CHAPTER 1

THEORETICAL INTRODUCTION
The growth of competence in children is an area of concern in all societies. Every society expects its children to be competent in physical, psychological and intellectual domains. However, this is not an easy problem to deal with. The lack of resources, education and technology affects the growth process in various ways. In developing countries, the problem assumes greater proportion compared with developed countries. Although the growth of children's competence can be facilitated by various agencies, social scientists experience an important need to provide information concerning growth and development. While different approaches have been adopted to provide an understanding of children's competence, there are many gaps in our current knowledge.

A number of scientists have employed concepts such as achievement and skill to denote child's growth. McClelland (1962) has proposed the concept of need achievement to describe children's growth and competence. According to him a number of socio-cultural antecedents generate a need for achievement in a child; this need for achievement motivates the child to achieve success. Similarly, Witkin (1962) has employed the concept of field independence to denote the growth of psychological differentiation in a child. According to Witkin, specific sociocultural emphases produce greater psychological differentiation in the child.
These approaches consider the positive aspect of childhood experiences and explicate their roles. Although these experiences from an important aspect of life in developed countries, their relevance in developing countries may be questioned. In most of the Afro-Asian countries, daily experiences contain many negative elements. There are many situations which are bad and unpleasant. It is likely that the negative aspect of these experiences influences the course of child's development.

In this context, the construct of helplessness provides a workable framework for understanding the child's growth of competence. The framework explicates parameters that are linked with child's passivity. The model specifies the condition in which child's skills and competence are suppressed.

Theoretical Framework

The phenomenon of learned helplessness was first systematically studied by animal learning researchers at the University of Pennsylvania (Overmier & Seligman, 1976; Seligman & Maier, 1967). Learned helplessness occurs when subjects receiving noncontingent reinforcement in the training phase show striking deficits in the test phase relative to the contingent and control group. They found that animals, treated with inescapable and unavoidable
shock, later failed to escape and avoid traumatic shock that was escapable and avoidable by performing a simple response. Seligman and Maier (1967) observed that mongreal dogs, following exposure to inescapable electric shock, showed deficits later when placed in a shuttle box in which the simple act of crossing a barrier would terminate shock. Compared to dogs not previously exposed to uncontrollable shock, these animals seemed more helpless and indicated several deficits. The investigators described this phenomenon as learned helplessness which referred to the learning or perception of independence between one's behaviour and the presentation and/or withdrawal of aversive events.

The phenomenon is observed across many species. The typical human helplessness experiment involves a triadic design in which one group of subjects receives controllable events, a second group of subjects receives uncontrollable events of the same intensity and duration. A third group of subjects is not exposed to either controllable or uncontrollable events. Hiroto and Seligman's (1975) experiment is a typical example of human helplessness study. The events in this study involved loud noises. Participants could terminate loud controllable noises by pressing a button four times, uncontrollable noises terminated independently of their responses. All participants subsequently were tested on a hand shuttle box task in
which noise termination was controllable. The results of this test paralleled the results of animal experiment.

Since these early studies, research on learned helplessness has proliferated. Early work investigating the phenomenon of helplessness used dogs as subjects (Groves & Seligman, 1970; Overmier, 1968). Recently, quite a good number of investigators have documented learned helplessness in human beings. (Hiroto & Seligman, 1975; Rodin, 1976). Helplessness syndrome is observed by all the authors regardless of the type of species they took as subjects.

The generality of the phenomenon across situations was also observed. Hiroto and Seligman (1975) conducted a series of experiments and employed both instrumental and cognitive tasks in pretraining and post-training situations. When human beings were placed in an uncontrollable situation of instrumental nature, learned helplessness developed; it generalized also to cognitive situations. Similarly, learned helplessness developed as a reaction to uncontrollable cognitive situations generalized to instrumental situations. Thus, irrespective of the domain uncontrollability, helplessness was indicated in instrumental and cognitive activities.

