

**RESILIENCE, SOCIAL SUPPORT AND SELF-ESTEEM IN
RELATION TO BEHAVIORAL PROBLEMS OF
ADOLESCENTS WITH SINGLE PARENT**

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DECLARATION

I do announce that the research work entitled “Resilience, Social Support and Self-Esteem in relation to Behavioral problems of Adolescents with Single Parent” has been presented by me under the direction of Dr. Zahoor Ahmad Lone, Assistant Professor School of Social Sciences & Languages, Lovely Professional University, Phagwara, Punjab, according to the full prerequisite for the honor of the level of Doctor of Philosophy (Ph.D.) in Psychology. It is altogether my work. All thoughts & references have been properly recognized. It doesn't contain any work which has been submitted for the honor of some other degree or confirmation for any other college or university.



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ABSTRACT

The objective of present study is to explore resilience, social support & self-esteem in relation to behavioral problems of adolescents with single parent. The sample of the research work comprised of the school going middle age adolescents, studying in class 9th & 10th from schools selected from the five districts of state Haryana. For measuring resilience, Connor Davidson scale (2003) was used. Social support of adolescents was analyzed by using Interpersonal support evaluation list, ISEL (Cohen et al. 1985). Rosenberg's self-esteem scale measured the self-esteem of adolescents chosen as a sample. Youth Self-Report given by Achenbach in 2001 was used to assess the behavioral problems of adolescents. The statistical techniques employed in this study included correlation analysis, conduction of independent sample test & regression analysis (Hayes's process) for moderation. The results summarized in different Tables & figures are shown in chapter-4.

The findings of the study are presented below-

On the basis of Descriptive Analysis

1) Results of the study for descriptive analysis on the basis of the resilience indicated that 48.75% of the adolescents of single & intact families scored low & 12.5% high on resilience scale (Connor & Davidson, 2003). Rest of the adolescents had intermediate resilience (38.75%). Majority of adolescents of the single parent families (out of 200) belonged to the group of low resilience individuals. This accounts for 83% of the respondents belonging to single parent families. Only 2% of the adolescents in the single parent families had high resilience. Rest of the respondents (15%) was enlisted in the category of intermediate resilience. Adolescents of intact families were also analyzed for their resilience. It was found that 23% of the adolescents had high resilience. Majority of the adolescents (62.5%) of intact families were classified into individuals with intermediate resilience. 14.5% of adolescents in the intact families were low in resilience.

2) A brief analysis of the social support possessed by 400 middle age adolescents selected as the sample of study was conducted. As inferred from the examination, out of the total sample, 174 adolescents had adequate social support. 38 adolescents possessed low social support. Rest of the 188 adolescents belonged to the category of medium social support. Further it was investigated that out of 200 adolescents, selected as a sample from single parent families 37 adolescents were having low social support. Maximum number of adolescents (137) was having medium social support. Adolescents found with adequate social support were only 26. This is due to the effects of the single parenting on a child. Overview of the support gathered by adolescents of intact families indicated that the family configuration in intact families, itself poses for a strong social support, which accounts for adolescent's psychological well-being. The results have shown that 148 respondents out of 200 possessed good social support. This account to 74% of the adolescents. Only a single child was having less social support. Rest of the children taken as the sample (51) had medium social support.

3) Children have varying degrees of self-esteem which is governed by many elements like sexual orientation, family type & personal history. Identification of the core factors that decreases self-esteem is important. Analysis of the results for self-

esteem indicates that most of adolescents (186) out of 400 chosen as the sample had moderate self-esteem. Fifty seven respondents possessed high self-esteem. Rest of the respondents (157) belonged to the low esteem category. In single parent families, children live a disturbed life therefore quite often it is seen that they have low confidence. Overview of the self-esteem of 200 adolescents belonging to single parent families has shown that 130 students out of 200 i.e. 65% were low at self-esteem. 1% adolescents were categorized to possess high self-esteem. Rest of the adolescents (68) was having moderate self-esteem. In comparison to single parent adolescents (130 belonged to low esteem category). Only 27 adolescents from intact families were found low in self-esteem. Fifty five adolescents from intact families scored high on this scale. Reason for high self-esteem in adolescents with intact parents is the presence of less parental sternness & more of affection from both the parents, which accounts to more of support. 118 respondents of intact families, possessed moderate self-esteem.

4) Behavioral problems of 400 adolescents (middle age) studying in class 9th & 10th selected as a sample were assessed after calculating Q3 (84.29) & Q1 (37.9) values. Categories of adolescents on the basis of behavioral problems were identified as mild, borderline & severe. In all, out of a total sample of 400 respondents, 80 were grouped as 'mild' & 84 were enlisted in the 'severe' category. The greater part of the respondents i.e. 236 were found to be in 'borderline category'. Adolescents born in single parent families get less support from the family. It was found that 39 % (78 out of 200) of the adolescents of single parent families were suffering with severe behavioral problems. Only 6% (12 out of 200) of the adolescents belonged to the category of mild behavioral problems. 110 adolescents were at borderline group. Single parent families need more attention & help in this regard. It was also found that only 3% (6 out of 200) children of intact families can be grouped in the category of severe behavioral problems out of the total sample of 200 adolescents. 34% adolescents possessed mild problems, in their behavior. Rest 63% adolescents were included in borderline category. This can be attributed to the concern & care the adolescents receive from both of the parents.

Results on the basis of Inferential statistics

Results presented as per objectives are as follows-

- 1) On the basis of the 't' test performed results has shown the significant gender differences (at 0.01 & 0.05 levels) among the adolescents of single parent, for their resilience, social support & self-esteem. Female adolescents were found to be more resilient belonging to single parent families as compared to the male adolescents. This can be attributed to their ability to acquire more support in society which accounts for more of self-esteem as compared to male adolescents.
- 2) From the findings it was observed that female & male adolescents of single parent families differ significantly at 0.01 level with regard to their behavioral problems.
- 3) Calculations also indicated the significant difference for behavioral problems of adolescents of single & intact families. The changes in a family from two parents to single parent family increases the behavior related tribulations in long run among children.
- 4) Significant 'p' values for the explanation of the differences in variables viz. resilience, social support & self-esteem for the adolescents of the single & intact parent families were obtained.
- 5) The variables selected for the present study, viz. resilience, social support & self-esteem were found to be positively correlated. Relationships of resilience, social support and self-esteem with behavioral problems in adolescents of single parent family were found to be negative which indicates that these variables are helpful in decreasing the negative outcomes experienced by children of such families which are devoid of support. Generalization can be made that for strengthening the child's coping in strain or pressure it is essential to raise resilient children with adequate self-esteem & proper social support.
- 6) Results of regression analysis reflected the role of social support as a moderator for relationship between resilience and behavioral problems. Low value of variance calculated indicates that resilience correlated with the behavioral problems does not clarify variability in the reliant or dependent variable.
- 7) Results revealed the effects of moderation with the social support corresponding to self-esteem on the behavioral or conduct issues of the adolescents with single parent to be insignificant. Although it is true, that such children possess less support in traumatic conditions in the family thus show more negative psychological outcomes along with problems in their behavior.

