in greater control of their environment, having more confidence in their ability to overcome obstacles, and a positive outlook for the future have been found to be more resilient and experience greater psychological well-being (Maier & Seligman, 1976; McGregor, Gee, & Posey, 2008; Tusaie, Puskar, & Sereika, 2007). For students adjusting during the transition time the ability to maintain a positive perspective on one’s future helps promote resilience in difficult moments, providing a buffer against the negative impacts of stress and maintaining motivation to achieve one’s goals (e.g., make good grades, bond with roommates, gain in- dependence).

Present Study

The present study assessed the impact of factors that promote resilience in the face of stress during the transition to a residential college. Of primary interest was the degree to which each resilience factor predicted students’ stress independently of the other domains of resources. Given the empirical support for the positive stress-related outcomes associated with the four mentioned domains, as well as the differential characteristics associated with each (e.g., healthy diet as a self-care behavior, feeling socially connected to others) we expected each factor to be significantly and uniquely associated with lower student stress. However, given the exploratory nature of the study, we had no specific expectations regarding the differential strength of the independent associations between the resilience factors and student stress. Additionally, we examined the cumulative effect of these resilience factors to ascertain the extent to which possession of accumulated resources across multiple domains impacted students’ adaptation to stress during this transition. Importantly, we were interested in exploring the degree to which the cumulative effects of the resilience factors predicted students’ stress responses above and beyond the effects of the individual resilience factors. This aim was guided by the hypothesis that students with a greater total number of resilience-promoting resources would experience lower stress than students who have fewer resources at their disposal as a result of the greater availability of ways to combat stress. Moreover, we expected that effect of the total number of resilience resources would hold even when controlling for the effects of each factor independently.

2. Research Method

Participants

Participants were 120 first-year college students from a residential background (94% fresh- men, Mage = 18.73 years) from two colleges in Coimbatore and Chennai. The majority of the student participants were female (86.7%) due to high participation interest shown. The sample was relatively diverse with students residing in which 76.7% in and around Tamil Nadu, 12.5% NRI’s, 3.3% Local residents, and 7.5% International residents.
Measures

Perceived Stress Scale. The 10-item Perceived Stress Scale (PSS; Cohen, Kamarack, & Mermelstein, 1983) is a well-established measure of individuals’ perceptions of their own global level of stress. Samples items include, “In the last month, how often have you felt nervous and stressed?” and “In the last month, how often have you found that you could not cope with all the things you had to do?” Students responded to items on a 5-point Likert-type scale (1 = Never and 5 = Very often). In the current study, the PSS demonstrated good internal reliability (α=.89).

My Resilience Factors. The 30-item My Resilience Factors questionnaire assesses four domains that have been found to be associated with the ability to overcome stressful and difficult situations and promote resilience (DeRosier, Craig, & Leary, 2012). Students responded to each item on a 4-point Likert scale (1 = Not at all true or Never true about me and 4 = Very or Almost always true about me) indicating how true each statement is of them. The four categories of resilience include: Social Connections (e.g., “I feel socially connected to others at college;” 6 items; α = .72), Self-Care (e.g., “I exercise regularly (at least once per week);” 7 items; α = .64), Life Skills (e.g., “I’m self-motivated to succeed;” 11 items; α = .85), and Cognitive Style (e.g., “When bad things happen, I know things will get better;” 6 items; α = .90).

Procedure

Participants were freshmen students recruited as part of a larger study assessing students’ resilience to stressful situations faced during the transition to college. Participating Colleges offered incoming freshman the opportunity to take part in a pilot study designed to test a curriculum developed to build students’ resilience. Students who volunteered to participate completed the Perceived Stress Scale (PSS; Cohen et al., 1983) and My Resilience Factors (DeRosier & Raab, 2011) approximately six weeks into the first semester of college so as to allow for the opportunity for students to experience increases in academic, social, and financial stress that often accompanies the transition to college. Measures were completed via students’ secure online accounts as part of the testing of the curriculum developed to build and strengthen students’ resilience in the face of stress during the first year of transition in the residential sector.

3. Result

Preliminary Analyses

Table 1 shows the means and standard deviations for all variables as well as the bivariate correlations for all pairs of variables. As can be seen, students’ perceived stress was significantly and negatively correlated with each resilience factor, suggesting that possessing higher levels of resilience-promoting resources in each domain was associated with positive adaptation (i.e., lower levels of stress) during the transition period. All domains of resilience factors were found to be significantly correlated to one another indicating that higher scores in any specific resilience-promoting domain tended to be associated with higher scores in other domains. Moreover, the moderate correlations among the resilience factors (as seen in Table 1) suggest that although the factors are interrelated, they may not be so highly correlated as to suggest that they are measuring the same constructs. Despite our predominantly female sample, exploratory analyses were conducted to examine potential gender differences in the presence of the protective factors as well as in students’ levels of perceived stress. Not surprisingly, no significant differences were found for men and women. Examination of means revealed negligible differences (<.09) for all variables.
except for students’ social connections, wherein we found that males (M = 3.39, S.D. = .63) reported greater social connections than females (M = 3.15, S.D. = .54), although this difference was not significant.

In addition, to explore whether the pattern of inter-correlations among resilience factors differed for males versus females, we conducted r-to-Z Fisher transformations (Fisher, 1915). Again, no significant differences were found, indicating that these resilience factors appeared to be inter-related in a similar fashion for males and females.

Next, a hierarchical multiple regression analysis was conducted to test the independent effects of each resilience factor on students’ reports of stress controlling for all other domains, as well as the unique cumulative effect of all resilience factors and levels of perceived stress over and above the effect of each independent factor. We also tested for main effects and interactions with gender to explore the possibility that differences exist in the effects of the resilience factors on students’ stress as a function of gender. Once again, these analyses were largely exploratory due to the disparity in the numbers of males and females in the sample. However, the presence of significant effects may suggest sizeable differences between males and females to inform future research concerning stress and coping among freshmen students.

Students’ scores on the social connections, self-care, life skills, and cognitive style subscales were entered along with student gender on the first step of the present analysis. The composite score consisting of the average across all resilience-promoting factors was entered on the second step and two-way interactions among the resilience factors and gender were entered in the third step. As shown in Table 2, students’ social connections and cognitive style were significantly inversely related to students’ perceived stress, suggesting that students who experienced greater social connectedness (β = −.21, t(114) = −2.21, p = .03) and possessed a cognitive style characterized by self-confidence and optimism (β = −.39, t (114) = −3.19, p=.002) reported lower levels of stress during the first semester of college independent of all other protective factors and gender. Moreover, accounting for gender and all of the resilience-promoting factors simultaneously explained a significant amount of total variance in perceived stress, R2 = .34, F(5, 112) = 11.55, p < .001.

The addition of the cumulative resilience factor (resulting from the summation of all items across subscales) to the model in the second step, however, did not explain additional unique variance in students’ perceived stress, ΔR2 = .001, F-change (1, 111) = 0.09, p = .77. This finding suggests there may not be a cumulative effect of these protective factors over and above the independent effects of specific resilience-promoting factors. That is, the accumulation of resources from multiple resilience-promoting domains did not explain additional unique variance above and beyond what is accounted for by the independent resilience factors. Moreover, the inclusion of the cumulative factor score resulted in the previously significant predictors (social connections, cognitive style) becoming non-significant predictors. Similarly, the inclusion of two-way interactions in the final step did not result in a significant increase in explained variance [ΔR2 = .02, F-change (5, 106) = 0.80, p = .55], indicating that our preliminary and exploratory examination of gender revealed no significant differences in the associations between resilience factors and students’ stress as a function of gender.

Table 1. Means, standard deviations, and bivariate correlations.

<table>
<thead>
<tr>
<th></th>
<th>M</th>
<th>SD</th>
<th>PSS</th>
<th>Social Connections</th>
<th>Self-Care</th>
<th>Life Skills</th>
</tr>
</thead>
<tbody>
<tr>
<td>Perceived Stress (PSS)</td>
<td>2.00</td>
<td>.63</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Social Connections</td>
<td>3.18</td>
<td>.55</td>
<td>−.45**</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Self-Care</td>
<td>3.16</td>
<td>.50</td>
<td>−.33**</td>
<td></td>
<td>.49***</td>
<td></td>
</tr>
<tr>
<td>Life Skills 3.42 42−49</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>.51***</td>
<td>.55**</td>
</tr>
<tr>
<td>Cognitive Style 3.48 56−55</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>.50***</td>
<td>.53**</td>
</tr>
</tbody>
</table>

Note: *p < .05, **p < .01, ***p < .001.
In sum, our results suggest that students’ social connectedness and optimistic thinking style were the most important predictors of students’ positive adjustment during the transition. However, inclusion of a cumulative resilience factor to the model did not explain additional variance in stress and resulted in the previously significant predictors dropping to non-significance. This finding suggests that the cumulative factor contributed no additional unique variance, but also shared variance with social connections and cognitive style resulting in these variables becoming not significant predictors of student stress. Finally, no main effect of gender or two-way interactions among the resilience factors and gender were found to significantly relate to students’ stress during the transition due to a residential stay, suggesting that this predictive pattern was similar for both genders.

4. Discussion and Conclusion

The prevalence of stress and anxiety in freshmen students due to this transition towards having a completely residential stay up underscores the need for adequate and appropriate support services to help students for promoting a successful transition to post-secondary learning (Wong, Cheung, Chan, Ma, & Tang, 2006). In fact, the extent to which students are able to cope with stressors during the first phase is directly related to their academic resilience (Zajacova et al., 2005). Many colleges and universities employ First Year Experience (FYE) programs to help orient and acclimate first-year students (Hunter, 2006) to campus life. These programs consist of a wide range of activities, including summer orientation days for new students, first-semester seminars, student- or faculty-led support groups, and enhanced advisory plans. However, typical FYE programs for supporting students in this transition rarely directly address stress, coping, and resilience with students, but rather target practical (e.g., dining halls, dorm life) and academic (e.g., course scheduling) aspects of adjusting to college life (Hunter, 2006; Padgett & Keup, 2011).

Table 2. Hierarchical multiple regression predicting student stress.

<table>
<thead>
<tr>
<th>Predictor</th>
<th>Step 1</th>
<th></th>
<th>Step 2</th>
<th></th>
<th>Step 3</th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>β</td>
<td>ΔR²</td>
<td>β</td>
<td>ΔR²</td>
<td>β</td>
<td>ΔR²</td>
</tr>
<tr>
<td>Gender</td>
<td>-.01</td>
<td>.01</td>
<td>-.01</td>
<td>.04</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Social Connections</td>
<td>-.21*</td>
<td>.13</td>
<td>-.14</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Self-Care</td>
<td>.04</td>
<td>.11</td>
<td>.17</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Life Skills</td>
<td>-.10</td>
<td>.04</td>
<td>.09</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Cognitive Style</td>
<td>-.39**</td>
<td>-.30</td>
<td>-.23</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Cumulative Factor</td>
<td>-.25</td>
<td>.47</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Gender × Social Connections</td>
<td>-.24</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Gender × Self-Care</td>
<td>-.32</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Gender × Life Skills</td>
<td>-.27</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Gender × Cognitive Style</td>
<td>-.38</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Gender × Cumulative Factor</td>
<td>.98</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Note: *p < .10, **p < .05, ***p < .01, ****p < .001

This study examined the independent and cumulative effects of four non-academic domains previously found to help individuals overcome stressful situations and develop resilience: social connections, self-care, cognitive style, and regulatory and coping skills. The results of this research indicate that social connectedness and cognitive style were the most important predictors of students’ stress during the transition to college. In fact, these two factors were each independently and directly related to students’ level of stress during the first 6 weeks of college. These findings suggest the potential value of integrating resources and tools into FYE programs that explicitly help students build social connections and foster optimistic, efficacious cognitive styles. Emphasizing the importance of these types of social-emotional resilience strategies could effectively increase first year students’ ability to cope with the stressors.
of college and thereby significantly increase students’ academic and social-emotional adjustment at college as well as their persistence in postsecondary education.

The critical role of social connections found in this study is consistent with a large body of past research underscoring their value and importance for mental health and well-being. Social relationships provide key functions of support, intimacy, companionship, and affirmation that are essential throughout the lifetime, and particularly during stressful transitions (Furman & Buhrmester, 1985). In fact, Thoits (1986) posited that the threatening demands imposed by a stressor may be reconstrued if an individual believes that others will provide him with support to help deal with the stressful event. In such a case, the negative effects of the stressor may be attenuated as people’s belief in their own ability to cope with the event is strengthened as a result of perceived social support. Helping students build new social connections within the postsecondary environment would be expected to significantly improve both their adjustment to college and their likelihood of persisting in college to graduation. Given that evidence suggests even brief interventions promoting social connections and feelings of belonging-ness can have long-lasting, observable benefits for mental health and academic achievement (Walton & Cohen, 2011), incorporating strategies to build social connections into FYE programs may be particularly useful.

The current study’s finding that cognitive style contributed considerably to coping to stress is also consistent with the literature across a broad array of areas of adjustment (Aspinwall & Taylor, 1992; Brissette, Scheier, & Carver, 2002; Park, Moore, Turner, & Adler, 1997; Shelby et al., 2008). Theory and research underlying cognitive-behavioral therapy (CBT) specify how cognitive appraisals of stressful situations directly impact stress and anxiety as well as behavioral responses (Seligman, Schulman, DeRubeis, & Hollon, 1999). Maladaptive thoughts concerning the absence of personal control and futility of one’s actions are associated with academic problems as well as poor social-emotional adjustment (Fincham, Hokoda, & Sanders, 1989). Helping students revise their cognitive appraisals by altering the manner in which they interpret the cause of events and through development of learned optimism (belief that your actions are meaningful and you have personal control over events in your life) would be expected to increase academic persistence through greater confidence and feelings of control in the collegiate environment (Bandura, 1986; Mutlon, Brown, & Lent, 1991; Zimmerman, 1989). FYE programs could integrate cognitive resilience strategies to help students assess their cognitions related to difficult situations at college and revise these, as needed, to increase adaptation.

From the perspective of positive psychology, findings from this study suggest a way in which college officials and administrators may structure students’ first-year seminars and orientation programs to promote the most positive development and outcomes during students’ adjustment to college life. Currently, relatively little is known about how interventions to increase resilience for coping during the transition to college can be used to increase students’ persistence. This work is especially needed given recent research indicating that, on average, only 57% of students who enroll as freshmen at four-year institutions will graduate from that school within six years (Knapp, Kelly-Reid, & Ginder, 2011). One explanation for such high rates of post-secondary dropout is the inability for some students to adjust to and cope with the transition to postsecondary learning and the concomitant increase in stressors. Identifying characteristics that are associated with resilience and fostering development of those facets in students is crucial for promoting academic resilience and overall well-being.

Conclusion

The results suggests that providing students the opportunity to develop social connections and learn optimistic and motivated thinking styles might be particularly helpful in promoting psychological well-being by preparing and assisting students in dealing with the transition period into a covered environment. Future research should continue this line of study. In particular, longitudinal investigations of the impact of different resilience factors over the course of the first year of college life and the transition would be extremely important to determine the relative impact of each of the four resilience factors over time. Also, investigations of FYE programs designed to increase social, cognitive, self-care, and behavioral coping skills are needed in order to inform the application of interventions focusing on specific resilience factors that can effectively benefit students’ adjustment to college over time.
International Journal of Research in Social Sciences (UGC Journal Number-48887)

Vol.9 Issue 2(Special Issue), February 2019
ISSN: 2249-2496 Impact Factor: 7.081

Journal Homepage: http://www.ijmra.us, Email: editorijmie@gmail.com

References


Effects of Parenting Styles on Deviant Behaviour among Adolescents: An Introspective Analysis

M. Reena Rebellow*
Dr. R. M. Sam Deva Asir**

Abstract
Children obtain their initial training on physical, social, mental, emotional and spiritual aspects from their parents. Parents become the first operators of the child’s environment. The Family environment, especially the learnings and motivation that the child receive from the parents plays a key role in determining the success or failure in the life of the children. Parenting is executing the functions of a parent such as care giving, nurturing and protecting the child. The style of parenting adapted by the parents and primary caregivers have a reciprocal relationship with the development of child’s behaviour. Negative parenting style of the parents does have an influence on the deviant behavior among the children and adolescents. The physical, psychological and social habits of an individual developed during childhood would enormously be reflected in the overall personality of the person during the period of adolescence and adulthood. The present study highlights the theoretical inputs on the various styles of parenting and its effects on the behavior development and deviations among the adolescents.

Keywords: Parenting styles; Deviant behavior; Children and Adolescents.

1. Introduction
The family is the most personal unit providing interaction and relationship between the members of the unit, (Abraham, 2006). Children obtain their initial training on physical, social, mental, emotional and spiritual aspects from their parents. The Family environment, especially the learnings and motivation that the child receive from the parents plays a key role in determining the success or failure in the life of the children. Okpoko (2004) and Utti (2006) defined parenting as an act of parenthood and child upbringing. The family institutes the child’s major and instant social environment. Thus Parents become the first operators of the child’s environment. The style of parenting adapted by the parents and primary caregivers have a reciprocal relationship with the development of child’s behaviour. Negative parenting style of the parents does have an influence on the deviant behavior among the children and adolescents. The physical, psychological and social habits of an individual developed during childhood would enormously be reflected in the overall personality of the person during the period of adolescence and adulthood. Parenting

The word “Parenting” is derived from the Latin verb ‘Parere’, a word defined as “to bring forth or produce” (My Etymology, 2008). Parenting is executing the functions of a parent such as care giving, nurturing and protecting the child. The parent supports the child by exercising authority and through consistent, empathetic, and appropriate behavior in response to the child’s needs. Parenting is the process of promoting and supporting the physical, emotional, social and intellectual development of a person from infancy to adulthood. Though the terminologies parenting and child-rearing are used interchangeably, it does have a clear cut difference. Child-rearing deals with training the child and interacting with the child whereas, parenting encompasses the responsibility the parent takes up in bringing up the child. In the present scenario, where both the parents were working, we see that the task of parenting is delegated to the significant others in the family such as grandparents or to even daycare centers and sometimes to the babysitters. Researchers and psychologists argue that to those individuals to whom the attention, care and protection were not provided by their parents in first hand certainly has a disadvantage when compared with their counterparts on the other end.

Parenting Styles
The parents because of their uniqueness in personalities and differences in their exposure, show variations in their approach towards their children, thereby developing differences in the patterns of parenting giving raise to

* Ph.D Scholar, PG and Research Department of Social Work, Bishop Heber College, Tiruchirappalli.
** Assistant Professor, PG and Research Department of Social Work, Bishop Heber College, Tiruchirappalli.
various parenting styles. Parenting style is a universal climate in which the families function and in which child rearing behavior of parents or other primary caregivers revolve (Chiew, 2011).

Theories of Parenting Styles

There were several theories that propounds its ideas on various parenting styles and its effect on the personality of their offspring.

Positive psychology that advocates positive parenting and which was built upon the ideologies of Keyes and Haidt,

Attachment theory proposed by John Bowlby and Mary Ainsworth emphasizes close parent-child relationship with secure attachment. The authors have discussed three different types of attachments such as secure attachment, avoidant attachment and ambivalent or resistant attachment. Secure attachment is the positive parenting style as it suggests the parents to be more sensitive and respond to the needs of the child.

Behaviourism, though rarely used concept in parenting, it does gives a lead for adapting positive parenting styles. Skinner’s operant conditioning gives importance to positive reinforcement which is likely to increase the desirable behaviours. It simply recommends the parents to provide positive reinforcements for their children to strengthen the appropriate behaviours and to ignore the inappropriate behaviours which would likely get weakened when that was not reinforced.

Social Learning Theory, proposed by Albert Bandura advocates that children learn the maximum by observing and imitating the parents and elders, rather than listening to them. Hence, the theory suggests the parents and the caregivers to teach the desirable behaviours to their wards by modeling them.

The Baumrind Theory of Parenting Styles proposed by Diana Baumrind was an universally well received theory that has categorized the parenting styles into four such as authoritative, authoritarian, permissive and neglecting.

Characteristics of parenting

Demandingness

community by their maturity, expectations, supervision, disciplinary efforts, and willingness to confront a disruptive child” Baumrind (1996). Parents demand the expected behavior from their wards by directly confronting them, having a close monitor and by developing a pattern of disciplining.

Confrontation

Confrontation happens when the parents exercise firm control over the behaviours of their children. Baumrind suggests that though the control is firm, it should also be non-coercive. This can be established when the parents explain the rationale for their control and try to help their children understand the needs rather than being punitive or using harsh words.

Monitoring

Monitoring is having a close watch. It is a thorough supervision of all the activities of the children. Close monitoring helps in shaping the behaviours of the children. It also encourages self-regulation and pro-social behaviours especially among the adolescents. “Close supervision and provision of an orderly and consistent regimen require a greater investment of time and energy” Baumrind (1996).

Consistent Discipline

Disciplining the children constantly is an important component of child behavioural management. Baumrind suggests that, by providing positive and negative reinforcement for all the desirable and undesirable behaviours of the children right away, would help in consistent disciplining.

Responsiveness

“Responsiveness is the extent to which parents intentionally foster individuality and self-assertion by being attuned, supportive and acquiescent to children’s needs and demands ”Baumrind (1996). Parents who show high levels of warmth, who communicate to their children without any confusion and who exhibit reciprocal behavior are thought to be highly responsive.

Warmth

Warmth is the expression of love and empathy. Parents who display a high level of warmth and highly empathize with their children are said to be highly responsive. Researches also show that high levels of warmth helps in the progress of self-acceptance and optimism among the children.

Reciprocity
There prevails a reciprocal relationship in the parent-child interactions. This could be explained as the development and patterning of child’s behavior depends on the parenting style and the parental care, communication, style etc., is based on the child’s reaction. Parpall and Maccoby (1985) suggests that children are more likely to comply with the desires of the mother if the mother complies with the demands of the child.

Communication

There are two different types of interpersonal discourse proposed in this theory such as Position-centered discourse and Person-centered discourse. Position-centered discourse is based on hierarchy of authority where the parent becomes in-charge. In this type of discourse parent becomes instructors and the children are mere followers which creates coercion and chaos in the parent-child relationship. Person-centered discourse focus on individual more than position or authority. This type of discourse creates pleasant and metamorphic interactions between the parent and the child. Person-centered discourse is considered as an effective way of communication.

Parenting Styles by Baumrind

Authoritative Style

Authoritative parents have high level of demanding as well as responsiveness but have a low psychological control. Parents exercising authoritative style place high demands to their children at the same time they give the necessary space for their children to learn, understand and to experiment on their own. They let their children to ask questions and to express their opinion and feelings irrespective of whether it is positive or negative. They pay attention to both verbal and non-verbal expressions of their children. These parents explain the rationale behind the demanding placed upon their children.

Authoritarian Style

Authoritarian parents demand more but very low at responsiveness. They show high authority and are position centered. They are very rigid and will be unable to tolerate the mistakes of their children. They use harsh words and would give corporal punishments frequently in order to correct their children. They exhibit high psychological control on their children. These parents never let their children to ask question and to experiment anything. Children bought up in such environment would develop fear about their parents rather than trust. These children would be dependent, isolated and socially withdrawn.

Permissive Style

It is seen in the present scenario that positive parenting is misunderstood with permissive parenting which is not true. Parents with permissive parenting style show high responsiveness but are low at demanding. They always attend too much to all the needs and requirements of their children not bothering about the consequences. These parents want their children to be happy always and would never let anything to disappoint them. Children are expected to regulate themselves without providing parental guidance.

Neglecting Style

Neglecting or uninvolved parents are neither demanding nor responsive. These parents show least care and concern towards their children though they provide the basic needs such as food, clothing and shelter. They rarely talk to their children and do not participate in their learning process. Parents adapt this style either because they may think that children are capable of raising and learning by themselves or they may be overwhelmed.

Behavioural Deviance among Adolescents

Deviant behavior can be defined as non-compliance to the norms and regulations of the society, culture, organization, institution and legislation. Adolescents are individuals in their transitional age of human development that occurs during the period from puberty to legal adulthood. In due with a huge transition happening in the body and mind of the adolescents, non-compliance becomes a typical characteristic among adolescents. The behavioural deviance exhibited among adolescents ranges from non-compliance to family or school norms to indulging in criminal activities such as murder. The deviant behavior among adolescents encompasses bullying, intruding during class hours, truancy, spoiling the property of others, theft, violence, substance abuse, and inappropriate sexual behavior. In recent times, the deviance in the behavior of adolescents has become a global issue which requires an immediate attention. According to the statistics of National Crime Records Bureau (NCRB), India, the juveniles in conflict with law were alarmingly increasing every year.
2. Effects of Parental Style on Deviant Behavior among Adolescents

Many literatures have examined a link between the parental styles and problematic and anti-social behaviour among young children and adolescents. Patterson (1995), suggests that a parent with inconsistent disciplinary patterns creates an antisocial and defiant child. On the other hand, consistent parental disciplinary patterns, whether approving or disapproving, help create prosocial children and are not as detrimental to childhood development as inconsistent patterns of discipline. Research suggests that prosocial development occurs in children whose parents utilize effective warmth and empathy while parenting (Eisenberg, 1992). On the other hand, a lack of parental warmth is thought to be associated with aggressive, antisocial, and hostile behaviours in children (Olweus, 1980). Parental dispositions such as anger, disapproval, and discouragement foster antisocial behavior in children; however, when children are highly antisocial they seek greater levels of parental approval (Baumrind, 1996).

The major findings in this area, based on the literature reviews, suggest that there is a consistent linkage between the authoritative style of parenting and fewer problem behaviors among children and adolescents. There also exist significant associations between the authoritarian, permissive, and neglecting/rejecting styles of parenting and problem behaviors amongst adolescents and children. This initial research of the link between parenting style and adolescent and childhood behavior, especially the work of Baumrind(1967, 1971, 1972), provided the catalyst for examinations of the link between parenting style and deviant, delinquent, and criminal behavior in teenagers and adults.

3. Conclusion

Family environment plays a vital role in the personality development of the adolescents. Parent’s failure in concentrating in the overall development of the children is one of the important reasons for the adolescents to get trapped in deviant behaviors. It can’t be denied that parents are responsible to provide a healthy environment for their children in terms of happiness, fun and responsibilities. Parents are expected to spend quality time with their children and value their opinion for them to grow healthy. Thus parents must either reinforce or recreate the type of parenting style that they adopt while raising their children.
Coping with Breast Cancer

B. Josephine Sudhanthra*
Dr. A. Relton**

Abstract
Cancer is a group of diseases involving abnormal cell growth with the potential to invade or spread to other parts of the body. The majority of cancers, some 90–95% of cases, are due to environmental factors. The remaining 5–10% are due to inherited genetics. Environmental, as used by cancer researchers, means any cause that is not inherited genetically. Many cancers can be prevented by not smoking, maintaining a healthy weight, not drinking too much alcohol, eating plenty of vegetables, fruits and whole grains, vaccination against certain infectious diseases, not eating processed food, and avoiding too much sunlight exposure. The number of patients who are diagnosed with cancer has increased over the years. More than 60% o the world’s new cases occur in Africa, Asia and central and South America; 70% of the world’s cancer death also occur in this regions. There has been a vast development in the Management of cancer over the years. Invention of new methods of diagnosis and treatment has helped to increase the better management of cancer patients and has also increased the survival rate. Both physical and psychological management of cancer patients has proved to help in the fast recovery of the patient. As overall cancer death rate has declined, the number of cancer survivors has increased. This trend show that the progress is being made against the disease, but much work remains.

Keyword: Coping, Breast Cancer

1. Introduction
A cancer diagnosis may make you feel worried, sad, confused or angry. Your world has changed and is now filled with information and medical terms you never thought you needed to learn. In addition to the physical difficulties, there are emotional and financial issues that you must learn to manage. Without a doubt, cancer turns your world upside down.
Everyone copes with a diagnosis of breast cancer in different ways and you’re likely to experience a range of emotions. There’s no list of right or wrong feelings to have and no correct order to have them in. It may help you to take time to rest, eat a healthy diet, keep active if you are able to and, when you can, do something you enjoy.
The way you feel about your cancer and how it has affected you and your body will change over time. The concerns you have when you are diagnosed can be quite different from those at the end of treatment, and different again years later.
How you react to your breast cancer can depend not only on you but also on those around you or your cultural background. Some people feel they must keep putting on a brave face for family, friends and even for the doctors and nurses looking after them. Others prefer to let their feelings show and draw strength and support from people close to them.
Problems faced by breast cancer Patients
Can Patients not only undergo Physical problems but also psychological trauma. Though successful treatment options are available to deal with breast cancer, pain and suffering associated with available treatment modalities is significant. Chronic, persistent pain acts as an additional stressor for a person already suffering from many psychological, social and medical stressors.

Coping: What It Really Means
People sometimes mistakenly believe that “coping” with cancer simply means living with a problem, whether you like it or not, but coping actually means finding ways to adapt to a diagnosis. You can’t control the fact that you or a loved one has cancer, but you can manage how you respond and live with cancer.

What Is Coping? Coping is…
• Managing and understanding what you need to improve your situation
• Making efforts to bring your problems under control

* Doctoral Research Scholar, PG & Research Department of Social Work, Bishop Heber College, Tiruchirappalli.
** Associate Professor & Head, PG & Research Department of Social Work, Bishop Heber College, Tiruchirappalli.
Counseling to Better Cope with a Cancer Diagnosis

Oncology social workers can help you find ways to cope with the stress of a cancer diagnosis. They can provide guidance and help you and your loved one through the experience of living with cancer. Seeking professional counseling is a strength and a good way to help you cope when you are feeling overwhelmed and attempting to adjust to a cancer diagnosis. Face-to-face or telephone counseling provides a safe space to share and examine situations that you may discover yourself challenged by.

Learning with treatment

One of the biggest challenges for people with cancer is sorting through treatment options. As a science of treating cancer has advanced, researchers have developed better and more effective treatment. One of the reasons why making choices can often be overwhelming and confusing is the vast amount of information that is available. It is better to talk your oncological social worker and your doctor regarding the various treatment methods available and the best one for your condition.

Finding financial help

Living with cancer can be expensive. Some people may have no health insurance others may be insured but don’t have coverage for aspects of their treatment, such as prescription drug co-pays. Many people do not have the needed income to meet new costs such as child care or transportation to treatment. People with cancer and the caregivers often have to cut back on time spent at work. Which often affects their income at the same time that their bills are building up.

Financial stress often causes emotional stress. When a family is under financial pressures, it can create feelings of worry. Sadness and anxiety. Because cancer treatment often means years of medical care, financial concerns can influence major life decision about work, housing and school. There is assistance available and care can help you navigate the maze of government, nonprofit and co-pay assistance programs, as well as other sources of financial help. Here are some of the things you can do.

Coping with the Emotional Impact

The word “you have cancer” can be frightening and overwhelming. Some people experience feeling of helpless and hopelessness and question whether they know how to deal with these feelings. At times, people may be reluctant to talk to their doctor about their concerns because they do not want to distract him or her from the primary goal of treatment.

Emotional needs vary from person to person, depending on age, closeness to family, access to medical care and other factors. Younger people may experience more confusion over having cancer at an age when the actual feel invincible and none of their friends are ill. On the other hand, an older person may have fewer family members to rely on who can help care for his or her medical needs.

No matter what our stage in life cancer takes an emotional toll on the person diagnosed, as well as everyone close to that person. Its important to remember that everyone experiences some kind of sadness, helplessness when confronted with cancer and that many people learn to cope and adapt to the emotional impact of cancer. To help you cope more effectively while undergoing treatment.

You may feel like life as you knew it has been disrupted by the diagnosis of breast cancer and that you have lost a sense of who you are. It not uncommon for people to feel their body has let them down or that they need to exert some control over their lives at a time when they feel unsure about the future and changes in their body. During this time, you experience a number of emotions such as anger, fear, shock and disbelief.

Feeling you have lost your identity at times can affect a number of areas of your life. Finding it difficult to work and maintain relationship can add to the feeling of loss you are experiencing.

Your sexuality and how attractive you feel may also have been affected by breast surgery or menopausal symptoms caused by treatment.

Keep track of your feelings

Many people find it helpful to keep a journal or record their emotions through photography, drawing, painting, music or other forms of expression.

Share your feeling with people close to you

Sometimes caregivers and people with cancer feel as if they are “burden” to their loved ones by “complaining “their problems. Remember that you are entitled to every emotion you have. Don’t be afraid to share these emotions with the people close to you.
Seek individual counseling with a professional
You may feel that the diagnosis is yours alone to cope with and perhaps feel the need to isolate yourself from others. Oncology social workers, psychologists and psychiatric help you sort through your many complex emotions. Counselling provides free individual counseling to people with cancer and caregivers across the country.
Join a support group
Support groups provide an environment where someone affected by cancer does not have to explain what he or she is going through because other group members will understand in addition to lessening one’s sense of isolation. Support groups can be a source of valuable information and coping skills can be highly rewarding. Whether on the giving or the receiving end of the transaction. This care provides free, professionally led support groups over the telephone, online and face to face.
Tell your doctor and nurse about your feeling
Health care professional understand that patients are concerned about good quality of life as they go through treatment. Sometimes people benefit from a referral for counseling or treatment for anxiety or depression.

2. Conclusion
Having breast cancer affects you in many different ways. For example, treatments may change the way you look and how you feel about yourself and your body. The demands of treatment may also affect your personal relationships or make it difficult to manage your usual activities and responsibilities. Fortunately, these are challenges you do not have to face alone. Your team of doctors, nurses and social workers are valuable sources of support as you cope with a cancer diagnosis. Oncology social workers are licensed professionals who counsel people affected by cancer, providing emotional support and helping people access practical assistance. In addition, you will build a personal support network during this time which may be comprised of family and friends. In doing so, it’s best to take some time to think about the people in your life and how they are best suited to help. It can be helpful to designate certain responsibilities and roles to family and friends. Identify family strengths and match the task to those strengths—for instance, ask a family member who loves to shop to pick up something for you at the store, or you could ask a friend who’s a good listener to come over for a chat.

Reference

Website
A Study to Assess the Coping Strategies and Problems Faced By Wives of Alcoholics at Pollachi Taluk, Coimbatore District

B. Shankar Anandh*
Dr. G. Anbuselvi**

Abstract
Alcoholism is a significant problem in India. There is a vast body of literature in India and in the west devoted to understanding the marital dynamics involved in alcoholism and ascertaining the deleterious impact that alcoholism could have on the personality and function of spouse. Alcohol is banned in some parts of India such as Manipur and Gujarat, but it is legally consumed in the majority of states. There are believed to be 62.5 million people in India who at least occasionally drink alcohol. In 2012, about 3.3 million deaths, or 5.9% of all global deaths, were attributable to alcohol consumption. In 2012 139 million DALYs (disability-adjusted life years), or 5.1% of the global burden of disease and injury, were attributable to alcohol consumption. Family is a more or less durable association of husband and wife with or without children. Alcohol abuse is one of the major factors contributing to instability in family. There is a lack of mutual trust. Alcoholism puts strains on marriage. Long-term alcohol abuse can have dangerous physical and emotional effects. Alcoholism is a family disease because it affects the family as a whole and each member individually. Living with alcohol abuse means being in an unsafe environment filled with disruptions to normal routines, the tension of strained relationships and dishonesty.

Keywords: Alcoholism; Family; Consumption; Coping strategies; wives of alcoholics

1. Introduction
The word alcohol comes from the Arabic “Al kohl”, which Means “the essence. According to American medical association,” alcoholism is an illness characterized by significant impairment that is directly associated with persistent and excessive use of alcohol. Impairment may involve physiological, psychological or social dysfunction. Psychologically speaking, alcoholism has less to do with “how much” someone is drinking, and more to do with what happens when they drink. Alcohol-related harm is determined by the volume of alcohol consumed, the pattern of drinking, and, on rare occasions, the quality of alcohol consumed. The harmful use of alcohol is a component cause of more than 200 disease and injury conditions in individuals, most notably alcohol dependence, liver cirrhosis, cancers and injuries. The latest causal relationships suggested by research are those between harmful use of alcohol and infectious diseases such as tuberculosis and HIV/AIDS. A wide range of global, regional and national policies and actions are in place to reduce the harmful use of alcohol.

Alcohol is a psychoactive substance with dependence-producing properties. As described in this report, consumption of alcohol and problems related to alcohol vary widely around the world, but the burden of disease and death remains significant in most countries. The harmful use of alcohol ranks among the top five risk factors for disease, disability and death throughout the world (WHO, 2011a; Lim et al., 2012). The World Health Organization estimated that there are about 2 billion people worldwide who consume alcoholic beverages and 76.3 million with diagnosable alcohol use disorder. In India 62.5 million peoples were estimated to be alcohol users with per capita consumption of alcohol had increased by 106.7% over the fifteen year period from 1970 to 1996. The sale of alcohol in India has been steadily growing at 6% and is estimated to grow at the rate of 8% per year. During the last few decades the mean age of initiation of alcohol use has decreased from 23.6 years to 19.45 years indicating that peoples are drinking alcohol at an earlier age than previously.

The World Health Organisation uses the term "alcohol dependence syndrome" rather than alcoholism. The concept of "harmful use" (as opposed to "abuse") was introduced in 1992's ICD-10 to minimize underreporting of damage in the absence of dependence. The term "alcoholism" was removed from ICD between ICD-8/ICDA-8 and ICD-9. In an interview with Eureka College professor, Dr. Kaiser, she said that alcoholism is based on the social-cultural environment students are placed in. With the changes students are going through, adjusting to college life, they

**Associate Professor, PG & Research Department of Social Work, SreeSaraswathiThyagaraja College, Pollachi-642107.
want to fit in and form friendships. This combined with the freer environment and easy access to alcohol led some students into alcoholism. Other factors that play a role in drinking problems are where students live, the characteristics of the schools, pre-established drinking patterns, and genetics. The campus itself plays a major factor in whether or not the students are susceptible to alcoholism. Schools that are majorly based on sororities, fraternities, or sports are more likely to have high rates of drinking problems.

What is alcoholism?

The most widely accepted definition of alcoholism is the one offered by Keller and Mark. Alcoholism is a chronic illness, psychic, somatic or psychosomatic, which manifests itself as a disorder of behavior. It is characterized by the repeated of alcoholic beverages to an extent that exceeds customary, dietary use or compliance with the social customs of the community and that interferes with the drinker’s health or the social or economic Functioning. Alcohol dependency may be physical or psychological.

Stages of alcoholism

➢ Stage 1- Abuse
   Typically, alcoholism begins with social drinking in an attempt to relax. Over time, a physical and psychological dependence on alcohol to manage stress develops. At this point a person begins to drink and become intoxicated regularly.

➢ Stage 2- Dependence
   The person reaches a point where he or she cannot stop drinking and is physically dependent on the drug. Alcohol becomes the person’s central focus. The drinker makes excuses and blames others for problems. The drinker tries to hide the problem.

➢ Stage 3- Addiction
   Drinking is the most important thing in a person’s life. The person is addicted to the drug and their life is out of control, although frequently they do not acknowledge this fact. Because liver damage is common at this stage, less alcohol may be required to produce.

Alcoholism Affects Marriage Bond

As alcohol abuse or addiction progresses, the non-drinking spouse often grows into a compulsive care-taking role, which creates feelings of resentment, self-pity and exhaustion. The marriage suffers from:

● Poor spousal communication
● Increased anger and distress
● Reduced intimacy and sexual desire
● Increased marital abuse

View of authors

Arindam Kanta Banerjee et al., (2015) conducted a study on psycho-social problems and coping of women with alcoholic spouses in rural Malawi area, dist. Ludhiana, Punjab. The objectives of this study were: 1. to assess the psychosocial problem of women with alcoholic spouse 2. To assess the coping of women with alcoholic spouse 3. To find the relationship between the psychosocial problem and coping of women with alcoholic spouse 4. To find the relationship of psychosocial problems with the selected variables. i.e. age, education, family income per month, occupation, type of family, duration of addiction of spouse, religion, duration of marriage, number of children 5. To find the relationship of coping with selected variables. i.e. age, education, family income per month, occupation, type of family, duration of addiction of spouse, religion, duration of marriage, number of children. The conceptual framework is based on Roy’s adaptation model. An exploratory approach and non-experimental research design was used for the study. Purposive sampling technique was used and 60 women with alcoholic husbands were interviewed. The independent variables were age, education, family income per month, occupation, type of family, duration of addiction of spouse, religion, duration of marriage and number of children. The dependent variables were psychosocial problem and coping of women with alcoholic spouse. The study found that majority of women had physiological problems [13.13%] followed by psychological problems [12.79%] and psycho-social problems [7.40%]. While 6.6% women had financial problems, only 3.92% stated that they have sexual problems. 71.1% women had adoptive and 28.3% showed mal-adoptive coping. Age, education, vocation, economic status, family type, religion, duration of
marriage, duration of addiction and number of children had no impact on psycho-social problems. Among these variables, only age and duration of addiction had impacted coping strategy of women.

LakshmanaGovindappa and Pankajakshi (2014) conducted a community study on violence among wives of alcoholics. The objectives of the study were to study the socio demographic details and different kinds of violence among wives of alcoholics. The study was followed by Descriptive Design and the sample size was 50. Sampling Technique used was cluster sampling. The mean age of the respondents were 33.4 years, majority of the respondents (92%) were educated up to 10th standard, 74% were house wives, 88% were currently living with husband and children, 90% were belongs to nuclear family, the mean marital years of respondents was 12.9 years 36% of the respondents belong 31-40 years. Violence experienced by the respondents show that 88%, 92%, 86% and 74% has moderate level of physical, emotional, intellectual and economic violence respectively.

2. Research Methodology

Statement of the problem

The study of global burden of disease identified alcohol use as the one of the global risk factors accounting for 1.5% of all deaths in the world and 3.5% of disability adjusted life years and 4.0% of global burden of disease (JargenRehm, et al., 2004). The second national family survey (1988-1999) results indicate that among the Indian population, 17% of men, 2% of women and aged 15% above are consuming alcohol. The wife of an alcoholic faces tough life situations, and also experience psychological problems due to the alcoholic behavior of the husband. It may affects in the physical, emotional, social, and economical state of the wife and family as a whole. So this study was designed to analysis the coping strategies and problem faced by wives of alcoholics.

Objective of the Study

The following objectives are framed for the present study:
1. To understand the socio-demographic profile of the respondents.
2. To identify and access the Engaged coping strategies among wives of alcoholics.
3. To identify and access the tolerant coping strategies among wives of alcoholics.
4. To identify and access the withdrawal coping strategies among wives of alcoholics.
5. To assess the level of emotional and Health related problems faced by wives of alcoholics.
6. To assess the social, financial and physical problems faced by wives of alcoholic dependents.

Universe for the present study is wives of alcoholics in Pollachi Taluk of Coimbatore district. As per data released by Govt. of India for Census 2011, Pollachi is an Urban Agglomeration coming under category of Class I UAs/Towns. The Pollachi UA region is situated in state of Tamil Nadu. The total population of Pollachi UA/Metropolitan region is 135,333. The male population of which is 67,285 while female population is 68,048. The universe for the present study is floating in nature, they can’t be predicted scientifically. Therefore the researcher decided snow ball sampling method to select the sample for the present study. Sample is a group of elements selected from a large, well-defined pool of elements. A sample is a subset of population.

In social science and statistics research, snowball sampling (or chain sampling, chain-referral sampling, referral sampling) is a non probability sampling technique where existing study subjects recruit future subjects from among their acquaintances. Thus the sample group is said to grow like a rolling snowball.

Snowball sampling is a non-probability sampling method. It doesn’t have the probability involved, with say, simple random sampling (where the odds are the same for any particular participant being chosen). Rather, the researchers used their own judgment to choose participants. Snowball sampling consists of two steps:
1. Identify potential subjects in the population. Often, only one or two subjects can be found initially. The first wife of alcoholic was referred by Naveen De-addiction centre in Coimbatore.
2. The remaining sample of the respondents was referred by first sample who was identified as wife of alcoholic. Ask those subjects to recruit other respondents and then ask those respondents to recruit. Participants should be made aware that they do not have to provide any other names.

The sample size for the present study is 120 wives of alcoholics in Pollachi Taluk, Coimbatore District. They were selected through non-probability sampling methods by making use of snow balling sampling techniques. The data were analyzed using SPSS 23.

3. Results & Discussions

 Majority (71.7 percent) of the respondents are belongs to the age group of 26-40 years.
Nearly half (41.7 percent) of the respondents are illiterate.
Nearly half (48.3 percent) of the respondents are daily wages.
More than half (53.3 percent) of the respondents belong to the income level of <5000 rupees.
Half (50 percent) of the respondent’s husband belongs to the age group of above 41 years.
Nearly half (40 percent) of the respondent’s husband belongs to the education level of SSLC.

Table 1. ‘T’ Test between the Type of Family of the Respondents and Perception towards Various Dimensions of Problem Faced

<table>
<thead>
<tr>
<th>Dimensions of Problem</th>
<th>Type of Family</th>
<th>N</th>
<th>Mean</th>
<th>Std. Deviation</th>
<th>Statistical Inference</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Nuclear</td>
<td>80</td>
<td>11.350</td>
<td>2.82434</td>
<td>Z= 2.813 P&lt;0.01 Significant</td>
</tr>
<tr>
<td></td>
<td>Joint</td>
<td>40</td>
<td>9.250</td>
<td>2.51050</td>
<td></td>
</tr>
<tr>
<td>Emotional problem</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Health related problem</td>
<td>Nuclear</td>
<td>80</td>
<td>5.550</td>
<td>1.75339</td>
<td>Z= -1.040 P&gt;0.05 Not Significant</td>
</tr>
<tr>
<td></td>
<td>Joint</td>
<td>40</td>
<td>6.050</td>
<td>1.76143</td>
<td></td>
</tr>
<tr>
<td>Social problem</td>
<td>Nuclear</td>
<td>80</td>
<td>9.275</td>
<td>2.43887</td>
<td>Z= 1.359 P&gt;0.05 Not Significant</td>
</tr>
<tr>
<td></td>
<td>Joint</td>
<td>40</td>
<td>8.300</td>
<td>2.95760</td>
<td></td>
</tr>
<tr>
<td>Financial problem</td>
<td>Nuclear</td>
<td>80</td>
<td>4.650</td>
<td>1.07537</td>
<td>Z= 0.311 P&gt;0.05 Not Significant</td>
</tr>
<tr>
<td></td>
<td>Joint</td>
<td>40</td>
<td>4.550</td>
<td>1.35627</td>
<td></td>
</tr>
<tr>
<td>Physical problem</td>
<td>Nuclear</td>
<td>80</td>
<td>11.000</td>
<td>4.09503</td>
<td>Z= 3.260 P&lt;0.01 Significant</td>
</tr>
<tr>
<td></td>
<td>Joint</td>
<td>40</td>
<td>7.950</td>
<td>1.09904</td>
<td></td>
</tr>
<tr>
<td>Over all problem</td>
<td>Nuclear</td>
<td>80</td>
<td>41.825</td>
<td>8.30782</td>
<td>Z= 2.892 P&lt;0.01 Significant</td>
</tr>
<tr>
<td></td>
<td>Joint</td>
<td>40</td>
<td>36.100</td>
<td>4.21651</td>
<td></td>
</tr>
</tbody>
</table>

1. H₀=There is a significant difference between the types of family of the respondent and overall level of problem faced by wives of alcoholics.
2. H₀=There is no significant difference between the types of family of the respondent and overall level of problem faced by wives of alcoholics.

The table inferred that there is no significant difference between the type of family of the respondents and various dimensions of problems of respondent such as health-related problem, social problem, and financial problem faced. However there is significant difference between the type of family of the respondents and various dimensions of problems of respondent such as emotional problem, physical problem and overall level of problem faced by wives of alcoholics. It is seen from table that the calculated value (Z=2.892) is greater than the table value (Z=1.4303). Therefore type of family of the respondents has influence the level of perception towards problem faced by wives of alcoholics.

Table 2. Association between the Years of Marriage and Perception towards Various Dimensions of coping strategies

<table>
<thead>
<tr>
<th>Year of Marriage</th>
<th>Dimensions of Coping</th>
<th>Statistical Inference</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Low</td>
<td>High</td>
</tr>
<tr>
<td>Engaged coping</td>
<td>n=64</td>
<td>n=56</td>
</tr>
<tr>
<td>Below 10 years</td>
<td>24</td>
<td>22</td>
</tr>
</tbody>
</table>
The table inferred that there is no significant difference between the year of married of the respondents and various dimensions of coping of respondent such as engaged coping and tolerant coping, withdrawal coping, and overall level of coping strategies of wives of alcoholics. It is seen from table that the calculated value (χ² = 0.165) is less than the table value (χ² = 5.99). Therefore year of married of the respondents has not influence the level of perception towards coping strategies of wives of alcoholics.

Table 3. One Way Analysis of Variance among Alcohol Intake of the Respondents and Perception towards Dimension of Problem Faced by Wives of Alcohol Dependents

<table>
<thead>
<tr>
<th>Source</th>
<th>Df</th>
<th>SS</th>
<th>MS</th>
<th>F</th>
<th>df</th>
<th>P</th>
<th>Statistical Inference</th>
</tr>
</thead>
<tbody>
<tr>
<td>Emotional problem</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Between groups</td>
<td>2</td>
<td>82.297</td>
<td>41.148</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Within groups</td>
<td>117</td>
<td>407.353</td>
<td>7.147</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Health related problem</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Between groups</td>
<td>2</td>
<td>20.180</td>
<td>10.090</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Within groups</td>
<td>117</td>
<td>162.003</td>
<td>2.842</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Social problem</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Between groups</td>
<td>2</td>
<td>16.937</td>
<td>8.468</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Within groups</td>
<td>117</td>
<td>393.913</td>
<td>6.911</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>financial problem</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Between groups</td>
<td>2</td>
<td>6.313</td>
<td>3.157</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Within groups</td>
<td>117</td>
<td>73.870</td>
<td>1.296</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Physical problem</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Between groups</td>
<td>2</td>
<td>82.670</td>
<td>41.335</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Within groups</td>
<td>117</td>
<td>718.313</td>
<td>12.602</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
The table (4.27) proved that there is a significant variance among the alcohol intake of the respondents and various dimensions of emotional problem, health-related problem, social problem faced. However the table proved that there is no significant variance among the alcohol intake of the respondents and various dimensions of financial problem, and overall level of problem faced by wives of alcoholics.

It is seen from table that the calculated value (5.815) is less than the table value (3.16). Therefore the opinion of alcohol intake of the respondents has not influence the level of perception towards problem faced by wives of alcoholics.

4. Suggestions and Conclusion
Suggestions

- Though the wives of alcoholics faces problem they are not aware of the act laid and schemes provided by the government. Awareness should be provided on Act such as domestic violent act, women harassment act etc.,
- Skill Development program may provided for the wives of alcoholics which help them to empower economically, psychically and psychologically.
- Awareness should be provided to the common public on related problems.
- Though Addiction is not a behavioral problem rather it is a disease Government should open the rehabilitation centers through primary health centers and take an active part in eradication of shops in the state.
- Family counselling centers can be opened by the government to assist the public.
- A group like alcoholic anonymous can be fabricated for wives of alcoholics to overcome their stressful situations.
- Social work agencies may provide support to empower women through various means which may improve the status of wives of alcoholics.
- Create awareness to the school children about alcohol, rural and urban community.
- Social media can play a vital role in spreading information regarding violence among women.
- Initiatives can be made by government to develop confidence & coping level to the person who are facing such issues to meet their Psycho-Social needs with the help of Social Work interventions like therapies, counseling etc.
- Research can made further to encounter the problem and to have a healthy society.

Conclusion
The study on coping strategies and problem faced by wives of alcoholics was taken in PollachiTaluk, Coimbatore district. Alcoholic husband are having alcohol related disease like liver diseases, mental problem, insomnia, swelling of organs, Irritability, blood pressure, anxiety, tension, chronic disease so on. Hence alcoholism has to be cure and it should be eradicate form the society and there are some research problem consciences to the topic. The problem faced by the wives of alcohol range from physical to emotional to social domains. The prevalence of violence the alcohol wives is an important social problem. The wives of alcohol clients might employee various coping strategies to curb the ill effect of their partner thinking. While some strategies have more positive outcomes then other yet individual difference exits. The researcher found an encouraging number of alcoholics, who had regularly come for treatment from various places in and around Pollachi. The study has significant found relationship that husband’s alcoholism affects in wife.
References

37. www.alkuhul.com
38. www.chsspd.com
39. www.general-hospital-psychiatry.com
40. www.google.com
41. www.ndarc.med.unsw.edu.au
42. www.wikipediaalcoholwives.com
Self Esteem: A Study on Observation Home Children

A. Mohamed Yasir Arafath*
Dr. J. O. Jeryda Gnanajane Eljo**

Abstract
Children are our most valuable resource of a nation. The legal definition of child generally refers to a minor, otherwise known as a person younger than the age of maturity. According to UNCRC, “a child means those who are below the age of 18 years”. Generally children are innocent and he/she can be nurtured with tender care and attention. They should be grown in positive outlook with physical, mental, moral and spiritual development which makes them capable of realizing his/her fullest potential by the way In this light of the above statements the research study mainly focus on observation home children and their self-esteem during their staying period in the respective homes. Observation Home is a temporary reception of any juvenile in conflict with law during the pendency of any inquiry. In the year 1484, William Coxtion used the word delinquent to describe a child who has committed mistake which is against the law and which is not accepted by the society. Thus a “juvenile” or “child” means a person who has not completed eighteenth years of age and violates the law and commits an offence under the legal age of maturity. In the modern era reports shows that there is rise of children committing delinquent activities under the age of 18 years. The children staying in Observation may do have lots of socially unacceptable behaviours, behavioural and conduct problems which are directly link with their self-esteem. They would have also developed also Insecurity feelings, depression, Anxiety. So observation homes will be a therapeutic centre for their transition. The aim of the study is to find out how the observation homes play a significant role in the area of boosting the children self-esteem aspect. This quantitative study used standardized self-esteem scale and adopted descriptive method to describe the nature of the study of observation home children. The study concentrates on observation home children as how the observation homes brings a change in the self-esteem aspect.

Key variables: Observation Home Children; Observation Home; Self Esteem.

1. Introduction
The children in conflict with law are stigmatized and alienated not only by society but often by their own families, and are therefore prone to psychological and physical menace, particularly given that they are still in their growing years. They are entitled to special services in the ‘special home’ under this act, precisely so that can be provided ‘treatment’ care, and rehabilitation services’ that will enable them to re-integrate into the society. Failure to ensure reform and rehabilitation at this vulnerable stage of their life could result in getting sucked into a vicious cycle of crime. Therefore, it is an essential matter of concern to discuss about the issue of crime among children.

Azad India foundation (2014) Indian scenario: even though there are many provision and policies for the care, protection and development of children in our country, there are many children who are entangle in a number of anti-social activities, crime, petty cases, etc. these children alleged to have committed an offence and below the age of 18, were termed as ‘children in conflict with law’ the Juvenile Justice Board (JJB)

NCRB (2013) the national crime records bureau data bears testimony to the fact that crimes by juveniles range between 1% and 1.2 % of the total number of crimes. Over the years, there is an increased concern on the number of crimes committed by juveniles. In the year 2012, the IPC crimes report was 27,936 whereas in 2003 it was 31,752 cases, i.e. 13.6% increase compared to the previous year. Crimes under the categories of ‘assault on women ’with ’intent to outrage her modesty’

Child line (2014) In India, the highest percentage of children committing crimes are in they are category of 16-18 (66.6%) followed by the age category 12-16 (31.0%) and 7-12 (2.4%). The ratio of girls to boy arrested for committing IPC crimes was nearly 4:96 during 2013, whereas the ratio during 2012 was nearly 5:5 indicating a decline of female children. the 51.% of children in conflict with law had no education or had education up to primary level only. Children living with parents/guardians accounted for 81.0)% of the total juveniles arrested

2. Research Methodology

*Research Scholar in Social Work, Bharathidasan University, Trichy.
** Assistant Professor in Social Work, Bharathidasan University, Trichy
The objective of the study are to study socio economic profile of the children in observation home and to know their Level of self-esteem of Children in Observation Home. Descriptive research design was adopted to describe the self-esteem of the children in observation homes. The study consisted of 50 children in observation home. Simple random sampling method as used to select the sample and the children ranged between 13 – 18 years. Self-Esteem standardized Scale developed by Rosenberg (1965) the tool comprises of 10 items with uni-dimensional, 4 point rating scale range from strongly agree to strongly disagree. Higher scores indicate higher self-esteem. Procedure employed: The tools were administered on the sample of 50 children. The data collection was done in single session. Before administrating the scale with the respondents, rapport was established with the children. The children were briefed about the study and then the researcher administered self-esteem scale and they were given instruction for answering as prescribed in the manual. The self-esteem score were recorded on master sheet and fed to the computer using SPSS software. Further, the following statistical test were applied.

3. Analysis and Results

Findings related to Socio demographic details are:-

- Majority of the respondents(86%) are belong to 15-16yrs of the age group
- Majority of the respondents(80%) are belong to Hindu religion
- Exactly half of the respondents(50%) are belong to Schedule caste community
- More than half of the respondents (58%) are studied up to middle school
- Majority of the respondents (78%) are have studied government school
- Majority of the respondents (66%) both the parents are alive
- More than half of the respondents (52%) belong in urban
- More than half of the respondents (56%) belong in joint family

Findings related to level of self-esteem

- Classification of level is self-esteem reveals that more than half of the respondents (54%) are in low level of self-esteem, while (36%) of the respondents are in moderate level self-esteem and (10%) of them are in high level self esteem

Table 1. Z - test for independent variables and dependent variables

<table>
<thead>
<tr>
<th>Independent Variables</th>
<th>Self esteem</th>
<th></th>
<th></th>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Mean</td>
<td>SD</td>
<td>df</td>
<td>t value</td>
<td>stat. result</td>
</tr>
<tr>
<td>Type of school</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Govt.(39)</td>
<td>20.28</td>
<td>4.58</td>
<td>48</td>
<td>0.118</td>
<td>0.747 (NS)</td>
</tr>
<tr>
<td>Private(11)</td>
<td>20.09</td>
<td>5.31</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Domicile</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Rural(24)</td>
<td>21.33</td>
<td>3.31</td>
<td>48</td>
<td>1.607</td>
<td>0.009 ($)</td>
</tr>
<tr>
<td>Urban(26)</td>
<td>19.23</td>
<td>5.55</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Type of family</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Joint(29)</td>
<td>20.21</td>
<td>4.515</td>
<td>48</td>
<td>-0.058</td>
<td>0.625 (NS)</td>
</tr>
<tr>
<td>Nuclear(21)</td>
<td>20.29</td>
<td>5.051</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Note: Tested 0.05 level

Hypothesis

- There is no significant difference between independent variables such as type of family, Domicile Type of family and Self-esteem of the observation home children
- Above table reveled that there is no significant difference between type of school and the observation home children self-esteem (Null Hypothesis Accepted)
- There is significant difference between domicile and the observation home children self-esteem (Null hypothesis Rejected)
- There is no significant difference between type of family and the observation home children self-esteem. (Null Hypothesis Accepted)
4. Discussion and Conclusion

Discussion: From the table envisage that children in the 15-16 years of age group are prone to include themselves become juvenile delinquency. Majority of the respondents belongs to schedule caste that due to excluding from the community, poverty lack of education and unemployment. More than half of the respondents (58%) are studied upto middle school, where the period children are influence by peer group in commit petty crimes. Majority of them studied in government school that shows poor economic background of the children. Majority of them from urban children are having more prone to delinquent behaviours

Conclusion: The researcher would like to conclude that observation homes provide good support to the inmates and rehabilitate them from the delinquent behaviour. Civil societies organizations are empowered to play a constructive role in enhance the positive attitudes among the children. So the joint efforts by the state, civil society and the family can help to ensure that these children can be re-integrated into the community with dignity and support to make a constructive contribution to society, so that they are prevented from re-entering into delinquent behaviours.

References
Sustainable Urbanization: Issues and Challenges for Effective Urban Governance

V. Kalyani*  
Dr. K. R. Murugan**

Abstract
This paper starts with the evolution of urbanization from the pre-industrial revolution to the issues and challenges for effective sustainable development in governance. It elaborates on the sustainability of urbanization issues challenges followed by a review of the recent concepts with an objective to get closer to partially identifying the balance that sustainable development may achieve. It concludes with the following contemporary sustainable development challenges: The implications of this developmental challenge in many developing states are diverse socio-economic, cultural and environmental problems. Addressing these urban developmental challenges requires effective and good governance. The main concern of this paper therefore is to examine this developmental issue in order to provide a rationale for good governance in the management and utilization of existing resources for sustainable urban growth. This paper addresses four main areas: the first considers basic issues relating to sustainable development and governance; the second discusses the challenge of urbanization; while the third the needs for effective governance in sustainable development for urbanization. This paper covers three major objectives which are related to ensuring good governance. Finally this Paper concluded to appropriate policies and strategies importance to the achievement of sustainable development must be put in place in order to preserve our cities and also secure the future well-being of its citizens.

Keywords: Urbanization; Sustainability; Development; Urban governance; Challenges.

1. Introduction
Sustainable Urbanization is a global trend that plays a significant role in determining the degree of socio-political and economic transformation of modern societies and their spatial impact. The past of urbanisation dates as far back as 1880s with the growth of state, the expansion of sustainable development being an early example of uncontrollable urbanization. Its estimated that up to 60 % of the Indian population will be living in cities by the year 2050, and the developing countries experiencing speedy urbanisation within the estimated period of year 2050. The most developing Fields like farms and forest are replaced by stones, bricks concrete and asphalt. Cities are characterised by large concentration of people, vehicles, buildings and other forms of modern artefacts. In the same sense, the United Nations Secretariat (1970) noted that urbanisation is perhaps, the best symbol of the radical, physical, economic and social transformation that mankind is passing through as a consequence of development. (Duru and Ogbonnaya; 2012).

The rapid growth of urbanisation has necessitated a new form of power relations between the different levels of government with strong coordination and cooperation required for effective city governance. For example to highlight the role of governance in urban development engineering, the German Government, ministry of cooperation and development in collaboration with UN Habitat implemented a project tagged "sustainable Development of Metropolitan Region". The agency developed action-oriented advisory services on the role of metropolitan regions as sustainable development facilitators. At the end, participants: UN Habitat and GIZ agreed that effective metropolitan governance is a pre-requisite for transformative development considering its socio-political, economic and environmental impact. They therefore concluded that effective urban governance requires a joint action and coordination between administration and different stakeholders.

In addition to initiating and implement social welfare programs for urban dwellers, urban governance is expected to create occupation opportunities for sustainable livelihood, establish a functional and well laid out housing settlements for different income earners, and to ensure healthy surroundings, to maintained peace and order to create
and secure the life and property of urban dwellers can moderate sustain urban development trough globalization. Against this background, this paper will focus on three key issues which include: the rational for urban governance, institutional framework for effective urban governance and issue and challenges of urban governance which will include the suggested policy framework to improve the efficacy of urban administration.

Clarification of concepts

Challenge

The word ‘challenge’ as used in this chapter refers to circumstances that require a lot of ability, power and purpose to deal with or achievement. The issues could be understood to mean an important issue or difficulty for day to day debates and discussion which could eventually become a challenge.

Urban

Urban is a term that describes a huge cities. It is viewed as an area with a large number of people residing in It., areas that has been considerably developed, or an area where the distance between buildings is very small. Urban is used in contrast to rural which generally indicates a low population, often agricultural based on the areas.

Urbanization

Urbanization as used in this paper to describe the process by which cities grow or by which societies become more urban. It also means the process by which more and more people leave the countryside to leave in cities.

Governance

Generally governance involves establishment of policies, and continuous monitoring of their proper implementation, by the members of the governing body of an organization. It includes the mechanism required to balance the powers of the members with the associated accountability, and their primary duty of enhancing the prosperity and viability of the organisation. (Business Dictionary).

Machiavelli (2003) viewed governance as a broader term than government when he pointed out that government is one of the institutions involved in governance. He gave a wider perspective of governance as the various ways through which social life is co-ordinated. He noted that the principal modes of governance are market, hierarchies and network. In its wider usage, governance reflects a blurring of the state from the society resulting from changes such as development of new forms of public management; the growth of public/private partnership, the increasing importance of policy network and the greater impact of multi-level government. While some scholars associate governance with a shift away from command and control mechanism, to a reliance on consultation, others argue that it implies preference for 'less government' and a 'free market. (Heywood A. 2002).

Urban Governance

Urban governance refers to an enabling environment which requires adequate legal framework, efficient political, managerial and administrative processes put in place to enable local governments respond to the needs of the citizens. It can thus be defined as the many ways the institutions and the individuals organise the day to day management of a city, and the process used for effectively realising the short term agenda for the development of a city. UN Habitat (2012) describes urban governance as the “software that enables the urban hardware to function”. Effective urban governance is therefore characterised by democratic and inclusive, long term and integrated, multi-scale, multi-level, territorial, proficient and conscious of digital age.

Theoretical underpinning of urban governance

Urban governance can be explained and understood from the point of view of Assessment Network model. Irazebel (2004) explain about that the many American and Latin American cities, urban governance and planning are either in urgent need for reforms or are undergoing some reforms. However, the inability of some cities to develop their civil capacity has hampered the implementation of reforms ie, the capacity to build and maintain broad social and political multi-sectoral coalition in pursuit of common goals. Thus, because of varying political and socio-cultural dilemma in time and space, it became logical for urban governance analyst to develop different models that attempt to interpret and provide normative guideline for such complex process within geopolitical and socio-cultural orientations.

The very important feature peculiar to third world countries is that while ordinarily, often involves actors with sharply unequal resources, there is likely more changes to avoid direct test of strength with an unequal competitor in the third world countries largely due to the following:
i. lesser emphasis on importance of rigid hierarchies and authority relations among actors in the less developed countries

ii. Shifting and multiple identities

iii. More open-ended character of cognitive politics

These features can be achieved through appropriate legislation, but a full realization will largely depend on changing values, norms and beliefs; implying changing tradition and producing new issue and contests among citizens, government and planning officials. This may call for enactment of new legislations and laws. The new experience of participatory urban planning are supported by new enabling legal framework made possible by the struggle of social movement agitating for democratization of government at the local level.

Why is Urban Governance Necessary

Historically, local governments operate within defined jurisdictional boundaries, but urbanization often changes the character of an area over time. Urban areas usually include a number of independent local government jurisdictions. Thus, an urban area may emerge through an outbound growth of a city or through a gradual expansion and integration of various settlements which form an independent agglomerated metropolitan area overtime. As cities emerge and grow, the need for metropolitan level management increases. Metropolitan regions usually need a form of institutional arrangement, formal or informal ones to coordinate their development through a joint effort for more efficient and equitable service provision and delivery; and cost sharing with higher density areas requiring higher coordination. Thus, urban governance becomes indispensible for the following reasons:

1. Fast Growth of Urban Areas

   Developing cities in the state of India experience fast growth of urban centres. Among the developing countries, India is noted as the continent with the highest urban population of about two million or 50% of the total urban population in the world. Although the urban population of less than half a million, which was hitherto lagging behind in the area of urbanisation is on its way to becoming a predominantly urban continent.

2. Dysfunctional Urban Governance

   In many urban centres, cases of struggle, inequality, spillovers and other occurrences of malfunctioning urban management system were rife. More often than not, provision of basic public services (public transport facility, drainage system, sewage collection /disposal, waste management, emergency services etc) are fragmented and not addressed at the appropriate territorial level, resulting in high cost and financing challenges to local governments.

3. Imperative for Cost Saving

   One of the reasons for intercommunity coordination and collaboration is that it usually leads to 'getting more for less' or cost saving. On this, efficiency can be achieved by integrated territorial planning at different scales, and coordinating some forms of service delivery, especially where economies of scale can be achieved. Thus, integrated strategic planning, and linking spatial plans leads to infrastructural development, public finance and long term financial planning necessary to prudent management of resources.

