# THE EFFICACY OF POSITIVE PSYCHOLOGY INTERVENTIONS ON THE SUBJECTIVE WELL-BEING OF INSTITUTIONALIZED, ORPHANED AND ABANDONED FEMALES

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Positive psychology interventions have long been used in the West to increase the overall happiness or subjective well-being of individuals (Mendelsohn, 2008) and have also found to be effective however; this form of treatment has largely been neglected in the East reference. The aim of the present study was to investigate the efficacy of positive well-being psvchology interventions on the subjective institutionalized abandoned and orphaned females. It was hypothesized that positive psychology interventions would increase the subjective well-being of institutionalized, abandoned and orphaned females. The participants of the study included N=30 orphaned and abandoned females who were approached through convenient purposive sampling technique from two private orphanages of Karachi. The age range of the participants was from 13-19 (M=14.15) years and their stay at the institute was 5-7 (M=5.7) years long. In a pre-post quasi experimental design, the participants received pre-test followed by 6 group sessions of positive psychology interventions then a post-test. The pre-posttests were conducted to test the efficacy of the interventions, which were comprised of the Satisfaction with Life Scale and the Scale of Positive and Negative Experience. The findings of the paired samples t-test revealed that positive psychology interventions are significantly effective in increasing the subjective well-being of institutionalized abandoned and orphaned females. The current study has significant implications in the field of clinical, developmental and positive psychology in the indigenous context.

Keywords: Positive psychology interventions, Subjective wellbeing, Orphans, Abandoned females

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Since the very beginning human beings have pondered the question, what is the good life? In this quest some have focused on criteria such as being loved by others, having an abundance of pleasurable activities in one's life, loving others and having self-insight or awareness as the defining characteristics of a good life. Another criterion which is more important than the others mentioned above is; the individual's evaluation of his or her life. It is desirable for people to think that they are living good lives. One's subjective definition of the quality of their life gives each individual the right to decide whether his or her life is worthy (Diener, 2000). This approach of subjectively evaluating one's life has come to be called *Subjective Well-Being* (SWB) and in colloquial terms is often labeled as happiness add reference (Diener, Suh, Lucas, & Smith, 1999).

Until recently, researches usually revolved around identifying what made people miserable and depressed rather than what made them happy and satisfied. But evolving research in the field of positive psychology has been instrumental in shifting the focus of the researchers. Researchers are now more interested in finding out the ingredients of a happy life and are working towards their goal by making changes in how one acts and thinks (Mendelsohn, 2008).

Subjective well-being (SWB) is a broad category of phenomena which includes individuals' evaluations of their lives in terms of cognitive and affective explanations. It includes their emotional responses, domain satisfactions and life satisfaction. Although, each of these constructs are separate, but correlate highly with each other and therefore happiness or subjective wellbeing is defined as a general area of interest rather than a specific construct in researches (Diener, Suh, Lucas, & Smith, 1999). The cognitive aspect of Subjective well-being (SWB) refers to what one thinks of his life as a whole in global terms that is, overall satisfaction with one's life whereas, the affective component refers to the emotions moods and feelings that one experiences. Affect is considered positive when the emotions, moods and feelings experienced are pleasant (e.g. joy, pleasure, love etc) and is deemed negative, when the emotions experienced are unpleasant (e.g. guilt, anger, jealousy etc; Miller, 2011).

High Subjective well-being leads to desirable behaviors such as increased voluntary work, greater work performance, better health, success, optimism, self-regulation and more satisfying relations (Diener, Lucas & Oishi, 2001). It also enhances creativity and divergent thinking. On the contrary low subjective well-being leads to an increase in complaining behavior, unsatisfying relations, dissatisfaction with one's life, perfectionism and experiencing more negative emotions and feelings such as anger, jealousy, suspiciousness than positive ones (Madanes, 2013).

Several groups are said to have the lowest level of SWB. These include those who have recently lost their partners, new therapy clients, hospitalized alcoholics, new inmates and students under political repression (Boniwell, 2008). Another group that rates themselves low on Subjective well-being (SWB) is that of orphans (Pells, 2012; Gurmede & Richmond, 2009-2011). However, limited research has been done on this group, which highlights the need of the current study.

Losing a parent or being abandoned in childhood is the most traumatic event any child can go through and therefore this population is most vulnerable toward developing psychological and emotional problems. The impacts of parental death and abandonment on children are complex and affect the child's social, cognitive, psychological and physical development (Johnson, 2011).

