



“A Study to Assess the Social Skills Among Destitute Children at Selected Home, Puducherry”

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Abstract

Background: Destitute children, lacking adequate parental care and resources, often experience deficits in social skills, which are essential for effective communication, cooperation, empathy, and problem-solving. Institutional care can provide safety but may not always facilitate optimal social development. This study aimed to assess the social skills of destitute children at Jaly Home, Krishna Nagar, Puducherry, and determine their association with selected socio-demographic variables.

Methods: A quantitative descriptive research design was adopted. The study included 50 children aged 6–17 years, selected through convenience sampling based on predefined inclusion criteria. Data were collected using a demographic questionnaire and a 38-item Social Skills Checklist covering conversational skills, problem-solving, emotional understanding, giving/receiving compliments, and flexibility. Scores categorized social skills as poor, low, moderate, or good. Descriptive statistics summarized the findings, and chi-square tests assessed associations between social skill levels and demographic factors.

Results: Among participants, 58% exhibited moderate social skills, 26% had good skills, and 16% demonstrated low skills; none fell into the poor category. The sample was predominantly male (56%), aged 10–14 years (44%), with most having secondary education (66%), from nuclear families (64%), and belonging to poor socio-economic backgrounds (94%). The majority resided in urban areas (78%), with poor socio-economic status being the main reason for admission (80%). No statistically significant associations were found between social skill levels and demographic variables, including age, gender, education, religion, number of siblings, family type, socio-economic status, nature of residency, duration of stay, and reason for admission ($p > 0.05$).

Conclusion: Most destitute children in this study possessed moderate social skills, but targeted interventions are essential to foster higher-level competencies. The findings underscore the need for structured social skill development programs in institutional care. These results have important implications for nursing practice, education, administration, and research aimed at enhancing the holistic development of vulnerable children.

Key words: Destitute children, Destitute home, social skills

I. INTRODUCTION

Children constitute the most vulnerable section of society and are considered a supremely important asset of our nation. Safeguarding the rights of our children is the primary responsibility of each and every individual member of the society. Any child without getting proper care even if his/her parents are alive, will be called as destitute child. Quite a substantial portion of our population is poor and socially incapacitated. Therefore, children are always in need of protection within the conditions under which they live.

Children with a strong emotional foundation in the early years have a better ability capacity to manage everyday social interactions later in life. Social emotional development empowers kids to grow self-aware and confident, to manage difficult emotions and impulses, and to embody empathy, which helps improve their educational attainment and promotes their mental health.

Social skills are the skills we use every day to interact and communicate with others. They include verbal and non-verbal communication, such as speech, gesture, facial expression and body language. A person has strong social skills if they have the knowledge of how to behave in social situations and understand both written and implied rules when communicating with others.

Social skills are important because they can help us communicate more effectively and efficiently. Social skills are the essential tools that enable us to build and maintain rewarding relationships. They empower us to navigate social situations with confidence, make sound decisions, and communicate effectively with others. The ability to master social interactions has a profound impact on various aspects of life, including academic achievement, behaviour, family and social relationships, and participation in extracurricular activities.

Studies show that a lack of social skills can lead to poor outcomes in child development. It can hinder their ability to create relationships, affect their adjustment at school, lead to loneliness, and cause behavioural problems in the future. This is why it is important to instill social skills in children early on in life.

The issue of destitute children in India is a significant social problem that has been prevalent in the country for many years. A child without adequate food, shelter, and other necessities of life can be called a destitute child. These children often come from poor families or have been abandoned or orphaned.^{[13][12]} According to a report by UNICEF, there are an estimated 20 million children in India who are either abandoned or living on the streets. These children are forced to fend for themselves and are exposed to various forms of exploitation, including child labor, trafficking, and abuse.

The studies show that institutional care always cause a lower quality of life and lower quality of services than those provided in the community and often gives rise to social exclusion and segregation for life. When one's family is substituted by an institutional authority, in which quite often one-sided and formal work with trainers is performed, they are denied an opportunity to act and resolve their everyday life problems independently, to try out various roles, to draw experience from life, which in its turn does not create favourable conditions for the development and expression of a socially active personality, makes it more difficult to acquire skills which are necessary when living independently. So, it is important to analyse the social skills of children living in such homes.

II. NEED FOR THE STUDY

Across the world, millions of children face homelessness or live without adequate parental care, often resulting in poor social and emotional development. In the USA, around 11 million children are homeless, with many placed in inappropriate detention facilities for minor offenses. Some states are now shifting from incarceration toward community-based programs. In Europe and Central Asia, nearly half a million children live in residential care—twice the global average—where institutional upbringing is linked to higher risks of homelessness, crime, and poor social skills. Similarly, in Africa, about 35 million children lack parental care, leading to substance abuse, mental health problems, limited education, and developmental issues, especially for those raised in large, impersonal institutions.

India has approximately 440 million children, with around 170 million (40%) considered vulnerable, and at least 20 million facing extreme risk and requiring urgent support. Institutional care remains a major component of child protection and rehabilitation, with over 2.5 lakh children residing in 7,163 Child Care Institutions (CCIs) across the country. However, studies highlight significant challenges within these institutions, including inadequate alternative care, poor infrastructure, lack of trained personnel, outdated skill training programs, and weak parent-child relationships.