4. Need to Create Sound Governance

   For decades, the Organisation for Economic Corporation for Development Countries has continued to address the issues bothering on metropolitan governance.

The challenges of urban governance in India

In order to provide so far in this write-up leaves no space to overemphasise the importance of urbanization and growth of cities in contemporary societies. However, as Indian cities continue to urbanise, there is proliferation of urban centres through uncontrollable rural-urban drift, and urbanisation through sustainable development. All these urban areas are confronted with myriad of problem issues some of which are highlighted below:

- Inadequate Infrastructure and Malfunctioning of Urban Services
- Environmental and Social Impact of the Economic Activities of the Informal Sector.
- Tension and Conflicts over City Control
- Persistent Unemployment
- Problem of Checking the Activities of Hoodlums
- Regulating Social and Economic Activities of Urban Dwellers
- Achieving a well Planned City
- Lack of Adequate Funding
2. Suggested approaches for effective urban governance in India

- Improved Local Government
- Financial Support Management System
- Effective Multi-level Governance
- A Healthy Pattern of Intergovernmental Fiscal Relations
- Legal and Institutional Framework
- Wider Space for Participation
- Extend Development to Rural Communities

3. Conclusion

This paper has examined the need for effective governance in the realization of sustainable urbanization in India. The paper notes that Urbanization is a global issue and an inevitable phenomenon in India. It observes that the pervasiveness and spontaneity associated with the urban growth process in India has been an issue of concern; as it essentially constitutes serious socio-economic, cultural and environmental challenges to the attainment of sustainable development and effective urban governance. This problem of spontaneous urban growth has been necessitated by the features of globalization, industrialization and population explosion, with its attendant challenges of uncontrolled growth of cities, which has led to a degraded environment and poor living standard of the people. This essentially is the main concern which good and effective governance should promote towards stimulating sustainable growth and secure a qualitative environment that is conducive for the well-being of all Indian.

References

Social Entrepreneurship Interests among Postgraduate Students in Bishop Heber College: A Comparative Analysis among Social Work and Management Studies Trainees

N. S. Jisna Mary*
Dr. B. Arunkumar **

Abstract
Social entrepreneurship is the use of start-up companies and other entrepreneurs to develop, fund, and implement solutions to social, cultural, or environmental issues. Social work is an academic discipline and profession that concern itself with individuals, families, groups, and communities to enhance their social functioning and overall wellbeing. The Master of Business Administration degree originated in the United States in the early 20th century when the country industries and companies sought scientific approaches to management. Entrepreneurial endeavor is common among both social work and management studies students however they vary greatly in the social commitment with which they start the business. They can contribute a lot in the field of society. Hence, the present study focuses on social entrepreneurship interest among the Social Work and Management Studies students in Bishop Heber College adopting Descriptive Research Design. A total of 30 students from each discipline have been selected from the final year Post Graduation by adopting Stratified Disproportionate Random Sampling Method. The authors have used Eleanour Meda Chipeta (2005) 6-point Likert scale to measure social entrepreneurship among them. Salient findings and suggestions pertaining to the study will be discussed in the full paper.

Keywords: Social Entrepreneurship; Business Interest; Social Commitment; Comparative Analysis.

1. Introduction
Social entrepreneurship is, at its most basic level, doing business for a social cause. It might also be referred to as altruistic entrepreneurship. Social entrepreneurs combine social issues in a way that improves the lives of people connected to the cause. They don’t measure their success in terms of profit alone, success to social entrepreneurs means that they have improved the world, however they define that. Beyond that, however, there are differing opinions about what constitutes social entrepreneurship. Some believe the definition applies only to business that make money and work toward improving a designated problem by selling something to consumers. Others say business owners who work to solve a social problem using or government money are also social entrepreneurs.

People are often attracted to businesses that use a social entrepreneurship model because they are helping to solve a social problem when they spend money on something they need or want.

Mathews, Raina, Sapkal & Ray (2012) indicate social enterprises as for-profit organizations that provide services to the society, attempt to solve community problems and improve the social condition of the mass and provide a way for social and financial inclusion of the marginalized people.

Graduates with an MSW are trained to help people cope with and overcome problems in their lives. They are prepared for social work positions in local, state, or national government, as well as non-profit and private organization. A master’s degree is often required for supervisory positions within these organizations and is required to provide therapy, according to the National Association of Social Workers.

The Master of Business Administration is a graduate degree sought by those looking to hone their skills for a business career. Students applying to MBA programs are required to have earned a bachelor’s degree, though not necessarily in a business field. Many MBA students have earned their bachelor’s degree in an unrelated field.

Social entrepreneurship is recognized as a new sector of entrepreneurship in the relatively higher priority to solve social problems, meet the social demands and create social values which have been missed by traditional

* M.Phil Scholar, PG and Research Department of Social Work, Bishop Heber College, Tiruchirappalli
** Assistant Professor, PG and Research Department of Social Work, Bishop Heber College, Tiruchirappalli
entrepreneurship. Social entrepreneurs may act locally, but their actions have potential to stimulate global improvements and global entrepreneurship. Although social entrepreneurship has been an important concept today, there is no clear definition, its boundaries remain fuzzy and there is little discussion of educational methods on it. However, we believe that social entrepreneurship education in university is necessary as entrepreneurship education is important.

Social entrepreneurship is the ability to be an agent of change for various economic, environmental, social and political issues at local and global levels. It is believed that exposure of youth to social entrepreneurial theories and practice in institutes of higher education can impact this change. The students in various universities armed with knowledge and skills that they gained with the support of entrepreneurial culture and environmental while in campus may help them to choose social entrepreneurship as a career option after their formal education.

This study focuses the social entrepreneurship interest among both management studies and Social work students. Because students in these both disciplines getting the social entrepreneurship education. And it is useful to make them an intention in the field of social entrepreneurship this study the researcher focusing the comparative analysis of the social entrepreneurship interest the same. Students in these both disciplines are responsible for social entrepreneurship in their future career. This study is descriptive in nature. This study reveals the Entrepreneurship interest among the students and the factors which influencing the Entrepreneurship interest.

2. Methods

Aim
The overall aim of the study is to compare the Social Entrepreneurship Interests among Postgraduate Social Work and Management Studies Trainees in Bishop Heber College

Objectives
- To understand the socio-demographic characteristics of the students.
- To measure the level of social entrepreneurship interests among the MBA and MSW Students.
- To find out the significance difference of social entrepreneurship among MSW and MBA students in Bishop Heber college.

Research Hypotheses:
1. There is a significant difference of social entrepreneurship between the MSW and MBA students.

Definition of key terms

Conceptual Definitions
a) Social entrepreneurship
Social entrepreneurship is defined as the way of using resources to create benefits for society. (Tracy, 2007)
b) Social work
Social work is that process which deals directly and differentially with persons who have problems relating primarily to their social solution and which endevours, individual to individual to understand what help is needed and to assist the individual to find and utilize the help indicate. (W. Freidlander, 1951)
c) Business administration
Management is an art of getting things done through others and with formally organised groups. (Harold Koontz)

Operational Definitions
a) Social Entrepreneurship
It denotes the score obtained by the respondents on the scale ‘Social Entrepreneurship Interest for both personnel and social benefits'
b) Social Work Trainees
It refers to the final year students who are pursuing their Master’s Degree in Social Work programme during the academic year 2018-2019.
c) Management Studies
It refers to the final year students who are pursuing their Master’s Degree in Management Studies programme during the academic year 2018-2019.

Variables
- Independent Variables: Age, Gender, Domicile, Occupation of Parents,
- Dependent Variables: Social Entrepreneurship Interest.
Research Design
The primary aim of the study is to analyse the social entrepreneurship interests among both the category of the students, hence the researchers adopted Descriptive Research Design. The study describes the characteristics of the social entrepreneurship interest among the MSW as well as the MBA students.

Universe and Sampling
The universe for the present study constitute the all the second year MBA and MSW Students during the academic year 2018-2019. Department of Management Studies has 115 students whereas Department of Social Work has 60 students on their roll respectively.
The researcher used Stratified Disproportionate Random Sampling to select 30 samples from both the departments. The sample size is 60.

Tools for Data Collection
The researcher framed a Questionnaire to collect the baseline details and also used a standardised scale by Chipeta (2005) to measure Social Entrepreneurship Intention.

Pretesting
In order to test the tools of the study, the researcher conducted a pretest among five students in the college itself.

Statistical Design
The collected data were entered in the data sheet and percentage analysis, comparative tables and statistical tests were applied using SPSS Application.

3. Results and Analysis
a) Socio Demographic Characteristics

Table 1. Degree Vs Gender

<table>
<thead>
<tr>
<th>S. No.</th>
<th>Degree</th>
<th>Gender</th>
<th>Male (n:32)</th>
<th>Female (28)</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
<td>N</td>
<td>%</td>
</tr>
<tr>
<td>1.</td>
<td>MSW</td>
<td></td>
<td>16</td>
<td>53.3</td>
</tr>
<tr>
<td>2.</td>
<td>MBA</td>
<td></td>
<td>16</td>
<td>53.3</td>
</tr>
</tbody>
</table>

With regard to the respondents’ gender and degree they are studying, irrespective of the programme they study, more than half (53.3% each) of the respondents are males.

Table 2. Degree Vs Age

<table>
<thead>
<tr>
<th>S. No.</th>
<th>Degree</th>
<th>Age</th>
<th>21</th>
<th>%</th>
<th>22</th>
<th>%</th>
<th>23</th>
<th>%</th>
<th>24</th>
<th>%</th>
<th>25</th>
<th>%</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
<td>N</td>
<td>%</td>
<td>N</td>
<td>%</td>
<td>N</td>
<td>%</td>
<td>N</td>
<td>%</td>
<td>N</td>
<td>%</td>
</tr>
<tr>
<td>MSW</td>
<td></td>
<td></td>
<td>5</td>
<td>16.7</td>
<td>13</td>
<td>43.3</td>
<td>6</td>
<td>20</td>
<td>4</td>
<td>13.3</td>
<td>2</td>
<td>6.7</td>
</tr>
<tr>
<td>MBA</td>
<td></td>
<td></td>
<td>3</td>
<td>10</td>
<td>13</td>
<td>43.3</td>
<td>8</td>
<td>26.7</td>
<td>5</td>
<td>16.7</td>
<td>1</td>
<td>3.3</td>
</tr>
</tbody>
</table>
With regard to the respondents’ age and degree they are studying, more just below the half (43.3%) of the respondents are comes under 22 age categories.

![Degree Vs Domicile](image1.png)

**Fig.1: Degree Vs Domicile**

It is inferred from the graph that majority the MSW Students (60%) and MBA Students (56.75) hail from Urban areas.

![Degree Vs Discipline](image2.png)

**Fig.2: Degree Vs Discipline in UG**

The above graph shows that majority (63.3%) of the respondents of MSW belongs to the Arts Discipline whereas Just below the half (40%) of the respondents for MBA.

<table>
<thead>
<tr>
<th>Degree Vs Are You Currently Self-Employed?</th>
</tr>
</thead>
<tbody>
<tr>
<td>MSW</td>
</tr>
<tr>
<td>0</td>
</tr>
<tr>
<td>10</td>
</tr>
<tr>
<td>20</td>
</tr>
<tr>
<td>30</td>
</tr>
<tr>
<td>40</td>
</tr>
<tr>
<td>50</td>
</tr>
<tr>
<td>60</td>
</tr>
<tr>
<td>70</td>
</tr>
<tr>
<td>80</td>
</tr>
<tr>
<td>90</td>
</tr>
</tbody>
</table>

Table 3. Degree Vs Are You Currently Self-Employed?
With regard to the Table 5, most of the respondents are not self-employed in both MSW and MBA.

Table 4. Do you seriously intend to start a business?

<table>
<thead>
<tr>
<th>S. No.</th>
<th>Degree</th>
<th>Yes</th>
<th>No</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td>N</td>
<td>%</td>
</tr>
<tr>
<td>1.</td>
<td>MSW</td>
<td>2</td>
<td>6.7%</td>
</tr>
<tr>
<td>2.</td>
<td>MBA</td>
<td>1</td>
<td>3.3%</td>
</tr>
</tbody>
</table>

The above table shows that more than half of the respondents (76.7%) in MBA are seriously intending to start a business than MSW.

Table 5. Degree and the business they would Undertake

<table>
<thead>
<tr>
<th>S. No.</th>
<th>Degree</th>
<th>The purpose of this business would be to</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td>Serve the needs of the community</td>
</tr>
<tr>
<td></td>
<td></td>
<td>N</td>
</tr>
<tr>
<td>1.</td>
<td>MSW</td>
<td>8</td>
</tr>
<tr>
<td>2.</td>
<td>MBA</td>
<td>4</td>
</tr>
</tbody>
</table>

With regard to the respondent’s reply, more than half of the respondents (70%) from MBA showing the purpose of business would be both serve the needs of the community and generate wealth for own.

Table 6. The purpose of this business would be to

<table>
<thead>
<tr>
<th>S. No.</th>
<th>Degree</th>
<th>The purpose of this business would be to</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td>Agro Based</td>
</tr>
<tr>
<td></td>
<td></td>
<td>N</td>
</tr>
<tr>
<td>1.</td>
<td>MSW</td>
<td>2</td>
</tr>
<tr>
<td>2.</td>
<td>MBA</td>
<td>0</td>
</tr>
</tbody>
</table>

According to the above table, just below the half of the respondents (36.7%) are having no interest and not decided for the future purpose of the business would be.
This table shows that MBA students have (36.7%) more level of social entrepreneurship interest than MSW students.

Table 7. Difference between MSW and MBA students with regard to their social entrepreneurship interest score

<table>
<thead>
<tr>
<th>S. No.</th>
<th>Social Entrepreneurship Interest Score</th>
<th>N</th>
<th>Mean</th>
<th>SD</th>
<th>Statistical Inference</th>
</tr>
</thead>
<tbody>
<tr>
<td>1.</td>
<td>MSW</td>
<td>30</td>
<td>108.2667</td>
<td>20.87885</td>
<td>t=3.413, df=58, P&lt;0.01</td>
</tr>
<tr>
<td>2.</td>
<td>MBA</td>
<td>30</td>
<td>124.4000</td>
<td>15.31643</td>
<td>Highly Significant</td>
</tr>
</tbody>
</table>

Table 8. Difference among respondents varied UG Disciplines and their Social Entrepreneurship Interest Score

<table>
<thead>
<tr>
<th>Discipline</th>
<th>SS</th>
<th>Df</th>
<th>MS</th>
<th>Mean</th>
<th>Statistical Inference</th>
</tr>
</thead>
<tbody>
<tr>
<td>Between Groups</td>
<td>2658.042</td>
<td>2</td>
<td>1329.021</td>
<td>G1= 114.19</td>
<td>F= 3.661</td>
</tr>
<tr>
<td>Within Groups</td>
<td>20691.291</td>
<td>57</td>
<td>363.005</td>
<td>G2= 113.04</td>
<td>P&lt;0.05</td>
</tr>
<tr>
<td>Total</td>
<td>23349.333</td>
<td>59</td>
<td></td>
<td>G3= 133.25</td>
<td>Significant</td>
</tr>
</tbody>
</table>

G1= Arts  G2= Science  G3= Others (medicine and Engineering)

Table 9. Difference among respondents varied age and their social Entrepreneurship Interest score

<table>
<thead>
<tr>
<th>Variables</th>
<th>Correlation Value</th>
<th>Statistical Inference</th>
</tr>
</thead>
<tbody>
<tr>
<td>Age Vs Social Entrepreneurship</td>
<td>0.089</td>
<td>P&gt;0.05</td>
</tr>
<tr>
<td>Interest Score</td>
<td></td>
<td>Not Significant</td>
</tr>
</tbody>
</table>

Table 10. Difference among the respondents varied domicile and social entrepreneurship interest score

<table>
<thead>
<tr>
<th>Social entrepreneurship interest Score</th>
<th>N</th>
<th>Mean</th>
<th>Significant value</th>
<th>Statistical Inference</th>
</tr>
</thead>
<tbody>
<tr>
<td>Rural</td>
<td>25</td>
<td>120.32</td>
<td>.139</td>
<td>Not Significant</td>
</tr>
</tbody>
</table>
Table 11. Difference among the gender and social entrepreneurship interest score

<table>
<thead>
<tr>
<th>Social entrepreneurship interest Score</th>
<th>Gender</th>
<th>N</th>
<th>Mean</th>
<th>Significant value</th>
<th>Statistical Inference</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Male</td>
<td>32</td>
<td>116.81</td>
<td>.769</td>
<td>p&gt;0.05, Not Significant</td>
</tr>
<tr>
<td></td>
<td>Female</td>
<td>28</td>
<td>115.78</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

4. Discussion, Implications and Conclusion

- The teachers in the UG programme influencing the students to improve their social entrepreneurship interest.
- The university should include such kind of programmes or activities for developing the social entrepreneurship interest among the students. The university is an establishment, wherever students pass on toward next stage of operating life. Right after the graduation, students decide how to go forward with their life. The entrepreneurial initiatives play a key role in developing a country’s economic and social wellbeing.

Conclusion

Social entrepreneurship is recognized as a new sector of entrepreneurship in the relatively higher priority to solve social problems, meet the social demands and create social values which have been missed by traditional entrepreneurship.

The findings of the research indicate that MBA students have more social entrepreneurship than the MSW students. And the discipline that they studied in the UG also influencing the students to improve the social entrepreneurship interest.

Acknowledgments

Authors would like to acknowledge the following. The H.O. D of Social work department, Dr. A. Relton who gave permission to take data collection from the department as well as the Head. in the MBA department Dr. Michael. The Ragini miss who gave the support for the data collection in the MBA department. Students of both MSW and MBA department who gave the support.

Limitations of the study

The researcher has restriction in sampling. The researcher selected samples from Bishop Heber itself. This study should be conduct for higher sample size, then only the actual results will come in the study. In this study reveals that the social entrepreneurship interest is higher in MBA students than the MSW students. This is the limitation of the study of the researcher.

References

1. Dr. Sarada Chengalvala and Dr. Sathyanarayana Rentala, 2017 Intentions towards social entrepreneurship among university students in India, International Journal of Research Granthaalayah Vol 5
2. Elenor Meda Chipeta (2005) 6-point Likert Social Entrepreneurship scale.
3. Gregory Dees J., 1998 The meaning of social entrepreneurship
5. Lawrence Mpele Lekhanya, 2015 The role of universities in promoting social entrepreneurship in South Africa Volume 4
6. Magazine, Stands for social Innovation; Review, Informing and inspiring leaders for change
Orienting and adapting the Social Work Education and Practice in the context of Emerging Health Care Demands and Challenges in India

S. Senthil*
Dr. G. Kanaga**
N. Karikalan***

Abstract
Professional social work is increasingly replaced by paramedical and service sector staff often driven by demand for specific needs and on adhoc basis. Replacing the role and functions of professional social worker by new cadres poses challenges for the social work profession. Social work in clinical and health care settings is practiced under either minimal supervision or non-existent. As a result, social workers’ contribution in the clinical/hospital setting seems deprecated. The needs for high technical, research and management skills in the health sector poses challenges for the social work profession which they are yet to overcome. Present competitive health care market, hospital management focusing on revenue generation, underutilizes the social workers. The present health care system is increasingly focused towards technological and digital tools and strategies which tries to replace the human factor of social work profession. Social work profession which is principally multidisciplinary needs further evolution with the current developments in the field of health care and allies’ disciplines. Social work must expand its horizon from the present approaches towards an all-encompassing discipline which must include health advocacy, behavioral economics, social networking and strategic management, implementation and operational research, cognitive behavioral science, health technology evaluation etc. Moving away from the traditional service centric approach, social work profession must evolve into more dynamic and vibrant disciplines, taking lead in addressing the problems of the society especially in the health sector by using the new tools of developments like advocacy, health technologies and behavioral economics. Advocacy and social networking strategies, and technologies are reshaping the health care service delivery, health care administration, health care spending in a way never though before and there is an urgent demand to reshape social work profession to use these tools of development more effectively. In the era of digital innovations, social media driven research and psycho social interventions are gaining more popularity and acceptance which the social work profession need to embrace. From the peer driven intervention, social network based innovative research and interventions are the need of the hour for social workers. Innovations and technological start-ups firms are more and more focusing on the wider social problems to address right from malnutrition, TB care, adolescent mental health, sexual violence etc. But still social workers are at loss to catch up with technical partners to innovate their ideas for social problems. It is essential that social work academics and professions need to evolve and reorient itself to the emerging demands of the 21st century especially in the health care field. The earlier the adoption occurs the more benefit the social work community will achieve in terms of its work efficiency, societal contribution and human service

Keywords: Social work education; Orienting; Adapting; Health care demands; Challenges in India.

1. Introduction
Social Work evolution and education

The social work profession promotes social change, problem solving in human relationships and the empowerment and liberation of people to enhance well-being. Utilising theories of human behaviour and social systems, social work intervenes at the points where people interact with their environments. Principles of human rights and social justice are fundamental to social work (International Association of Schools of Social Work (2001)). Social worker’s goal is to work along with the community and people to help them build resilience, generate and maintain hope and optimism and develop their strengths and abilities to face the challenges and overcome barriers. A key issue which is arising in the twenty first century is that whether social work is in fact a single profession, or has it become so specialised, domain specific, compartmentalised that social work as is a set of diverse and distinctive professions. While the diverse and distinctive nature of social work profession is to be acknowledged, it’s more important that

* Research Scholar, Department of Social Work, Cauvery College for Women, Thiruchirapalli, & Senior Technical Officer (1), ICMR- National Institute for Research in Tuberculosis Madurai Unit
** Professor and Head, Department of Social Work, Cauvery College for Women, Thiruchirapalli
*** Scientist B, Department of Health Economics, ICMR - National Institute for Research in Tuberculosis, Chennai
social work must be a single generic profession, underpinned by a common body of knowledge, skills and values, set out in the Framework for Social Work Education in Scotland (2003). With the increasing work specialisation’s needed for social workers there is a need to ensure that social work education need to build up the new emerging knowledge, skills and competence relevant to their own specialities of choice.

Social work, domain specialization in health care:

One domain where the professional generic social work is increasingly replaced by domain specific specialization is the health care and public health sector. Social work in clinical and healthcare settings is practiced under either minimal supervision or nonexistent. As a result social workers’ contribution in the clinical/hospital setting seems devalued. The needs for high technical, research and management skills in the health sector poses challenges for the social work profession which they are yet to overcome. Present competitive health care market, hospital management focusing on revenue generation, underutilizes the social workers. The present health care system is increasingly focused towards technological and digital tools and strategies which tried to replace the human factor of social work profession. Social work profession needs further evolution within the current developments in the field of health care and allies disciplines.

What social work profession needs to internalize?

Social work must expand its horizon from the present approaches towards an all encompassing discipline which must include health advocacy, behavioral economics, social networking and strategic management, implementation and operational research, cognitive behavioral science, health technology evaluation etc). Some cases for new requirements for social workers to adapt with Health Advocacy for social change and policy impact:

Advocacy is an integral component of social work practice and is consistent with the ethical guidelines for the profession. While advocacy has remained a usual practise still the emerging demands for health advocacy is not the same for a social worker as before. Health advocacy specialists are required to perform a range of new works and are expected to posses a range of skills. The new generation advocacy specialists are expected to be familiar with the regulatory, market and community dimensions of the health care sector they are involved in. They are expected to be the effective communicators at the corporate, community and public sector levels. They are expected to create and conduct effective presentations and training seminars that educate and motivate stakeholders from different backgrounds. New generation advocacy specialists are expected to be highly familiar in digital platforms to effectively advocate using web chat, phone, email, social media etc.

Behavioral Economics and Nudges for social change and policy impact:

While conventional social work has relied upon counselling skills and communication strategies for bringing in behavioral and social changes at individual and societal levels, there are path breaking changes in the approach to achieve this change globally. Behavioral economics is an area of study rooted in psychology, economics and behavioral sciences. Behavioral economics helps in identifying what’s driving current individual and social behaviors and it helps increasing our effectiveness in designing interventions based in simple nudges (or choice architectures) to shape positive behaviors. There are social work schools which have already adopted behavioral economics for bring in social change.

Social networking and strategic management for social change and policy impact:

Networks are collaborating, professionalized structures which continue to grow. Networks are post-bureaucratic form of organisation, which works on a different set of rules and contexts. Network based intervention and management practises are gaining popularity for governments and policymakers and thus naturally for policy makers. Social workers by creating cohesive, collaborative networks (of professionals or agencies) can pay dividends in coordinating care and attending to quality and safety issues in the health care service delivery and monitoring.

Implementation and operational research for social change and policy impact:

The knowledge generated from the social workers best clinical and support services often not integrated evidence in routine practice settings of health care. Filling the valley of gap between research and social work practice is a critical area of focus for the future of social work. Integrating implementation science into social work can greatly improve the social workers profession to bring research and practice in an integrated form. As such social workers must be trained and equipped in the implementation science research which examines the factors, processes, and
strategies that influence the uptake, use, and sustainability of evidence based interventions, practice innovations, and social policies in routine practice settings.

Health technology for social change and policy impact
Technical literacy is now a social, cultural and professional competency which is more and more needed for any professional and is needed for social workers. Social work service are more and more faced in intervention setting where the beneficiaries or clients are impacted by some technology to a greater level than before. The impact of technology in the intervention settings among all populations are greater that social work profession must more and more should orient towards technology driven or contextualised interventions wherever possible. Enabling themselves and enabling the vulnerable population to utilise the technological innovations in health care settings is of utmost important to fill in the digital divide in the use of technologies which further marginalise the people from access of resources and services (eg. digital transactions based credit linkages, access to direct cash benefit schemes for TB patients etc)

2. Discussion Conclusion
Moving away from the traditional service centric approach, social work profession must evolve into more dynamic and vibrant disciplines, taking lead in addressing the problems of the society especially in the health sector by using the new tools of developments like advocacy, health technologies and behavioral economics. Advocacy and social networking strategies, and technologies are reshaping the health care service delivery, health care administration, health care spending in a way never though before and there is an urgent demand to reshape social work profession to use these tools of development more effectively. In the era of digital innovations, social media driven research and psycho social interventions are gaining more popularity and acceptance which the social work profession need to embrace. From the peer driven intervention, social network based innovative research and interventions are the need of the hour for social workers. Innovations and technological start ups firms are more and more focusing on the wider social problems to address right from malnutrition, TB care, adolescent mental health, sexual violence etc. But still social workers are at loss to catch up with the technical partners to innovate their ideas for social problems.

It is essential that social work academics and professions need to evolve and reorient itself to the emerging demands of the 21st century especially in the health care field. The more earlier the adoption occurs the more benefit the social work community will achieve in terms of its work efficiency, societal contribution and human service.

References
1. https://www.ifsw.org/
5. https://qualitysafety.bmj.com/content/21/3/239
6. https://www.ncbi.nlm.nih.gov/pmc/articles/PMC5312777/
Strategies Adopted by Primary School Teachers to Improve the Learning Outcome of Students

G. Geetha*  
Dr. R. M. Sam Deva Asir**

Abstract
This paper focuses on different types of learners in each primary school classroom and the different strategies that teachers adopt in each classroom. Each school classroom has different level of learners, but in most schools there is only one adult (or even less) available to teach 40 (or even more) students. This ratio of 1:40 cannot practically do justice to different kind of learners. The purpose of this study is to understand the different strategies that teachers adopt to improve the learning outcome of students and the existing support systems present in schools for students. To study this, the researcher introduced a structural learning model to school educators in Chennai and understands educators’ opinion about its implementation in Chennai schools. The samples were selected using stratified random sampling. The study used mixed methodology for data collection. Questionnaire and focused group discussions were the tools used for data collection. The findings revealed that there were very less support available in schools. Each teacher has different approach towards student learning. Teachers try hard to help students who are behind in academics, but there is very less consistency found. Government schoolteachers received more number of trainings than private school teachers on different topics. These trainings appear to be very helpful in improving teachers’ attitude towards teaching students with different needs. The reality in most government schools is that teachers struggle to keep the student attendance regular. In this battle, there is less focus given for learning outcome. There are a number of other findings that the study revealed, which is elaborated in the paper. This study also provides suggestions for the school system to adapt based on the findings from the study.

Keywords: Primary school teachers; Learning outcome; Students; Strategies in teaching.

1. Introduction
The Annual Status of Education Report (ASER) 2016 covers every rural district in India contains up-to-date statistics about India’s quality of education. Enrolment in India’s primary schools is still at an impressive 96%, and the number of schools compliant with the Right to Education (RTE) Act 2009 norms, such as providing drinking water and usable toilets, continues to rise. However much of this is undermined by a fundamental challenge faced by public and private schools alike. ASER identifies that learning levels are unacceptably low, and have been stagnant or getting worse over the past few years, especially in government schools. In basic reading and numeracy skills, the majority of our school children are falling several years behind where they should be based on their ages and the classes they attend. ASER studies show that 95.5% children go to school in Tamil Nadu but, sadly more than 50% children in Std.5 cannot read Std 2 text (Source ASER 2016). Although we have schools that are open and children that attend, many of these schools fail in their basic mission of teaching.

Media reports on ASER analysis reveals that the education departments in several states are only beginning to shift their focus to student learning outcomes. ASER in its 2016 report articulates that the thrust of policy and practice in India is beginning to shift from “schooling” to “learning” (RukminiBanerji, Director, ASER Centre).MadhavChavan, chief executive and president of Pratham Education Foundation says, “The problem is immediate and urgent. We have not moved forward for years. We have got students to schools but the learning outcome remains poor.” While a few states are experimenting with new and innovative policies aimed at improving learning, there is very little consensus on interventions that are scalable and proven effective at improving learning in primary schools. Also, research and analysis on the Right To Education Act clearly indicates that the country has students to school, however the system hasn’t succeeded in improving learning outcomes.

It Takes a System, Not Just a Teacher
Research supports what most of us see as common sense: What goes on between the teacher and the student is central to high-level learning. Effective teaching is not the end goal. However, it is the means to an end: Student achievement.Nevertheless, all teaching is more effective when effectively supported. Achieving the goal of improving instruction requires a supportive and aligned system. Stated another way, although effective teaching is essential, it is

*Ph.D. Scholar, PG and Research Department of Social Work, Bishop Heber College, Tiruchirappalli.
**Assistant Professor, PG and Research Department of Social Work, Bishop Heber College, Tiruchirappalli.
not sufficient to maximize achievement for all students. This understanding of the need for an organization-wide commitment is at the heart of the proposed research.

One point that needs to be made clear is that change is not required because the education system has significantly failed. Indian education system had produced great leaders like Sarvpalli Radhakrishnan, Ambedkar, Gokale, and Abdul Kalam to name a few. It needs change because it is still based on centuries old model that did not emphasize a rigorous and relevant practical curriculum for all students, but rather one that encouraged and ensured rote learning – so much so that the public examination system is designed to ensure rote learning. The world of today requires a different core of knowledge that all students need for success. The drive of global competition, elimination of unskilled jobs, advancement in technology, and the demand for maintaining better quality services has led the public, media and government to push for higher standard for all students. This is why change must happen in schools soon.

What Works – Analysis of Past Research

Recognizing the challenges facing schools today is easy. Identifying the most effective ways to address them is not. Education research is plentiful and comprehensive, so much so that studies are available to prove or disprove almost any decision made by education leadership. However, most of the respected research is consistent on one key school improvement issue: effective instruction really matters. No single variable has more impact than teaching.

To make teaching more effective developed countries like the United States of America have required a legal commitment from schools to implement Response to Intervention (RTI).

Statement of Problem

Over the last couple of years, international and national attention has begun to shift from being input focused to learning outcome oriented. There is no question that schools need to have good infrastructure, but to keep achievement of quality on hold until all infrastructure is taken care of is quite absurd. The proposed research will study the strengths and concerns of implementing RTI in Tamil Nadu schools, understand the strategies that teachers use in class rooms to improve the learning outcome of students.

Definition of Terms

RTI which stands for Response To Intervention is an intervention process that begins in a general education setting before students are placed in special education. There are three levels of the process tier 1, tier 2 and tier3. In tier 1 is the instruction and assessment process in a general education setting, tier 2 is to conduct specific strategies for the student to progress in a general education setting and tier 3 is the when a team decides if the student has a disability. If the student is successful in tier 1 and tier 2 then tier 3 does not have to go further in placing the student in special education classes. RTI can be successful if it is properly conducted.

2. Research Methodology

The proposed study draws support from Bandura’s Social Learning Theory. Bandura’s Social Learning Theory posits that people learn through observing others’ behavior, attitudes, and outcomes of those behaviors. “Most human behavior is learned observationally through modeling: from observing others, one forms an idea of how new behaviors are performed, and on later occasions this coded information serves as a guide for action.” (Bandura). This theory explains human behavior in terms of continuous reciprocal interaction between cognitive, behavioral and environmental influences. He proposed study also draws foundation from the Response to Intervention model (commonly abbreviated RTI or Ri). RTI is a method of academic intervention used in the United States to provide early, systematic assistance to children who are having difficulty learning. RTI seeks to prevent academic failure through early intervention, frequent progress measurement, and increasingly intensive research-based instructional interventions for children who continue to have difficulty. RTI is a multileveled approach for aiding students that is adjusted and modified as needed. The proposed study is expected to apply qualitative and quantitative approach to ensure better outcomes.

Objectives

General objective is to understand the educators’ opinion on implementing RTI in Chennai schools by presenting the model to educators.

Specific objectives of the research:

- To study socio demographics of the respondents
- To present and help educators understand Response to Intervention Model
- To understand the different strategies that teachers used in primary school classrooms
- To understand the existing support services in schools
- To understand collaborating opportunities in schools for teacher to discuss student concerns

Methodology and Tools for Data Collection
The researcher has planned to use mixed methodology for the proposed study. Sequential method is adopted with the following tools:
1. Questionnaire
2. Scale (teachers’ attitude towards teaching)
3. Focused Group Discussion – 5 groups

Sampling
Sample is a group of elements selected from a large, well-defined pool of elements. A sample is a subset of population (McBurney, 2001). The proposed study plans to deploy Multi-stage Sampling. Multi-stage sampling (also known as multi-stage cluster sampling) is a more complex form of cluster sampling that contains two or more stages in sample selection. In simple terms, in multi-stage sampling large clusters of population are divided into smaller clusters in several stages in order to make primary data collection more manageable.

Sampling Frame Work: The proposed study is divided into four stages.
Stage 1 – Zones
Sarva Siksha Abhiyan (SSA) has divided Chennai into 10 Zones.
5 random zones are considered for the study.
Stage 2 - Types of school
Each zone has 4 types of schools. (Corporation, Aided, Private and Management schools)
Census Method is adopted at this stage. All 4 types of schools are considered for the study.

Census method:
Census method refers to the complete enumeration of a universe. A universe may be a place, a group of people or a specific locality through which we collect the data.

Stage 3 - Number of schools
Stratified Disproportionate Random Sampling is adopted at this stage. 1 school from all 4 types of schools are selected for the study. Therefore, 4 schools from each zone becomes part of the study making a total of 20 schools.

Stage 4 - Respondents
Stratified Disproportionate Random Sampling is adopted at this stage. 5 teachers teaching primary classes from the selected schools and their HMs become respondents of the study.

Stratified Disproportionate Random Sampling:
Disproportionate stratification is a type of stratified sampling. With disproportionate stratification, the sample size of each stratum does not have to be proportionate to the population size of the stratum. This means that two or more strata will have different sampling fractions. The size of the sample selected from each subgroup is disproportional to the size of that subgroup in the population.

Subjects
The subjects in this study are primary class educators from 20 schools in Chennai. 5 Teachers from these 20 schools will be part of this study. A total of 100 surveys are completed. 5 Zones x 4 schools = 20 schools; 20 schools x 5 teachers = 100 teachers; Response to intervention model was explained and presented to the teachers. At the end of the session, a questionnaire was distributed for data collection.

Significance of the proposed study
It is important to study RTI’s acceptance and to study the different strategies that teachers use in classrooms to implement the process the right way and to help students to be successful in general education classes. In countries were these kind of interventions are successfully implemented, historically before the implementation of RTI students who were not being successful were thought of having a learning disability and are placed into special education classes before any type of intervention.

Universe
Primary schools in Chennai has been taken into study.

Tools for Data collection
1. A questionnaire to study socio-demographic variables.
2. A questionnaire developed to study the strengths and concerns of the model.
3. Focused Group Discussion will be used to study the existing support services in schools and collaborating opportunities.

3. Results
Main findings from the study
- More than 76% of teachers had a specific seating arrangement in their classrooms. These seating arrangements were intentionally made to avoid behavior problems.
- All primary classrooms had class rules like listen to the teacher, do not hurt others, stand in a line, etc. to keep the behavior on check.
- The study revealed that 92% of teachers found small group instructions effective on students who were slow learners.
- The study revealed that government and corporation schools had one teacher teaching all 5 subjects, English, Tamil, Maths, EVS, and Social Science; while as teachers teaching in private schools did not teach more than three subjects in any given classroom. This shows that private school teachers have more opportunity to excel in their subjects and provide focused subject specific attention compared to government and corporation schools.
- The Study revealed that 54% teachers had a post-graduation degree, 100% teachers had B.Ed.
- The study revealed that 46% of teachers were between the age group of 40-50 years, 30% of teachers were between the age group of 30-40 years, 12% teachers were between the age group of 50-58 years, and 12% were below 30 years.
- Most Corporation and government-aided schools had teachers in their school who are not on the payroll of the government. There are NGOs who send their teachers to government-aided and corporation schools to teach. These teachers act as regular teachers in these schools. There are various health and hygiene lessons that are taught by these teachers.
- According to Corporation and government-aided school teachers, over 82% of teachers from NGO are present in their schools to improve English skills of the students.
- A majority of 98% teachers agree that RTI model can be helpful in improving the learning outcome of students. However, it is evident that there are not many special educators in schools to cater to the needs of students with learning difficulties. 3% of schools had special educators in their schools. These schools, which have special educators, have students with severe learning needs. The special educators are not government staff; School grant is used to employ such staff.
- A majority of 98% teachers who have Activity Based Learning (ABL) classrooms agree that RTI model can be implemented in their classrooms. ABL classrooms are set up in groups, which will help teachers to give differentiated instruction to different groups.
- Over 70% teachers agree that this model will demand more work from teachers.
- A majority of 82% teachers agreed that they have students who struggle to learn in their classrooms.
- None of the government or corporation schools have a defined system in their school to identify students with learning needs. 12% of private schools had special educators in their school that will help children with learning needs.
- 72% of teachers have received training on handling children with learning needs. They have received training to identify children with learning disabilities. But since the study revealed that only 3% of schools had special educators it will be difficult of teachers to bring about any change in the children with learning needs.
- Over 70% teachers discuss with their peers, senior teachers, and HM to get ideas and strategies to help children who struggle to learn.
- The study revealed that Corporation and government-aided schools had 40% more programs on health and hygiene in schools compared to private schools.
- 68% of Corporation and government-aided schools teachers said that parents do not support the children in their education. Rest 32% teachers felt that there are some parent who are interested to know about their children progress.
- Corporation and government-aided schools teachers struggle to get students come to school regularly. There are
different reasons like family problems, parent’s sickness, student’s sickness, parent separation, etc which disturbs the student in coming to school regularly.

- Private school teachers did not find student attendance as a challenge. However Private school teacher expressed difficulty in handling parents. Private school teachers felt that the parents are very demanding, and hence the school management is pressurizing the teachers.

4. Conclusion and Recommendation

- The study clearly indicates that schools have a number of children with poor learning skills. Teachers agreed that RTI model would help students in their classrooms. However, the resources required to set up this model is limited. There are only 3% of schools, which have special educators. Hence providing capacity building programs for teachers on handling students with learning needs will benefit the children to improve their learning outcome.
- Teachers sharing strategies among them and their peers is a helpful.
- It is recommended that schools document such incidents where teachers consult with peer teachers for new strategies. Documenting the result of an intervention will also be helpful for future references.

References

Teacher’s Role in Student Achievement in Chennai Primary Schools

G. Geetha*
Dr. R. M. Sam Deva Asir**

Abstract
The poor quality of education, reflected in low learning levels, in India and other South Asian countries traps many young people in poverty and prevents faster economic growth and shared prosperity. Each school classroom has a different level of learners, but in most schools there is only one adult (or even less) available to teach 40 (or even more) students. This ratio of 1:40 cannot practically do justice to different kinds of learners. The purpose of this study is to understand the existing support systems present in schools for students to improve their learning outcomes. To study this, the researcher introduced a structural learning model to school educators in Chennai and understands educators’ opinion about its implementation in Chennai schools. The samples were selected using stratified random sampling. The study used mixed methodology for data collection. Questionnaire and focused group discussions were the tools used for data collection. The findings revealed that there were very less support available in schools. Each teacher has a different approach towards student learning. Teachers try hard to help students who are behind in academics, but there is very less consistency found. Government schoolteachers received more number of trainings than private school teachers on different topics. These trainings appear to be very helpful in improving teachers’ attitude towards teaching students with different needs. The reality in most government schools is that teachers struggle to keep the student attendance regular. In this battle, there is a focus on learning outcomes. There are a number of other findings that the study revealed, which is elaborated in the paper. This study also provides suggestions for the school system to adopt based on the findings from the study.

Keywords: Education; Achievement; Learning levels; Teacher’s role; Primary schools.

1. Introduction
Teaching and learning goes hand in hand. Every teacher walks into the school with an ambition to teach something new today. Every student walks into the school with an ambition to learn something new today. However, not everyone is successful every day. Something somewhere goes wrong. There are various studies which prove that better planning from the teacher could improve student-learning outcomes. Media reports on ASER (Annual Status Education Report) analysis reveals that the education departments in several states are only beginning to shift their focus to student learning outcomes. ASER in its 2016 report articulates that the thrust of policy and practice in India is beginning to shift from “schooling” to “learning” (Rukmini Banerji, Director, ASER Centre). Madhav Chavan, chief executive and president of Pratham Education Foundation says, “The problem is immediate and urgent. We have not moved forward for years. We have got students to schools but the learning outcome remains poor.” While a few states are experimenting with new and innovative policies aimed at improving learning, there is very little consensus on interventions that are scalable and proven effective at improving learning in primary schools.

Also, research and analysis on the Right To Education Act clearly indicates that the country has students to school, however the system hasn’t succeeded in improving learning outcomes. Research supports what most of us see as common sense: What goes on between the teacher and the student is central to high-level learning. Effective teaching is not the end goal. However, it is the means to an end: Student achievement.

Nevertheless, all teaching is more effective when effectively supported. Achieving the goal of improving instruction requires a supportive and aligned system. Stated another way, although effective teaching is essential, it is not sufficient to maximize achievement for all students. This understanding of the need for an organization-wide commitment is at the heart of the proposed research.

One point that needs to be made clear is that change is not required because the education system has significantly failed. Indian education system had produced great leaders like SarvapalliRadhakrishnan, Ambedkar, Gokale, and Abdul Kalam to name a few. It needs change because it is still based on centuries old model that did not emphasize a rigorous and relevant practical curriculum for all students, but rather one that encouraged and ensured rote learning – so much so that the public examination system is designed to ensure rote learning. The world of today

*Ph.D. Scholar, PG & Research Department of Social Work, Bishop Heber College, Tiruchirapalli - 620017
**Assistant Professor, PG & Research Department of Social Work, Bishop Heber College, Tiruchirapalli - 620017
requires a different core of knowledge that all students need for success. The drive of global competition, elimination of unskilled jobs, advancement in technology, and the demand for maintaining better quality services has led the public, media and government to push for higher standard for all students. This is why change must happen in schools soon.

Supporting literature
Recognizing the challenges facing schools today is easy. Identifying the most effective ways to address them is not. Education research is plentiful and comprehensive, so much so that studies are available to prove or disprove almost any decision made by education leadership. However, most of the respected research is consistent on one key school improvement issue: effective instruction really matters. No single variable has more impact than teaching. To make teaching more effective developed countries like the United States of America have required a legal commitment from schools to implement Response to Intervention (RTI).

Statement of Problem
Over the last couple of years, international and national attention has begun to shift from being input focused to learning outcome oriented. There is no question that schools need to have good infrastructure, but to keep achievement of quality on hold until all infrastructure is taken care of is quite absurd. The proposed research will study the strengths and concerns of implementing RTI in Tamil Nadu schools, understand the strategies that teachers use in class rooms to improve the learning outcome of students.

Definition of Terms
RTI which stands for Response to Intervention is an intervention process that begins in a general education setting before students are placed in special education. There are three levels of the process tier 1, tier 2 and tier3. In tier 1 is the instruction and assessment process in a general education setting, tier 2 is to conduct specific strategies for the student to progress in a general education setting and tier 3 is the when a team decides if the student has a disability. If the student is successful in tier 1 and tier 2 then tier 3 does not have to go further in placing the student in special education classes. RTI can be successful if it is properly conducted.

2. Methodology and Approach
The proposed study draws support from Bandura’s Social Learning Theory. Bandura’s Social Learning Theory posits that people learn through observing others’ behavior, attitudes, and outcomes of those behaviors. “Most human behavior is learned observationally through modeling: from observing others, one forms an idea of how new behaviors are performed, and on later occasions this coded information serves as a guide for action.” (Bandura). This theory explains human behavior in terms of continuous reciprocal interaction between cognitive, behavioral and environmental influences.

The proposed study also draws foundation from the Response to Intervention model (commonly abbreviated RTI or RtI). RTI is a method of academic intervention used in the United States to provide early, systematic assistance to children who are having difficulty learning. RTI seeks to prevent academic failure through early intervention, frequent progress measurement, and increasingly intensive research-based instructional interventions for children who continue to have difficulty. RTI is a multileveled approach for aiding students that is adjusted and modified as needed. The proposed study is expected to apply qualitative and quantitative approach to ensure better outcomes.

Objectives
General objective is to understand the educators’ opinion on implementing RTI in Chennai schools by presenting the model to educators.
Specific objectives of the research:
- To understand the strategies that teachers adopt in classrooms.
- To understand what values are taught in schools.
- To understand team work among teachers to improve student achievement.

Methodology and Tools for Data Collection
The researcher has planned to use quantitative methodology for the study. Self-developed Questionnaire was administered on teachers. Sampling: Sample is a group of elements selected from a large, well-defined pool of elements. A sample is a subset of population (McBurney, 2001). The proposed study plans to deploy Multi-stage Sampling. Multi-stage sampling (also known as multi-stage cluster sampling) is a more complex form of cluster
sampling that contains two or more stages in sample selection. In simple terms, in multi-stage sampling large clusters of population are divided into smaller clusters in several stages in order to make primary data collection more manageable.

Sampling Frame Work:

The proposed study is divided into four stages.

Stage 1 – Zones
Sarva Siksha Abhiyan (SSA) has divided Chennai into 10 Zones.
5 random zones are considered for the study.

Stage 2 - Types of school
Each zone has 4 types of schools. (Corporation, Aided, Private and Management schools)
Census Method is adopted at this stage. All 4 types of schools are considered for the study.

Census method:
Census method refers to the complete enumeration of a universe. A universe may be a place, a group of people or a specific locality through which we collect the data.

Stage 3 - Number of schools
Stratified Disproportionate Random Sampling is adopted at this stage. 1 school from all 4 types of schools are selected for the study. Therefore, 4 schools from each zone becomes part of the study making a total of 20 schools.

Stage 4 - Respondents
Stratified Disproportionate Random Sampling is adopted at this stage. 5 teachers teaching primary classes from the selected schools and their HMs become respondents of the study.

Stratified Disproportionate Random Sampling: Disproportionate stratification is a type of stratified sampling. With disproportionate stratification, the sample size of each stratum does not have to be proportionate to the population size of the stratum. This means that two or more strata will have different sampling fractions. The size of the sample selected from each subgroup is disproportional to the size of that subgroup in the population.

Subjects
The subjects in this study are primary class educators from 20 schools in Chennai. 5 Teachers from these 20 schools will be part of this study. A total of 100 surveys are completed. (5 Zones x 4 schools = 20 schools; 20 schools x 5 teachers = 100 teachers; Response to intervention model was explained and presented to the teachers. At the end of the session, a questionnaire was distributed for data collection.

Significance of the proposed study
It is important to study RTI’s acceptance and to study the different strategies that teachers use in classrooms to implement the process the right way and to help students to be successful in general education classes. In countries were these kind of interventions are successfully implemented, historically before the implementation of RTI students who were not being successful were thought of having a learning disability and are placed into special education classes before any type of intervention.

Universe
Primary schools in Chennai has been taken into study.

Tools for Data collection
1. A questionnaire to study Socio – demographic variables.
2. A questionnaire developed to study the strengths and concerns of the model.
3. Focused Group Discussion will be used to study the existing support services in schools and collaborating opportunities.

3. Results
Main findings from the study:
1. The study revealed that government and corporation schools had one teacher teaching all 5 subjects, English, Tamil, Maths, EVS, and Social Science; where as teachers teaching in private schools did not teach more than three subjects in any given classrooms. This shows that private school teachers have more opportunity to excel in their subjects and provide focused subject specific attention compared to government and corporation schools.
2. The Study revealed that 54% teachers had a post-graduation degree, 100% teachers had B.Ed.
3. The study revealed that 46% of teachers were between the age group of 40-50 years, 30% of teachers were
between the age group of 30-40 years, 12% teachers were between the age group of 50-58 years, and 12% were below 30 years.

4. Most Corporation and government-aided schools had teachers in their school who are not on the payroll of the government. There are NGOs who send their teachers to government-aided and corporation schools to teach. These teachers act as regular teachers in these schools. There are various health and hygiene lessons that are taught by these teachers.

5. According to Corporation and government-aided school teachers, over 82% of teachers from NGO are present in their schools to improve English skills of the students.

6. A majority of 98% teachers agree that RTI model can be helpful in improving the learning outcome of students. However, it is evident that there are not many special educators in schools to cater to the needs of students with learning difficulties. 3% of schools had special educators in their schools. These schools, which have special educators, have students with severe learning needs. The special educators are not government staff; School grant is used to employ such staff.

7. A majority of 98% teachers who have Activity Based Learning (ABL) classrooms agree that RTI model can be implemented in their classrooms. ABL classrooms are set up in groups, which will help teachers to give differentiated instruction to different groups.

8. Over 70% teachers agree that this model will demand more work from teachers.

9. A majority of 82% teachers agreed that they have students who struggle to learn in their classrooms.

10. None of the government or corporation schools have a defined system in their school to identity students with learning needs. 12% of private schools had special educators in their school that will help children with learning needs.

11. 72% of teachers have received training on handing children with learning needs. They have received training to identify children with learning disabilities. But since the study revealed that only 3% of schools had special educators it will be difficult of teachers to bring about any change in the children with learning needs.

12. Over 70% teachers discuss with their peers, senior teachers, and HM to get ideas and strategies to help children who struggle to learn.

13. The study revealed that Corporation and government-aided schools had 40% more programs on health and hygiene in schools compared to private schools.

14. 68% of Corporation and government-aided schools teachers said that parents do not support the children in their education. Rest 32% teachers felt that there are some parent who are interested to know about their children progress.

15. Corporation and government-aided schools teachers struggle to get students come to school regularly. There are different reasons like family problems, parent’s sickness, student’s sickness, parent separation, etc which disturbs the student in coming to school regularly.

16. Private school teachers did not find student attendance as a challenge. However Private school teacher expressed difficulty in handling parents. Private school teachers felt that the parents are very demanding, and hence the school management is pressurizing the teachers.

4. Conclusion and Recommendation

- The study clearly indicates that schools have a number of children with poor learning skills. Teachers agreed that RTI model would help students in their classrooms. However, the resources required to set up this model is limited. There are only 3% of schools, which have special educators. Hence providing capacity building programs for teachers on handling students with learning needs will benefit the children to improve their learning outcome.

- Teachers sharing strategies among them and their peers is a helpful.

- It is recommended that schools document such incidents where teachers consult with peer teachers for new strategies. Documenting the result of an intervention will also be helpful for future references.
References
3. Leadership Practices for School Improvement: Gender Disparities
4. Naseer Ahmad Salfi, AshiqHussain and Muhammad Nasarullah Virk
Role and Approach of Social Work in the Public Health Domain

Dr. J. Lakshmi*
Damen Queen**

Abstract
Social work and Public health service have a long standing history, In fact the roots of social work has a deep trench in the area of public health. In early way back in 20th century, social workers partnered with Medical professionals to combat sexually transmitted diseases and other infectious diseases in order to improve maternal/child health in settlement houses. (Marshall &Altpeter, 2005). Since then social works play a huge role in Public health domain, and this collaborative approach laid way for new health promotion models and disease prevention to meet the needs of contemporary health-related social issues throughout the due course. Social workers work in the area of public health to improve the overall spectrum of health and well-being of people. It focuses mainly in addressing broad public health issues in preventive and promoting measures to health and wellbeing. Social workers focuses on prevention aspect at the community level through health education model whereas, public health professionals focuses on curative aspect at the individual level through intervention models.

Keywords: Public health; Domain; Approach of social work; Role of social worker; Intervention models.

Introduction
Public Health in India comprises the epidemiological transition (growing burden of chronic non-communicable diseases), demographic transition (growing elderly population) and environmental changes. Health systems are struggling with the effects of existing communicable and non-communicable diseases and also with the increasing burden of emerging and re-emerging diseases (drug-resistant TB, malaria, SARS, avian flu and the current H1N1 pandemic). Inadequate monetary funds for the health sector and inefficient utilization result in inequalities in health.

The healthcare system is classified into primary, secondary, and tertiary levels. Primary levels are Sub Centres and Primary Health Centres (PHCs). Secondary levels there are Community Health Centres (CHCs) and smaller Sub-District hospitals. Finally, the top level of public care provided by the government is the tertiary level, which consists of Medical Colleges and District/General Hospitals The major factor of health inequalities lie in the social, economic and political mechanisms that lead to social stratification according to income, education, occupation, gender and race or ethnicity. Lack of adequate development on these underlying social determinants of health has been acknowledged as a glaring failure of public health.

Social Worker
A social worker is a professional who work with the people to help themselves, so that people can manage their daily lives with respect and dignity.

Public Health
According to WHO, Public Health is defined as “the art and science of preventing disease, prolonging life and promoting health through the organized efforts of society” (Acheson, 1988; WHO). C.E.A. Winslow in 1923 defined Public Health as “the science and art of preventing disease, prolonging life, promoting physical health and efficiency through organized community efforts for the sanitation of the environment, the control of community infections, the education of the individual in principles of personal hygiene, the organization of medical and nursing services for the early diagnosis and preventive treatment disease, and the development of the social machinery which will ensure to every individual in the community a standard of living adequate for the maintenance of health”.

Major Roles of Social Worker
Both in Preventive and Promotion of Health care.
1. Health promotion and health campaigns.
2. Health Education
3. Environmental modification

---

* Assistant Professor, Department of Social Work, Madras School of Social Work, Egmore, Chennai.
**Assistant Professor, Department of Social Work, Madras School of Social Work, Egmore, Chennai.
According to WHO, 1998 “Health education is any combination of learning experiences designed to help individuals and communities improve their health, by increasing their knowledge or influencing their attitudes”. Health education is one of the effective and cost-effective methods. The main focus of health education is to provide adequate information about health, importance of adopting healthy behaviors. A large number of diseases could be prevented with little or no medical intervention if people were aware about such diseases a head before. If public know about the disease, its causative factor and preventive strategy, this information would be handy for the public to maintain healthy life free from disease. Recognizing this truth, WHO states that “the extension to all people of the benefits of medical, psychological and related knowledge is essential to the fullest attainment of health. Addition to this, educational programs have proven to be helpful in enhancing the skills and knowledge on healthier life-style choices among public. Social Workers work closely with the below areas of public Health in educating the public:

- Social epidemiology.
- Causative factor and mode to cub the factor.
- Existing health care and access to health care.
- Inform, educate, and empowering people about health issues.
- Strengthening the safety measures of at-risk populations.

Environmental Modification

In the present scenario addressing environmental issues is very much needed to prevent and promote health since its affect the larger number of population in India. Country like India due to overpopulation the environment pollution is the major threat to the population. Environmental modification can be studied under two importance heads one is physical environmental modification and social environmental modification. The physical factors such as adequate provision of basic facilities including safe drinking water, personal hygiene, sanitation and etc., It is very much needed in the promotion of public health. It could be done through bridging the gap between communities, health system and social service system. Such as, provision of safe water, installation of sanitary latrines, control of insect and rodent, improvement of housing etc. Proper storage, collection and disposal of waste are essential for protecting public health. The basic rule of “reduce, reuse, recycle” is highly a prerequisite one. The history of medicine has shown that many infectious diseases have been successfully controlled in western countries through environmental modification.

For Example: If the safe drinking water is ensured for the community members, and then the possibility of water born disease can be curtailed to a great extent. Another recent example is the outbreak of dengue. The Non-governmental organization and public health professionals worked in partnership with the local bodies to create mass awareness. Beside creating awareness and educating the community, the community participation is one of the important factors in the Integrated Vector Management (IVM). Since the non-availability of specific antiviral treatment or vaccine against dengue is not applicable, this environment modification of individual behavior and the participation of the community as a whole were evident in mosquito-control initiatives. Vertical vector control was effective because of the fact that the community participation was ensured. The social workers and public health professionals were active partners in the control actions. This effort of environmental management had effective result in term of curbing the spread of dengue in a high populated and overcrowded place like Chennai.

Factors in the social environment that are essential to health include those related to safety, violence, and social disorder in general, and more specific factors related to the type, quality, and stability of social connections, including social participation, social cohesion, social capital, and the collective efficacy of the neighborhood (or work)
environment (Ahern and Galea, 2011). Social participation and integration in the immediate social environment (e.g., school, work, and neighborhood) appear to be important to both mental and physical health (DeSilva et al., 2005) here the social workers are highly responsible to tune the behavior of the individual and group by adopted social work strategies in the society and improving the involvement towards achieving minimum standards of health in India.

Nutritional Intervention

Both State Government and Central government have been implementing numerous nutritional intervention program for the development of people, but tragically this does not reach to all sects of the population due to various reason. Here the social worker roles are necessary to educate about the programs and about how to use to health care and social service system. Social workers work at both the individual level and community level in providing mass awareness about the existing nutrition program. Person-centered approach is very much appropriate to work one-on-one with individuals to set goals and make decisions that enhance their health and quality of life which yield positive results.

Health Research

The public health research situation in India is characteristic of the low priority to public health more generally observed that only 3.3% of the 4,876 health research studies published from India during 2002 were devoted to public health. Clearly, public health research in India is grossly under-represented and requires strategic planning, investment, and resource support if there is to be a positive change in the production of such research in the country and, by its application, the promotion of healthier lives for its population. (Dandona et al, 2004) Therefore Monitoring health status to identify community health problems is one of the major roles of social workers. Diagnosing, explore health problems and health hazards in the community through baseline surveys are vital, which is most a case done by social workers. Assessing the effectiveness of existing health care, health policies, its accessibility and quality of health services are the core areas of research work executed by social workers. Once health hazard is identified, the social worker mobilizes the community to work in partnerships to identify and solve health problems. Based on various research findings, social workers strongly recommend and discuss further implication for interventions. Innovative solutions to various health problems are the upcoming areas of scope for research.

Health Advocacy

According to WHO in 2004, Advocacy is a key health promotion activity for overcoming major barriers to public health and occupational health. Health professionals often remain detached from advocacy considering that policies and decisions on public health matters are the responsibility of politicians and bureaucrats. Social worker work along with the state in developing public health policies and strategies that support individual and community health. In fact social worker have been organizing and sensitizing the public in advocating for the rights of people when the state is failed its responsibility to promote health. Advocating for health developmental includes socio-economic development, poverty eradication, nutrition development, and health policy and health legislation. The accountability for health does not end with the individual and community effort. In all civilized societies, it lies with various health care systems, health policies; In fact State assumes responsibility for the health and welfare of its citizens. The constitution of India provides that health is state responsibility. Social workers also work along the legislation related to public health and implement laws and regulations that protect health and ensure safety.

Things to be noted by social workers while working in the public health domain

When social worker’s involve in public health promotion they should carefully look into below areas,

- Identify factors which affect the health of particular community, factors includes, Culture, Values, religious belief, Socio-economic groups etc. Through analysis of how these factors affect the health of the community is vital.
- Clear understanding of the health seeking behaviors of community, their strengths, needs, values, local health practices and health behaviors are important factors to be considered in designing health program.
- Considering all levels of health care delivery including primary, secondary and tertiary strategies to address the health.
- Social and economic issues are an important element which contributes to the poverty, which has direct impact on health of individuals, families and communities.
- Utilize practice and epidemiologic theories to authenticate interventions and programming designed to promote health and behavioral change.
- The use of statistics to illuminate ethical, political, scientific, economic, social and overall public health issues. Consolidating the health facts through research and responding systematically to the analyze facts is essential.
Collection and explanation of data from vital statistics, censuses, surveys, service utilization and other relevant reports on social and health status for all, especially vulnerable and underserved populations.

Discovery of meaningful inferences from statistics and translation of data into information for community assessment (gaps, barriers and strengths analysis), program planning, implementation and evaluation.

Formulation of hypotheses or research questions in collaboration with internal or external resources for the development and implementation of an analytical strategy to influence health and social planned change.

Adhering to the Principles and ethics of social work while addressing the community health needs including assessment, program design, Implementation and evaluations.

Synthesizing of contemporary and alternative health and social policies.

Identify essential gaps in the overall health care delivery systems and its impact on public health.

Identifying public health laws, rules and policies and its gap in addressing the health needs for the public.

2. Conclusion

Social workers have the responsibilities of coordinating various health programs that promote client well-being and ensure a continuum of care. Planning shall be based on a comprehensive, culturally competent assessment with interdisciplinary input from the community along with community participation. Intervention and treatment plans are identified by the health social worker, in collaboration with the client and with other members of health team, to achieve objectives of overall wellbeing. Social workers shall be able to adapt practice techniques to best meet client needs within their health care setting to work effectively with individuals across the life-span, with different ethnicities, cultures, religions, socioeconomic and educational backgrounds in the public health domain. The Public health demands the collaboration of social workers, who can effectively work in all the areas including, Health-promotion, advocacy, education, research etc.

Reference
3. https://www.ncbi.nlm.nih.gov/pmc/articles/PMC4539388/
Medical Social Work Intervention in Hospital Setting: Role of Social Worker in Dealing with Chronically Ill Patients

Damen Queen*
Dr. A.Umesh Samuel Jebaseelan**

Abstract
As the definition of Health by WHO clearly says that “Health is a state of complete physical, mental, and social well-being and not merely the absence of disease or infirmity. Chronic diseases are greatly influenced by socioeconomic condition, education, employment, and environment. Those with chronic illness, depending upon the illness, are often living with physical, cognitive, and emotional challenges such as fatigue, pain, balance issues, muscle spasms, neurological sensations, vision or hearing challenges, tremors, memory loss, difficulty regulating emotions, difficulty multitasking, depressive episodes, anxiety, and panic episodes and the list goes on and on. And again, because these health issues are chronic, these challenges don't go away, and in fact often are progressive and worsen over time. (Allison Fine, 2007). Beyond physical care, the psychosocial care is essential, the relationship of the social worker to patient and family, and resulting knowledge of the family, becomes an important resource in the provision of high-quality care. Thus, there are various factors contribute to the disease and it very evident in many cases that unless the underlying determinants of health, illness are not addressed the continuum of health and empowerment from illness to wellness is a great challenge. (Centre for Chronic Disease Prevention and Control, 2006.) This paper focuses mainly the role of social workers in chronic illness addressing broad areas in curative health services.

Key Words: Chronic disease, chronically ill patient, Medical social work, etc.

1. Introduction
As the definition of Health by WHO clearly states that “Health is a state of complete physical, mental, and social well-being and not merely the absence of disease or infirmity”, Social workers role is significant in multidisciplinary health teams in health care institutions (Marshall & Altpeter, 2005). Those with chronic illness, depending upon the illness, are often live with physical, cognitive, and emotional challenges such as fatigue, chronic pain, balance issues, muscle spasms, neurological sensations, tremors, memory loss, difficulty regulating emotions, difficulty in multitasking, depressive episodes, anxiety, and panic episodes and the list goes on and on. And again, because these health issues are chronic, these challenges don't go away, and in fact often are progressive and worsen over time. (Allison Fine, 2007). Beyond physical care, the psychosocial care is essential, the relationship of the social worker to patient & family, and resulting knowledge of the family, becomes an important resource in the provision of high-quality care. According to the Chronic Care Model, optimal chronic care is achieved when a prepared, proactive practice team interacts with an informed, activated patient. While these models are showing effectiveness for some, they are heavily medically focused with no clear definition of the role of the social worker, even though social workers are still maintaining a front-line presence in health, mental health, and psychological services referrals in the health care system (Gehlert & Browne, 2006).

Definition of Terms
Social Worker
A social worker is a professional who work with the people to help themselves, so that people can manage their daily lives with respect and dignity.

Chronic disease

* Ph.D Scholar, 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.
Chronic disease refers to a diagnosis categorized in the biomedical system according to etiology, pathophysiology, signs, symptoms, and treatment that also implies an expected long duration and lack of cure. Conditions, syndromes, and disorders are similar, but are less well-defined (Bentzen N, 2003) Chronic disease includes patient with heart failure, heart disease, stroke, hypertension, cancer, Gastro Intestinal disorder, kidney and liver disease, lung disease, diabetes, depression or post-traumatic stress disorder (PTSD), peripheral neuropathy, and arthritis.

Chronic illness
Chronic illness refers to the lived experience of long-term bodily or health disturbance, whether related to a communicable or non-communicable disease, condition, syndrome, or disorder; and how people live and cope with the disruption. It is “experience of intrusive bodily or mental unwelcome unpleasant sensations” and includes phenomena such as fatigue, weakness, anomic, confusion, or social stigma.

Patients with Chronic illness
Chronic disease is a prevalent problem that is associated with poor functioning among multi-morbid patients. Patient with Chronic illness deal with a wide range of issues, including coping with grief and loss, depression, and anxiety about their illnesses (sometimes a symptom of the illness, sometimes a reaction to the illness); communicating with their family, and friends, about their illness; fear for treatment, ambiguity about the health condition and dealing with the economic needs etc. (Andersson R, Bury M, 1998). While looking at these issues, they aren’t entirely clinical, but they are psychosocial and have an impact in the area of the individual’s life – quality of life and overall wellbeing of the individual. The impact is significant and has a great control over the resilience of the individual. Living with a chronic disease means learning to live under new circumstances and has a significant impact on daily life and family life. Although the negative effects of chronic disease have not been clearly described, as it is multifaceted and the sufferings are not limited to these factors (Wolff Jetal, 2002).

Role of social work in dealing with chronic illness:

![Figure 1: Challenges of patients with chronic illness](image-url)
Patients with Chronic illness often experience psychological and social environment difficulties while trying to manage their disease. The main aim of social work in health care is to prevent and reduce negative social and psychological consequences of diseases for their wellbeing. The essential role of social workers while working with patients with chronic illness and it focus in addressing psychological, behavioral, and social factors.

Major Roles of Social Worker
Role of a social worker role in curative services,
1. Assessing patient and family psychosocial health needs:

   When analyzing psychosocial problems in chronic disease, psychosocial problems can be divided into two categories (a) problems that are caused by the disease and (b) social and/or psychosocial problems that already exist before the onset of disease and that becomes an obstacle in daily living (Annette Sverker, 2017). Assessing the different dimensions of health and the factors that contribute to the vulnerability to the problem is very much important. Assessing the physical wellbeing, social functioning, environmental adjustment, psychological wellbeing, financial capacity, cognitive capacity, family/care givers support system, etc, assessing these factors helps social workers to have an in depth understanding about the client and their support system, this will be very useful in the intervention plan.