Seligman's model has broadened the scope of learned helplessness from animal behaviour to a wide variety of human behaviours that include child development, diseases,
depression and death (Seligman, 1974, 1975). Other investigators have also argued that the learned helplessness model is useful in studying intellectual development (Dweck & Licht, 1980), victimization (Wortman, 1980), the coronary prone personality (Carver & Glass, 1980) and aging (Schulz, 1980). Like animal research, helplessness theory when applied to human has been controversial (Peterson, 1982).

The behaviour of the dogs that experienced uncontrollable aversive events was characterized by failure to emit appropriate escape responses in new situations where aversive outcomes could be controlled. To account for these results, Maier, Seligman and Solomon (1969) and Maier, Seligman and Solomon (1971) proposed that when animals experience uncontrollable events, they form the expectation that future events will be uncontrollable as well. Finally, Maier and Seligman (1976) argued that when organism expect that aversive events are uncontrollable, they experience depressed affect. Thus, according to the helplessness theory the debilitated performance of dogs in an escape task following inescapable shock reflects two consequences of an expectation of response—outcome independence: lowered initiation of responses and difficulty in perceiving response—outcome relationship.

Similar behaviour was observed in humans exposed to uncontrollable noises. Early investigators of human
helplessness developed a quantitative index of the degree
to which subjects exposed to uncontrollable events failed
to profit from prior response - outcome sequences (Hiroto,
1974; Hiroto & Seligman, 1975). For each subject, the
average conditional probability of an escape response on
a trial, given a successful escape response on the previous
trial, was computed. Since the original demonstration
of learned helplessness in animals, a number of investigators
successfully have reproduced the phenomenon in humans
(Hiroto & Seligman, 1975; Klein & Seligman, 1976).

Recent reviews (Maier & Seligman, 1976) and critiques
of learned helplessness research and theory have focussed
primarily on animal research. In view of the considerable
research in this area and the possible implications for
social and educational planning, it seems appropriate to
review the learned helplessness research and theory with
an explicit focus on studies using human subjects.

Recent studies of learned helplessness have suggested
a broad generality of helplessness syndrome (Sahoo &
Mohapatra, 1986). A number of experimental studies have
indicated that this learned helplessness is a broad
dimension and it operates as an induced personality trait
(Sahoo & Mohapatra, 1986) in such subjects.

The learned helplessness hypothesis provides an
unified account of the debilitating consequences of
experiences with uncontrollable events in humans and animals. According to this hypothesis, learning that outcomes are uncontrollable results in three deficits: motivational, cognitive, and emotional. The motivational deficit consists of retarded initiation of voluntary responses and is seen as a consequence of the expectation that responding is futile. "In a cognitive deficit, the individual feels difficult" to learn the responses that produce outcomes. In fact, it interferes with learning that responding controls the outcome. Thirdly, in motivational deficits, a depressed affect is observed when the individual learns that there is no contingency between response and outcome.

Finally, the learned helplessness model argues that depressed affect is a consequence of learning that outcomes are independent of responding. The learned helplessness hypothesis is primarily "cognitive" in that it postulates that mere exposure to uncontrollable events is not sufficient to produce the associated helplessness deficits. Rather, the organism must come to expect that outcomes are uncontrollable in order to exhibit helplessness.

According to the original helplessness theory (Maier & Seligman, 1976; Seligman, 1975), experience with uncontrollable events can lead to the expectation that no responses in one's repertoire will control future outcomes. This expectation of no control leads to motivational deficits.
deficits (inability to perceive existing opportunities to control outcomes), and in humans, emotional deficits (sadness & lowered self-esteem). These deficits are collectively known as learned helplessness deficits.