The value of variance was also found to be low for problems in behavior in relation to self-esteem.

Fifth chapter consists of conclusions, suggestions & implications of the present study for schools which can turn as correctives for children deficiencies in their behavior. Findings of the research work implicates that formal programs can be conducted by the school authorities to create climate of trust & learning for the social support at each level provided by them. In this way students can be more assertive & responsible. They can serve as the foundation for overall development of students. Support provided by the educators can stabilize this foundation. Most importantly the present study recognizes the importance of children being raised with help of both parents.

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(TAMANNA RATHEE)

CONTENTS

Particulars	PAGE NO.
Declaration	i
Certificate	ii
Abstract	iii-vii
Acknowledgements	viii
List of Contents	ix-xiii
List of Tables	xiv-xv
List of Figures	xvi-xvii
List of Appendices	xviii
CHAPTER-1 INTRODUCTION	1-29
1.1 Resilience	2
1.1.1 Resilience & Social Support	6
1.1.2 Resilience & Self-esteem	6
1.1.3 Resilience & Behavioral Problems of Adolescents	7
1.1.4 Resilience & Single Parenting	8
1.1.5 Programs useful for Fostering Resilience	11
1.2 Social Support	11
1.2.1 Social support & Behavioral Problems in Adolescents	12
1.2.2 Biological Pathways Related to Social Support	14
1.2.3 Social Support & Single Parenting	14
1.3 Self-Esteem	15
1.3.1 Effects of Self-Esteem	16
1.3.2 Self-esteem & Psychology	17
1.3.3 Place of Esteem in various Theories	18
1.3.4 Self-esteem & Behavior of an Adolescent	19
1.3.5 Self-Esteem & Single Parenting	20
1.4 Single Parenting	20
1.4.1 Coping Strategies Adopted by Single Parent	22
1.4.2 Changes faced by Children of Single Parent Families	22
1.4.3 Single Parenting & Behavioral Problems	23
1.4.4 Gender Differences in Adolescents with Single Parent	25
1.4.5 Steps for Improvement in Life of Adolescents	25

	1.4.6 Rethinking the Concept of Single Parent Families	27
	1.5 Implications of the Study	28
	SUMMARY	28-29
CHAPTER-2	REVIEW OF LITERATURE	30-83
	2.1 Studies in Relation to Resilience	30
	2.2 Studies in Relation to Social Support	40
	2.3 Studies in Relation to Self-esteem	47
	2.4 Studies in Relation to Single parenting	55
	2.5 Rationale of the Study	75
	2.6 Objectives of the Study	82
	2.7 Hypotheses of the Study	82
	2.8 Delimitations	83
CHAPTER-3	METHODS & MATERIALS	84-104
	3.1 Variables	84
	3.2 Research Design	84
	3.3 Population & Sample	85
	3.4 Distribution of Sample	89
	3.5 Description of Tools	94
	3.5.1 Connor-Davidson Resilience Scale (CD-RISC)	94
	3.5.1.1 Content of the Scale	95
	3.5.1.2 Psychometrics of the Scale	96
	3.5.1.3 Scoring of the Scale	96
	3.5.2 Interpersonal support evaluation list (ISEL-12)	96
	3.5.2.1 Description of the Measure	97
	3.5.2.2 Psychometrics of the Measure	97
	3.5.2.3 Scoring of the Measure	98
	3.5.3 Rosenberg's Self-Esteem Scale (RSES)	98
	3.5.3.1 Description of the Scale	99
	3.5.3.2 Psychometrics of the scale	100
	3.5.3.3 Scoring of the scale	100
	3.5.4 Youth Self-Report (YSR)	101
	3.5.4.1 Psychometrics of YSR	103
	3.5.4.2 Scoring of YSR	103

	3.6 Procedure of Data Collection	103
	3.7 Statistical Techniques	104
CHAPTER-4	ANALYSIS, INTERPRETATION OF DATA AND DISCUSSION OF RESULTS	105-156
SECTION I	4.1 Descriptive Statistics & Analysis	107
	4.1.1 Assessment of Resilience	107
	4.1.1.1 Examining Resilience in Adolescents of Single Parent	109
	4.1.1.2 Overview of the Resilience in Adolescents with Intact Family	110
	4.1.2 Analysis of Social Support	112
	4.1.2.1 Assessment of the Social Support for Adolescents with Single Parent	114
	4.1.2.2 Overview of the Social Support for Adolescents, Intact Families	116
	4.1.3 Exploration of Self-esteem of Adolescents	118
	4.1.3.1 An Overview of Self-esteem of Adolescents with Single Parent	120
	4.1.3.2 Analysis of Self-Esteem of Adolescents with Intact Families	121
	4.1.4 Overview of Behavioral Problems of Adolescents	124
	4.1.4.1 Assessment of the Behavioral Problems of Adolescents with Single Parents	126
	4.1.4.2 Analysis of Behavioral Problems of Adolescents (Intact Families)	128
SECTION II	4.2 Gender Differences between Resilience, Social Support, Self-esteem & Behavioral Problems of Adolescents with Single Parents	130
	4.2.1 Analysis of Gender Differences on basis of Resilience, Social Support & Self-esteem	130
	4.2.1.1 Differences on basis of Resilience	131
	4.2.1.2 Examining Gender Differences on basis of Social Support	132
	4.2.1.3 Gender Differences in Adolescents on basis of Self-esteem	133
	4.2.2 Analysis of Gender Difference on basis of Problems Behavioral Problems	134
SECTION III	4.3 Study of the Differences in Behavioral Problems, Resilience, Social Support and Self-esteem of Adolescents of Single & Intact Families	137

	4.3.1 Examining the significant differences in the Behavioral Problems of Adolescents(400)	137
	4.3.2 Analysis of the significant differences in Resilience, Social Support & Self-esteem in Single and Intact parent families	139
SECTION IV	4.4 CORRELATIONAL ANALYSIS	142
	4.4.1 Resilience & Social Support	143
	4.4.2 Resilience & Self-esteem	145
	4.4.3 Resilience & Behavioral Problems	146
	4.4.4 Social Support & Self-esteem	147
	4.4.5 Social support & Behavioral Problems	148
	4.4.6 Self-esteem & Behavioral Problems	149
SECTION V	4.5 Moderation of Social Support, in Relation to Resilience & Self-esteem on Behavioral Problems of Adolescents	151
	4.5.1 Moderating effect of Social Support in relation to Resilience on Behavioral Problems of Adolescents with Single Parents	152
	4.5.2 Moderating effect of Social Support in relation to Self-esteem on Behavioral Problems of Adolescents with Single Parents	154
CHAPTER-5	FINDINGS, EDUCATIONAL IMPLICATIONS & SUGGESTIONS FOR FURTHER RESEARCH	156-167
	5.1 Findings	156
	5.1.1 Findings based on Descriptive Analysis	156
	5.1.2 Findings on the basis of Objectives	159
	5.2 Educational Implications	161
	5.3 Implications for Single Parents	164
	5.4 Role of Society	164