2. Dealing with psychosocial Health Needs of Chronically Ill patients

   Dealing with the psychosocial needs of the patient is essential. It is important to diagnose and treat depression in patients with chronic conditions. Even mild depression may lessen a patient motivation to gain access to medical care and to follow up on regular treatment. Depression, resilience and level of hope are the key undermining variables which determine patient’s ability to cope with problems. Social workers need to focus on building resilience and instill hope which may exert a corrosive effect on wellbeing of the patients.

3. Care Management and care coordination:

   Care coordination is the deliberate organization of patient care activities between two or more participants (including the patient) involved in a patient’s care to facilitate the appropriate delivery of health care services (McDonald et al., 2007). Social worker understand the problem, strength, resources of the client for collaborate support and aid into integrated, efficient and constructive system that will allow client to resolve his or her problem.

4. Caregiver education and support:
Especially chronic disease like stroke, dementia and cancer patients depend on caregivers to a great extent for their day to day life. On the other hand the care givers of chronically ill patients have high level of burden and the ambiguity about the disease. This constant tension affects the quality of life of the care givers and in turn it may impact the quality of life of the patients. Hence social worker provide varying combinations of health information, training, access to professional and community resources, emotional support, counseling, and coping strategies (Jane Turner & Brian Kelly, 2000).

Provide educational information about the particular disease, stress management techniques, skills to manage care recipient behaviors, social support, cognitive strategies for reframing negative emotional responses and strategies for enhancing healthy behaviors are the areas social workers focus while working with the care givers of chronic ill patients. While working with the care givers, therapeutic group work intervention can be used as an effective tool.

5. Counseling and Environmental adjustment

Building resilience and instilling hope among patient is very important, this is achieved through in-depth counseling. This work includes helping individuals find strategies to cope with the difficulties of living with a chronic disease. Social guidance and information is not seen as a treatment but as complementary support systems which enhances the psychosocial treatment and or psychological treatment. Social guidance includes assessing living conditions, restoring social situations, and receiving help with authority or network contacts, information, and advice on welfare issues.

6. Discharge plan:

Discharge plan is the systematic process for preparing the client to leave the health care agency and for continuity of care. The main role of social worker is to assist the patient to manage successfully the changes from hospital environment to home environment. Environment adaptability is very much important for smooth transition from hospital to home care. The discharge plan includes:

- Orienting the patient and the care giver about the prescribed medication which includes the frequency, dose, expected duration to be taken, potential medication side effects. If an opioid has been started during the admission, outline the prescribing plan and include the potential weaning strategy as the pain resolves.
- Prevention and pain management strategies for the patients. Care givers should be educated well about implementing the pain management and the importance of maintaining adequate pain control on discharge.
- Restrictions and precautions associated with prescribed medication and treatment which may include limitation in driving, work and restricting in smoking and alcohol etc.
- Potential drug interactions between pre-hospital prescribed medication, over-the-counter medication and medications prescribed on discharge
- Details about the follow-up visit or any other referral services.
- Linking the patients and care givers to support groups,
- Referral for community-based rehabilitation services, etc.

2. Conclusion

Social workers have the responsibilities of coordinating various health programs that promote client well-being and ensure a continuum of care while working with patients with chronic illness. Planning shall be based on a comprehensive, culturally competent assessment with interdisciplinary input from the community along with community participation. Intervention and treatment plans are identified by the health social worker, in collaboration with the client and with other members of health team, to achieve objectives of overall wellbeing of chronically ill patients. Social workers shall be able to adapt practice techniques to best meet client needs within their health care setting to work effectively with individuals across the life-span, with different ethnicities, cultures, religions, socioeconomic and educational backgrounds in the public health domain.
Reference


12. Andersson R, Bury M. Introduction in living with chronic illness, the experiences of patients and their families, the academic division of Unwin Hyman, London 1998.


Skill Development as a Social Work Intervention for Unemployed Youths and Dropouts

R. Jenita Rathan*

Abstract
Unemployment is a growing problem worldwide. Unemployment or job loss is one of the most stressful of life events and can lead to diminished social status, disturbed social role patterns, financial debt, reduced self-esteem and feelings of guilt. The purpose of this review or a conceptual study is to determine the effectiveness of skill development as a social work intervention for unemployed and dropouts. Skill could be referred to as the inner-quality of work possessed by a person, either in order to complete a task effectively and efficiently or also the very aspect that sets one different from others for with outputs in having better quality of work & achieving quantitative results. Development could be said as the increase in level in the quality & output of one’s performance with increased & better skills / competencies, possessed. It also could be referred as setting a benchmark of working in a better way as compared to the previous performance skills development is the process of identifying the skill gaps, and developing and honing these skills. It is important because the skills determine the ability to execute one’s plans with success. This Conceptual study will give an overview on how to empower the youth through a Social Work Intervention who are unemployed and Dropouts.

Keywords: Skill Development, Social Work, Youth & Dropouts.

1. Introduction
Situation of unemployment and dropout in current scenario: Unemployment or joblessness is due to various Scio-economic factors which directly or indirectly affect the growth of the individual and also the nation. Both dropout and unemployment are interlinked in some way or the other. Students tend to dropout from because of lack of interests in studies, distractions, economic conditions, gender bias, etc. Social issues like family problems, addiction to alcohol, drugs, etc. Sometimes it’s because of the influence of other people that students tend to dropout from school.

Unemployment is another social issue which affects the community drastically. The major reasons of unemployment among youth are because of caste system, wherein the candidates are selected based on their community not the skill they possess. Slow economic growth also opens the door for unemployment. The constant increase in the population level slows down the growth of the country. Population is said to be the major reason for unemployment. The rate of unemployment is 11.1% in 10th plan. The decline in the industrialization decreases the level of employment opportunities resulting in unemployment. The underprivileged community is the most affected community because they aren’t provided any source for their livelihood. Even though Dr. Ambedkar brought in the concept of reservations, money is over powering all his efforts.

As of September 2018, India had 31 million jobless people out of which most of them were graduates. In the latest reports, it is said that the population of the country is 1360 million but the labor force rater is 53.79% which is a very smaller amount.

Skill development in India

India well aware of its population and the number of people being school dropouts and unemployed as come up various schemes and policies to empower and enhance the lives of the youth. Youth being the greater in number, the increase in unemployment and dropout rate directly affects the future economic labor market which in turn would decrease drastically. The central government of India had come up various developmental schemes which ensure the betterment of the youth of the nation. PradhanMantriKaushalVikasYojana (PMKVY) is a star scheme of the Ministry of Skill Development and Entrepreneurship. The main focus of this scheme is to enhance large number of youth who are either dropouts or unemployed to take up skill training relevant to their field of interest and capacities which will help them in achieving a better livelihood. The training and assessment fee for this scheme is completely paid by the Government.

*Student, Postgraduate in Social Work, Patrician College of Arts and Science, Chennai.
Another promising scheme of the Government is National Skill Development Corporation through which the standards of the hopeless youth and their perspective of life is altered completely. NSDC works based on three philosophies – Create, Fund and Enable. This scheme functions through partnership with multiple stakeholders like private sectors, international engagement, central ministries, state governments, university/school systems, non-profitable organizations, innovations. The other various schemes of the Government for skill development are:

- DeenDayalUpadhayaGarmeenKaushalyaYojana
- National Apprenticeship Promotion Scheme
- Craftsman training Scheme
- Skill India
- Make in India
- PradhanMantriKaushalVikasYojana
- PradhanMantriKaushal Kendra
- Skill Development for Minorities
- Green Skill Development Program

Types and fields of skill development

There are various types and fields of skill development to empower and upgrade an unemployed youth. They can be trained in various fields so that it would become a livelihood option at any circumstances. The unemployed or dropouts candidates can be given a vocational training in the fields like electrical, electronics, machinery, beautician, costume jewelry making, retail, marketing, carpentry, hospitality, food and footwear processing, computer accounting with tally, bakery products, compressor and AC repair, on call jobs, Spoken English, etc. Personal skill training is also needed in order to excel in any field, like, communication, interview skills, etc.

Development in these fields and skills would pave a great way to unemployed and dropout youth of the nation for their as well as the nation’s progress. The state being neglected from the mainstream society would create a huge emotional toil in the young minds. This can only be suppressed by empowering the minds and by developing the skills of the youth. The unemployed and dropout youth form a major portion of the country’s population which eventually leads to the decline in the progression of the nation and the particular community. This issue has to be taken quite seriously but in a professional way.

Skill development as a social intervention tool for dropouts and unemployed

Life skills are an essential part of being able to meet the challenges of everyday life. The development in these life skills helps in the financial and community development of a nation. On a personal note, developing skills also helps to empower oneself and improve their social acceptance. To broaden one’s opportunities and to enhance their career growth, working on their skills plays a vital role. Being unemployed after completion of a degree or being a school or college dropout, it might seem that all the doors are closed for livelihood.

Skill development can be used as a social intervention tool for both unemployed and dropouts to empower them and to enhance their livelihood. There are a few stages in the social intervention process for both unemployed and dropouts through which their lifestyle and social growth can be augmented. Psychologist Bruce Tuckman came up with an idea of different stages of group development- Forming, Storming, Norming and Performing. Later he also included Adjourning in his article Developmental Sequence in Small Groups, 1967. Through these stages the intervention process for both dropouts and unemployed youth can be carried out.

Mobilization

Identification of Beneficiaries

Follow-Up

Case Study

Need Assessment
Training (both personal and professional)

Placement

Follow-up

According to Tuckman a group is first formed and then common objective is being discussed then they work for it and later by the end, the group is being adjourned for the better of the individuals. Likewise Skill Development can be carried out a social intervention for both dropouts and unemployed youth. The first stage involves the mobilization phase, wherein a community should be identified and mobilized about the importance of education and employment according to the ethics of social work. Through mobilization, the much needed beneficiaries can be identified. The demographic details of the identified beneficiaries are collected and documented. These details are categorized accordingly and the follow up of the beneficiaries would be carried out.

The interest and approach of the beneficiaries towards the skill development program is followed. After the forming stage, the most imperative stage, the storming stage begins wherein a proper case study about the candidate is done to identify the capacity of doing a particular job, field of interests and self-obtained skills. Through need assessment the required training on both personal and professional skills can be scheduled. The identified beneficiaries would be grouped together so that the candidates get to know each other. Skill development in the field of interest would be an add on advantage.

The training programme connects the aspiration and potential of the young people to available market opportunities and builds their employability skills and map job potential based on individual strengths and mobility. The training sessions majorly concentrates on self development, leadership, employment, etc. throughout the training sessions counseling plays a vital role in ensuring the risks of dropouts and discomfort. The training sessions also builds up confidence in the young minds and helps them to break their inferiority complex. The skill development training would be more effective if it’s through play-way method, because the young minds would love to learn through activities rather than boring long lectures. One of the fundamental topics should be Goal Setting. The young wavering minds need to be taught to focus on their lives and fix SMART goals. Professional training should only be based on field of interests of the candidate. All aspects of a particular field should be taught to the candidate so that they would be able to survive any obstacle in that particular field. Creative thinking and positive vibe of both the trainer and the trainee is needed. Performing stage in this context would be the training sessions and placements wherein the young people work as groups in empowering themselves for a better future.

After the young candidates are equipped completely they are all set to face the interview. The ultimate results of the entire social intervention process can be noted in the placement phase. The candidates attend interviews in their field of interests and based on their skills. The only way to evaluate the progress of the candidate is through one-on-one interview. It’s not the end of the process; it is the responsibility of the trainer to follow up the process. Through follow up, the whereabouts of the candidate, their interest and approach towards the job, the level of improvement in their Socio-economic condition can be analyzed.

The reason for being a dropout or unemployed might be more than a few but through developing their skill both personally and professionally which helps them to enhance their lives and upgrade themselves for this ever growing world. Skill development training helps in identifying oneself and analyzing for the better version. It is very important to improve the mental and physical development of the youth so that the rate of dropouts and unemployed gets reduced.

Deci and Ryan’s self-determination theory

Deci and Ryan are American Psychologist who experimented and proposed the Self Determination Theory in 1985. This theory states that motivation falls on a scale that ranges from ‘extrinsic’ (controlled) to ‘intrinsic’ (autonomous). When we are intrinsically motivated, we complete tasks out of a fundamental interest and enjoyment in the activity itself – the pinnacle of motivation. Likewise skill development should be considered as a social intervention wherein all the aspects of social work put together helps in molding an unemployed and dropout youth. The method of training the candidates should be creative because it helps in boosting the interests of the candidate towards learning.
2. Conclusion

It is the high time to realize and react towards the issue of unemployment and dropouts in our country. It is the responsibility of our country and people to open various avenues by which the youth especially unemployed and dropouts accepts their own responsibilities and no one remains idle and jobless, because being jobless is like burden on the economy of the country. With these new approaches towards skill development, India can definitely move towards its target.

Reference

2. bank, w. (n.d.). India Unemployment Rate.ceic .
Community Organization through Common Livelihood Federation: Integrated Agricultural Cluster Development Programme for Empowerment of Tribal Women Farmers

Dr. N. Rajavel*

Abstract
This paper highlights the common livelihood federation in integrated agricultural development and empowerment of tribal women. This is an evident of public private partnership in community development and community organization. It is a demand drive for sustainable livelihood through systematic approach to community organization method and practices. The sustainable approach has increasingly been directed towards poverty reduction as expressed in the millennium development goal.

Keywords: Tribal women; Livelihood; poverty elevation; Public Private Partnership (PPP)

1. Introduction
The sustainable livelihood approach acts as an operational tool to assist work on poverty reduction (Aterelli and Carloni, 2000). The pudhuvaazhvu project is funded by World Bank. It focuses mainly poverty eradication and livelihood promotion for identified beneficiaries. The target households were identified through “Participatory methodologies” like Social Mapping and Wealth Ranking. The Village Poverty Reduction Committee (VPRC) was formed by village panchayat. The program focused utmost transparency in the system on process. Identifying the potential beneficiaries under the scheme adopted the participatory process. The reviewing program through village panchayat (Grama Sabha), Monitoring through MIS (Management Information System) also conduct post completion scrutiny through Social Audit.

Profile of PudhuVaazhvu Project – Coimbatore District: Coimbatore is one of the most industrialized districts of Tamil Nadu. In 2011, Coimbatore district had a population of 34,72,578 of which male and female were 17,35,362 and 17,37,216 respectively. The initial provisional data suggest a density of 748 in 2011 compared to 631 of 2001. Total area under Coimbatore district is of about 4,850 sq.km. Average literacy rate of Coimbatore in 2011 was 84.31, out of which male and female literacy was 89.49 and 79.16 respectively. With regard to Sex Ratio in Coimbatore, it stood at 1001 per 1000 male well above the national average of 940. The Coimbatore District Society of PudhuVaazhvu Project was formed in the year 2005 and the project implementation was commenced in 2006.

Location of the Common Livelihood Federation: Thondamuthur is a rural block adjacent to the Corporation of Coimbatore. The block is multi lingual with primary occupation of agriculture. There are 10 Village Panchayats in the block in which PudhuVaazhvu Project is being implemented on 9 Village Panchayats. There are seven tribal VPRCs and there are thirteen tribal settlements namely Sadivayal, Vellapathy, Pottapathy, Kalkothipathy, Seenagapathy, Nallurpathy, Dhanikandi, Pattiyarkovilpathi, Mullankadu, Jagirporathy, Sarkarporathy, Madakadu and PatchanVayal tribal hamlets in Thondamuthur Block. The sixteen Women SHGs are functioning in the tribal hamlets and they are cultivating 303 Acres and 452 Acres cultivable lands.

The Tribal Communities: The hamlets of the Thondamathur block of Coimbatore district have several tribals including, Irulas and Mudugas. These hamlets have frequent victims of discrimination, violence and forcible encroachments of their lands by outsiders, wage discrimination, infringement of their rights of livelihood, impacting them with severe malnutrition, high impoverishment, heavy mortality and poor rates of literacy. Most of them were low paid agricultural labourers in the neighbouring fields, at the mercy of money lenders and women particularly were open to abuse and children too worked to make family ends meet.

Significance of the Study: Even though India is an agricultural country; the farmers live in deprived condition. Mainly the women involved in agriculture activity are not counted even though they work equally with male farmers. The interesting feature and importance of common livelihood federation program is it brings changes in the tribal women through empowerment and economic development. The approach of the program is adopting PLA- Participatory

*Assistant Professor, Department of Social Work, Bharathidasan University, Tiruchirappalli.
Learning and Action

The trend suggests people’s verdict is considered and counted. The bottom-up approaches were implemented. The approach of participatory will contribute greatly in the performance appraisal, eventually lead to establish and strengthen the gross root democracy in rural India.

The objectives of Common Livelihood Federation: The main objective of Common Livelihood federation is to improve the livelihood of the targeted poor and rest of the poor. The development of target people are through skill training and capacity building, financing productive investment, common infrastructure and common facility centre for enhancing existing livelihood activities of the poor and vulnerable households.

Specific objectives:

- Integrating the Common Livelihoods Groups for functioning effectively and sustainability
- Increase the production and decrease the expenditure
- Marketing production things at large level
- Value added to the production things
- Reduce the production expenditure and increase the income
- Arrange the infrastructure and advance technologies
- Jointly working together with Government and Non-Government departments
- Arrangements for large level fund source

Project Interventions:

1. Capacity building trainings to women farmers by Agriculture, Sericulture and Horticulture Departments through ATMA Scheme and SRI Technique (Rice cultivation), Technical supervision and Guidance in all stages of crop production.
2. Supply of Seeds (50% subsidy), supply of saplings (with subsidy) and supply of fertilizers with subsidy.
4. Provision of Weeder (1 no.) at Rs. 36000/-, 3 power tillers at Rs. 135000/- per tiller through convergence with Agriculture Department.
5. Supply of 4 free sprayers at the cost of Rs. 6000/- per sprayer with SGSY funds.
6. Supply of 10 Battery lanterns (Torches) at Rs. 850/- per Torch from CLG funds to combat animal infestation.
7. Special Drought relief assistance of Rs. 3000/- per family to 27 tribal families.

Proposed Interventions by Common Livelihood Federation (CLF):

1. Provision of tractors for land reclamtion.
2. Provision of Diesel motors (pump sets) for irrigation from channel waters and other minor irrigation facilities.
3. Digging trenches around fields to keep away the animals.
4. Provision of Tarpaulins for thrashing and covering the produce.
5. Exposure visits for firsthand knowledge in all Agri activities.
6. Construction of storage Godowns

Tribal communities in Coimbatore have rich experience in agricultural activities where they had their indigenous agricultural practices in cultivation of food grains like Rice, Millets and pulses. Tribal communities were primarily dependent on occupations in agriculture and minor forest collection. Majority of the tribal communities are engaged as agricultural labourers. Due to their very small holding and the very low productivity of the land, most households have a living by maintaining a diversified pattern of occupations; no single activity provides sufficient resources to entirely ensure their livelihoods. Women’s work share is also critical for the survival of tribal households both in terms of provisioning food and income as well as in the management of resources.

The villages and the surrounding forests were restricted to them for Marginal Forest Product (MFP) collection threatening their livelihood giving way to the loan option of agriculture related activities. Only subsistence agriculture was possible on the foothills of their settlements. Fruits and vegetables were grown but not enough for commercial purposes. Unable to cope with the high cost on fertilizers and pesticides and the need for daily bread has turned many tribal community women work as daily wage earners in the neighborhood farms.

The increase in income could become possible only by all-round support of the line departments, and project investment which can lead to sustainable livelihood enhancement. With the appropriate technology inputs, unutilized lands will be utilised to the fullest extent integrating with indigenous agricultural practices and look for higher productivity and increased income. Trainings to farmers, inputs of fertilizers, seeds, exposure visits will lead the tribal
community to agricultural activities looking for economic independence and social empowerment, mobilization, capacity building, financial linkages and various interventions across the tribal settlements, will create the deprived tribal community becoming “progressive farmers” by enhanced information, inputs, training and technological empowerment.

Impact of PudhuVaazhvu Project on tribal communities: Hopes regained and faith restored: Following are the impact of PudhuVaazhvu Project on tribal communities. The tribal agricultural farmers participated in higher level in Decision making and inclusion of women in Self Help Groups, the access of employment opportunities through skill trainings, through that increased levels of income and increased number of children attending schools. The students gaining admission in higher educational institution, the saving habits were motivated and increased, then freed from the clutches of money lenders. Integration of women and enabling them to take up livelihood activities. Access to welfare schemes and services, Government at work in tribal areas with the participation of the community for better infrastructure, roads and transport. Increased number of livelihood activities and created social capital among the community.

The major issues addressed by the United Nations (UN):-
1. Provision for land reclamation, tilling and preparation which involves high costs towards rental of tractors.
2. Though there is water in the habitations it is not properly distributed to all fields due to lack of minor irrigation facility and motor pumps.
3. As the tribal communities live in foothills under the forest cover there is wild animal menace which destroys the cultivation for which trenches or solar fencing will have to be done.
4. No sheds for storing their produces.
5. Post harvest practices have not been followed up in grading, sorting and then marketing.
6. Training, and inputs in new agricultural practices have to be conducted regularly for knowledge dissemination to the entire farming community.
7. Training on Milch animal rearing has to be taken in a higher level.
8. Focus to be given on Organic cultivation as the opportunities are plenty for market linkages in Coimbatore.

Agricultural development activities plan: Activities planned under Common Livelihood Federation - CLF are integrated agricultural cluster development approach among tribal community members. Women from the tribal communities will lead by the participation of every household in the community in agriculture and allied activities. Agriculture development activities combining both the traditional practices, local resources and technology and modern practices will be utilized in agricultural development. The activities are planned with the guidance of Agriculture related departments. The activities include agricultural planning with the community and the Agriculture experts to take forward the activities. They include pre harvest inputs, post harvest inputs and end to end solutions for sustainable development. The main part of the activity will be on food crops, vegetables, fruits and supplementary activities like floriculture and herbal cultivation. The project will support in ensuring support services, input trainings, creation of agri based social capital, technology transfer and better market linkages. The main advantage of the project is that communities’ contribution in the form of labour will maximize the profits to the farmers and create a sustainable agricultural based livelihoods.

Benefits of Common Livelihood Federation are:
- Creation of Common assets based on the activity
- Access to higher credit linkages from banking institutions
- Common Marketing/procurement of products / Raw materials by partnerships through agreement.
- Profitable price realization for products.
- Technical assistance to improve the quality of the Products.
- Reducing the cost of Production by common procurement of raw materials.
- Getting convergence various departments.

Legal Status of CLFs: in order to get credit linkages from financial institutions, the CLF are to be registered under the Tamilnadu Society’s Registration Act 1975.

Agriculture Tribal Farmers Beneficiaries & Cultivating Lands: Total number of tribal area 13 Hamlets, Beneficiaries 487 Members, Cultivable land Area 417 Acres, Total Area under Cultivation 288 Acres, Available land for utilization 129 Acres. Total Tribal Settlement Lands 300 Acres, Leased Lands117 Acres.

Executive Committee Members of the CLF: The executive committee consists of fifteen members including the President, Secretary, joint secretary and treasurer. The subcommittees also were created in the names as Finance...
& Procurement, Resource Identification and Classification for Livelihood Action, Marketing Linkages, and each committee represented two members.

Tribal Women Agriculture Farmers: The tribal agriculture cultivation done by the women farmers, in 137 acres of land in various hamlets villages, the crops were mainly paddy in 97 acres, vegetables 35 acres, and 5 acres in cotton.

Formation of CLF: The Common Livelihood Federation was formed among the tribal women agri farmers at Thondamuthur Block in the month of Sep’2013. Bank Account was opened at Syndicate Bank, Karunya on 06.09.2013. The Federation registered under is TN Societies Act 1975 on 13.12.2013. The basic training on Governance and Accountability was given to the CLF Members from 13.09.13 to 15.09.13. The Tribal Settlement Lands Preparation:

The tribal settlement lands were prepared at Sadivayal, Seengapathy, Vellpathy, Pottapathy, Thanikandi and PachanVayal through our CLF effort in the month Oct’2013. There are 120 Acres of lands prepared for cultivation. The seeds of vegetables, cotton, cock horn flower and paddy distributed to the tribal women agri farmers. Periodical visits and meetings are organized for the follow-up of cultivation to get better results. The training on SRI cultivation, mulberry cultivation, other cultivation techniques and methods were organized with support of Agriculture, Horticulture and Sericulture departments to the CLF members.

Nadeb Compost Preparation: The tribal women farmer and her family members got trained up on shed of Nadeb Compost for preparing vermicompost and organic fertilizers to promoting organic cultivation among them. The Project trained them through the intervention and they showed interest in it and the nadeb shed developed in various fields of tribal settlement lands.

Training on Organic Cultivation

The training was organized twice for CLF members on “Organic Cultivation” through Mr. Natarajan, Poihai Trust, Tirunelveli District. The training was given to the CLF members in the months of Sep’13 and Jan’14 on various methods used for organic cultivation. In that training the trainer gave practical training on preparing AmuthaKaraisal, PanchaKaviyam, PoochiVirattti, MeenAmilam, ThemorKaraisal, process of paddy cultivation, vermicompost (all organic preparations), Ashola etc. The tribal women agri farmers took very much interest and themselves prepared the above natural inputs fertilizers for organic cultivation. Based on this training, we promoted organic cultivation among the women tribal agriculture farmers. Paddy cultivation tribal women agri farmers are done on nearly 30 Acres by SRI Method with organic inputs like Ashola, Ashospirillam, Paspo Bacteria, Sudamonas etc. For paddy cultivation they did not use any chemical fertilizers at Sadivayal Tribal Village. The Cotton “Surabhi” variety is cultivated on nearly 40 Acres by organic method at Sadivayal Tribal village. The tribal agri women farmers are also cultivating vegetables, mulberry, coarse grains and turmeric using organic methods.

Exposure Visit: The exposure visits was organized for CLF members and they visited KrishiVigyan Kendra (KVK) – UzhavarPayirchiNilayamKaramadai. During the exposure they learnt the methods of organic cultivation, handling the machineries, organic techniques and methods cultivation by field exposure through this exposure visit.

Procurements:One Tractor, Oil engine motors and Battery cum socket were procured by the CLF for cultivation. The Tractor is used on need basis by tribal farmers in 7 tribal villages and they pay the minimum contribution for tractor usage at a hire charge of Rs.100/- per hour. The diesel and driver salary are paid directly by the user. Oil engine motors were procured (two numbers) to deliver water from river for cultivating lands through pipe lines at Vellpathy and Pottapathy hamlets of Sadivayal Village. The battery and sackers with chargers procured (12 sets) for 7 tribal villages for preventions of wild animal.

Common Agriculture Equipments received from Converging Departments :The convergence departments are supporting the tribal agriculture women farmers in various ways (that is) organizing periodical training on Paddy Cultivation in SRI Technique, Seeds selection & treatment, land preparation, preparation of organic fertilizers, Mulberry cultivation, Cocoon production, raising saplings, setup of water irrigation system and water channels, methods of pesticide control, marketing support and orientations on seasonal cultivations. They are also supplying seeds, organic fertilizers, Agriculture equipments and other needs at subsidized /Grant basis.

Sugarcane Breeding and Research Centre (ICAR) – Coimbatore:The Sugarcane Research Centre (ICAR) in Coimbatore city is tied up with us and conducted programme for distributing common agriculture equipments and seeds on 01.02.2014 at Sadivayal Tribal Village of Thondamuthur Block. The CLF members and our Project staff organized this programme and received the common agriculture equipments during the programme as detailed below.
The centre gave orientation on disease control and cultivation techniques to CLF. The CLF submitted their additional requirements to the centre. Agriculture Equipment’s/Seeds/Fertilizers were purchased the value Rs.67000.00 (Motor Power Sprayer, Hand Power Sprayer, Water Sprayer for Nursery, Plastic Tray, Spade, Paddy Seeds (CO 51), White grain Seeds, Vegetables Seeds, Marigold Seeds, Vermicompost Fertilizer). The funds received from Sources of Funds for the Business Activity Plans: The beneficiary members contribution (Minimum 5 %) PVP fund (75 %) for common assets20 % from bank loan/other Projects / Government schemes. The financial assistance done by PudhuVaazhvuProject for women farmer’s federation Rs.51.50 lakhs.

Activities Planned for 2nd Installment Funds (Rs.33.45 Lakhs)
1. Land Preparation: Jungle clearance and land levelling activities in 95 Acres of forest land in Thanikandi hamlet.
2. Exposure Visit to organic farms by members of the federation: 2 days exposure visit to Aaduthurai Paddy Research Institute, Thanjavur, District.
3. Providing irrigation Pipe lines for water supply in Sarcarporathil hamlet lands: JCB Work (Pipe line arrangement), Check Dam and Water Tank construction, construction of Farm pond, Pipe line arrangements (3 inch HTPC).
4. Land preparation and summer ploughing in all agriculture lands in the entire forest land area: Members Contribution
5. By Convergence with other Government Departments and ISHA foundation supporting funds, inputs, implements and allied services: Construction of storage Godowns, Electric fencing, digging trenches for Elephant menace.
7. Training and exposure visit on Marketing techniques, Value addition, safe storage and packaging and arranging Market tie-ups:
8. PGS certification for seeds - formation of small groups, training on PGS, Agreement, selection of members, tie-up with Key stone foundation, Kothagiri – PGS pattern guidelines follow-up.
10. Constructing concrete supply canal from Sadiyaamman stream to Seengapathi Hamlet:
11. Trainings: Training on Post Harvesting and Techniques, Create Awareness Training on soil testing, Training on land reclamation and land preparation, Training on seed treatment and nursery raising, Training on Water management.

Details of convergence with other government departments and schemes:-
1. Forest Department: MFP Collection rights, Funds for livelihood development, Tribal Welfare Cards, Job opportunities in Tourism Guide & local facilitating staff & Ecotourism.
2. Agricultural & Horticulture Dept.: Seeds, Implements, Consultancy services, Technical Supports, Subsidy for high Yielding seeds, Capacity Building and Fertilizers
4. Sericulture Department: Mulberry cultivation, Cocoon rearing, silk reeling and marketing.
5. ATMA Scheme (Agriculture Department): Training, seeds, agricultural, implements - pre harvest and post-harvest practices through ATMA schemes trainings.
6. Civil Supplies Department: Ration shop in tribal areas (Full/Part Time).
7. Revenue Department: Community certificates, welfare cards, OAP/KISAN (Uzhavar) cards.
8. DRDA: Digging trenches for animal menace Through NREGS.
9. Women Development Corporation: RF, SGSY Infra funds for poly green houses for protective cultivation.
10. DDRO: National ID card, MG Grants, Aids and appliances and Screening Camps for differently abled
11. Nationalized & Co-operative Banks: Loans to self -help groups/DRI loans to individuals – Educational loans to students for higher education.
12. Sugarcane Breeding Institute (ICAR), Coimbatore: Agriculture implements, seeds, organic fertilizers and other needs.
2. Conclusion

So far many poverty eradication programmes were implemented. The PudhuVaazhvu Project used the bottom-up approach. The planning of the community participation was ensured from the beginning onwards. The beneficiaries took part in each and every step of project implementation and execution. The tribal who are the weaker section of the society are more connected with agriculture and forest livelihood. Women are equally contributed for development of agricultural activity. The tribal women agriculture farmers gained knowledge on scientific methods, logical, marketing of product networking. The major challenge is continuous motivation and mobilization. Through pudhuvaazhvu project objectives are achieved and reached sustainable development and brought proactive change in the livelihood among the tribal women agricultural farmers.

References

8. UNDP http://www.undp.org/

M.Kalaiyarasan*
Dr. M. Daniel Solomon**

Abstract

Social Work is the practice-oriented discipline in which fieldwork practice is playing a pivotal role. The social work students (trainees) must fulfill the basic requirements of the fieldwork practice hours to complete their Social Work course, for which, it is mandatory to complete the prescribed form of field work practice schedule developed by university/ institutions. The main aim of the paper is to understand the perception of social work trainees on Feasibility of practicing Social Work Methods at Field work agencies in Tiruchirappalli. In order achieve the overall aim of the paper the following objectives were framed: to know the strengths and difficulties in practicing Social Work methods at the field work agencies by perception of Social Work trainee, to understand the availability of time and resources to practice the Social Work methods at field work agencies by perception of Social Work trainee, to understand the type of social welfare projects of the NGOs/ Organizations functioning in Tiruchirappalli. Descriptive research design has been adopted in this study. About 43 Social work students who are pursuing their second year post graduation degree were selected in a social work education offered college in Tiruchirappalli by adopting purposive sampling method. Self-structured questionnaire was prepared and used for this study. The data was collected from the selected social work trainees through questionnaire method.

Keywords: Social Work Trainees; Field work practices; Social Work Methods

1. Introduction

Practice of social work methods at field work agencies is an essential component of social work students because a major task of the social work profession is “to transform knowledge and understanding into practice, principle and behaviors” (Gitterman, 1989 as cited Csiernik & Lou, 2004). In July 2014, the recent social work definition was sanctioned by the International Federation of Social Workers (IFSW) general meeting and the International Association of School of Social Work (IASSW) assembly. The definition which was considered as a global definition of the social work profession is “Social Work is a practices-based profession and an academic discipline that promotes social change and development, social cohesion, and the empowerment and liberation of people. Principle of social justice, human rights, collective responsibility and respect for diversities are central to social work. Underpinned by theories of social work, social science, humanities and indigenous knowledge, social work engages people and structures to address life challenges and enhance well-being”. (International Federation of Social Workers, 2014). The above definition of social work profession begins with social work is a practices-based profession. So the practice of social work methods in field is essential aspect of the social work students (trainees) to become professional Social Workers. The main aim of the study is to understand the perception of Social Work trainees on Feasibility of practicing Social Work methods at Fieldwork agencies.

Fieldwork Practices in Social Work Education

Social work education is a practices based professional course. The education shapes the profession’s future through the education of competent professionals, the generation of knowledge, and the exercise of leadership with the professional community (Council on Social Work Education, 2008). The aim of the Social Work education is empowering the people to help themselves rather than making them passive receiver of service. The council of Social Work education in 2008 framed the generalist practices definition and it highlights “Generalist practice is grounded in the liberal arts and the person and environment construct. To promote human and social well-being, generalist practitioners use a range of prevention and intervention methods in their practice with individuals, families, groups, organization and communities. The generalist practitioner identifies with Social Work profession and applies ethical

*Doctoral Research Scholar, PG & Research Department of Social work, Bishop Heber College, Tiruchirappalli
**Associate Professor, PG & Research Department of Social work, Bishop Heber College, Tiruchirappalli
principal and critical thinking in practice. Generalist practitioners incorporate diversity in their practices and advocate for human rights and social economic justice. They recognize, support and build on strengths and resiliency of all human beings. They engage in research informed practices and are proactive in responding to the impact of context on professional practices.

Social work students mandatorily practice the methods of Social Work at field work agencies in order to gain the professional knowledge, skill and competence to become professional Social Workers. The Social Work researchers namely JayaranJebaseelan, 2017 found that Social Work students perceived certain fieldwork agencies with wider scope to practice the methods of Social Work but there were also fieldwork agencies, where the scope for Social Work practices was low due to lack of Social Work professional and also they found that Fieldwork enable the students to come in contact with needy people, their problems, their reactions to the problems and their attitude towards Social Workers and thus the students discovered their ability to help. Social Work trainees perceived fieldwork as a supervised Social work practices that provide opportunities for them to match theory and practice. According to Kapoor 1961 as cited Chandrapa&Saxena, 2017 Fieldwork enabled Social Work trainees to develop their knowledge, skills through practical application and Fieldwork gives to a social work curriculum the indispensable opportunity to provide supervised practices in the application of theoretical methods of the discipline so that the students are able to practice effectively with human beings in different social situations

Rambabu, (2013). Studied the “Status of Field Education in Social Work: Existing practices in Central Universities in Delhi”. The author found that vast majority, 96.0 percent of the social work trainees said that field work education is very important in social work education and training. More than half, 76.0 percent of the social work trainees were involved in practicing community organization and a vast majority 92.0 percent of the trainees were involved in social group work and one fourth of the social work students were engaged in social case work and most of the social work trainees were engaged in health sector and few of the social work trainees were engaged in advocacy and legal aid activities. The researcher also observed that the students were involved in practicing social group work and community organization but less emphasis was given for practicing social case work method.

Further he found that more than half, 60.0 percent of the social work trainees were satisfied with faculty supervisor with regard to field education and less than half, 40.0percent of the social work trainees were satisfied with the agency supervisor in terms of enhancing knowledge, developing attitude, imbibing values and applying theories in social work practicum. But most of the social work trainees agreed that both the supervisors are playing vital role in providing field work training and the faculty supervisor has to render little more time for guiding the learners (trainee) in terms of helping them to imbibe values and attitude. Social work trainees reported that they did not get adequate time to practice all the methods and it was also known from the trainees that there was limited scope to practice social work methods in some agencies. Sometimes, the trainees were engaged in irrelevant tasks and placement was not related to their specialization.

2. Research Methodology

The main aim of the study is to understand the perception of Social Work trainees on Feasibility of practicing Social Work methods at Field work agencies. The following objectives were framed in order to achieve the aim of the study. They are to know the strengths and difficulties in practicing Social Work methods at the field work agencies hyperception of Social Work trainees, to understand the availability of time and resources to practice of Social Work methods at field work agencies hyperception of Social Work trainees, to understand the type of social welfare projects of the NGOs/ Organizations functioning in Tiruchirappalli. Descriptive research design has been adopted in this study. About 43 Social work students who are pursuing their second year post graduation degree were selected in a social work education offered college in Tiruchirappalli by adopting purposive sampling method. Self-structured questionnaire was prepared and used. The data was collected from the selected Social Work trainees through questionnaire method.

3. Findings

While analyzing the Location of NGOs/ Organizations, It was observed that more than half, 62.8 percent of the NGOs and Organizations is located in Urban areas and more than one fourth, 34.9 percent of NGOs/Organizations is working on general and mental health projects, followed by small scale industries/manufacturing, providing welfare measure to the poor, Educational empowerment, Child welfare, Agricultural, Self-Help groups, Special education and care, De-addiction centers and More than half, 62.8 percent of NGOs/Organizations did not appointed Social Work Graduate in their NGOs/Organizations, Meager, 11.6 percent of Social Work trainees reported that they are paying to
NGOs/Organizations (Psychiatric and Clinical Setting) for their fieldwork training. Nearly three fourths, 72.1 percent of NGOs/Organizations were not assigned the Social Work graduates as fieldwork supervisor to the trainees. More than one fourth, 34.9 percent of the Social Work trainees are doing mostly administrative work in their fieldwork agencies and followed by Field visit, Assistance and Social work methods practices. More than half, 55.8 percent of the trainees said that it is hard to practice all the six Social Work methods in the placed agencies. More than half, 55.8 percent of the trainees said that they have enough time to practice Social Work methods in placed agencies. More than half, 55.8 percent of the trainees said that they don’t have enough resource to practice Social Work methods in placed agencies. More than half, 55.8 percent of the trainees reported that agencies are proving enough time, space and resources to practice Social Work methods.

Nearly half, 48.8 percent of the Social Work trainees said that Non-Social Workers are monitoring while practicing their Social Work methods in placed agencies. Nearly three fourths, 74.4 percent of the trainees reported that they did not receive any special training with regard to practices of Social Work methods. Nearly half, 48.8 percent of the trainees said that agency is allowing somewhat to practice Social Work methods and followed by Satisfied and Unsatisfied, less than half. 41.9 percent of the trainees reported that they learn somewhat on practicing Social Work methods in placed agencies followed by Unsatisfied and satisfied. Majority, 83.7 percent of the trainees said that they cannot practice all the six Social Work methods in placed agencies, More than one fourth, 27.9 percent of the trainees said that the Social Action as methods of Social Work is very difficult to practice in placed agencies and followed by Social Welfare administration, Social Work research, Social group work, and Social case work and community organization.

More than half, 58.1 percent of the trainees reported that the agencies is not convenient place to practice the Social Work methods, Nearly three fourths, 74.4 percent of the trainee said that they don’t have separate cabin to sit and work in the placed agencies, More than half, 53.5 percent of the trainees reported that they are engaged in more and more administrative work rather than Social work practices in the placed agencies, More than half, 65.1 percent of the trainees said that they were not receiving any professional way of guidance by agency personnel on practicing Social Work methods.

Discussion

The researcher has made a discussion on the present study findings with similar findings of the different study. The findings of the present study show that more than half, 62.8 percent of social work agencies did not appoint professional social workers and more than half, 58.8 percent of trainees said they don’t have enough resource to practice Social work methods. The similar findings were found by Jayarani&Jebaseelan, 2017Social Work students perceived certain fieldwork agencies with lower scope to practice the methods due to lack of Social Work professional and as found by Rambabu, 2013 Social work trainees reported that they did not get adequate time to practice all the methods and it was also known from the trainees that there was limited scope to practice social work in some agencies. Sometimes, the trainees were engaged in irrelevant tasks. The similar findings was found in the present study that nearly half of the trainees reported that they did not get adequate time to practice all the Social Work Methods and more than half, 53.5 percent of the trainees reported that they are engaged in more and more administrative work rather than Social work practices in the placed agencies.

4. Suggestion and Conclusion

The result of the present study clearly shows that there is a moderate level of feasibility to practicing Social Work methods at fieldwork agencies. So the board of study members of the University/Institution may thoroughly assess the profile of agencies before placing the Social Work students and can prepare the list of resourceful social welfare agencies and should suggest the Social Work Course offered colleges must be sent their students to those selected agencies. And also Social work course offered University/Institution can conduct agency supervisor meet once in a year, in that meet can request that the agency supervisors to be sensitized to provide fruitful professional training to the Social work students (trainee) in order to achieve the learning objectives of fieldwork practice.
References


Influence of Social Media among Nazareth Business Learning Centre students at Nazareth College of Arts and Science – Chennai

J. Angelin Chitra*
Dr. A. Umesh Samuel Jebaseelan**

Abstract
Social networking sites are currently used frequently by heaps of individuals. Internet has become more than means of in quest of info. SNS has been extensive that they have not only caught the attention of academic and industry researchers worldwide but also us, in particular. Social networking sites are now being investigated by numerous social science researchers and an increasing number of academic analysts are becoming more and more interested in studying Facebook, Twitter, and other social networking services, because of their probable impact on academic performance. Most sites service strangers connect with other individuals based on given shared personal benefits, radical commercial views and leisure events. Many students always log in to their account on Facebook, Twitter, Instagram, Hike, WhatsApp, WeChat, Viber, Snapchat, Telegram, YouTube Channel etc. as a part of their everyday humdrum. The amount of logging in to these social networking sites, every day by the students are implausible. That’s why many students have been accusing various social networking sites for their decline in ranking point. This up-and-coming spectacle provoked to look into SNS and why they affect students theoretical performances. The target population for this research taken from Nazareth college of Arts and Science who perusing their final year and part of Nazareth Business Learning Centre (Is an innovative student support system aimed to bring out the creativity of students. This also provides platform for the students to apply their theoretical knowledge into practical and real-life situation). this was done to have a better insight into the research as the target population was one of the most avid users of these sites and could provide excellent responses.

Key words: SNS -social networking site; Internet; Academic Performance; Social media

1. Introduction
Nazareth Business Learning Centre: Is an innovative student support system aimed to bring out the creativity of students. This also provides platform for the students to apply their theoretical knowledge into practical and real-life situation. Nazareth Business learning Services is an innovative student support system conceptualized to solve the problems of student’s community faced by large. Besides providing the training and personality growth, NBLC provides a platform for the students to experiment and learn in a practical method. The objective of this system to bring out the creative and entrepreneurial qualities of students and help them catch hole of their dreams to become self-employed having gained practical knowledge and skills in establishing and managing industry of small-scale size. Every student will be provided with opportunities with hands on experience to conceptualize, design, and execute a project within the college campus itself.

2. Research Methodology
Primary objective
● To examine the influence of social media on their academic performance
● To study the socio- demographic characteristics of the respondents
Secondary objective
● To examine how the students are using the social networking sites
● To investigate the influence of social media usage among students
● To evaluate academic performance of social networking sites among youth.
Scope of the study
NBLC students are exposed to various kind of social Networking Sites on the internet. This study will help the Social Networking Sites can be improved to be used as a platform for educational for rural students in Chennai.

* Ph.D Scholar, PG and Research Department of Social Work, Bishop Heber College, Trichy, India
** Associate Professor, PG and Research Department of Social Work, Bishop Heber College, Trichy, India.
Sampling
The universe of the present study constitutes all the budding entrepreneurs who are member of NBLC.
The size of the universe is 30
Sample method
The sampling method used in this study is simple random sampling method.

3. Analysis and Interpretation

<table>
<thead>
<tr>
<th>Opinion</th>
<th>No. of respondents</th>
<th>Percentage</th>
</tr>
</thead>
<tbody>
<tr>
<td>Face book</td>
<td>25</td>
<td>83.33%</td>
</tr>
<tr>
<td>My space</td>
<td>2</td>
<td>6.67%</td>
</tr>
<tr>
<td>Twitter</td>
<td>1</td>
<td>3.33%</td>
</tr>
<tr>
<td>We chat</td>
<td>0</td>
<td>0%</td>
</tr>
<tr>
<td>Others</td>
<td>2</td>
<td>6.67%</td>
</tr>
<tr>
<td>Total</td>
<td>30</td>
<td>100%</td>
</tr>
</tbody>
</table>

From the above table there is a drastic improvement in the usage of the network like we chat 0%, twitter 3.33%, my space & others 6.67%, at last the highest rate of using network is the face book at 83.33%.

<table>
<thead>
<tr>
<th>Opinion</th>
<th>No. of respondents</th>
<th>Percentage</th>
</tr>
</thead>
<tbody>
<tr>
<td>One</td>
<td>8</td>
<td>26.37%</td>
</tr>
<tr>
<td>Two</td>
<td>12</td>
<td>40%</td>
</tr>
<tr>
<td>Three</td>
<td>6</td>
<td>20%</td>
</tr>
<tr>
<td>Four</td>
<td>0</td>
<td>0%</td>
</tr>
<tr>
<td>More than four sites</td>
<td>4</td>
<td>13.33%</td>
</tr>
<tr>
<td>Total</td>
<td>30</td>
<td>100%</td>
</tr>
</tbody>
</table>

The social networking usage depends upon the individuals and their interest too. So from this table we can conclude that the highest social networking of two sites are of 40%, one site usage is of 26.67%, three sites usage is of 20% & more than four site of the usage is of 13.33%.

<table>
<thead>
<tr>
<th>Opinion</th>
<th>No. of respondents</th>
<th>Percentage</th>
</tr>
</thead>
<tbody>
<tr>
<td>More than 5 each a day</td>
<td>10</td>
<td>33.33%</td>
</tr>
<tr>
<td>At least once in a day</td>
<td>10</td>
<td>33.33%</td>
</tr>
<tr>
<td>At least once in a week</td>
<td>8</td>
<td>26.67%</td>
</tr>
<tr>
<td>At least twice in a week</td>
<td>2</td>
<td>6.67%</td>
</tr>
<tr>
<td>At least once in a month</td>
<td>0</td>
<td>0%</td>
</tr>
<tr>
<td>Total</td>
<td>30</td>
<td>100%</td>
</tr>
</tbody>
</table>

From the above table shows majority of respondents are visiting more than 5 sites each day & At least once in a day. In our survey there are 33.33% are visiting more than 5 each day & At least once in a day while 26.67% are visiting social networking sites at least once in a week at last 6.67% are visiting at least once in a month.

CHI – SQUARE – 1

Null hypothesis (ho):
There is no significant relationship between the gender and social networking sites of the respondents.
Alternative hypothesis (h₁):
There is a significant relationship between the gender and Social Networking Sites experience of the student.
The table of observed value:
Table 4. The table of expected value

<table>
<thead>
<tr>
<th>Social Networking sites</th>
<th>Facebook</th>
<th>My space</th>
<th>Twitter</th>
<th>We chat</th>
<th>Others</th>
<th>Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>Age</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Male</td>
<td>20</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td>20</td>
</tr>
<tr>
<td>Female</td>
<td>5</td>
<td>2</td>
<td>1</td>
<td>0</td>
<td>2</td>
<td>10</td>
</tr>
<tr>
<td>TOTAL</td>
<td>25</td>
<td>2</td>
<td>1</td>
<td>0</td>
<td>2</td>
<td>30</td>
</tr>
</tbody>
</table>

Table 5. Tabulation

<table>
<thead>
<tr>
<th>Observed value (o)</th>
<th>Expected value (e)</th>
<th>(o-e)</th>
<th>(o-e)^2</th>
<th>(o-e)^2 E</th>
</tr>
</thead>
<tbody>
<tr>
<td>20</td>
<td>16.66</td>
<td>3.34</td>
<td>11.15</td>
<td>0.66</td>
</tr>
<tr>
<td>0</td>
<td>1.33</td>
<td>-1.33</td>
<td>1.76</td>
<td>1.32</td>
</tr>
<tr>
<td>0</td>
<td>0.66</td>
<td>-0.66</td>
<td>0.43</td>
<td>0.65</td>
</tr>
<tr>
<td>0</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>0</td>
<td>1.3</td>
<td>-1.3</td>
<td>1.69</td>
<td>1.3</td>
</tr>
<tr>
<td>5</td>
<td>8.33</td>
<td>-3.33</td>
<td>11</td>
<td>1.32</td>
</tr>
<tr>
<td>2</td>
<td>0.66</td>
<td>1.34</td>
<td>1.79</td>
<td>2.71</td>
</tr>
<tr>
<td>1</td>
<td>0.33</td>
<td>0.67</td>
<td>0.44</td>
<td>1.33</td>
</tr>
<tr>
<td>0</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>2</td>
<td>0.66</td>
<td>1.34</td>
<td>1.79</td>
<td>2.71</td>
</tr>
<tr>
<td>TOTAL</td>
<td></td>
<td></td>
<td></td>
<td>12</td>
</tr>
</tbody>
</table>

Therefore the calculated chi – square value is 12
The degree of freedom (df) = (r-1) (c-1)
Where “r” and “c” refers to no. of rows and columns
Therefore DF = (5-1) (2-1)
i.e. df = 4
The standard significance level is 5% (i.e. p = 0.05)
According to critical value table the chi - square value is: 9.48

Conclusion:
The table value of chi - square tends to be 12 at 5% significance level with 5 degree of freedom, is greater than calculated critical value is 9.48
Therefore, alternate hypothesis H1 is accepted and null hypothesis is HO is rejected

CHI – SQUARE – 2

The relationship between the age and academic performance of the student Null hypothesis (h₀):
There is no significant relationship between the age and academic performance
Alternative hypothesis (h₁):
There is a significant relationship between the age and academic performance.

### Table 6. The table of observed value:

<table>
<thead>
<tr>
<th>Academic performance</th>
<th>Very Good</th>
<th>Good</th>
<th>Satisfactory</th>
<th>Low</th>
<th>Average</th>
<th>TOTAL</th>
</tr>
</thead>
<tbody>
<tr>
<td>AGE</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>17 – 18</td>
<td>5</td>
<td>0</td>
<td>6</td>
<td>0</td>
<td>0</td>
<td>11</td>
</tr>
<tr>
<td>19 – 20</td>
<td>5</td>
<td>7</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td>12</td>
</tr>
<tr>
<td>21 – 23</td>
<td>5</td>
<td>1</td>
<td>1</td>
<td>0</td>
<td>0</td>
<td>7</td>
</tr>
<tr>
<td>24 – 26</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>ABOVE 26</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>TOTAL</td>
<td>15</td>
<td>8</td>
<td>7</td>
<td>0</td>
<td>0</td>
<td>30</td>
</tr>
</tbody>
</table>

### Table 7. The table of expected value:

<table>
<thead>
<tr>
<th>Academic performance</th>
<th>Very Good</th>
<th>Good</th>
<th>Satisfactory</th>
<th>Low</th>
<th>Average</th>
<th>Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>AGE</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>17 – 18</td>
<td>5.5</td>
<td>2.9</td>
<td>2.5</td>
<td>0</td>
<td>0</td>
<td>11</td>
</tr>
<tr>
<td>19 – 20</td>
<td>6</td>
<td>3.2</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td>12</td>
</tr>
<tr>
<td>21 – 23</td>
<td>3.5</td>
<td>1.8</td>
<td>1.8</td>
<td>0</td>
<td>0</td>
<td>7</td>
</tr>
<tr>
<td>24 – 26</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>ABOVE 26</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>TOTAL</td>
<td>15</td>
<td>8</td>
<td>7</td>
<td>0</td>
<td>0</td>
<td>30</td>
</tr>
</tbody>
</table>

\[ E(I) = \text{Row total } \times \text{column total} \]

### Table 8. TABULATION:

<table>
<thead>
<tr>
<th>Observed value (o)</th>
<th>Expected value (e)</th>
<th>(o-e)</th>
<th>(o-e)²</th>
<th>(o-e)² E</th>
</tr>
</thead>
<tbody>
<tr>
<td>5</td>
<td>5.5</td>
<td>-0.5</td>
<td>0.25</td>
<td>0.04</td>
</tr>
<tr>
<td>0</td>
<td>2.9</td>
<td>-2.9</td>
<td>8.41</td>
<td>2.9</td>
</tr>
<tr>
<td>6</td>
<td>2.5</td>
<td>3.5</td>
<td>12.25</td>
<td>4.9</td>
</tr>
<tr>
<td>0</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>0</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>5</td>
<td>6</td>
<td>-1</td>
<td>1</td>
<td>0.16</td>
</tr>
<tr>
<td>7</td>
<td>3.2</td>
<td>3.8</td>
<td>14.44</td>
<td>4.5</td>
</tr>
<tr>
<td>0</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>0</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>0</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>5</td>
<td>1.5</td>
<td>2.25</td>
<td>2.25</td>
<td>0.64</td>
</tr>
<tr>
<td>1</td>
<td>1.8</td>
<td>0.64</td>
<td>0.64</td>
<td>0.35</td>
</tr>
<tr>
<td>0</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>0</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>0</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>0</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>0</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>0</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>0</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>0</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>0</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td>0</td>
</tr>
</tbody>
</table>

\[ E(I) = \text{Row total } \times \text{column total} \]

Grand total
Therefore the calculated chi – square value is 13.84
The degree of freedom (df) = (r-1) (c-1)
Where “r” and “c” refers to no. of rows and columns
Therefore df = (5-1) (5-1)
 i.e. df = 6
The standard significance level is 5% (i.e. p = 0.05)
According to critical value table the chi – square 26.29

Conclusion:
The table value of chi - square tends to be 13.84 at 5% significance level with 5 degree of freedom, is greater than
that off calculated critical value is 1.68 (approx)
Therefore alternate hypothesis is rejected and null hypothesis is accepted respectively.

4. Findings, Suggestions and Conclusion
Findings
● 90% of the students are accessing social networking through mobile.
● It is found that there is a drastic improvement in the usage of facebook 83.335.
● The survey reveals that 83.33% agrees that they use SNS for carrier information.
● It is found that 80% of the students are male who are using social networking sites.
● It is found that 76.67% has set to get notification on their mobile device.
● 76.67% are from the income level of 10k – 12K
● 60% agrees that they learn from social networking sites than in the time spending in college.
● It is found that 60% of the students say it is effective to communicate with teachers than in actual class and 40%
say no.
● It is found that 60% of the student performance is effective after using social networking sites.
● 56.67% of student had submitted assignment late after using social networking sites
● It is found that 56.67% of social networking sites are primarily used for downloading music/video.
● It is found that 53.33% say yes with regard of social networking sites effects study timing.
● 50% of student spending time on social networking sites interfered with ability to study or to complete assignment.
● 40% agrees that shaping of carrier with social networking sites among student says important.
Suggestions
● Cyber Psychological Training
● Technology De-Addiction Clinic Doctors at the Bangalore clinic, run by the National Institute of Mental Health
& Neurosciences (Nimhans) to be first in India at our silicon city. Typically, the patients being referred are
children whose parents are concerned either by a sharp academic decline or their child withdrawing from family
interactions.
● Education to School / College Counsellors Schools / colleges are concerned about the popularity of texting,
selfies and multi –player online games have also been seeking help from the clinic. Nimhans staff can train the
student counselors, or hold awareness camps and screening and rehabilitation programs for addicted students.
● Digital detox It refers to a period of time during which a person refrain from using electronic connecting device
such as smart phones and computers. It is regarded as an opportunity to reduce stress or focus on social interaction
in the physical world. Claimed benefits include increased mindfulness, lowered anxiety, better appreciation of
one’s environment and becoming more people-oriented
Conclusion
Use of the Internet on college campuses has increased dramatically in recent years, leading to pathological
use, or internet addiction, for some students. Internet addiction is defined as a psychological dependence on the
Internet The research study suggested that students should be briefed about the pros and cons of SNS, and should be encouraged to use social media sites primarily to support their educations in terms of assignment, projects, shaping academic materials, etc. They should also be discouraged against the time spent on uploading/downloading music and videos, chatting with friends, gaming and other activities that do not help them academically.
Perspectives of Social Work Students towards Sustainable Development Goals

Dr. J. Lakshmi*
Dr. S. Rachel**

Abstract
Sustainability—the ability to maintain at a certain rate or level (oxford Dictionary) refers to meeting the needs of the present population without compromising the ability of the future generations to meet their needs. In the present scenario, the development related works in the society are implemented by different institutions namely NGOs, Government and social workers and all of them are targeting to achieve the sustainability of the project. In every development project, the social work professionals are considered as main stakeholders. Social worker are not only working for implementing the projects/programme rather they also working for establishing changes in the mindset of people to bring development. Constituting to one fifth of the total population (census 2011), Indian youths are the major resource for the nation’s future. India, a country enriched with natural resources and innovative technology has got a major role to be played in accomplishing the targets of Sustainable Development Goals. This empirical paper on the student’s perspectives on Sustainable Development Goals will highlight on 5 major goals i.e. No poverty, Good health and wellbeing, clean water and sanitation, Affordable and clean energy and Climate Action identified by the researcher. The paper focuses on the various perspectives and the initiatives taken by the respondents to achieve the Sustainable Development Goals. This paper will also throw light on various scopes for the social work profession towards achieving Sustainable Development Goals by India.

Key words: Sustainable Development Goals; Youth; Social Work.

1. Introduction
When there are reasons to be proud over all our achievements, it should not be forgotten all these developmental changes are happening with a resonating changes in the climate, health, sanitation and so on. To mitigate the problems the global agenda 2030 of Sustainable development goals came into force.

The Sustainable Development Goals also known as the global goals consists of 17 goals built on the succession of the Millennium development goals. While including new subjects to focus on including climate change, economic inequality, innovation, sustainable consumption, peace and justice, among other priorities the 17 sustainable development goals aims to build a more successful, more equal and more safe world by the year 2030.

The 17 SDGs and 169 targets are part of the 2030 Agenda for Sustainable Development adopted by the 193 Member States at the UN General Assembly Summit in September 2015, and it came into effect from January 1, 2016. These goals are the result of an unprecedented consultative process that brought governments and millions of citizens from across the globe together to negotiate and to adopt the path to sustainable development for the next 15 years. India’s leading role

The Government of India is strongly committed to the 2030 Agenda, inclusive of the Sustainable Development Goals, as evident by the statements of the Prime Minister and other senior Ministers at various national and international meetings. India’s National Development goals and its “sab kasaath, sab kavikas” or “development with all, and for all,” policy initiatives for inclusive development converge well with the Sustainable Development Goals, and India will play a leading role in determining the success of the Sustainable Development Goals, globally.

Review of Literature

Jayasooria (2016), in his study have stated that the global SDG agenda provides Social Workers an opportunity to re-define their relative role to become people of empowerment, social-economic development, human rights and the environment. It also creates a positive and holistic intervention framework for practice, allowing Social Workers to utilize this approach based on a worldwide commitment during the entirety of the 2030 agenda.

*Asst.Professor,P.G.Dept of Social Work (Aided),Madras School of Social Work, Chennai
**Asst.Professor, P.G. Dept of Social Work (SF), Madras School of Social Work, Chennai
Persson et al. (2016) identified three necessary priorities to facilitate the internalization of national SDG goals: (1) widespread social awareness must be fostered and nourished; civil society and the private sector must be key-agents in the accomplishment of the goals, and must also interpret the SDGs; (2) the outline of a central national goals group is important, as priorities will probably focus upon the implementation process, making it more efficient and manageable; and (3) reports must, for the most part, base themselves on measures that take into account the national and sub national level, not just the progress of the goal’s development.

Urmee and Md (2016), stated that the backbone of a sustainable long term program is an understanding of the attitudes and energetic needs of the community and an involvement of that community in the planning and conception of such programs. Different communities have different social and cultural attitudes which could potentially harm the successful implementation of electrification programs in rural areas.

2. Research Methodology
Aim: To study the perspective of social work students towards SDG.

Objectives
➢ To understand the socio demographic profile of the respondents
➢ To understand the social work students knowledge on sustainable development goals.
➢ To study the perspectives of youth on the cause for poverty, lack of health and well being, unsafe water and lack of sanitation, unaffordable clean energy and climate change.
➢ To know the initiatives taken by the social work students to achieve sustainable development goals.

Methodology
The present study adopted descriptive research design and used simple random sampling using lottery method to arrive 45 as sample for the study. Self structured questions are used to understand the social work students’ socio demographic profile and their perspectives on sustainable development goals. The researcher adopted questionnaire method to collect data from the respondents.

3. Major Findings
● More than half of the respondents i.e 53.3 % of the respondents have responded saying that the cause for poverty is because of unequal distribution of resources
● 33.3.% of the respondents have responded that the problem is with the individuals and the government for poor health and poor sanitation.
● Less than half of the respondents i.e 46.7% have reported that cause for climate change is with individual, caste issues and unequal distribution of resources.

No Poverty
● A Vast majority of the respondents of 97 .8 % of the respondents have agreed that more than 70 % of the Asian country population suffer from poverty
● 84.4% of the respondents have agreed that the Government needs to take more initiatives to eradicate poverty
● More than half of the respondents' i.e 57.8% of the respondents agreed that they have minimum level of understanding on the various government programmes to eradicate poverty.
Figure. 1 *Initiatives to eradicate poverty during field work possible*

**Good health and well being**
- 95.6% of the respondents have agreed that only having physical health will not contribute to the overall wellbeing of an individual.
- 82.2% of the respondents have a complete awareness on their health condition.
- Less than half of the respondents i.e. 35.6% have agreed that they do not address the family members' health on the right time.
- 88.8% of the respondents have agreed that wellbeing is possible only when all the needs are addressed on time.
- 84.4% of the respondents feel that awareness on health among the community is poor.

**Clean Water & Sanitation**
- 93.3% of the respondents opined that 80% of the waste water from human activities is discharged into water ways without any pollution removal.
- 95.6% of the respondents have opined that inadequate infrastructure is the main reason for poor sanitation.
- 77.8% of the respondents have agreed that they are always cautious about water wastage and sanitation.
- More than half of the respondents i.e. 53.3% of the respondents have responded that they have taken initiatives to restore water related eco-systems.
- 84.4% of the respondents have agreed that capacity building is essential to address water and sanitation related issues.
- More than half of the respondents i.e. 57.8% of the respondents have responded that poor people participation is the major problem towards water wastage and lack of sanitation in India.

**Affordable and Clean Energy**
- 91.1% of the respondents have opined that people use electricity more than their use and have low save energy conscious.
- 82.2% of the respondents have said that they had volunteered to stop energy waste.
- 84.4% of the respondents have responded that they control their fellow members from wasting energy and they also agree that energy is the dominant contributor to climate change.

**Climate Action**
- 88.9% of the respondents have suggested that adaptive capacity related programmes should be properly planned by the government to address the climate change.
- 77.8% of the respondents have suggested that institutional capacity is only possible by government to address climate change.
- All the respondents have agreed that education and implementation of programmes should be made possible at all levels to address the climate change.
4. Discussions and Conclusion

Discussions

Social work professionals from the beginning have been working on the developmental aspects of different communities. SDGs provide social workers a good and holistic intervention framework for practice for social workers. Sustainable development is possible only when we practice or follow the social work values.

This paper discusses sustainable development goals from social work perspectives focusing on five different sustainable development goals such as No poverty, good health and well being, clean water and sanitation, affordable clean energy and climate change. The main reason for concentrating the above 5 goals from given 17 sustainable development goals is its relevance with the profession and valuing the need of the hour. The global agenda of SDG is to promote development having equality and justice as its basic principle which is highly relevant to the principle of Social work i.e. treating every individual with dignity. The initiatives taken by the students towards SDG is a proven progress to achieve the global agenda 2030.

The present study indicates that there is minimum level of understanding on the various government programmes to eradicate poverty. This situation is not appreciated hence this condition has to be changed by the social workers through various means of education. More than half of the respondents have taken initiatives to restore water related eco systems therefore social workers should come forward to take initiatives to restore water eco-system.

Figure 2. Resilience- an initiative to mitigate disaster related issues

Figure 3. Initiatives taken by the students towards sustainable development goals
Social workers are the change makers in our society hence it is highly imperative that the social work professional should start initiating positive changes from them, which will definitely have resonating effect in the community.

The study also reveals that poor participation is the major problem for achieving the sustainable development goals and this findings correlate with Urmee and Md (2016), findings. The study has highlighted that awareness creation is very much needed to change the attitude of the society.

Conclusion

Any progress is known by its duration of sustainability. Sustainable development goals, clearly highlights the need and importance of sustainability towards achieving the complete progress of our country. To achieve the 169 targets it is important for individuals from all realms to put a joint effort. Being Proactive at all levels is necessary. Especially in Social work a people centred profession, the professionals not just stopping with the knowledge up gradation; it should be their prime duty to ensure full participation from their side to make it a practice among all the community people for a successful nation.

References

Promoting Transparency among Non-Governmental Organisation

Antony Joseph Prabakar*
Dr. T. Giftson**

Abstract
Non-Governmental Organization are projected to be active, sustainable, authentic, genuine and transparent in capable of reaching the unarched, always in the face of public for their needs and development, and, most importantly, adapting to a new strategy in collaboration with State Government, Central Government and International Organization for the development of Needy and unarched Society. Non-governmental organizations (NGOs) have diverse lives. Sometimes, they are exiles, but they are also the expression of the voiceless, the last mile infrastructure for many government programmes. Their presence is often directly proportional to the under-development of any Society. One of the most common criticisms NGOs face is on accountability and transparency, perhaps because as soon as one declares an intention to set up an NGO, he is expected to be no less than devoid of all desires in life and is supposed to do good and only good. The fact, however, remains that all the resources and finance that go into an NGO certainly belong to the cause and not to the organization or the persons at its helm. The study will facilitate the scenario on non-governmental organization involvement, authentic, and transparent in implementation of their services and to demonstrate that NGO’s are credible and transparent.

Keywords: Non-Governmental Organization; Accountability; Transparency;

1. Introduction
As Non-Governmental Organizations (NGOs) should grow prominence in the State, National and international development scenario, in transparency and accountability. The influence of NGOs requires that donors, academics, and policy makers start carefully examining transparency and accountability issues on both in micro and macro level. If we ask three questions: first, who are NGOs accountable to? Second, what transparency methods are NGOs using to demonstrate accountability? Finally, how are governments cooperation with NGOs and how does this affect the role of NGOs and in particular their accountability and operations? The rapid growth of Non-Governmental Organizations is important because of the distinct role they play in socioeconomic development. There are numerous advantages to NGO work. Since they are independent bodies, NGOs can assist nations during times of weak governance or corruption. Even during times of good governance, local authorities and firms may lack the incentives for programs such as poverty alleviation and job creation. Furthermore, an NGO may, at least in theory, better address the needs of the community it is serving. NGOs can often bring innovative techniques and solutions to regions in need. NGOs also provide public goods to sections of the population that might be socially excluded. Examples include public health facilities, community negotiation with governments, and property registration. Also, the preservation of common property such as forests and rivers is propagated by NGOs. NGOs teach sustainability techniques to people who would otherwise have limited incentive to conserve. They can act as an advocate of those who would otherwise not be heard within their own nation. Lastly, NGOs are often seen as more trustworthy and credible than governments or private firms.