A survey conducted by the Greater Chennai Corporation (GCC) in 2018 revealed there were 2,361 children experiencing homelessness in the city of Chennai. A study carried out in Tamil Nadu looked into the factors associated with care of children in CCI. Various dimensions of quality of life namely physical, psychological, social relationship and environment were assessed and found to be moderately satisfactory, emphasising the need for improvement in CCI's (Khumar & Rangasami, 2020).

There are 47 registered child care institutions in the Union Territory of Puducherry. And approximately 2000 children are admitted in these institutions altogether. Here also studies indicates that children are mainly seems to be deprived socially, rather than physically.

Assessing social skills can help identify areas where destitute children require support, enabling targeted interventions to enhance their social functioning. The study's findings can inform policy and practice developments aimed at supporting destitute children's social skills development and overall well-being. Developing social skills in childhood can have a positive impact on future relationships, education, and employment outcomes.

Statement of the problem

A study to assess the social skills among destitute children at selected home, Puducherry

Objectives of the study

- To assess the knowledge of social skills among destitute children
- To associate the social skills among destitute children with selected socio-demographic variables

III. RESEARCH METHODOLOGY

The present study adopted a quantitative research approach with a descriptive research design to assess the social skills among children residing at Jaly Home, Krishna Nagar, Puducherry. The study was conducted at Jaly Home, Krishna Nagar, Puducherry, and the population consisted of all children residing in the institution. The sample included children who met the inclusion criteria, and the sample size comprised 50 children, which was determined using an appropriate sample size calculation formula. A convenience sampling technique was used to select the participants for the study. The inclusion criteria included children aged between 6 and 17 years who were residing at Jaly Home, Krishna Nagar, Puducherry, and who were willing to participate in the study. The exclusion criteria included children who were not willing to participate, those who were not available during the period of data collection, and children with physical disabilities. This methodological framework was considered appropriate for assessing the level of social skills among children in the selected institutional setting.

Description of the tools

Section A: Demographic variables; Demographic variables include age, gender, educational qualification, religion, number of siblings, type of family, socio economic status, nature of residency, duration of stay in home, reason for admission in the destitute home.

Section B: Social skill checklist: Social skill checklist with 5 sections viz. conversational skills, problem solving, understanding emotions, complements and flexibility. A total of 38 questions with scores 1 to 4 are used to denote the responses.

LEVEL	SCORE RANGE
Poor social skills	1-38
Low social skills	39-76
Moderate social skills	77-114
Good social skills	115-152

Data collection procedure

After obtaining formal permission, the researcher proceeded with data collection. Informed consent was obtained from children in Jaly Home, Krishna Nagar, Puducherry who fulfil inclusion criteria. The sample consists of 50 children, which was selected using a convenient sampling technique. Demographic data was collected. Social skills were assessed using social skill checklist. The investigator assured the study participants that the study information will be kept confidential.

Plan for data analysis

The collected data were coded and analysed by using descriptive Statistics. The analysis of data was done by the following methods.

1. Demographic variable of children was analysed by using frequency and percentage distribution.
2. Assessment of social skills was by using frequency and percentage distribution.

IV. RESULT

The sample was predominantly male (56%), aged 10–14 years (44%), with most having secondary education (66%), from nuclear families (64%), and belonging to poor socio-economic backgrounds (94%). The majority resided in urban areas (78%), with poor socio-economic status being the main reason for admission (80%).

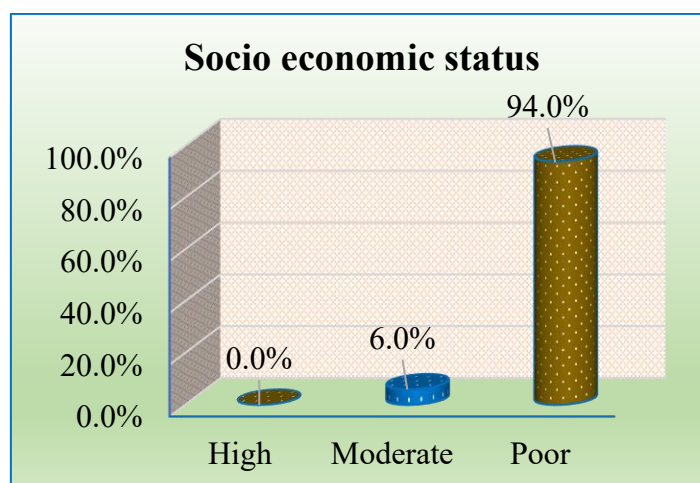


Figure 1: Percentage wise distribution of children according to socio economic status.

