Exploring the Mental Health Outcomes of Orphaned and Separated Children: Udayan Care

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Background Information

Orphans and Separated Children in India
- India has the largest population of orphaned and separated children in the world (~30 million)¹
- Childcare institutions in India continue to face structural challenges, shortage of funds, and inadequate aftercare infrastructure—many of which were accentuated due to the COVID-19 pandemic.²

Community Partner: Udayan Care’s Current Model
- Udayan Care is an NGO CCI that employs the “ghar” model for OSCs:
  - Udayan operates small “family-style” homes in the Delhi region.
  - Key goals include providing an excellent education, a close-knit home environment, and prioritization of mental health from a young age.³
- Beneficiaries are categorized into groups, some of which include:
  - Ghar Residents—those under 18 that reside in small group homes
  - Aftercare Young Adults—former ghar residents (18+) and are transitioning into independent life

Results and Findings

Mental Health Status

→ Comparing Proportion of High Risk Participants Among Populations

We found that over 1/3 of participants in both the ghar and aftercare group were at high risk for suicidality/self harm.

→ Differences in Population: Two-tailed, unequal variance t-tests revealed Aftercare participants’ mean depression and anxiety scores were significantly higher than ghar children/YA.

<table>
<thead>
<tr>
<th></th>
<th>Mean Score</th>
<th>SD</th>
<th>p-value</th>
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</thead>
<tbody>
<tr>
<td><strong>Depression</strong></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Aftercare</td>
<td>8.12</td>
<td>5.38</td>
<td>0.0018</td>
</tr>
<tr>
<td>Ghar</td>
<td>4.95</td>
<td>3.03</td>
<td></td>
</tr>
<tr>
<td><strong>Anxiety</strong></td>
<td></td>
<td></td>
<td>0.0044</td>
</tr>
<tr>
<td>Aftercare</td>
<td>6.19</td>
<td>5.20</td>
<td></td>
</tr>
<tr>
<td>Ghar</td>
<td>3.4</td>
<td>3.34</td>
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Comparison of Mean Scores on the PHQ-9 & GAD-7 Between Ghar Children/YA and Aftercare

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<tr>
<th></th>
<th>Mean Score</th>
<th>SD</th>
<th>p-value</th>
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</thead>
<tbody>
<tr>
<td><strong>Social Skills</strong></td>
<td>2.46</td>
<td></td>
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<tr>
<td><strong>Coping Mechanisms</strong></td>
<td>2.18</td>
<td></td>
<td></td>
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<tr>
<td><strong>Resume/Interview</strong></td>
<td>2.29</td>
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<tr>
<td><strong>Financial Planning</strong></td>
<td>2.46</td>
<td></td>
<td></td>
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<tr>
<td><strong>Dating Etiquette</strong></td>
<td>2.38</td>
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Workshop content was well received, and participants reported using workshop knowledge in their everyday lives in a final workshop debrief.

Qualityative feedback gained also highlighted the desire for more interactive activities like the workshops, which will be taken into consideration when developing future activities.

Discussion

Higher levels of depression and anxiety among the Aftercare were supported by qualitative findings from interviews where individuals expressed:

→ Struggles transitioning out of Udayan residential accommodations
→ Feeling a lack of confidence in their abilities
→ Feeling like they lacked mental health support and counseling

Aftercare individuals, who are at a point of vulnerability due to the transition to independence, need additional support. Depression and anxiety can be comorbid with other negative health outcomes like suicidality.

Results from the pilot workshop curriculum demonstrate a desire to gain life skills to become more self sufficient and emotionally resilient. Direct interventions targeting this population, and others, can break a cycle of poor mental health outcomes, and improve the quality of life among OSCs, and future projects will take this into account.

Research Questions

● What is the current status of mental health (depression, anxiety, trauma), among Udayan ghar children and young adults?

● Which children and young adults are at high risk for depression, anxiety, and suicidal ideation? Action: refer them emergent mental health support.

● How effective are skill training workshops in building self confidence in the transition process for aftercare participants?

Methodology

Interviewed, selected, trained Indian interns

Selected, created, translated/back translated measures

One-on-one interviews conducted with a mix of quantitative mental health measures and qualitative questionnaires

Determination of sample: re-interviews of 2022 high risk + additional sample

n = 124 Adolescents/young adults interviewed in Summer 2023

n = 31 Ghar Children

n = 11 Ghar We (16-18)

n = 34 Shakti Girls

n = 43 Aftercare

n = 5 Alumni

Pilot Workshop Curriculum

This pilot program was implemented based on recommendations from 2022 for a subset of aftercare participants with each workshop focusing on mental health or life skill building.

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Qualitative feedback gained also highlighted the desire for more interactive activities like the workshops, which will be taken into consideration when developing future activities.

Working with Udayan: Next Steps

→ Currently organizing a research-backed intervention manual
→ Working to create documentation of Udayan’s mental health programming
→ Advocate for Udayan to implement psychological first aid courses for use by caregivers & counselors
→ Assist Udayan in planning further sessions with caregivers to destigmatize mental health

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References:

*Udayan Care: “Udayan Care – About us” https://www.udayancare.org/about-us