A final implication rests with the intensity or severity of the associated deficits of learned helplessness. Intensity or severity implies the strength of a given deficit at anytime in a particular situation. It is suggested that the severity of cognitive and motivational deficits increases with the strength of certainty of the expectation of uncontrollability (Garber & Seligman, 1980). Similarly, the severity of self-esteem loss and affective changes (emotional deficit) are assumed to increase with the certainty and importance of the event over which the individual feels helpless. For example, rejection by a beloved produces a more intense helplessness deficit compared to failure in the examination, because the former is having greater importance than the latter.

A more direct method of isolating the cognitive component of helplessness involved judgement of contingency. In a series of experiments, Alloy and Abramson (1979) presented depressed and non-depressed college students with one of a series of contingency problems. Some individuals were presented with problems in which there was high degree
of relationship between their responses and outcomes. Other individuals were presented with problems in which there was little relationship between their responses and outcomes.

Alloy and Abramson (1979) argued that an expectation of control was likely to interfere with the detection of noncontingency. These depressed individuals were predicted to under-estimate the degree of control their response would exert over an outcome because of their generalized expectation that they had no control. Non-depressed individuals were predicted to overestimate the degree of control their response would exert on an outcome because of their generalized expectation that they did have control.

The general pattern of the results in Alloy and Abramson's experiments indicated no associative deficit in depression. Depressed students demonstrated a surprising degree of accuracy in their judgement of contingency. Non-depressed students, however, over-estimated the degree of control their responses exerted over outcomes. Thus, no evidence emerged for an associative deficit on depression. Further experiments by Alloy and Abramson indicated that non-depressed subjects previously exposed to uncontrollable or no noises greatly overestimated their degree of control over the non-contingent outcome, whereas non-depressed individuals previously exposed to controllable noises
accurately judged that they had little control. Depressed subjects also gave accurate judgement of control regardless of whether they previously experienced controlled, uncontrolled, or no noises. Taken together, the findings suggested that the associative component of helplessness theory does not provide as adequate account of individual's perception of response-outcome independence.

Similarly, chance skill studies could not demonstrate the existence of associative deficits of helplessness independently of the motivational deficit. Chance skill studies were initiated on the assumptions that helplessness cognition was similar to Rotter's (1966) concept of external control, and outcomes on previous trials had a greater effect on expectancies for future success when outcomes were dependent upon responses (skill-determined). Based on these assumptions, researchers examined verbalised expectancies of success on skill and chance tasks. Although the results provided some support to the contention that helpless and depressed students acquired a generalised expectancy of response-outcome independence which interfered with seeing the relationship between their response and outcome, the assumptions on which the finding was based were questioned. Recent developments have shown that locus of control and expectation of response-outcome independence are orthogonal (Garber & Seligman, 1980).
Moreover, the original model did not explain self-esteem loss fund among the depressive. Individuals blamed themselves for events over which they perceived no control. Thus, old model was silent about the generality of helplessness across situations and chronicity over time. The question of self-esteem loss was also not adequately answered. The theory had to be reformulated to accommodate observations of generality, chronicity, and self-esteem loss.

The concept of control as a core construct in the theory of helplessness has received much attention (Langer, 1983). In recent years, its transcultural use has been shown greater promise for research and application. Specifically, the construct of control has a wide applicability in sociocultural system of Indian society, where problems of helplessness are manifest in many domains of behaviour (passivity, depression, disease-susceptibility, old-age problems, etc.); the link between human helplessness and quality of life has vitalised research in the area.

Researchers, however, encountered an important problem with respect to individual difference factor. It was observed that all individuals exposed to same amount of uncontrollability did not show equal degree of deficiency. Later, an explanation in terms of attributional style was proposed to account for individuals' difference. It was proposed that individuals employed specific attributional
style when they encounter uncontrollable (bad) events. The attributions vary along the dimensions of internality, stability and globality. People employing internal, stable, and global attribution indicate a greater degree of helplessness than do individuals using external, temporary, and specific attribution.