Internationally, this group has received special attention because these children are considered to be disadvantaged. A lot of efforts are being made by various organizations for the betterment of this population. These efforts are concentrated around providing for the basic necessities of these children such as food, education and shelter as well as meeting their emotional needs of love and safety (Adu, 2011).

Internationally this issue has been raised and a lot of efforts are being made, however this group still continues to be neglected in Pakistan. Through informal surveys it has been estimated that there are 4.2 million orphaned and abandoned children in Pakistan. The current law and order situation of the country, ongoing strife

and military operations have largely contributed to an increase in the number of orphaned children whereas, poverty and illegitimate conception have been major factors in the abandonment of children.

An increase in the number of orphaned and abandoned children has attracted attention towards their rearing and care. As it has been observed that in a poverty stricken country like Pakistan it is often impossible for extended families to take care of these children due to various socioeconomic factors therefore, there is a high need that some institutions should be established to assist in taking care of these children. Most of these homes are being run by individuals, non-governmental agencies and private institutions who receive aid from external donors. It has however been found that institutional care for orphans and vulnerable children is not generally successful.

Various researches have found that the psychological and emotional growth of a child is stunted when he/she is institutionalized. Policy makers and practitioners are now spreading awareness that institutional care should not be the first choice but the last resort (Adu, 2011).

A recent study concluded that children living in orphanages are less happier and display more negative affect than non-orphans, that is, children living in orphanages rate themselves low on Subjective well-being (SWB) than non-orphans (Mostafaei, Aminpoor & Mohammadkhani, 2012).

Various researches have been conducted in Pakistan and abroad that have focused on the psychological deprivations of abandoned and orphaned children but not a lot of work has been done on their own evaluation of their lives that is, whether they perceive their life to be satisfying or do they enjoy their existence or not? (Farooqi & Intezar, 2009).

This study attempts to understand what is the assessment of institutionalized orphaned and abandoned children regarding their subjective well-being? The study goes a step further to investigate whether using positive psychology interventions can help in improving the subjective well-being of these children. This study is

an endeavor to recognize whether these children can move forward living their lives fully despite of their childhood scars?

Orphan hood and abandonment are traumatic experiences especially for the child as well as for the family and the society as a whole. While setting the foundation for socially deviant behavior, it affects adversely both the present and the future of a child. Orphanhood has long been studied in relation to a number of variables (Farooqi & Intezar, 2009). However, not much work is done on improving the quality of life of this group.

With the growing popularity of Positive Psychology, the concept of subjective well-being is gaining wide acceptance. Past researches have highlighted that orphaned and abandoned children rate themselves as lesser happier and more hopeless than non-orphans that is, they report lesser subjective well-being. The present study attempts to go a step further. It aspires to test the efficacy of positive psychology interventions, such as gratitude giving, increasing positive affect and decreasing negative affect in increasing the subjective well-being of abandoned and orphaned females. It is therefore hypothesized that positive psychology interventions would help in increasing the subjective well-being of institutionalized abandoned and orphaned females.

### Method

# Research Design

In the current study a pre-post quasi experimental design was used, the participants received pre-test followed by 6 group sessions of positive psychology interventions then a post-test. The pre-post tests were conducted to test the efficacy of the interventions.

## **Participants**

Through purposive convenient sampling a total of N=30 orphaned and abandoned females residing in two Non-Government Organizations in the city of Karachi, Pakistan were approached. The age range of the participants was from 13-19 (M=14.15) years and their stay at the institute was 5-7 (M=5.7) years long.

As an inclusion criterion only those females were approached whose ages were between 13-19 years had access to basic education. It was made sure that all the participants of the study were fluent in communicating and writing in Urdu (the national language) and had been institutionalized for a minimum of two years at least. Prior history of any psychological/psychiatric problem was used as an exclusion criterion where those females with such history were not included in the study. The details of the demographic variables is given below in Table 1

**Table 1**Percentages of the Demographic Characteristics of the Participants N=30

Demographic Characteristics	Percentages (%)
Reason for being Institutionalized	
Abandoned	28.3
Orphaned	71.7
Number of Siblings at the Institute	
0	40
1	28.3
2	20
3	11.7
Educational Level	
Primary	43.3
Secondary	41.7
Matriculation	15 %

The mentioned table provides details about the demographic characteristics of institutionalized orphans and abandoned females.

### Measures

Following measures had been used in the current study.