Increased transparency can encourage greater donations by assuring donors that their donations are reaching the desired populations, can clarify accountability groups, and can increase overall quality of NGO service. One important role of transparency is to reduce corruption within the organization and more importantly during humanitarian crises. Humanitarian crises can lead to an inequitable distribution of aid, which includes NGO services, basic need supplies or development funds. NGOs are particularly vulnerable to fraud, embezzlement or bribery, which can occur when local governance is destroyed, the rule of law is all but gone, or there is a shortage or surplus of aid. Transparency helps ensure that aid via NGOs reaches those who need it, and offers some protection for the aid recipients. This protection is especially important due to the asymmetric relationship of NGO aid. Left without any substitutes, aid recipients have very little power to control the activities of those giving aid. Therefore, it is important that transparency processes in some way reflect how aid recipients feel their needs are being met. Extensive

*Ph.D Scholar, PG and Research Department of Social Work, Bishop Heber College, Thiruchirapalli.
**Assistant Professor, PG and Research Department of Social Work, Bishop Heber College, Thiruchirapalli.
transparency procedures can be costly and time consuming. In the past, charities were simply asked to report on money raised, spent, the number of clients reached, and the administrative costs involved. However, the current NGO community recognizes that multiple stakeholders require multiple methods of creating transparency.

Transparency methods can be internal evaluations, external audits, complaints procedures, environmental impact assessments, specific stakeholder surveys, or social audits. Transparency walks a fine line; it is difficult to quantify abstract ideas such as 'empowerment' and 'awareness,' however it is imperative that progress be monitored on such projects. The search for immediate results may also mean looking for short-term solutions or insisting upon digging up the seedling to examine its roots before it can bear fruit. Transparency establishes trust amongst the people an NGO works with. It makes it easier for them to collaborate with the NGO, as they understand it works better and how it can best contribute to other efforts. Greater clarity in reporting and resource utilization enables operations to be better aligned to the goals of funders and beneficiaries equally. NGOs have today realized that they do have a responsibility of their performance to donors and the public. It is no longer acceptable simply to report in terms of program outputs.

It is imperative that all of those involved with NGOs demand accountability in all directions: to donors, to clients, to employees, and to the NGO community. Specifically, it is crucial that NGOs increase and maintain downward accountability to clients. NGOs demonstrate accountability to clients by allowing client input on development projects during regular meetings between staff and the community. It is a commitment to downward accountability by sending a social worker to consult with aboriginal communities about their needs. Many different methods of transparency can reinforce accountability.

Transparency techniques that are easy for their donors to interpret through expert reports from its Technical Advisory Committee and through periodic external audits. In addition to these quantitative methods of transparency, client-targeted transparency by including clients in project decision-making. Accountability both to clients and donors through its detailed input/output evaluation, process monitoring, and impact evaluation methods of transparency. These methods are all formal, quantifiable methods of transparency, which makes them easy for donors and clients to interpret, and makes it easy to chart progress of the NGO. However, the disadvantage to these quantifiable measurements is that it may be difficult to include an assessment of the development of qualitative concepts such as “self-confidence” or “empowerment.”

2. Conclusion

Accountability and transparency are crucial issues facing the growing NGO sector. In this paper we explore the directions of accountability, and the various degrees of transparency. It is obvious that a multitude of effective transparency techniques exist. It is therefore important for government institutions and other policy-making bodies to recognize that NGOs must be regulated but this regulation should allow for some flexibility. Flexibility in regulations will allow NGOs to customize their transparency techniques to best serve their clients, donors, peers, and themselves. As mentioned earlier, a NGO who follows the dimensions of Transparency, Performance and Legitimacy will be a model organization with high significance in their responsibilities to donors, sponsors, beneficiaries, staff, state and the public.

References:
Tolerance for Disagreement among College Students

Marystella Palmila*
Dr. Esther Rani**

Abstract
Tolerance might mean toleration, treating everyone the same, even if your opinions differ from anyone else. This study focuses on the tolerance for disagreement among college students around the Coimbatore city. To identify the level of the tolerance for disagreement of the respondents and the factors associated with it. This is a quantitative study using Tolerance for disagreement scale (TFD) Teven, J.J., Richmond, V.P., & McCroskey, J.C. The researcher collected 100 samples for the study through quota sampling technique. An attempt was made to find out the level of tolerance during arguments among the college students. Suggestions were given to improve the tolerance level and to accept others ideas for better functioning. The study results showed that college students have low level of tolerance for disagreement. They easily get angry and they have less patience to handle situations. If students are trained properly in their young years towards the tolerance for disagreement, then we can visualize the areas of positive growth in them. Tolerance is considered as the good quality of a man and it is most necessary to make a society. However, intolerance leads a person, people or society to the worst disaster. People develop the feeling of jealous and then intolerance just because of simple things like someone cannot bear the importance of his/her close one’s in the eye of most effective person. Hence, this study strongly suggests that school social worker has to train them to increase their level of tolerance.

Key words: Tolerance; disagreement; college students.

1. Introduction
Meaning for Tolerance for disagreement: Disagreement can be defined as a difference of opinions and if negotiated and communicated in a productive manner, can produce positive outcomes and helpful contributions. Disagreement does not have to lead to conflict which produces negative emotions and very little positive productivity. Tolerance can be defined as a fair and objective attitude towards those whose lifestyle differs from yours. The level of tolerance in your life can be attributed to levels of happiness and contentment, as many researchers have pointed out; however, the same researchers appear to struggle when examining paradoxical questions such as, 'are tolerant people more happy, or are happy people more tolerant.'

Definition for tolerance for disagreement
Tolerance is demonstrated by an ability and willingness to accept and respect different people, ideas, and practices. Tolerance promotes non-judgmental, open-minded, patient, permissive live and let live attitudes toward diverse people, ideas and practices. It is an essential virtue in a democratic society. Tolerance, an antonym of intolerance, bigotry, narrow-mindedness and prejudice and it requires respectful acceptance of racial, ethnic and physical characteristics; unpopular, unorthodox or offensive beliefs, opinions and practices, especially those that tend to evoke hatred, prejudice, disdain, contempt, or passionate disagreement.

Positive effect
People with a high tolerance for disagreement may not experience as much of the negative products of conflict and by more likely to communicate disagreement in a manner which produces positive outcomes for both themselves, their relationships with others and improve their ability to constructively contribute to the community instead of good feelings, hatred emerges, if restlessness usurps heartfelt peace, then we must accept that this is not progress, but is something that will take us towards unexpected results. In this globalisation, where people of different backgrounds, cultures and religions are living together, and where the world has become multicultural and full of diversity, establishing tolerance and harmony has become very crucial and important, and fostering mutual love and affection has become vital. Without tolerance and harmony the lasting peace of societies cannot be maintained, and loyalty for each other cannot be established. Loyalty is borne from feelings of love and affection. At a personal level the feelings of love strengthens the feelings of loyalty. When a citizen loves his country, he exhibits loyalty and

---

*II MSW, Department of social work, Bishop Appasamy College of Arts and Science, Coimbatore.
**Head, Department of social work, Bishop Appasamy College of Arts and Science, Coimbatore.
devotion and makes sacrifices for the sake of the nation. If sentiments of love do not exist, then the spirit of sacrifice cannot be formed. Unless a person loves another he can never have good feelings in his heart towards him, and he cannot faithfully fulfil the rights due to that person. Lack of tolerance leads to fighting, violence, and finally it destroys the peace and security of society. When people fail in their arguments they become intolerant, and then they use force and aggression to support their point of view. We have seen considerable incidents in recent history where, because of lack of tolerance, people have attacked people of other faiths, their places of worship, their communities. How nice it would be if everyone tries to express himself in a decent and respectful way with tolerance. The world is full of diversity, and that is the beauty of our universe. If there had not been any diversity, the world would appear boring and unattractive, and without any competition. The worldwide celebration of the International Day for Tolerance was an annual observance declared by UNESCO in 1995 to generate public awareness of the dangers of intolerance, and to help people understand the importance of tolerance. The annual celebration of this day reminds us how important and crucial these values are. And it does not mean that we only observe tolerance on this day, but this day is just a reminder, so we carry on these values throughout the year. The word tolerance means the willingness to accept or to tolerate, especially opinions or behaviour you may not agree with, or to behave sensibly with those who are not like you. It means showing respect for the race, gender, opinions, religion and ideologies of other people or groups, and to admire the good qualities and good work of others. And to express one’s point of view in a decent and respectful way while respecting the sentiments of others. Tolerance can be shown in many ways, on different occasions and at different times. A person might fully disagree with others on any issue, from religion to politics, while at the same time honouring and respecting those with different ideas and opinions and treating them with full dignity and honour. Tolerance is needed in all spheres of life, and on every level and on every stage, because it plays a vital role to establish peace and love, from the smallest unit up to the highest unit of society. Tolerance does not mean that only one person or party shows tolerance and the others do not. When some people disagree on a certain issue they must advocate and express their opinion in a respectful manner, and hateful and provocative words should not be used. Tolerance must be shown from both sides on issues, in order for it to be effective. Here, let it be clear that showing respect and tolerance to the opinions of others does not necessarily mean you have to compromise your principles or embrace or accept others’ ideas. It is simply a matter of fundamental human rights. The right of every human being that his sensibilities and sentiments shall not be violated and offended must be recognised. And every human person has the right to have an opinion and to express it.

Consequence

People with a low and a high tolerance for disagreement differ in that people with a low tolerance for disagreement are highly conflict prone whereas people with a high tolerance for disagreement are relatively conflict resistant. Research shows that people with low self-control tend to underplay the negative consequences of their decisions. Academic research has long shown that people with low tolerance engage in riskier behaviors than do those with higher self-tolerance. People with less tolerance may face controversial situations that affects their relationship. People with less tolerance for disagreement may lose their temper easily. Low tolerance for disagreement with also have less acceptance. They found that people with low tolerance are more concerned if they are told their probability of contracting heart disease is twice as high rather than if they are told the consequences of heart disease are twice as bad as previously thought. Self-tolerance is a key skill needed in all facets of life. Many students earn low grades or drop out, not because they are unable to assimilate lessons, but because they get overwhelmed by the workload. Often, employees who promote in a company are not the most intelligent or educated, but the most resolute, that is, those who are able to cope with a heavy workload and get things done. And, although many of us are not aware of this, lack of personal organization can even ruin our financial situation and our relationships.

Steps to improve tolerance

In every relationship, personal or professional, there will always be some disagreement. You will never find an environment where people always agree and that understand each other. That's fantasy, not reality. As a leadership coach I spend a lot of time working with my clients helping them deal with breakdowns in communication--and truly, a lot of disagreements amount to a breakdown in communication. Here are seven very simple but effective ways I’ve learned over the years for dealing productively with disagreement. Seek to understand. People tend to disagree when they don't understand each other. When one party is so busy wanting to be heard and doesn't spend any time trying to understand, disagreement is right around the corner. When you come to an understanding that most of us are more alike then we are different, you can begin to tolerate and accommodate--even appreciate--a different point of view. So
first, seek to understand and appreciate. That does not mean you have to agree, just that you're open to hearing them out. Look beyond your own triggers. Many disagreements stem from someone being triggered by something that's been said. What's triggered is usually fear and awareness of one's limitations. Whatever may have happened in your past, you have to find a way to get past your triggers and see that you're in a new situation with a person who doesn't mean you harm. Look for similarities, not differences. From working with my clients, I've found that the best way to begin resolving a disagreement is to look for common ground. When you concentrate on differences the space grows wider, but when you seek out what you have in common it helps bridge the gap. The next time you find yourself in a disagreement, look for a point of agreement even if you have to stretch. Be a good listener. In any disagreement, it's important for both parties to be heard. And that means it's important to be a good listener curious, open minded and non-judgmental. A good listener gives their full attention, asks for clarification when necessary, and can listen to different opinions without becoming defensive or argumentative. The best way to listen is to be silent. That's when you can learn. Take responsibility for your own feelings. Especially in heated disagreements, it's easy to start making accusations, laying blame and making excuses. To work through it, you have to be honest with yourself and take full responsibility for your own feelings, and for your interpretations that may have contributed to the breakdown. Make a commitment. In times of intense disagreement, it's not uncommon for one or both parties to have one foot out the door. If you want to truly get to the heart of the matter, make sure the other person understands your commitment to the relationship. Even if you have an issue with the behavior, you have to keep that separate. Use positive language. No one wants to be called names or to be called out in a negative way, or to hear all the bad things they have done in the past. If you are speak in negatives, you will hurt the person and shut them down. if you can bring positivity to what you are trying to say, it's far more likely that you'll be heard, and that the disagreement can be resolved more quickly and easily. Disagreements are a way of life, but they don't have to cause havoc. Try these techniques and work it out faster, better and quicker.

2. Methodology adopted

Objectives of the study:
1. To identify the factors influencing tolerance for disagreement of the respondents.
2. To find out the level of tolerance for disagreement among the respondents.
3. To find out the significant association between the level of tolerance with the gender of the respondent.

Hypothesis:
There is no significant different between the level of tolerance with the gender of the respondent.

Research design:
This is a quantitative study which focuses on the socio economic conditions and level of tolerance among the respondents. Hence the study is descriptive in nature.

Sampling technique:
The researcher has adopted convenience sampling technique to get respondents for this study. The researcher collected 100 samples from the college students. The researcher targeted first 100 college students entering the college gate on a particular day.

Tools used for data collection:
The data collection is done through questionnaire method. This is a quantitative study using Tolerance For Disagreement (TFD) to assess cognitive-behavioral coping skills of college students to understand the level of Tolerance For Disagreement (TFD). The tolerance for disagreement scale is designed to measure the degree to which an individual can tolerate other people disagreeing with what the individual believes to be true. This conceptualization is similar to that of argumentativeness. People with high argumentativeness are likely to be able to deal with more disagreement than those people who are low in argumentativeness. It is believed that conflict in interpersonal communication is in large part (in conjunction with the level of liking between the people) a function of the tolerance of disagreement of the interactants. Alpha reliability estimates for the TFD scale can be expected to be in the neighbourhood of .85. The 15 items was developed by Teven, J. J., Richmond, V. P., &McCroskey, J. C. (1998) as a new adult self-report instrument designed to be a general trait measure of TFD.

4. Major findings:
1. Quarter of the respondent (25%) have low tolerance for disagreement.
2. Less half of the respondent (35%) have moderate level of tolerance for disagreement.
3. Less half of the respondent (40%) have high tolerance for disagreement.
4. Chi-square test was applied and it is found that there no significant association between sex and tolerance for disagreement among the respondent.

3. Discussion and Conclusion

Discussion

The purpose of this study is to find out the tolerance for disagreement among the college students. Tolerance is essential for college students for their future achievements. Lack of self-tolerance in an individual may lead to less decision making skills and indulge in riskier behaviours. They may also encounter relationship problems. Tolerance increase of our success and goals achievements are built on good habits and good habits are often built on discipline, self-control, and the elimination of bad habits. But improving tolerance for disagreement and building good habits is much easier said than done, and it takes a lot of physical and mental discipline to better you. Monitoring helps us become experts on our own behaviour, and it makes habits less difficult to govern and change. Learning how to manage stress in healthy ways ensures you have the energy to keep grinding when work and life can feel overwhelming. Without dedicated and regular scheduled review time, it’s all too easy to go down the wrong path. So this study strongly suggests that school social worker has to train them to increase their level of tolerance.

Conclusion

Tolerance for disagreement is essential for the future growth of the students. In this study 1/4th of the respondents have less tolerance for disagreement skills. Tolerance, regardless of what we are doing, whether it involves a physical act or a mental decision, must be maintained to produce desirable results. If emotion takes over, reason usually flies out the window and the acts or decisions are not likely to be as productive as they should be. Also person with self-tolerance will be much relaxed because they will have some control on their life.

References

Self-Esteem of School Children with Single Parent in Tiruchirappalli District

V. Madhavan*
Dr. B. Arun kumar**

Abstract
Family is one of the main socialising institutions of the society. The family plays a crucial role in child development; Single-parent families is a concept that defines families in which either the father or mother is absent because of divorce, marital separation, out-of-wedlock pregnancy, or death (Greenberg, 2002: 329) but the number of single parent family has increased greatly in recent years, family is one of the effective institutions that guide children for their development, integration and socialization (Yavuzer, 2001). Most common problems seen in single parent families children are depression, stress, loneliness, aggression, compliance, smoke, alcohol, narcotics (Herwing, et al., 2004; Jackson, 2000). Hence the present study aims to assess the level of self esteem of school children with single parent. The researcher has adopted Descriptive Research Design and Self Esteem Inventory was used developed by Coopersmith and findings will be discussed in the paper.

Keywords: Self-esteem; children; Single Parent; School Children;

1. Introduction
Modernisation has disrupted the traditional family system and children growing without the presence of their father are becoming a common phenomenon all over the world. Statistics provided by the U.S Census Bureau show that the proportion of households headed by single mothers was 8 percent in 1960. This figure has increased steadily, up to about 23 percent of all family households with children under eighteen years old in 2005. There was a 39% increase in the number of single women in India, the numbers rising from 51.2 million in 2001 to 71.4 million in 2011, according to census data. This includes widows, divorcees, unmarried women, and those deserted by husbands.

Family
Family is one of the main socialising institutions of the society. The family plays a crucial role in child development. Single-parent families is a concept that defines families in which either the father or mother is absent because of divorce, marital separation, out-of-wedlock pregnancy, or death (Greenberg, 2002: 329). It is the first and the most immediate social environment to which a child is exposed. The family exerts a constant influence from the moment of birth to the moment of death.

Single Parent Family
The family’s normal structure that is being father, mother and siblings togetherness is affected due to divorce, separation, death and constitutes a cell family. This is named as single family (Soyaslan, 1998; Senturk, 2006). The number of single parent family has increased greatly in recent years. The reasons for this are; firstly, single parent families are the results of divorce than of death, secondly an increasing number of illegitimate babies are cared for by their mothers instead of being made available for adoption, as in the past and thirdly, it can be the result of death of a parent, out-of-wedlock birth, court appointed guardianship, or other factors that single parent is totally responsible for the rearing of the children. Most common problems seen in among the children from the single parent families are depression, stress, loneliness, aggression, compliance, smoke, alcohol, narcotics (Herwing, et al., 2004; Jackson, 2000). These children find to be more possessive and self-centred and lacks self confidence are the characteristics found. If the child is a female she is more likely to be a dependent personality and if life does not move the way they want, they find to be stressful.

Self Esteem
Self-esteem is the way individuals think and feel about themselves and how well they do things that are important to them. In children, self-esteem is shaped by what they think and feel about themselves. Their self-esteem is highest when they see themselves as approximating their "ideal" self, the person they would like to be. Children...
who have high self-esteem are ease in handling conflicts, resisting negative pressures, and making friends. Children with low self-esteem have a difficult time dealing with problems, are overly self-critical, and can become passive, withdrawn, and depressed. They may hesitate to try new things, may speak negatively about themselves, are easily frustrated, and often see temporary problems as permanent conditions.

Self-esteem encompasses the feelings and beliefs that children have about their competence and worth, including their ability to make a difference in their world, to confront and master challenges, and to learn from both success and failure. Self-esteem plays an important role in the development of children’s academic and physical abilities, peer relationships, and resiliency. Self esteem is instrumental in helping children avoid behaviors that risk health and safety.

Peer acceptance and relationships are important to children’s social and emotional development and to their development of self-esteem. Peer acceptance, especially friendships, provides a wide range of learning and development opportunities for children. These include companionship, recreation, social skills, participating in group problem solving, and managing competition and conflict. They also allow for self-exploration, emotional growth, and moral and ethical development.

Review of literature

Elfhag, Tynelius and Rasmussen (2010) who also found out that children from single parent families had lower self-esteem compared to those raised by both parents. A similar study finding was reported in Miller and Levin, (2007), that there is gender difference in the self esteem level of students. Boys showed higher self esteem level than girls.

Bramlett and Blumberg (2007) utilized the 2003 National Survey of Children's Health (NSCH) Design: Cross-sectional - Children living in single-mother or grandparent-only families had poorer health than children living with two biological parents. Children in single-father families did as well (mental health) or better than (physical health) children living with two biological parents. Cross sectional design; the sample survey format of the NSCH was subject to non random error, including coverage bias and non-response bias.

Boys without fathers are less likely to finish high school, more likely to suffer emotionally and economically, and are more likely to have difficulty forming relationships (Passley, Gerring, & Gerson , 2006).

2. Methodology

The overall aim of the study is to analyze the Self-Esteem of School Children with Single Parent in Tiruchirappalli District

Objectives

1. To know about the socio demographical profile of the respondents.
2. To find out the level of Self Esteem of children with single parent.

Research Hypotheses

1. There is a significant association between financial support and overall Self esteem of the respondents.
2. There is a significant difference between Sibling birth order and overall Self esteem of the respondents.

Research Design

The researcher has chosen descriptive research design for the study. In this research, the researcher describes socio demographical status of the children with single parent and measures the level of self esteem.

Universe and Sampling

The universe of the study covers 9th and 10th standard student of Government aided School in Tiruchirappalli district. The researcher had selected one school in Tiruchirappalli district.

For the selection of the respondents, the sample includes single mother headed family’s children, the researcher selected 52 samples from the school using censes method and rejected 12 sample have lie score. Hence 40 samples were finally accepted.

Tools of Data Collection

Tool of data collection includes self prepared social demographical profile and Self Esteem Inventory was used developed by Coopersmith. The scale has 58 Questions which include 8 lie questions.
3. Results

Table 1. Socio Demographic Characteristics

<table>
<thead>
<tr>
<th>Socio Demographic Characteristics</th>
<th>No. of Respondents (n:40)</th>
<th>Percentage</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Age</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>14 years</td>
<td>21</td>
<td>52.5</td>
</tr>
<tr>
<td>15 Years</td>
<td>19</td>
<td>47.5</td>
</tr>
<tr>
<td><strong>Gender</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Male</td>
<td>20</td>
<td>50</td>
</tr>
<tr>
<td>Female</td>
<td>20</td>
<td>50</td>
</tr>
<tr>
<td><strong>Community</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>OC</td>
<td>2</td>
<td>5</td>
</tr>
<tr>
<td>BC</td>
<td>23</td>
<td>57.5</td>
</tr>
<tr>
<td>MBC</td>
<td>11</td>
<td>27.5</td>
</tr>
<tr>
<td>SC/ST</td>
<td>4</td>
<td>10</td>
</tr>
<tr>
<td><strong>Birth Order</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>1</td>
<td>13</td>
<td>32.5</td>
</tr>
<tr>
<td>2</td>
<td>18</td>
<td>45</td>
</tr>
<tr>
<td>3 and above</td>
<td>9</td>
<td>22.5</td>
</tr>
<tr>
<td><strong>Mother’s Qualification</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Middle School</td>
<td>16</td>
<td>40</td>
</tr>
<tr>
<td>Higher Secondary</td>
<td>14</td>
<td>35</td>
</tr>
<tr>
<td>High School</td>
<td>10</td>
<td>25</td>
</tr>
<tr>
<td><strong>Source of Financial Support</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Sibling</td>
<td>2</td>
<td>5</td>
</tr>
<tr>
<td>Mother</td>
<td>22</td>
<td>55</td>
</tr>
<tr>
<td>Relatives</td>
<td>16</td>
<td>40</td>
</tr>
</tbody>
</table>

The table above shown that more than half of the respondents (52.5%) were 14 years old. Gender of the respondents was equally distributed (50%) by male and female respectively. More than half of the respondents (57.5%) belong to Backward Community. 45% of the respondent are second birth order. More than half of the respondents are financial support by Mother only.

Table 2. Level of Overall Self Esteem

<table>
<thead>
<tr>
<th>Overall Self Esteem</th>
<th>No. of Respondents</th>
<th>Percentage</th>
</tr>
</thead>
<tbody>
<tr>
<td>High</td>
<td>21</td>
<td>52.5</td>
</tr>
<tr>
<td>Low</td>
<td>19</td>
<td>47.5</td>
</tr>
<tr>
<td>Total</td>
<td>40</td>
<td>100</td>
</tr>
</tbody>
</table>

The above table shown that, more than half (53%) of the respondents are high level of Self Esteem and nearly less than half of the (47%) respondents are low level of Self Esteem.

Table 3. Association between financial support and overall level of self esteem

<table>
<thead>
<tr>
<th>Financial Support</th>
<th>Level of Self Esteem</th>
<th>Statistical Inference</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>High (n:21)</td>
<td>Low (n:34)</td>
</tr>
<tr>
<td>Sibling</td>
<td>1</td>
<td>1</td>
</tr>
<tr>
<td>Mother</td>
<td>8</td>
<td>14</td>
</tr>
<tr>
<td>Relatives</td>
<td>12</td>
<td>19</td>
</tr>
</tbody>
</table>
The above table indicates that there is a significant association between Financial Support of the respondents and overall Level of Self Esteem. There is a significant association between financial support of the respondents and overall level of Self Esteem. Hence the research hypothesis is accepted and a Null hypothesis is rejected.

There is a no significant difference between sibling birth order and overall Self Esteem of the respondents. Hence null hypothesis is accepted.

4. Results

Suggestion and conclusion

Adjustment among the human being is based on the self esteem of the individuals. Hence the parents, teachers, educational administrators, counselors and policy makers have to frame measures to enhance the self esteem of the students. There is a wide range of issues that find out the level of self esteem. There is need to think about self esteem as an issue for the entire student without bias to the type of parenting. It is indispensable to set up and work on specific problems that students from single parent families encompass to compete with in order to facilitate them to increase their level of self esteem. It is very important to inform the parents in both solitary and dual parent families on the significance of self esteem to a student’s welfare and educational adjustment and endow them with strategies to help then augment their children’s self esteem.

References

3. Fakultesi Yayinlari No.526.
Attitude of Post Graduate Students towards Homosexuality in Bishop Heber College, Tiruchirappalli

Jayaprakash Vaishali*
M.Reena Rebellow**

Abstract
Homosexuality has become a debatable topic in the Indian society. Homosexuality has existed in all civilizations, but societal disapproval and cultural taboos has negatively influenced its recognition. A large part of our society is against homosexuals and believes that it is a mental illness and is also considered as a sinful behaviour or activity. The purpose of this study is to find out the attitude of post graduate students of Bishop Heber College towards homosexuality. The researcher has used descriptive design and Homosexuality Attitude Scale (HAS) to explain the study and to find out the attitude of the respondents toward homosexuality. The universe of the study is 1648 post graduate students and the sample included 114 post graduate students of Bishop Heber College for the academic year 2018-2019. The study reveals that one fourth of respondents have high negative attitude towards homosexuality.

Keywords: Attitude, Homosexuality, Students.

1. Introduction
The word homosexuality generally means ‘of the same sex’, being a hybrid of the Greek prefix homo-meaning ‘same’ and Latin root meaning ‘sex’. Homosexuality is a sexual orientation characterized by sexual attraction or romantic love exclusively for people who are identified as being of the same sex. Homosexuality is believed to be deviant form of sexual orientation and behaviour by most of the people around the globe. Except psychologists and experts in the field of science and human rights common man beliefs regarding homosexual orientation varies immensely based on their comprehensiveness. People who are homosexual, particularly males are known as ‘gay’, gay females are known as ‘lesbians’. Now a days homosexuality has been replaced with the term LGBT or GLBT and the people who belong to it is known as LGBT community where L stands for lesbian, G stands for gay, B stands for bisexual and T stands for transgender.

Attitude refers to a set of emotions, beliefs, and behaviours toward a particular object, person, thing, or event. Attitudes are often the result of experience or upbringing, and they can have a powerful influence over behaviour. While attitudes are enduring, they can also change.

The prevalence of homosexuality has been difficult to estimate for many reasons, including the associated stigma and social repression, the unrepresentative samples surveyed and the failure to distinguish desire, behaviour and identity. The figures vary between age groups, regions and cultures.

The landmark judgment of the Delhi High Court, which declared that Section 377 of the Indian Penal Code violates fundamental rights guaranteed by the constitution, was in keeping with international, human rights and secular and legal trends. However, the anti-homosexual attitudes of many religious and community leaders reflect the existence of widespread prejudice in India. Prejudice against different lifestyles is part of many cultures, incorporated into most religions, and is a source of conflict in Indian society.

Human sexuality is complex and diverse. As with all complex behaviours and personality characteristics, biological and environmental influences combine to produce particular sexual orientation and identity. We need to focus on people's humanity rather than on their sexual orientation.

Review of literature
Jasmeet Singh (2018) The aim of this study was to understand the attitude of adults in Delhi towards homosexuality and examine how it varies across age, gender, educational qualification and profession. Data were collected from 77 adults using the Homosexuality Attitude Scale (HAS) (Kite and Deaux, 1986). ANOVA results showed that there was a significant difference with respect to profession (F=4.356, p<0.05) and post-hoc analysis.

*II MSW, PG & Research Department of Social Work, Bishop Heber College, Tiruchirappalli.
** Assistant Professor, PG & Research Department of Social Work, Bishop Heber College, Tiruchirappalli.
showed that there was a significant difference between working individuals and students (F=.020, p<0.05). This shows that students are more accepting of homosexuals than working individuals. It may be due to various awareness campaigns and symposiums organized at universities that students now have a relatively positive attitude towards homosexuals.

Dr. Anindya Kar (2018) 2nd and 3rd year students of Calcutta National Medical College, Kolkata, India were asked to self-administer an 18-item questionnaire anonymously. Internal consistency of the questionnaire statements was high (Cronbach's alpha of 0.91). There were five responses for each statement: strongly agree, generally agree, unsure, generally disagree, and strongly disagree. The universe was 290 out of which the sample size of the study was 270 students (148 males and 122 females) Results: 55.6% strongly disagreed that homosexuality was an illness; 70.8% agreed that homosexuals were capable of forming stable relationships. Only 31.1% believed that homosexual doctors would better understand homosexual patients. About 71.8% reported that talking about homosexuality did not embarrass them, and 81.8% believed that problems associated with homosexuality could be reduced if society was more liberal. Nonetheless, negative attitudes were reflected in the stereotypical image of homosexuality. About 15.9% of respondents believed that homosexuality was an illness; 24.8% considered homosexuals neurotic, 28.1% considered homosexuals promiscuous; and 8.2% thought that they posed a danger to children. Although the overall attitude of Indian medical students towards homosexuality is positive, the percentage of students with negative attitudes remains quite high. Further work on the medical curriculum is needed to change these negative attitudes so that patients receive appropriate care.

2. Methodology

Descriptive design was adopted for the study. The Post Graduate students of Bishop Heber College were universe of this study. The total population of PG students who were studying in Bishop Heber College during the course of the research was 1648. The sampling design used in this study was Stratified Disproportionate Random Sampling. The size of the sample was 114. In this study the strata was based on the various post graduate departments in the college i.e. 6 students from 19 departments. Self-prepared questionnaires were given to study the socio demographic details of the respondents. Homosexuality Attitude Scale (HAS) which is a Likert scale with 5 point scoring was used in this study. The authors of the scale are Mary E. Kite and Deaux K (1986). Dimensions of the scale are: Stereotypes, Misconception and Anxiety. The scale has a total of 21 questions out of which 10 are positively scored and 11 are negatively scored.

Aim of the study
❖ To study the attitude towards homosexuality among the Post Graduate Students of Bishop Heber College, Tiruchirappalli.

Objectives of the study
❖ To study the socio-demographic background of the respondents.
❖ To learn the attitude of the respondents towards homosexuality.

3. Results and analysis
Table 1: Respondents by their socio-demographic table

<table>
<thead>
<tr>
<th>Socio-demographic variables</th>
<th>Frequency (n=114)</th>
<th>Percentage (100%)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Age (in years)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>20</td>
<td>12</td>
<td>10</td>
</tr>
<tr>
<td>21</td>
<td>49</td>
<td>43</td>
</tr>
<tr>
<td>22</td>
<td>42</td>
<td>37</td>
</tr>
<tr>
<td>23</td>
<td>10</td>
<td>9</td>
</tr>
<tr>
<td>24</td>
<td>1</td>
<td>1</td>
</tr>
<tr>
<td>Gender</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Male</td>
<td>57</td>
<td>50</td>
</tr>
<tr>
<td>Female</td>
<td>57</td>
<td>50</td>
</tr>
<tr>
<td>Religion</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Hindu</td>
<td>76</td>
<td>67</td>
</tr>
<tr>
<td>Christian</td>
<td>30</td>
<td>26</td>
</tr>
<tr>
<td>Muslim</td>
<td>8</td>
<td>7</td>
</tr>
<tr>
<td>Type of Family</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Joint Family</td>
<td>19</td>
<td>17</td>
</tr>
<tr>
<td>Nuclear Family</td>
<td>95</td>
<td>83</td>
</tr>
<tr>
<td>Domicile</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Urban</td>
<td>64</td>
<td>56</td>
</tr>
<tr>
<td>Semi-urban</td>
<td>42</td>
<td>37</td>
</tr>
<tr>
<td>Rural</td>
<td>8</td>
<td>7</td>
</tr>
</tbody>
</table>

It is inferred from the above table that nearly half (43%) of the respondents belong to the age group of 21 years, the respondents are equally distributed in the case of gender, more than half (67%) of the respondents are Hindus, majority (83%) of the respondents are from nuclear family and more than half (56%) of the respondents come from urban domicile.

Table 2. Distribution of the respondent by their education

<table>
<thead>
<tr>
<th>Education</th>
<th>Frequency (n=114)</th>
<th>Percentage (100%)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Department</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Department of Arts</td>
<td>42</td>
<td>37</td>
</tr>
<tr>
<td>Department of Science</td>
<td>72</td>
<td>63</td>
</tr>
<tr>
<td>Year</td>
<td></td>
<td></td>
</tr>
<tr>
<td>1st Year</td>
<td>55</td>
<td>48</td>
</tr>
<tr>
<td>2nd Year</td>
<td>56</td>
<td>49</td>
</tr>
<tr>
<td>3rd Year</td>
<td>3</td>
<td>3</td>
</tr>
</tbody>
</table>

It is inferred from the above table that majority (63%) of the respondents are from the department of Science and nearly half (49%) of the respondents belong to II year.
Table 3. Distribution of the respondent based on their attitude towards homosexuality

<table>
<thead>
<tr>
<th>Attitude towards Homosexuality</th>
<th>Frequency (n=114)</th>
<th>Percentage (100%)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Stereotype</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Low</td>
<td>29</td>
<td>25</td>
</tr>
<tr>
<td>Medium</td>
<td>51</td>
<td>45</td>
</tr>
<tr>
<td>High</td>
<td>34</td>
<td>30</td>
</tr>
<tr>
<td>Misconception</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Low</td>
<td>32</td>
<td>28</td>
</tr>
<tr>
<td>Medium</td>
<td>53</td>
<td>46</td>
</tr>
<tr>
<td>High</td>
<td>29</td>
<td>26</td>
</tr>
<tr>
<td>Anxiety</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Low</td>
<td>34</td>
<td>30</td>
</tr>
<tr>
<td>Medium</td>
<td>50</td>
<td>44</td>
</tr>
<tr>
<td>High</td>
<td>30</td>
<td>26</td>
</tr>
<tr>
<td>Overall Attitude Towards Homosexuality</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Low</td>
<td>28</td>
<td>25</td>
</tr>
<tr>
<td>Medium</td>
<td>57</td>
<td>50</td>
</tr>
<tr>
<td>High</td>
<td>29</td>
<td>25</td>
</tr>
</tbody>
</table>

It is inferred from the above table that 30% of the respondents have high level of stereotype towards homosexuality, 26% of the respondents have high level of misconception about homosexuality, 26% respondents have high level of anxiety towards homosexuality. The study reveals that 25% of the respondents have high negative attitude towards homosexuality.

Findings related to socio-demographic details of the respondents
- Nearly half (43%) of the respondents belong to the age group of 21 years.
- The respondents are equally (Male - 50% and Female - 50%) distributed in the case of gender.
- More than half (67%) of the respondents are Hindus.
- Majority (83%) of the respondents are from nuclear family.
- More than half (56%) of the respondents come from urban domicile.

Findings related to education details of the respondents
- Majority (63%) of the respondents are from the department of Science.
- Nearly half (49%) of the respondents belong to 2nd year.

Findings related to attitude towards homosexuality
- 30% of the respondents have high level of stereotype towards homosexuality.
- 26% of the respondents have high misconception about homosexuality.
- 26% respondents have high anxiety towards homosexuality.
- The study reveals that one fourth (25%) of respondents have high negative attitude towards homosexuality.

4. Conclusion and Suggestions

Mental health fraternity and the governments in India are yet to take a clear stand on the issues to change widely prevalent prejudice in society. The fraternity needs to acknowledge the need for research into the context-specific issues facing LGBT people in India. The teaching of sexuality to medical and mental health professional needs to be perceptive to the issues faced by people with different sexual orientations and identities. Clinical services for people with such issues and concerns needs to be sensitive to providing holistic care. A positive and a non-judgmental attitude will go a long way in relieving distress. Professional societies need to increase awareness of these issues, transfer knowledge and skill and provide opportunities to increase the confidence and competence of mental health workers in helping people with different sexual orientations and identity. Psychiatrists and mental health professionals need to be educated about the human rights issues and possible abuses. The emphasis should not just be on education but also on a change of attitude. This study shows evidences that one fourth (25%) of the respondents have high negative attitude towards homosexuality. The study also shows that half (50%) of the respondents has a combination of both low and high negative attitude towards homosexuality. Maybe in the future the attitude of the respondents may change.

General suggestions
The answer of a respondents have a big impact in comes of rating. Based on the findings presented, the following recommendations suggested by the researcher:
• No matter what is the gender of an individual it should be respected and views equally.
• Gender equality should be addressed in the society.
• People should continue supporting LGBT community.
• Rights and protection should be implemented among the individuals of LGBT for the fact that there is still discrimination among the third sex community.
• People should be open-minded in including LGBT.

Recommendations suggested by the researcher for the social work professionals are:
• As social workers one must provide advocacy for the LGBT community.
• Campaigns promoting knowledge and acceptance of homosexuality should be arranged.
• Sex education regarding sexual deviations should be provided by teachers and parents to the students in order to reduce development of negative attitude in them.
• Social workers should help the government frame polices that helps the individuals of LGBT community to improve their livelihood.

References
A Study on Suicidal Tendency among PG Students in DRBCCC Hindu College, Pattabiram, Chennai

Priya.S*
Rajan Jayabalan**

Abstract
Suicide is third leading cause of death among modern youth. According to WHO, suicide is the second leading cause of death among 15-29 years. If anyone talks about self-harm or suicide, it is important to take them seriously and to evaluate the risk factors for the same. Student suicide has assumed epidemic. The National Crime Records Bureau (NCRB) in revelation that in India, one student commits suicide every hour. In 2016, 9,474 students committed suicide and failure in examination led to 2,413 suicides by students. The present study aims to examine the mentality and effect of gender, parenting, family type on suicidal tendency among students. The data is collected from 50 respondents through questionnaire method using suicidal tendency scale by Uttamkumar B. Lunagariya.

Keywords: Suicide; Suicidal Tendency; Students; Youth.

1. Introduction
The term” suicide” is derived from the Latin word “suicidium” means “to kill oneself”. According to WHO, in India suicidal rate (21.1%) is higher as compare to the other countries in the world. India now accounts for over a third of the world’s annual female suicides and nearly a fourth of male suicides, a significant increase in its global share from 1990. “According to statistics, over the past three years more than 26,000 students have committed suicide across India. A majority of student suicides are caused by underlying psychiatric factors such as stress, depression and anxiety

Table 1. Total no of suicides and rate of suicides in India 2011 to 2015:

<table>
<thead>
<tr>
<th>Year</th>
<th>No of suicides</th>
</tr>
</thead>
<tbody>
<tr>
<td>2011</td>
<td>1,35,585</td>
</tr>
<tr>
<td>2012</td>
<td>1,35,445</td>
</tr>
<tr>
<td>2013</td>
<td>2,34,799</td>
</tr>
<tr>
<td>2014</td>
<td>1,31,666</td>
</tr>
<tr>
<td>2015</td>
<td>1,33,623</td>
</tr>
</tbody>
</table>

Suicidal tendencies: suicidal tendency is the propensity for a person to have suicidal ideation of to make suicide attempts. it may also refer to:
- Suicide, the act of a human being intentionally causing his or her own death.
- Suicidal person, a person who is experiencing a suicide crisis, and is contemplating, attempting or seeking a means to commit suicide.
- Suicide crisis, a situation in which a person is attempting to kill him or herself or is seriously contemplating or planning to do so.
- Suicidal ideation, a common medical term for thoughts about suicide, which may be as detailed as a formulated plan, without the suicidal act itself.

Review of Literature
M. Amin Wani1*, Dr. R. Sankar2, Binshad M.3, Nargees S.3, Anicham J.3 (2016) in their study on A Study of Suicidal Tendency among Annamalai University Students: female student’s shows high suicidal tendency than male students as the mean score of female students (74.38) is more than mean score of male students (71.06). students
from science faculty have also high suicidal tendency than arts students as the obtained mean scores of science students (76.88) is more than mean scores of students of arts faculty (68.56) Female and science students have high suicidal tendency than male students and arts students.  

Atanu K. Dogra, Saugata Basu and Sanjukta Das (2011)in their study on Impact of Meaning in Life and Reasons for Living to Hope and Suicidal Ideation: A Study among College Students: Results suggest that future expectations and coping beliefs of reasons for living and presence of meaning in life act as common factors for both hope and suicidal ideation but in opposite direction and the meaning in life influences hope and suicidal ideation beyond the effect of other factors.  

Lindsay A. Taliaferro MS, MPH,Barbara A. Rienzo PhD,R. Morgan Pigg HSD, MPH,M. David Miller PhD &Virginia J. Dodd PhD, MPH(2010) in their study on Spiritual Well-Being and Suicidal Ideation Among College Students: This investigation highlighted existential well-being as an important factor associated with lower levels of suicidal ideation among college students. Findings from this study focusing on the association between spiritual well-being and suicidality may prove especially beneficial to suicide prevention efforts.  

Amelia M. Arria ,Kevin E. O'Grady, Kimberly M. Caldeira, Kathryn B. Vincent, Holly C. Wilcox &Eric D. Wish(2009) in their study on Suicide Ideation Among College Students: An estimated 6% of first-year students at this university had current suicide ideation. Depressive symptoms, low social support, affective dysregulation, and father-child conflict were each independently associated with suicide ideation. Only 40% of individuals with suicide ideation were classified as depressed according to standard criteria. In the group who reported low levels of depressive symptoms, low social support and affective dysregulation were important predictors of suicide ideation. Alcohol use disorder was also independently associated with suicide ideation, while parental conflict was not. Results highlight potential targets for early intervention among college students.  

Annette L Beautrais(2000) in their study on Risk factors for suicide and attempted suicide among young people: Current research evidence suggests that the strongest risk factors for youth suicide are mental disorders (in particular, affective disorders, substance use disorders and antisocial behaviours) and a history of psychopathology, indicating that priorities for intervening to reduce youth suicidal behaviours lie with interventions focused upon the improved recognition, treatment and management of young people with mental disorders.

2. Research Methodology

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

A Study on Suicidal Tendency among PG students in DRBCCC HINDU COLLEGE Pattabiram

Statement of the Problem

Researcher was keen to know the condition related suicide in DRBCCC HINDU COLLEGE among PG students. A post graduate is a student who has successfully completed an undergraduate degree level course at a college or university and is undertaking further study at a more advanced level. A PG course is typically one year duration full time or it can take two years to complete part time. Those people are easily gets pressure from family side, and also worried about their future, emotionally attachment etc

Need for the study

India has world’s largest youth population. At the same time India has one of the World’s highest suicide rates for youth aged 15 to 29 ( lancet report), which illustrate the need for urgent interventions for this demographic. So suicidal tendency is still s major problem In our society. It is very essential for the researcher to analyse the problem for the suicidal tendency. In the present study on attempt is made to statistically analyse the data collection on such cases and to highlight various aspects of suicidal tendency like ideation, behaviours, thoughts etc, in order to further strengthen the legal system in preventing this social evil off.  

Aim of the study

The present study aims to examine the effect of gender and family and parenting system on suicidal tendency among students.  

Specific Objectives

1. To know the demographic details of the respondents.
2. To find the effect of gender on suicidal tendency among students.
3. To find the effect of family type on suicidal tendency among students.
4. To find the respondent’s perception about suicide.
5. To find the effect of parenting on suicidal tendency among students.

Hypothesis
1. There is a significant effect of gender on suicidal tendency among students.
2. There is a significant effect of parenting on suicidal tendency among students.
3. There is a significant effect of family type on suicidal tendency among students.

Research design

Descriptive studies are those studies which are concerned with describing the characteristics of particular individuals. Most of the social research comes under this category. In this study, the researcher must be able to define clearly, what he wants to measure and must find adequate methods for measuring it along with a clear cut definition of population wants to study.

Sampling size:
Sampling is a process used in statistics in which a number of observations are taken from the larger population to estimate characteristics of the latter. The researcher used convenient sampling method to collect data. The sample size is 50.

Tools of data collection
The structured questionnaire was used for collecting relevant data from the respondents.

Conceptual definition
Suicide: According to Sil-verman & Maris, 1995, “Suicide is, by defining, not a disease, but a death that is caused by a self-inflicted intentional action or behaviour”

According to Durkheim’s: Suicide is any death which is the immediate or eventual result of a positive or negative act accomplished by the victim himself.

Suicidal tendency
The Suicidal tendency is the propensity for a person to have suicidal ideation or to make suicide attempts.

Limitations
- Some students were absent when I am collecting data.
- It took more time to get permission from each head of the department.
- It is quite difficult to make them understand the questionnaire.

3. Data Analysis and Interpretation

The present study endeavour was aimed to find the effect of gender, types of family and parental system on suicidal tendency.

Table 1. Mean

<table>
<thead>
<tr>
<th>Gender</th>
<th>N</th>
<th>Mean</th>
</tr>
</thead>
<tbody>
<tr>
<td>Male</td>
<td>25</td>
<td>80.84</td>
</tr>
<tr>
<td>Female</td>
<td>25</td>
<td>97.12</td>
</tr>
</tbody>
</table>

The result of the present study demonstrated that female students shows high suicidal tendency than male students as the mean score of female students (97.12) is more than mean score of male students (80.84).same result are found by M.AminWani. etc..(2016)they found female students have more suicidal tendency than male students.

Table 2. Mean

<table>
<thead>
<tr>
<th>Types of Family</th>
<th>N</th>
<th>Mean</th>
</tr>
</thead>
<tbody>
<tr>
<td>Nuclear family</td>
<td>41</td>
<td>89.92</td>
</tr>
<tr>
<td>Joint family</td>
<td>9</td>
<td>84.66</td>
</tr>
</tbody>
</table>

Students from nuclear family have high suicidal tendency (mean -89.92) than students from joint family(mean-84.66)

Table 3. Mann-Whitney U Test

<table>
<thead>
<tr>
<th>SUICIDAL TENDENCY</th>
<th>TEST</th>
<th>SIGNIFICANCE</th>
<th>DECISION</th>
</tr>
</thead>
<tbody>
<tr>
<td>Gender</td>
<td>Mann-Whitney U Test</td>
<td>.001</td>
<td>Reject null hypothesis</td>
</tr>
<tr>
<td>Types of family</td>
<td>Mann-Whitney U Test</td>
<td>.440</td>
<td>Retain null hypothesis</td>
</tr>
</tbody>
</table>
The above indicates that the obtained significant value of the variable (gender) was found significant. Therefore our first hypothesis gender has significant effect on suicidal tendency among students. The second variable (types of family) was found no significant. Therefore our second hypothesis type of family has no significant effect on suicidal tendency among students. The variable (types of family) was found no significant. Therefore our third hypothesis type of parenting has no significant effect on suicidal tendency among students.

Findings

- Female students have more suicidal tendency than male students.
- The family environment is not affecting the students for suicidal ideation.
- Most of the parents give freedom, is democratic but even though students are only wish to share their problems with friends.
- Near 25% of the students accepted that the suicide is better than unhappy life.
- 25% of the respondents are not ready to feel bad for their mistakes.
- 75% of the respondents have siblings.
- 74% of the respondent’s parents are democratic.

4. Suggestion and Conclusion

In recent days parents give more freedom, being democratic but students are not ready to share their problems and also have suicidal thoughts. so only freedom is not enough for understanding the children. every parents try to notice their children carefully like their behaviour, sleep level, appetite to identify that the children have some problem and try to talk in a friendly manner. it will help to minimise the level of suicidal ideation and I also suggest to appoint the social worker in every collages to deeply understand their problems and improve the positive thinking.

The result of the present study, we might conclude that female students have more suicidal tendency than male students and there is no effect of parenting and family type on suicidal tendency.

Reference

Academic Interest of the Under Graduate College Students of Dharmapuri

P. Robert Ramesh Babu*

Abstract
Every individual has a tendency to deal with something in their environment, if it gives something good to them, possible, they will have interest to it. Interest motivates people to choose the best and the most interesting activity in their life. Because each activity has own characteristic, people always select activities and things those are interesting. Lester D. Crow and Alice stated that: “an interest is a motivating force that impels an individual toward participation in one activity rather another. It indicates that interest provide a strong motivation to learn”. Colloquially, being interested in something can mean that we care about it, that it is important to us, and that we have (mostly) positive feelings towards it. We often say things like, “I’m interested in the well-being of my child,” I am interested in becoming a Doctor or Professor. John Dewey once described interest as “being engaged, engrossed, or entirely taken up with” an activity, object, or topic (Dewey, 1913, p. 17). More contemporary interest theorists have divided interest into two components: individual interest and situational interest (Hidi&Baird, 1988; Renninger, 2000). According to Hidi and Renninger, three factors contribute to the development of interest: knowledge, positive emotion, and personal value. As individuals learn more about a topic, they become more skilled and knowledgeable and increase in knowledge. Interest is often thought of as a process that contributes to learning and achievement. That is, being interested in a topic is a mental resource that enhances learning, which then leads to better performance and achievement. Interest in learning, could most probably be a very powerful affective psychological trait and a very strong knowledge emotion as well as an overwhelming magnetic positive feeling, a sense of being captivated, enthralled, invigorated and energized to cognitively process information much faster and more accurately in addition to most effective application of psychomotor traits like self regulatory skills, self-discipline, working harder and smarter with optimum persistence (Kpolovie, 2010). The researcher aims to study the academic interest of the college going students of Dharmapuri. He has taken samples from the students of B.Com Department, Don Bosco College, Dharmapuri. The sample size is 50. The researcher used Descriptive Research design. He has used Survey Method to collect the data and used standardized questionnaire constructed by TharaSebastin as a tool to collect the data. The results are, among the respondents, Male were 54 percent and 46 percent were Female. The mean age of the respondents was 19.78. More than half of the respondents were belonging to MBC community. While analyzing the data 74 percent of the respondents were having low academic interest while the remaining 26 percent had high academic interest.

KeyWords: Academic Interest; Students; Individual interest; Situational interest;

1. Introduction
Interest motivates people to choose the best and the most interesting activity in their life. Because each activity has own characteristic, people always select activities and thing those are interesting. Lester D. Crow and Alice stated that: “an interest is a motivating force that impels an individual toward participation in one activity rather another. It indicates that interest provide a strong motivation to learn.” Interest describes the cognitive and affective relationship between a student and particular classes of subject matter. However, one student's effort to master Latin, mathematics, or lacrosse is not likely to be the same as another student's efforts. Moreover, how a student approaches different subjects can be expected to vary, just as the background and basic abilities that each student brings to each subject will vary.

Interest is defined and whether it be described as a cause of attention, an aspect of attention or as identical with attention, its special significance lies in its intimate connection with the mental activity or attention. Interest is the focusing of the sense organs on or giving attention to some person, activity, situation or object. It is an outcome of experience rather than a gift. It could either result or cause motivation. It could also be regarded as a predeterminant of one’s perceptions that is, what aspect of the world one is mostly likely to see always (McClhermey, Dowson, Young and Nelson, 2005).

Review of literature

* Professor of Social Work, Don Bosco College, Dharmapuri
Interest is a motivational power behind the growth towards expertise (Alexander, 1997). It is a directive force that explains and predicts academic achievement. Interest is also linked to quality: research shows that learning based on interest leads to high-quality learning results (Hidi & Renninger, 2006). Hence, it is important to understand the role interest currently plays in the university environment and possible ways for enhancing its role as a student motivator.

Interest is one of the basic terms within the motivation literature associated with the study of academic development (Brophy, 2004; Eccles). Recently, research has been directed at integrating interest with different theoretical perspectives in the field of motivation (e.g. Harackiewicz, Durik, Barron, Linnenbrink-Garcia, & Tauer, 2008; Hulleman, Durik, Schweigert, & Harackiewicz, 2008; Senko & Miles, 2008).

Most interest theorists concur that interest is a phenomenon that emerges from individuals’ Interaction with their environment as declared by Hidi and Harackiewicz (2000, p.152). Hidi and Renninger (2006) contend that personal interest emanates from an intrinsic desire to understand particular subjects or topics, and is usually associated with high levels of knowledge and value, positive emotions and increased reference value (Krapp, Hidi & Renninger, 1992). Some of the psychological processes which are active when students demonstrate interest in classroom activity, according to Krapp et al., (1992), may include increased attention, greater concentration, pleasant feelings of applied effort, and increased willingness to learn. Sansone and Morgan (1992) add that features such as engaging in an activity freely, with persistence, energy and intensity are the important hallmarks of active interest.

2. Research methodology

The aim of the study is to find out the level of academic interest among the undergraduate students of Private College, Dharmapuri.

Objectives
- To find out the socio demographic details of the undergraduate students
- To find out the level of academic interest among the undergraduate students
- To find out the difference between gender, place of domicile and family type with academic interest

Null hypothesis
1. The majority of the respondents would have high level of academic Interest
2. There is no significant difference between gender and academic interest.
3. There is no significant difference between family type and academic interest.
4. There is no significant difference between domicile of the respondents and academic interest

Research design
The research design refers to the overall strategy that you choose to integrate the different components of the study in a coherent and logical way, thereby, ensuring you will effectively address the research problem; it constitutes the blueprint for the collection, measurement, and analysis of data. The present study is to find the level of academic among the undergraduate students the researcher used Descriptive research design.

Sample
The researcher collected data from undergraduate students of a private college in Dharmapuri. The researcher used purposive sampling method to choose the samples. The sample size is 50.

Data collection
The researcher collected the data through the standardized questionnaire from the respondents by using the Academic Interest Inventory by Thara Sebastin.

Statistical techniques used
To analyse and interpret data, the statistical techniques such as mean, standard deviation and ‘z’ – test were used.

3. 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.
The above diagram presents the level of academic interest among the graduate students. 74 percent of the respondents have low academic interest and 24 percent of respondents have high academic interest. Hence the hypothesis 1 is disproved. Majority of the students have low level of academic interest.

Table 1. ‘Z’ test between the gender and level of academic interest

<table>
<thead>
<tr>
<th>Particulars</th>
<th>Gender</th>
<th>N</th>
<th>Mean</th>
<th>Standard Deviation</th>
<th>Standard error Mean</th>
<th>Statistical Inference</th>
</tr>
</thead>
<tbody>
<tr>
<td>Academic Interest</td>
<td>Male</td>
<td>27</td>
<td>40.66</td>
<td>10.56</td>
<td>2.03</td>
<td>Z= 0.270 Df= 48 P&gt;0.05 Not Significant</td>
</tr>
<tr>
<td></td>
<td>Female</td>
<td>23</td>
<td>44.30</td>
<td>12.50</td>
<td>2.60</td>
<td></td>
</tr>
</tbody>
</table>

From the above table using ‘Z’ test it is found that there is no significant difference between the gender with the level of academic interest of the respondents. Hence hypothesis 2 is proved that gender has no significant difference in the level of academic interest of the respondents. While analyzing the mean score it is observed that female respondents have more academic interest than male respondents.

Table 2. ‘Z’ test between the family type and the level of academic interest

<table>
<thead>
<tr>
<th>Particulars</th>
<th>Family Type</th>
<th>N</th>
<th>Mean</th>
<th>Standard Deviation</th>
<th>Standard error Mean</th>
<th>Statistical Inference</th>
</tr>
</thead>
<tbody>
<tr>
<td>Academic Interest</td>
<td>Nuclear family</td>
<td>36</td>
<td>41.94</td>
<td>10.40</td>
<td>1.73</td>
<td>Z= 0.701 Df= 48 P&gt;0.05 Not Significant</td>
</tr>
<tr>
<td></td>
<td>Joint family</td>
<td>14</td>
<td>43.35</td>
<td>14.42</td>
<td>3.85</td>
<td></td>
</tr>
</tbody>
</table>

From the above table using ‘Z’ test it is found that there is no significant difference between the family types with the level of academic interest of the respondents. Hence hypothesis 3 is proved that family type has no significant
difference in the level of academic interest of the respondents. While analyzing the mean score it is observed that respondents from joint family have better academic interest than those from the nuclear family.

Table 3. ‘Z’ test between the places of living and the level of academic interest

<table>
<thead>
<tr>
<th>Particulars</th>
<th>Family Type</th>
<th>N</th>
<th>Mean</th>
<th>Standard Deviation</th>
<th>Standard Error Mean</th>
<th>Statistical Inference</th>
</tr>
</thead>
<tbody>
<tr>
<td>Academic Interest</td>
<td>Rural</td>
<td>33</td>
<td>43.90</td>
<td>8.90</td>
<td>1.55</td>
<td>Z= 0.183 Df= 48</td>
</tr>
<tr>
<td></td>
<td>Urban</td>
<td>17</td>
<td>39.29</td>
<td>15.27</td>
<td>3.70</td>
<td>P&gt;0.05 Not Significant</td>
</tr>
</tbody>
</table>

From the above table using ‘Z’ test it is found that there is no significant difference between the places of living with the level of academic interest of the respondents. Hence hypothesis 4 is proved that place of living has no significant difference in the level of academic interest of the respondents. While analyzing the mean score it is observed that respondents from rural areas have better academic interest than those from the urban areas.

Findings of the study

- The mean age of the respondents is 19
- 54 percent of the respondents are male while the remaining is female.
- 66 percent of the respondents are from rural areas
- 72 percent of the respondents are from nuclear families.
- 60 percent of the respondents are the eldest among the siblings of the family.
- 74 percent of the respondents have low academic interest and 24 percent of respondents have high academic interest.
- There is no significant difference between the gender with the level of academic interest of the respondents
- There is no significant difference between the family types with the level of academic interest of the respondents
- There is no significant difference between the places of living with the level of academic interest of the respondents.

4. Discussion, Suggestions and Conclusion

Discussion

Majority of the (74 percent) respondents have low academic interest and it is of big concern for the educational institution to make them to get involved in order to get interested in the academic interest. While analyzing the mean score it is observed that female respondents have more academic interest than male respondents. From the mean score it is observed that respondents from joint family have better academic interest than those from the nuclear family. Probably the family environment helps them to realize their responsibilities and then to do their academics well. While analyzing the mean score it is observed that respondents from rural areas have better academic interest than those from the urban areas.

Suggestions

- More of practical oriented learning can be given
- Organize conferences, seminars on practical usages of the theory the students learn in the educational institutions.
- Conduct more exhibitions and make students to participate in them
- Organize more of educational tours and give the students different experiences.
- Motivational programmes can be organized to help them
- Understanding the subjects can be given more importance than relying on memory power alone.
Conclusion

Low interest in academics is becoming very common. The education system of the Tamil Nadu has to seriously think and modify the system from the elementary school onwards. Graduate students of this generation look for technology combined knowledge. May be it is high time that faculties adapt different methodologies to help the students to get interested in the academics. Of course the students have to take personal interest to get motivated to do their academics. The students have to be helped to understand and study rather than giving importance to only the memory power. It is better that they learn most of the concepts in the school through the regional languages.

References

Changing Food Habits and Malnourishment in India

Dr. B. Susmitha*

Abstract
According to Nobel Prize Winner for Economics Angus Deaton, malnutrition in India is not just related to calorie intake, but India’s dependence on a carbohydrate-based diet with low protein and fat content. Nutrition is among any human’s fundamental needs, and access is even more imperative for a child. “The child may eventually die of a disease, but that disease was lethal because the child was unable to fight back due to malnutrition,” Victor Aguayo, chief of Child Nutrition and Development at Unicef-India, observes. It is evident from the above statements that the malnutrition is a major problem in India which requires attention from parents and health workers. Many times it’s been assumed that the major reason for malnutrition is poverty. However it is time to re think it as not only children from poor class are malnourished but also the children of middle class and upper middle class. The other factors responsible for malnourishment is lack of knowledge among parents regarding nutrition, skill and ability to use the locally available resources to meet the nutritional requirements, negligence or let it go attitude and consumption of packed foods and junk foods. Most of the programmes of the government are focusing on meeting the nutritional requirements of children through distribution of food. However this paper tries to discuss through two case studies taken from Anganwadi centres of Chamarajanagar District, Karnataka that Nutrition Education to the parents and awareness among the public regarding the long term health impact of packed food and junk foods is also one of the important strategy that needs to be adopted along with the existing programmes.

Keywords: Malnourishment, Food Habbits, Nutritional Education

1. Introduction
Changing food habits and malnourishment in India: According to Nobel Prize Winner for Economics Angus Deaton, malnutrition in India is not just related to calorie intake, but India’s dependence on a carbohydrate-based diet with low protein and fat content. Nutrition is among any human’s fundamental needs, and access is even more imperative for a child. “The child may eventually die of a disease, but that disease was lethal because the child was unable to fight back due to malnutrition,” Victor Aguayo, chief of Child Nutrition and Development at Unicef-India, observes. It is evident from the above statements that the malnutrition is a major problem in India which requires attention from parents and health workers. Many times it’s been assumed that the major reason for malnutrition is poverty.

Malnutrition refers to getting too much or too little of nutritious requirements. It includes both under nutrition and over nutrition. Malnourishment is witnessed both in the form of stunted growth and overweight. However both the conditions will affect the health and development of the child adversely. Both under nutrition and over nutrition makes the children less active physically, may be for different reasons leading to similar consequences. This would further have a negative impact by affecting learning and expression of the children. However more children will be added to the existing population without physical and mental fitness. Many a time’s malnutrition is linked to poverty. It’s been believed that provision for nutritious food through various governmental schemes and Intervention through non-governmental schemes would address the issue.

It is with this objective two important programmes called Integrated Child Development Scheme (ICDS) and Mid day Meal Scheme were introduced in the year 1975 and 1995 respectively. The ICDS scheme aims at meeting the nutritional requirements of pregnant women, lactating mother and under 6 children. The mid day meal scheme is aiming at meeting the nutritional requirements of school going children. To catalyse progress, the Government of India (GoI) launched the National Nutrition Mission, also known as the PO Shan Abhiyan, in December 2017. The Mission is tasked with reducing under nutrition in all its forms, including preventing and reducing stunting and underweight among children, reducing low birth weight, and reducing the prevalence of anaemia among young children, adolescent girls and women.

In spite these efforts the extent of malnourishment in India is increasing. According to the National Family Health Survey 4 (NFHS 4), 38.4 percent of children in India are stunted and 21 percent wasted. India remains one of

*Assistant Professor, Postgraduate Department of Social Work, JSS College of Arts, Commerce and Science, Ooty Road, Mysore, Karnataka
the highest-ranking countries in the world in terms of the number of children suffering from malnutrition. One in nine school children suffering from over nutrition is a concern as India suffers a dual burden of under nutrition and over nutrition, representing the inequitable distribution of health. Interventions to reduce overnutrition burden and monitoring of over nutrition with the use of a country-specific standard tool are warranted (Lancet 2018).

Causes for Malnutrition

Apart from poverty many other factors are associated with malnutrition. Two major issues of concern here are changing dietary habits and increased intake of junk foods, both are like two faces of the same coin. “We are what we eat” is a common refrain and reflects the great importance food and diet has. The industrial revolution in the last 200 years has introduced radical changes in methods of food production, processing, storage, and distribution (WHO.1990). Economic development together with recent technological innovations and modern marketing techniques have modified dietary preferences and consequently, led to major changes in the composition of diet. There was a shift towards high-fat, refined carbohydrate and low-fibre diet (Popkin 1998). The speed of the transition and the factors influencing it vary from country to country and also within a country between various subgroups [Popkin 2002]. It is also a interesting phenomenon that both under nutrition and over nutrition are found in the same countries, even in the same households[popkin 2002]. The changing and unhealthy patterns of nutrition in the world are often linked with globalization. In countries with high levels of literacy, strong school health programmes, media that emphasize the need for “healthy living” and “healthy policies” could make a significant contribution in educating the youth as well as the adult population [Beare Rogers et al 2002]. The shift towards refined foods and meat and dairy products (what has been termed the “nutrition transition”) is increasingly occurring in middle and lower income countries with resultant rises in obesity and NCDs (Popkin B et al. 2001). In a study by Lyons and Languille (2000), they supposed that “people maintain lifestyles which they know are unhealthy because they meet certain immediate needs”. Television advertisement has an important role in promoting unhealthy dietary practices among children, including diets which are high in fat, sodium or added sugar [Batada et al 2008]. Apart from advertisement through television, other media like newspaper, magazines, billboards, radio and cinemas are also used for marketing [Hawkes C 2002] Consumption of diet high in sugar, saturated fat, salt and calorie content in children can lead to early development of obesity, hypertension, dyslipidemia and impaired glucose tolerance [Times of India 2010]. It is evident that there is an increased intake of junk foods.

To understand the extent of junk food intake two anganwadi’s of thammadahalli village, chamarajangar district, Karnataka has been taken for the purpose of study. In Anganwadi A there are 16 children and in B there are 18 children enrolled. A check list has been prepared to understand the dietary intake of children. The period of study was for three days collecting the dietary intake of the children. From anganwadi A among 16 children 14 children had a chocolate or kurkure( A kind of chips) in a day and would miss the evening snacks. In Anganwadi B also the case is similar. The habit is passing on from one child to another when one child starts consuming the other child eventually tries to consume the same.

To understand it further it’s been decided to understand the mother’s attitude towards the intake of junk foods. Hence whoever was available were asked randomly about their attitude. It’s been found that they are not aware about the adverse effects of the consumption of junk foods.

Through conversations it was evident that even the mothers are influenced by the advertisements. Apart from the advertisements what is making the children and parents accept the junk foods in convenience, taste and peer influence.

The causes for the increased intake of Junk foods may be understood as

1. Influence of Advertisements: Television and mass media advertisements are playing a key role for the increased intake of junk foods. Many children said that it is fun to have coca cola.

2. Lack of Awareness among parents: it is further evident that parents are not aware about the health impact of junk foods. Another major is quite like products which the parents are not able to differentiate and buy. For example chocolates like Dairy Milk and produced in the name of Doiary Milk and sold as if it is Diary Milk.

3. Lack of awareness regarding the nutritional Values of Indegenous foods: Mothers in many instances are not aware about the nutritional values of the locally available food items. It is irony that they sell the highly nutritious product for lower price and buy junk foods from that money.

2. The way Ahead and Conclusion

In April 2016, the United Nations General Assembly adopted a resolution proclaiming the UN Decade of Action on Nutrition from 2016 to 2025. The Decade aims to catalyse policy commitments that result in measurable
action to address all forms of malnutrition. The aim is to ensure all people have access to healthier and more sustainable diets to eradicate all forms of malnutrition worldwide. However in India the efforts need to be taken in this case. There are some cases where in the selling of junk foods in and around the schools is banned. But that is not the only solution. This requires a collective effort. [Community participation is essential in health promotion interventions to achieve the goals [puska 2002].