While the concept of attributional style provides an explanation for individual difference, the exact mechanism by which a specific attributional style is mediated is not clear. Similarly, the role of parents, neighbourhood, text books and other cultural parameters along with contingent and noncontingent conditions is a key issue in the study of origin of helplessness.

Helplessness also tends to dissipate over time. Forgetting produced by interference from prior or subsequent learning was invoked to explain this dissipation in time (Seligman, 1975). In other words, forgetting of helplessness was believed to result from either earlier mastery learning (immunization) or subsequent mastery learning (therapy). When individuals believe that outcomes are more likely or less likely happen to themselves than to relevant others, they attribute these outcomes to something about themselves internal factors. Conversely, when individuals believe that outcomes are as likely to happen to themselves as to relevant others, they make external attributions.
Universal helplessness is characterized by the belief that an outcome is independent of all of one's own responses as well as the responses of other people. Suppose a child has leukemia and his parents use all their resources to save the child's life. Nothing they do, however, improves the child's health. Nor is there anything anyone else can do to cure the disease. The parents came to believe that there is nothing they or anyone else can do to save the child's life. They subsequently give up trying and exhibit the behaviour as well as the affective symptoms of helplessness. This example is consistent with the old helplessness hypothesis and characterizes the case of universal helplessness.

Personal helplessness, on the other hand, is the case where the individual believes that there exist responses that would contingently produce the desired outcome, although he or she does not posseses them. Consider a student who studies endlessly and takes remedial courses in an attempt to get good grades. Unfortunately, however, the student fails any way. The person eventually comes to believe that he or she is stupid and incompetent, and soon gives up trying to pass. According to the original helplessness model, this is not a clear case of uncontrollability because the person believes that there are responses (for other relevant persons) which would produce passing
grades, although he or she does not seem to have them in his or her repertoire. Regardless of any voluntary responses the person makes, the probability of his or her obtaining good grades remains unchanged. This is the case of personal helplessness and is a refinement of the old helplessness hypothesis.

The distinction between universal helplessness and personal helplessness clarifies the relation of uncontrollability to failure, which has been questioned by a number of investigators (Blaney, 1977). The original helplessness theory did not differentiate the effects of uncontrollability according to the valence of the outcome.

The old hypothesis is vague about generality and chronicity of helplessness syndrome. Helpless individuals learn that certain responses and outcomes are independent. If the new situation calls for responses similar to the original learning situation, the resulting deficits may occur. And helplessness is said to be generalised when the resulting deficits are extended to highly dissimilar stimuli or responses in the new situation. But the old theory does not explain why the expectation of uncontrollability is sometimes specific and sometimes global.

The first inadequacy of the old hypothesis is resolved by a proposed distinction between universal helplessness
and personal helplessness. Universal helplessness promotes external attribution and personal helplessness promotes internal attribution (Abramson et al, 1978). Universal helplessness is characterised by the belief that an outcome is independent of all of one's own responses as well as the responses of the other people. Personal helplessness, on the otherhand, is the case where the individual believes that there exist responses that would contingently produce the desired outcome, although he or she does not possess them. The distinction between universal and personal helplessness classifies the relation of uncontrollability to failure. But this has been questioned by a number of investigators (e.g. Blaney, 1977; Tennen, 1977). Tennen suggested that the concept of uncontrollability should be replaced by a similar concept of 'failure'. According to the reformulated hypothesis, failure is a subset of helplessness, primarily overlapping with personal helplessness. Typically failure means more than simply not obtaining a desired outcome and in general, it implies that there is a possibility of success. Thus, the internal—external attributional dimension defines the distinction between universal and personal helplessness and resolves the first set of inadequacy of the old helplessness hypothesis.

The second set of inadequacy of the old model refer to the generality and chronicity of helplessness. The helpless individual learns that certain outcomes are
independent of his/her responses. According to the reformulated hypothesis, he/she may then make an attribution about the cause. Some attributions have global and others have specific implications. And some have chronic and others transient implications.

