CHAPTER – II

REVIEW

OF

LITERATURE
Grant (1939) studied pre-school children, and stated that a calm, happy home life appears to be related positively with the child's security, his cooperativeness and ability to plug with the group and tends to be negatively correlated with nervous habits and sadistic behaviour.

Dhalival's; (1971) found that factors like security feeling, Home, school and emotional adjustment correlate significantly with academic performance.

Kudermann (1975) conduct a study on the psychological needs of a group of 600 orphan children and concluded that they are deprived in their affection and security needs. A well loved child is generally eager to participate in some responsible way.

Brodzinsky, Schechter and Brodzinsky (1986) found that children therefore are at risk of growing up with unresolved negative emotion which are often expressed with anger and depression. adult may also experience negative emotion in times of bereavement, but unlike children, adult have the intellectual ability, life experience and emotion support that enable them to control their anger and depression.

Jacobson (1987) investigated the common usage of the term “job insecurity”. He found four situations that serve as the basis for job insecurity: external threat imposed by forces outside the organization, unpredictable difficulties within the organization, role ambiguity, and disruptions in routines.
Reddy (1989) conducted a study on behavioural problems of orphans revealed that one third of the institutionalised children manifested one or other behaviour disorders. The most prevalent problems were aggressive, conduct disorders, adolescent adjustment problems, stealing, lying and taunting. The features of depression, affectionless character and anxiety feature were noticed among a few.

Daiva (1990) examined in one study the faces pain scale incorporates conventions used by children, has achieved strong agreement in the rank ordering of pain, has indications that the intervals are close to equal, and is treated by children as a scale. The test-retest data suggest that it may prove to be a reliable index over time of self-reported pain.

Barnett, Marshall, & Pleck (1992) found that men who had greater emotional involvement with their children experienced that relationship as a buffer against stress stemming from their paid-work lives Support from home also provided some buffering from general life dissatisfaction, and marriage in particular has been identified as a source of support, with marital role quality acting as a significant predictor of men’s psychological distress.

Wilson, Larson, & Stone, (1993) examined emotional and physical health outcomes for employees directly experiencing job insecurity and the outcomes for their spouses. The data indicated that the impact of job insecurity is as great for the employee’s spouse as it is for the employee.

Heaney, Israel, & House, (1994) in a study observed the chronic and debilitating health effects of job insecurity. In an investigation of 207 auto workers, longitudinal responses showed that physical symptom logy increased over a 13 month period of job insecurity, while job satisfaction decreased.
Kupers, (1996) observed intervention and counselling strategies to help job-insecure individuals has proposed a cycle of failure, shame, withdrawal, and depression which may prevent men from effectively being able to reach out and seek help upon a job loss.

Barling & Kelloway (1996) investigated the relationship between perceived job insecurity and various personal and organizational outcomes. Utilizing a sample of 187 South African gold miners, researchers found that job insecurity was positively associated with workers intentions to leave their jobs as well as negative mood and blood pressure. Additionally, the interaction between job insecurity and workplace control was found to be significantly associated with blood pressure. The authors use their study to caution readers that job insecurity appears to have negative outcomes for both employees and employers.

Catalono, Novaco, & McConnell, (1997) found that Anger’s relationship to such events as workplace difficulties (ie. violence) and personal difficulties (ie. relationships with partners or children) has been well-documented, but has not generally been investigated in relation to job insecurity outcomes.

Rosenblatt, Talmud, & Ruvio, (1999) investigated that men may also show preferences for job security related to financial outcomes whereas female workers demonstrate concern over both financial aspects and other elements of the job, such as benefits or work environment.

Karen and Ricky (1999) stated that Health and well-being in the workplace have become common topics in the mainstream media, in practitioner-oriented magazines and journals and, increasingly, in scholarly research journals. In this article, we first review the literature that serves to define health and well-being. We then discuss the primary factors associated with health and well-being, the
consequences of low levels of health and well-being, and common methods for improving health and well-being in the workplace. Finally, we highlight important future directions for future theory, research, and practice regarding health and well-being from an organizational perspective.

Dooley, Prause, & Ham-Rowbottom, (2000) found that significant increases in levels of depression have been found for individuals experiencing transition to inadequate employment or total job loss, despite such mediating effects as income, job satisfaction, and marriage.