	5.5	Suggestions for future research	164
	5.6	Conclusions	165 -166
		BIBLIOGRAPHY	167-197
		APPENDICES	199-208
		LIST OF PUBLICATIONS	209-211

LIST OF TABLES

TABLE NO.	DESCRIPTION	PAGE NO.
3.1(a)	Distribution of Sample: Jind District (Central Zone of Haryana)	89
3.1(b)	Distribution of Sample: Sirsa District (Western Zone of Haryana)	90
3.1(c)	Distribution of Sample: Karnal District (Eastern Zone of Haryana)	91
3.1(d)	Distribution of Sample: Panchkula District (Northern Zone of Haryana)	92
3.1(e)	Distribution of Sample : Rewari District (Southern Zone of Haryana)	93
3.2	Five Factors of CD-RISC (2003)	95
3.3	Reliability Coefficients of the Items (Subscales-ISEL-12)	97
4.1	‘z’ Scores for predicting Normality of the Sample	107
4.1.1	Scores Distribution to Measure Resilience	108
4.1.1.1	Frequency Distribution of Scores on Resilience Scale (Adolescents: Single Parent)	109
4.1.1.2	Distribution of Scores for Measuring Resilience (Adolescents: Intact Family)	111
4.1.2	Distribution of Scores of Adolescents (ISEL-12)	113
4.1.2.1	Frequency Distribution of Scores of Adolescents with Single Parent on Interpersonal Support Evaluation List	115
4.1.2.2	Distribution of Scores of Adolescents (ISEL-12) (Intact Parents)	117
4.1.3	Categorization of Adolescent (Rosenberg’s Scale)	119
4.1.3.1	Adolescents with Single Parent on self-esteem Scores	120
4.1.3.2	Segregation of Adolescents of Intact Parents for Scores of Self-esteem Scale	122
4.1.4	Behavioral Problems of Adolescents on the basis of ‘Q’ values	125

4.1.4.1	Problems in Behavior of Adolescents (Single Parent)	127
4.1.4.2	Analysis of Behavioral Problems of Adolescents (Intact Parent Family)	128
4.2.1	Comparison of Male & Female Adolescents of Single Parents on the Scores (Resilience, Social Support & Self-esteem)	131
4.2.2	Results for Gender differences in Behavioral Problems of Adolescents (Single Parent)	135
4.3.1	Significance in Behavioral Problems of Adolescents of Single Parent & Intact Families	137
4.3.2	Significance of Resilience, Social Support & Self-esteem of Adolescents	139
4.4	Correlation Co-efficient Values for Pairs of Variables	142
4.5.1	Social Support as Moderator for Resilience (In Relation to Behavioral Problems of Adolescents)	153
4.5.2	Effect of moderation Social Support on Self-esteem (In Relation to Behavioral Problems of Adolescents)	154

LIST OF FIGURES

FIGURE NO.	DESCRIPTION	PAGE NO.
3.1	Districts selected from Haryana state for data collection	86
3.2	Schematic representation of selection of the sample	87
4.1	Frequency distribution of resilience scores of adolescents	108
4.2	Distribution of resilience scores of adolescents (Single parent)	110
4.3	Frequency distribution of resilience scores of adolescents (Intact family)	112
4.4	Frequency distribution of scores obtained on ISEL-12	114
4.5	Distribution of scores obtained on ISEL-12 (Single parent)	115
4.6	Frequency distribution of scores obtained on ISEL-12 (Intact family)	117
4.7	Categorization of adolescents on basis of their self-esteem	119
4.8	Self-esteem of adolescents with single parent	121
4.9	Segregation of adolescents on basis of their self-esteem (Intact family)	123
4.10	Adolescents on basis of the behavioral problems	126
4.11	Single parent adolescents on basis of behavioral problems	128
4.12	Adolescents in the intact family on the basis of problems in behavior	129
4.13	Comparison of male & female adolescents on the basis of Resilience	132
4.14	Differences in social support perceived by adolescents	133
4.15	Illustration of gender differences on the basis of self-esteem	135
4.16	Gender differences in behavioral problems of adolescents	136
4.17	Mean score for behavioral problems for adolescents (Single & Intact)	139
4.18	Illustration of the scores of resilience, social support & self- esteem	141
4.19	Correlation of resilience with social support	144
4.20	Relationship of resilience with self-esteem	146

4.21	Representation of correlation of self-esteem & social support	147
4.22	Relation of resilience with behavioral problems of adolescents	148
4.23	Correlation of social support with behavioral problems	149
4.24	Self-esteem & behavioral problems-a negative relationship	150
4.25	Conceptual diagram for representation of moderation analysis	151
4.26	Statistical diagram for representation of moderation analysis	152

LIST OF APPENDICES

APPENDIX	DESCRIPTION	PAGE NO.
A	Connor-Davidson Resilience Scale (CD-RISC)	199-200
B	The Interpersonal Support Evaluation List	201-202
C	Rosenberg's Self-esteem Scale	203
D	Youth Self-Report	204-207
E	List of Experts	208

CHAPTER-1

INTRODUCTION

Life is a relationship between living organism & environment. As long as the equilibrium is maintained life is smooth but when some obstacle comes it is threatened. Society has reached a critical stage where children no longer listen to their elders. Nowadays teenagers have an easy access to weapons therefore are arrested for violent crimes. Suicide rate has increased a lot among adolescents in the past few decades. Bullying behavior among peers is common & progressive that leads to the criminal behavior, poorer academic achievement, depression & ineptness in society, according to Cunningham et al. (2000). In such circumstances the reasoning skills along with abstract and logical thinking declines which lower the capability of making rational judgment in children.

These changes in the life of adolescents affect the atmosphere of family, school & community. Teens are at a pivotal stage in life where they are struggling with their own hormonal changes & more burdens of studies as well as pressure of friends. Attainment of puberty in children occurs at an early stage by obtaining proper nourishment & care with appropriate living conditions. Thus, non-marital sexual engagements are common.

Girls turn into young mothers and boys are becoming aggressive. These consequences reverberate throughout the life of an adolescent hence are fragile in both emotional and social context. Thus adolescents prefer to be alone. They engross themselves with many fear & worries in mind therefore lack energy to pay attention. They act without thinking & concentrating. Day by day children are becoming stubborn, moody & hot tempered. These problems are related to the behavior therefore termed behavioral problems.

According to 2020 World Population Prospects, which is a United Nation population estimate, it took 200,000 years approximately for human population to arrive at one billion and only 200 years for reaching 7.9 billion which includes 1.9 billion adolescents.

Therefore it becomes important to consider the problems commonly seen in adolescents whether social, psychological, emotional or behavioral.

Such problems result in the adjustment problems, poor educational accomplishments, agony & behavioral changes hence, draw the attention of researchers.