1. Policy : A strong policy and legislation is required to fix the standards on the production and marketing of junk foods and soft drinks.
2. Awareness to the Anganwadi teachers and School teachers
3. Awareness to the Parents
4. Community Participation

International and national food and nutrition authorities should work together in searching for ideas about how to promote a healthy diet. Dietary globalization usually increases the variety in the traditional, formerly monotonous diets, and thus, improves their energy and nutrient adequacy. At the same time, care should be taken that the diets do not become too Westernized in terms of substantial increases in the intakes of fat, especially saturated fat, salt and refined carbohydrate, but that they stay prudent and health promoting. This is a challenge in a world where the multinational fast food companies aggressively look for new markets, but examples from various parts of the world show that, with well-planned interventions and persistent efforts, the adverse trends can be modified. Eating habits and dietary intakes are changing rapidly in the developing world. Substantial increases in the intakes of fats, refined sugars and salt have led to imbalanced nutrition and over nutrition.

References
Securing the Next Generation of Manual Scavengers

A.Gokila*
J. Vignesh Sabarikiran**

Abstract
Manual Scavengers is a term commonly used in India for the manual removal of untreated human excreta from bucket toilets or pit latrines by hand with buckets and shovels. Dalits who are at the bottom of social hierarchy are forced to take up these jobs. Manual Scavengers have a cruelty livelihood, their caste - designated occupation reinforces the social stigma that is filthy, untouchables. This community is marginalized from the society, and then the society is not allowing them to have an active voice, identity or place. This community people are not valued in the society considering their social economic background. Every individual should be possessed with at the minimum knowledge of the pain of manual scavengers. People should get aware and educated. When people feel disgusting to clean their own shits how can a human remove the waste of fellow human excreta or other dumped wastes? Surely can't equate. The only possible factor which might help to eradicate manual scavenging is by rising up their economical status and also by means of human dignity. Considering this evil situation of manual scavengers, technological development is a boon in helping them and enriching human dignity. In the future outcomes human being should be replaced by robots in cleaning the sewages. Under the concept of Gen-Robotics, robots named as BANDICOOT is first implemented in Kerala as a ground breaking revolutionary decision.

Keywords: Manual scavengers; Untouchables; Gen-robotics; BANDICOOT.

1. Introduction
The true human takes responsibility and does not expect back recognition for their works, manual scavenging is the work that can’t be undertaken by every human, then no queries as this should be highly paid and named as a esteemed job. Every human clean their stomach by defecating, but by cleaning the defecates the manual scavengers are filling their stomachs. The basic mentality of manual scavengers when they sit down to eat, the stinch remains and they feel dirty to intake their foods. That they carry out in the dirty water infested with insects and get bitten by them. Greater level of sacrifice is being done by the manual scavengers, but the society distant them with name of "untouchability".

There is narrow definition for manual scavengers as cleaning septic tanks, sewers, gutters but the exact definition is covering the removal of human excreta in streets or toilets. we have two category of toilet as sanitary and insanitary. Sanitary process is something that now we use in today’s world where there is no need of manual effort. Insanitary is something filthy, once it’s excreted a person should come and remove it from the dry latrine, where there is no water and sewage treatment associated as external assistance.

Mahatma Gandhi lead a movement years ago to end manual scavenging and Untouchability in India, however, even today over a million Dalits are treated as untouchables and are forced to be a manual scavengers for the fear of societal setups from the upper caste. Dalits who are at the bottom of hierarchy are forced to take up these jobs. Talking about eradicating the untouchability is shameful. When they say that some people should not walk in the streets and to carry their footwears on their head in terms of dalit and some people not to be seen, we must think about how they peoples feel about it. Animals like pig, dog, cat, rat can walk in the street; But being the human being equal to all human beings, why should they not walk in streets? This is the philosophy of the Vaikom Satyagraha. The main aim of the philosophy is to abolish Untouchability of non-Brahmins. It is noted that 97% of the population is non-Brahmins. Abolition of Untouchability can save the non-Brahmins. Only after the abolition of untouchability our nation can achieve real Swaraj (Self-rule).

The basic fundamentalist of hindu about caste and untouchability was the almighty created Brahmins from his mouth(priest), from his arms the kshatriya(ruler), from his thighs the vaishlya(merchants), from his feet the shudra(servants). Shudra is the lower caste this is exactly what its quoted in vedas. The socially abhorrent practice of having separate tumblers for higher caste and dalits is still in cursed state in some urban and semi-urban areas. This
Atrocities should be jurisdicated, under section 3(1) 10 of Scheduled caste and Scheduled tribes (prevention of atrocities) Act 1989. This discrimination on glasses is, dalit will be given a tea in plastic cups as other caste people will be given in stainless steel tumbler or glass tumblers.

How manual scavenging continues to exist in India despite it being illegal. Ministry of law and justice had published authority “THE PROHIBITION OF EMPLOYMENT AS MANUAL SCAVENGERS AND THEIR REHABILITATION ACT 2003 “, an act to provide for the prohibition of employment as manual scavengers, rehabilitation of manual scavengers and their families.

Namma Toilet is an initiative by the commissionerate of municipal administration, tamilnadu along with participation of Urbane Industries Ltd to eradicate open defecation in the state. This high quality toilet solution was to design and develop a user friendly universal toilet which will sustainable and should be successfully used by the people across all socio economic spectrum.

The sewage treatment leads to health hazards include exposure to harmful gases such as methane, hydrogen sulfide, cardiovascular degeneration, musculoskeletal disorders like osteoarthritic changes intervertebral disc herniation, infections like hepatitis, leptospirosis and helicobacter, skin problems and altered pulmonary function parameter. Women are working unprotected and contacting countless diseases through their daily and close contact with human waste. Some of these diseases, in addition to TB, include: campylobacter infection, cryptosporidiosis, giardiasis, hand, foot and mouth disease, hepatitis A, meningitis (viral), rotavirus infection, salmonella infection, shigella infection, thrush, viral gastroenteritis, worms and yersiniosis. Facing the dangers of daily contact, “Ninety percent of all manual scavengers have not been provided proper equipment to protect them from faeces.” said a report (Jan 2007) on India’s TISS – Tata Institute of Social Sciences. These are the major disease faced by the manual scavengers. No manual scavengers survives beyond the age of 45.

Indian railway’s is the fourth-largest railway network in the world by size, with 121,407 kilometers. The foremost issue of Indian railways is sanitation. Bio-toilet is a toilet’s which fall apart and decomposes the human waste into water and biogas. That particular decomposition process is carried out by bacteria in the bio-digestion tank. Bio-toilet is eco-friendly it yield profit in two aspects as it reduces the sewage problem and also the reduced level of water consumption. Because the standard toilet’s we use require 3-6 liters of flushing, but for bio toilet’s, we need only 5 to 1 liter’s. The bio toilet tank works accordingly as the decomposing tank will have three output values, one is to remove the decomposed gas like methane, and another is to remove the water. Once the human waste is flushed through the toilet, as soon as the waste reaches the bio-digestion tank the anaerobic bacteria present in the bio digestion tank start to bio-digest the human waste. Later the anaerobic bacteria decompose the human waste into methane and water. Methane is important for electricity generation by burning it as a fuel in a gas turbine or steam generator, methane is piped into homes for domestic heating and cooking. Water can be reused again for other external uses. The Indian railway’s has installed more than one lakh bio-toilets in trains during 2015-2018. But for an essential public sector like Indian railways addressing a big issue like this should not take this much time and should speed up the experiment to avoid the difficulties for the manual scavengers.

Emerging of technical innovation will be the greater solution to escape the manual scavengers. Kerala startup’s robot that could end manual scavenging. ‘Bandicoot’ it’s kind of exoskeleton robot in the country that cleaned manholes without the need for human beings to enter the pits. The project focuses to reduce the mortality among the manual scavengers. Member of team Gen-Robotics had featured the robot as, the device was made of light weight alloys and carbon materials, device could enter 45 cm diameter manholes and go down to six metres. Gen-Robotics have two phases as control unit and robotic unit. Control unit is placed above the manhole, robotic unit is as similar like spider in structure which has four legs, when diameter varies for manhole areas accordingly the legs get stabilize. the system have seven cameras which feeds them information. The cost of ‘bandicoot’ is priced at 17 lakhs, while a human being can take up to three hours to clean a manhole, this robot can do it in 30 minutes. In later period semi-automatic robot was introduced in Kumbakonam, Tamilnadu in 2018. It is procured with financial support of Indian oil corporation’s as a part of corporate social responsibility(csr) initiative. Team Gen-robotics said the device used in kumbakonam is a light-weight version weighing 65 kg. If this ‘bandicoot’ are in practice, sanitary workers would be able to stop endangering their lives on a daily basis. All they needed to do was learn how to operate the robot and it would do the filthy works for them. Discrimination free, secure and alternative livelihoods by providing skill development and livelihoods could go a long way in ensuring steady livelihoods in their future. Favourable environment should me build up through community awareness, to build the capacity of the community to promote rehabilitation efforts and build leadership in the community with a particular focus on dalit. Every human should
realize the value of scavenging and also to realize they are equally guilty and uninterested. Therefore, every individual in the society should have social stigmatization towards this problem. For instance, garbage should be thrown in proper bags and not to thrown in sewers or septic tanks because they cause the blockage. People with blocked toilets should get services from the right sanitation intuitions, not by using manual scavengers for cheap labour. Children whose families are involved in scavenging experience social stigmatization, it will affect their studies. The scavenging peoples are not paid properly to educate their children, so the children dropping their studies and joining with their parents for scavenging. Implementation of more schemes that would help their children to complete their studies and also get a standard lifestyle in the society.

2. Livelihood of Indian manual scavengers
   - I live in a pit
   - When I get in to base for cleaning, the steel rods and pipeline greet with scrapes in thighs and legs
   - I sprinkle my body with highly scented faeces
   - As I get my entire figure into the scented faeces the flatworms, centipedes, water living bugs, other rodents wrap my body and sucks my filthy exude sweat.
   - I stay inside for hours and clean your gutters and shit you excrete
   - Getting back from pit everyday expecting for makeover of my life
   - When I lift my food to eat, that foul and stinchy smells
   - But still I eat to keep my family alive and let their heartbeat.
   - Crossing all those hurdles, try to accomplish fraternity with society
   - But once again the society throw me into a shit named as “untouchability”.

References
https://biotoilet.in
https://www.jstor.org/stable
https://www.thenesminute.com/article
https://www.genrobotic.org/career
Psychosocial Impact of IPC Section 377 on Gay Men in Chennai and Bangalore

R. Sridhar*
Nesamani Rahel Jenifer**

Abstract
The purpose of the research is to study the impact of IPC Section 377 and related psychosocial issues of gay men in Chennai and Bangalore. IPC Section 377 criminalizes the carnal intercourse between the person of same sex by punishing with imprisonment for life, or with imprisonment of either description for a term which may extend to ten years, and shall be liable to fine. Despite the results of numerous scientific studies stating homosexuality is purely natural, criminalizing the sexual activity between persons of same-sex which creates tremendous stress and depression among the gay community. In order to address this problem, the study focuses on three major domains such as legal impact, psychosocial impact and role of sexual identity in an individual’s life process. The study employs mixed method in which quantitative method is carried out in the earlier phase by utilizing scheduled interview as a data collection tool and qualitative method in the later phase utilizes in-depth interview. Since the homosexual community is one of the isolated communities in India, UCLA loneliness scale (Ver.3) is used to measure the level of loneliness of the respondents. The major findings of the study include analysis of psychosocial impact, loneliness level of gay men, difficulties in disclosing sexual identity to friends, family and society and the expectations of the gay community. The scope of the research includes policy formulation and inclusion of gay community.

Keywords: Gay men; Same sex; IPC section 377; Criminalizing sexual activity; Homosexuality

1. Introduction
In India discrimination takes place in numerous ways such as in the name of caste, religion, language, gender, class, etc but there is a type of discrimination which remains taboo not only in India but in many parts of the world. Every day, in various parts of India a certain set of people are getting discriminated due to their “Sexuality” not only the majoritarian society but the Indian Penal Code itself claims that “Homosexuality is Unnatural” and makes it punishable under Section 377 of IPC.

But ample of researchers already proved that “Homosexuality is natural” and renowned Psychiatric institutions like American Psychiatric Association and Indian Psychiatric Association also declared that “Homosexuality is not a mental disorder” and apart from humans around 1500 species of animal practise homosexuality which proves it is completely natural and common.

In general people tend to think sexuality is only related to sexual activity but number of researches showed, in a broader perspective sexuality refers to the romantic, emotional and/ or sexual attraction, practices and identities which may or may not align with sex and gender. Homosexuality exists not only in humans but many other animal species as well. Such behaviour includes sexual activity, courtship, affection, pair bonding and parenting, a review 1999 review by researcher Bruce Bagemihl shows that homosexual behaviour has been documented in about 500 species, ranging from primates to gut worms. (Bruce Bagemihl,1999)

Despite number of researches stating homosexuality is purely natural, the gay (homosexual male) and lesbians (homosexual female) all over the world face severe social discrimination which affects their physical, psychological and social wellbeing. In many countries, sexual activity between is punished with fine, life sentence or even death penalty, once such law is IPC Section 377, the following studies how IPC Section 377 affects the life of gay men. In a study conducted by Alok Gupta states “section 377 is misunderstood by the police men and cause harm to the gay men, the study analyses various incidents happened in India by the influence of section 377 and how it affects the life of individuals, such as Lucknow incident in which a gay man was arrested by the police as a misapplication of section 377 which does not mention anywhere that being a gay or homosexual is illegal but criminalizes only the sexual behaviour between adults involve in carnal intercourse, the study highlights various such incidents took place all over the country and the study further states that constantly watching and observing the lives of gays and lesbians causes fear and depression and to avoid this section 377 should be removed” (Alok Gupta,2006).

* II Msw, Department of social work, Dr. Ambedkar Government Arts College
** Guest Faculty, Department of social work, Dr. Ambedkar Government Arts College
In addition to the legal threat, gays are subjected to severe stress, depression and isolation. A Study done in 2008 by Suicide Prevention Centre shows that a discrimination against gays are a vital cause for the stress, depression and suicide. Legal discrimination and social stigma towards them cause isolation and stressful relationship they stated that anti-discrimination and LGBTQ supporting system would help the people LGBTQ community to lead a stress-free life, (Suicide Prevention Centre,2008)

Because of the discrimination and the resultant effects such as stress and depression, gays experience loss of productivity in their workplace which affects their financial growth as well. On the other hand, if the workplace is inclusive it helps the gay individual to play active role in the work environment. “The relation between inclusion of LGBT community and economic development of a country stated that there is a significant growth in the economic well-being of LGBT people when they are inclusive and also it results in the economic growth of a nation since the per-capita increases for a certain community, it further states that good climate in terms of accommodation of gender and sexual diversity in in working place helps the employees to disclose their sexual orientation and gender identity which leads to increase in mental health and increases the productivity of employees. The study suggests to create LGBT friendly policies in work place”(M.V Lee Badgett 2014).

2. Method

Participants

The sample size of the study is 40, all the respondents are male. Among which 23 are from Chennai and 17 are from Bangalore. 28of the participants hold under-graduation and 12 hold post-graduation and the professional background of the respondents are diverse such as, engineers, teachers, theatre artists, doctors etc.

Research methodology

The research is descriptive in nature and the research method used in this research is mixed method research, in which quantitative method is used in the first phase by employing data collection tools such as questionnaire and interview schedule, in the second phase qualitative method is applied with the help of in-depth interview.

Tools

The research questionnaire is divided into four parts such as demographic profile of the respondents, psychosocial issues faced by the respondents, UCLA Loneliness scale (Ver.3) and in-depth interview. Since, gay men do not get much space to ventilate their emotions they feel isolated, in order to address such scenario, UCLA Loneliness scale is employed. And the major objective of the in-depth interview is to understand the various psychosocial faced by the respondents in their day-to-day life.

Procedure

At the initial stage respondents were informed about the research and received informed consent from them. In the quantitative method data collected from 40 respondents, the UCLA Loneliness scale (Ver.3) was attached along with questionnaire. Once, the data is collected, it is analysed and based on the UCLA score, seven participants was selected and conducted in-depth interview for them.

3. Results and Analysis

Findings pertaining to personal profile of the respondents are as follows,

- Twenty-two (55%) of the respondents are of the age group twenty-two to twenty-five
- Twenty-three (57.5%) respondents are from Chennai and seventeen (42.5%) of the respondents are from Bangalore.
- Twenty-eight (70%) of the respondents completed under-graduation and the rest (30%) have post-graduation
- Thirty-seven (92.5%) of the respondents are unmarried

Findings pertaining to respondents view on ipc section 377

- Thirty-eight (38) of the respondents are aware of IPC Section 377
- Twenty-seven (67.5%) of the respondents are feeling threatened by IPC Section 377
- None (100%) of the respondents have been charged under IPC Section 377.
- Nineteen (47.5%) of the respondents strongly agree to the statement that IPC Section 377 forms discrimination in society
- Fourteen (32.5%) of the respondents strongly agrees that IPC Section 377 stops from disclosing sexual identity

Findings pertaining to respondents disclosure of sexual identity

- Thirty-six (90%) of the respondents consider sexual identity as a part of their identity
Twenty-eight (70%) of the respondents disclosed their sexual identity first to their friends
Twenty-six (65%) of the respondents are not showing willingness to disclose their sexual identity to their siblings
Twenty-nine (72.5%) of the respondents are not showing willingness to disclose their sexual identity to their parents
Thirty-two (80%) of the respondents think their social aspects of life will get affected if they disclose their sexual identity

Figure 1

Figure 1 shows the score of respondents for UCLA Loneliness scale (Ver.3)
Sixteen (40%) of the respondents scored between fifty-one and sixty out of eighty
Twelve (30%) of the respondents scored between forty-one and fifty
Seven (17.5%) of the respondents scored between thirty-one and forty
Two (5%) of the respondents scored between sixty-one and seventy
Two (5%) of the respondents scored between seventy-one and eighty
One (2.5%) of the respondents scored between twenty and thirty
The maximum score obtained by the respondents is 73 out of 80
The minimum score obtained by the respondents is 29 out of 80
The average score of the scores obtained is 50.2%
Hence, it can be inferred that majority of the respondents scored between fifty-one and sixty which indicated higher level of loneliness among the respondents.

Summary of the in-depth interview
Impact of IPC section 377
Majority of the respondent said they were affected by IPC Section 377, it always made them feel insecure and stopped them from disclosing their sexual identity. Also, there was a high possibility of the section get misused which threaten the respondents. Most of the respondent felt that this section intrudes in their privacy and this section not only mentally affected the respondents but also their parents who accepted and supported their children’s sexual identities

Perception on disclosing sexual identity
The respondents, sexual identity plays an important role in the life of every individual. Especially when a person is a homosexual, he faces lot of discrimination from all level of society such as friends, family, educational institution, workplace etc. Since they do not find anyone supportive, they feel very much isolated and hesitate to disclose their sexual identity.

Discrimination faced in educational institution
Majority of the respondents said they have experienced discrimination directly or indirectly in their educational institutions. Respondents shared their experiences include getting bullied by their classmates, hearing hate speech, experience of verbal, physical and psychological abuse.

Love relationship and peer pressure
The respondents said, they continue to get pressured from their peers at all stages of life. For instance, during the school days friends of the respondents used to question about why they are not getting into love relationship, because of such incidents some of the respondents pretended like they are in a relationship with the person of opposite sex or even if the person gets into a relationship with a person of same-sex they could not able to share their joy or even if the relationship gets fail they could not able to share the sorrow and ventilate their grief to anyone which causes immense amount of mental pressure to the respondents.

Experiencing marital pressure

The respondents said majority of the them are currently experiencing marital pressure from their family, friends and society, even if they disclose their sexual identity to their friends, they could not disclose it to their family because of the reason that their parents might not understand or it would worry them. The respondents said there are many places they avoid such as attending wedding ceremonies, meeting old friends, visiting the houses of their relatives etc., The respondents also feel guilty when they think that they could not fulfill their parents’ wish.

Impact of discrimination on physical and mental wellbeing

All the respondents said, at point or another all of them undergone stress and depression because of the discrimination they face at various levels. Since, they could not express their feelings to others they feel isolated and many of the respondents reported self-harming and suicidal attempts. Due to the lack of belongingness to their environment they show less attention to their physical health which also again their mental health, vice versa. All these factors affect their overall life span to a great extent.

Stakeholders to bring change

It requires a collective effort to bring a change in the life of gays, social elements such as family, educational institution, workplace, media and most importantly the LGBT individuals themselves plays an important role in bringing a change. Government should take the responsibility to create awareness to the society regarding gender and sexuality and the issues faced by the gay community. All the measures to reach inclusiveness such as policy formulation, awareness programs should be carried out by the government and non-governmental organizations.

4. Suggestion and Conclusion

Suggestion

- Educating the influential people (Judges, lawyers, teachers, mental health professionals, social workers, media people, politicians, religious leaders etc.,) about sexuality and issues of gays.
- Forming inclusive circles (Gay-straight allies) in schools, colleges, offices and communities.
- Formulating laws to secure the rights of gays (i.e., Anti-discrimination law, marital rights)

Conclusion

The study focussed on the impact of IPC Section 377 and psychosocial issues of gays in which we come know about the various issues faced by gays due to the discrimination based on their sexual identity, the result shows majority of the respondents felt threaten by IPC Section 377 and the scores of ULCA Loneliness scale(Ver.3) indicates that majority of the respondents feel a great sense of loneliness which is not healthy for their physical and mental health and the isolation they experience affects their sense of belonging to their environment.

References

Sustainable Development in Urban Area

C. Avinash*

Abstract
Urbanization is known as population shift from rural to urban areas and step by step increase of population in the urban areas. Sustainable development can be attained, emphasizing improvement and positive change in both environmental and social dimensions. The paper discusses the causes of the urbanization and contribution of the benefits from the governing region, economic effect, environmental effect, health effect, social effect, reshaping in structure of the society, adaptation to the sustainable development, changes in the society because of the development and also the goals to be achieved in the society because of the sustainable development.

Keywords: Urbanization; social effects; adaptation; sustainable development; change in society; goals to be achieved.

1. Introduction
Urbanization is when people move from rural areas to cities and towns. Urban areas are densely packed and also offer greater opportunities to their residents in the form of various job opportunities and highest paying jobs for their better living. Developing countries experience this process of urbanization, once they start becoming industrialized. Cities and towns become the centers of trade and culture, more people starting move out of their country to access the social and economic benefits of other countries. It is a normal part of the developing countries. As the population in cities and towns rise it shows the effect in the economic, environment, health and society. At a point the urban areas become worse than the rural area from which people moved. Urbanization is a societal process but too much of urbanization leads to disaster to the society.

Causes of urbanization
The major cause of urbanization is a rise in the movement of people from rural areas to towns and cities because they saw these places in a developmental area for their future life. Therefore, when numerous people move to developed areas. It leads to the process of urbanization.

Industrialization: There is a sudden shift from the agricultural practices to the non-agricultural job. In recent time’s people has been attracted and move to urban areas because of better employment opportunities. People have got the chance to work in the more industrial sector to stir economic development.

Commercialization: All types of trades contribute to urbanization. In the modern period. Goods, services and commercial transactions have developed much marketing and exchange methods showing growth in towns and cities. The common perception in people's mind is urban areas offer more opportunities when comparing to rural areas in the commercialization.

Modernization and lifestyle: Modernization and SERIOUS CHANGE in peoples lifestyle play an important role in urbanization. Nowadays urban areas are upgrades in technology with communication, infrastructure, medical facilities, education, liberalization and availability of social amenity. Most of the people has the mindset that they can lead a better and happy life. As the result migration of people is growing higher each and every day.

Social Benefits: There are numerous social benefits to life in cities and towns. People get better facilities in urban areas like education, sanitation, housing, sanitation, employment, health care etc. due to these reasons more and more people migrate from rural to urban areas to obtain a wide variety of social benefits and services which are not available in rural areas.

Conurbation from governing region
The conurbation is an area involving the number of greater cities, towns and urban areas through population growth and expansion has combined a developed area. It is also known as a country can benefit considerably from the same things city offer. In some instances, it is an urbanized area having many centers where transport facilities are established to connect link areas and to create a single urban labour market or travel to work area.

Economic effect

*Undergraduate in Social Work, Patrician College of Arts and Science, Chennai.
As the city develops it puts extreme pressure on the resources of the urban areas. This reduces the per capita availability of basic resources. The rapid increase in the workforce leads to exploitation of workers. A sudden increase in demand of basic commodities in the urban areas may lead to a rise in inflation. Basic needs of living standards like education, health, per capita income are reduced in urban areas. This leads to economic crisis in rural areas.

Environmental effect

Urbanization will have catastrophic effects on the ecosystem. The areas of Asia, Africa and South America that are rapidly growing will overlap with biodiversity hotspots. Urban expansion will lead to the decease of endangered and extremely endangered species. Forest and water bodies are cleared to create new cities can be destroyed by floods and landslides. Urban centers have a higher demand for food, energy, land and durable goods than rural areas. In urbanizing areas, agriculture extends on remaining undeveloped land used to expand to new areas. These put pressure on land resources.

Health effect

Rapid growth in urban centers led to overcrowding and spreads health challenges particularly relate to water, air, non communicable diseases (cardiovascular diseases, cancers, diabetes and chronic respiratory diseases), and physical inactivity, harmful use of alcohol as well as the risks associated with disease outbreaks and people living in urban areas, lots of pressure, unhealthy diets, easy transportation all have an effect that affects health.

Social effect

There is no definitive connection between urbanization and violence there are many urban areas are more violent than comparing to rural areas. Studies reveal that certain characteristics of urban communities mixing different beliefs and behaviors increased anonymity and mobility, and individuals who vary in race, age and values. All these liable factors breed criminality. Rapid increase in the urban population can put an overwhelming pressure on officials and residents to respond. The spread of urban poverty and inequality increased with the expansion of cities populations, increases the pressure and results in greater violence within and around an urban area.

Reshaping in structure of society

In cities of the industrialized country, urbanization exhibited focus of human activities and settlements around the downtown area. It is called as In-immigration. In-migration refers to migration from former colonies to the centre of the developed cities centers. Counter urbanization is a social process where people move from urban areas to rural areas. Rural people are attracted by the benefits that cities can offer, but they settle in outskirts of the towns and experience extreme poverty. The countries can't provide enough housing for these rural people are related to over urbanization.

Sustainable development challenges

Assisting urban areas as engines of growth: Urban Cities are engines for economic activities and economic growth. They are centers of excellence for education, health care, culture, technological innovation, social help, government regulation, and communications with the world. They create openings for jobs, employment and livelihood. They are as well focal points for rural remote areas to cut rural poverty.

Urban growth: The express rate of urbanization needs to be beneficially managed to make sure that the prospective economic and social development arising from urbanization are modified to reduce poverty, to improve the quality of life and protect the environment.

Strengthening urban management: Capacity of cities to manage urban growth and development, including mobility to respond to calamity, needs to be strengthened. Project-based approaches with short time view adopted in some cities are unsustainable and did not effectively address long-term goals.

Decentralizing urban administration: Many governments have decentralized responsibilities to local governments. This gives local governments many programmable roles in planning and decision-making in urban development.

Approaches in addressing urban issues:

Urban structure: Permit higher urban densities through zoning through implementing construction plans vertical rather than horizontal development. Set growth boundaries by the urban growth management system, minimize the conversion of natural and agricultural lands to urban uses, therefore, stress infill except for some earthquake-prone areas, retrofitting and renovating old construction structures, gives priorities to the people who take public transport it may reduce the dependency of the automobile and aesthetic appreciation of urban life. Energy conservation measures should be taken municipal vehicles should force to use alternative energy sources.
Environmental rehabilitation: Isolate the polluting industries and demand scrubbers for industrial smokestacks and plant chimneys above the atmospheric level, use an integrated approach to water management by the principles of reduce, reuse, recycle, design waste disposal site and take particular care with toxic waste, implement municipal environmental impact system for new constructions and developments, reconstruct the watercourses that have been buried and destroyed, making a new system for garbage disposal and start to minimize the garbage.

Natural resource conservation: Resource conservation steps should be taken by minimizing the use of agricultural land for the usage of the urban, promote water pricing and water conservation methods, provide a system of urban parks, connected systems of green spaces, extensive trees and landscaping, connection of the open space system to the water, greenbelt that work by refusing to permit leaf frog development. Solar, wind and hydropower projects should be implemented for future use.

Social operations: Urban population require adequate and affordable housing, health care, safety cleanliness, freedom from crime, opportunities for work and personal development by housing for mixed-income housing, protecting the existing housing stock, facilitation of co-operative housing, protect cultural resources through conservation area of designation, safety measures should be more reliable to the urban. Promote business with closed-loop production process for durable in manufactures design products for disassembly and disposal or recovery of reuse and produce business with low energy demands.

Goals to be achieved

Environmental Goals: Reducing greenhouse gas emissions and executing serious climate change reduction and conversing actions, Minimizing urban stretch and developing more compact towns and cities served by public transport, Conserving non-renewable resources and using it sensibly. Reducing energy use and waste produced per unit of consumption, Recycling and disposing of waste produced in ways that do not damage the environment. Reducing the natural footprint of towns and cities.

Economic Goals: Genuine infrastructure and services, including for water supply, waste management, transport and communications, and energy supply. A healthy educated workforce with appropriate skills. Financial institutions and markets potential of mobilizing investment and credit. Appropriate and acceptable resourced governing frameworks which define and enforce non-disciplinary, locally appropriate minimum standards for the providing of safe and healthy workplaces and the treatment and handling of waste discharge. An effectuate legal system that ensures competition, accountability and property rights.

Institutional Goals: Appropriate supporting legal frameworks and Sustained stakeholder involvement, transparent administrative structures and processes. Adequate and sustained institutional capacities, Adequate support and coordination between concerned government bodies, and among government offices, community groups and private sector stakeholders, Relevant and effective guideline for the sustained management and revenue generation of urban development works.

Social Goals: Promoting equal access to, and fair and equal provision of, services and advancing social integration by discrimination and offering opportunities, Physical space to encourage positive interactions, Assurance gender and disability sensitive planning and management, Preventing, reducing and abolishing violence and crime, including its causes.

2. Conclusion

Urbanization increases environmental loads due to the expanding use of energy and resource and impacts on human health and ecosystems. Due to the massive population concentration in urban areas, there is huge pressure on the available civic amenities and facilities. It results that rapid economic development definitely contributed to rapid degradation in environmental quality as well as rapid population growth. Government policies and the program should encourage rural empowerment to prevent the rate of migration of people from rural areas to urban areas. Planning for sustainable cities, mainly in third world countries is a major challenge. Although it is impossible to restrict urbanization, it can be ensured that the path of development that can be moved in the right direction. Integrated and comprehensive planning with active public participation would yield positive results in curbing the problems of urbanization. Appropriate planning and meticulous implementation of developmental program with due participation of people and government could achieve sustainable development.
References
Socio-Economic Impact of MGNREGA Beneficiaries
– A Conceptual Study

A. Vijay Krishnan*
Dr. F. Carter Premraj**

Abstract
Since independence, India has been facing many struggles with regard to rural development. Several development programmes have been launched to uplift the poor and marginalized people, especially in rural areas. One among that programme is MGNREGA. It holds special importance in rural development. Creation of rural infrastructure with 75% of construction activity associated with agriculture-related infrastructure like bunds, embankments, and canals. The objectives of this paper are to examine the impact of MGNREGA on socio-economic aspects of the beneficiaries particularly in Trichy district, Tamil Nadu. It depicted that MGNREGA plays a vital role and has a positive impact on rural development (Karthick 2015). It is a qualitative study and the researcher has adopted a descriptive research design. As the researcher analyzes the literature related to MGNREGA workers it provoked the researcher’s interest to know the socio-economic impact of MGNREGA. The important finding will be discussed in the full paper.

KeyWords: MGNREGA; Impact; Economic; Rural; Infrastructure;

1. Introduction
Mahatma Gandhi National Rural Employment Guarantee Act (MGNREGA) is the flagship programme of the Indian government that directed towards the lives of the rural poor. Since independence, India has been facing the many struggles with regards to rural development. Several programmes have been launched to uplift the poor and marginalized people, especially in rural areas. One among that programmes is MGNREGA. It holds special importance in rural development. The rural economy mainly depends on agriculture, the creation of rural infrastructure with 75% of construction activity associated with agriculture-related infrastructures like bunds, embankments, and canals. These programmes not only provide employment but also focus on inclusive growth, as it conserves natural resources and creates productive assets. By protecting the environment and reducing rural-urban migration this programme has transformed the focus of rural India. “Socioeconomic problems do not exist everywhere that an economic event plays a role as cause or effect – since problems arise only where the sign of those factors is problematical and are precisely determined only through the application of methods of socioeconomics” – Max WEBER. This world’s largest employment guarantee programme aims at enhancing livelihood security of households in rural areas by providing at least 100 days of guaranteed wage employment per year to every rural household whose adult members volunteer to do manual work, which is primarily for natural resource management offering gender-neutral wages. Gram Panchayats are involved in the planning and implementation of the scheme and creation of durable assets for sustainable development of the rural areas.

Socio impact
Reduced the instance of distress migration among rural poor to cities. Impressively benefited the women, SC’s and ST’s the most resulting in their empowerment. Providing local grass root bodies with funds have strengthened them and has ensured that benefits reach to ultimate needy poor a textbook example democratic decentralization.

Economic impact
Providing financial security during the times of the agricultural lean season. Acting as safety net saving rural dwellers from falling into a state of extreme natural events. Creation of rural infrastructure with 75% of construction activity associated with agriculture-related infrastructure like bunds, embankments, canals. Increasing purchasing power of rural poor.

*M. Phil scholar, PG and Research Department of Social Work Bishop Heber College, Tiruchirappalli.
**Assistant professor, PG and Research Department of Social Work Bishop Heber College, Tiruchirappalli.
Review of Literature
Sankari.V&Dr.Sivamurugan(2009)
In this entitled “economic impact of NREGA on employment generation have analyzed that in India unemployment is the main reason for the existence of poverty in rural areas with the launching of the NREGA it has improved the economic condition of the poor people by giving employment opportunity to the rural poor in the country, with a special social needs, helping in reduction of poverty & improve the rural infrastructure in many ways Anandharaja R.etal(2010)
In this article entitled “Rural road development in India through NREGA” depicted that a well-developed infrastructure is a prerequisite for capital formation and for the economic development
Usha Rani Akuja et.al (2011)
The farmer owning large size of landholding and more numbers of livestock are not much interested in participating in MGNREGA workers as they are busy in their own activities. The farmer who have small land and livestock resources are more inclined to work in MGNREGA and their participating is also more. This MGNREGA is providing livelihood security to the resource-poor rural people.
Asha Sharma (2012)
Identified that distress seasonal migration was almost stopped with the advent of the MGNREGA. The reason is that MGNREGA provided regular work in their native place and the flow of income was steady and reliable.
Praduman Kumar &Pk Joshi (2013)
The study has revealed that implementation of MGNREGA is a direct way of increasing income of the rural poor. MGNREGA has been successful in reducing the poverty level by 4 percent. It has provided almost equal employment benefits to all the categories of farm size, household – type and income group. The state-wise study has revealed that through all the states have been benefitted by MGNREGA, but with wide variation, it is observed that the economically weaker states of the country have been benefitted more and have implemented MGNREGA more vigorously
SumanPamecha&Indu Sharma (2015)
The rural economy is the backbone of Indian economic development. Providing employment to rural householders will certainly boost the economy. one of the important objectives of MGNREGA is a significant reduction in migration of unskilled labor force from the rural village to urban cities through its provision of hundred days of guaranteed usage employment
Definition:
MGNREGA is the employment guarantee scheme enacted by the legislation of August 25, 2005. Most significant fact about is that it is considered as a right of a rural citizen to work for minimum 100 days in a year if he/she is willing to work and job should be provided to him/her by authorities within a given time frame [within 15 days] otherwise state government is liable for paying unemployment allowance. Wage is also well defined in the same.

2. Research methodology
Aim
The aim of the present study is to find out the socio-economic impact of Mahatma Gandhi National Rural Employment Guarantee Act(MGNREGA).
Objective of the study
1. To examine the impact of MGNREGA on socio-economic development of beneficiaries in Trichy district of Tamil Nadu.
2. Examine the impact of MGNREGA on employment, out-migration and overall processes of rural transformation.
3. To suggest various ways and techniques enhance the socio-economic condition of the respondent.
Research design
It is a qualitative study; the researcher has adopted a descriptive research design. The researcher has used secondary data to draft this paper. Secondary data comprises of books, research articles, online resources, and news articles.
ImportantCharacteristic of MGNREGA
• Adult members of a rural household may apply for employment if they are willing to do unskilled manual work.
• Such a household will have to apply for registration to the local Gram Panchayat, in writing, or orally.
The Gram Panchayat after due verification will issue a Job Card to the household as a whole. The Job Card will bear the photograph of all adult members of the household willing to work under NREGA. The Job Card with a photograph is free of cost.

A Job Card holding household may submit a written application for employment to the Gram Panchayat, stating the time and duration for which work is sought. The minimum days of employment have to be fifteen.

The Gram Panchayat will issue a dated receipt of the written application for employment, against which the guarantee of providing employment within 15 days operates.

Employment will be given within 15 days of application for work by an employment seeker.

If employment is not provided within 15 days, daily unemployment allowance, in cash has to be paid. Liability of payment of unemployment allowance is of the States.

At least one-third of persons to whom work is allotted work have to be women.

Disbursement of wages has to be done on weekly basis and not beyond a fortnight.

Panchayat Raj Institutions [PRIs] have a principal role in planning and implementation.

Each district has to prepare a shelf of projects. The selected works to provide employment are to be selected from the list of permissible works.

The different categories of permissible works are as follows:

The shelf of projects has to be prepared on the basis of priority assigned by Gram Sabha. At least 50% of works have to be allotted to Gram Panchayats for execution. A 60:40 wage and the material ratio have to be maintained. Contractors and use of labor displacing machinery are prohibited.

**Discussion**

It has been found that MGNREGA helps to socio-economic empowerment of the women worker and it reduces the poverty attain security. Unemployment is the main reason for the existence of poverty especially in rural areas by launching the MGNREGA it helps to the reduction of poverty. MGNREGA helps to improve the rural infrastructure in many ways especially focused on agriculture-related works and for economic development. It enlarges the livelihood security of the people in rural areas by generating wage employment. The people whose having a large size of land holding is not much interested in participating in MGNREGA works. People who don’t have land’s & livestock resources are more included in the MGNREGA works. It stopped the distress seasonal migration rural to urban because MGNREGA provides regular work in their native places. The rural areas are almost becoming ‘old age homes’ due to the hike in non-farm wages attracting rural youths for employment. Simultaneously, agriculture needs to be supported by subsidies for farm machinery in order to assist farmers who are facing the economic scarcity of labor. These policies are crucial for sustaining the food security as well as livelihood security of agricultural sector in the drought-prone as well as in irrigation-dominated states of India. It is a direct way of increasing income of the rural poor and successfully reducing the poverty level. The state which is all comes under the economically weaker that all are benefited by this MGNREGA. Rural economic is the backbone of Indian economic development by providing employment to rural householders will certainly boost the economy.
3. Conclusion:
The study has revealed that implementation of MGNREGA is a direct way of increasing income of the rural poor. It is one of the largest rural development programme implemented in India. The study area representing that MGNREGA is generating multiple benefits in creating employment and also acting as a part in the overall development of rural area this leading to improved water availability and soil fertility resulting in increased crop production, afforestation, infrastructure development, socio-economic development, environmental protection etc. By implementing this MGNREGA programme it stopped the seasonal migration from Rural to Urban. It helps to socio-economic empowerment of the women working in rural areas.

References
Utilization of Health Services by the Siddi Tribe of Yellapur Taluk, Karwar District, Karnataka

R. Ashir Daniel*
Dr. F. Carter Premraj**

Abstract
Siddis are an ethnic group of African origins who have settled in the states of Karnataka, Gujarat and Hyderabad in Telengana and of which more than one third live in Karnataka. In Karnataka they are mostly concentrated in Yellapur Taluk. The health aspect of the Sidditi tribe has been of concern but not studied by many. Traditional medicines have always been preferred by the Siddis, but modern medical treatments have influenced the tribe in the recent times. This study aims to explore the utilization of health services by the Siddis in Yellapur Taluk. Data on a representative sample of 50 of which 60% were females and 40% were males. As a result 50% of them use Government health services whereas 46% use traditional medicines (GauntiAushadi) and 4% go to other private hospitals. The major findings will be discussed in the full paper.

Key Words: Siddis; health services; Traditional medicine; Allopathy

1.Introduction
Siddhis are a tribal community who are found in the jungles of Western Ghats in the Dharwad and Karwar districts of Karnataka; an important social group whose history, experience, and expression are part of the ongoing changing world culture of dispersed peoples. These tribal people believe to be indigenous where as in reality they are not. They are supposed to have come or being brought from outside India for diverse purposes. In the words of Sunil Janah, “people of all races and religions had come and settled, intermingled within these hospitable shores to make the people of this subcontinent culturally rich and wholesome.”

Among such variant races that settled here Siddhis are one, who resemble those of Negroes, a Diaspora that has its history of more than a five hundred years in India.

They are found in various parts of India, states such as Gujarat, Maharashtra, Andhra Pradesh and Karnataka. Though a few of them have assimilated themselves in the Indian society most of them continue to maintain their indigenous customs, traditions, identity and the way of life despite settling in India five hundred years ago or more. But in Karnataka, Siddhis live in small clusters of distinct settlement either in the forest or in the outskirts of it in small villages, settled almost in six major Talukas of Karwar across the Western Ghats. The reason why they settled only in these districts in large numbers is a matter that is discussed in the following chapters. The researcher has focused on these because they are found in large numbers and the researcher has lived with them in these areas.

The census report of 2001 census does not count them as tribes but later they were recognized in the schedule tribe category.

The World Health Organization (WHO) defines health as “a state of complete physical, mental and social well-being and not merely the absence of disease and infirmity.” It is well recognized that health is not the exclusive domain of medical science because every culture, irrespective of its simplicity and complexity, has its own beliefs and practices concerning diseases. No culture works with a meaningless approach in its treatment of diseases. Every culture evolves its own system of medicine in order to treat diseases in its own way. Thus, treatment of disease may vary from group to group. To understand health and health related problems in a proper perspective, it is very important to consider the sociocultural issues, economic dimensions and environmental aspects. This is more relevant in the context of tribal people, particularly living in the rural areas.

Although the National Health Policy, 1983 accords high priority to extending organized services to those residing in the tribal, hilly and backward areas as well as to the detection and treatment of endemic diseases affecting tribal, yet they continue to be one of the fragile population, mainly due to their poor health and disease management. Tribal health is one of the important areas for action in the health sector. The major contributors to the increased disease risk amongst tribal communities include: (i) poverty and consequent under nutrition; (ii) poor environmental sanitation, poor hygiene and lack of safe drinking water leading to increased morbidity from water and vector-borne infections; (iii) lack of access to health care facilities resulting in the increased severity and duration of illnesses; (iv) social
barriers and taboos preventing utilization of available health care services; (v) vulnerability to specific diseases like G-6 PD deficiency, yaws and other endemic diseases like malaria etc. Also, the tribal population, being heterogeneous, there are wide variations in their health status, access to and utilization of health services.

The different tribal communities in India, represents a heterogeneous group. There is considerable variation in the context of socio-economic life, custom and tradition and behaviour and practices. Similarly, variations are also there in the context of demographic features. There is one factor common among all tribal communities except North-east tribals, it is low literacy rate and poor health status and indigenous method of disease management. The tribal illiteracy has a close link between health and disease management.

Review of Literature
Availability and Accessibility to health care

Community based primary health care is the mainstay of health care delivery to persons in developing countries. In these countries, primary care must be accessible to the vast majority of the population as poor access to primary health care is associated with adverse pregnancy outcomes, infant mortality and decreased vaccination coverage. In accessibility of health care facilities may also affect adherence to treatment regime. Access to health services in the developing world is poor, but it gets significantly worse in the rural areas.

LewandoHundt et al (2012) found in their study that there are issues of accessibility in terms of distance, and of acceptability in relation to the lack of local and female staff, lack of cultural competencies and poor communication. Also they found that provision of accessible acceptable health care in rural areas poses a challenge to health care providers and these providers of health care have a developing partnership that could potentially address the challenge of provision to this rural area.

Ray S.K. et al (2011) found in their study that large no of patients did not avail any services when they fall sick especially in the tribal district where distance, poor knowledge about the availability of the services and non-availability of the medicine in addition to the cost of treatment and transport. Utilization of government health facilities was around 38% followed by unqualified Practitioners and Private Practitioners. Referral was mostly by self or by close relatives / families. Also attention is required with respect to the cleanliness of the premises, safe drinking water, face-lift of PHCs and SCs, clean toilet with privacy. Also they concluded that an attempt should be made to improve utilization by cordial behavior, providing more time for patient care by the doctor, and staff, explain their prescription and report, reducing time for registration as well as waiting and finally cost of medicine they can afford.

2. Research Methodology

Title of the study: “A study on the utilization of health services by the siddi tribe of Yellapur Taluk, Karwar District, Karnataka.”

Aim: To describe the utilization of health services by the Siddi tribe of Yellapur Taluk in Karwar District in Karnataka.

Objective:

• To understand the socio-demographic background
• To study the availability and accessibility of basic facilities by the Siddi Tribes in Yellapur Taluk, Karwar district of Karnataka State, South India.
• To determine the utilization of health care facilities by the Siddi Tribes.

Research design and sampling technique

The study is descriptive in nature and the relevant data has been collected from both primary and secondary sources of information. Disproportionate random sampling was used to collect data from 50 respondents. The data was collected through interview schedule through dimensions of Accessibility, Availability, Affordability and Cultural Belief.

4. Analysis and interpretation
It is observed from the above table that majority (76%) of the respondents are coolies and (16%) without jobs while (8%) are into other jobs.

Table 2: Distribution of respondents on their use of health services

<table>
<thead>
<tr>
<th>Health Centre</th>
<th>Frequency</th>
<th>Percent</th>
</tr>
</thead>
<tbody>
<tr>
<td>Private</td>
<td>2</td>
<td>4%</td>
</tr>
<tr>
<td>Government</td>
<td>25</td>
<td>50%</td>
</tr>
<tr>
<td>Traditional</td>
<td>23</td>
<td>46%</td>
</tr>
</tbody>
</table>

It is observed that more than half (54%) of the respondents use allopathy and the remaining (46%) use traditional medicine (GauntiAushada).

Table 3: Distribution of respondents on their knowledge and use of medical insurance

<table>
<thead>
<tr>
<th>Medical Insurance</th>
<th>Frequency</th>
<th>Percent</th>
</tr>
</thead>
<tbody>
<tr>
<td>Yes</td>
<td>6</td>
<td>12.0</td>
</tr>
<tr>
<td>No</td>
<td>43</td>
<td>86.0</td>
</tr>
</tbody>
</table>

It is observed that majority (86%) of the respondents do not use and have no idea of medical insurance while the remaining (12%) have Government medical insurance.

Table 4: Distribution of the respondents on the prioritization of their income

<table>
<thead>
<tr>
<th>Income Prioritize</th>
<th>Frequency</th>
<th>Percent</th>
</tr>
</thead>
<tbody>
<tr>
<td>Land</td>
<td>2</td>
<td>4.0</td>
</tr>
<tr>
<td>Education</td>
<td>13</td>
<td>26.0</td>
</tr>
<tr>
<td>Health</td>
<td>22</td>
<td>44.0</td>
</tr>
<tr>
<td>Food</td>
<td>13</td>
<td>26.0</td>
</tr>
</tbody>
</table>

It is observed that a little less than half (44%) of the respondents spend most of their income on health while the others spend their income on land, education and food.

- Majority of the respondents are coolies.
- Majority of the respondents have no idea of Medical Insurance.
- More than half of the respondents have started using allopathy claiming that Traditional medicines (GauntiAoushade) doesn’t work always and some reasons related such as change in food habits and after the use of allopathy traditional medicines (GauntiAoushade) don’t work well.
- A little less than half of the respondents spend their income on their health.
- Use of English medicines are more by the respondents who have road and transport facility, while others with less or no road transport utilize Traditional medicine.

4. Suggestions and Conclusion

Suggestions
- Future research can be done on the Prenatal and maternal practices.
- Future research can be done on Nutrition level of the children.
• Income generation programmes has to be implemented to improve their socio economic background.

• More studies can be done on the benefits of traditional medicines

Conclusion

The study was conducted by the researcher with an objective to study the availability and accessibility of basic facilities and the utilization of health practices by the Siddi Tribes. Through this the trainee came to know on the availability and accessibility of basic facilities and the utilization of health practices by the Siddi Tribes.

References


Analysis on Alcohol Taking Situation among Men with Special Reference to Anthanallur Panchayat

Dr. M. Daniel Solomon*

Abstract
Addiction is physical as well as psychological need to do, something frequently we use to satisfy urged temptations that could be harmful and dangerous to us. Most commonly addiction has link with alcohol. Alcohol addiction is the major stumbling block for the village development. According to WHO report more than three million people died as a result of alcohol in 2016, more than three fourth of them were men. The present study focuses on the prevalence of alcohol addiction among village people with special reference to three villages of Anthanallur Panchayat. The objective of the study is to find out in which situation people insisted to consume alcohol and to suggest remedial measures. Descriptive research design was adopted and the Sample of 525 data has been collected by adopting snowball sampling method. Drug-taking Situation (IDTS-8) Inventory was used to collect data. The data was analyzed and the results were discussed in this Paper.

Keywords: Alcohol Situation; unpleasant; emotional; physical discomfort; pleasant emotion; testing personal control; urged temptation; conflict with others; social pressure to use; pleasant times with others.

1. Introduction
Alcohol use is part of many cultural, religious and social practices in word wide. It provides perceived pleasure to many users in which alcohol addiction is a state of compulsion to seek and take liquor. Once persons addicted to alcohol, loss their control in limiting their intake of alcohol because of this, the addicted persons become worthless and fail to take care of their family obligations and professional responsibilities. It also lead to dangerous behavior that carry risk of legal, financial and health consequences for themselves and others and increase in expression of anger or negative emotions, especially in inappropriate setting. Insomnia and oversleeping.

According to WHO More than three million people died as a result of harmful use of alcohol in 2016, according to a report released y the world health Organization 2018 September. This represents 1 in 20 death. More than three-quarters of these deaths were among men. Overall, the harmful use of alcohol causes more than 5% of the global disease burden. The Industry association sources estimate 15 percent to 20 percent of absenteeism and 40 percent of accidents at work are due to alcohol. The annual loss due to alcohol-related problems in work places is between Rs 70,000 to 80,000 million. A study looking at the prevalence and associations of hazardous drinking in a male industrial worker population in India found that hazardous drinking was significantly associated with severe health problems, such as head injuries and hospitalizations. The country’s road research institute estimates that 25 percent of road accidents were alcohol-related, one third of the drivers on the highway were under the influence of alcohol and 20 percent of accident-related head injury victims seen in emergency rooms of hospitals have consumed alcohol prior to the accident. In India, household expenditure on alcohol varies between 3 percent to 45 percent of income. Alcohol abuse is one of the main killers of young men in India today. However, its real impact is on the social and family dynamics that underlie its communities. Domestic violence and an exacerbation of poverty have made alcohol abuse the single most important problem for women in India. With one in three people in India falling below the poverty line; the economic consequences of expenditures on alcohol attain special significance. Besides money spent on alcohol, a heavy drinker also suffers other adverse economic effects. These include reduced wages (because of missed work and lowered efficiency on the job), increased medical expenses for illness and accidents, legal cost of drink-related offences, and decreased eligibility of loans.

According to P. P. Aitken observational study of young adults’ drinking groups Drink purchasing procedures, group pressures and alcohol consumption by companions as predictors of alcohol consumption and the researcher conducted this study in U.K. The findings described here and previously (Aitken and Jahoda, 1983) indicate that observational procedures can account for much of the variance in alcohol consumption in natural settings. The factors examined in the present paper accounted for 82% of the variance in alcohol units consumed by the males. Although the best predictors (alcohol consumption by companions, time in the bar, drink preferences) are obviously related to...
'unobservables' (e.g. drinking history, choice of companions) these findings point to the potential value of observational procedures. The convergence of several findings from the observations and interviews, and from findings reported in Dight's (1976) survey suggests that observational procedures can provide useful checks on the validity of findings obtained from questioning procedures. The most notable disparity between results obtained from the interviews and the quantitative observations (the majority of the females interviewed said they usually purchase rounds of drinks when drinking in groups: the majority of the females observed did not openly purchase drinks) indicates that such checks are important.

2. Research methodology

The main aim of the study is to find out the reason for alcoholic addiction and when they are taking alcoholic and provide suitable suggestion. The researcher formulated a three hypothesis for this present study. The universe of the study consists of three village located in Tiruchirappalli district. The researcher adopted snow ball sampling to find out the alcoholic and the total number of sample derived was 525. The standardized scale was used to collect data, the scale consist of eight dimensions namely unpleasant emotional, physical discomfort, pleasant emotion, testing personal control, urged temptation, conflict with others, social pressure to use and pleasant times with others. Interview schedule was adopted to collect the data. Further the data was analyzed.

3. Analysis and findings

While analyzing the age of the respondents more than one fourth 44.6 percent of the respondent are in the age group between 36 to 50 Years, less than one third 30.3 percent of the respondent are in the age group between 20 to 35 Years, more than one tenth 14.1 percent of the respondent are in the age group between 50 to 60 Years, less than one tenth 8.8 percent of the respondent are in the above the age of 60 Years and meager 2.3 percent of the respondent are below the age of 20 years. The average age is seem to be 42 years. With regards to education qualification more than one third 39.2 percent of the respondents completed their middle school, a considerable 16.2 percent of the respondents were illiterate, more than one tenth 14.1 percent of the respondents completed their primary and middle school, 11 percent of the respondents completed their degree and meager 5.3 percent of the respondents completed their HSC. It is also found that majority 63.6 percent of the respondents reside in family, less than one fourth 22.1 percent of the respondents reside alone and considerable 14.3 percent of the respondents reside with their friends.

While analyzing the low and high value of the various dimension of alcoholic of the respondents, it was observed that, More than half, 50.1 percent of the respondents have low of Unpleasant expression and less than half 49.9 percent of the respondents have high level of Unpleasant expression. It shows that more than half, 50.5 percent of the respondents have low of physical discomfort and less than half, 49.5 percent of the respondents have high level of physical discomfort. While analyzing the pleasant emotion more than half, 52.4 percent of the respondents have low level of pleasant emotion and nearly half, 47.6 percent of the respondents have high level of pleasant emotion. With regards to testing personal control more than half, 51.6 percent of the respondents have low level of testing personal control and less than half, 48.4 percent of the respondents have high level of testing personal control. With urged temptation dimension more than half, 54.1 percent of the respondents have low level of urged temptation and less than half, 55.9 percent of the respondents have high level of urged temptation. While analyzing conflicts with others more than half, 53.5 percent of the respondents have level of conflicts with others and less than half, 46.5 percent of the respondents have high level of conflicts with others. It is found that more than half, 52.6 percent of the respondents have low level of social pressure to use and nearly half, 47.4 percent of the respondents have high level of social pressure to use. It is infer that more than half, 53.1 percent of the respondents have low level of pleasant times with others and less than half, 46.9 percent of the respondents have high level of pleasant times with others and he overall alcoholic addiction reveals that more than half, 50.7 percent of the respondents have low level of alcoholic and nearly half, 49.3 percent of the respondents have high level of alcoholic.
Table 1. Karl Pearson coefficient of correlation between the age of the respondent and alcoholic

<table>
<thead>
<tr>
<th>Dimensions</th>
<th>Correlation Value</th>
<th>Statistical Inferences</th>
</tr>
</thead>
<tbody>
<tr>
<td>Age and unpleasant emotional</td>
<td>.046</td>
<td>P &gt; 0.05 Not Significant</td>
</tr>
<tr>
<td>Age and physical discomfort</td>
<td>.143</td>
<td>P &lt; 0.01 Highly Significant</td>
</tr>
<tr>
<td>Age and pleasant emotion</td>
<td>-.006</td>
<td>P &gt; 0.05 Not Significant</td>
</tr>
<tr>
<td>Age and testing personal control</td>
<td>-.004</td>
<td>P &gt; 0.05 Not Significant</td>
</tr>
<tr>
<td>Age and urged temptation</td>
<td>.022</td>
<td>P &gt; 0.05 Not Significant</td>
</tr>
<tr>
<td>Age and conflict with others</td>
<td>.059</td>
<td>P &gt; 0.05 Not Significant</td>
</tr>
<tr>
<td>Age and social pressure to use</td>
<td>-.015</td>
<td>P &gt; 0.05 Not Significant</td>
</tr>
<tr>
<td>Age and pleasant times with others</td>
<td>-.021</td>
<td>P &gt; 0.05 Not Significant</td>
</tr>
<tr>
<td>Age and overall</td>
<td>.035</td>
<td>P &gt; 0.05 Not Significant</td>
</tr>
</tbody>
</table>

The above Karl Pearson coefficient of correlation test result shows that there is a significant relationship between age of the respondents and Physical discomfort, dimension of alcoholic, whereas, there is no significant relationship between age of the respondents and unpleasant emotional, pleasant emotion, testing personal control, urged temptation, conflict with others, social pressure to use, pleasant times with other, dimension of alcoholic and overall alcoholic. It also observed that there is a negative correlation between the age of the respondent and in the dimension of pleasant emotion, testing personal control, social pressure to use and pleasant times with others and there is a positive correlation between the age of the respondent and in the dimension of unpleasant emotional, physical discomfort, urged temptation, conflict with others and overall alcoholic addicted person. The researcher formed the hypothesis as there is a significant relationship between the age and alcoholic addiction but the findings reveals that there is no significant relationship between the age and alcoholic addiction the null hypothesis is accepted and the researcher hypothesis is rejected.

Table 2. Oneway analysis of variance among the respondents’ educational qualification and alcohol taking situations
<table>
<thead>
<tr>
<th>Dimensions</th>
<th>Education</th>
<th>Sum of Squares</th>
<th>df</th>
<th>Mean</th>
<th>Mean Square</th>
<th>Statistical Inferences</th>
</tr>
</thead>
<tbody>
<tr>
<td>Unpleasant Emotional</td>
<td>Between Groups</td>
<td>5572.602</td>
<td>6</td>
<td>G1 = 39.18</td>
<td>928.767</td>
<td>F = 2.336 P &lt; 0.05 Significant</td>
</tr>
<tr>
<td></td>
<td>Within Groups</td>
<td>205907.059</td>
<td>518</td>
<td>G2 = 41.35</td>
<td>397.504</td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td>G3 = 39.47</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td>G4 = 36.44</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td>G5 = 36.67</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td>G6 = 34.56</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td>G7 = 18.52</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Physical Discomfort</td>
<td>Between Groups</td>
<td>10133.332</td>
<td>6</td>
<td>G1 = 41.88</td>
<td>1688.889</td>
<td>F = 3.431 P &lt; 0.05 Significant</td>
</tr>
<tr>
<td></td>
<td>Within Groups</td>
<td>254986.330</td>
<td>518</td>
<td>G2 = 38.47</td>
<td>492.252</td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td>G3 = 38.12</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td>G4 = 34.95</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td>G5 = 32.38</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td>G6 = 27.48</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td>G7 = 20.74</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Pleasant Emotion</td>
<td>Between Groups</td>
<td>2954.857</td>
<td>6</td>
<td>G1 = 43.45</td>
<td>492.476</td>
<td>F = 0.968 P &gt; 0.05 Not Significant</td>
</tr>
<tr>
<td></td>
<td>Within Groups</td>
<td>263453.947</td>
<td>518</td>
<td>G2 = 43.24</td>
<td>508.598</td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td>G3 = 44.95</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td>G4 = 43.60</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td>G5 = 47.38</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td>G6 = 38.91</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td>G7 = 32.59</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Testing Personal Control</td>
<td>Between Groups</td>
<td>9614.969</td>
<td>6</td>
<td>G1 = 37.33</td>
<td>1602.495</td>
<td>F = 2.934 P &lt; 0.05 Significant</td>
</tr>
<tr>
<td></td>
<td>Within Groups</td>
<td>282917.010</td>
<td>518</td>
<td>G2 = 41.80</td>
<td>546.172</td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td>G3 = 39.03</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td>G4 = 36.40</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td>G5 = 43.57</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td>G6 = 28.84</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Urged Temptation</td>
<td>Between Groups</td>
<td>10866.967</td>
<td>6</td>
<td>G1 = 41.80</td>
<td>1811.161</td>
<td>F = 3.681 P &lt; 0.05 Significant</td>
</tr>
<tr>
<td></td>
<td>Within Groups</td>
<td>254859.678</td>
<td>518</td>
<td>G2 = 39.91</td>
<td>492.007</td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td>G3 = 36.76</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td>G4 = 33.87</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td>G5 = 37.14</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td>G6 = 28.16</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td>G7 = 16.30</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Conflict with Others</td>
<td>Between Groups</td>
<td>10121.778</td>
<td>6</td>
<td>G1 = 41.29</td>
<td>1686.963</td>
<td>F = 3.861 P &lt; 0.05 Significant</td>
</tr>
<tr>
<td></td>
<td>Within Groups</td>
<td>226323.851</td>
<td>518</td>
<td>G2 = 43.60</td>
<td>436.919</td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td>G3 = 43.22</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
While analyzing the educational qualification with regards to various dimension of Alcoholic addiction it shows that there is a significant difference among the educational qualification of the respondents and in the dimension of Unpleasant Emotional, Physical Discomfort, Testing Personal Control, Urged Temptation, Conflict with Others and overall alcoholic addicted person and there is no significant difference among the educational qualification of the respondents and in the dimension of Pleasant Emotion, Social Pressure to use and Pleasant Times with others. However it is clear that lower the education and illiterate people have more addiction when compare with higher education. The researcher formed the hypothesis as there is a significant variance among Educational Qualification and alcoholic addiction but the findings reveals that there is no significant variance among the Educational Qualification and alcoholic addiction the null hypothesis is rejected and the researcher hypothesis is accepted.

<table>
<thead>
<tr>
<th></th>
<th>Between Groups</th>
<th>6</th>
<th>Within Groups</th>
<th>518</th>
<th>G1</th>
<th>50.75</th>
<th>986.592</th>
</tr>
</thead>
<tbody>
<tr>
<td>Social Pressure to use</td>
<td>5919.553</td>
<td></td>
<td>317794.648</td>
<td>6</td>
<td>G1</td>
<td>50.75</td>
<td>986.592</td>
</tr>
<tr>
<td></td>
<td>6</td>
<td></td>
<td></td>
<td>518</td>
<td>G2</td>
<td>50.54</td>
<td>613.503</td>
</tr>
<tr>
<td></td>
<td>3</td>
<td></td>
<td></td>
<td></td>
<td>G3</td>
<td>48.35</td>
<td>Not Significant</td>
</tr>
<tr>
<td></td>
<td>5</td>
<td></td>
<td></td>
<td></td>
<td>G4</td>
<td>45.86</td>
<td>Not Significant</td>
</tr>
<tr>
<td></td>
<td>6</td>
<td></td>
<td></td>
<td></td>
<td>G5</td>
<td>41.67</td>
<td></td>
</tr>
<tr>
<td></td>
<td>7</td>
<td></td>
<td></td>
<td></td>
<td>G6</td>
<td>43.81</td>
<td></td>
</tr>
<tr>
<td></td>
<td>8</td>
<td></td>
<td></td>
<td></td>
<td>G7</td>
<td>41.67</td>
<td></td>
</tr>
<tr>
<td>Pleasant Times</td>
<td>4774.838</td>
<td>6</td>
<td>291709.903</td>
<td>518</td>
<td>G1</td>
<td>50.35</td>
<td>795.806</td>
</tr>
<tr>
<td>with others</td>
<td>6</td>
<td></td>
<td></td>
<td>518</td>
<td>G2</td>
<td>48.02</td>
<td>563.147</td>
</tr>
<tr>
<td></td>
<td>3</td>
<td></td>
<td></td>
<td></td>
<td>G3</td>
<td>47.38</td>
<td>Not Significant</td>
</tr>
<tr>
<td></td>
<td>4</td>
<td></td>
<td></td>
<td></td>
<td>G4</td>
<td>44.41</td>
<td>Not Significant</td>
</tr>
<tr>
<td></td>
<td>5</td>
<td></td>
<td></td>
<td></td>
<td>G5</td>
<td>48.10</td>
<td></td>
</tr>
<tr>
<td></td>
<td>6</td>
<td></td>
<td></td>
<td></td>
<td>G6</td>
<td>41.09</td>
<td></td>
</tr>
<tr>
<td>Overall</td>
<td>385334.590</td>
<td>6</td>
<td>9468554.807</td>
<td>518</td>
<td>G1</td>
<td>346.04</td>
<td>64222.432</td>
</tr>
<tr>
<td></td>
<td>6</td>
<td></td>
<td></td>
<td>518</td>
<td>G2</td>
<td>346.85</td>
<td>18279.063</td>
</tr>
<tr>
<td></td>
<td>5</td>
<td></td>
<td></td>
<td></td>
<td>G3</td>
<td>337.28</td>
<td>Significant</td>
</tr>
<tr>
<td></td>
<td>4</td>
<td></td>
<td></td>
<td></td>
<td>G4</td>
<td>316.08</td>
<td></td>
</tr>
<tr>
<td></td>
<td>3</td>
<td></td>
<td></td>
<td></td>
<td>G5</td>
<td>323.21</td>
<td></td>
</tr>
<tr>
<td></td>
<td>2</td>
<td></td>
<td></td>
<td></td>
<td>G6</td>
<td>273.67</td>
<td></td>
</tr>
<tr>
<td></td>
<td>1</td>
<td></td>
<td></td>
<td></td>
<td>G7</td>
<td>195.56</td>
<td></td>
</tr>
</tbody>
</table>

G1= Illiterate G2 = Primary G3 = middle school G4= High School G5 = Higher Secondary School G6 = Under Graduate G7 = Post Graduate
Table 3. Association between living arrangement of the respondent and alcoholic

<table>
<thead>
<tr>
<th>Dimensions</th>
<th>Living arrangement</th>
<th>Low</th>
<th>High</th>
<th>Statistical inferences</th>
</tr>
</thead>
<tbody>
<tr>
<td>Unpleasant Emotional</td>
<td>Living Alone</td>
<td>48</td>
<td>68</td>
<td>$\chi^2 = 4.687$</td>
</tr>
<tr>
<td></td>
<td>living with friends</td>
<td>41</td>
<td>34</td>
<td>$Df = 2$</td>
</tr>
<tr>
<td></td>
<td>Reside in Family</td>
<td>174</td>
<td>160</td>
<td>$P &gt; 0.05$</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td>Not Significant</td>
</tr>
<tr>
<td>Physical Discomfort</td>
<td>Living Alone</td>
<td>51</td>
<td>65</td>
<td>$\chi^2 = 6.962$</td>
</tr>
<tr>
<td></td>
<td>living with friends</td>
<td>31</td>
<td>44</td>
<td>$Df = 2$</td>
</tr>
<tr>
<td></td>
<td>Reside in Family</td>
<td>183</td>
<td>151</td>
<td>$P &lt; 0.05$</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td>Significant</td>
</tr>
<tr>
<td>Pleasant Emotion</td>
<td>Living Alone</td>
<td>58</td>
<td>58</td>
<td>$\chi^2 = 9.441$</td>
</tr>
<tr>
<td></td>
<td>living with friends</td>
<td>28</td>
<td>47</td>
<td>$Df = 2$</td>
</tr>
<tr>
<td></td>
<td>Reside in Family</td>
<td>189</td>
<td>145</td>
<td>$P &lt; 0.05$</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td>Significant</td>
</tr>
<tr>
<td>Testing Personal Control</td>
<td>Living Alone</td>
<td>45</td>
<td>71</td>
<td>$\chi^2 = 9.821$</td>
</tr>
<tr>
<td></td>
<td>living with friends</td>
<td>41</td>
<td>34</td>
<td>$Df = 2$</td>
</tr>
<tr>
<td></td>
<td>Reside in Family</td>
<td>185</td>
<td>149</td>
<td>$P &lt; 0.05$</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td>Significant</td>
</tr>
<tr>
<td>Urged Temptation</td>
<td>Living Alone</td>
<td>53</td>
<td>63</td>
<td>$\chi^2 = 4.264$</td>
</tr>
<tr>
<td></td>
<td>living with friends</td>
<td>43</td>
<td>32</td>
<td>$Df = 2$</td>
</tr>
<tr>
<td></td>
<td>Reside in Family</td>
<td>188</td>
<td>146</td>
<td>$P &gt; 0.05$</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td>Not Significant</td>
</tr>
<tr>
<td>Conflict with Others</td>
<td>Living Alone</td>
<td>57</td>
<td>59</td>
<td>$\chi^2 = 5.432$</td>
</tr>
<tr>
<td></td>
<td>living with friends</td>
<td>33</td>
<td>42</td>
<td>$Df = 2$</td>
</tr>
<tr>
<td></td>
<td>Reside in Family</td>
<td>191</td>
<td>143</td>
<td>$P &gt; 0.05$</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td>Not Significant</td>
</tr>
<tr>
<td>Social Pressure to use</td>
<td>Living Alone</td>
<td>46</td>
<td>70</td>
<td>$\chi^2 = 10.623$</td>
</tr>
<tr>
<td></td>
<td>living with friends</td>
<td>39</td>
<td>36</td>
<td>$Df = 2$</td>
</tr>
<tr>
<td></td>
<td>Reside in Family</td>
<td>191</td>
<td>143</td>
<td>$P &lt; 0.05$</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td>Significant</td>
</tr>
<tr>
<td>Pleasant Times with others</td>
<td>Living Alone</td>
<td>45</td>
<td>71</td>
<td>$\chi^2 = 28.909$</td>
</tr>
<tr>
<td></td>
<td>living with friends</td>
<td>27</td>
<td>48</td>
<td>$Df = 2$</td>
</tr>
<tr>
<td></td>
<td>Reside in Family</td>
<td>207</td>
<td>127</td>
<td>$P &lt; 0.01$</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td>Highly Significant</td>
</tr>
<tr>
<td>Alcoholic</td>
<td>Living Alone</td>
<td>43</td>
<td>73</td>
<td>$\chi^2 = 11.305$</td>
</tr>
<tr>
<td></td>
<td>living with friends</td>
<td>43</td>
<td>32</td>
<td>$Df = 2$</td>
</tr>
<tr>
<td></td>
<td>Reside in Family</td>
<td>180</td>
<td>154</td>
<td>$P &lt; 0.05$</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td>Significant</td>
</tr>
</tbody>
</table>

With regards to living arrangement chi square test was applied and it is found that there is a high significant association between the living arrangement and in the dimensions of Pleasant Times with others, there is a significant association between the living arrangement and in the dimensions of Physical Discomfort, Pleasant Emotion, Testing Personal Control, Social Pressure to use and overall alcoholic addiction and that there is no significant association between the living arrangement and in the dimensions of Unpleasant Emotional, Urged Temptation and Conflict with Others. It also observed 62.9 percent of them are addicted to alcohol when they are alone, 57.3 percent of them have low level of addicted to alcohol when they live with their friends and 53.9 percent of them have low level of addicted to alcohol when they live with their family. The researcher formed the hypothesis as there is a significant relationship between the living arrangement and alcoholic addiction but the findings reveals Hence there is no significant relationship between living arrangement and alcoholic addiction the null hypothesis is rejected and the researcher hypothesis is accepted.
4. Suggestion and Conclusion

Suggestion

Awareness Programme on addiction and its effects can be give it help preventive efforts not only create awareness but can also help to de-stigmatize the problem and individuals affected by alcohol misuse. Community institutions such as Schools, colleges, religious organizations, etc need to be enrolled in the efforts to address alcohol problems within a given community. Social workers need to act as changing agents. Educational and awareness raising initiatives must be complimented by adequate detection and treatment efforts. Professionals likely to come in contact with those affected by alcohol abuse including health care providers, development workers, women’s organizations, police and traffic police require capacity building to ensure detection and appropriate referrals are made.