Thus, the generality and chronicity of learned helplessness is explicated in terms of explanatory styles an individual employs to account for bad events. Peterson and Seligman (1984), on the basis of their critical review of the role of attributional style in various contexts emphasize explanatory style in the development of learned helplessness.

However, the main difficulty with the original helplessness model, when applied to human helplessness in the laboratory and to natural human depression, is its failure to account for boundary conditions. Sometimes, as investigations revealed, laboratory helplessness is general (Hiroto & Seligman, 1975) and sometimes bad events precipitate depressive reactions which are at times transient, at times long lasting, and at times even not present at all (Brown & Harris, 1978; Lloyd, 1980).

The Reformulated Version

Abramson et al (1978) proposed a reformulation of helplessness theory that was designed to resolve the
inadequacies in the original theory. According to this reformulation, the explanations people give for good and bad outcomes influence their expectations about future outcomes, and thereby influence their reactions to outcomes.

Helplessness theory is reformulated in the light of attributional variables (e.g., Miller & Norman, 1979). The variables refers to the individual's interpretation of the uncontrollable events (e.g., Wortman & Brehm, 1975). In connection with this, Abramson, and Teasdale (1978) revised helplessness theory to include the individual's casual explanations of the original bad events. Other variables may also affect responses to uncontrollability (Wortman & Dintzer, 1978).

First, the basic helplessness phenomenon was investigated in the laboratory with human subjects (Wortman & Brehm, 1975). In the second, helplessness theory was used to explain a variety of human difficulties (Garber & Seligman, 1980). Perhaps the best known of these applications has been Seligman's (1972, 1974, 1975) suggestions that learned helplessness may model depression with respect to symptoms, causes, prevention and cures. The main problem with the original helplessness model, applied both to human helplessness in the laboratory and to natural human depression, is its failure to account for boundary conditions. Sometimes laboratory helplessness is general (Hiroto &
Seligman, 1975), and sometimes it is circumscribed (Cole & Coyne, 1977).

The research focused on measuring explanatory style because a methodological framework already existed for doing so (E.g.: Harvey, Lekes & Kidd, 1976, 1978, 1981). It is not to focus on the expectation itself, even though it is more proximate to the symptoms, because we do not believe that a valid means of measuring expectations yet exists. Also in most causes, we chose not to focus on particular explanations because explanatory style of necessity is a more reliable individual difference (Epstein, 1980).

The reformulated theory of learned helplessness (Abramson, Seligman, & Teasdale, 1978) makes a set of predictions about the emotional and behavioural development of children. It claims that there should be an identifiable set of children who are at particular risk for the behavioural and emotional deficits of helplessness. Specifically, children who possess an attributional (explanatory) style that habitually leads them to view the causes of bad events as stable in time, global in effect, and internal to themselves will be, once they encounter bad events, especially vulnerable to a defined cluster of helplessness deficits. The cluster consists of (a) lowered response initiation (Passivity), (b) cognitive deficits, (c) sadness,
(d) lowered self-esteem, and (e) lowered assertiveness and competitiveness.

Abramson et al. (1978) explained the individual differences in vulnerability to helplessness by arguing that people who habitually explain bad events by internal, stable, and global causes will be more prone to depressive episodes than persons without this maladaptive explanatory styles. This prediction has been confirmed by a number of studies using adults and several investigations using children (Peterson & Seligman, 1984).

Finally, according to the reformulation, helplessness and external locus of control are orthogonal. Individuals can make either internal or external attributions for their helplessness. To summarize the logic of the reformulation, once an attribution is made for uncontrollability, its properties predict in what new situations and across what span of time the expectation of uncontrollability is likely to recur.

A final important point is that the attributional reformulation regards both attributions and expectations as hypothetical constructs. The reformulation is not a phenomenological theory. Attributions and expectations are hypothesized events mediating between objective uncontrollability and subsequent helplessness performance.
deficits. Results of earlier studies on human helplessness that were difficult to explain in terms of the original helplessness hypothesis now may be more easily explained by the reformulated hypothesis.