The families having both parents are considered psychologically sound. Such families are called intact families. Children of such families suffer with less behavioral disorders as both parents are helping them to tackle the problems. Functioning is appropriate in psychological context in intact families. Love, respect & mutual understanding turns inter-parent relationships stronger therefore child's faith develops in relationships. Real problem arises when one of the parents is not alive.

Theoretical Framework

Present study concentrates on the single parent families. The focus is on behavioral problems faced by adolescents of such families. A single parent finds difficult to keep an eye on the child, therefore found engaged in more of risky behaviors. Being a child of single parent or to be an orphan is considered as an unbearable event. The relationship between the children & other members of the family is sometimes impaired in such families. To ensure proper physical & mental health in such children becomes hard as stated in a recent study performed by Nishioka et al. (2021). Such children are not able to fare well in some dimensions for e.g. scholastic performance. They become aggressive due to loss of trust in their associations.

The family is the primary socializing agency for a child. Child's attitude towards the society can be changed through the values imparted from a family but if the family is in crisis children are found to be delinquent, unhappy & maladjusted. The role of education is very important to inculcate the family, societal & national values in children making them sensitive to the core values such as respect for all human beings. In this way, disputes can be resolved in families, to save the humanity.

1.1 RESILIENCE

Resilience is a broad term which indicates an outcome of the successful adaptation in challenging circumstances as defined by Masten (2000). It is derived from a Latin verb *resiliens* which is an elastic worth of a material according to Green et al. (2002).

Etymologically word resilience means becoming strong by doing great, against all

odds thereby adapting & recovering, according to Rutter (2007). It implies to hope, conviction, possibilities and sense of consistency. These are the words which collectively refer to single word viz. resilience, according to Braun et al. (2021). The components for expectation are considered in resilience which reduces pain.

Motivation to survive & the commitment to emotionally invest in the coping process are called as sense of coherence. Antonovsky (1979) proposed a term salutogenesis which implies that a person with a strong sense of coherence does not perceive stressful situations as threatening rather uses the capabilities to tackle situations for regaining of health and reducing anxiety.

Resilience involves self-transformation by the people who meet challenges in overcoming misfortunes according to Alvord & Grados, (2005). In material science, resilience is to absorb energy from a blow and to release the same energy by bouncing back. In chemical science, stretching of atomic bonds is resilience or strength.

Merriam Webster characterizes resilience as the capacity to recuperate from or adjust easily to harsh conditions. To recognize the pain & to bear it or to normalize a situation is resilience in field of medicine, as mentioned by Ickovics & Park in 1998. Resilience confers minimum dysfunctional behavior by an individual according to Conner (1993).

Study of epidemiology (prevalence of diseases) which uncovers the protective factors & risks helped researchers, to define resilience. Werner used the term resilience in 1971. Researcher studied that, when children grow in poor families or when parents are mentally disturbed they can develop fierce behaviors.

In these unfavorable circumstances, one third of the children were found to be calm. Such individuals were termed resilient, by Werner. That way, first research on resilience was available to study. Subsequently tools were created to study systems which sustained development of resilience.

Resilience became a topic of interest when schizophrenic mothers were studied in 1989 by Kathryn. Schizophrenia is a mental disorder which involves breaking a relationship between emotions, thoughts & behavior. Children of these sick mothers

flourished well & skilled in academics. It was also found that the mental processes were used by them in protecting themselves from dangers & harmful effects of stressful conditions to return back to pre-crisis status. Thus term psychological resilience came into being.

Resilience has gone through several stages in the past years. The initial focus of psychologists was on the vulnerable child. Finally the focus shifted to the promotion of resilience. Search began for the factors affecting resilience at three levels, namely individual, family & community. The individual factors involve attachment & responsiveness for others, positive temperament, self-efficacy, self-esteem, internal locus of control, social maturity & perceptiveness.

The family factors includes family harmony, sufficient financial & material resources, whereas neighbor, peer support, adult role models, positive teacher influences & success are categorized as the community factors, as explained by Olsson et al. (2003).

Resilience is a relative resistance, to psychosocial risk experiences. It is regarded as a process not a trait which changes through time. It is created when protective factors, for e.g. immune system reduces the effects of the risk factors, which is refer to as healing. A construct with two dimensions namely significant adversity & positive adaptation is resilience. As research on resilience progressed it became important to characterize & identify resilience on the basis of the risk involved. Thereafter interplay of risk, vulnerability & protective factors in resilience became significant.

In 2004, Newman defined these factors as:

- i) **Risk** is any element or blend of factors, which expand the chances of unfortunate results. Risk factors may be chronic or situational. The factors responsible for the chronic diseases are termed as chronic risk factors. Situational risk factors trigger impulsive individuals to influence their behavior.
- ii) **Vulnerability** is a weakness that delivers an individual more proneness to a danger. When a person is vulnerable the interaction of risk factors occurs hence, the response to the risk intensifies. It is important to identify the vulnerability & study the factors involved. When risk factors occur together they have greater effect rather when occur in isolation. Identification also helps in the search for the actual causal

mechanisms or processes. Self regulation & self-organization both are important to save a person from being vulnerable.

iii) **Protective elements** are the defensive elements or the conditions that moderate the impacts of risks, leading to a sound existence. The virtues like fortitude, forgiveness & gratitude provides the strength to attain resilience. These days, the research on resilience focuses on the ability to gather social support, so as to increase the protective factors. This reduces the impact of risk factors hence recovery can be attained at faster rate.

Models are presented below to explain working of resilience-

There are three models for explaining resilience. All models, operates on similar mechanisms thus are able to explain adaptation in relation to stress. These three models are:

1. **The compensatory model** - It explains the use of resilience for the neutralization of the risk.
2. **The challenge model** - The enhancement of adaptation in presence of risk can be explained by this model.
3. **The protective or defensive model** - Interaction of hazards & defensive factors to reduce the adverse results is the rationalization of this model.

Internal variables for Resilience

Resilience can be explained according to three variables namely self-factors, personality factors & the individual resources. These factors involve use of cognitive & personal resources, temperament, intellectual abilities & the determination along with the control in one's surroundings as explained by Unger (2004). To lessen the emotional dissociation is also an internal variable of resilience as predicted by Patterson & Kelleher (2005).

External variables for Resilience

As the study is related to single parenting, it is important to mention that relationships in the family and social support both are very crucial for measuring

resilience as stated by Nishikawa (2006). The individual, who encounters availability of support during a calamity, acquires a sense of protection easily in relationships.

1.1.1 Resilience & Social Support

According to UNESCAP (United Nations Economic & Social Commission for Asia & the Pacific) progress report 2021, social support is an important factor in attaining resilience in the critical situation. According to this entity, resilience can be observed through empowerment & support from the community. Thus, the family emerges as a unit to build resilient societies. Social relationships create trust & love, thus offers reliable alliance & reassurance of worth that provide the ability to recover from all hardships and a person move forward in an adaptive way. Social milieu of a person is a criterion of an individual's resilience & self-esteem which are strong protective factors for the physical, mental & general health. Thus, a person lives longer. Economically and psychologically sound communities are required so that people can rise above all odds and to raise their livelihood according to the data, provided in World Economic Forum Meet (2014).