Smithson & Lewis, (2000) examined the status of the psychological contract after several years of relatively global job insecurity. Results indicated that younger workers (aged 18-30) recognize both job and employment insecurity as factual, but fail to expect employer fulfillment of a psychological contract in the manner in which older employees may. That is, although job insecurity continues to be a concern for workers at all stages of employment, the youngest workers appear to perhaps best recognize the volatility of the employment market.

Grunberg, Moore, & Greenberg, (2001) investigated the impact of various types of contact with layoffs upon physical and psychological well-being. Four levels of exposure to layoffs, ranging from direct contact (being laid off and rehired), indirect contact (receiving a warning but not having been laid off or knowing friends or coworkers who have been laid off) to no contact, have been identified in the literature, and examined for relevance to job insecurity, health, and depression. The subjects in this investigation were 2,279 blue and white collar workers employed during a five year period of intensive layoffs in a U. S. manufacturing plant. The majority of participants were male (76%) and Caucasian (86%) and were reflective of the overall plant population. Tests for between group differences revealed that
individuals who have no contact with victims of a layoff fare significantly better with regard to perception of job security, levels of depression, and general health than any of those who have been laid off and rehired, have experienced a warning of possible layoff, or who survived a layoff at their place of employment without threat. Similarly, individuals who have had indirect contact fare still better than those in the direct contact group.

Marilyn, Janet, Bradles, Chery and Suzanne (2001) studied that food insecurity had an unexpected and paradoxical association with overweight status among women with a higher prevalence of overweight among the food insecure, and a resulting potential for increased incidence of obesity-related chronic diseases.

Sverke, Hellgren, & Naswall, (2002) found that the previous job insecurity have focused on depressive outcomes and have been quite successful in establishing causal relationships between insecurity and increased depression; therefore, the current study made the decision to depart from the primary established psychological outcome of depression and turn to an investigation of anger which has established connections to the personal experiences of unemployment and work difficulties as well as having significant implications for life-away-from-work.

Makama and Ani et.al. (2002) used a scale based on the Rand Inventory and items from the Beck Depression inventory, and found increased internalising problems and suicidal ideation in orphans (n = 41) compared with non-orphans (n = 41).

Makame and Ani et.al. (2002) compared 41 orphans age between 10 and 14 and non–orphan. The orphan scored significantly higher or the applied internalizing problem scale measuring mood, pessimism, somatic symptoms, sense of failure, anxiety, positive affect, emotional ties and suicidal tendencies than non-orphan.
Makaya, Mboussou, Bansimba, Ndiya, Latifou et al. (2002), conduct a study on orphans, and found 20% experiencing psychological difficulties, including depression, anxiety and irritability (34%), fugue, offending and hyperactivity (27%), and PTSD (39%).

Manuel P. (2002) found orphans (n = 76) more likely than controls (n = 74) to be depressed and bullied, and less likely to have a trusted adult or friend. Carers of orphans showed more depression and less social support.

Kim, and Drolet. (2003) examined whether the tendency to seek variety in choices depends in part on cultural assumptions of choice and uniqueness. Part 1 of the study showed that people from different cultures where different assumptions of choice and uniqueness dominate show different levels of variety in their choice rule use. Part 2 primed participants with magazine ads highlighting different representations of uniqueness dominant in individualist versus collectivist cultures to show the influence of cultural meanings of uniqueness on the variety-seeking tendency. Part 3 manipulated the motivation to display to demonstrate that variety-seeking in the United States partly hinges on cultural meanings of as self-expression. Variety-seeking in choice rule use was eliminated when participants had the chance to self-express through choice listing. The research illustrates the role of cultural assumptions in the variety-seeking tendency.

Emerson (2003) observed that the Mental health problems were associated with the child's difficulties having a greater social impact, having a boy, the child experiencing more than one potentially stressful life event, poverty, receipt of means-tested welfare benefits and 'unhealthy' family functioning.