**Demographic information interview.** The demographic information of participants was obtained through a structured interview which inquired about the age, educational qualification, and family history, number of years since institutionalization and

presence of other siblings in the institution. The interview also probed about other variables such as a past history of psychological problems, on the basis of which inclusion and exclusion criterion was decided for the participants to be selected as part of the sample for the present research.

**Satisfaction with life scale** (1985). The Satisfaction with Life Scale (Diener, Emmons, Larsen & Griffen, 1985) is a short 5-item questionnaire which measures the global cognitive judgments of satisfaction with one's life. All items are rated on a seven point scale ranging from 1= strongly disagree to 7 = strongly agree.

Scale of positive and negative experience (2009). The Scale of Positive and Negative Experience (Diener, et al., 2009) is a 12-item questionnaire which includes six items to assess positive feelings and six items to assess negative feelings. All items are rated on a five point scale ranging from 1 = Very rarely or never to 5 = Very often or always. The scale can be used to get scores of positive and negative feelings and can also be used to get an overall affect balance score ranging from -24 to 24.

### **Procedure**

The data for the present study was collected after taking an official approval from the authorities of the orphanages. The approval was conditional to the maintenance of confidentiality of the organizations by keeping them anonymous. Verbal consent was taken from all the participants with clarification of the purpose and procedure of the study. In the first phase of the study the preintervention measures, that is, the Demographic Information Interview, Satisfaction with Life Scale (Diener, Emmons, Larsen & Griffen, 1985) and The Scale of Positive and Negative Experience (Diener, et al., 2009) were administered on all the participants in an interview format by the researcher.

After the calculation of the scores the participants who scored low on both scales were then subjected to receive 6 group sessions utilizing positive psychology interventions focusing on increasing their subjective well-being. The participants were

further divided into two groups of 15 each to carry the interventions efficiently. The group therapy sessions were conducted once a week and their duration was of two hours. A follow-up session was also conducted post completion of the group sessions.

In the third phase of the study a post-test consisting of the same variable measures was conducted to test the efficacy of the interventions. The results obtained were then compared quantitatively by using Statistical Package for the Social Sciences (version 21).

An outline for the six sessions utilizing positive psychology interventions for enhancing the subjective well-being is provided below.

 Table 2

 Session Plan of Positive Psychology Interventions

Sessions	Aims & Objectives	Interventions			
1	To get the group to know each other	Check-in Ground Rules			
	To form the ground rules	I am Special Badges			
	Help the group members				
	respect themselves.				
2	Increasing expression of	Check-in			
	gratitude.	Gratitude List and Gratitude			
	Providing participants with	Partner			
	material that they could build	Feel Good File			
	upon and keep getting back to	Check-out			
	incase of stressors				
3	Increasing expression of	Check-in			
	gratitude by focusing on	Gratitude Letter to self			
	one's strengths.	Check-out			
4	To help the participants	Check-in			
	understand how their	Acts of Kindness			
	happiness can be enhanced	Best Possible Future Selves			
	by making other's happy and	Check-out			
	by visualizing their best possible future selves.				

Sessions	Aims & Objectives	Interventions			
5	The aim of this session was to prepare the clients for the termination of the group sessions.	Check-in Summarizing Sessions Using interventions as coping interventions Check-out			
6	To provide a closure to the sessions and to help the participants take with them all that they had learnt in the previous sessions.  Saying goodbyes and evaluating the progress of each participant.	Check-in Sharing individual experience Saying good bye to group members Farewell Party			
	each participant.				

The above mentioned table explains the objectives of each session with the positive psychology interventions have been used to achieve those objectives.

## **Results**

A paired-sample test was performed to test the efficacy of the positive psychology intervention on the subjective well-being of institutionalized orphans and abandoned females.

**Table 3**Descriptive Statistics of the Study Variables (N=30)

Variables	N	М	SD
Post Satisfaction With Life	30	20.86	4.46
Pre Satisfaction With Life	30	12.26	3.83
Post Positive Feelings	30	24.03	2.23
Pre Positive Feelings	30	15.83	3.76
Post Negative Feelings	30	9.90	3.22
Pre Negative Feelings	30	20.36	4.20
Post Affect Balance	30	14.13	3.61
Pre Affect Balance	30	-4.53	6.91

Table 3 provides descriptive statistics including mean and standard deviation of the four components of subjective well-being in the pre and post intervention phase.