1.1.2 Resilience & Self-esteem

Most significant marks of a psychologically healthy & social state of a person include both variables viz. resilience & self-esteem. Daniel & Wassell (2002) described resilience in terms of intrinsic factors, which includes a sense of self-efficacy, high self-esteem, sense of belonging & security as the family extrinsic factors. Adolescents with low confidence are reluctant to confront the difficulties. They show helplessness & dissatisfaction in life. They endure with numerous psychological problems including sadness, tension, dietary issues & substance misuse.

Their behavioral problems lead them to more negative feedback among children. They often feel terrible about themselves & sense mistreated most of the time. Children of low self-esteem are absorbed with a feeling that people will not accept them. Such children are hard on them hence are critical regarding their own self.

Low self-esteem is unfortunate for an individual. One has to accept challenges to overcome this feeling of negativity. Resourcefulness and self-assurance dilutes the majority of the impacts of negative life occasions & also helps in the adjustment in

society. Intercessions are required to work on the social change of adolescents.

The enhancement of resilience and self-esteem is considered as the most important intervention for reducing the problems faced by children. Need is to develop certain strategies which help to build resilience & enhance self-esteem in adolescents.

Some of these strategies are listed as follows-

- a) Encouragement of adolescents so that they can use their energy in positive direction.
- b) Use of positive statements with adolescents rather than critical ones.
- c) Exposure to media should be least.
- d) Cultivation of independence & responsibility.
- e) Balanced living should be supported.
- f) Encouragement of values like gratitude & giving.
- g) Spirituality should be fostered in children as they grow and turn into adolescents.

Elders should lay stress on the efforts shown by children & adolescents rather on completion of task or the performance achieved.

1.1.3 Resilience & Behavioral Problems of Adolescents

Behaviorism term was coined by Watson in 1913. The focus was on outward or external behaviors of an individual. The observable behavior of a person is due to a response generated to an environmental stimulus or change. It can also be stated that action & mannerism shown by a person is called his/her behavior. If the behavior is not appropriate it is termed as a behavioral problem.

Adolescence (In Latin language *adolescere* means ‘to grow into maturity’) is a phase of achieving the maximum growth of knowledge, skills, attitudes & beliefs along with physical & mental abilities, needed for effective participation in society. Erikson (1968) explained the developmental stage of the identity can result into risk taking attitude, in adolescents. Hazards or risks are fundamental tools in the arrangement of the way of life as the juvenile tests various identities.

Fischhoff (1998) clarified that children & adolescents believe themselves to be insusceptible to danger. The behavioral problems are of various categories, which include non-compliance, bad temper, suicidal depression, obsession, breakup and buzzing.

Behavior of an adolescent changes altogether in this crucial phase of life when everything should be perfect for their growth & development. Childhood behavioral problems are considered as the second leading cause of diseases, in adolescents of age group of 10-14 years.

World Health Organization (2019) strategizes various resources for helping the governments, in response to the needs of adolescents, in terms of their mental health. Some of the resources can be enlisted as:

- 1) Providing guidance for the accelerated action plan for the health of adolescents in associated countries.
- 2) Strategy for improving health of women, children & adolescents (2016-2030).
- 3) Plan for mental health improvement (2013-2020).

Resilience helps to reduce behavioral problems

Resilience declines with age as an individual have to face pressure, thus gather bitter experiences outside the home and at home. Life skills can be utilized in instructing adolescents about how to increase resilience and to get rid of behavioral problems as explored by Chen et al. (2019). In 1997, World Health Organization defined life skills to adapt to the challenges, effectively. Life skills foster self-esteem, self-efficacy & competence at psychological level in an individual. Individual mindfulness is also important in being attentive to the critical situations so that it can be dealt easily. It is important to introduce graciousness to our streets so care should be taken to improve our communal life by inculcating some positive values like resilience.

It helps in raising children of high self-esteem having self- confidence to fare well in life. Optimism, perseverance, faith and expression of emotions when built up promote resilience in an individual. Need is to encourage good behavior of a child in the adolescent phase & to pay attention to the challenging behavior shown by them. It is also termed as parental resilience.

1.1.4 Resilience & Single Parenting

Countries included in ‘Organization for Economic Cooperation & Development’ (OCED) involve approximately twenty five percent children (25%) residing in single

parent families. India is also one of the members of this organization. Most of the single parents involved in OCED are not being provided job security. Their earning potential is also not raised to an extent that they can thrive well with their children as explored by Lut et al. (2021). To solve the problems associated with children of such families, resilience is important to cross the phase involving sorrow & hardships as it can help them to recover and to attain balance & harmony, when somebody in family dies that too, unexpectedly.

The important parameters required to gain resilience in a single parent family, includes social encouraging groups of people the presence of a steady & supportive parent a serious mentor or any other individual from outside the family & school experiences can prove that one's own endeavor can have an effect & ability to reevaluate hardships. In this way, long term harming impacts on physical & mental health can be prevented. Single parents are always in a pull. For them, children are their priorities. They work for them on regular basis even if there is a natural calamity or a disaster faced by a nation.

Therefore, they are engrossed with a feeling of burn out most of the time as predicted by Schulte & Pabst (2021) in their study. It becomes crucial for single parents to build pragmatic & strong supporting networks so that they can cross all obstacles fearlessly with the absence of any sort of failure.

How resilience reduces behavioral problems in adolescents with single parent:

Hawley & DeHaan (1996) mentioned in their study that there is a need to attain family strength which portrays the way a family follows as it adjusts & succeeds even after facing pressure.

According to Walsh (2003) the key processes in family resilience includes-

i) **Belief Systems:** making the significance of difficulty ii) **Organizational Patterns:** flexibility, connectedness, social & financial assets iii) **Communication Processes:** emotional sharing, coordinated effort & clarity in critical thinking.

Strong & resilient families react to unpleasant conditions in exceptional ways, depending upon the specific situation formative level and the intelligent combination of risk defensive elements along with the family's common viewpoint. Such families are stretchable to their needs.

Measures to enhance resilience & reduce behavioral problems in adolescents of single parent family (American Psychological Association, 2018)-

School based programs are not enough for children whose development is restricted due to problems in life at early stage. More modified interventions are required to enhance resilience among adolescents. These include-

1. Proper communication about risk is required along with proper support from friends & family.
2. Self confidence, optimistic outlook and proper care of body & mind.
3. Setting of realistic goals.
4. Avoidance of considering crisis, as unbearable.
5. To look in for new opportunities after loss.
6. Ability to take appropriate decisions in critical period.
7. Sincere in relationships.
8. Ability to accept the change so as to set a long term goal.

Inadequate care of child, ineffective discipline in the family, disruption in family, negative peer influences, trauma of childhood, separation of family are enlisted in psychosocial environmental conditions of a child which leads to various problems. It was explained by Benner et al. in 2018.