Lindblade, Odhiambo, Rosen and DeCok (2003) examined the health and nutritional status of orphans younger than 6 years old cared for by relatives in western
Kenya. They found that 7.9 percent of the children had lost one or both their parents and that there was no difference between orphans and non-orphans regarding key health indicators such as prevalence of fever and malaria parasitaemia, history of illness, hemoglobin levels, height for age anthropometry Z-scores, but that weight for height Z-scores in orphans were almost 0.3 standard deviations lower than those of non-orphans. This association was more pronounced among paternal orphans and those who had lost a parent more than one year ago. These results suggest that the health status of surviving orphans living in their community is similar to that of the non-orphan population.

Roisman, (2004) examined the relationship between attachment dimensions and physiological, facial expressive, as well as self-reported emotional responses during the Adult Attachment Interview (AAI). Consistent with theoretical predictions, more prototypically secure adults behaviorally expressed and reported experiencing emotion consistent with the valence of the childhood events they described. Insecure adults also showed distinctive and theoretically anticipated forms of emotional response: Dismissing participants evidenced increased electrodermal activity during the interview, a sign of emotional suppression, whereas preoccupied adults showed reliable discrepancies between the valence of their inferred childhood experiences and their facial expressive as well as reported emotion during the AAI.

Atwine, Cantor et al.(2005) conducted a study on 123 orphans were compared to a control sample of 110 children in rural Uganda. The age range was from 11 -15 years. The results indicated that orphans have greater level of anxiety, depression and anger compared to non-orphans.
Gregson, Nyamukapa, Garnett, Wambe, Lewis and Mason et.al. (2005) also found that orphans and vulnerable children have heightened risks of adverse reproductive health outcomes and higher risks of HIV infection.

Kirya (2005) conducted a study and found the impact of AIDS-related parental loss on the self-esteem of children and on their sociability at school. A sample of 70 orphans was compared with a sample of 70 non-orphans. Orphans and non-orphans did not differ in terms of interpersonal relationships (sociability) at school; orphans had ever slightly higher skills than non-orphans. In terms of self confidence, on the other hand, orphan scored notably lower than non-orphan.

Cluver and Gardner (2005) conducted a study of 30 orphaned and 30 non-orphaned children ages 6-19 living in poor urban areas found that orphans were more likely to have difficulty concentrating, to report somatic systems, and to have constant nightmares. Orphans scored 73% above the cutoff for Post-Traumatic-Stress-Disorder. There were no differences based on the child’s age, gender, or time since parental death, although the sample was small.

Atwine B, Cantor-Graae E, & Bajunirwe F. (2005) found that more than 11 million children under 15 years in sub-Saharan Africa have lost at least one parent to AIDS. In Uganda, about 2 million children are orphans, with one or both parents dead. The objective of this study was to investigate the psychosocial consequences of AIDS orphanhood in a rural district in Uganda and to identify potential areas for future interventions. The study was conducted in a randomly selected sub-county in Bushenyi District in Uganda. The study population consisted of 123 children aged 11-15 years whose parents (one or both) were reported to have died from AIDS and 110 children of similar age and gender living in intact households in the same neighbourhood. Symptoms of psychological distress were assessed using the Beck
Youth Inventories of Emotional and Social Impairment (BYI). The standardized interview also included questions concerning current and past living conditions. A multivariate analysis of factors with possible relevance for BYI outcome showed that orphan status was the only significant outcome predictor. Orphans had greater risk (vs. non-orphans) for higher levels of anxiety (odds ratios (OR)=6.4), depression (OR=6.6), and anger (OR=5.1). Furthermore, orphans had significantly higher scores than non-orphans on individual items in the Beck Youth Depression Inventory that are regarded as particularly "sensitive" to the possible presence of a depressive disorder, i.e. vegetative symptoms, feelings of hopelessness, and suicidal ideation. High levels of psychological distress found in AIDS orphans suggest that material support alone is not sufficient for these children.

Paul Odhiambo & Oburu (2005) compared levels of caregiving stress among 115 biological mothers and 134 grandmothers raising their orphaned grandchildren. The associations between parenting stress and adjustment difficulties exhibited by children raised by these two groups of caregivers were also assessed. Full-time caregiving grandmothers reported elevated levels of stress more than did the biological mothers. A significant negative association was found between child maladjustment and caregiving stress. Caregivers' experienced stress was linked to advanced age and extensive, new adoptive roles now occupied by grandmothers. There was no evidence suggesting that these orphaned children were less well adjusted when compared to children still living with their own birth parents.