**Table 4**Pre-post Paired Samples T-test of Subjective Wellbeing of the Institutionalized Orphans and Abandoned Females (N=30)

Variables	N	М	SD	t	df	p	r
Post Satisfaction With Life	30	20.86	4.46				
Pre Satisfaction With Life	30	12.26	3.83	7.67	29	.01	2.06
Post Positive Feelings	30	24.03	2.23				
Pre Positive Feelings	30	15.83	3.76	9.81	29	.01	2.65
Post Negative Feelings	30	9.90	3.22				
Pre Negative Feelings	30	20.36	4.20	-11.93	29	.01	2.79
Post Affect Balance	30	14.13	3.61				
Pre Affect Balance	30	-4.53	6.91	13.15	29	.01	3.38

Table 4 indicates that there is a significant difference in the subjective well-being of participants before and after the application of positive psychology interventions. The difference is large in positive feelings, negative feelings, affect balance and moderate in satisfaction with life.

#### **Discussion**

Positive psychology formally began with Seligman's 1998 Presidential Address to the American Psychological Association. The field developed in the new millennium as a movement within psychology and aimed at enhancing the human potential and motivated individuals to lead fuller and more satisfying lives. Today, increasing number of individuals are searching for information on how to lead more fulfilled and happier lives utilizing their full potential.

With the popularity of this field, positive psychology interventions are now being used by mental health professionals as a complementary strategy in mental health promotion and treatment. With continued development in this field in the West, positive psychology still continues to be neglected in this part of the world. Numerous studies, as mentioned above have supported the efficacy of positive psychology interventions with various populations and this study aimed at testing their efficacy in increasing the subjective well-being of institutionalized abandoned and orphaned females.

Institutionalized abandoned and orphaned females were specifically selected as research participants for the present study as this group is more vulnerable to developing emotional and social problems compared to males (Majeed, Khan & Khan, 2015). Institutional care lacks the touch of a family environment and fails to provide young girls with suitable role models during their upbringing which leads to a failure to establish emotional bonds in adulthood (Ali, 2013). The nurturing nature of females demands close relationships with others however, this is not readily available at orphanages and therefore females residing at orphanages experience lesser subjective well-being and consider themselves as more disadvantaged than the rest.

Based on the available research evidence it was hypothesized that positive psychology interventions would help in increasing the subjective well-being of institutionalized abandoned and orphaned females. The scientific observation and analysis of the data provides the evidence that positive psychology interventions are effective in increasing the subjective well-being of institutionalized abandoned and orphaned females. Thus the hypothesis is supported by the data and is highly significant. The results of hypothesis are shown in Table 4.

The increasing numbers of orphaned and abandoned children have led to a rise in the development of institutions which provide for their care and basic necessities. The effects of being institutionalized have been studied in detail out of public interest and concern about the safety of children who are not given a single caretaker to provide for their needs and therefore are deprived of the essential conditions for healthy emotional development.

As mentioned earlier various researches have been done on the deprivations of these individuals but not a lot of work has been done on their evaluation of their lives that is, their subjective wellbeing. Limited literature is available on the subjective well-being of institutionalized abandoned and orphaned females and a great majority of such research done till date is in other countries (Himaz, 2009; Mostafaei, Aminpoor & Mohammadkhani, 2012; Adu, 2011). Even though the problem of abandoned and orphaned females is no less in Pakistan than in other countries, research attempts in this field are meager in Pakistan.

The present study not only attempted to understand how institutionalized orphaned and abandoned females assess their sense of well-being subjectively but also went a step further to investigate the efficacy of positive psychology interventions in improving the subjective well-being of these children and therefore developed a six session group module utilizing such interventions. The results of the present study showed the efficacy of these interventions in increasing the subjective well-being of institutionalized abandoned and orphaned females. The results further prove that positive psychology interventions are suitable for the Pakistani culture.

### Conclusion

In the light of the previous discussion it can be concluded that positive psychology interventions are effective in increasing the subjective well-being of institutionalized abandoned and orphaned females. This study highlights the value of simple positive psychology interventions in increasing the subjective well-being of abandoned and orphaned children. These interventions are practical, cost effective and lesser time consuming and therefore reap more benefits compared to other interventions. The practical nature of these interventions doesn't require a lot of training on the

part of the administrator and they can be easily used by nonprofessionals with minimum training. The interventions can be used at large by various people and can extend beyond the selected population and can benefit the society at large.

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