According to pediatric psychology children should be addressed in schools & proper training should be provided for them to improve their behavioral health so that they can cope better in these conditions. It is important to understand children in classroom itself so that problems with the management of unique strategies can be solved by the working professionals in school.

These measures can help to promote healthy growth in children across the life span.

1.1.5 Programs useful in Fostering Resilience

Explanation of the programs is as follows –

1) **Cognitive Behavioral Therapy (CBT):** Beck contributed for helping the people in overcoming their depression by explaining the psychotherapy (CBT) in 1964. This theory helps young minds to develop alternative patterns of thoughts rather unhealthy thoughts. According to CBT correcting misperceptions & modifying behavior brings about improved reactions. Intellectual treatment depends on the association of thoughts, sentiments & behavior. People can move towards defeating the troubles to meet their objectives by recognizing & changing incorrect reasoning risky conduct & upsetting enthusiastic responses. This theory is an elaboration of personality & psychopathology.

2) **Reasonable Emotive Behavior Therapy (REBT):** It depends on the conviction that most of the issues are initiated in irrational thoughts therefore there is always a need to identify irrational beliefs & to actively challenge them. It also involves learning, to recognize & change these thought patterns, according to Cherry (2021). It is better to set up a sensible standard to carry on with a healthy lifestyle. This type of treatment is a chance for an individual to gain from the current mutilations & to effectively dispense with them.

3) **Penn Resiliency Program (PRP):** It is a cognitive, behavioral, school & medical based prevention and early intervention program. It is designed to teach skills that reduced depressive thinking patterns & promote positive coping styles. This program is conveyed to youth for the appropriate factors for building elasticity, richness & cheerfulness. These qualities based projects provide the feasible abilities & measures to be applied in daily existence to explore bad luck & flourish in testing conditions.

1.2 SOCIAL SUPPORT

According to animal psychology if any animal is kept in solitary confinement the normal growth is arrested. This fact is applicable to more developed vertebrates & humans too. In this fact lies the importance of social support. According to Gottlieb (1985) the transactional process of giving support that occurs in interpersonal relationships is social support.

Social support can also be defined as a shock absorber against family crisis that helps in gaining resiliency. Social support is the sensitivity & heed given to a person. Wide range of disciplines includes study of social support for example education, medicine, sociology, rehabilitation, public health & social work.

Social Support can be classified as-

- a) **Perceived support** is the judgment of the recipient that provider will offer in need.
- b) **Received support** refers to the advice or reassurance, offered by other persons, whenever required.
- c) **Structural support** is the social integration. It is the connection within a social network.
- d) **Functional support** is the specific function in the social network.

Social support can be categorized as appraisal support & self-esteem support also. A blend of appraisal support (the individual sees that the person in question is fit for getting guidance when adapting to challenges) & esteem related support (the individual visualizes that the person has increase in his/her esteem by the influence of others), is required. Both are useful to maintain mental health of an individual.

1.2.1 Social support & Behavioral Problems in Adolescents

Amalgamation of individual, family & community factors results in the formation of the personality of an adolescent. Life of an adolescent includes numerous threat associated factors like traumatic loss social disorganization and chronic health conditions. Low social support in adolescents leads to disorders like panic disorder, social phobia along with frustration & anxiety. On the other hand, social help is a strong & significant variable in withdrawing functional debilitation (weakness) in individuals & managing their misery. It helps in increasing the chances of recovery from the trauma faced in life. It moderates the environmental & genetic vulnerabilities thus confer resilience.

There are two theories for social support -

- 1) **The theory which buffers stress**-This theory explains that social help lessens the effect of gloomy life occasions on the individual's psychological wellness.
- 2) **Principle theory & its effects**- According to this theory mental health benefits are

always inherited due to existence of positive social relationships no matter how much stressed a person is in his/her life.

According to Dray (2021) at the international level children are suffering from various psychological disorders due to lack of support. The less resilient behavior of children therefore affects their mental health which deteriorates further. This is an important concern for policy making & stakeholders.

Positive social support may protect against post-traumatic stress disorders (PSTDs) therefore it can reduce medical morbidity and mortality which increases when a person experiences social isolation. The impact of low degree of social support is as harmful as the effects of smoking, obesity & hypertension. In these circumstances social relationships helps to maintain psychological & physical well-being. The main thinking concerns the increasing impact of peers in the life of adolescents. It was indicated by Petersen & Hamburg in 1986.

Puberty & sexuality also add enormity (magnitude) to the adolescent peer relationships. Sometimes adolescents adopt strategies to develop autonomy. They are more dependent on peers & less reliant on family. This support is not always beneficial as adolescents develop several problems related to behavior in group of their own age. Here lies the importance of supportive relationships within the family & requires special attention.

Meaningful and caring social connections reduce the risk factors. It helps in positive development of the adolescents, according to World Health Organization (2019). Help seeking behavior, sources & nature of help needs attention. Thus role of parents, educators & researchers becomes important so that behavior of child can be controlled. Intra-familial (parents & step parents) & extra-familial support (teachers & peers) both are required.

According to Bauer et al. (2021) single parents requires a capability to collect social help for themselves & also for their children, as it is implicit to affect mental health of their children. This way, the future capability to mobilize social also support improves.

Assembling social help for weak adolescents can be a confounding sequence that requires watchful preparation. Suggestion informed assessments, can play a significant part in expanding information regarding the handling of social support in children.

Family organizational patterns are decisive for economic & social resources. This provides a level of stability & the ability to organize in children. Social support is able to moderate hereditary & normal weaknesses henceforth give a sort of drive.

It is essential to keep up with great physical & mental well-being within the sight of traditional, influential & biological dangers like poverty & low economic status due to any reason.

Network of relationships acts as strong support which alleviates the effects of emotional distress. Self-control & empathy are important for psychological wellness. Social support leads to high hopefulness, positive adjustment styles, low neuroticism & less hostility among adolescents which further leads to attain resilience.

1.2.2 Biological Pathways Related to Social Support

Social support has a positive power & impact on the neurological, endocrine, immune & cardiovascular system. All these systems are able to interact with each other, too.

1. Immune system: A source of inflammation called as a C-reactive protein is produced in the body. It is produced to lesser extent in a socially integrated person according to Bennet et al. (2018).

2. Neurological & endocrine system: Eisenberger et al. (2007) explained that lower level of stress hormone is found in people having adequate social support. This is indicated by the neurological imaging research performed by researchers.

3. Cardiovascular system: High social support is related to the control of blood pressure & heart beat rate, according to Yang et al. (2021).

An interaction which involves support from parents boosts higher self-esteem among adolescents suffering from the pressure in life. Effect of society & its support on immature confidence of the adolescents is a significant assessment area as it is vital to delve into the connection and make a reassessment between friendly help & confidence in adolescents.

1.2.3 Social Support & Single Parenting

Families with a single parent involve children with age less than 18 are headed by a bereaved, divorced, not remarried or separated parent. Conflicts continued for long & custodial problems exist in single parent families. Such changes contrarily affect the children residing in such families.