The new version of learned helplessness model has been supported by a good number of empirical studies. Of course, each technique adopted has its own flaws. But the convergence of results across different strategies of investigation, different techniques of operationalizations, and different populations argue strongly for the validity of the model. Studies of helplessness have generated a number of application areas. The relationship between helplessness and a number of domains such as depression, disease susceptibility, old age problems coping with undesirable life events, intellectual impairments and child management have suggested the relevance of the construct for the quality of life.

Domains of Application

A wide variety of areas of application brings home its link with the quality of life. Although the centre of gravity has been shifted to the negative consequences of helplessness, a basic understanding of these consequences is useful for improving the quality of life. Prior to explaining the role of mechanism that mediates between
helplessness and specific negative outcomes, an explanation of these specific domains of application is essential.

There is a growing literature that has addressed the issue of attributional style of depressed people. These studies have indicated the role of internal, global and stable attributional style of depressed people (Garber & Mollan, 1980; Navarra, 1981). A number of studies have also indicated the relationship between depressive attributional style (in terms of internal, stable & global explanations) and helplessness in children (Diener, Fincham, & Mokada, 1987; Fincham & Seligman, 1986). Although the association between depressive attributional style and learned helplessness has been well documented, the issue of cause and effect relationship has not yet been settled. Furthermore, the transmission of parents' attributional style to their children is also a fundamental question to be investigated.

A similar area of concern involves disease susceptibility of helpless persons (Peterson, Seligman, & Vaillant, 1988). An enhanced responding aimed at asserting control over an uncontrollable stressor must prove ineffective in the long run, for extended exposure eventually leads to the perception that no control exists between responses and outcomes, stressful life events, including job dissatisfactions, economic frustration and excessive work load
responsibility, all appear related to the risk of coronary
disease (House, 1975; Jenkins, 1971).

Another important domain where effects of helplessness
are manifest involve old age problems. Schulz (1980)
hypothesized that some of the characteristics frequently
observed among the institutionalized aged, such as feeling
of depression and helplessness as well as accelerated
physical decline are at least important attributions to
loss of control and decreased environmental predictability.
Langer (1983) has reported a number of empirical studies
that explicate the relationship between perception of
uncontrollability and old age problems. However, an important
question in this context concerns the stability of effects
produced by an enhanced perception of controllability.

A recently completed experiment (Krantz & Schulz, 1980)
was carried out to address the generality of the
predictability effect by using a low socio-economic status
population and to test one aspect of the relocation model
proposed by Schulz and Brenner (1977). It was hypothesized
that enhancing the predictability of an institutional
environment for new admissions to a long-term care
facilitate adaptation and decrease some of the physical
and psychological deficits typically associated with
relocation.
A parallel research tradition concerns the association between learned helplessness and coping with undesirable life events (Davidson, Geer, & Gatchel, 1970). At some crucial point of life, people encounter stressful events that can have a major impact in the course and direction of their lives. They or those they live may be confronted with a disabling accident, serious illness, death, or violent crime. Despite the experimental control afforded by laboratory studies; surprisingly few replicable findings have emerged. In view of the fundamental difference between stressors encountered in the laboratory and most aversive life events, naturalistic studies have been stressed (Janoff-Bulman, 1980).

In recent years, the model of learned helplessness has generated a wide range of behavioural prediction (Garber & Seligman, 1980). While the concept has been examined in the context of various domains of human life, its relationship with work efficiency has remained unexplored (Sahoo & Sita, 1988).

The possibility of examining the association between learned helplessness and work efficiency is of great significance. It is plausible that helpless individuals develop negative cognitive set towards work, they show less initiative towards work situations, and do not experience work satisfaction (Sahoo & Sia, 1988).
Since cognitive aspects of helplessness make individuals more susceptible to a negative cognitive set, these individuals are likely to expect that their efforts and work outcomes are unrelated. This negative cognitive set is augmented by their early socialization experiences encountered in family, neighbourhood, and peer groups.