Conclusion

The mortality rate becomes high because of Alcoholic addiction. The government, Social Workers and the panchayat presidents have to work to gather for the upliftment of the addicted people. Alcohol addicted people use to say its gives pleasure and sociability in the minds of many, harmful consequences of its use are diverse and widespread. In this paper the researcher like to high light the alcohol taking situation among men and it is found in all the situation people like to take alcohol. A world wide policy on alcohol needs to acknowledge and take into account the characteristics, effects and consequences of alcohol use in different societies, and yet to focus and act on the public health goal which is to minimize the harm caused by drinking.

Acknowledgment

The Author would likes to thank the Deanery of Extension, Principal and Club students of Bishop Heber College, Tiruchirappalli for rendering the support in data collection in the adopted villages.

References

Psycho – Social Problems of Construction Women Workers and Social Work Intervention

Dr. S. Sangeeta*

Abstract
The construction sector is the world’s largest industrial employer with seven per cent of total world employment and 28 per cent of industrial employment (Improving Working and Living Conditions in Construction, 2004, p.3). Construction activity is an integral part of a country’s infrastructure and industrial development. In India, the construction sector is the largest employer of unorganized labour next to the agricultural sector (Laskar&Murty, 2004). The major challenge that the women worker face is discrimination in work place and lack of proper health faculty. The need of this study is mainly to find out the socio-economic and psychological problems faced by the women workers. The three main objectives were based on the need of the study. The research design adopted for this study is a descriptive study, with the sample size of 75 respondents. The sampling method used is a convenient method. Interview schedule consists of 35 questions which were prepared for this study such as Socio-Demographic profile, Psychological problems faced by the respondents and analysis were done by the Statistical Package for Social Science (SPSS). The major findings and suggestion were given based on the research finding. This study creates an opportunity to understand about the women construction workersto get support and solidarity. Let us live and make others to live.

Keywords: Construction Women Workers; Psycho-Social Problems; Social Work Intervention; Unorganized sector

1. Introduction
The construction sector is the world’s largest industrial employer with seven per cent of total world employment and 28 per cent of industrial employment (Improving Working and Living Conditions in Construction, 2004, p.3). Construction activity is an integral part of a country’s infrastructure and industrial development. In India, the construction sector is the largest employer in India after agricultural labour in the unorganized sector. However, women construction workers are not allowed to acquire skills and become masons. Women in this sector are considered unskilled and remain same till the end. Men, on the other hand, are trained and given an opportunity to up-grade their construction skills while working and become masons, supervisors and contractors. This study analyses the causes which lead to gender discrimination, and the problems and constraints at home and workplace which affect woman’s participation in the construction sector in India and the barriers for women in the construction sector to acquire skills for masonry work and how they could be trained to become masons and intervene them.

Women form more than half of workforce in the construction sector. Yet, the division of labour is gendered. Masonry and carpentry are considered as male-dominated work which requires special skills. Women carry head loads of brick, sand, stone, cement and water to the masons, and also sift sand. Their wages are less compared to men. The wages paid to them is less. Moreover wages are deducted and even lose their jobs if they take leave. They are also subjected to sexual harassment.

Problems Faced
- Gender discrimination
- Lack of safety measures at a construction site
- No job security
- Poor living conditions
- No safe drinking water

Need & importance of the study
The researcher attempted to critically and objectively examine the conditions and the responses of the women construction workers and has specially chosen women construction workers because they are especially vulnerable to various kinds of problems and difficulties both at working and residing place and exploitation from the contractors. A large number of these workers come with their family and face number of problems including Socio-Economic,

* Associate Professor, Department of Social Sciences, Faculty of Developing Tamil, Tamil University, Thanjavur.
Psychological, and the provision of education to their children. In this study, the researcher examined the reasons why it is so? And to create an impact to reach the unreached people who are working in this unorganized sector. The statement of the problem

Opportunities in Construction for Employment have been a pull factor in attracting women from rural to urban areas and from smaller towns and cities to larger urban areas. The construction sector, with its huge demand for unskilled labour, ultimately provides employment to a majority are men workforce. Women construction workers are deprived of their rights. They are often deprived of even the basic human needs like safe drinking water or access to primary health care, education for their children and discrimination in the workplace and in wages. All this made the researcher to conduct the study to focus the problems and to go with social work interventions.

Review of literature

The construction industry differs from most other industries in that it is constantly in flux. Working conditions are very seldom the same from one day to the next, posing many challenges to the workers. The construction industry is considered to be dangerous and of a highly hazardous nature (Hinze and Olbina, 2008; Haupt, 2001; Rowlinson, 2000). Globally the construction industry has one of the highest injury rates, very often second only to the mining sector (Hinze, 2006). When investigating injuries, the events leading to the injuries, the nature or type of injuries occurring and the body parts affected are important in ascertaining what measures should be implemented to reduce the injury rates. The definition of an older construction worker for the purposes of this dissertation is: a worker over the age of forty years (Smallwood and Haupt, 2003)

According to census 2001, India’s population exceeded 1 billion, with 67.2 per cent of the population living in rural areas and the other 32.8 per cent in towns and cities. Of the total workforce, 73.3 per cent remained in rural areas, while the rest 26.7 per cent are in urban areas.

A cohort mortality study of construction workers, Department of Hygiene, Nagoya University School of Medicine, Japan. This report presents a mortality study among the 17,344 members of the Construction Workers' Health Insurance Society of Mie Prefecture in Japan. The study period was between 1973 and 1993. During this period, 480 members died. Age-specific mortality rates of Mie Prefecture were used as comparison standards. Significantly elevated standardized mortality ratio (SMR) and proportionate mortality ratio (PMR) were observed for "accidents and adverse effects." In addition, the PMRs of all cancers and "cancers of trachea, bronchus and lung" were also significantly elevated. The job classifications were reorganized into three groups, according to the frequency of asbestos exposure the workers experienced on the construction sites. The asbestos exposure was based on job classifications among 7,411 workers who had completed a self-administered survey questionnaire. In the frequent-exposure group, the PMR was significantly elevated for all cancers. In the medium-exposure group, the SMRs were significantly elevated for all cancers and "cancer of trachea, bronchus and lung." The PMR was significantly elevated for "cancer of trachea, bronchus and lung." In the less-exposure, group, the PMR was significantly elevated for "accidents and adverse effects." This study provided support for the hypothesis that working in the construction industry might be associated with high risks for asbestos-associated cancers and accidental deaths.

Dave Vandana (2012) conducted a study on Women Workers in Unorganized Sector. The objective of this study was to know the socio-economic, working and living conditions of workers. The multistage stratified random sampling technique was applied, data was collected from 350 female workers from urban and rural areas of 3 districts of Haryana namely Panipat. Kaithal and Kurukshetra Workers faced problems like disparity in wages where female workers were paid less. Working hours were not fixed and harassment at work place was common.

Kalpanadevi, U.V.Kiran (2013) in their research paper titled ‘Status of Female Workers in Construction Industry in India’ observes that Construction industry provides job opportunity to large number of skilled as well as unskilled workforce. The workforces employed in the industry have to face several difficulties at the work place. Several issues related to health, job stress, and injuries at work place are the major concern of the research among researchers. They identify the key factors related to the status of female worker in the industry. According to them, Women work as unskilled labour and face several other difficulties in comparison to males. Sexual harassment, gender biases, wage discrimination are the major factor due to which the working environment becomes difficult for them in the industry and women remains at the same level of skill even after working few numbers of years.

2. Methodology

Objectives
• To study the Socio-Demographic profile of the respondents.
• To know the Socio-Economic problems of the women workers.
• To bring out the Psychological problems faced by the women workers and to promote social work intervention.

The research is been carried out to know the Psycho-Social and Economic condition of women construction workers in Thanjavur. The descriptive research design is used. The focus of the descriptive research is to provide an accurate description of something that is occurring and it is more specific in that they direct attention to particular aspects or dimension of the research target. This research study has a sample size of 75 respondents. The convenient Sampling method was used to collect samples as the respondents could meet only in the working place. The tool used to collect data for this study is the Interview schedule. It consists of 35 questions which were prepared for this study such as Socio-Demographic profile, Psychological problems underwent, Economic problems faced by the respondents. The researcher used the Statistical Package for Social Science (SPSS) for this research study. Primary data are the information collected from the respondents through the Interview schedule. Secondary data information is collected from books, reports, research studies and website.

3. Major findings

Socio-demographic profile of the respondents

• 21.3% of the respondents come under the age 26-30 years, 14.7% under the age of 31-35 years, and another 14.7% under the age of 46-50 years.
• 32% respondents have completed their primary school education, and another 36% respondents don’t have any educational qualifications.
• 74.7% of the respondents are living as a nuclear family.
• 90% of the respondents carry sand, bricks, stone to masons and others do the menial work.
• 56% of the family members are not working with the respondents, but 44% of the family members are working along with the respondents.
• 60% of the respondents are not working with their relations, 26.67% of the respondents are working with their husband, 13.33% of the respondents are working along with their all family members, and 4% of the respondents are working with their cousins.
• 74.7% of the respondent's children are going to school and 25.3% the children not going to school.

Economic status of the respondents

• 46.67% of the respondents are working for 5 years, 25.33% of the respondents are working from 6 to 10 years, 16% of the respondents are working from 11 to 15 years, and 12% of the respondents are working from more than 15 years.
• 73.3% of the respondents are getting Rs.5000-6000 salary per month and 26.97% of the respondents earn Rs. 3000 – 4000 per month.
• 62% of the respondents say there is no security for the job and 38% of the Respondents opined that there is job security. 92% of the respondents don’t have knowledge about insurance schemes and 8% of the respondents have knowledge on insurance schemes.
• 72% of the respondents are not saving their money and 28% save money.
• Most of the respondents suffered from a headache, body pain, vomiting, skin disease and fever sometimes, 49.3% of the respondents not at all consulting doctor when they are affected by illness.
• 70.7% of the respondents are staying at their construction place itself, and 29.3% of the respondents are staying in rental houses near the construction place.

Psychological status of the respondents

• 58.7% of the respondents say there are no any discriminations, and 41.3% of the respondents say that there is discrimination. The discrimination is mainly wages, workload and working hours respectively.
• 58.7% of the respondents do not have a job throughout the year, and 41.3% of the respondents are having a job throughout the year.
• 30.67% of the respondents go for other site work if there is no work at their site, and 22.67% of the respondents will go to their native place, 17.33% of the respondents will go for some other works, 17.33% of the respondents will search works, 10.67% of the respondents will not do anything, and 1.33% of the respondents will go for cutting trees.
56% of the respondents feel that they are alone. 41.3% of the respondents have fear towards this job.  
36%, 28% & 19% of the respondents have stress, depression and anxiety sometimes respectively. This shows that the respondents face these problems sometimes due to their workload.

4. Suggestions and Conclusion

Suggestions

- Training and Awareness regarding the unorganized sector and schemes available for them should be given. Importance of Education for their children should be focused in order to reduce child labour and major accident and child death at the construction place.
- Women are considered as the weaker sex, but now women are doing the work of men, so there should not be any discrimination in their wages.
- It is the right of the worker to enjoy the safe and proper living conditions with living rooms, drinking water facilities, toilets facilities, electricity facilities etc. but they are deprived of all these provisions. The construction companies do not bother about it. So to check all these defects the Labor Rights Commission and the Human Right Commission should pay visit to these construction sites and do the action against the construction companies for negligence.
- The Labor Welfare Department should ensure adequate insurance facilities for the construction labourers and NGOs can come forward to frame welfare programmers for these workers.
- The contractors should ensure the decent working conditions and proper contract systems and providing basic health care for construction labourers.
- Adequate intervention from the Government authorities required for ensuring the health, safety and welfare of the construction labourers.
- Constructive support from the trade unions to the construction labourers to be ensured where the government and management couldn't support.
- Counselling can be arranged by the construction companies to check the psycho problems of the workers.
- Group work can be conducted to the workers to come out of their stress.

Conclusion

Researchers must bring out the problems of the people who are in need of help. The research must lighten the lamp for the people who really suffer. The needs should reach the unreached people. Most of the people who are needed are not be identified and focused. We all live in a comfortable zone with a good house for shelter. But the people who have constructed our house do not have a proper shelter place. This research shows the Psycho-Social and Economic problems faced by the women construction workers. Because the social, psychological and economic plays, an interrelationship within these three aspects if one of the aspects is affected then the other two are also affected.

This research plays an active role in seeking resources that allow for the implementation of further research in this area. Awareness and training on health, hygiene, savings, Government schemes, general insurances and other important aspects of the life should be given to the women construction workers for the fulfilment of their basis needs and to live a healthy and prosperous life.

References


Safety and well-being of children is one of the indicators for the development of any nation as children constitute a great portion of national resource and wealth of any country. But sadly in most of the countries of the world children are exploited and their rights violated. Child Rights are Children's entitlements. Article 2 of the UNCRC (1989) affirms that all the rights guaranteed by the Convention must be affordable to all children without discrimination of any kind. Inspite of the many commendable schemes and far-reaching initiatives by the governments, national and international organizations millions of children in different parts of the world continue to remain being denied, deprived and exploited of their rights. Save the Children India (2016) state that Child Rights violation in India is an issue which needs to be addressed at many levels. As school teachers play vital role in the life, education and development of children, School teachers are also one of the key stakeholders of child rights protection. In the contemporary scenario as the Professional Social Work emphasizes changes in its educational curriculum and innovation in its Field Practice, a focus on the Knowledge of Child Rights aspects in the School settings is a need of the time. Hence the present study is an attempt to explore the knowledge of child rights among school teachers in Udupi District Karnataka with the purpose to suggest ways to emphasize child protection environment in school setting.

Key words: Knowledge; Child; Child Rights; Teachers; School setting;

1. Introduction

The most basic needs of children are referred to as Child rights. Child rights are specialized human rights that apply to all human beings below the age of 18. Article 2 of the United Nations Convention on the Rights of Children (UNCRC 1989) affirms that all the rights guaranteed by the Convention must be affordable to all children without discrimination of any kind regardless of race, national origin, colour, gender, language, religion, opinions, origin, wealth, birth status, disability, or other characteristics. Inspite of the many commendable and far-reaching initiatives by the governments, national and international organizations millions of children in different parts of the world continue to remain being denied, deprived and exploited of their rights. Child Rights violation in India is an issue which is multi-faceted and multi-dimensional.

As a Child Rights Social Worker the author's observation is that violation of child rights at home, in the school and in the communities is being reported even in Udupi District of Karnataka (CWC Udupi Case Report 2015-2016). Reflecting on the Role of Various Stakeholders in the Protection of Child Rights, the author believes school teachers to be one of the key agents of Child Rights protection. Majority of the teachers limit themselves with the teaching of subjects concerned to them failing in their responsibility in responding to children's problems which further indicate the negation of ensuring Children's Rights in school settings.

In the contemporary scenario as the Professional Social Work emphasizes changes in its educational curriculum and innovation in its Field Practice, a focus on the Child Rights aspects in the School settings is a need of the time. In particular Knowledge of Child Rights among school teachers will ensure holistic growth, care and protection towards children in school settings. School teachers are one of the key stakeholders of child rights protection, because after parents it is the teacher who influences a child's life most and contributes to the shaping of his or her personality. Apart from the teaching responsibility a good and a genuine teacher also plays a role of a parent in the care and protection of children. The teachers’ duty to protect children does not come to an end once they are out of the school premises. Creating a safe learning environment, identifying pupils who are suffering with problems or at risk and then taking appropriate action, are vital for a teacher to ensure that children are safe at home and at school.

* Doctoral Research Scholar, PG and Research Department of Social Work, Bishop Heber College, Tiruchirappalli
** Associate Professor, PG and Research Department of Social Work, Bishop Heber College Tiruchirappalli
school. As children live most significant part of their childhood in schools, teachers have a vital role in protecting children's rights. Hence Teacher’s knowledge of child rights is important in this context. And so the present study is an attempt to explore the knowledge of child rights among school teachers in Udupi District Karnataka with the purpose to suggest ways to emphasize child protection environment in school settings.

Review of Literature

UNICEF (2005) report on the status of children in India highlights that millions of Indian children are equally deprived of their rights. 47 out of every 1000 live births do not complete their first year of life, there are an estimated 300,000 child beggars and 10.12 million child labourers (National Census 2011), over 81.5 lakh children don’t go to school, a child goes missing every eight minutes, (NCRB), an estimated 1.2 million children are bought and sold into sexual slavery every year, and about 57 rape cases on children per day. Evidences state that children in need of special protection belong to communities suffering disadvantage and social exclusion. Save the Children India (2016) state that Child Rights violation in India is an issue which needs to be addressed at many levels for which the role of both Government and Nongovernment bodies is imperative. UNICEF (2014) in its’ booklet “Teachers, Inclusive, child-centred teaching and pedagogy” highlights that Teachers are crucial in providing quality education for all children. Despite the efforts of policy-makers many children still lack teachers who are adequately trained to meet their needs.

2. Research Methodology

The aim of this study is to analyze the Knowledge on Child Rights among school teachers in Udupi District, Karnataka. The objectives of the study are; to describe the Demographic Characteristics among school teachers, to measure the knowledge level on Child Rights among school teachers and to provide suitable suggestion to enhance the knowledge of school teachers about child rights. The study is descriptive in nature. From 25 schools 100 samples were selected by using simple random sampling through lottery method. Self Prepared Questionnaire using the method of Likert 5- point scale was used as the tool of data collection. The questionnaire consists of six dimensions namely-specific Rights of the children, government schemes /Programmes for the welfare of children, prevailing Child Related problems/issues, child safety measures practiced in schools, Legal provisions for protection of Child Rights and Child Protection Mechanisms. The statistical analysis has been done using SPSS analyzing the socio demographic and knowledge on Child Rights variables.

3. Analysis and Interpretation

It is found that majority sixty three percent of the respondents are of female and more than one third thirty seven percent of the respondents are male. While analyzing the educational Qualification of the respondents, majority sixty seven percent of the respondents completed their B.Ed or D.Ed, less than half thirty three percent of the respondents are with just post graduation or Graduation or PUC. With regard to type of schooling the researcher collected data from government, Aided and unaided schools and it is inferred that less than half one fourth percent of the respondents are working in government schools, more than one fourth percent of the respondents are working in Aided (thirty percent) and unaided schools (twenty nine). It is clearly evident that while analyzing the age one third of the respondents are in the age group between forty one to fifty years, less than one third thirty one percent of the respondents are above the age of fifty, less than one forth twenty percent of the respondents are in the age group between thirty one to forty and only sixteen percent of the respondents are below the age of thirty.

Major Findings

While analyzing the Respondent’s Knowledge about Child Rights it is clearly found that less than half forty six percent of the respondents have medium level of Knowledge about Child Rights, more than one fourth twenty eight percent of the respondents have high level of Knowledge about Child Rights and remaining twenty six percent of the respondents have low level of Knowledge about Child Rights. It is found that Knowledge of the government schemes /Programmes for the welfare of children among the respondent seem to be medium (thirty nine percent), thirty three percent of the respondents have low level of Knowledge of the government schemes and remaining twenty eight percent of the respondents have high level of Knowledge of the government schemes. It is observed that less than half forty three percent of the respondents have medium level of Knowledge about on prevailing Child Related problems/issues, less than one third thirty one percent of the respondents have high level of Knowledge on prevailing
Child Related problems/issues and remaining more than one fourth twenty six percent of the respondents have medium level of Knowledge on prevailing Child Related problems/issues.

It is found while analyzing the Knowledge on Child safety Measures taken by School authorities less than half forty four percents have medium level of Knowledge on Child safety Measures taken by School authorities, less than one third thirty one percent have low level of Knowledge on Child safety Measures taken by School authorities and remaining one fourth twenty five percent have high level of Knowledge on Child safety Measures taken by School authorities. While analyzing Knowledge on Legal provisions for protection of Child Rights less than half forty three percent have medium level of Knowledge on Legal provisions for protection of Child Rights, more than half twenty nine percent have high level of Knowledge on Legal provisions for protection of Child Rights and remaining twenty eight percent have low level of Knowledge on Legal provisions for protection of Child Rights. It shows that half of the respondents have medium level of Knowledge on Child Rights Protection Mechanisms and one fourth of the respondents have low and high level of Knowledge on Child Rights Protection Mechanisms. It is evident that less than half forty eight percent of the respondents have medium level of overall knowledge on child rights, more than one fourth of the respondents twenty seven percent have low level of overall knowledge on child rights and remaining twenty five percent of the respondents have medium level of overall knowledge on child rights.

<table>
<thead>
<tr>
<th>Dimensions</th>
<th>Correlation Value</th>
<th>Statistical Inference</th>
</tr>
</thead>
<tbody>
<tr>
<td>Age and Respondent’s Knowledge about Child Rights</td>
<td>.026</td>
<td>P &gt; 0.05 Not Significant</td>
</tr>
<tr>
<td>Age and Knowledge of the government schemes /Programmes for the welfare of children</td>
<td>.057</td>
<td>P &gt; 0.05 Not Significant</td>
</tr>
<tr>
<td>Age and Knowledge on prevailing Child Related problems/issues</td>
<td>.067</td>
<td>P &gt; 0.05 Not Significant</td>
</tr>
<tr>
<td>Age and Knowledge on Child safety Measures taken by School authorities</td>
<td>.048</td>
<td>P &gt; 0.05 Not Significant</td>
</tr>
<tr>
<td>Age and Knowledge on Legal provisions for protection of Child Rights</td>
<td>.183</td>
<td>P &gt; 0.05 Not Significant</td>
</tr>
<tr>
<td>Age and Knowledge on Child Rights Protection Mechanisms</td>
<td>.056</td>
<td>P &gt; 0.05 Not Significant</td>
</tr>
<tr>
<td>Age and Knowledge on Child Rights</td>
<td>.087</td>
<td>P &gt; 0.05 Not Significant</td>
</tr>
</tbody>
</table>

It is found from the above table that there is no significant relationship between the age of respondents and in the various dimensions like Knowledge about Child Rights, Knowledge of the government schemes /Programmes for the welfare of children, Knowledge on prevailing Child Related problems/issues, Knowledge on Child safety Measures taken by School authorities, Knowledge on Legal provisions for protection of Child Rights and overall Knowledge on Child Rights.
Table 2. Oneway ANOVA among the Respondents’ Educational Qualification and Various Dimensions of Knowledge on Child Rights

<table>
<thead>
<tr>
<th>Dimensions</th>
<th>Educational Qualification</th>
<th>Sum of Squares</th>
<th>df</th>
<th>Mean</th>
<th>Mean Square</th>
<th>F</th>
<th>P</th>
<th>Significant</th>
</tr>
</thead>
<tbody>
<tr>
<td>Respondent’s Knowledge about Child Rights</td>
<td>Between Groups</td>
<td>400.065</td>
<td>3</td>
<td>G1 =28.00</td>
<td>133.355</td>
<td>3.551</td>
<td>&lt;0.05</td>
<td>Significant</td>
</tr>
<tr>
<td></td>
<td>Within Groups</td>
<td>3604.845</td>
<td>96</td>
<td>G2 = 33.20</td>
<td>37.550</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td>G3 = 38.30</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td>G4 =36.88</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Knowledge of the government schemes /Programmes for the welfare of children</td>
<td>Between Groups</td>
<td>189.783</td>
<td>3</td>
<td>G1 =26.67</td>
<td>63.261</td>
<td>1.493</td>
<td>&gt;0.05</td>
<td>Not Significant</td>
</tr>
<tr>
<td></td>
<td>Within Groups</td>
<td>4067.527</td>
<td>96</td>
<td>G2 = 33.00</td>
<td>42.370</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td>G3 =35.05</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td>G4 =33.61</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Knowledge on prevailing Child Related problems/issues</td>
<td>Between Groups</td>
<td>345.162</td>
<td>3</td>
<td>G1 =32.33</td>
<td>115.054</td>
<td>3.270</td>
<td>&lt;0.05</td>
<td>Significant</td>
</tr>
<tr>
<td></td>
<td>Within Groups</td>
<td>3378.228</td>
<td>96</td>
<td>G2 = 36.20</td>
<td>35.190</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td>G3 =41.30</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td>G4 =40.06</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Knowledge on Child safety Measures taken by School authorities</td>
<td>Between Groups</td>
<td>280.765</td>
<td>3</td>
<td>G1 =33.00</td>
<td>93.588</td>
<td>2.571</td>
<td>&lt;0.05</td>
<td>Significant</td>
</tr>
<tr>
<td></td>
<td>Within Groups</td>
<td>3493.995</td>
<td>96</td>
<td>G2 = 37.40</td>
<td>36.396</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td>G3 =41.85</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td>G4 =39.88</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Knowledge on Legal provisions for protection of Child Rights</td>
<td>Between Groups</td>
<td>188.831</td>
<td>3</td>
<td>G1 =31.00</td>
<td>62.944</td>
<td>1.514</td>
<td>&gt;0.05</td>
<td>Not Significant</td>
</tr>
<tr>
<td></td>
<td>Within Groups</td>
<td>3992.079</td>
<td>96</td>
<td>G2 = 34.70</td>
<td>41.584</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td>G3 =38.10</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td>G4 =37.24</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Knowledge on Child Rights Protection Mechanisms</td>
<td>Between Groups</td>
<td>248.082</td>
<td>3</td>
<td>G1 =30.67</td>
<td>82.694</td>
<td>1.107</td>
<td>&lt;0.05</td>
<td>Not Significant</td>
</tr>
<tr>
<td></td>
<td>Within Groups</td>
<td>7173.878</td>
<td>96</td>
<td>G2 = 34.90</td>
<td>74.728</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td>G3 =32.35</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td>G4 =30.06</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Knowledge on Child Rights</td>
<td>Between Groups</td>
<td>6295.259</td>
<td>3</td>
<td>G1 =181.67</td>
<td>2098.42 0</td>
<td>1.910</td>
<td>&gt;0.05</td>
<td>Not Significant</td>
</tr>
<tr>
<td></td>
<td>Within Groups</td>
<td>105443.1</td>
<td>96</td>
<td>G2 =209.40</td>
<td>1098.36 6</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td>G3 =226.95</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td>G4 =217.73</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

G1 = PUC  G2 = Graduation  G3 = Post Graduation  G4 = D Ed

From the above table it is clear that there is significant variance among the educational qualification of the respondents and Knowledge about Child Rights, Knowledge on prevailing Child Related problems/issues and Knowledge on Child safety Measures taken by School authorities. There is no significant variance among the
educational qualification of the respondents and Knowledge of the government schemes /Programmes for the welfare of children, Knowledge on Legal provisions for protection of Child Rights and overall Knowledge on Child Rights.

Table 3. Association between the type of School Teaching by the Respondents and Various Dimensions of Knowledge about Child Rights

<table>
<thead>
<tr>
<th>Type of School Teaching by the respondents</th>
<th>Low</th>
<th>Medium</th>
<th>High</th>
<th>Total</th>
<th>x²</th>
<th>Df</th>
<th>P</th>
</tr>
</thead>
<tbody>
<tr>
<td>Respondent’s Knowledge about Child Rights</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Government</td>
<td>13</td>
<td>15</td>
<td>13</td>
<td>2.710</td>
<td>Df = 4</td>
<td>P &gt; 0.05</td>
<td>Not Significant</td>
</tr>
<tr>
<td>Aided</td>
<td>6</td>
<td>16</td>
<td>7</td>
<td></td>
<td>Df = 4</td>
<td>P &gt; 0.05</td>
<td>Not Significant</td>
</tr>
<tr>
<td>Unaided</td>
<td>7</td>
<td>15</td>
<td>8</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Knowledge of the government schemes /Programmes for the welfare of children</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Government</td>
<td>15</td>
<td>17</td>
<td>9</td>
<td>3.890</td>
<td>Df = 4</td>
<td>P &gt; 0.05</td>
<td>Not Significant</td>
</tr>
<tr>
<td>Aided</td>
<td>6</td>
<td>13</td>
<td>10</td>
<td></td>
<td>Df = 4</td>
<td>P &gt; 0.05</td>
<td>Not Significant</td>
</tr>
<tr>
<td>Unaided</td>
<td>12</td>
<td>9</td>
<td>9</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Knowledge on prevailing Child Related problems/issues</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Government</td>
<td>10</td>
<td>21</td>
<td>10</td>
<td>3.669</td>
<td>Df = 4</td>
<td>P &gt; 0.05</td>
<td>Not Significant</td>
</tr>
<tr>
<td>Aided</td>
<td>6</td>
<td>11</td>
<td>12</td>
<td></td>
<td>Df = 4</td>
<td>P &gt; 0.05</td>
<td>Not Significant</td>
</tr>
<tr>
<td>Unaided</td>
<td>10</td>
<td>11</td>
<td>9</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Knowledge on Child safety Measures taken by School authorities</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Government</td>
<td>11</td>
<td>20</td>
<td>10</td>
<td>7.934</td>
<td>Df = 4</td>
<td>P &gt; 0.05</td>
<td>Not Significant</td>
</tr>
<tr>
<td>Aided</td>
<td>4</td>
<td>15</td>
<td>10</td>
<td></td>
<td>Df = 4</td>
<td>P &gt; 0.05</td>
<td>Not Significant</td>
</tr>
<tr>
<td>Unaided</td>
<td>14</td>
<td>9</td>
<td>7</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Knowledge on Legal provisions for protection of Child Rights</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Government</td>
<td>14</td>
<td>17</td>
<td>10</td>
<td>4.074</td>
<td>Df = 4</td>
<td>P &gt; 0.05</td>
<td>Not Significant</td>
</tr>
<tr>
<td>Aided</td>
<td>4</td>
<td>17</td>
<td>8</td>
<td></td>
<td>Df = 4</td>
<td>P &gt; 0.05</td>
<td>Not Significant</td>
</tr>
<tr>
<td>Unaided</td>
<td>7</td>
<td>16</td>
<td>7</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Knowledge on Child Rights Protection Mechanisms</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Government</td>
<td>13</td>
<td>19</td>
<td>9</td>
<td>5.519</td>
<td>Df = 4</td>
<td>P &gt; 0.05</td>
<td>Not Significant</td>
</tr>
<tr>
<td>Aided</td>
<td>3</td>
<td>17</td>
<td>9</td>
<td></td>
<td>Df = 4</td>
<td>P &gt; 0.05</td>
<td>Not Significant</td>
</tr>
<tr>
<td>Unaided</td>
<td>10</td>
<td>12</td>
<td>8</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

It shows from the above table that there is no significant association difference between the Type of School Teaching by the respondents, and in the dimension of Knowledge about Child Rights, Knowledge of the government schemes /Programmes for the welfare of children, Knowledge on prevailing Child Related problems/issues, Knowledge on Child safety Measures taken by School authorities, Knowledge on Legal provisions for protection of Child Rights and overall Knowledge on Child Rights.

4. Recommendations and Conclusion

1. To ensure Childrens Rights in schools the teachers need to acquire complete knowledge on Child Rights. Hence the researcher strongly recommends that the authorities of school educational system take responsibility to enrich the teachers on the knowledge of Child Rights.

2. Majority of the respondents have medium and low level of knowledge on child rights such an environment can possibly increase the vulnerability of children and negation of Child Protection in the school settings. Hence the researcher strongly recommends for the knowledge based Child Rights training for teachers.
3. The study reveals that only one fourth (25 per cent) of the respondents have high levels of overall Knowledge on child rights. Hence the researcher strongly recommends for the motivation of the teachers through focus group discussion approach for enhancing of knowledge on various dimensions of child rights among the school teachers. Because both medium and low level of knowledge on child rights among teachers can counter child friendly environment in schools.

4. The Researcher strongly recommends for the Social Work Professionals to extend their professional approach towards the empowerment of school teachers on the knowledge of Child Rights

Conclusion

From the findings of this study it is evident that in Udupi District of Karnataka irrespective of age or educational qualification or the type of school teaching majority of the teachers have only medium and low levels of knowledge on Child Rights. Hence there is a need for enhancement of knowledge on various dimensions of Child Rights among teachers which could impact their responsibility towards the care and protection of children further contributing towards ensuring Childrens Rights in the School settings.

References


Suicidal Thoughts and Ideations among Adolescence

R. Mithra*
Dr. A. Relton**

Abstract
Suicide is a very difficult topic to discuss. But silence can have tragic results, and knowledge can save lives. Currently, suicidal ideation is common in adolescence in both developing and developed countries. In 2016, the National Centre for Health Statistics released a study that found suicide rates surged that for young people ages 15-24, suicide is the second leading cause of death after accidents. The causes of suicidal ideation are multifactorial including factors related to biological, psychological, cognitive, family and social risk domains. The main objective of the study is to determine the suicidal ideation among adolescents. To analyse the major causes and risk factors for suicidal thoughts among adolescents. As a social workers, when a person commits suicide we commit to the core in finding more effective treatments or to understand the dynamics of suicide better with the hope of prevention or intervention. The researchers have used descriptive design to explain the study. The scale used in the research is SSI (Scale for Suicidal Ideation) developed by Arlene Weissman, University of Pennsylvania. The universe of the research is 1200, out of 1200 the sample size is 60, among UG students in Bishop Heber College. The researcher used simple random sampling method. The major finding of the research is nearly half of the respondents (46.7) have high risk of suicidal thoughts and ideations.

Keywords: Suicidal ideations and thoughts; Adolescence; Major Causes; Risk Factors.

1. Introduction
“Confidence and Hard-work is the best medicine to kill the disease called failure”. Youth development in developing countries is an important topic to focus on. To minimize risks of youth, they should have equal access to resources that can improve their health, their education, and their overall role in the country’s development.

Adolescence
The period following the onset of puberty during which a young person develops from a child into an adult. A stage of development (as of a language or culture) prior to maturity. Adolescence begins at around age 10 and ends around age 21. Adolescence can be broken into three stages: Early adolescence, Middle adolescence, and Late adolescence. Each stage has its own characteristics.

Adolescent Suicide
Adolescent Suicide is a catastrophic and traumatic event for the surviving family, friends, and acquaintances. Additionally, adolescents with failed suicide attempts face “not only the stressors and events that led them to attempt suicide, but also the physical, emotional, and psychological trauma associated with attempting to end one’s own life.

Suicide is both a public and mental health problem, and is a leading cause of death, especially among adolescents, two factors that contribute to the decision of adolescents to commit suicide are having a primary mood disorder and/or substance use.

Causes of suicide
While the causes of suicide is unknown, some common risk factors include:
➢ Major psychiatric illness - in particular, mood disorders (e.g., depression, bipolar disorder, schizophrenia)
➢ Substance abuse (Primarily alcohol abuse)
➢ Examinations
➢ Long term difficulties with relationships with friends and family
➢ Losing hope or the will to live
➢ Significant losses in a person’s life, such as the death of a loved one, loss of an important relationships. Loss of employment or self-esteem
➢ Unbearable emotional or physical pain

*II MSW, PG & Research Department of Social Work, Bishop Heber College, Tiruchirappalli
**Associate Professor & Head, PG & Research Department of Social Work, Bishop Heber College, Tiruchirappalli.
Family history of suicide

Review of literature

Reviews of literature is important part of research to identify the research gap from previous studies and the actual findings of studies says that Revealing the form and function of self-injurious thoughts and behaviors. Suicide: an Indian perspective, Suicide is the third leading cause of death among young adults worldwide.. There has been an increase in the rates of suicide in India over the years, although trends of both increases and decline in suicide rates have been present. In India, marital status is not necessarily protective and the female: male ratio in the rate of suicide is higher. (Rajiv Radhakrishnan, Chittaranjan Andrade, 2012)

Loneliness in relation to suicide ideation and parasuicide: a population-wide study. Some links between loneliness and different manifestations of suicidal conduct have been reported in variety of subgroups (e.g., college students, the elderly, psychiatric patients). We tested this hypothesis by using the results of a population-wide survey. Strong associations among suicide ideation, parasuicide and different ways of being lonely and alone, defined either subjectively (i.e., the feeling), or objectively (i.e., living alone or being without friends), were observed. Moreover, prevalence of suicide ideation and parasuicide increased with the degree of loneliness. Only minimal differences between men and women were found. (Ariel Stravynski, Richard Boyer Suicide and Life-Threatening Behavior 2001)

2. Research Methodology

Objectives of the study
➢ To understand the Social-demographic background of the respondents
➢ To analyse the suicidal thoughts and ideations among adolescence
➢ To find out the significant relationship between the age, religion and the suicidal ideations of the respondents
➢ To suggest suitable means for enriching healthy living

Socio-demographic Findings

The researchers have adopted descriptive design in the present study. The universe of the study is 1200 UG students presently studying in Bishop Heber College, Tiruchirapalli. Out of 1200 the sample size was 60. The sample design used in the study is Stratified Disproportionate Random Sampling. Self-prepared questionnaire is used to study the socio-demographic details of the respondents. The researchers used Scale for Suicidal Ideation (SSI) developed by Arlene Weissman, Aaron T. Beck, Maria Kovacs, University of Pennsylvania. The scale has 19-item clinical research instrument designed to quantify and assess suicidal intention. The required data have been collected from the respondents during the month of October, 2018.

3. Analysis, Findings and Interpretation

Using SPSS packages for analysing the results, percentile analysis for the socio-demographic details collected from the respondent. The collected data using tools are given in the frequency table. Further analysis is to find out the relationship between the age, religion and suicidal ideation.

From the study researchers analysed that half of the respondents (50%) belongs to the age group of 18, less than half of the respondents(26.7%) belongs to the age group of 19, some (16.7%) belongs to the age group of 17, and meagre will be at the age of 20 (5%) and 22 (1.7%). And majority of the respondents (85%) belongs to the nuclear type of the family, lesser will be the joint family (15%). Researched sensitized that more than half of the respondents (68.3%) have stress, and (31.7%) of the respondents have no stress. The reason for the stress is mainly because of the nearly half of the respondents have (43.3%) have family problems, (27.5%) have stress because of relationship issues, and (20.3%) have academic stress, and (8.9%) have no stress. More than half of the respondents (68.2%) have depression, and (31.8%) have no depression.

Table 1. Distribution of the respondents based on overall suicidal ideations

<table>
<thead>
<tr>
<th>Suicidal ideations</th>
<th>Frequency (N=60)</th>
<th>Percentage</th>
</tr>
</thead>
<tbody>
<tr>
<td>Low</td>
<td>32</td>
<td>53.3</td>
</tr>
<tr>
<td>High</td>
<td>28</td>
<td>46.7</td>
</tr>
</tbody>
</table>
It has observed that nearly half of the respondents (46.7%) have high risk of having suicidal thoughts and ideation, and (53.3%) of the respondents have low suicidal thoughts.

Table 2. Distribution of the respondents based on the gender

<table>
<thead>
<tr>
<th>Gender</th>
<th>Risk of Suicidal Thoughts</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Low</td>
</tr>
<tr>
<td>Male</td>
<td>13</td>
</tr>
<tr>
<td>Female</td>
<td>19</td>
</tr>
</tbody>
</table>

It is inferred from the above table that male have high risk of suicidal thoughts and ideations, female have low risk of suicidal thoughts and ideations

Table 3. Analysis of variance among various religion of the respondents with regard to suicidal ideation and thoughts among adolescence

<table>
<thead>
<tr>
<th>Variance</th>
<th>Sum of Squares</th>
<th>Df</th>
<th>Mean Square</th>
<th>Mean</th>
<th>SI</th>
</tr>
</thead>
<tbody>
<tr>
<td>Between Groups</td>
<td>1.307</td>
<td>2</td>
<td>.653</td>
<td>G1=1.3333</td>
<td>.074</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Within Groups</td>
<td>13.627</td>
<td>57</td>
<td>.239</td>
<td>G2=1.5600</td>
<td>P&gt;0.05 NS</td>
</tr>
</tbody>
</table>

It is inferred from the above table that there is no significance difference among various religion with suicidal ideation and thoughts among adolescents.

4. Suggestions and Conclusion

Suggestions
➢ To create a positive insight among adolescents
➢ To help them to impart life-skills
➢ Parents can make a difference, they need to be sensitized to care and monitor their children and proper awareness should be given at the right age
➢ Suicide in youth is not a problem, it is the major problem that affecting youth
➢ Addressing to avoid suicide in a caring, empathetic, and non-judgemental way that carried out by the parents, teachers, counsellors.
➢ To modify the behaviour, personality, sleep disturbance, fear of losing control to change their sadness, deterioration of social relationships, self-harming or others.
➢ State and Central Government should initiate preventive measures, policies to stop suicides by introducing Toll free number to make immediate action to stop suicide
➢ Institution must take legal step to appoint Counsellor, Psychiatric Social worker in a regular basis, to understand the mental state of the students that may reduce the suicidal ideations and thoughts
➢ Students should have positive attitudes to overcome these kinds of risks, and undergo attitude changes, behaviour modification, career guidance, Motivational Counselling etc

Conclusion
“Our lives are time travel, moving in one direction only we can accompany one another as long as we can, as long as time grant us”

Pertaining to the study it is concluded that there is alarmingly prevalence and level of suicidal ideation among adolescents are at risks. This study becomes an eye opener for the parents, teachers, social work practitioners and educators to enhance the effective well-being of adolescence to stop the risk of suicidal ideations and thoughts. They plays a vital role to identify ways adequately for those approaching death.
Reference


2. (Ariel Stravynski, Richard Boyer, 2001), Loneliness in relation to Suicide and Parasuicide


8. (Rajiv Radhakrishnan, Chittaranjan Andrade, 2012), Suicide an Indian Perspective

Abstract
Education should not only aim at facilitating students academic achievements but it should also consider the well being of the students. Well being at school will reduce the behavioral problems that can facilitate student’s learning. When the Well being of the child is ignored or untreated, it may result in maladaptation and deviant behavior at home, school and in the society. The current education system in India does not include the emotional intelligence. Well being is looked upon as a secondary aspect in Schools. The present study highlights the Wellbeing of Adolescents at selected schools in Madurai. Descriptive design was adopted by the researcher. 60 samples were collected using purposive sampling technique. School Mental Health inventory (2017) by Eljo J G, Ilango P and Lakshmi V was used that has reliability of 0.926. It was found that half of the respondents (50%) had poor level of overall school mental health. There is no significant association between type of curriculum and school mental health. The study highlights the need for Mental Health intervention in schools for improved level of Well being of Adolescents who are the future of India.

Keywords: Well Being; Adolescent; Mental Health intervention; Academic achievements.

1. Introduction
Adolescence is a critical period for mental, social, and emotional well – being and development. Adolescents constitute eighteen percent of global population. Students undergo number of psycho- social, emotional and behavioral problems, where they become incapable of coping up those problems resulting in poor scholastic performance. Early detection and prevention prevents the ravage state in a child’s life. Since school is the place where children spend most of their time, the task of developing mentally healthy children becomes important. School Mental Health is one of the components in students’ Well being. One of the most important strategies for improved well being of Adolescents could be the School Mental health program that aims to promote Mental Health and reduce the risk of mental health problems through appropriate interventions. The present study aims to measure the level of Well being of students from selected schools in Madurai with special reference to School Mental Health aspects of students.

2. Research Methodology
Aim

* Research Scholar, PG and Research Department of Social work, Bishop Heber College
** Associate Professor, PG and Research Department of Social work, Bishop Heber College
To know the level of well being of adolescents particularly the school mental health at selected schools in Madurai.

Objectives
1. To understand the socio demographic characteristics of Students
2. To know the level of Wellbeing of adolescents
3. To know the association between socio demographic variables and the level of well being in terms of School Mental Health from student’s perspective
4. To suggest suitable interventions at school for improved well being of adolescents.

Hypotheses

- Hypothesis 1: There is no difference between gender and level of School Mental Health
- Hypothesis 2: There is no association between family type and overall school mental health
- Hypothesis 3: There is no relationship between class and overall school mental health
- Hypothesis 4: There is no relationship between curriculum and school mental health
- Hypothesis 5: There is no relationship between family income and school mental health

Pilot Study
The researcher went to the schools and found out the feasibility of the study.

Research Design
Descriptive Research Design was used to describe the level of well being of adolescents.

Universe
All the higher secondary students in those three schools constitute the universe. There were 160 students.

Sampling and its size
Purposive sampling was done and selected 60 higher secondary students for the purpose of study.

Pretest
The tool for data collection was applied to 10 respondents and found that applicability of the tool was possible

Tool for data collection
School Mental Health Inventory (2017) by J.O. Jeryda Gnanajane Eljo, P. Ilango and S. Vijayalakshmi having 51 statements with both positive and negative items was used. It is a five point scale with high internal consistency and validity. The reliability is 0.926 for student’s format.

Method of Data Collection
Questionnaire was given to the respondents and the data were collected from 60 respondents.

3. Findings

1. Findings related to Socio Demographic variables
   - More than half of the respondents (60%) were studying in XII std
   - More than half of the respondents (57%) were boys and 43% were girls
   - More than half of the respondents (60%) were studying in Matriculation and only 40% were studying state board
   - More than half of the respondents (53%) were studying in Government aided school, 40% in Govt. school and only 7% in private school
   - More than half of the respondents (62%) were from nuclear family, 35 percent of them were from Joint family and only 3 percent of them were from extended family
   - More than half of the respondents (55%) had their father educated up to high school
   - Only 25 percent of mother’s of the respondents were educated up to high school, 22 percent of mothers’ had education up to primary level
   - 30 percent of the father’s of the respondents were daily laborers and 22 percent of them were in private sectors.
   - Majority (82%) of mothers of the respondents were home makers.
   - Majority (90%) of the parents were living together
   - Nearly half of the respondents (38%) of them had their family income between Rs.5000- Rs.10000/-

2. Findings related to level of well being in terms of School Mental Health from student’s perspective
   - For majority of the students (73%), the Basic facilities in school is poor
   - More than half of the respondents (57%) had average level of attitude towards teachers
   - 43 percent of students had said that the pedagogy of teaching is average at school and another 43 percent of students said that the pedagogy of teaching is poor.
• 43 percent of students had poor attitude towards teachers and 32 percent of students had rated that their attitude towards teachers is average
• Nearly half of the respondents (48%) of the students had average level of attitude towards parents and 35 percent of students has good attitude towards their parents
• Nearly half of the respondents (47%) had their relationship at average level and 35 percent of students had poor level of relationship with others and only remaining 28 percent of students had good relationship with others.
• Half of the students (50%) had poor level of school mental health, 37 percent of student had their school mental health at average level and only 13 percent of respondents

3. Findings related to Hypotheses

Hypothesis 1: There is no difference between gender and level of School Mental Health
‘t’ test was applied and it was found that there is a significant difference between gender and level of overall school mental health of the students from their perspective ( ‘t’ = 0.019, p<0.05). Hence null hypothesis is rejected.

Hypothesis 2: There is no association between family type and overall school mental health
‘Chi Square’ was applied and it was found that there is no statistical association between family type and overall school mental health (ᵡ² = 0.872, p>0.05). Hence null hypothesis is accepted.

Hypothesis 3: There is no relationship between class and overall school mental health
‘Karl Pearson’s co-efficient of correlation was applied and it was found that there is no relationship between class and the overall school mental health of the students from their perspective (r=0.054, p>0.05). Hence it is not statistically significant. Hence null hypothesis is accepted.

Hypothesis 4: There is no relationship between curriculum and school mental health
‘Karl Pearson’s co-efficient of correlation was applied and it was found that there is no relationship between curriculum and the overall school mental health of the students from their perspective (r=0.076, p>0.05). Hence it is not statistically significant. Hence null hypothesis is accepted.

Hypothesis 5: There is no relationship between family income and school mental health
‘Karl Pearson’s co-efficient of correlation was applied and it was found that there is no relationship between family income and the overall school mental health of the students from their perspective (r=0.592, p>0.05). Hence it is not statistically significant. Hence null hypothesis is accepted.

4. Suggestions and Conclusion

Suggestions
● Screening of the level of well being will help identify the students in need of intervention for improved well being
● Preventive measures can promote wellbeing among adolescents
● Changes in class and school climate should be made possible through appropriate training and at policy level also, the basic facilities should be made mandatory that contributes to the well being of students.
● Advanced training for teachers should be made periodical apart from their qualifications to stay updated and contribute to the well being of students

Conclusion
Well being of the adolescents is nations’ well being. For a nation to be built, it needs healthy adolescents who can contribute positively and constructively towards the growth and development of the society. Hence, the focus on well being of the adolescents should be prioritized in educational institutions as they spend most of the time in their schools and it is the right time and right place for intervention to be given. The researcher would leave a concluding remark that the well being of adolescents should be improved by all possible means.
References


3. SM Suldo, M J Gormley, G J Dupaul, D A Butcher, The Impact of School Mental Health on Student and School Academic outcomes: Current status of the research and Directions, School Mental Health, June 2014, 6 (2),


Mental Health of Adolescent Girls

M. Thamizh Malar *
Dr.M. Daniel Solomon**

Abstract

This research paper concentrates on mental health among adolescent girls in one of the private colleges, Trichirappalli. Mental health problem has an important implications for every aspect of young people’s lives. Especially for girls, mental health affects their education, their ability to engage with peers, making friendship and relationship with others, family relationships and ability to present them with the world in their own way. With this view the present study focuses to analyse mental health condition among adolescent girls. The following hypothesis was framed to find out, a significance and association between selected demographic variable (daily practice and mental health, praying habit and mental health) of the respondents. The descriptive research design was adopted. There are 100 adolescent girls were chosen by adopting convenience sampling under Non-Probability sampling technique. For measuring the study variable mental health battery was used, developed by Arun Kumar Singh and AlpanaSen Gupta in 2000. The present study result reveals that less than half of adolescents’ girls (48%) they have medium level of mental health, more than one fourth of the adolescent girls (30%) have low level of mental health, less than one fourth of the adolescent girls (22%) have high level of mental health. Questionnaire method was adopted to collect the data from the respondent. Further important findings will be discussed in the full paper.

Keywords: Girls ; Adolescent; Mental Health; Adjustment; Relationship.

1. Introduction

Mental health is a level of psychological wellbeing or an absence of mental illness. It is the psychological state of someone who is functioning at a satisfactory level of emotional and behavioral adjustment. Mental health may include ability to enjoy life and create a balance between life activities and efforts achieve psychological resilience. Adolescence is the period of transition. Adolescent period is critical period for both boys and girls. But due to physiological reasons girls affected mostly by this stage. Half of the mental illness is begin from 14 year.

Literature review:

TanushreeMandal, Ritu Ghosh SujithraMaji, TaborahGuha Roy, SukumalBisoy, SkLahin: A study on adolescent girls and parental protective factors in a school of metropolitan city. The objective of the study is to find out the status of mental health and protective factors influencing the adolescent girls school students aged 13-15 years were taken as respondents 556 sample were taken from the population, two stage cluster sampling were used to collect the data. The results reveals that maximum number of respondents belongs to 13 year, Major56 percent felt very badly about when their teachers scold them. This shows they have low mental health.

Allison j. Tracy and Alice Michael (2006): This study used a feminist psychodynamic developmental framework to test the hypothesis that internalizing conventional femininity ideologies in two domains in authenticity in relationships and body objectification is associated with early adolescent girls’. One hundred forty-eight eighth grade girls completed measures of femininity ideology, self-esteem, depression, and demographic characteristics. In the first part of this study, we refined the Adolescent Femininity Ideology Scale originally developed by Tolman and Porche (2000). In the second part, we used structural equation modeling to test model slinking femininity ideology to mental health. Results revealed that body objectification, and to a lesser extent, inauthenticity in relationships, accounted for half of the variance in depression and over two- thirds of the variance in self-esteem in a critical period of development for adolescent girls.

2. Research methodology

This research paper concentrates on mental health among adolescent girls in one of the private colleges, Trichirappalli. The main objectives is to find out the level of mental health among adolescent girls and to give
suggestion to improve their mental health. Descriptive research design was used in this study. Universe for this study consists total of 300 respondents among them by using simple random sampling (lottery method) 100 respondents were chosen. Questionnaire method for used to data collection. Structured questionnaire by Arun Kumar Singh and AlpanaSenGupta. Later the data were analysis using SPSS (Statistical package for social science)

3. Analysis and Interpretation

Less than three fourth 71 percent of the respondents were 17 years old. More than one fourth 29 percent of the respondents were 18 years old. Less than half 41 percent of the respondents hail from urban area and Less than one third 32 percent of the respondents hail from rural area and More than one fourth 27 percent of the respondents from semi urban area. While analyzing the studies by their parent more than one third 40 percent of the respondents father studied till under graduate level, Less than one fourth 22 percent of the respondent’s father studied till secondary school level, Minimum 9 percent of fathers studied till middle school, very few 2 percent respondent’s fathers studied till primary school and Minimum 1 percent respondents’ father were illiterate. While analyzing the respondent’s mother’s qualification more than one third 35 percent of the respondent’s studied till under graduate level, more than one fourth 26 percent of the respondent’s studied till secondary school, exact one fourth of the respondents 25 percent studied till higher secondary level, minimum 8 percent of mothers studied till middle school and very few 3 percent respondent’s mothers studied till primary school and illiterate. While analyzing their father’s occupation, Less than one third 33 percent of the respondent’s fathers doing businessmen, More than one fourth 30 percent of the respondent’s fathers doing government job, Less than one fourth 24 percent of the respondent’s fathers occupation is farming, 11 percent of the respondents father occupation is coolie and very few Minimum 2 percent of the respondents are having shop. While analyzing their ambition more than half of the respondent’s 57 percent life time ambition is teaching profession, Minimum 12 percent of respondents wants to be police, Minimum of respondents 8 life time ambition is doctor. Minimum of respondents 7 percent lifetime ambition is to be engineer. Minimum of respondents 5 percent life time ambition is to be politician. While analyzing respondents praying habit More than one fourth of the respondents 76 percent they pray daily. Less than one fourth of the respondents 24 percent they did not pray daily. While analyzing

The competency level, majority of the respondents 68 percent agreed that they are socially competent. Less than one third of the respondents 32 percent they did not agree that they are socially competent. While analyzing the physical exercise Majority of the respondents 65 percent they did not con concentrate on physical exercise, Less than one fourth of the respondent’s 24 percent doing physical exercise, Minimum of respondents 8 percent doing meditation and Very few minimum of respondent 3 percent practicing yoga.

Table 1. Association between domicile of respondent and various dimensions in mental health

<table>
<thead>
<tr>
<th>Domicile</th>
<th>Adjustment</th>
<th>Statistical Inference</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Low</td>
<td>High</td>
</tr>
<tr>
<td>Rural</td>
<td>17</td>
<td>15</td>
</tr>
<tr>
<td>Semi-urban</td>
<td>15</td>
<td>12</td>
</tr>
<tr>
<td>Urban</td>
<td>19</td>
<td>22</td>
</tr>
<tr>
<td></td>
<td>x² = .638</td>
<td>df = 2</td>
</tr>
<tr>
<td></td>
<td>P &lt; 0.05</td>
<td>Not Significant</td>
</tr>
<tr>
<td>Emotional</td>
<td>Rural</td>
<td>23</td>
</tr>
<tr>
<td></td>
<td>9</td>
<td>x² = 1.901</td>
</tr>
<tr>
<td></td>
<td>Semi-urban</td>
<td>15</td>
</tr>
<tr>
<td></td>
<td>12</td>
<td>df = 2</td>
</tr>
<tr>
<td></td>
<td>Urban</td>
<td>28</td>
</tr>
<tr>
<td></td>
<td>13</td>
<td>P &lt; 0.05</td>
</tr>
<tr>
<td></td>
<td>Not Significant</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Autonomy</td>
<td>Rural</td>
</tr>
<tr>
<td></td>
<td>25</td>
<td>7</td>
</tr>
<tr>
<td></td>
<td>5</td>
<td>x² = 4.271</td>
</tr>
<tr>
<td></td>
<td>Semi-urban</td>
<td>22</td>
</tr>
<tr>
<td></td>
<td>5</td>
<td>df = 2</td>
</tr>
</tbody>
</table>

International Journal of Research in Social Sciences
http://www.ijmra.us, Email: editorijmie@gmail.com
It is found from above table that there is no significant association between domicile of the respondents and in all the dimensions and overall mental health.

Table 2. Karl Pearson Coefficient of correlation between income of the respondents and various dimensions in mental health

<table>
<thead>
<tr>
<th>Dimensions</th>
<th>Co-relation Value</th>
<th>Statistical Inference</th>
</tr>
</thead>
<tbody>
<tr>
<td>Income and emotional stability</td>
<td>.020</td>
<td>P &gt; 0.05, Not Significant</td>
</tr>
<tr>
<td>Income and adjustment</td>
<td>-.111</td>
<td>P &gt; 0.05, Not Significant</td>
</tr>
<tr>
<td>Income and autonomy</td>
<td>-.055</td>
<td>P &gt; 0.05, Not Significant</td>
</tr>
<tr>
<td>Income and security</td>
<td>-.016</td>
<td>P &gt; 0.05, Not Significant</td>
</tr>
<tr>
<td>Income and self-concept</td>
<td>-.166</td>
<td>P &gt; 0.05, Not Significant</td>
</tr>
<tr>
<td>Income and overall mental health</td>
<td>-.127</td>
<td>P &gt; 0.05, Not Significant</td>
</tr>
</tbody>
</table>

It is found from the above table that there is no significant correlation between the income of the respondents and various dimensions of mental health. However there is positive very low relationship between Income and emotional stability, there is negative very low relationship between Income with autonomy and security and there is negative low relationship between Income with adjustment, self-concept and overall mental health.
Table 3. ‘Z’ test between the school studied by the respondents and various dimensions in mental health.

<table>
<thead>
<tr>
<th>Dimensions</th>
<th>School studies</th>
<th>N</th>
<th>Mean</th>
<th>Std. Deviation</th>
<th>Std. Error Mean</th>
<th>Statistical Inference</th>
</tr>
</thead>
<tbody>
<tr>
<td>Emotional stability</td>
<td>Government</td>
<td>16</td>
<td>8.88</td>
<td>1.455</td>
<td>.364</td>
<td>Z = .655</td>
</tr>
<tr>
<td></td>
<td>Private</td>
<td>84</td>
<td>8.60</td>
<td>1.584</td>
<td>.173</td>
<td>P &lt; 0.05</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>Not Significant</td>
</tr>
<tr>
<td>Adjustment</td>
<td>Government</td>
<td>16</td>
<td>23.38</td>
<td>3.138</td>
<td>.785</td>
<td>Z = -.995</td>
</tr>
<tr>
<td></td>
<td>Private</td>
<td>84</td>
<td>24.39</td>
<td>3.850</td>
<td>.420</td>
<td>P &lt; 0.05</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>Not Significant</td>
</tr>
<tr>
<td>Autonomy</td>
<td>Government</td>
<td>16</td>
<td>9.94</td>
<td>2.112</td>
<td>.528</td>
<td>Z = .553</td>
</tr>
<tr>
<td></td>
<td>Private</td>
<td>84</td>
<td>9.68</td>
<td>1.637</td>
<td>179</td>
<td>P &gt; 0.05</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>Significant</td>
</tr>
<tr>
<td>Security</td>
<td>Government</td>
<td>16</td>
<td>7.50</td>
<td>1.897</td>
<td>.474</td>
<td>Z = -.431</td>
</tr>
<tr>
<td></td>
<td>Private</td>
<td>84</td>
<td>7.73</td>
<td>1.929</td>
<td>210</td>
<td>P &lt; 0.05</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>Not Significant</td>
</tr>
<tr>
<td>Self</td>
<td>Government</td>
<td>16</td>
<td>8.69</td>
<td>2.120</td>
<td>.530</td>
<td>Z = .016</td>
</tr>
<tr>
<td></td>
<td>Private</td>
<td>84</td>
<td>8.68</td>
<td>2.084</td>
<td>227</td>
<td>P &lt; 0.05</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>Not Significant</td>
</tr>
<tr>
<td>Overall mental health</td>
<td>Government</td>
<td>16</td>
<td>58.38</td>
<td>7.580</td>
<td>1.895</td>
<td>Z = -.377</td>
</tr>
<tr>
<td></td>
<td>Private</td>
<td>84</td>
<td>59.07</td>
<td>6.626</td>
<td>723</td>
<td>P &lt; 0.05</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>Not Significant</td>
</tr>
</tbody>
</table>

It is found from the above table there is a significant relationship between school studied by the respondents and in the dimensions of autonomy. It also found that there is no significant relationship between the school studied and in the dimensions of Emotional stability, Adjustment, security, Self-concept and overall mental Health. However it is found from the mean score those who studied in private school have more mental health than government schools.

Table 4. Karl Pearson’s coefficient of correlation between size of the family and various dimensions in mental health

<table>
<thead>
<tr>
<th>Dimensions</th>
<th>Correlation values</th>
<th>Statistical inference</th>
</tr>
</thead>
<tbody>
<tr>
<td>Size of the family and emotional stability</td>
<td>.137</td>
<td>P &lt; 0.05</td>
</tr>
<tr>
<td>Size of the family and adjustment</td>
<td>.186</td>
<td>P &lt; 0.05</td>
</tr>
<tr>
<td>Size of the family and autonomy</td>
<td>-.006</td>
<td>P &lt; 0.05</td>
</tr>
<tr>
<td>Size of the family and security</td>
<td>.061</td>
<td>P &lt; 0.05</td>
</tr>
<tr>
<td>Size of the family and self-concept</td>
<td>-.036</td>
<td>P &lt; 0.05</td>
</tr>
<tr>
<td>Size of the family and overall mental health</td>
<td>.140</td>
<td>P &lt; 0.05</td>
</tr>
</tbody>
</table>

It is found that from above table there is no significant relationship between size of the family and emotional stability, overall adjustment, autonomy, security, self-concept, overall mental health. It also observed that there is a positive very low relationship between Size of the family and security, there is a positive low relationship between
Size of the family and in the dimensions of emotional stability, adjustment and overall mental health. There is a negative low relationship between Size of the family and in the dimensions of autonomy and self-concept

4. Suggestions and Conclusion

Life skill education must be provided in various level of their transition period. In this period schools and colleges are playing a vital role. So it is the responsibility of the schools and colleges to provide that various type of programs. Most of the respondents 65 percent they did not concentrate on their physical exercise, so daily practices like exercise, yoga help the adolescence to keep their day balance. In schools and colleges also sports hour should not be converted into class hours, the sports will make them to relax. Parents and teachers should give more space to the adolescent girls to express their ideas and perception, which helps them to feel more comfortable with home and school environment. Autonomy should be given for the adolescent go that they could take decision confidently. It is the responsibility of the parents to teach reality of life and help them to overcome is problems during the transition period.

This present study help to found out the mental health of adolescent girls. With the view to analyze some demographic characteristic and its association with the various dimensions of mental health with the help of mental health battery. By knowing that level of mental health it could help them to develop the skill of how to cope with problems. Positive environment and various daily practices may keep the mental health level balanced.

References

A Study on Relationship between Adjustment Problems and Mental Health of Pre-Adolescent Child of Working Mothers in Avadi, Chennai

N. Madhumathi*
M. Rex Sahayaraj**

Abstract
This research focuses on the relationship between adjustment problems and mental health of pre-adolescent children of working mothers in Chennai. It explores the various aspects of adjustment of the respondents towards family, peers, school, and teachers. To know that 300 million people worldwide are suffering from bad mental health have been ignored as a serious issue since ages. A study reported in WHO, conducted for the NCMH (National Care Of Medical Health), states that at least 6.5 per cent of the Indian population suffers from some form of the serious mental disorder. Through there are effective measures and treatments. Children of working mothers were careless in the early years and emotionally slightly unstable but independent at later years. Poor adjustment was noted in children of working mothers. Intelligence was measured using the mental health well being scale, and adjustment was measured using a pre-adolescent adjustment scale. Assessing the mental health of 40 Indian children of working mothers.

Keywords: Mental health; Adjustment; Working mothers

1. Introduction

Mental Health
Mental health is a level of psychological well-being or an absence of mental illness - the "psychological state of someone who is functioning at a satisfactory level of emotional and behavioral adjustment". From the perspectives of positive psychology or of holism, mental health may include an individual’s ability to enjoy life, and to create a balance between life activities and efforts to achieve psychological resilience. Mental health is defined 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. The positive dimension of mental health is stressed in WHO's definition of health as contained in its constitution: "Health is a state of complete physical, mental and social well-being and not merely the absence of disease or infirmity. "Some of the types of Mental Health Problems are Anxiety & panic attacks, Bipolar disorder, Depression, Eating disorders, Obsessive-compulsive disorder, Personality disorders, Post Traumatic Stress Disorder (PTSD), Psychosis, Schizophrenia, Self harm, Suicidal feelings.