When children are not accepted by parents or in the absence of the parent/s self-esteem gets low. Less social support in such families increases the unease & melancholy among children. They are always discontented from the life. Therefore children and adolescents sometimes try to switch over to substance abuse for satisfaction. Jayakody & Kalil in 2002 detailed that male family members (for example uncles or grandparents) can affect children positively dealing with such issues.

A single parent experiences an overwork & burden which increases as demands by children augments as surveyed by Heath (1994). Thus weak immune system is more prevalent in a single parent due to their low social support thus, experiencing higher risk of death. Carvajal (2018) in a study stated that after facing severe trauma of the loss of loved one single parent has less ability to adjust & regulate, consequently suffers from post-traumatic stress disorder.

For the single parents both formal & informal supports are required according to Gray & Holden (1992). Formal social support includes social, psychological, physical or financial assistance as informed by Mesibov (1983). Informal support network includes neighbors and immediate extended family. Informal support provides assistance & formal support provides opportunities as explained by Herman & Thompson (1995).

Sibling support i.e. support from brothers & sisters along neighborhood support both are of great help, for a single parent as explored by Mchale et al. (2012). Therefore, social support in its diverse capacities has a great role to play in eliminating the parental stress. It promotes happiness & welfare of humans in the society by meeting basic needs of people & also empowers who are vulnerable.

1.3 SELF-ESTEEM

A well known American psychologist & anthropologist, James (1892) defined self-esteem as recognition of strength. According to the theory given by James, self-esteem is the proportion to explain person's actual behavior in contrast to the assertions.

Inner values of a person are very much linked to self-esteem. It is measured in terms of gap between ideal self (what the perfect person should be) & self-image. If the ideal self is close to person's self-image then at that point the individual is

having high esteem as well as confidence. In 1965, it was characterized comprehensively by Rosenberg, as an ideal or troublesome attitude toward oneself.

In 1969, Branden explained self-esteem as the experience of being skilled to adapt to the difficulties of life. Reber (1985) regarded self-esteem as a degree to value oneself. Several definitions were given by various psychologists to explain the concept of self-esteem. Totality of the individual's perception was also termed as self-esteem by Steffenhagen (1987).

Two components were used to explain self-esteem by Frey & Carlock in 1989. They are-

- a) Competent to live (confidence of one's mind & beliefs).
- b) Worthy of living (affirmation of oneself).

Blascovich & Tomaka in 1991 thought that esteem is the evaluative part of the self-idea or concept. They included all aspects of self-esteem whether cognitive, evaluative, behavioral or affective. Self-esteem is imperative in every sphere of life. It is considered as a basic human need. It describes the nature of a person which can be changed.

1.3.1 Effects of Self-esteem

High self-esteem is important for the life satisfaction which includes mental & physical health. It is a vital factor which helps to attain success happiness & overall well-being. It assists the buffering process for persons suffering from the results of unpleasant occasions affecting pleasure in everyday life. It was explored by Jordan & Cameron (2017). It motivates a person to believe in his/her abilities so that one can thrive & steer well in life with hopefulness as explained by Steiger et al. (2015).

According to Anyamene et al. (2016) a person with high levels of self-esteem acts assertively thus does not feel any guilt. Feeling of ease is experienced while communicating with others. Such persons share their experiences with others hence enjoy the humorous aspects of life. Concentration on solving problems is important for people with high self-esteem.

They believe in loving & respectful relationships, more as compared to persons with low self-esteem who are found pleasing people & getting angered or irritated easily. Low esteem individuals are highly sensitive to opinions of other persons. They consistently experience feelings of trouble and worthlessness hence, finds it difficult to keep the connections with people.

Negative feelings like nervousness viz. state of fear are often felt by such people.

1.3.2 Self-esteem & Psychology

Various terms are being used in place of self-esteem like self-concept, self-image, self-confidence, self-worth, self-efficacy & self-compassion. It was mentioned by Sanford & Donovan in 1985. There are certain differences between these terms. These differences are explained as:

Self-esteem & Self-concept

Self-concept is a dynamic term which includes organized system of learned beliefs, according to Ackerman (2021). It is an aptitude to believe about one's own individuality, skills & behavior whereas self-esteem is an attitude or view that an individual has about him or herself. Self-esteem is in fact a part of self-concept.

Self-esteem & Self-image

According to Katz & Ziglar (1967) self-image is based on false beliefs. It is only somewhat close to reality. Difficult life dealt by a person lowers his/her self-image. More the difference between real & ideal self lower is the self-esteem.

Self-esteem & Self-confidence

According to Burton (2015) self-confidence is the trust in oneself to deal with challenges. It depends on superficial magnitude of accomplishments whereas self-esteem values the internal measure.

Self-esteem & Self-worth

Self-worth is the global acknowledgment that a person is having worth. It regards a person as a valuable human being as explained by Hibbert (2013).

Self-esteem & self-compassion

Fixation on how a person identify & recounts him/herself with others, rather than how to pass judgment is compassion as expressed by Neff (2003). Self-compassion can lead an individual to a healthy sense of self-esteem.

Self-esteem & Self-efficacy

To have the faith in one's capacity is self-efficacy. It helps to carry out specific undertakings & tasks as expected by people. It was explained by Neill, in 2005.

It is more precise and depends on outer achievement of an individual rather than inward value. Esteem is a sensible view of a person's capacity to accomplish & flourish throughout life.

Efficacy is the means by which a person feels about the aptitude to work in various situations.

1.3.3 Place of Esteem in various Theories

a) Maslow's theory was given in 1954. The focus of this theory was on the outer proportions of views like reputation, position, achievement & acknowledgment. As per Maslow healthy self-esteem is required for the fulfillment & progression in life to increase, esteem & confidence. Self-worth & proficiency leads to attainment of higher level of self-esteem according to Maslow.

Internal feelings of accomplishment & self-praise are also the factors which govern high esteem. External feelings of accomplishment & praise from others results in lower level of self-esteem. Maslow's theory of needs or requirements is an inspirational theory that portrays the necessities which drives human conduct. The initial two levels of necessities are essential requirements of water, food, well-being & security.

The third degree of need can be viewed as the need that depends on the psychological aspects & social associations. In the fourth level of Maslow's system of needs are feelings. The requirement for esteem & dignity are present at this level. Achieving the initial four degrees of necessities finally prompts into the last phase of necessities which depends on what a person encounters in life & self-realization.

This fourth phase of Maslow's progressive system of requirements has the focus on esteem which alludes to the requirement for regard, confidence & self-assurance. Maslow has shown that the requirements for respect & regard are generally significant or important for all viz. children, youth & adults. It is placed before genuine respect & esteem.