Winkler (2006) found that dual orphans had higher grief scores than children having lost one parent. The ratio of major depressive disorder and dysthymia, however was fairly low in the entire sample, a result somehow contesting the commonly stated hypothesis that depression is a main effect of orphan hood.
Lucie, and Frances (2006) investigated mental health outcomes for urban children living in deprived settlements in Cape Town. 30 orphaned children and 30 matched controls were compared using standardised questionnaires (SDQ) on emotional and behavioural problems, peer and attention difficulties, and prosocial behaviour. Both groups scored highly for peer problems, emotional problems and total scores. However, orphans were more likely to view themselves as having no good friends ($p = .002$), to have marked concentration difficulties ($p = .03$), and to report frequent somatic symptoms ($p = .05$), but were less likely to display anger through loss of temper ($p = .03$). Orphans were more likely to have constant nightmares ($p = .01$), and 73% scored above the cut-off for Post-Traumatic Stress Disorder.

Patrick, (2006) found that Child food insecurity is independently associated with being at risk for overweight status or greater while controlling for important demographic variables.

Kim,(2007) observed the four parts in one study and demonstrate the psychological implications of this cultural difference. Part 1 and 2 found that European Americans value self-expression more than East Asians/East Asian Americans. Part 3 and 4 examined the roles of expression in preference judgments. In Part 3, the expression of choice led European Americans but not East Asian Americans to be more invested in what they chose. Part 4 examined the connection between the value of expression and the effect of choice expression and showed that European Americans place greater emphasis on self-expression than East Asian Americans, and this difference explained the cultural difference in Part 3. This research highlights the importance of the cultural meanings of self-expression and the moderating role of cultural beliefs on the psychological effect of self-expression.
Lucie Cluver & Frances Gardner (2007) studied that controlling for socio-demographic factors such as age, gender, formal/informal dwelling and age at orphanhood, children orphaned by AIDS were more likely to report symptoms of depression, peer relationship problems, post-traumatic stress, delinquency and conduct problems than both children orphaned by other causes and non-orphaned children. Anxiety showed no differences. AIDS-orphaned children were more likely to report suicidal ideation. Compared to Western norms, AIDS-orphaned children showed higher levels of internalising problems and delinquency, but lower levels of conduct problems.

V Makame, C Ani, S Grantham-McGregor, (2007) Observed the forty-one orphans whose fathers and/or mothers had died from AIDS, and were living in the poor suburbs of Dar Es Salaam, Tanzania, were compared with 41 matched non-orphans from the same neighbourhoods. The subjects were given an arithmetic test and a semi-structured questionnaire concerning any internalizing problems, their attendance at school and their experiences of punishment, reward and hunger. The scale of internalizing problems comprised 21 items adapted from the Rand Mental Health and Beck Depression Inventories concerning mood, pessimism, somatic symptoms, sense of failure, anxiety, positive affect and emotional ties. Most orphans lived with aunts and uncles. Compared with non-orphans, they were significantly less likely to be in school but those who did attend school had similar arithmetic scores. Significantly more orphans went to bed hungry. Orphans had markedly increased internalizing problems compared with non-orphans (p < 0.0001) and 34% reported they had contemplated suicide in the past year. Multiple regression analysis indicated that the independent predictors of internalizing problem scores were sex (females
higher than males), going to bed hungry, no reward for good behaviour, not currently attending school, as well as being an orphan.

Takashi Yamano (2007) examined the long-term economic impacts of the AIDS epidemic on orphans have been major concerns, few studies have investigated the impacts of orphan status into adulthood. Therefore, this article examines the education attainment and land inheritance of former orphans, who have lost at least one parent before reaching the age of 15 years, by using household surveys in Kenya. We find about a one-year lower educational attainment among former maternal orphans compared with former nonorphans among adults who started schooling before the Free Primary Education program introduced in 1974 but not among adults who started schooling after 1974. On inherited land, we find no significant difference between households headed by former orphans and nonorphans, after controlling for land owned by parents, numbers of brothers and sisters, and birth order among brothers.