Adjustment
The term adjustment refers to the extent to which an individual’s personality functions effectively in the world of people. It refers to the harmonious relationship between the person and the environment. In other words, it is the relationship that comes among the organisms, the environment and the personality. A well adjusted personality is well prepared to play the roles which are expected of the status assigned to him within given environment. His needs will be satisfied in accordance with the social needs. Some of the types of adjustment are Normal adjustment, abnormal adjustment.

Review of Literature
Natasha V Pilkauskas, Jeanne Brooks-Gunn, Jane Waldfogel (2018) in their study on Maternal Employment Stability In Early Childhood: Links With Child Behavior And Cognitive Skills found that although many studies have investigated links between maternal employment and children’s wellbeing, less research has considered whether the stability of maternal employment is linked with child outcomes. Employment stability (continuous employment over all 5 years, low levels of job churning, longer job tenure) was linked with less child externalizing behavior.

Seenivasan P, Caroline Priya Kumar (2014) in their study On A Comparison Of Mental Health Of Urban Indian Adolescents Among Working and Non working Mothers found that Conduct problems were the highest (22.6%), followed by Peer problem (12.8%), Pro-social behavior (12.4%) and Emotional problem (12.2%). 117(23.4%) of the students felt that these problems interfered with Home life, Friendships, classroom life, leisure
activities and difficulties upset or disturbed them. Mental problems were significantly higher among those children whose both parents were employed, across all categories.

Suneetha Hangal and Vijayalaxmi A. Aminabhavi (2007) in their study Self-Concept, Emotional Maturity and Achievement Motivation of the Adolescent Children of Employed Mothers and Homemakers found that the results revealed that the adolescent children of homemakers have significantly higher self-concept. It was also noticed that children of employed mothers have high emotional maturity and female children of employed mothers are highly achievement oriented.

Alessandra Frigerio, Laura Vanzin, Valentina Pastore, Maria Nobile, Roberto Giorda, Cecilia Marino, Massimo Molteni, Paola Rucci, Massimo Ammaniti, Loredana Lucarelli (2006) in their study The Italian Preadolescent Mental Health Project found that this paper describes the rationale, methods and the analysis plan of the project. The findings of this study are expected to allow an adequate planning of interventions for the prevention and the treatment of mental disorders in preadolescence as well as efficient health services.

Sanober N Mody, Vinoda N Murthy (1988) in their study on The study of mental health of children of working mothers found that Results revealed poorer intelligence scores in children of working mothers at the 12-year-old level. Children of working mothers were careless in the early years and emotionally slightly unstable but independent at later years, as compared to the children of non-working mothers. Poor adjustment was noted in children of working mothers.

2. Research Methodology

Children physical well-being as well as mental well-being is important for the healthy growth and development of the children. Mental health can be defined as a person's condition with regard to their pre-adolescent adjustment towards family, school, peers and teacher. Due to nuclear family system and industrialization the attention given by the parents especially the mother to child is being reduced in urban community. This study aims at finding out how the working mothers' children’s mental health is being affected and finds suitable solution for this.

General Objective of the Study

A Study on Relationship between Adjustment Problems and Mental Health of Preadolescent Children of Working Mothers in Chennai

Statement of the Study

The problem of Adjustmental problem and mental health among people is high among all age group especially among children. There is a positive relationship between the adjustmental problems and mental health among people. Working mothers are not spending time with their children, so their children adjustment and mental health will be change in this age. Whenever the mother went to work, they should spend time with children.

Need for the Study

Maternal employment in early childhood (birth at age 5) is linked with child behavior and cognitive skills. Most of the children spending time with their grandparents. The study signifies the importance of poorer intelligence and poor adjustment for pre adolescent children of working mothers.

Aim of the Study:

The present study aims at knowing the adjustmental problems and mental health condition of pre-adolescent children whose mothers are working.

Specific Objectives:

1. To study about the mental health of respondents on pre adolescent adjustment towards family.
2. To study about the mental health of respondents on pre-adolescent adjustment towards school.
3. To study about the mental health of respondents on pre-adolescent adjustment towards peers.
4. To study about the mental health of respondents on pre-adolescent adjustment towards teacher.

Hypothesis:

1. There is a positive relationship between gender and mental health of the respondents
2. There is a positive relationship between nature of the job of the mother and mental health of the respondents
3. There is a positive relationship between time spent by mothers and adjustmental problems of the respondents
4. There is a positive relationship between educational help by the respondents and mental health of the respondents.

Research Design

The research design used by the researcher is descriptive study.

Universe
The universe of study is Private Schools of Avadi Corporation in Chennai. The total numbers of Private Schools are 30.

Sampling
The researcher used Simple Random Sampling method to Collect Data by lottery method. The sample size is 40 and collected from 5 schools.

Tools of Data Collection
The researcher used self-prepared Questionnaire, Mental Health Wellbeing scale and pre-adolescent adjustment scale to collect data. It has various dimensions to know about the respondents like family status, adjustment and knowledge of the respondent.

Limitations: The researcher asked permission to various private schools at Avadi in Chennai but some schools are not allowing the researcher to collect data from students due to the fear of School’s reputation.

Conceptual Definition
Mental Health: According to Medilexicon’s medical dictionary, mental health is: "Emotional, behavioral, and social maturity or normality; the absence of a mental or behavioral disorder; a state of psychological well-being in which one has achieved a satisfactory integration of one’s instinctual drives acceptable to both oneself and one’s social milieu; an appropriate balance of love, work, and leisure pursuits." According to the WHO (World Health Organization), mental health is: "... a state of well-being in which the individual realizes his or her own abilities, can cope with the normal stresses of life, can work productively and fruitfully, and is able to make a contribution to his or her community”

Adjustment: According to JAMES COLEMAN 1941 “Adjustment is Effectiveness of individual’s attempts to maintain balance between satisfaction, needs and environment”

Pre-Adolescent Children: The period of human development just preceding adolescent specifically in the period between the approximate age of 10 and 14

School: An institution for educating children and any instruction is given in a particular discipline.

Working Mothers: Working mothers, as a label, refers to women who are mothers and who work outside the home for income in addition to the work they perform at home in raising their children. Working mothers: those who are financially independent and go out of their house to earn livelihood.

3. Data Analysis & Interpretation
H₀: There is no significant difference between gender and adolescent adjustment scale
H₀: There is no significant difference between gender and mental health wellbeing scale

<table>
<thead>
<tr>
<th>Gender</th>
<th>Test</th>
<th>Significance</th>
<th>Decision</th>
</tr>
</thead>
<tbody>
<tr>
<td>Pre-adolescent adjustment</td>
<td>Mann-Whitney U Test</td>
<td>.211</td>
<td>Accepted</td>
</tr>
<tr>
<td>Mental health</td>
<td>Mann-Whitney U Test</td>
<td>.547</td>
<td>Accepted</td>
</tr>
</tbody>
</table>

The above table shows that mental health scale and adolescent adjustment scale is not significant with gender category.

H₀: There is significant difference between mother spend time with respondents and adolescent adjustment scale
H₀: There is no significant difference between mother spend time with respondents and mental health wellbeing scale

<table>
<thead>
<tr>
<th>Mother spend time with respondents</th>
<th>Test</th>
<th>Significance</th>
<th>Decision</th>
</tr>
</thead>
<tbody>
<tr>
<td>Adolescent adjustment</td>
<td>Mann-Whitney U Test</td>
<td>.026</td>
<td>Rejected</td>
</tr>
<tr>
<td>Mental health</td>
<td>Mann-Whitney U Test</td>
<td>.870</td>
<td>Accepted</td>
</tr>
</tbody>
</table>

The above table show that mental health scale is not significant with mother spends time with respondent’s category and adolescent adjustment scale is significant.

H₀: There is no significant difference between educational help by the respondents and adolescent adjustment scale
H₀: There is no significant difference between educational help by the respondents and mental health wellbeing scale

Table 3. Mann-Whitney U Test
Educational help by the respondents | Test | Significance | Decision
---|---|---|---
Adolescent adjustment | Mann-Whitney U Test | .067 | Accepted
Mental health | Mann-Whitney U Test | .098 | Accepted

The above table shows that mental health scale and adolescent adjustment scale is not significant with educational help by the respondent’s category.

H₀: There is no significant difference between type of parenting and adolescent adjustment scale.
H₀: There is no significant difference between type of parenting and mental health wellbeing scale.

| Type of parenting | Test | Significance | Decision
---|---|---|---
Adolescent adjustment | Mann-Whitney U Test | .206 | Accepted
Mental health | Mann-Whitney U Test | .337 | Accepted

The above table shows that mental health scale and adolescent adjustment scale is not significant with type of mother category.

Findings
- The study reveals that in this study 65% of the family as nuclear family type.
- 60% of the parents spend time with their children less than one hour, its impact the adjustment problem for the respondents.
- 42.5% of the respondents mothers are working in unorganized sector, the respondents mother work as house cleaning, construction workers etc.,
- 3/4th of the respondents parents are democratic type but the respondents are lack in adjustment problems.
- 65% of the respondents are nuclear family, but the 57.5% of the respondents are care takers are grandparents.

4. Suggestions and Conclusion
Parenting system plays an important role in the adjustment and mental health of the preadolescent children. The mother should spend more time with the children to understand their feelings and thoughts of the children. The school should organize the individual parents meeting to evaluate the children adjustment towards family, school and teacher. In every school should appoint the counselors for guiding children.

Adjustment and mental health was started in the preadolescent stage. Poor adjustment and poor mental health changes can be occurred when the less communication between the parents and children. Adjustment and mental health can be improved by day today activities. School, teacher, peers, family and environment play an important role for children. Due to the adjustment the feelings and thoughts can be changed.

Reference
1. ICD_10_CM by national centre for statistics.
Problems of School Children in Present Scenario

S. Shanthi*

Dr. S. Sasikala**

Abstract

School is also termed as student’s second home where he/she spends more than one third of a day. There are various issues faced by children in every stage of their schooling. Family, social media, friends, teachers and the surrounding play a vital role in framing the personality of a student. Today, we see many students distracted and deviating from the societal norms. This situation projects a huge danger awaiting in the near future. Everyone blames the student but psychologists say that students show learnt behavior. The society easily shifts the blame onto these students while correction has to be done at the source. Apart from the societal influence, various other biological issues also contribute for the students to behave in a deviant manner. Problems like dyslexia, chronic illness, and difficulties in listening, concentrating or sitting continuously can be the contributing factors for the student’s lack of interest in going to schools. Further, the curriculum needs to be updated, it’s designed for just scores rather than giving true education to the kids, it is impossible today, to find a student who knows, why he is learning, what he is learning. They need proper guidance in all areas which was carried out earlier by their grandparents but in the present lifestyle, disintegration of families has made the contact between grandparents and grandchildren very remote. When all the doors of venting the emotions are blocked the child chooses a wrong outlet. This has to be mended by appointing Social workers Social workers also should play a vital role in framing the curriculum, keeping in mind the psychology of the school children and the need of the society. This paper is intended to highlight the issues faced by the school kids, need and role of school social workers in all schools.

Keywords: School; Children; Social Worker; Family;

1. Introduction

A school is an educational institution designed to provide learning space and learning environments for the teaching of students under the direction of teachers. School is also termed as student’s second home where he/she spends more than one third of a day. Most countries have systems of formal education which is compulsory. The names of these schools include Primary school for young children & secondary school for teenagers. In addition to these core schools students may also attend kindergarten or pre-school at the early age between 3 – 5. In India, the ancient schools were termed as Gurukul. The British rule marked the beginning of modern schooling in India and the syllabus and calendar they followed became the benchmark. Schools in India range from schools with large campuses, with thousands of students and hefty fees to schools where children are taught under a tree with a small campus with nominal fees or free of cost. There are various boards namely, CBSE (Central Board for Secondary Education), ICSE (Indian Council for Secondary Education) and the State Boards of the respective state.

Components of a school

Schools are organized space purposed for teaching and learning, which should include the following

➢ Ventilated, spacious classroom, properly maintained furniture, board for teachers to explain, proper writing material for teachers and cupboard to store books that need not be carried home.
➢ Washrooms should be hygienic with proper working faucets.
➢ Proper drinking water to be made available to the students.
➢ Spacious playground with trees around to provide shade in the present global warming era.
➢ Capacious library and ample collection of necessary reference books.
➢ Well-equipped laboratories and auditorium.
➢ School clinic is mandatory with the necessary first aid provisions.
➢ The most important is that the school building should be safe and provide proper security to the students.

The question is, do all the schools have these components? Are these components enough for a child to learn? There are various issues faced by a child in every stage of his schooling. Today, we see many students distracted and

---

*M.Phil Scholar, Department of Social Work, SrimadAndavan Arts and Science College, Tiruchirappalli
**Assistant Professor, Department of Social Work, SrimadAndavan Arts and Science College, Tiruchirappalli
deviating from the societal norms. This situation projects a huge danger awaiting in the near future. Everyone blames the student but psychologists say that students show learnt behavior. The society easily shifts the blame onto these students while correction has to be done at the source. The most important challenge is identifying the underlying problems, keeping student away from learning. The problems are:

Family

Family plays a vital role in a teacher’s ability to teach students. Principals and teachers agree that what is going on at home will impact a student’s propensity to learn. Divorce, single parent, poverty, violence and lack of attention are all the problems a student brings to school every day. Students need proper guidance in all areas which was carried out earlier by their grandparents but in the present lifestyle, disintegration of families has made the contact between grandparents and grandchildren very remote. Prof.Sidharth Krishna of Motilal Nehru Medical College, UP stressed on the need to focus on behavioural patterns of children. It’s the foremost duty of parents to become children’s role model and provide warm relationship which is now taken away due to the absence of joint family system. Earlier children grew up listening to stories of truth and valour, working parents have no time for their kid as they are busy following their financial quest.

Technology

Kids Health Guide reports that students are more technologically advanced than many teachers, putting instructors at a decided disadvantage in the classroom. However, a student’s love for technology also tends to distract him from his school work according to NEA (National Education Association)

Academic Problems

The curriculum needs to be updated, it’s designed for just scores rather than giving true education to the kids, it is impossible today, to find a student who knows, why he is learning, what he is learning. Academic problems can also be linked with biological issues such as chronic illness, learning disability, difficulties in listening, concentrating, sitting continuously.

Peer Group influence

Changes in peer relationship affects the academic performance of students. Teasing, bullying is a predominant issue among the school kids which may lead to loneliness and skipping schools. Peer pressure and influence can be positive, may make them more assertive, try new activities or to get more involved with school.

Lifestyle and Health

The changing lifestyle may seem to be a proud development but can cause serious damage in the future. Every geographical location has different pattern of clothing, food and customs based on the topography, which when violated may cause adverse effects. This change in the lifestyle leads the children to obesity, allergies, juvenile diabetes and violence in behavior.

Family, social media, friends, teachers and the surrounding play a vital role in framing the personality of a student. Lack of communication in families, unguided influence from social media, changes in peer relationship, teachers busy with completing portions blocks all the doors of venting the emotions of a child, which paves way for the choice of a wrong outlet. These young minds need to be channelized and their energy should be constructively utilized for the prosperity of our country. This can be well executed by appointing School Social Workers in schools.

Role of School Social Worker

The role of school social worker is to provide every student with the opportunity to develop to his or her maximum potential. As part of a coordinated system of Student Services, School Social Workers assist students in making better use of their school experience. The School Social Worker provides an essential coordination and liaison services involving the student, family, school and the community.

Social Work Activities in the School

1. Help teachers to identify children whose needs suggest referral for school social work services. These needs may include the following:

- Hostile or aggressive behavior
- Withdrawal or isolation
- Attendance problems
- Learning difficulties
- Neglect or deprivation
- Health problems
2. Consults and plans with teachers and other school personnel regarding students or groups. The school social worker should maintain a close working relationship by keeping the Principal informed in all matters relating to school social work services within the school. School social work services are effective in that setting only if planning and implementation are a joint endeavor.

3. Works individually and with small groups of students to assist in their adjustment.

4. Provide and participate in faculty meetings, group activities, committee work and staffing. Arranging staff in-service training will help the staff in understanding the psychology of the students in the present scenario.

5. Completes social developmental history reports or psychosocial assessments on students who have various needs affecting their success at school.

6. The social worker develops intervention strategies to increase academic success and provide proper referral services.

7. Helping the child develop appropriate social interaction skills by having a better understanding and accepting self and others.

8. Developing strategies to motivate and support exceptional children.

9. Help the child with conflict resolution and anger management.

Social Work Activities with family

The school social worker serves as a liaison between the school and family. The role is designed to function in the following ways:

➢ Help parents to understand and meet their children's needs

➢ Facilitate home and school communication, which includes parent involvement in the child's school life.

➢ Assist parents in making them understanding the many facets of the school setting as well as the various programs and procedures.

➢ Conduct home visits as a method to access the family

➢ Help the family alleviate family stress for the child to function more effectively in school.

➢ Organizes parent groups to discuss topics related to child development and student learning.

Social Work Activities at Community level

➢ The social worker plays a major role in developing alternative programs for dropouts, truants and delinquents.

➢ Identifying and reporting child abuse and neglect in the community.

➢ Providing prevention programs for school violence.

➢ Helping the authorities assess the school, climate of the location and develop school safety plans.

2. Conclusion

As said by William Wordsworth, “The Child is Father of a Man”, clearly explains that man is a product of his habits and behavior developed in childhood. We know that "Past is experience, present is experiment, tomorrow is expectation" So we should gather our experiences in our experiments for achieving our expectations. Yes, today kids are being experimented without any support expecting them to learn things on their own which may prognosticate danger to mankind in the future. Thus, a social worker is mandatory in all schools both public and private, to help students have a positive and life nurturing impressions that get deeply etched in their minds when they are small, which will remain with them forever. School social worker should be provided proper working atmosphere to maintain the confidentiality of the process considering the future of the child.
References

2. Kate Barrington (2017), What are the biggest problems facing the public-school system? www.publicschoolreview.com
6. The Royal Children’s Hospital, Melbourne (2017), Causes of School problems,
7. www.raisingchildren.net.org
A Study among Academic Stress on Higher Secondary School Students

A. Louie Hepsiba Roy*
Dr. A. Relton**

Abstract:
Academic stress plays a major role in determining mental health among students. Stress becomes an integral part of human life. Anything that creates a challenge or a threat to our comfort is a stress. All kind of stress is not considered to be bad because it helps people to perform well in academic activities. The main objectives of the study is to find academic stress among higher secondary school. The researcher has used descriptive design to explain the study. The tool used in the research was academic stress scale by Rajendran and Kalliappan. The universe of research is 250 higher secondary school students of two different schools. The researcher used simple random sampling to select sample size which was 50 students. The study reveals that the students have moderate stress of academic level.

Keywords: Stress; Academic stress; Students; School Social Work.

1. Introduction:
Everyone have stress and its common to all or any and it is part and parcel of life. Stress refers to however the body and mind reply to physical or emotional stressors. Continued exposure to stressors, particularly of negative kind, can usually cause mental and physical symptoms like anxiety, depression, heart palpitations, muscular aches and pains. Eventually, if one cannot notice how to effectively regulate stress, varied physical and mental disorders might develop which can be serious enough to cause incapacity and even death.

Academic stress

Educators anticipate that work will be finished on time. Understudies could think little of the amount of time it takes to finish perusing and composing assignments, to print out duplicates of their work.

Educational stress:
Academic Track

The students happiness to either Central and State board faculties, learn all the essential subjects i.e. arithmetic, natural sciences (physics, chemistry, biology), social sciences (history, geography, civics, economics), and languages. The results of tenth grade is taken into account to be a vital one because it helps the scholars to choose their educational streams (science, commerce and arts) that they pursue in eleventh and twelfth grade. So the exposure to new and troublesome ideas throughout the intermediate level exposes them to educational stress.

College Admissions:
The students have a powerful want to urge through the far-famed skilled instructional institutes as they supply career in sort of fields like such engineering, medicine, applied science, law, and recently, different connected fields. Thus obtaining admissions into these documented faculties poses plenty of stress.

Board Exams

The board exams area unit conducted once a year for a amount of period within the month of March. It obligatory for the scholars to look for every subject examination for three hours and is needed to answer the queries in nice detail. If a student doesn't earn passing marks the probabilities of obtaining admission in smart faculties become unsure.

Lack of knowledge

Parents have a powerful need to understand what their children are learning from the faculty and what way they are performing arts in day nowadays category activities. Oldsters believe that these info ought to run to them on

---

* II MSW, PG and Research Department of Social Work, Bishop Heber College.
** Head & Associate Professor, PG and Research Department of Social Work, Bishop Heber College
the day after day by the varsity as they assume that they'd be able to become a full of life parent on condition that they'd the data concerning their child’s progress.

Action motivation

Activity inspirations are frequently illustrated in light of the fact that they need for satisfaction or the accomplishment of magnificence. Individuals can fulfill their needs through various implies that, and are headed to prevail for variable reasons each inward and outer. Individual commanded by this rationale are normally dynamic, buckle down, set high objectives, and take troublesome assignments, drive joys from doing troublesome things and appearance for quality. They will have a standard as a top priority, with that they keep investigation themselves, they dream in regards to achieving assignments.

Review of literature

Ramana Sood and Dalivinder Kumar (2007) examined the study habit and academic achievement of first generation learners and subsequent generation learner. The finding is that rural and urban subsequent generation learners have better academic achievement than rural and urban first-generation learners.

Dr. P. Suresh Prabhu (October. 2015) Stress can exist when working at a fast place, doing difficult problems, or listening to someone shout at you. The purpose of the study is to find out the level of academic stress among higher secondary students. The present study consists of 250 XI standard students studying in higher secondary schools situated in Namakkal District of Tamil Nadu, India. The sample was selected by using simple random sampling technique. The present study reveals that the higher secondary students are having moderate level of academic stress and irrespective of sub samples of the higher secondary students are having moderate level of academic stress. The male student's academic stress is higher than female students. The urban student's academic stress is higher than rural student. The Government school student's academic stress is less than private school student. The science subject student's academic stress is higher than arts student.

2. Research Methodology:

Objectives:
➢ To understand the socio-demographic details of the students.
➢ To study academic stress among higher secondary school
➢ To suggest suitable strategies to enhance their academic performance and reduce the level of stress

The researchers have adopted descriptive research design for the present study. The Universe of the study is 200 students and it takes two different schools in Tiruchirappalli District. Out of 200 students only 50 students were willing to participate research. The sample design used in the study is convenient random sampling. The researcher have used self prepared questionnaire is to study the socio demographic details of the respondents. A standardized scale used to assess the Academic Stress Level, the researcher used the instrument developed by Rajendran and Kalliappan.

3. Analysis and Interpretation:

Socio-demographic Details:

It is observed from above table that more than half of the respondents (52%) were in the age of 16 and more than half of the respondents (62%) were choose Computer Maths stream and more than half of the respondents (74%) were in nuclear family and more than half of the respondents (66%) were doing work in household activity and more than half of the respondents (55%) having two siblings.

<table>
<thead>
<tr>
<th>Stress Level</th>
<th>Frequency (n=50)</th>
<th>Percentage</th>
</tr>
</thead>
<tbody>
<tr>
<td>Low</td>
<td>12</td>
<td>24</td>
</tr>
<tr>
<td>Medium</td>
<td>26</td>
<td>52</td>
</tr>
<tr>
<td>High</td>
<td>12</td>
<td>24</td>
</tr>
</tbody>
</table>

Table 1. Distribution of respondents according to the academic stress
It is clear from the table above that the more than half of the respondents (52%) experience level of academic stress and one-fourth of the respondents (24%) have low academic stress and nearly less one-fourth of the respondents (24%) are experiencing high level of academic stress.

It is observe from above table that nearly half of the respondents (46%) were good in academic performance and nearly one-third of the respondents (32%) were average in academic performance. And (20%) of the respondents (20%) were very good in academic performance and very few of the respondents (2%) of the respondents outstanding in their academic performance.

<table>
<thead>
<tr>
<th>Table 2. Distribution of respondents on Academic Performance</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Academic Performance</strong></td>
</tr>
<tr>
<td>Average</td>
</tr>
<tr>
<td>Good</td>
</tr>
<tr>
<td>Very Good</td>
</tr>
<tr>
<td>Outstanding</td>
</tr>
</tbody>
</table>

4. **Suggestion and Conclusion**

**Suggestion**

- State and central governments should take effective measures and implement strategies to reduce academic stress among students.
- Academic institution should appoint counselor on regular basis to reduce academic stress among students.
- The parents should closely monitor and spend time in listening their children on their academic performance and support them to reduce their stress.
- Students should develop congenial relationship among teachers, friends, and with family member. So that they can share and reduce their academic stress.

**Conclusion**

The research done by researchers has becomes an eye opening to the facts that majority of the students in school undergo lots of academic pressure which leads to lot of mental health issues, poor hygiene, confusion, anxiety and agitation in their behaviour face lot of failure in academic involving in antisocial activities, drug abuse. Finally it may lead them to commit suicide. The suggestion put forward by the researchers shall be to re-examine towards drafting or re-drafting policies and strategy to reduce academic stress in educational institutions. This would definitely support the future pillars of the nation, the adolescents to enhance their effective well-being of life and develop the nation.
References

5. Keinan, Giora, and Arye Perlberg. “Stress in Academe.” *Journal of Cross-Cultural Psychology*, vol. 18,
Childhood Obesity-Causes and Consequences

A. Abirami*
Dr. A. Relton**

Abstract
Childhood obesity is a major issue in developing and developed countries. The impact of overweight and obese in childhood will have its impact at their physical, psychological and social domains in their later developmental stages. Even they can be prone to lifestyle diseases like cardiovascular disease and diabetics at younger age. Globally overweight is assumed to be the result of excessive caloric and fat intake. But it may also rise by excessive sugar intake, decline of physical activities and increased food intake neglecting balanced diet. Also childhood obesity can affect children’s Physical health, Social, Emotional Wellbeing and Self-esteem. It is also associated with lower quality of life experienced by child and poor performances in academic. The purpose of this article is to describe on Childhood obesity and their issues and challenges. The authors have used systematic review method. And used google scholar, a commonly used search engine for describing the phenomenon. The authors will search the articles published from period from 2000-2018. While analysing the literatures related to Childhood obesity it provoked the authors interest to know the causes, consequences of Childhood obesity. The discussion shall be presented in the full paper.

Key words: Childhood, Obesity, Psychological and Social domains.

1. Introduction
Obesity is defined as an accumulation of excess body fat which is the result of a positive energy balance where caloric intake exceeds caloric expenditure. The world is facing progressive rise in the prevalence of obesity, diabetes and other nutritional related chronic diseases like diabetics, cardiovascular disease, obesity and some forms of cancer. Obesity has reached an epic level in developed countries. The highest prevalence rates of childhood obesity have been observed in developing as well as in developing countries. Compared to males, females are more likely to be obese, due to inherent hormonal changes. Type 2 Diabetics and Coronary heart Disease will develop early in childhood if childhood obesity serves as an important factor. There is a sensation of rise in proportion of children having obesity in last 4 decades, particularly in developed world. Childhood obesity is one among the primary programmes of WHO (World Health Organisation) and it is the most serious public health challenge of 21st century. The problem is global and steadily affecting many low and middle-income countries, particularly in the urban settings. An alarming rate of increase is seen with an estimated 22 million children under the age of 5 years being overweight throughout the world and further expected to rise by 2020. Childhood obesity is one of the most serious public health challenges of the 21st century. The Problem is global and is mainly affecting many low and middle income countries, particularly in urban settings.

Causes Of Childhood Obesity
The childhood obesity causes are multifactorial, but overweight in children and adolescents is generally caused by lack of physical activities, unhealthy eating habits or a combination of two. Genetics and social factors like socio economics status, race or ethnicity, media, marketing and the physical environment also influence energy consumption and expenditure (Tandon, 2006). Although the causes of childhood obesity are widespread, certain factors are targeted as major contributors to this epidemic which include environment, lack of exercise, heredity, dietary patterns and socio economic status. Malina (2005) reported that a wealth evidence supports a role for decreased physical activity, increased television viewing and increased consumption of sugar, sweet and beverage in the current rise of childhood obesity.

• Urbanisation and Socio economic background

* M.Phil Scholar, PG and Research Department of social Work, Bishop Heber College
** Associate professor and Head PG and Research Department of Social Work, Bishop Heber College
A study by London (2001) points out urbanization as a driving force in the rapid increase of obesity in children. Lack of appropriate play area and limited open space around the home makes it difficult for children to stay physically active (Shah, 2008). Prabhakar (2004) points out that a small family, lack of friends, lack of activity and junk food brings out obesity in children. It has been shown that family structure, including family size, birth order of the child as well as whether it is a single or joint parent family may have an effect on childhood obesity (Wang et al., 2007). Studies have demonstrated that children in single-parent families are more likely to be overweight or obese than children in two parent families and also the rise in women working outside the home coincides with the rise in childhood weight problems (Rastogi, 2006).

**Screen Time**

There is a positive relationship between the time of watching television and prevalence of childhood obesity. Now-a-days more than ever, life is sedentary and kids spend more time playing with electronic devices than activity playing outside. Kids younger than six spend an average of two hours a day in front of a screen watching television, mobiles, tablets, computers and laptops etc. Kids who watch television more than four hours a day are more likely to be overweight compared with kids who watch two hours or less. It was found by a study at the Institute Of Medicine (2005) that children who watched more than five hours of television per day were 4.6 times as likely to be obese as those not watching television or up to two hours daily.

Advertising does in fact have an adverse effect on food preferences, purchasing behaviour and consumption among children says Mastings, 2003. Fast food outlets spend three billion dollars in television advertisements targeted to children.

**Physical Activities**

Inactivity plays a major role in obesity development in children, whether it results from television and computer use, limited opportunities for physical activity and safety concerns that prevent children from enjoying free play outside doors (Shults, 2004).

High burden of school work and academic competitiveness have led to decreased participation in sports and any other form of physical activity (Gulati, 2008). School aged children spend most of their day in school where their only activity comes during recess or physical education classes. In the past, physical education was followed on a daily basis. Currently only eight percent of elementary schools and less than seven percent of middle schools and high schools have daily physical education. Using automobiles for short trips limits children’s opportunities to walk to local destinations, a phenomenon particularly relevant to children in the suburbs (Rabkin, 2003).

**Hormones**

Obesity in children due to hypothyroidism or other hormonal imbalance occurs in fewer than three percent of obese kids. In hypothyroidism the basal metabolic rate is lower because of a deficiency in thyroid secretion which results in excessive retention of calories that would normally be expended in basal metabolism (Greger, 2000).

**Familial Tendency**

A new study warns that the factor that puts children at greatest risk of being overweight is having obese parents. Children whose parents are obese have a much greater chance of becoming obese themselves. The definitive cause of obesity in children is not known to be the genes but heredity probably contributes to the condition. Heredity thus dictates where fat is deposited in the body (Sheeba, 2002)

Fifty to 70 percent of a person’s Body Mass Index (BMI) and degree of adiposity is determined by genetic influences and that there is a 75 percent chance that a child will be overweight if both parents are obese and a 25 to 50 percent chance if just one parent is obese. People in the same family tend to have similar eating patterns, maintain the same levels of physical activity, and adopt the same attitudes toward being overweight.

**Dietary habits**

A study by Kother (2001) and his colleagues showed that there is a strong relationship between problematic childhood eating behaviors and subsequent development of eating disorders in later life. Causes for childhood obesity include overfeeding, providing high calorie beverage to satisfy thirst, using food to solve problems, relieve stress or as a reward and not providing enough opportunities to exercise. Factors contributing to excess energy intake for the paediatric population include the food establishments, children making more food and eating decisions, large portion sizes and inactivity (French et al., 2001)

In general children are eating more food away from home, drinking more sugar – sweetened drinks and snacking more frequently (Knopp, 2006). Children who do not consume breakfast tend to eat a large amount of food in the evening and this imbalance could lead to a higher risk of obesity (Dietx et al., 2001).
Childhood obesity resulting from fast food consumption is an alarming issue among parents, researchers, doctors and fast food companies because of the health risks associated by obesity. Every day one in three children from age 4 to 19 years of age eat fast food. These fast food products contain higher fats, carbohydrates, sugars and calories than any other products. As a result children are gaining 150 extra calories daily while increasing the risk of obesity.

Children who eat fast food regularly do not receive the recommended nutritional intake needed for proper growth and development. Because of a high-calorie diet and low levels of physical activities, children increase body fat and thus result in excessive build-up of weight (Arenz, 2004).

Psychological factors

• Depression and anxiety

A recent review revealed that the majority of studies find a relationship between eating disturbances and depression. This relationship is not unidirectional; depression may be both a cause and a consequence of obesity. Although some studies demonstrate no significant relationship between increased BMI and increased anxiety symptoms. Thus, the relationship between obesity and anxiety may not be unidirectional and is certainly not conclusive.

• Self esteem

Research findings comparing overweight/obese children with normal weight children in regards to self esteem have been mixed. In recent review it can be found that obese children have low self-esteem comparing to normal one. There is some compromise in the literature that the global approach to self esteem measurement with children who are overweight/obese is ambiguous as the physical and social domains of self esteem seem to be where these children are most vulnerable.

• Body dissatisfaction

Research has found that body satisfaction is higher in males than females at all ages. There is a linear relationship between body dissatisfaction and increasing BMI for girls and for boys U shaped relationship suggests that boys with BMIs at the low and high extremes experience high levels of body dissatisfaction while comparing to girls.

• Eating disorder symptoms:

Children develop traits associated with eating disorders which is common in adolescent obese populations, particularly in girls. A number of studies have shown higher prevalence of eating-related pathology (i.e. Anorexia, Bulimia Nervosa, and impulse regulation) in obese children/youth.

• Emotional problems

Few studies explore about the psychological impact of being overweight/obese in children. Being younger, female, and with an increased perceived lack of control over eating seemed to heighten the psychosocial consequences.

Consequences of childhood obesity

Childhood obesity can profoundly affect children’s physical health, social, and emotional well-being, and self-esteem. It is also associated with poor academic performance and a lower quality of life experienced by the child. These potential consequences are further examined in the following sections.

Medical consequences:

Childhood obesity has impact to numerous medical conditions. These conditions include, fatty liver disease, sleep apnea, Type 2 diabetes, asthma, hepatic steatosis (fatty liver disease), cardiovascular disease, high cholesterol, cholelithiasis (gallstones), glucose intolerance and insulin resistance, skin conditions, menstrual abnormalities, impaired balance, and orthopaedic problems. Recently, many of the above health conditions had only been found in adults; now they are extremely prevalent in obese children. Some of these health conditions can even result in death.

Socio emotional consequences:

Childhood obesity affects children’s and adolescent’s social and emotional health. Overweight and obese children are often teased and/or bullied for their overweight. They also face numerous other hardships. Obese children are often excluded from activities, particularly competitive activities that require physical activity. It is difficult for overweight children to participate in physical activities as they tend to be slower than their peers and contend with shortness of breath. These negative social problems contribute to low self-esteem, low self-confidence, and a negative body image in children and can also affect academic performance.

The social consequences

Obesity may contribute to continuing difficulty in weight management. Overweight children isolate themselves to protect from negative comments and attitudes by retreating to safe places, such as their homes, where
they may seek food as a comfort. Children who are overweight tend to have fewer friends than normal weight children, which results in less social interaction and play, and more time spent in sedentary activities. Physical activity is often more difficult for overweight and obese children as they tend to get shortness of breath and often have a hard time keeping up with their peers. This in turn inevitably results in weight gain, as the amount of calories consumed exceeds the amount of energy burned.

Academic consequences:

Childhood obesity has also been found to negatively affect school performance. They are more likely to miss school more frequently, especially those with chronic health conditions such as diabetes and asthma, which can also affect academic performance.

Role of a social worker:

As a social worker we can suggest government to conduct awareness programs related to childhood obesity. Also to make physical activities on a daily basis in school. Give awareness about the food consciousness to parents and about the nutritional benefits.

2. Conclusion

Focusing in childhood obesity can change the society. There are many components that play into childhood obesity. A healthy diet and physical activities can prevent children from being obese and overweight. Moreover, if parents adopts a healthier lifestyle at home, many obesity problems could be avoided. The parents should strictly avoid fast foods and heavy sugary beverages. Focusing on these causes may, over time, decrease childhood obesity and lead to a healthier society as a whole.

References

Anxiety and Self Esteem among Urban Adolescent Players

S. Thanapriya*
Dr. M. Gabriel**

Abstract
Sports include all forms of physical and mental activities through which casual and organized Players aim to improve physical abilities and skills. Anxiety is a natural reaction of person’s body and mind. When the human’s mind and body reacts to the threat then the person may feel the physical sensation of Anxiety. In sports, Anxiety is a negative emotion that leads to poor performance. Whereas Self- esteem is a attribute to oneself. Self-esteem in sports is a basic motivational factor, which enhances the player’s performance. The present study has been conducted with the aim to know the various levels of Anxiety and Self-esteem among Urban Adolescent players. The researchers have adopted Descriptive research design for the present study. The researchers have collected data from 60 respondents by using stratified random sampling method from both male and female adolescent players in equal proportion (30/30) in Thanjavur District. Using Self prepared questionnaire for collecting socio demographic details and to assess the various levels of anxiety and self-esteem the Sports competitive Anxiety Scale (MARTENS 1977) and Rosenberg Self-esteem scale(1965) have been used. The researchers collected data from Adolescents playing games like Basketball, Volley ball, Football, Weight lifting, Hockey and Athletics. The findings showed that Majority (81.7%) of the players have an average level of Anxiety (17-24) and a vast majority of the players (95%) have High level of Self-esteem (26-30). The salient features of the findings will be discussed in detail in the full article.

Keywords: Adolescents; Physical; Mental; Anxiety; Self esteem

1. Introduction
Sport is usually governed by a set of rules or customs, which serve to ensure fair competition, and allow consistent adjudication of the winner. Winning can be determined by physical events such as scoring goals or crossing a line first. It can also be determined by judges. Anxiety occurs when the person’s mind and body react to the threat, then the person feels physical sensation of Anxiety. Anxiety in sports is a negative emotion or perception in sports competition that leads to decrease in performance. Self-esteem is a degree of worth that attributes to oneself. Self-esteem in sports is a basic motivational factor. Self-esteem enhances the athletes to perform well and Low esteem in sports on the other hand can lead to poor performance of the players. Therefore, the performance of the players is also based on their Anxiety and Self-esteem. So in this study the researchers aimed to measure the level of Anxiety and Self-esteem among the urban Adolescent players.

Review of literature
Madlem and Bridges (2007) studied increases in self-esteem of students after participation in regular physical education and yoga enhanced physical education classes. They found that the self-esteem has increased in both the control and experimental groups over the period of eighth-week of the intervention.
Ekeland, Heian and Hagen (2005) found that adolescents who engaged in extracurricular sports practice regularly had lower anxiety and higher self-esteem than adolescents who did not engage in regular practice. However, the link of causality between sports and self-esteem remains to be established: some studies show that physical exercise can improve self-esteem in children and young people.
Khan, et. Al (2014) found the level of self-esteem levels of north zone women and men badminton players. In 2013-2014 the tournament was held at Jamia MilliaIslamia University. The total sample of 50 respondents (25 women and 25 men) badminton players. Self-esteem by Rosenberg is used as a questionnaire (1965) to this study. The result showed that men players have more self-esteem than women.

2. Research methodology
Objectives of the study

*II MSW, PG& Research Department of Socialwork, Bishop Heber College, Tiruchirapalli.
**Associate Professor, PG& Research Department of Socialwork, Bishop Heber College, Tiruchirapalli.
➢ To describe the Socio Economic background of the respondents.
➢ To find out the various levels of Anxiety and Self-esteem among respondents.
➢ To suggest appropriate suggestions to reduce their Anxiety and to improve self-esteem.

The researchers have used Descriptive research design. The universe of the present study is 500 to measure the various levels of Anxiety and Self-esteem among Urban Adolescent players. The sampling design used in this study is Stratified proportionate random sampling and selected 30 male and 30 female respondents. To collect the socio demographic details of the respondents the researchers has used self-prepared questionnaire. To assess the level of Self-esteem and Anxiety among urban adolescent players the instrument Rosenberg self-esteem scale (RSES) 1965 and Sport competitive anxiety test (SCAT) 1977 has been used and the required data has been collected.

3. Analysis and Interpretation

From this study the researchers have found out that more than half of the respondents (60%) belong to the age group of 10-15 years. An equal proportion of male and female contributed for the study (50%). More than half (73.3%) of the respondents belongs to Hindu religion. About (65%) of the respondents are from Backward caste. A vast majority of respondents (96.7) reported Tamil as their mother tongue. Exactly 85% of the respondents are from Nuclear family. More than half (58.3) of the respondents belong to the classes between 10-12th standard. Majority (76.7%) of the respondent’s both parents are educated. One third (35%) of the respondent’s monthly income ranges rupees 11000-20000. 16.7% of respondents play each game respectively. Majority of the respondents (71.7%) are competing between 1 to 3 years in their respective type of sports. Less than half of the respondents (46.7%) do have regular practice at their school ground. More than one-third of respondent (38.3%) are influenced by their respective coach. A vast majority of respondents (83.3%) share that their parents are highly supportive towards achieving their sports career. 63.3% of respondents said that they are very much excited at the time of victory and (36.7%) of respondents said that they will be very sad during failure.

More than half of the respondent (60%) has received 1 to 5 awards. 73.3% of respondents wanted to become national level athletes. A vast majority of the respondents (83.3%) are reported that they didn't affect by any physical sickness during the past three months. More than half (60%) of the respondents said that they practice nearly 4to6 hours per day. Less than half (43.3 %) of the respondents are anxious about their skills and techniques in playing their games at competition.

Table1. Level of Anxiety among the adolescent players

<table>
<thead>
<tr>
<th>Level</th>
<th>Frequency</th>
<th>Percent</th>
</tr>
</thead>
<tbody>
<tr>
<td>Low</td>
<td>10</td>
<td>16.7</td>
</tr>
<tr>
<td>Average</td>
<td>49</td>
<td>81.7</td>
</tr>
<tr>
<td>High</td>
<td>1</td>
<td>1.7</td>
</tr>
</tbody>
</table>

From the above table, it is clear that 81.7% of the respondents have Average level of Anxiety, whereas 16.7% of the respondents have low level of anxiety and 1.7% of respondents are in high level anxiety.

Table2. Level of Self-esteem among the adolescent players

<table>
<thead>
<tr>
<th>Level</th>
<th>Frequency</th>
<th>Percent</th>
</tr>
</thead>
<tbody>
<tr>
<td>Average</td>
<td>3</td>
<td>5.0</td>
</tr>
<tr>
<td>High</td>
<td>57</td>
<td>95.0</td>
</tr>
</tbody>
</table>

From the above table, it is clear that 95% of the respondents have High level of Self-esteem, while 5% of the respondents have average level of self-esteem.

4. Suggestion and Conclusion

Suggestion
✓ Importance of Physical education should be included in all school curriculums which will create awareness and interest among adolescents.
✓ Government should provide more facilities for training at both government and private schools thereby to improve their performance in sports.
✓ Techniques to reduce anxiety and training to improve their self-esteem should be provided through the specific field experts before they face competitions.
✓ The parents and institutions should help their children to have healthy diet and regular practice of sports for the betterment of their performance.
✓ Athlete may be kept aware about different Physiological factors affecting their performance.
✓ The state and central government should support the players financially through the forms of rewards and awards in order to encourage them.
✓ Many researches shall be conducted in this area to find out the other impacts of anxiety and self-esteem.

Conclusion
Children are the future of our society. In this competitive world excellence in academics not only help them to shine brighter but also developing skills in extracurricular activities will help them to enhance the quality of life. Among them sports plays a major role in improving their standard of life. It helps them to create a sound body with sound mind.

References
4. Council of Europe. "The European sport charter"
A Study on Self-Esteem among Early Adolescents

Timothy P Sekar*
M. Reena Rebellow**

Abstract
The term self-esteem is used to describe a person's overall sense of self-worth or personal value. Self-esteem can play a significant role in motivation and success throughout the life. Low self-esteem may hold one back from succeeding at school or work. Having a healthy self-esteem can help one to achieve. There are different factors that can influence self-esteem. Those who consistently receive overly critical or negative assessments. The inner thinking, age, any potential illnesses, disabilities, or physical limitations, and job can affect self-esteem of a person. Adolescence is a period of life and it has specific health and developmental needs and rights. Adolescents from the age of 11-14 are considered as early adolescents. This is the time when their self-esteem is much bettered. Their self-esteem is affected when they are exposed to various situations like school, home and with peers. The objective of the study is to determine the level of self-esteem at various conditions among adolescents. To analyze the major causes and risk factors that causes low self-esteem among adolescents. The scale used in the research is Hare Self-esteem scale. The universe of the research is 291 from the students in St. James Matriculation Higher Secondary School, Tiruchirappalli and the 50 respondents were chosen by simple random sampling method. The major finding of the research is that nearly half of the respondents (48%) have higher self-esteem.

Keywords: Self-concept; adolescence; peer; school; home

1. Introduction
Adolescence, a period from puberty to adulthood. The World Health Organization (WHO) defines adolescent as any person between ages 10 and 19. This age range falls between ages 10 and 24 which refers to individuals within WHO’s definition of young people. Adolescence is divided into three stages: early adolescence of ages eleven to fourteen; middle adolescence, ages fifteen to seventeen; and late adolescence, ages eighteen to twenty-one. In addition to physiological growth, psychological and social developmental tasks are squeezed into them during this period. The purpose of these tasks is to form one’s own identity and to prepare them for adulthood.

The term self-esteem is used to describe a person's sense of self-worth or personal value. Self-esteem can play a significant role in motivation and success throughout the life. Self-esteem is “how a person feels about themselves and what they do.” Individuals with high self-esteem believe that they are a good person and they are able to recognize their good qualities and will generally strive for a happy and successful life. Individuals with low self-esteem tend to have negative feelings about themselves, believing that they are not worthy of love, happiness or success. Low self-esteem may hold one back from succeeding at school or work. Having a healthy self-esteem can help one to achieve. There are different factors that can influence self-esteem. Those who consistently receive a lot of critical or negative assessments will have lower self-esteem. The inner thinking, age, any potential illnesses, disabilities, or physical limitations, and job can affect self-esteem of a person. There are various factors that affect self-esteem in adolescence such as biological transition-puberty, cognitive transition, emotional transition, social transition, relationships during adolescence (relationship with parents, relationship with peer group) and cultural effects on adolescents. Lower self-esteem would be a cause for many problems in the later part of the individuals life.

Review of literature
Adolescents (51 boys, 53 girls), 11 to 15 years old, and their mothers participated in a study to test a transactional model of self-esteem (TMS). The TMS proposes that self-esteem results from complex transactions among individual characteristics, cognitions, and behaviors of adolescents and parents. Structural equation models were used to examine direct and indirect effects of mothers' depressive symptoms and adolescent behavior problems on perceptions of each other, behaviors toward each other, and adolescent self-esteem. Measures included self-reports

*II MSW, Bishop Heber College, Tiruchirappalli
**Assistant professor, Department of Social work, Bishop Heber College, Tiruchirappalli
and ratings by teachers and observers. There were direct paths to global self-esteem from adolescents’ specific self-perceptions and mothers’ positive communications, whereas paths from maternal depressive symptoms and adolescent behavior problems to self-esteem were indirect, mediated by mothers’ perceptions and behaviors.


Two Decades Later Andrea E. Steiger and Mathias studies revealed that low self-esteem is prospectively associated with depression. However, self-esteem has been shown to change over time. Results from latent growth curve analyses demonstrated that both level and change in self-esteem served as predictors for adult depression. Individuals who entered adolescence with low self-esteem, and/or whose self-esteem declined further during the adolescent years, were more likely to exhibit symptoms of depression 2 decades later as adults; this pattern held both for global and domain-specific self-esteem. These findings highlight the importance of adolescent self-esteem development for mental health outcomes in adulthood. Low self-esteem between ages 11 and 15 years increased the probability of a Major Depressive Disorder at age 26, and a study by Steiger and colleagues (2014)

2. Research methodology

The aim of the study is to know the level of self-esteem among early adolescents in different conditions. The objectives of the study is to study the socio demographic profile of respondents and to analyse the level of self-esteem among early adolescents. The researcher used Descriptive research design to describe the study. The universe is 291 students of St. James Matric. Hr. Sec. School, Tiruchirappalli out of which 50 respondents were chosen by using Stratified disproportionate random sampling method. The tools used to collect data were Self-prepared questionnaire and Hare self-esteem scale which has 30 items and 3 dimensions.

3. Analysis and interpretation

Table 1. Distribution of the respondents by type of family

<table>
<thead>
<tr>
<th>Type of family</th>
<th>Frequency (N = 50)</th>
<th>Percent (100%)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Nuclear family</td>
<td>34</td>
<td>68 %</td>
</tr>
<tr>
<td>Joint family</td>
<td>16</td>
<td>32 %</td>
</tr>
</tbody>
</table>

This table shows that most of the respondents (68%) are from a nuclear family. The respondents from nuclear family may not have emotional attachment, support as the respondents living in joint family. Thus it may affect the self-esteem of the individual.

Table 2. Distribution of the respondents based on sharing feelings with persons

<table>
<thead>
<tr>
<th>Sharing of feelings</th>
<th>Frequency (N = 50)</th>
<th>Percent (100%)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Parents</td>
<td>17</td>
<td>34 %</td>
</tr>
<tr>
<td>Friends</td>
<td>28</td>
<td>56 %</td>
</tr>
<tr>
<td>Sibling</td>
<td>4</td>
<td>8 %</td>
</tr>
<tr>
<td>Others</td>
<td>1</td>
<td>2 %</td>
</tr>
</tbody>
</table>

This table shows that more than half of the respondents (56%) share their feelings with their friends. The respondents are adolescents and most of them share their feelings to their friends which would be of no use because they are of the same age and would not be matured enough to help the other person rightly. This would affect the self-esteem of the individual.

Table 3. Distribution of the respondents based on ability to balance emotions

<table>
<thead>
<tr>
<th>Domicile</th>
<th>Frequency (N = 50)</th>
<th>Percent (100%)</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
This table shows that most of the respondents (44%) are able to control their emotion sometimes. The ability to balance emotions affects self-esteem.

<table>
<thead>
<tr>
<th>Always</th>
<th>15</th>
<th>30 %</th>
</tr>
</thead>
<tbody>
<tr>
<td>Sometimes</td>
<td>22</td>
<td>44 %</td>
</tr>
<tr>
<td>Rarely</td>
<td>11</td>
<td>22 %</td>
</tr>
<tr>
<td>Never</td>
<td>2</td>
<td>4 %</td>
</tr>
</tbody>
</table>

Table 4. Distribution of the respondents by level of self-esteem

<table>
<thead>
<tr>
<th>Self-esteem &amp; Dimensions</th>
<th>Frequency (N = 50)</th>
<th>Percent (100%)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Peer self-esteem</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Low</td>
<td>30</td>
<td>60 %</td>
</tr>
<tr>
<td>High</td>
<td>20</td>
<td>40 %</td>
</tr>
<tr>
<td>Home self-esteem</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Low</td>
<td>25</td>
<td>50 %</td>
</tr>
<tr>
<td>High</td>
<td>25</td>
<td>50 %</td>
</tr>
<tr>
<td>School Self-esteem</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Low</td>
<td>29</td>
<td>58 %</td>
</tr>
<tr>
<td>High</td>
<td>21</td>
<td>42 %</td>
</tr>
<tr>
<td>Overall Self-esteem</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Low</td>
<td>26</td>
<td>52 %</td>
</tr>
<tr>
<td>High</td>
<td>24</td>
<td>48 %</td>
</tr>
</tbody>
</table>

This table shows that out of 50 respondents, 40% of them have good self-esteem when they are with their peer group, 60% of the respondents have low peer self-esteem. In home self-esteem, 50% of the respondents have high self-esteem and 50% of them have low self-esteem at home. In school self-esteem 42% of the respondents have good self-esteem while 58% of them have lower self-esteem. This study reveals that 48% of the respondents have good self-esteem and 52% of them have lower self-esteem.

4. Suggestions and Conclusion

Findings
- Majority of the respondents (68%) are from a nuclear family.
- More than half of the respondents (56%) share their feelings to their friends.
- Most of the respondents (44%) are able to control their emotion sometimes.
- This study reveals that most of the respondents lower peer self-esteem.
- This study reveals that half of the respondents have higher home self-esteem.
- This study reveals that more than half of the respondents have lower school self-esteem.
- This study reveals that more than half of the respondents have lower self-esteem.

Suggestions for teachers
- Helping adolescents accept what's not perfect
- Encouraging them to focus on what goes well
- Maintaining good relationship with parents and others
- Encouraging their individual talents
- Encouraging them to Explore New Opportunities

Suggestions for parents
- Encourage decision-making and opinions
- Being supportive during a conflict
- Teaching them to balance Self-acceptance with Self-improvement
- Praising their efforts
- Teaching Assertive Skills
- Build Self-worth on a healthy foundation
- Balance Freedom with Guidance
Help teens develop positive Self-talk
Self-esteem in adolescents is important and has to be developed at an early stage. In case, the adolescent has lower self-esteem and is not helped out, the adolescent would develop a lot of problems which be a serious trouble in the later part of their life. This study has shown that more than half of the respondents have low self-esteem. Hence, steps to help adolescents with low self-esteem especially at an early stage has to be initiated.

References
Parental Bonding among Adolescents at Udumalpet in Tamilnadu

R. Godson*
Dr. M. Gabriel**

Abstract
Children living with parents are of very good experience indeed they are very important and have grater implication towards their psychosocial and over all development. In this present descriptive study the authors have used self-preparation questions to collect social demographic data of the adolescent’s respondent. They have also used the Parental Bonding Inventory developed by Gordon Parker, Hilary Tupling and L.B.Brown (1976) the reliability with half split coefficient of .88 for care and .74 for over protection and validity is reported .76 for care and .63 for control, to measure the value of bonding among adolescent. The authors adopting census sampling method have chosen one of the private schools with residential students of 57 respondents who were all willing to participate in the research study, in Udumalpet and collected the required data. The satirical analysis has been done using SPSS and result revealed that the male adolescent were found to have higher parental bonding as well as parent-child relationship compared to that of females. From a cultural aspect, there is no difference among them in terms of parental bonding and parent-child relationship.

Keywords: Parental Bonding; Over Protection; Adolescent.

1. Introduction
Parental bonding can be described as an attachment between the child and the parent. This attachment theory is based on the idea that there are individual differences in terms of how infants become emotionally bonded to their primary caregivers and how these first attachment experiences influence the future developments of infants in Social, Cognitive and Emotional aspects. Parental self-confidence is an important indicator of parental competence. Mothers who believe that they are effective parents are more competent than mothers who feel incompetent. Also, mothers who see themselves as effective also tend to believe their infants as less difficult to handle. Parental age and previous experience are also play an role important. Older mothers tend to be more responsive to their infants than younger mothers. In addition, parents who have had previous experience with children, whether through younger siblings, career paths, or previous children, are often times better able to cope better with parenthood.

Review of Literature
According to Bowlby (1977), attachment is determined by the parent’s attitude and behavior towards the infant’s needs. Secure attachment occurs when the caregiver is always sensitive and consistent in responding to child’s need. In contrast, parents who often neglect or reject the child’s need for attention will lead to insecure attachment.

Studies on adult’s attachment reveal that securely attached adults tend to be more competent, sociable, and more comfortable in dealing with different kinds of relationship in life (Haft & Slade, 1989). They are more likely to maintain a higher level of self-reliance and self-esteem compared to insecurely attached counterparts (Steinberg, 2001). In contrast, insecurely attached adults showed higher tendency to engage in antisocial behaviors, to suffer from depression and anxiety, to be clingy, dependent and less self-confident.

2. Research Methodology
Objectives of the Study
➢ To understand the Socio demographic characteristics of the respondent.
➢ To assess the level of the perceived Physical wellbeing and Emotional wellbeing of parents by the respondent.
➢ To study the relationship between adolescents on their perceived pertaining with their general wellbeing with them selected socio-demographic value.
➢ To give suggestion in improving the parental bonding among adolescent.

*II MSW, PG & Research Department of Social Work Student Bishop Heber College, Tiruchirappalli.
**Associate Professor Department of Social Work Student Bishop Heber College
Significance of the Study

Present day society is based on complication in which everyone has the tendency to perform as perfectly as possible. Parents shape the life of their children from birth through adulthood. Here motivation, involvement and support of parents make him/her more confident and optimistic, during childhood most of the children accept the guidance of their parents.

Research Design

As the study aim to describe the level of emotional bonding of children on their parents and their Physical wellbeing and hence, the researchers have adopted descriptive research design and attempted to describe the socio demographic details of the respondents. The main variable of the study were Perceived parental bonding, the associations and differences between the dependent and independent variables were explored. Hence this study is descriptive design in nature.

Universe, Sampling Design and Tools of the data collection.

The universe of the present study is of definite in nature that is 11th standard students 62 in the classes. 57 of them were willing to participate in the research study. The census method has been used to collect the required data. The researcher used self-preparation questions to collect the socio demographic data from the respondents and used the tool PBI (1979) developed by Gordon parker, Hilary Tupling and L.B. Brown to collect the required data. The instrument of data collection on parental bonding consists of 25-items to measure parent child bonds from the perception of the child. It has two sub scale termed “care” and “overprotection” or “control”. Low and high ranges in care and control subscales further measure fundamental parental style as perceived by the child. The measure is to be completed for both mothers and fathers separately.

• High care and high protection denotes optimal parenting and affectionate constrain.
• Low care and low protection reveals affectionless control and neglectful parenting.

3. Analysis and Interpretation

Table 1. Socio Demographic Variables of the Respondents

<table>
<thead>
<tr>
<th>Variables</th>
<th>No. of Respondents N: 57</th>
<th>Percentage %</th>
</tr>
</thead>
<tbody>
<tr>
<td>Age</td>
<td></td>
<td></td>
</tr>
<tr>
<td>16</td>
<td>14</td>
<td>24.6</td>
</tr>
<tr>
<td>17</td>
<td>35</td>
<td>61.4</td>
</tr>
<tr>
<td>18</td>
<td>8</td>
<td>14.0</td>
</tr>
<tr>
<td>Gender</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Male</td>
<td>33</td>
<td>57.9</td>
</tr>
<tr>
<td>Female</td>
<td>24</td>
<td>42.1</td>
</tr>
<tr>
<td>Family Type</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Nuclear</td>
<td>29</td>
<td>50.9</td>
</tr>
<tr>
<td>Joint</td>
<td>23</td>
<td>40.4</td>
</tr>
<tr>
<td>Extended</td>
<td>5</td>
<td>8.8</td>
</tr>
</tbody>
</table>

From the above table it concludes that majority of the respondents 61% are between the age group of 17. More than half of the respondents 57% are male. Half of the respondents 50.9% belong to nuclear family.

Low High Value

<table>
<thead>
<tr>
<th>Physical wellbeing</th>
<th>Frequency</th>
<th>Percent</th>
</tr>
</thead>
<tbody>
<tr>
<td>Low</td>
<td>31</td>
<td>54.4</td>
</tr>
<tr>
<td>High</td>
<td>26</td>
<td>45.6</td>
</tr>
<tr>
<td>Total</td>
<td>57</td>
<td>100.0</td>
</tr>
</tbody>
</table>
Majority of the respondent 54.4% have level of physical wellbeing.

<table>
<thead>
<tr>
<th>Emotional wellbeing</th>
<th>Frequency</th>
<th>Percent</th>
</tr>
</thead>
<tbody>
<tr>
<td>Low</td>
<td>29</td>
<td>50.9</td>
</tr>
<tr>
<td>High</td>
<td>28</td>
<td>49.1</td>
</tr>
<tr>
<td><strong>Total</strong></td>
<td><strong>57</strong></td>
<td><strong>100.0</strong></td>
</tr>
</tbody>
</table>

Majority of the respondent 50.9% have level of emotional wellbeing.

### Table 2. Correlation Table of Age

<table>
<thead>
<tr>
<th>Variables</th>
<th>Correlation Values</th>
<th>Statistical Inference</th>
</tr>
</thead>
<tbody>
<tr>
<td>Age &amp; Physical wellbeing</td>
<td>.070</td>
<td>P&gt;0.05</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Not Significant</td>
</tr>
<tr>
<td>Age &amp; Emotional wellbeing</td>
<td>.304*</td>
<td>P&lt;0.05</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Significant</td>
</tr>
<tr>
<td>Age &amp; Overall</td>
<td>.279*</td>
<td>P&lt;0.05</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Significant</td>
</tr>
</tbody>
</table>

Karl Pearson’s co-efficient of correlation test was applied and it found weather there is a significant relationship between the ages of the respondents with regards to their overall Emotional wellbeing there is a significant relationship between the ages of the respondents with their physical wellbeing of Parental bonding.

### Table 3. Correlation Table of Birth Order

<table>
<thead>
<tr>
<th>Variables</th>
<th>Correlation Values</th>
<th>Statistical Inference</th>
</tr>
</thead>
<tbody>
<tr>
<td>Birth order &amp; Physical wellbeing</td>
<td>.037</td>
<td>P&gt;0.05</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Not Significant</td>
</tr>
<tr>
<td>Birth order &amp; Emotional wellbeing</td>
<td>.132</td>
<td>P&gt;0.05</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Not Significant</td>
</tr>
<tr>
<td>Birth order &amp; Overall</td>
<td>.081</td>
<td>P&gt;0.05</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Not Significant</td>
</tr>
</tbody>
</table>

Karl Pearson’s co-efficient of correlation test to find that relationship between the birth order of the respondents with regards to the various dimensions and overall dimensions of Parental bonding.

### Table 4. T-Test Table of Gender

<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; Physical wellbeing</td>
<td>Male</td>
<td>29.9394</td>
<td>3.41814</td>
<td>Z = .218</td>
</tr>
<tr>
<td></td>
<td>Female</td>
<td>29.7500</td>
<td>2.98183</td>
<td>P&gt;0.05</td>
</tr>
<tr>
<td>Gender &amp; Emotional wellbeing</td>
<td>Male</td>
<td>33.8788</td>
<td>3.79768</td>
<td>Z = -2.603</td>
</tr>
<tr>
<td></td>
<td>Female</td>
<td>36.6667</td>
<td>4.24947</td>
<td>P&gt;0.05</td>
</tr>
<tr>
<td>Gender &amp; overall</td>
<td>Male</td>
<td>63.8182</td>
<td>4.94630</td>
<td>Z = -1.841</td>
</tr>
<tr>
<td></td>
<td>Female</td>
<td>66.4167</td>
<td>5.67157</td>
<td>P&gt;0.05</td>
</tr>
</tbody>
</table>

From the above table that using t-test represents that it is found that there is a no significant difference between the dimensions of physical wellbeing and emotional wellbeing in Gender by the respondents with regards overall dimensions of Parental bonding.
Table 5 Anova Table of Type of Family

<table>
<thead>
<tr>
<th>Dimension</th>
<th>Variances</th>
<th>Sum of Squares</th>
<th>Mean Square</th>
<th>Mean</th>
<th>df</th>
<th>Significant interference</th>
</tr>
</thead>
<tbody>
<tr>
<td>Family type and Physical wellbeing</td>
<td>Between Groups</td>
<td>38.034</td>
<td>19.017</td>
<td>G1=29.4138</td>
<td>56</td>
<td>F=.160</td>
</tr>
<tr>
<td></td>
<td>Within Groups</td>
<td>540.843</td>
<td>10.016</td>
<td>G2=29.8696</td>
<td></td>
<td>P&gt;0.05</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td>G3=32.4000</td>
<td></td>
<td>Not significant</td>
</tr>
<tr>
<td>Family type and Emotional wellbeing</td>
<td>Between Groups</td>
<td>93.936</td>
<td>46.968</td>
<td>G1=34.7241</td>
<td>56</td>
<td>F=.067</td>
</tr>
<tr>
<td></td>
<td>Within Groups</td>
<td>890.906</td>
<td>16.498</td>
<td>G2=36.2174</td>
<td></td>
<td>P&gt;0.05</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td>G3=31.6000</td>
<td></td>
<td>Not significant</td>
</tr>
<tr>
<td>Family type and Overall</td>
<td>Between Groups</td>
<td>53.287</td>
<td>26.644</td>
<td>G1=64.1379</td>
<td>56</td>
<td>F=.405</td>
</tr>
<tr>
<td></td>
<td>Within Groups</td>
<td>1563.274</td>
<td>28.950</td>
<td>G2=66.087.</td>
<td></td>
<td>P&gt;0.05</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td>G3=64.9123</td>
<td></td>
<td>Not significant</td>
</tr>
</tbody>
</table>

(G1= nuclear family  G2=join family  G3=extent family)

From the above there is no significant relationship between the type of the family and the various dimension physical wellbeing, emotional wellbeing and overall of the respondent.

4. Suggestion and Conclusion
1. The state and central government should concentrate on including Parenting skills, Skills on building up relationship & life skill education inbuilt syllabus at school level.
2. Organizing periodical workshops, seminar, conference, and training programs highlighting the optimal parenting and enriching emotional wellbeing of the Teacher, Students, and Parents.
3. Educational institution should appoint student counsellor on regular basis. So as to support the student enriching the physical and emotional wellbeing.
4. Similar type of research shall be conducted in various institutions to assess the student who have low level if physical and emotional bonding and support them to enrich them.

The study concludes that the Parental bonding plays a significant effect on child in Physical wellbeing and Emotional wellbeing of the adolescent. As in the study majority of the respondents are physically wellbeing with their parents and more or less similarly emotionally they are attached to their parents. The parental bonding measures the parenting style, as received by their child.

References
Attitude of Teachers towards Sex Education

R. Reshma*
Mrs. Reena Rebellow**

Abstract
Sex education is broad term used to describe education about human sexual anatomy, sexual reproduction, sexual intercourse and other aspects of human sexual behavior. Sex education in schools is being given increasingly importance as it is known to inform students about issues related to sexual health. It is considered to important for societies that it’s individual or well informed about sexual practices, child sexual abuse and sexually transmitted diseases. The teacher in schools plays a major role in helping the students to know about the sex education. The main aim of the study is to find the attitude of teachers towards sex education. The researcher study represented descriptive research design to explain the study and has used the Sex education Attitude Scale to find the attitude of respondents towards sex education. The universe of the research is 114 teachers from two institution of higher secondary school at Tiruchirappalli. Out of 114 the selected sample size was 57 respondents. The study reveals that majority of the respondents have the positive attitude towards sex education.

Keywords: Attitude; Sex education; Teacher; Sexual health; Schools.

Introduction
Sex education is the provision of information about bodily development, sex, sexuality, and relationships, along with skills-building to help young people communicate about Sex education should occur throughout a student’s grade levels, with information appropriate to students’ development and cultural background. It should include information about puberty and reproduction, abstinence, contraception and condoms, relationships, sexual violence prevention, body image, gender identity and sexual orientation. Sex education should be taught by trained teachers. Forrest (2004) defines sexuality education as the process of acquiring information and forming attitudes and beliefs about sex, sexual identity, relationships and intimacy. It is also about developing young people's skills on sex issues in order to enable them to make informed choices about their behavior and feel confident and competent about acting on their choices.

Spanier, et al. (1976) in a study —Formal and informal sex education as determinants of premarital sexual behavior! stated that sexual health education represents a valuable resource that informs young people's sexual contact but often it is not the most influential, thus the potential of education in the development of behavioral patterns must be assessed in the context of other influences on the sexual health of young people. It will also create the power to make value judgment. Sexual education will provide opportunity to youngsters to imbibe human values. Sexual health education will provide opportunity to the young people to develop ethical, social and spiritual values which will serve as a guide to the individual in persona, family and social relationships.