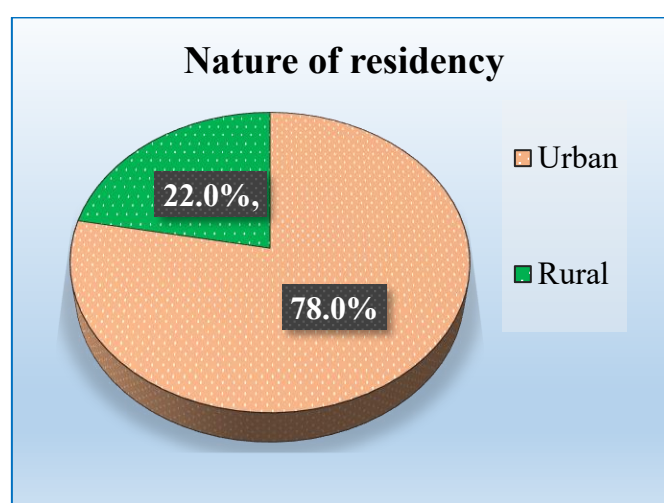


Figure 2: Percentage wise distribution of children according to nature of residency.

Frequency and percentage wise distribution of the level of the social skills among destitute children.

S. No	Level of the social skills	Frequency	%
1	Poor social skills	0	0
2	Low social skills	8	16
3	Moderate social skills	29	58
4	Good social skills	13	26

Table shows the frequency and percentage distribution of the level of social skills among destitute children. The majority of children (58%) exhibited a moderate level of social skills, while 26% had a good level of social skills. A smaller proportion, 16%, demonstrated a low level of social skills, and notably, none of the children were found to have a poor level of social skills.

The findings reveal that there was no significant association between age, gender, educational qualification, religion, number of siblings, type of family, socio economic status, nature of residency, duration of stay in home and reason for admission to destitute home with the level of social skills.

V. DISCUSSION

Regarding the first objective, which was to assess the social skills among destitute children, the findings of the present study revealed that the majority of children (58%) exhibited a moderate level of social skills, while 26% demonstrated a good level of social skills. A smaller proportion (16%) showed a low level of social skills, and notably, none of the children were categorized as having a poor level of social skills. These findings are consistent with the results of Anitha and Joseph (2021) assessment of social skills among orphaned and vulnerable children in institutional care settings in South India.

The second objective was to determine the association between social skills and selected demographic variables among destitute children, the present study revealed that there was no statistically significant association

between social skills and variables such as age, gender, educational qualification, religion, number of siblings, type of family, socio-economic status, nature of residency, duration of stay in the home, and reason for admission to the destitute home. These findings are supported by Raj, L., & Menon, S. (2022). Relationship between demographic factors and social functioning among institutionalized children in Southern India.

VI. CONCLUSION

The present study concludes that the majority of destitute children possessed a moderate level of social skills, with only a few demonstrating good or low levels, and none exhibiting poor social skills. Furthermore, the study found that the level of social skills was not significantly influenced by demographic factors such as age, gender, educational qualification, religion, number of siblings, type of family, socio-economic status, nature of residency, duration of stay in the home, or reason for admission. These findings highlight the need for targeted interventions to enhance social skills among destitute children, irrespective of their demographic background.

Nursing Implications

The findings of the study have implications for various areas of nursing practice, nursing education, nursing administration, and nursing research, particularly in promoting and supporting the social development of destitute children.

Nursing Practice

- The study results can help nursing personnel understand the social challenges faced by destitute children and their varying levels of social skills.
- Nurses can provide appropriate emotional and psychological support to improve social interaction, communication, and adaptation skills among these children.
- Nurses can screen for social skill deficits in destitute children using simple observational tools or checklists during routine care.
- Nurses can offer emotional support and guidance to children with poor social adjustment or interpersonal issues.

Nursing Education

- Nursing students can be trained in effective assessment and intervention strategies to enhance social skills among vulnerable child populations, such as destitute children.
- Education can emphasize the use of observation and assessment tools to identify social skill deficits and design supportive activities to promote social development.
- Train students in therapeutic communication, especially for engaging children with low social adaptability.
- Use role-play or real-case simulations to teach nursing students how to assess and promote social skills in vulnerable children.

Nursing Administration

- Nursing administrators can implement programs that train nursing staff in fostering social skills through structured group activities, play therapy, and interpersonal interactions.
- Administrators can facilitate workshops and awareness sessions in child care settings to sensitize caregivers about the importance of nurturing social competence among destitute children.
- Administrators can draft institutional guidelines for regular screening and promotion of social skills in child care homes.
- Provide periodic workshops for nursing and caregiving staff on child behavior management and developmental milestones.

Nursing Research

- This study provides a basis for further research into the social development needs of destitute children and the effectiveness of interventions aimed at improving their social skills.
- The findings contribute to evidence-based nursing practice by offering insights for planning targeted programs to enhance social functioning and overall well-being in destitute children.
- Conduct research on the effectiveness of specific nursing-led programs (e.g., play therapy, group counselling) in improving social skills.

Recommendations

- Similar studies with larger sample sizes can be conducted in different settings to validate and generalize the findings.
- Intervention studies may be undertaken to evaluate the impact of specific nursing-led programs on improving social skills among destitute children.
- Develop educational materials and activity guides for caregivers and staff in destitute homes to help them foster healthy social interactions and skills in children.
- Encourage students to conduct mini-projects or case studies on social development in institutionalized settings.

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