Zhonghu He, Chengye Ji (2007) found that no compelling evidence for poorer nutritional status in orphans. The nutritional status of both orphans and non-orphans was extremely poor according to the prevalence of stunting, underweight, wasting and anaemia. Depression, low self-esteem and lower quality of life were more frequent in orphans. These differences mainly existed in boys’ groups. No significant differences were found between paternal, maternal and double orphans, or orphans in orphanages or extended families. Regression analysis revealed that orphanhood leads to low self-esteem and more depression which contributes to lower quality of life and mediates the association between orphanhood and quality of life.
Holt, Buckley & Whelan. (2008) stated that children and adolescents living with domestic violence are at increased risk of experiencing emotional, physical and sexual abuse, of developing emotional and behavioural problems and of increased exposure to the presence of other adversities in their lives. It also highlights a range of protective factors that can mitigate against this impact, in particular a strong relationship with and attachment to a caring adult, usually the mother.

Kathryn, Jan, Rachel, Brian, Karen, Lynne et. al. (2009) compared the Wellbeing of Orphans and Abandoned Children Ages 6–12 in Institutional and Community-Based Care Settings in 5 Less Wealthy Nations. This study does not support the hypothesis that institutional care is systematically associated with poorer wellbeing than community care for OAC aged 6–12 in those countries facing the greatest OAC burden. Much greater variability among children within care settings was observed than among care settings type. Methodologically rigorous studies must be conducted in those countries facing the new OAC epidemic in order to understand which characteristics of care promote child wellbeing. Such characteristics may transcend the structural definitions of institutions or family homes.

J. Gong, Li Fang, G. Zhao, J. Zhao, Lin, Zhang, Chen, & B. Stanton. (2009) examined among the participants (47.7% girls) with an average age of 12.4 years, univariate and multivariate analyses showed that separation from siblings was associated with significantly higher scores in anxiety, depression, anger and dissociation before or after controlling for gender, age, care arrangement, number of household replacement, trusting relationship with the current caregivers and perceived quality of current living condition. Sibling separation among orphans was not associated with level of post-traumatic stress and sexual concerns.
Amy M. Zidron, Elizabeth Juma, & Gillian H. Ice (2009) investigated the HIV/AIDS pandemic is creating a generation of orphaned children in Africa. The number of orphans will continue to increase long after the HIV/AIDS crisis has peaked; therefore, it is important to determine how best to assist these children. Current studies investigating the impact of orphanhood have conflicting results and conclusions. Several studies report that orphans are at a disadvantage and are more likely to suffer from malnutrition, whereas other studies report no difference between the nutritional status of orphans and nonorphans. Four hundred eleven Luo children (mean age 9 ± 1 years) were recruited to participate in a study investigating the impact of orphanhood on nutritional status. Participants underwent an interview, anthropometric measurements, testing for anemia, a clinical history, and a physical exam. Anthropometric variables and hemoglobin level were compared across groups using a t-test. The reference population used for comparison of anthropometric variables is the 2000 CDC growth reference data. All analyses were gender specific, and the effect of length of orphanhood was also investigated. The data presented here suggest that there is no significant difference between the nutritional status of orphaned and nonorphaned Luo children. This study supports research indicating there is little, if any, difference in nutritional indicators between orphans and nonorphans. Orphans may live in households with higher socioeconomic statuses than nonorphans. Luo orphans may not be at higher risk for poor nutritional status than nonorphans; therefore, interventions targeted at this age group should include both orphaned and nonorphaned children.

Carol (2010) conducted a cross sectional study of Physical and mental health-related correlates of physical function in community dwelling older adults. Physical function in community-dwelling older adults is associated with several physical and
mental health-related factors. Further study examining the nature of the relationships
between these variables is needed.

examined the 7752 children in the national survey, 1283 (16.9%) had lost either both 
parents or one parent. Of these orphans, 1048 were uniquely pair matched for the 
case–control analysis. About 60% of orphans had lost their father, and about 20% 
each had lost their mother or both parents. Orphans had better anthropometric 
measurements and indices than non-orphans, although the differences were small, and 
they were less likely to have a goitre (OR = 0.68, P = 0.011). There were no 
differences in the odds of infections. Orphans were less likely than non-orphans to 
have eaten breakfast or fruit and vegetables on the previous day and were more likely 
to report having trouble seeing and hearing.