The possibility of carryover effect is also higher in Indian situations. In western situations, their family norms, though retained, donot interfere much with their work norms. But in Indian socio-cultural system, familial norms and experiences are of strong influence in work situations. Because of the greater possibility of carryover effect, early socialization experiences are more likely to influence work behaviour in India (Kanungo & Mishra, 1985).

It is very important to examine the relationship between this induced personality trait (helplessness) and work behaviour. Research shows that people with higher personal helplessness manifest less satisfaction, they experience dissatisfaction with their work environments.

It is said that a person develops some familial norms before going to his or her work setting. India is a country in which the social structure effects personal work and life style. So it may cause the peculiar kind of relationship between the personal helplessness and universal helplessness.
People low on personal helplessness and high on universal helplessness are said to have mastery-orientation towards environment. They believe they can control the environment where even others have failed. This attitude brings them closer to work and work organizations. The conceptual generality of the construct makes specific predictions for work-related outcomes.

The Goals of the Study

As discussed earlier, the construct of helplessness is a broad and general one. The concept of uncontrollability is at the core of this framework. It is suggested that helplessness develops as an induced personality trait when the organism is exposed to condition of uncontrollability. Helplessness is intensified when the individual employs internal attribution for its occurance. Furthermore, helplessness becomes chronic when stable attributions are used; helplessness turns pervasive when global attributions are used.

Although the model posits debilitating effects of uncontrollable conditions, a fundamental question remains unanswered. The roots of helplessness are not explicated. It is axiomatic that effective programmes to reduce helplessness needs knowledge about the development of helplessness. Without proper understanding of the developmental factors, it would be difficult to control helplessness.
Consequently, the developmental context of child's helplessness is of great theoretical and applied significance. Considering the society as a shuttle box in which helplessness is induced, empirical research needs to be directed towards this issue. Although many conditions can be postulated in this context, the focal process concerns socialization experiences.

Empirical research in the past has clearly demonstrated that the child's relationship with its mother forms a central aspect of development. Although the role of various social agents can be analysed in the context of the development of children's helplessness, mother's socialization need to be given primary attention. More specifically, the empirical examinations of mother's rearing practices demand research attention. The goal of the present study is to identify rearing antecedents as they relate to children's helplessness. The other goal is to examine the role of specific attributional variables in children's helplessness. The significance of these goals becomes more clear when we present a review of the pertinent literature.
Summary and Objective

The theory of helplessness was long recognised for its generality across species (Maier & Seligman, 1976). In recent years, its transcultural use has shown greater promise for research and application. Specifically, the construct of control as a core construct in the theory of learned helplessness has received much attention (Langer, 1983). Originally, the theory described helplessness as a reaction to situations of uncontrollability. It was observed that all individuals exposed to same amount of uncontrollability did not show equal degrees of deficiency. Later, explanation in terms of attributional style was proposed to account for individual difference. It was proposed that individuals employed specific attributional style when they encounter uncontrollable (bad) situations. People employing internal, stable and global factor experience a greater degree of helplessness than do individuals using external, temporary, and specific attributions.

Recent studies of learned helplessness have suggested a board generality of helplessness syndrome (Sahoo & Mohapatra, 1986). It has been shown that organisms develop helplessness following a prolonged exposure to uncontrollable events. Experimental animals exposed to inescapable situations learn that responses and outcomes are independent. Human being exposed to uncontrollable events
situations learn that responses and outcomes are unrelated. Learning acquired in this situation impairs future learning. The syndrome is also associated with motivational and emotional deficits. Like animal research, helplessness theory when applied to human has been controversial (Peterson, 1982).