Attitude refers to a predisposition or orientation or mental state of readiness which may be inferred and which inclines an individual to make verbal statement that may be positive or negative evaluation, either consciously or unconsciously, which denotes individual motivational, perceptual and cognitive process which regards to attitude object by Tyson 1987.

The effectiveness of school based sexuality education depends on the effectiveness of teacher who implement it. The teacher shows the positive attitude towards teaching sexuality education by conducting and engaging the students in sexuality education programme. Teachers transmit accurate information and make the students to get away from fears related to human sexuality. They have the positivity towards sex education because it helps the students to get protect from the sexual abuses as well as it gives information about the reproduction and helps the students at risk. Westwood and Mullan (2007) in a study —Knowledge and attitudes of secondary school teachers! found that teachers have had inadequate sexual health knowledge to efficiently teach sexually transmitted infections or emergency

*II MSW PG & Research Department of Social Work, Bishop Heber College, Tiruchirappalli.
**Assistant Professor, PG & Research Department of Social Work, Bishop Heber College, Tiruchirappalli.
contraception, although their general sexual health knowledge appeared to be good; which suggests that teachers require sufficient specialist knowledge in sexual health to contribute to current recommendations for sex and relationships education in secondary schools.

The most of the teachers have no problems in delivering sexuality education that consist of biological factors, but they find it difficulty in handling participatory facilitation skills that have been found to be effective in teaching of sexuality education such as discussion, group work and role plays. The teachers often express difficulties in teaching some of the topic related to sexuality education includes condoms use, masturbation, sexual orientation, abortion and contraception.

The importance of teachers in teaching sex education which plays an important role because most of the children find it difficulty in discussing about the natural changes taking place in their body and mind. In such circumstances, one highly suitable option is that of the teachers who are able to teach them to control their urges until a proper age. In schools, trained teachers would help the students to know how to deal with their sexual impulses.

2. Methodology

Aim of the study:
- To study the attitude of teachers towards sex education in schools.

The researcher has adopted descriptive research design which helps to describe the attitude of the teachers towards sex education. The universe of the study were 114 teachers who were handling classes for the secondary and higher secondary students at CSI Methodist Girls Higher Secondary School and Bishop Heber Higher Secondary School, Teppakulam, Tiruchirappalli. Out of 114 the selected sample size was 57 respondents. The sampling design used in the study is stratified proportionate random sampling technique. The researcher has adapted questionnaire method for collecting data from the respondents. The instrument used by the researcher was The Sex Education Attitude Scale developed and standardized by Prof. Ravindra v. Patil (1988) that consists of 25 items with positive and negative questions towards sex education.

3. Result and Analysis

Table 1. Distribution of respondents based on their feelings of comfort in teaching sex education

<table>
<thead>
<tr>
<th>Feeling Comfortable to teach sex education</th>
<th>Frequency (n=57)</th>
<th>Percent (100%)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Yes</td>
<td>34</td>
<td>60%</td>
</tr>
<tr>
<td>No</td>
<td>17</td>
<td>30%</td>
</tr>
<tr>
<td>N/A</td>
<td>6</td>
<td>10%</td>
</tr>
</tbody>
</table>

It is observed from the above table that majority (60%) of the respondents are feeling comfortable in teaching sex education in classes and 30% of respondents are not feeling comfortableness in teaching sex education in classes and considerable (10%) of the respondents have not handled sex education in classes.

Table 2. Distribution of respondents based on their conducting sex education classes for students

<table>
<thead>
<tr>
<th>Have you Conducted sex education classes for students</th>
<th>Frequency (n=57)</th>
<th>Percent (100%)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Yes</td>
<td>18</td>
<td>32%</td>
</tr>
<tr>
<td>No</td>
<td>39</td>
<td>68%</td>
</tr>
</tbody>
</table>

It is observed from the above table that majority (68%) of the respondents has not conducted sex education in classes and 32% of respondents has conducted the sex education classes.
Table 3. Distribution of respondents based on their difficulties in teaching sex education classes

<table>
<thead>
<tr>
<th>Difficulties of teachers in teaching sex education class</th>
<th>Frequency (n=57)</th>
<th>Percent (100%)</th>
</tr>
</thead>
<tbody>
<tr>
<td>No difficulty</td>
<td>16</td>
<td>28%</td>
</tr>
<tr>
<td>Feeling shyness</td>
<td>13</td>
<td>23%</td>
</tr>
<tr>
<td>Misinterpretation</td>
<td>10</td>
<td>17%</td>
</tr>
<tr>
<td>No separate class</td>
<td>18</td>
<td>32%</td>
</tr>
</tbody>
</table>

It is observed from the above table that 32% of the respondents find difficulty in not giving separate class in schools and 28% of respondents find no difficulty in teaching sex education and 23% of respondents feeling shy towards the sex education and very few number of respondents (17%) find difficulties in misinterpreting the concept by the students towards sex education.

Table 4. Distribution of respondents based on their attitude towards sex education

<table>
<thead>
<tr>
<th>Attitude</th>
<th>Frequency (n=57)</th>
<th>Percent (100%)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Low</td>
<td>15</td>
<td>26%</td>
</tr>
<tr>
<td>Medium</td>
<td>21</td>
<td>37%</td>
</tr>
<tr>
<td>High</td>
<td>21</td>
<td>37%</td>
</tr>
</tbody>
</table>

It is observed from the above table 37% of respondents has the moderate positive attitude towards the sex education and 37% has the highly positive attitude towards sex education and 26% of respondents has the negative attitude towards sex education.

Major findings

- Majority of the respondents (60%) are feeling comfortable in teaching sex education in classes.
- Majority of the respondents (68%) said that they have not conducted sex education in classes.
- 32% of respondents finds difficulty in not giving separate classes for sex education.
- 37% of respondents has the moderate positive attitude towards the sex education and 37% has the highly positive attitude towards sex education and 26% has the negative attitude towards sex education.

4. Suggestions and conclusion

The teachers must be provided special training in handling classes about sex education. There should be given individual counselling to the students. Social work knowledge base can be practiced by the teachers at individuals, group or community level for enhancing the knowledge and the attitude of students and parents on sexuality education. The study material must be given to the teachers for teaching the sex education. Proper guidance programme must be arranged for parents and students related to sex education. Imparting sex education should be formally included in the course curriculum to spread awareness of various sex related problems and teach ways to prevent them. It is essential to make sure that all children are educated about the sex at the right age. Educating them right from the beginning is essential in order to enable a better understanding among the children about human sexuality.

References

Self Esteem of School Students of Dharmapuri

P. Robert Ramesh Babu*

Abstract
Self-esteem refers to the subjective judgment that every person makes of his ability to face life's challenges, to understand and solve problems, and his right to achieve happiness, and be given respect. Self-esteem is an important influential predictor of various outcomes, such as academic achievement and behaviour. According to Branden (1987), self-esteem is the sum of self-confidence and self-respect. The term self-esteem is one of the oldest concepts in the field of psychology. The term was coined by American Psychologist and Philosopher W. James in 1890. Self-esteem is usually defined as a personal judgment of worth living along a dimension with positive and negative ends. It is also widely assumed that self-esteem functions as a trait that is not stable across time within individuals. In psychology self-esteem or self-worth includes a person’s subjective appraisal of himself or herself as intrinsically positive or negative to some degree that may become more positive or negative as a person encounters successes or failures in daily life. Synonyms of self-esteem include self-worth, self-regard, self-respect, and self-integrity. The researcher used Rosenberg Self Esteem Scale to measure the self-esteem of the students. Esteem is defined as "the evaluation which an individual makes and customarily maintains with regards to himself, expressed as an attitude of approval or disapproval" (Rosenberg, 1965, p5). The RSES consists often items that are measured on a 4 point Likert scale, with 1 representing "strongly agree" and 4 representing "strongly disagree. Silber and Tippet (1965) found that the scale correlated from 0.65 to 0.83 with several other self-esteem measures and clinical assessments. The same authors also found a test-retest correlation over two weeks of 0.85. The researcher aims to study the Self-esteem of the higher secondary school students of Dharmapuri. The sample size is 120. The researcher used Descriptive Research design. He has used Survey Method to collect the data. Among the respondents 55 percent were male and 45 percent were female. 55 percent of the respondents were doing XII Std and the rest of the respondents were doing XI Std. While analysing the data 64 percent of the respondents were having high Self Esteem while the remaining 36 percent had low Self-esteem.

Key Words: Self esteem; School students; Academic achievement; Self respect

1. Introduction
Self-esteem has been generally defined as the evaluation of the self; it is an affective response to one’s self-description. The evaluation refers to a judgment of one’s worth and what is being judged is one’s perception of who one is, or one’s self-concept. Self-esteem refers to a person’s overall sense of his or her value or worth. It can be considered a sort of measure of how much a person “values, approves of, appreciates, prizes, or likes him or herself” (Adler & Stewart, 2004). Self-esteem is also defined as a global barometer of self-evaluation involving cognitive appraisals about general self-worth and affective experiences of the self that are linked to these global appraisals (Murphy, Stosny and Morrel, 2005). Self-esteem is confidence in one’s capacity to achieve values (Branden, 1970). It is subjective and enduring sense of realistic self-approval. It reflects how the individual views and values the self at the most fundamental levels of psychological experiencing. (Bednar & Peterson, 1995). Erikson (1968) identified self-esteem as a function of identity development that results from successfully addressing the tasks associated with each of the developmental stages of life. Thus one’s sense of developing, growing, and confronting lives tasks leads to feelings of worth.

The formation of self-esteem implies a long process. It is correlated with the formation of self-image and self-conscience. Its evolution in time involves also downfall periods especially during transition periods from one stage to another, from one status to another, e.g., in adolescence (due to the psycho somatic changes), or grand age, as a consequence of the change in status, retirement and the change in tasks and responsibilities (Orth, Trzesniewskiand Robins, 2010). While self-esteem appears to decline during adolescence, it increases during young

* Assistant Professor of Social Work, Don Bosco College, Dharmapuri
adulthood (Tsui, Ying and Lee, 2001). In 2004, Heine and Lehman stated that over 18,000 studies investigating self-esteem have been published over the past 35 years. Still many researches being done on self esteem

Review of literature

Rosenberg (1965), one of the pioneers in this domain, stated that self-esteem refers to an individual overall positive evaluation to the self. He added, that high self-esteem consists of an individual respecting himself and considering himself worthy. Brown, Dutton, and Cook (2001) distinguished three ways in which the term “self-esteem” is used: (a) global or trait self-esteem to refer to the way people characteristically feel about themselves, i.e., feelings of affection for oneself; (b) self-evaluation to refer to the way people evaluate their various abilities and attributes, and (c) feelings of self-esteem to refer to momentary emotional states, e.g., a person might say her self-esteem was sky-high after getting a big promotion, or a person might say his self-esteem plummeted after a divorce.

Branden (1969) maintained that self-esteem consists of two components: (a) to consider oneself effective, to trust in one’s ability to think, learn, choose and make correct decisions, and to overcome challenges and produce changes, and (b) to respect oneself, the confidence in one’s right to be happy, and the confidence that people are worthy of the respect, love and self-fulfillment appearing in their lives. According to James (1890) three major elements of the self from which pretensions are chosen: the material self, the social self and the spiritual self. The material self refers to objects and pretensions that are considered as one’s personal property or one’s identification: body, clothes, family, home, car etc. If the material realm prospers, the individual feels enlarged on the contrary, if one’s possessions are damaged or lost, the person feels smaller.

Epstein defines three interacting levels of self-esteem. The first level is global; the second one is the degree of self-esteem at any time in one of eight areas (competence, likeability, lovability, self-control, personal power, moral approval, bodily appearance, and bodily functioning); and the last one is visible self-esteem that is considered situation-specific (O’Brien & Epstein, 1983). The period of adolescence is important for the process of self-esteem formation. The formation of self-esteem can be stimulated, encouraged both by parents and teachers. The level of self-esteem is mirrored in the adolescent’s attitude and behavior, both at home and at school (Mogonea and Mogonea, 2014).

The adolescents with a high level of self-esteem have the following characteristics: they are capable of influencing positively the opinion and behavior of others; they tackle new situations positively and confidently; they have a high level of tolerance towards frustration; they accept early responsibilities, they assess correctly situations; they communicate positive feelings about themselves; they succeed in having a good self-control and the belief that the things they are undergoing are the result of their own behavior and actions (Lavoie, 2012). Therefore, adolescence is the critical period for the development of self-esteem and self-identity, and low self-esteem may endanger adolescent’s emotional regulation (Lin, Tang, Yen, Ko, Huang, Liu et al., 2008). On the other hand, high self-esteem serving as a role of resilience or positive adaptation (Moksnes and Espnes, 2012).

2. Research Methodology

Aim of the study

A study on self-esteem among the school students of Dharmapuri

Significance of the study

The simplest definition of self-esteem is found in Webster’s dictionary, which says that “self-esteem is satisfaction with oneself”. In another edition of the same dictionary, self-esteem means “one’s good opinion of one’s dignity or worth”. It is very important that the students build up a good opinion about themselves. Due to the stage of adolescence as well as the performance in the academics have a lot of impact with their self-esteem. This study is trying to analyse the self-esteem of school students. Based on the result interventions would be suggested.

Objectives

- To find out the socio demographic details of the school students
- To study about the levels of self-esteem of the school students.
- To find out the difference between the socio demographic characteristics with the self-esteem of the school students of Dharmapuri.
- To provide suitable suggestion to improve the self-esteem level of the school students of Dharmapuri.

Null hypothesis

1. The majority of the respondents would have low level of self-esteem.
2. There is no significant difference between gender and self-esteem.
7. There is no significant difference between family type and self-esteem.
8. There is no significant difference between Std of Education of the respondents and self-esteem

Research design

The present study is to find the level of self-esteem among the school students. The researcher used Descriptive research design.

Sampling

The researcher collected data from one of the private school students of Dharmapuri. The researcher used simple random sampling by using lottery method. The size of the sampling is 120.

Data collection process

The researcher collected both primary and secondary data from various articles, books, and websites. Primary data collected through questionnaire and the secondary data was collected from the Books, articles, journals and websites. The researcher collected the data through standardized questionnaire from the respondents. Rosenberg self-esteem scale was used for data collection.

Statistical analysis

The data collected were analyzed carefully by using statistical package of social science (SPSS) and processed accordingly. Statistical techniques such as mean, chi square test and ‘t’ test were applied systematically to obtain meaningful inference.

3. 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.

![Figure 1. Distribution of the respondent’s level of self-esteem](image)

The above diagram presents the level of self-esteem among the school students. 36 percent of the respondents have low self-esteem and 64 percent of respondents have high self-esteem. Hence the hypothesis 1 is disproved. Majority of the students have high level of self-esteem.

<table>
<thead>
<tr>
<th>Particulars</th>
<th>Gender</th>
<th>N</th>
<th>Mean</th>
<th>Standard Deviation</th>
<th>Standard Error Mean</th>
<th>Statistical Inference</th>
</tr>
</thead>
<tbody>
<tr>
<td>Self-Esteem</td>
<td>Male</td>
<td>66</td>
<td>28.92</td>
<td>4.107</td>
<td>.505</td>
<td>Z= 0.313 Df= 118</td>
</tr>
<tr>
<td></td>
<td>Female</td>
<td>54</td>
<td>28.24</td>
<td>3.071</td>
<td>0.419</td>
<td>P&gt;0.05 Not Significant</td>
</tr>
</tbody>
</table>
From the above table using ‘Z’ test it is found that there is no significant difference between the gender with the level of self-esteem of the respondents. Hence hypothesis 2 is proved that gender has no significant difference in the level of self-esteem of the respondents. While analyzing the mean score it is observed that both male and female respondents have same level of self-esteem.

Table 2. ‘Z’ test between the family type and the level of self-esteem

<table>
<thead>
<tr>
<th>Particulars</th>
<th>Family Type</th>
<th>N</th>
<th>Mean</th>
<th>Standard Deviation</th>
<th>Standard error Mean</th>
<th>Statistical Inference</th>
</tr>
</thead>
<tbody>
<tr>
<td>Self Esteem</td>
<td>Nuclear family</td>
<td>94</td>
<td>28.54</td>
<td>3.64</td>
<td>0.375</td>
<td>Z= 0.677 Df= 118 P&gt;0.05 Not Significant</td>
</tr>
<tr>
<td></td>
<td>Joint family</td>
<td>26</td>
<td>28.88</td>
<td>3.87</td>
<td>0.759</td>
<td></td>
</tr>
</tbody>
</table>

From the above table using ‘Z’ test it is found that there is no significant difference between the family types with the level of self-esteem of the respondents. Hence hypothesis 3 is proved that family type has no significant difference in the level of self-esteem of the respondents. While analyzing the mean score it is observed that respondents from nuclear family and joint family have same level of self-esteem.

Table 3. ‘Z’ test between the standard of education and the level of self esteem

<table>
<thead>
<tr>
<th>Particulars</th>
<th>Family Type</th>
<th>N</th>
<th>Mean</th>
<th>Standard Deviation</th>
<th>Standard error Mean</th>
<th>Statistical Inference</th>
</tr>
</thead>
<tbody>
<tr>
<td>Self-Esteem</td>
<td>XI</td>
<td>54</td>
<td>28.20</td>
<td>3.92</td>
<td>0.534</td>
<td>Z= 0.268 Df= 118 P&gt;0.05 Not Significant</td>
</tr>
<tr>
<td></td>
<td>XII</td>
<td>66</td>
<td>28.95</td>
<td>3.45</td>
<td>0.425</td>
<td></td>
</tr>
</tbody>
</table>

From the above table using ‘Z’ test it is found that there is no significant difference between the Std of Education with the level of self-esteem of the respondents. Hence hypothesis 4 is proved that standard of education has no significant difference in the level of self-esteem of the respondents. While analyzing the mean score it is observed that respondents from XI and XII have same level of self-esteem.

Findings of the study
- The mean age of the respondents is 16
- 66 percent of the respondents are male while the remaining is female.
- 93.3 percent of the respondents are from rural areas
- 94 percent of the respondents are from nuclear families.
- 64.2 percent of the respondents have high Self Esteem and 35.8 percent of respondents have low Self Esteem.
- There is no significant difference between the gender with the level of Self Esteem
- There is no significant difference between the family types with the level of Self Esteem of the respondents
- There is no significant difference between the Std of education with the level of Self Esteem of the respondents.
4. Discussion and Conclusion

64.2 percent of the respondents have high self-esteem which is a positive thing to be appreciated. People with high self-esteem experience more happiness, optimism, and motivation than those with low self-esteem, as well as less depression, anxiety, and negative mood. Self-esteem rises when a person succeeds, is praised, or experiences another’s love, making self-esteem dependent on not only one’s perceptions of himself but also other’s perceptions of him (Schmidt and Padilla, 2003). Self-esteem is a major key to success in life. The development of healthy self-esteem is extremely important for good personal and social adjustment.

The big concern is on those 35.8 percent of the students who have low self-esteem. People with low self-esteem suffer from feelings of worthlessness, inferiority, and emotional instability, so leading to dissatisfaction with life (Ha, 2006). Moreover, there is a tendency of respondents with low self-esteem scores to have a general negative attitude toward many things, including other people and personal circumstances (Mackinnon, 2015, p. 15).

Low self-esteem has been linked to depression, aggression, less competency to overcome difficulties and decreased level of well-being in adolescence (Stavropoulos et al., 2015). Weber (2001) hypothesized that college students who report emotional abuse are expected to have a lower self-esteem than those who do not report emotional abuse. While analysing the mean scores of gender, Std of Education and family type with the level of self-esteem it was observed that there is no significant difference in those variables.

Conclusion

While appreciating those who are having high self esteem it is good to know the dark sides of high esteem. Baumeister, Smart, and Boden (1996) suggested that people with high self-esteem are more likely to be conceited, arrogant, or occasionally narcissistic. They expect to receive positive evaluations from others; if they are provided with negative feedback, a threatened ego motivates them to spend personal resources on coping with the negative evaluations. Neff (2011) pointed out that pursuit of high self-esteem can be problematic, can sometimes be counterproductive, and may involve puffing the self up while putting others down.

Most theories of self-esteem view it as a relatively stable personality trait. Based on this perspective, self-esteem is stable because it slowly builds over time through personal experiences, such as repeatedly succeeding at various tasks or continually being valued by significant others. A number of studies, however, assumed that self-esteem may involve puffing the self up while putting others down.

Most theories of self-esteem view it as a relatively stable personality trait. Based on this perspective, self-esteem is stable because it slowly builds over time through personal experiences, such as repeatedly succeeding at various tasks or continually being valued by significant others. A number of studies, however, assumed that self-esteem can momentarily manipulated or affected. Therefore, self-esteem can be viewed as a “trait” as well as a “state” (Heatherton and Wyland, 2003).

Greenier et al., (1995) stated that self-esteem instability is a dimension distinct from level of self-esteem. Self-esteem instability refers to the magnitude of short term fluctuations that people experience in their contextually based feelings of self-worth. Among high self-esteem individuals, self-esteem instability reflects fragility in one’s positive self-feelings, and is associated with heightened tendencies to defend and promote these positive self-feelings. On the other hand, among low self-esteem individuals, self-esteem instability is related to various indices of psychological difficulties and maladjustment.

References
27. Research in social psychology and personality. Journal for the Theory
The correlate of Personal Value among the college students in Trichy District

D. Diana Priya Dharsini*
Dr. A. Umesh Samuel Jebaseelan**

Abstract
The correlate of personal Value among the college students in Trichy District is a study on a sample of 120 respondents in three colleges in Trichy district namely Bishop Heber, ChristhuRaj and Government arts colleges. For the selection of these respective colleges researcher used the simple random sampling (lottery method) from the Final year Under Graduate Students only who is pursuing currently in the Arts and Science College. After that, the researcher had selected 20 from the Arts Section and 20 from the Science Section. Hence the Sampling method for this study is Disproportionate Stratified random sampling method is adopted. The relationship among the selected variables as well as their association with socio demographic background variables of the respondents was also investigated. The hypothesis generated based on the objectives to find out the relationship between the subject variables. A self-prepared interview schedule and anonymous scales were used for the collection of data. Statistical techniques such as mean, standard deviation, median, chi-square, “z” test, Karl Pearson`s coefficient of correlation. Major findings of the study and the conclusions drawn from them indicate that personal Value is in moderate level among the college students. The study also revealed that there was a significant relationship between the subject variables. Suggestions of the study with general recommendations are given.

Keywords: Personal Value; culture; College students; Youth.

1. Introduction
Youth are the basement of the next generation. In many countries, some of the youth are emancipated and some or not. Youth reported with difficulties with education, reliance on mental health issues, and substance use with high recidivism rate. Youth are admitted into the adult status by the formal or the informal process by the society. The considerable traditional, educational, culture, personal value and the economic is found with differences among the youth all over the world. The present study intervenes about the youth with with some aspects of personal value.

2. Research Methodology
Significance of the study:
Youth are more optimistic about their ability to manage financial resources and they might give importance to the personal value, in this study we will come to know about this how far the youth people consider these things are labeled, unlabeled and we can also measure the important of these personal value based on their uniqueness.

Objectives of the study
1. To analyses the personal value of the respondents
2. To find out the relationship /Association between the selected socio demographic characteristics with regard to the personal value of the respondents.
3. To provide suitable suggestions for improving personal value

Hypotheses
✓ There is a significant association between socio demographic of the respondents with regard to personal value
✓ There is a significant relationship between age of the respondents with regard to their personal value
✓ There is a difference between the male and female of the respondents with regard to their personal value
✓ There is a association between the religion of the respondents with regard to their personal value
✓ There is a Relationship between family members of the respondents with regard to their personal value
✓ There is a difference between the types of family members of the respondents with regard to personal value
✓ There is a significant difference between male and female of the respondents with regard to personal value

Research design

* Research Scholar, PG and Research Department of Social Work, Bishop Heber College, Trichy -17.
** Associate Professor, PG and Research Department of Social Work, Bishop Heber College, Trichy – 17.
Initially from the 23 Arts and Science College, 3 Arts and Science College has been selected for this study based on the domicile like Rural, Urban and Semi Urban respectively. For the selection of the respective colleges simple random sampling (lottery method) has been adopted by the researcher. The selected respective colleges are Bishop Heber College from the domicile of Urban, Christhu Raj College from the domicile of Semi Urban and Government Arts and Science College from the domicile of rural area. In Bishop Heber College there are 142 Undergraduate final year students, In Christhu Raj College, there are 55 undergraduate final year students and in Government Arts and Science there are 49 undergraduate final year students hence it is considered to be the universe. The universe for the study is 246. In the second phase of the research, from the 3 respective colleges, i.e. (Bishop Heber College, Christhu Raj College and Government Arts and Science College), the researcher had selected the respondents from the Final year Under Graduate Students only who is pursuing currently in the Arts and Science College. After that, the researcher had selected 20 from the Arts Section and 20 from the Science Section. Hence the Sampling method for this study is Disproportionate Stratified random sampling method is adopted.

3. Analysis and Interpretation

Table 1 Demographical background of the respondents

<table>
<thead>
<tr>
<th>Demographic Background</th>
<th>Number of Respondents (n:120)</th>
<th>Percentage</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Age</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>19 Years</td>
<td>44</td>
<td>36.7</td>
</tr>
<tr>
<td>20 Years</td>
<td>66</td>
<td>55.0</td>
</tr>
<tr>
<td>21 Years</td>
<td>10</td>
<td>8.3</td>
</tr>
<tr>
<td><strong>Group</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Arts</td>
<td>61</td>
<td>50.8</td>
</tr>
<tr>
<td>Science</td>
<td>59</td>
<td>49.2</td>
</tr>
<tr>
<td><strong>Gender</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Male</td>
<td>53</td>
<td>44.2</td>
</tr>
<tr>
<td>Female</td>
<td>67</td>
<td>55.8</td>
</tr>
<tr>
<td><strong>Religion</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Hindu</td>
<td>72</td>
<td>60</td>
</tr>
<tr>
<td>Christian</td>
<td>39</td>
<td>32.5</td>
</tr>
<tr>
<td>Muslim</td>
<td>9</td>
<td>7.5</td>
</tr>
<tr>
<td><strong>Area</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Urban</td>
<td>52</td>
<td>43.3</td>
</tr>
<tr>
<td>Rural</td>
<td>47</td>
<td>39.2</td>
</tr>
<tr>
<td>Semi Urban</td>
<td>21</td>
<td>17.5</td>
</tr>
<tr>
<td><strong>College</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Bishop Heber</td>
<td>40</td>
<td>33.3</td>
</tr>
<tr>
<td>Christhu Raj</td>
<td>40</td>
<td>33.3</td>
</tr>
<tr>
<td>Government Arts</td>
<td>40</td>
<td>33.3</td>
</tr>
<tr>
<td><strong>Father’s Occupation</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Informal worker</td>
<td>57</td>
<td>47.5</td>
</tr>
<tr>
<td>Business</td>
<td>28</td>
<td>23.3</td>
</tr>
<tr>
<td>Formal Worker</td>
<td>35</td>
<td>29.2</td>
</tr>
<tr>
<td><strong>Father’s Annual Income</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>below 1 lakh</td>
<td>52</td>
<td>43.3</td>
</tr>
<tr>
<td>above 1 lakh</td>
<td>33</td>
<td>27.5</td>
</tr>
<tr>
<td>above 2 lakh</td>
<td>35</td>
<td>29.2</td>
</tr>
</tbody>
</table>
From the above table, that majority of the respondents (55%) belongs to the age of 20 years, (36.7%) of the
respondents belongs to the age of 19 and remaining( 8.3 %) of the respondents belongs to the age of 21, (50.8%) of
the respondents were belong to the group of Arts and the remaining (49.2%) of the respondents were belongs to the
Science Group, Majority of the respondents (55.8%) are female and (44.2%) of the respondents were male. Majority
of the respondents (60%) belongs to the religion of Hindu, (32.5%) of the respondents belongs to the religion of
Christian and remaining (7.5%) belongs to Muslim Religion. Nearly (43.3%) of the respondents residing at urban area,
(39.2%) of the respondents residing in rural area and remaining 17.5% of the respondents residing at semi urban area.
It is noted that equal number of respondents is seen from each college namely Bishop Heber College, Christhu Raj
College and Government Arts College, Majority of the respondents father’s occupation (47.5%) belongs to the
category of informal worker, Less than half (29.2%) of the respondents father’s occupation belongs to the category
of formal worker and remaining (23.3%) of the respondents father is having own business, majority of the respondents
father’s annual income (43.3%) is below a lakh, (29.2%) of the respondents father annual income is above 2 lakh and
(27.5%) of the respondents father annual income is above a lakh. (71.7%) of the respondents had their family members
below 3, (25%) of the respondents had the family members in the category between 4 to 7 and remaining (3.3%) of
the respondents had their family member above 8.

Table 2. Distribution of the respondents by the overall personal value

<table>
<thead>
<tr>
<th>Variable</th>
<th>Level</th>
<th>Frequency (n:120)</th>
<th>Percentage</th>
</tr>
</thead>
<tbody>
<tr>
<td>Over all Personal Value</td>
<td>Low</td>
<td>30</td>
<td>25</td>
</tr>
<tr>
<td></td>
<td>Average</td>
<td>57</td>
<td>47.5</td>
</tr>
<tr>
<td></td>
<td>High</td>
<td>33</td>
<td>27.5</td>
</tr>
</tbody>
</table>

From the above table 4.15 it is clearly inferred that (47.5%) of the respondents have average level of personal
value and (27.5%) of the respondents have high level of personal value and remaining (25%) of the respondents have
low level of personal value

Table 3. Relationship between age of the respondent with regard to their personal value

<table>
<thead>
<tr>
<th>Variables</th>
<th>Correlation value</th>
<th>Statistical Inference</th>
</tr>
</thead>
<tbody>
<tr>
<td>Age and Personal Value</td>
<td>0.035</td>
<td>p&gt;0.05, Not significant</td>
</tr>
</tbody>
</table>

The above table reveals that there is no significant relationship between the age of the respondents with
regard to their personal value.

Table 4. Difference between the male and the female of the respondents with regard to their personal value

<table>
<thead>
<tr>
<th>Gender</th>
<th>Mean (S.D)</th>
<th>Statistical Inference</th>
</tr>
</thead>
<tbody>
<tr>
<td>Male (n:53)</td>
<td>2.0943 (0.766)</td>
<td>Z = 0.929, p&gt;0.05, Not significant</td>
</tr>
<tr>
<td>Female (n:67)</td>
<td>1.9701 (0.695)</td>
<td></td>
</tr>
</tbody>
</table>

From the above analysis it is clearly seen that there is no significant relationship between the male and female
of the respondents with regard to their Personal Value

Table 5. Relationship between family members of the respondents with regard to their personal value

<table>
<thead>
<tr>
<th>Variables</th>
<th>Correlation value</th>
<th>Statistical Inference</th>
</tr>
</thead>
<tbody>
<tr>
<td>Family Members and personal value</td>
<td>0.066</td>
<td>p&gt;0.05, Not significant</td>
</tr>
</tbody>
</table>

From the above table it is observed that there is no significant relationship between family members of the
respondents with regard to their personal value
Table 6. Difference between the types of family members of the respondents with regard to their personal value

<table>
<thead>
<tr>
<th>Type of family members</th>
<th>Mean</th>
<th>S.D</th>
<th>Statistical Inference</th>
</tr>
</thead>
<tbody>
<tr>
<td>Nuclear (n:75)</td>
<td>2.000</td>
<td>0.771</td>
<td>Z = -0.485</td>
</tr>
<tr>
<td>Joint (n:45)</td>
<td>2.067</td>
<td>0.653</td>
<td>p&gt;0.05</td>
</tr>
</tbody>
</table>

From the above table it is observed that there is no significant difference between family members of the respondents with regard to their personal value.

Findings

✓ More than half (55%) of the respondents are in the group of 20 years.
✓ More than half (55.8%) of the respondents were male.
✓ More than half (50.8%) of the respondents belong to the group of arts.
✓ Majority (60.0%) of the respondents belongs to the religion of Hindu.
✓ Nearly half (43.3%) of the respondents resided at urban area.
✓ Nearly half (47.5%) of the respondents father’s work as informal worker.
✓ Nearly half (43.3%) of the respondents father earns below a lakh.
✓ Majority (71.7%) of the respondents have had a family members below 3.
✓ Majority (62.5%) of the respondents belong to the nuclear family.
✓ The finding indicates that less than half of the respondents (33.3%) were high level of personal values in the Muslim Religion, more than half of the respondents (55.6%) have average level of personal values in the Muslim Religion and less than half of the respondents (30.6%) have low level of personal value in the religion of Hindu.
✓ Nearly half (47.5%) of the respondents had average level of personal value, nearly less than (27.5%) of the respondents had high level of personal value and remaining respondents (25%) had low level of personal value.
✓ There is a no significant difference between the male and the female of the respondents with regard to their personal value.
✓ There is a significant difference between the male and female of the respondents with regard to their personal value.

4. Suggestion and Conclusion

Suggestion

✓ This study highlights the majority of the respondents experience average level of personal value. Self-awareness training program can be provided to them.
✓ The management can provide meeting for the Stake holders like Parents, Teachers, Mentors as they play vital role.
✓ Personal value plays an important role in the youth’s life. Programmes can be focused to the youth to build the personal value. Social work professional can provide counselling, guidance and training in this regards to develop the personal values.

Conclusion

The present study has tried to discover the level of Personal value. It is found that the overall personal value among the students the average level (47.5%) is higher when we compare with low(25%) and high(27.5%)
References
6. https://www.mantelligence.com/how-to-define-your-list-of-personal-values
Wellbeing among Women Living With HIV/AIDS in Puducherry

A. M. Laisamma*
Dr. B. Arun kumar**

Abstract
Globally, HIV/AIDS has become a major concern since mid-80. Since then, all the governments and other international organizations such as World Health Organization (WHO) is striving to control and reverse the rate of infection. In India too, efforts have been coordinated by the Ministry of Health and Family Welfare (MoHWF) through National AIDS Control Organization (NACO) to address the issues throughout India. NACO estimated that about 22 lakh people are infected with HIV virus in India by 2017 in varying age group, both men and women. The major mode of infection has been, as elsewhere in the world, unprotected heterosexual activities. The proposed study is analysing the wellbeing status of women living with HIV (WLHA) in the Puducherry district of Union Territory of Puducherry who are registered with the Anti-Retro Viral Therapy Centre (ARTC). The wellbeing is assessed in the context of physical, mental, social, emotional and spiritual sphere. This is important in the context of the fact that people infected with HIV/AIDS is highly discriminated socially and alienated from the mainstream of the society. The study also assessed how various variables such as physical, mental, social, emotional, and spiritual affect the overall wellbeing of the WLHA. 50 samples were selected using incidental sampling from WLHA who are registered with Puducherry ARTC within the age group of 18-59. A semi-structured interview schedule was used to collect primary data along with collection of relevant secondary data. Wellbeing Scale prepared by Jaggsharanbir Singh and Dr. Asha Gupta, (2001) was used to assess the state of wellbeing. Six case studies are conducted to reinforce the findings of the study.

Keywords: Wellbeing of Women Living with HIV/AIDS, pertaining to various dimension Physical, Mental, Social, Emotional and Spiritual, role of international organizations.

1. Introduction
HIV continues to be a major public health concern both globally and nationally. At the end of 2017, it is said that approximately 36.9 million people live with HIV and 1.8 million were newly infected. This explains that there is no place for complacency either globally or nationally to claim pride in its achievements. Every country is ambitiously trying its best to attain the goal of ending AIDS by 2030. The 22nd International AIDS Conference (AIDS 2018) highlighted the imbalance in the HIV response. It said that most regions are working on the treatment success; but it is more alarming to note that the world is facing a crisis over the prevention of 1.8 million newly infected HIV. It was also noticeable in the report that particularly adolescent girls and young women were found high in the new infected category especially from Saharan Africa.

India from its comments of HIV programme has taken significant efforts towards the prevention and treatment of HIV/AIDS. The recent National AIDS Control Organization (NACO) HIV estimation report highlight that in 2017, India had around 21.40 lakh people living with HIV (PLHIV) consisting 0.22% adults, around 87.58 thousand new HIV infections and 69.11 thousand reports of death. The report also presented the adult (15-49 years) estimated at 0.22% (0.16% - 0.30%) among males 0.25 % and among females at 0.19% in 2017. In the same year, women are accounted for 40% of annual new HIV infection. The report noted that though the national level HIV prevalence remains to be low, in certain regions and among groups the incidence stays high.

Women from the start of HIV epidemic have been disproportionately affected by the burden inflicted by the deadly disease. Today women remain more than half of the people who are infected with HIV/AIDS. HIV related illness claim to be the leading cause for the death of women especially at the reproductive age. Women and adolescent girls are unduly affected by HIV due to the unequal cultural, social and economic state. Lack of health care services coupled with social stigma make women more vulnerable to its impact. Limited access to education makes them susceptible to HIV; they may have less or no knowledge of the risks of HIV/AIDS and may enter into relationships that expose them to infection. Lack of education can also lead to early marriage and early HIV infection. Poverty and poor economic conditions make women extremely helpless to fight against and withstand the consequences of HIV.

* Ph.D Scholar, PG & Research Department of Social Work, Bishop Heber College, Tiruchirappalli
**Assistant Professor, PG & Research Department of Social Work, Bishop Heber College, Tiruchirappalli
Even after the strenuous efforts, HIV still stays as a fearful health hazard especially to the poor and the vulnerable of the nation. They are the victims of poverty and unemployment, and from migrants, truckers, coolies, illiterate and semi-literate and the unskilled labours.

Operational Definitions

Wellbeing is defined by the Oxford English dictionary as “the state of being comfortable, healthy, or happy.” Well-being is a subjective experience of overall life satisfaction with one’s current life situation (Campbell, Converse, & Rogers, 1976). Ryff’s early work (Ryff, 1989a) identified aspects that constitute wellbeing: autonomy, environmental mastery; positive relationship with others; purpose in life; realization of potential and self-acceptance. More recent research has placed different emphases on what wellbeing is: to fulfill goals (Foresight Mental Capital and Wellbeing Project, 2008). The Wellbeing Institute at the University of Cambridge defines wellbeing as ‘positive and sustainable characteristics which enable individuals and organizations to thrive and flourish’. World Health Organization, (WHO, 1952) emphasized optimal health as “a state of complete physical, mental and social wellbeing and not merely the absence of disease or infirmity.” Later in they also summed that spiritual wellbeing is as one dimension of wellbeing.

Wellbeing can be viewed in two dimensions: objective and subjective wellbeing. Objective wellbeing is more based on the assumptions about basic needs and rights, including adequate food, physical health, education, and safety. Whereas subjective/personal wellbeing is more concerned about how the person think and feel about own wellbeing which includes life satisfaction (evaluation), positive emotions, and meaningfulness in life. In 2008, the Economic Foundation identified five evidence – based actions people can adopt for their daily improvement of wellbeing: (known as the 5 ways to wellbeing), connect, be active, take notice, keep learning and give. It is a useful tool for individuals to think about the ways to improve their wellbeing.

WHO defined health as a state of complete physical, mental, social and spiritual wellbeing and not merely the absence of disease or infirmity (WHO, 1998). Smith (1973) theorized wellbeing as a concept measuring the objective life conditions of the population in general. Most social studies use the term ‘quality of life’ in conjunction or interchangeably with ‘wellbeing’ (Veenhoven, 1999; Cummins, 2000; Easterlin, 2007; Michalos, 2007; Oswald, 2007. According to Bradshaw, well-being has been defined as “Playing an active role in creating their well-being by balancing different factors, developing and making use of resources and responding to stress.” Shin and Johnson (1978) have defined wellbeing as a form of happiness as “a global assessment of a person’s quality of life according to his own chosen criteria.”

Need and Importance

Women’s health is a significant factor that contributes to human wellbeing and economic growth. Women consistently suffer the cause and consequences of HIV. Despite the progress made in many aspects globally and nationally on the response to end HIV, women still experience inequality and discrimination more than their counter part. The physical vulnerability limit women their choices to opportunities, information, health care services, education and employment. Women’s dependencies at various levels keep them powerless and voiceless in the process of decision making and opinion seeking.

HIV/AIDS can be said as a medical as well as social problem. One of the major problems or challenges faced by the women living with HIV is their subservient position in a patriarchal system. Consequently, women have lesser control over their own physical conditions and protective power over their bodies. Women are often blamed for their HIV status, while they are the victims of infection through their husbands or partners. Most women know little about their own bodies, pregnancy, contraception and sexually transmitted diseases. This lack of knowledge inflicts the women more vulnerable and in turn they are prone to the infection. UNAIDS report (2018) quoted NACO affirms that 87 percent route of HIV transmission in India occur through heterosexual sex.

In the given context, the wellbeing of women becomes a very big challenge. Wellbeing is defined by the Oxford English Dictionary as “the state of being comfortable, healthy, or happy.” HIV is a shocking and worrying experience for most of the people. Moreover being a dreadful ill coined with stigma and discrimination make it even worse for the HIV infected women. This fatal disease changes the attitude of people towards their physical, mental, social, emotional and spiritual wellbeing. The infection of HIV itself affects the overall wellbeing of people. The physical symptoms, mental tensions, social impact, emotional insecurity, spiritual imbalance and economic hardship take a toll on the individual’s general wellbeing. Researchers are becoming more alert on the importance of wellbeing especially
among people living with HIV. With early detection of HIV infection and initiation of antiretroviral treatment, the HIV infected persons are able to live longer. Individuals with HIV/AIDS undergo various challenges to balance their overall wellbeing and it is highly essential to have researches on the varied dimensions of wellbeing.

The study would also give insights and new understanding of women living with HIV pertaining to their wellbeing. It will give way for the WLHA to share about their personal concerns, hardship and suffering.

The present study explore the wellbeing of WLHA registered with the ART Centre in Puducherry in the context of physical, mental, social, emotional and spiritual sphere. It is to measure the physical, mental, social, emotional and spiritual wellbeing of WLHA. The study findings would facilitate the health providers, NGOs, facility centers, ARTC and the government / policy makers to formulate adequate ways of intervention to provide support to the HIV/AIDS persons to enhance their wellbeing.

2. Materials and methods

Aim of the study

The overall aim of the study is to explore the wellbeing of Women Living with HIV/AIDS in Puducherry Union Territory.

Objectives

The aim of the study is to measure different dimensions of wellbeing among women living with HIV in Puducherry, namely; physical, mental, social, emotional, and spiritual.

1. To study the socio-demographic characteristics namely; personal histories, social situations, economic conditions, and support system and its influence on the wellbeing of WLHA.

2. To determine the difference between the ages, marital status, occupation, stages of HIV infection, treatment adherence and family support on the wellbeing of women living with HIV in Puducherry.

3. To study the negative factors that curtails the wellbeing of WLHA in Puducherry with reference to stigma and discrimination.

Research Hypotheses

1. The wellbeing differs between the marital status of WLHA (single/widowed/divorced/separated) and those living with their husbands.

2. There is a significant relationship between the age of the respondent and their wellbeing.

3. There is a significant difference between the wellbeing of women who receives support and those who do not receive support

4. There is significant relationship between the year of HIV infection of the respondents and their wellbeing.

5. There is a significant difference between the educational qualification and wellbeing of the respondents

6. There is a significant relationship between the income of the respondents and their wellbeing

Geographical Coverage

The study was confined to Puducherry district.

Universe and Sampling

Women living with HIV/AIDS, within the age group of 18 and 59 years, residing in Puducherry and registered with the ARTC Puducherry was included in the study. Secondary data collected mainly from the Government ART Centre, Puducherry and Pondicherry AIDS Control Society.

Tools for data collection

Following tools were used to collect data.

a) Semi-Structured Interview Schedule was used to collect background and other related information from the respondents.

b) Wellbeing Scale prepared by Jagsharanbir Singh and Dr. Asha Gupta, (2001) was applied to find the wellbeing. The scale consists of five sub-scale namely; physical wellbeing, mental wellbeing, social wellbeing, emotional wellbeing and spiritual wellbeing. Each sub-scale has ten items and there are 50 items in total. Scores on all the sub-scale added up to get a composite score as total wellbeing. Minimum and maximum score can be 50 and 250 respectively. It consists of 29 positive items and 21 negative items.

Data Collection

Prior permission was obtained from Pondicherry AIDS Control Society (PACS) and Anti Retroviral Treatment Centre (ARTC). Puducherry and consent from the respondents was received to carry out the study.
Table 1. Age Group

<table>
<thead>
<tr>
<th>Age Group (in years)</th>
<th>No. of Respondents (n: 50)</th>
<th>Percentage</th>
</tr>
</thead>
<tbody>
<tr>
<td>Below 20</td>
<td>1</td>
<td>2.0</td>
</tr>
<tr>
<td>21-30</td>
<td>10</td>
<td>20.0</td>
</tr>
<tr>
<td>31-40</td>
<td>16</td>
<td>32.0</td>
</tr>
<tr>
<td>41-50</td>
<td>20</td>
<td>40.0</td>
</tr>
<tr>
<td>51-60</td>
<td>3</td>
<td>6.0</td>
</tr>
</tbody>
</table>

The above table shows that most (40%) of the respondents belong to the age group of 41 to 50. The remaining (32%) come under the age group of 31 to 40 and 20 percent in the age of 21 to 30. Only 3 respondents found to be in the age group of above 50 years and one respondent is below the age of 20. This also indicate that majority of the women get infected with HIV during their reproductive stage.

Table 2. Religion

<table>
<thead>
<tr>
<th>Religion</th>
<th>No. of Respondents (n: 50)</th>
<th>Percentage</th>
</tr>
</thead>
<tbody>
<tr>
<td>Hindu</td>
<td>40</td>
<td>80.0</td>
</tr>
<tr>
<td>Christian</td>
<td>8</td>
<td>16.0</td>
</tr>
<tr>
<td>Muslim</td>
<td>2</td>
<td>4.0</td>
</tr>
</tbody>
</table>

With regard to the religious background of the respondents, the above table shows that a vast majority (80%) of the respondents are Hindus, a considerable proportion (16%) of them were found to be Christians while Muslims constitute a meagre percentage (4%).

Table 3. Income of the respondents and their General Wellbeing

<table>
<thead>
<tr>
<th>Income</th>
<th>No. of Respondents (n: 50)</th>
<th>Percentage</th>
</tr>
</thead>
<tbody>
<tr>
<td>No Income</td>
<td>3</td>
<td>6.0</td>
</tr>
<tr>
<td>1000 -3000</td>
<td>28</td>
<td>56.0</td>
</tr>
<tr>
<td>3001 - 6000</td>
<td>10</td>
<td>20.0</td>
</tr>
<tr>
<td>6001 - 9000</td>
<td>6</td>
<td>12.0</td>
</tr>
<tr>
<td>10000 and above</td>
<td>3</td>
<td>6.0</td>
</tr>
</tbody>
</table>

The table describes the income of the respondents. It shows that vast majority of the respondents come under the lower income strata having a monthly income of Rs. 1000 to 6000. Very few claimed to have an income between Rs. 6000 to 9000 and hardly 6% of the respondents earned a monthly income which is little higher than the others. The other 6% had no income of their own. The finding deducts that major portion of the HIV infected persons come from a very poor economic backward and most of them struggle to meet their daily needs. For some of them the PLHIV pension/ widow pension is the only means of their income.

Table 4. Marital Status

<table>
<thead>
<tr>
<th>Marital status</th>
<th>No. of Respondents (n: 50)</th>
<th>Percentage</th>
</tr>
</thead>
<tbody>
<tr>
<td>Married</td>
<td>16</td>
<td>32.0</td>
</tr>
<tr>
<td>Unmarried</td>
<td>4</td>
<td>8.0</td>
</tr>
<tr>
<td>Widow</td>
<td>27</td>
<td>54.0</td>
</tr>
<tr>
<td>Other</td>
<td>3</td>
<td>6.0</td>
</tr>
</tbody>
</table>

Table 4 reveals that more than half (54%) of the respondents are widows, nearly one-third (32%) of them are living with husband and family whereas unmarried respondents constitute 8% and rest (3%) of them were under the categories of live-in relationships, separated and divorced.
Table 5. Occupation of the respondents

<table>
<thead>
<tr>
<th>Occupation</th>
<th>No. of Respondents (n: 50)</th>
<th>Percentage</th>
</tr>
</thead>
<tbody>
<tr>
<td>House wife</td>
<td>12</td>
<td>24.0</td>
</tr>
<tr>
<td>Coolie</td>
<td>13</td>
<td>26.0</td>
</tr>
<tr>
<td>Domestic worker</td>
<td>7</td>
<td>14.0</td>
</tr>
<tr>
<td>Own work</td>
<td>5</td>
<td>10.0</td>
</tr>
<tr>
<td>Other</td>
<td>11</td>
<td>22.0</td>
</tr>
</tbody>
</table>

The table shows that majority of the respondents earn their living from unskilled labour such as coolie, domestic work and petty business. Only 22% of the respondents are working as skilled labour as counselors, computer operators, special educators and field staffs.

Table 6. Reason for HIV diagnosis of the Respondents

<table>
<thead>
<tr>
<th>Reason for HIV Diagnosis</th>
<th>No. of Respondents (n: 50)</th>
<th>Percentage</th>
</tr>
</thead>
<tbody>
<tr>
<td>Spouse Positive</td>
<td>23</td>
<td>46.0</td>
</tr>
<tr>
<td>Pregnancy Test</td>
<td>9</td>
<td>18.0</td>
</tr>
<tr>
<td>Parents Positive</td>
<td>2</td>
<td>4.0</td>
</tr>
<tr>
<td>Sexual Abuse</td>
<td>3</td>
<td>6.0</td>
</tr>
<tr>
<td>Opportunistic Infection</td>
<td>9</td>
<td>18.0</td>
</tr>
<tr>
<td>Other</td>
<td>4</td>
<td>8.0</td>
</tr>
</tbody>
</table>

The most frequently found reason for the HIV diagnosis of the respondents is that their spouse is already HIV positive (46%). The other major reasons were pregnancy test (18%) and opportunistic infection (18%). It is inferred that majority of the women who are infected with HIV suffer the cause of the deadly disease due to the infidelity of their spouse. Very often women had to face double burden and responsibility because of the untimely death of their husband. The twofold stigma and burden of the family care makes the lives of the women inexhaustible.

Table 7. Support Received

<table>
<thead>
<tr>
<th>Support Received</th>
<th>No. of Respondents (n: 50)</th>
<th>Percentage</th>
</tr>
</thead>
<tbody>
<tr>
<td>Husband</td>
<td>8</td>
<td>16.0</td>
</tr>
<tr>
<td>Family</td>
<td>15</td>
<td>30.0</td>
</tr>
<tr>
<td>Nil</td>
<td>15</td>
<td>30.0</td>
</tr>
<tr>
<td>Other</td>
<td>12</td>
<td>24.0</td>
</tr>
</tbody>
</table>

The study found that 30% of the respondents receives support from the family. 24% receives support from the relatives, NGOs, friends and neighbours. Among the respondents 16% receives exclusive support from their husbands and the rest of the majority 30% do not receive any significant support from any source. It is found that the widows are the ones who do not get any support because they have children either small, students or married. Therefore the sole earning person is the woman and if they are unable to go for a day’s work then the whole family go without food. Many of them have some debts which is a liability on them because they borrowed from the money lender at the time of needs.

Table 8. Welfare Schemes availed by the respondents

<table>
<thead>
<tr>
<th>Welfare Schemes</th>
<th>No. of Respondents (n: 50)</th>
<th>Percentage</th>
</tr>
</thead>
<tbody>
<tr>
<td>PLHIV Pension</td>
<td>19</td>
<td>38.0</td>
</tr>
<tr>
<td>Widow Pension</td>
<td>15</td>
<td>30.0</td>
</tr>
<tr>
<td>Old age Pension</td>
<td>1</td>
<td>2.0</td>
</tr>
<tr>
<td>Not availing any schemes</td>
<td>15</td>
<td>30.0</td>
</tr>
</tbody>
</table>
The majority of the respondents have availed welfare scheme. 38% of them have obtained the recently introduced PLHIV pension from the Government. The other category of welfare scheme availed by the respondents are widow pension (30%). It is also noticeable that 30% of the respondents have not availed any of the schemes.

Table 9. Respondents’ decision to live

<table>
<thead>
<tr>
<th>Decision to live</th>
<th>No. of Respondents (n: 50)</th>
<th>Percentage</th>
</tr>
</thead>
<tbody>
<tr>
<td>Considering the future of children</td>
<td>37</td>
<td>74.0</td>
</tr>
<tr>
<td>Considering life A challenge</td>
<td>6</td>
<td>12.0</td>
</tr>
<tr>
<td>Faith in God</td>
<td>3</td>
<td>6.0</td>
</tr>
<tr>
<td>With Desire to live</td>
<td>4</td>
<td>8.0</td>
</tr>
</tbody>
</table>

Majority of the respondents (74%) wants to live for the sake of their children, even though at the time of knowing the status of HIV, they were very frustrated, and even had the mind to end their lives but thinking of the innocence and the future of the children made the women to accept the status and take the responsibility to live. Other expressed views of the respondents (12%) to face the challenge, (6%) faith in God, (8%) desire to live like everyone gives them the courage to keep going.

Table 10. Mean score of the different dimensions of general well being

<table>
<thead>
<tr>
<th>Dimensions</th>
<th>N</th>
<th>Mean</th>
<th>SD</th>
</tr>
</thead>
<tbody>
<tr>
<td>Physical Well being</td>
<td>50</td>
<td>38.08</td>
<td>6.76</td>
</tr>
<tr>
<td>Mental Well being</td>
<td>50</td>
<td>36.22</td>
<td>8.76</td>
</tr>
<tr>
<td>Social Well being</td>
<td>50</td>
<td>36.34</td>
<td>5.81</td>
</tr>
<tr>
<td>Emotional Well being</td>
<td>50</td>
<td>34.78</td>
<td>7.41</td>
</tr>
<tr>
<td>Spiritual Well being</td>
<td>50</td>
<td>39.98</td>
<td>6.49</td>
</tr>
<tr>
<td>Overall Wellbeing</td>
<td>50</td>
<td>185.40</td>
<td>27.83</td>
</tr>
</tbody>
</table>

The table shows the descriptive analysis of the general wellbeing of women living with HIV/AIDS and its sub-factors. The analysis reveals that mean score of general wellbeing is 185.4 and SD of 27.83. The mean score of subscale Physical Wellbeing is (38.08) and SD is (6.76). For the sub scale Mental Wellbeing, the mean score found to be (36.22) with SD (8.76). The scores of the sub scale Social Wellbeing mean score is (36.34) and SD is (5.81). The values of Emotional Wellbeing subscale mean score is (34.78) and SD is (7.41). The scores on the sub dimension Spiritual Wellbeing the mean score found to be (39.98) and SD shown as (6.49). It can be inferred that while spiritual wellbeing and physical wellbeing of the respondents are shown rather high compared to other subscales which means that these two dimensions depend mostly on the individual’s personal concern. Whereas the mental, social and emotional wellbeing is very much associated with others. Though they get support and acceptance from the close circle of the family; fear of rejection, stigma and discrimination still curtail their freedom of disclosure. The attitude of the larger society pertaining to HIV/AIDS continue to remain as a challenge to the people living with HIV/AIDS.

Table 11. Level of General Wellbeing

<table>
<thead>
<tr>
<th>Level of Wellbeing</th>
<th>No. of Respondents (n: 50)</th>
<th>Percentage</th>
</tr>
</thead>
<tbody>
<tr>
<td>Low</td>
<td>2</td>
<td>4.0</td>
</tr>
<tr>
<td>Average</td>
<td>25</td>
<td>50.0</td>
</tr>
<tr>
<td>High</td>
<td>23</td>
<td>46.0</td>
</tr>
</tbody>
</table>

The table discusses the level of the general wellbeing of women living with HIV/AIDS. It is found that 50 % of the respondents are having average general wellbeing. The next group of respondents is having high wellbeing (46%) and only few numbers (4%) are having low wellbeing. The range of general wellbeing was found as 113, the minimum score of wellbeing show as 122 and the maximum score found to be 235.

Hypothesis 1
To test the difference between the marital status and wellbeing
H0: There is no significant difference between the marital status and wellbeing
H1: There is a difference between the marital status of WLHA (single, widowed, divorced, separated) and those living with their husbands

Table 12. Difference between Married and other Respondents with regard to their General Wellbeing

<table>
<thead>
<tr>
<th>S. No.</th>
<th>Marital Status</th>
<th>N</th>
<th>Mean</th>
<th>SD</th>
<th>Statistical Inference</th>
</tr>
</thead>
<tbody>
<tr>
<td>1.</td>
<td>Married</td>
<td>16</td>
<td>194.8125</td>
<td>27.22552</td>
<td>t=1.670</td>
</tr>
<tr>
<td>2.</td>
<td>Unmarried and others</td>
<td>34</td>
<td>180.9706</td>
<td>27.39883</td>
<td>df=48</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>P&gt;0.05 Not Significant</td>
</tr>
</tbody>
</table>

The results of the t test shows that t (48)=1.670, and p=0.101. Since the p value is greater than 0.05, the null hypothesis is accepted and the research hypothesis is rejected. Thus, there is no significant relationship between marital status and wellbeing of WLHA. In the present study, the women living with husband and others (widow/single/divorced/separate) do not show much difference in their wellbeing.

Hypothesis 2
To test the relationship between age and wellbeing
H0: There is no significant relationship between the age and wellbeing of WLHA
H1: There is a significant relationship between the age and wellbeing of WLHA

Table 13. Relationship between Respondents’ Age and General Wellbeing

<table>
<thead>
<tr>
<th>Variables</th>
<th>Correlation Value</th>
<th>Statistical Inference</th>
</tr>
</thead>
<tbody>
<tr>
<td>Age Vs General Wellbeing</td>
<td>(-0.021)</td>
<td>P&gt;0.05 Not Significant</td>
</tr>
</tbody>
</table>

The above table shows that the P value is (0.885), which is greater than (0.05). Therefore, the null hypothesis is accepted. Hence, there is no relationship found between age of the respondents and their wellbeing (r = -0.021)

Hypothesis 3
To test the difference between support received and wellbeing
H0: There is no significant difference between support received and wellbeing of WLHA
H1: There is a significant difference between support received and wellbeing of WLHA

Support received and the wellbeing of the respondents

Table 14. Difference between the support received and general wellbeing

<table>
<thead>
<tr>
<th>Living Arrangements</th>
<th>N</th>
<th>Mean</th>
<th>SD</th>
<th>Statistical Inference</th>
</tr>
</thead>
<tbody>
<tr>
<td>Living with Husband</td>
<td>8</td>
<td>210.2500</td>
<td>16.52487</td>
<td>F= 4.757</td>
</tr>
<tr>
<td>Living with Family</td>
<td>15</td>
<td>190.2667</td>
<td>23.76813</td>
<td>df=49</td>
</tr>
<tr>
<td>Living Alone</td>
<td>15</td>
<td>170.0000</td>
<td>28.82211</td>
<td>P&gt;0.05</td>
</tr>
<tr>
<td>Living with Others</td>
<td>12</td>
<td>182.0000</td>
<td>26.17077</td>
<td>Significant</td>
</tr>
</tbody>
</table>

Result of the t test shows that t(49) = 4.757, and the p= 0.006. Since the p value is less than 0.05, the null hypothesis is rejected and the research hypothesis is accepted. Therefore, there is a significant relationship between the support received and their general wellbeing. The general wellbeing of the respondents who receive support from husband, family and others seems to have a better wellbeing having a mean value of (210.25, 190.26, & 182), comparing to the ones who do not receive support from anybody having a mean score of (170).

Hypothesis 4
To test the relationship between HIV detection and wellbeing
H0: There is no significant relationship between HIV detection and wellbeing of WLHA
H1: There is a significant relationship between HIV detection and wellbeing of WLHA
Table 15. Relationship between HIV detection and respondents’ general wellbeing

<table>
<thead>
<tr>
<th>Variables</th>
<th>Correlation Value</th>
<th>Statistical Inference</th>
</tr>
</thead>
<tbody>
<tr>
<td>Year of HIV detection Vs General Wellbeing</td>
<td>(-)0.028</td>
<td>P=0.845</td>
</tr>
<tr>
<td></td>
<td></td>
<td>P&gt;0.05</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Not Significant</td>
</tr>
</tbody>
</table>

The table represents the correlation between the year of HIV detection and the wellbeing of the respondents. The P value is 0.845, which is greater than 0.05. So, the null hypothesis is accepted. Hence there is no relationship between year of HIV detection of the respondents and their wellbeing (r = -0.028).

Hypothesis 5
To test the difference between educational qualification and wellbeing
H0: There is no significant difference between educational qualification and wellbeing of WLHA
H1: There is a significant difference between educational qualification and wellbeing

Table 16. Difference between the educational qualification and general wellbeing

<table>
<thead>
<tr>
<th>Education</th>
<th>N</th>
<th>Mean</th>
<th>Std. Deviation</th>
<th>Statistical Inference</th>
</tr>
</thead>
<tbody>
<tr>
<td>Illiterate</td>
<td>6</td>
<td>169.0000</td>
<td>28.59371</td>
<td>F= 0.954</td>
</tr>
<tr>
<td>Primary</td>
<td>13</td>
<td>187.9231</td>
<td>34.95822</td>
<td>df=49</td>
</tr>
<tr>
<td>High School</td>
<td>19</td>
<td>185.2632</td>
<td>23.84171</td>
<td>P&lt;0.05</td>
</tr>
<tr>
<td>Higher Secondary</td>
<td>6</td>
<td>199.6667</td>
<td>22.43806</td>
<td>Not Significant</td>
</tr>
<tr>
<td>Diploma/Degree</td>
<td>6</td>
<td>182.5000</td>
<td>26.47829</td>
<td></td>
</tr>
<tr>
<td>Total</td>
<td>50</td>
<td>185.4000</td>
<td>27.83919</td>
<td></td>
</tr>
</tbody>
</table>

The result of ANOVA test shows that (F=.954), and (p=0.442). Since the p value is greater than 0.05, the null hypothesis is accepted and the research hypothesis is rejected. Hence it is found that there is no significant difference between educational qualification of the respondents and wellbeing. The mean score of the illiterate respondent is 169 and the mean score of the degree/ diploma holder is 182.5.

Hypothesis 6
To test the relationship between monthly income and general wellbeing
H0: There is no significant relationship between monthly income and wellbeing of WLHA
H1: There is a significant relationship between monthly income and wellbeing of WLHA

Table 17. Relationship between monthly income and general wellbeing

<table>
<thead>
<tr>
<th>Variables</th>
<th>Correlation value</th>
<th>Statistical Inference</th>
</tr>
</thead>
<tbody>
<tr>
<td>General Wellbeing Vs Monthly Income</td>
<td>.124</td>
<td>P=0.392</td>
</tr>
<tr>
<td></td>
<td></td>
<td>P&gt;0.05</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Not Significant</td>
</tr>
<tr>
<td>N</td>
<td>50</td>
<td></td>
</tr>
</tbody>
</table>

The table signifies the correlation between monthly income and the wellbeing of the respondents. The P value is 0.392, which is greater than 0.05. Hence, the null hypothesis is accepted and there is no relationship found between the monthly income of the respondents and their general wellbeing (r = -0.124), therefore the research hypothesis is rejected.

Discussion
In the present investigation, the demographic profile of age, religion, marital status, educational qualification, occupation, monthly income, disease history, family support, and various dimensions of wellbeing with regard to physical, mental, social, emotional and spiritual level were tested. Majority of the respondents belonged to Hindu religion between the age of 31-50. The marital status of the respondents showed that 54% of them were widows. The disease history revealed that majority of women got infected with HIV from their husbands. It was also found that vast majority of the respondents belonged to a lower income category of families with an income below Rs. 10,000/-
The results of the study showed that the wellbeing of women living with HIV/AIDS with the given sample highlighted no significant difference between the marital statuses of the ones living with husband and others either unmarried/widow/ separated/divorced. The age of the respondents and the wellbeing also had no significant relationship. The study found significant difference between support received from husband, family, and others with reference to wellbeing, comparing to the ones who do not receive support from anybody. The year of HIV detection (the longer the HIV infection) and the wellbeing found no significant relationship. Significant difference is not found between the educational qualification of the respondents and wellbeing. Because only handful of them seemed to be qualified with degree or diploma, whe as majority of them studied up to upper primary and high school. Therefore, these findings prove that wellbeing significantly does not depend on the given situation but rather it is the capacity of the individuals that keep their wellbeing high, average or low.

The wellbeing of women living with HIV/AIDS and its sub-factors show mean score of general wellbeing as 185.4. Among the sub-scales the score of spiritual wellbeing found to be higher than the other sub-scales with a minimum score variation with that of the physical wellbeing sub-scale. The spiritual strategies used by the respondents to maintain their wellbeing; spend time in prayer, go to church/ temple and trust God. A study by David R. Hedge, Jini L. Roby (2010) with a sample of 162 women with HIV/AIDS found that for 85% of them spirituality played rather good role in their lives while for the other 43% spirituality was the major factor for their coping. This result signifies that the HIV infection in itself do not curtail the wellbeing of people. A cross country data drawn from 21 countries in South Central and South East Asia by Gafart T et. al (2010) indicated that there was no significant impact on the prevalence of HIV/AIDS on the wellbeing. Among the other sub-scales the emotional wellbeing was found to be quite less compared to mental and social wellbeing scales. It could be inferred that physical and spiritual wellbeing is much linked to personal effort rather than an outside support therefore they are able strike a balance in these two dimensions of wellbeing. Whereas the other dimensions are much related to other dependent factors, such as family, society, and the circumstances in which they are living. Even though they desire to remain happy, courageous and manage their day to day affairs confidently at the deepest level they bear the burden of the HIV infection. Most often the fear of stigma & discrimination press them down; hesitant to go for functions, very cautious in the public and specially while visiting the ARTC for treatment. The ART and treatment adherence enable the infected persons to maintain their physical wellbeing. Though the daily struggles of meeting the needs are a challenge, the given support from husband, family, children and others sustain them to live for their children and their future. A study conducted in Brazil by Samyla Ceto & Maria (2016) revealed that people with HIV/AIDS perceive religion as a source of support. Religion contributes spiritual, mental and physical strength to face the hardships imposed by HIV. Regardless of religion, majority of the respondents expressed their deep realization of the power of God in their lives. They believe that the simple faith in their God and the humble prayer they raise to their Creator gives them the strength to manage their day-to-day life.

4. Conclusion

The aim of the study was to measure the different dimensions of wellbeing (physical, mental, emotional, social and spiritual) of women living with HIV in Puducherry in the context of socio- demographic situations. The study sample was of 50 WLHA from Puducherry taking treatment from the government ARTC. This study represented only a portion of the entire population, and was narrowed down only to women and therefore the results cannot be applied to the entire population. The study revealed that the overall general wellbeing of women living with HIV is rather high. The women who received support from husband, family and others performed better in their wellbeing than the ones who did not receive any support. It showed that the acceptance of the status, support from others, regular treatment and the determination to live for the sake of their children sustain them to go forward. A future study could be conducted with men and women pertaining to their wellbeing with the same population to get better findings in the same sphere. The sample size of the study could also be increased to have better results.

Acknowledgements

The authors would like to acknowledge the support of many who had helped us in completing this study. First of all, we are grateful to the women living with HIV in Puducherry who have spent considerable time in answering the questions; they were very cooperative and helpful. We are also grateful to officials of ART Centre,
Puducherry and Pondicherry AIDS Control Society for providing all data required for the study. We are grateful to the HoD of Social Work Department, Bishop Heber College, Tiruchirapally for all professional support. We are also thankful to the professors and the scholars of Pondicherry University for their valuable contribution in finalizing this study.

References
10. Samyla Ceto P., Maria Luerana Fiuza, Gilmara Holanda at.al (2016) Social Support for people living with Acquired Immunodeficiency Syndrome, Brazil.