Hans (2010) observed the psychological consequences of 
job insecurity is reviewed, and stated that job insecurity reduces psychological well-
being and job satisfaction, and increases psychosomatic complaints and physical 
strains. Next, three additional research questions are addressed, since these questions 
did not receive much attention in previous research. First, does the impact of job 
insecurity on workers differ according to their professional position, gender, and age? 
Second, how important is job insecurity compared to other stressors on the work 
floor? Third, how important is job insecurity compared to the impact of 
unemployment? To analyze these issues, data were used from a Belgian plant, part of 
a European multinational company in the metalworking industry (N = 336). The 
results of this exploratory study showed that job insecurity was associated with lower 
well-being (score on the GHQ-12), after controlling for background variables, such as 
gender and age. A significant interaction with gender occurred, indicating that gender
moderated the association between job insecurity and well-being. Job insecurity was not related to psychological well-being among women. Among men, a significant increase in distress was noted among those who felt insecure, but not among the secure. Interaction terms for occupational position and age were not statistically significant. Job insecurity turned out to be one of the most distressful aspects of the work situation. The GHQ-scores of the insecure respondents were not different from those of a representative sample of short-term unemployed, suggesting both experiences to be equally harmful. The consequences of these findings for future research are discussed.

Lucie D. Cluver, Mark Orkin, Frances Gardner, & Mark E. B (2011) found that AIDS-orphaned children showed higher depression, anxiety, and post-traumatic stress disorder (PTSD) scores in both 2005 and 2009 when compared with other-orphans and non-orphans. Backward-stepping regression, controlling for baseline mental health, and sociodemographic cofactors such as age, gender, and type of bereavement, revealed that being AIDS-orphaned in 2005 was associated with depression, anxiety, and PTSD scores in 2009. This was not the case for other-orphaned or non-orphaned children. Age interacted with orphan status, such that there was a steep rise in psychological distress in the AIDS-orphaned group, but no rise with age amongst other-orphans and non-orphans.

Marijke Breuning, & John Ishiyama (2011) find that the increase in the orphan population is related to an increasing incidence of civil conflict, but do not find a similar relationship for the proportion of orphans. In addition, we find that the causes of orphanhood matter. We conclude that increases in orphan populations (rather than simple proportions) are destabilizing. We suggest possible avenues for mediating the security risks posed by growing orphan populations.
T Maundeni, & T Malinga-Musamba (2012) examined the orphan population escalating, communities continue to rely on relatives to provide care to orphans. Therefore, there is a need to explore the role of caregivers with regard to the well-being of orphans, the challenges they face, as well as how they could be empowered to be more responsive to children's needs. The paper acknowledges that informal caregivers play an important role in the lives of orphans. The paper also concedes that, in the process, caregivers are faced with challenges which make it difficult for them to fulfil their responsibilities and roles. As a result, they sometimes act as sources of stress to orphans, which eventually complicate the children's adjustment to the loss of their parents. Lastly, the paper paves the way to ensuring that challenges faced by informal caregivers are addressed in a manner that will make them more supportive to orphans.

Caroline Kuo, Jane Fitzgerald Don, Operario, and Marisa Casale (2012) investigate the drawing upon a sample of 1,599 adults caring for children in HIV-endemic Umlazi Township in South Africa, this cross-sectional survey investigated whether perceived social support varied among caregivers of AIDS-orphaned children (n = 359) as compared with caregivers of children orphaned by other causes (n = 171) and caregivers of nonorphaned children (n = 1,069). Results of multivariate linear regressions indicate that caregivers of AIDS-orphaned children reported significantly lower levels of social support compared with caregivers of other-orphaned children and nonorphaned children independent of socio-demographic covariates. Caregivers of other-orphaned and nonorphaned children reported similar levels of social support. In terms of sources of support, all caregivers were more likely to draw support from family and significant others rather than friends. These findings indicate a need to develop interventions that can increase levels of social support for caregivers of
AIDS-orphaned children, particularly networks that include friends and significant others.

Nathan, Ostermann, Whetten, and Donnell et.al. (2012) conducted a study on Correlates of Poor Health among Orphans and Abandoned Children in Less Wealthy Countries: The Importance of Caregiver Health. Poor caregiver health is a strong signal for poor health of OAC. Strategies to support OAC should target the caregiver-child dyad. Steps to ensure food security, foster gender equality, and prevent and treat traumatic events are needed.