The theory of old model was silent about the generality of helplessness across situations and chronicity over time. The question of self-esteem loss was also not adequately answered. Thus the theory had to be reformulated to accommodate observations of generality, chronicity and self-esteem loss. Helplessness theory was reformulated in the light of attributional variables (Miller & Normans, 1979).

In reformulated learned helplessness theory, explanation and explanatory styles are allowed the status of risk factors. While both the original and reformulated theory stress expectation of no control as a sufficient condition for the helplessness syndrome, the reformulated theory describes casual explanation as a risk factor for symptoms of helplessness and depression. In such a scheme, the situational (reality factors) and dispositional (explanatory style) factors are ascribed special roles.
A central issue concerns the ontogenisis of helplessness in children. While Dweck and Licht (1980) have indicated the possibility of children's experiential component in school situations as a possible mediating mechanism, a number of plausible factors remain uninvestigated. Dweck and Leggett (1988), on the basis of their review of children's orientation in achievement situations, have attempted to identify cognitions underlying mastery-oriented vis-a-vis maladaptive (helpless) orientations. They have proposed a model to indicate the role of children's cognition relating to ability, effort, luck, and chance.

In the first, the basic helplessness phenomenon was investigated in the laboratory with human subjects (Wartman & Brehm, 1975). In the second, helplessness theory was used to explain a variety of human difficulties; Garber and Seligman (1972, 1974, 1975) suggested that learned helplessness may model depression with respect to symptoms, causes, prevention and cures.

Finally, according to the reformulation, helplessness and external locus of control are orthogonal. Individuals can have internal or external locus of control and it is unrelated to their helplessness. To summarize, once an attribution is made for uncontrollability, its properties predict in what new situations and across what span of time the expectation of uncontrollability will likely recur.
A wide variety of areas of applications brings home its link with the quality of life, like disease susceptibility, child management, intellectual impairments, depression, old age problems, coping with undesirable life events, work efficiency etc., Other important antecedent contextual variables include family, neighbourhood, school, and text books. It is a common observation that social agents in family and school profess and practise quite opposite things that give rise to helplessness.

However, the selection of pertinent variables is appropriate in the context of socio-cultural system in which helplessness occurs. From this stand-point, the study of child rearing practices is an interesting problem to examine. More specifically, an efficient management of child training would require knowledge about socialization emphasis that includes helplessness in children. The objective of such analysis would be to identify differential pattern of expectancies, attitudes, rearing practices and self-perception of mothers. This would help to examine the association between various indicators of socialization and development of competence in children.

In recent years, the model of learned helplessness has generated a wide range of behavioural prediction (Garber & Seligman, 1980). The new version of learned helplessness model has been supported by a good number of empirical
studies. Of course, each technique adopted has its own flaws. But the convergence of results across different strategies of investigation, different techniques of operationalizations, and different populations argue strongly for the validity of the model. The relationship between helplessness and a number of domains such as depression, disease susceptibility, old age problems, coping with undesirable life events, intellectuals impairments and child management has suggested the relevance of the construct for the quality of life.

The phenomena is no longer limited in laboratory settings. It is pertinent to recognize that a wide range of relations with distant and immediate environment may have a bearing on the development of helplessness. While the pressures from peer group and neighbourhood are recognized, the role of parents as a potent source of influence appears to be central. Although the role of different socio-cultural antecedents appears to be important, the present work primarily focusses on the role of mothers in the development of helplessness in children.

Several sets of evidence have been offered to support the hypothesis that cognitive and social development are intimately interrelated, and that the mother-infant interaction influences both. A mother's prompt responsiveness to her baby's signal tends to foster the development of
varied and clear modes of communication and thus the development of one facet of social competence.

More specifically the empirical examination of mother's rearing practices demand research attention. The goal of the present study is to identify rearing antecedents as they relate to children's helplessness. The other goal is to examine the role of specific attributional variables in children's helplessness. The significance of these goals becomes more clear when we present a review of pertinent literature.