Each individual is fit for climbing or moving up in the hierarchical order so that one can move towards a degree of self-completion. Sometimes progress can be disturbed by an inability to meet lower level requirements for e.g. educational encounters or regarding an employment. This can influence an individual to change between levels of the sequence of needs.

b. **Coopersmith's (1967)** gave a theory to explain high esteem in children. According to this theory security, trust and love provided by parents, accounts for high esteem in children as cited by Seligman in 1996. Rules which are clear to children & appropriate child rearing practices are helpful in nurturing high esteem in children.

c. **Self-determination theory** was given by Ryan & Deci in 1995. It was further explained in 2015. It states that when basic needs of a human being are achieved with the help of support from the society, motivation to explore as well as personal growth increases, which further enhances esteem.

d. **Terror management theory & Attachment theory** was given by Pyszczynski et al. in 2008. According to this theory anxiety of a child can be reduced. Esteem can be increased when proper care and attention is received from parents or other caregivers. Need is of supportive relationships within the family.

1.3.4 Self-esteem & Behavior of an Adolescent

Erikson in 1968, described the human strengths in following stages of development-

- 1) Infant tries to figure out the development of trust on guardians.
- 2) Child learns self-control & independence, at the age of 2 or 3 years in performing tasks.
- 3) Child learns to use imagination at the age between 3-6 years.
- 4) Child learns how to work with others in the age range of 6-12 years.
- 5) Child turning into an adolescent between ages of 12-18 years and undergo identity diffusion in this stage. The young adult evaluates & tries various gatherings to see where he/she is truly fit for in this phase.
- 6) Fortitude, closeness & the relation with segregation is important when a person is in his/her twenty's.
- 7) Self-absorption occurs between 20-50 years of age.
- 8) Truthfulness versus misery happens after fifty's. Person experiences to try the real meaning of life.

Erikson's fifth phase of dissemination & relation to personal identity compares to juvenile development. In this stage sexual mindfulness increases which undermines, the recent self-perception. Social jobs take on another framework in this phase. Attempts are made to acquire acknowledgment, in the public. Adolescents experience barometric self-esteem which means temporary change in self-esteem which is dependent on the situation.

It is adversely affected by family circumstances which lead to dejection therefore self-esteem decreases. Adolescents turn into juvenile delinquents due to erratic and overly strict behavior of their parents which involves physical punishment and high

degree of opposition along with the negative response or rejection. Consequences are the development of a child with low self-esteem.

1.3.5 Self esteem & Single Parenting

Unfavorable situations such as stigmatized family structure are one of the major causes of low self-esteem. Low quality home environment due to the absence of parent/s has a negative impact on self-esteem of children as explained by Orth et al. (2018).

The low self-esteem in children of single parent families' make them addicted to substance misuse due to the peer pressure which affect their psychological functioning, Harter in 1990 explained. Low esteem is related with savagery (violent behavior) & high dropout rates with low accomplishment in studies.

Children of broken homes have less care from their single parent thus possesses low self-esteem whereas children living in intact families, possess high self-esteem. Bishop & Ingersoll (1989) found that conflicts in a marriage have an impact on adolescents' self-concept, which further lowers the self-esteem of a child along with, his/her social competence.

Thus long term changes e.g. fretfulness & despair in adolescents can be seen due to family conflicts. Women with low self-esteem (for e.g. of divorced families) often raise children with similar self-esteem as examined by Frey & Carlock (1989).

Families can be a source of support & encouragement for a child but it is seen that relationships within a family pose a threat to self-esteem of a child hence he/she is raised into an adolescent of low self-esteem.

In families having individuals with less self-esteem, connections & dealings turn out to be dangerous at the same time the relationships can become mutually affirming in the families which involves individuals with appropriate esteem.

Sound self-appreciation lowers disappointment & increases critical thinking in an individual. When a person is high in self-esteem, he/she is self motivated, happy, eager to learn makes a good impression & always tries to stay connected with others.

1.4 SINGLE PARENTING

According to Roll (1992) single parenting involves a pattern, where a person lives without a partner or spouse. Single parent probably lives with his/her parents with at least one dependent child under 18 years old.

Single parent family structure arises due to death of the partner, intentional

artificial insemination (unmarried parenting by choice), breakdown of the joint family system, adoption & increasing rate of divorce. In last two decades single parent families has increased considerably. Some possible reasons are-

1) In advanced societies a woman prefers to be alone as she is not given access to valuable resources in the family. Family synchronization can be created by present women in need thus can access family power with better humane connection hence, in present days families are headed by women.

2) Child rearing through agencies is common nowadays.

3) Due to urbanization & development of industries society is turning materialistic day by day thereby emotional strain on the family is increasing, so people prefer to be single for long in want of earning more money. Babalis (2013) explained the reasons behind the advancement of the peculiarity of single parenting.

Demographic factors

In the developing countries death & desertion are the common causes behind single parent families rather divorce. India is still developing and comprises 4.5% of children living in single parent households. In developed countries divorce and by choice parenting is more common cause of the rise of families having single parent. United States has the most prominent level of single-parent families (18.58 million, 2020) in comparison to other countries (15.31 million living with single mother & rest with single father).

Cultural orientation

It is a tendency to think differently on the basis of culture. The differences are due to interpersonal relationships & communication which matters in any family structure. It is alarming that in every seven children one child belongs to a single parent household which is notable in western countries where desertion or abandonment is common. In these countries women also possess the working potential as avenues are more being more industrialized. These working women prefer to be single is more turn to sperm donors for giving birth to a child. In western culture non-marital births are common with cohabiting couples which is highest in America (74%). Adoption is also prevalent feature in these countries. Cultural support affects single parents positively in these countries. In countries like India, (second most populated nation in the world) lack of finances is the major reason of conflict within the family. It is considered as one of the major cause of single parenting besides death of the partner (India ranked

first in road deaths across 199 countries as reported by world road statistics, 2018). Single parenting is not accepted in Indian society.

1.4.1 Coping strategies Adopted by a Single Parent

According to Lazarus & Folkman (1984) coping can be defined as a change in cognitive & behavioral contexts. Efforts are constantly made to manage the internal & external demands faced by a person that exceed the resources. It involves spending of the mental energy to reduce stress & attain homeostasis.

There are two types of coping strategies used by a single parent. When a person thinks that the condition can be improved it is called as coping. It has the focus on the problems. Emotion related coping is applied by a person when the situation is tolerated for the reduction of negative emotions such as fear, anxiety, gloominess & nuisance. These strategies are used as a set of adaptive tools in response to a stressor & for getting rid of troubles faced by an individual in life.

In single parent families, life can be made smoother & easier so that a child can adjust well in adverse situations. Resilience & adequate social support are important parameters to survive in hard circumstances. Need is to prepare children of single families so that they can be raised as responsible resilient adolescents thus are able to recover from undesirable conditions soon, as the children of intact families (having both the parents) often do.

Positive care & fostering by parents has a significant impact on children which builds up close emotional bonding between parent & child. Attention & affection received by children of single parent family can create a positive effect only if effective patterns of communication & coping strategies are applied. Sensitive, responsive, balanced & flexible parenting can make a child protected in families, headed by a single parent.

1.4.2 Changes faced by Children of Single Parent Families

- a) Parent disagreements: It leads to deviant behaviors in children as acknowledged by Buchanan (1991).
- b) Neighborhood: Children of separated or divorced families have a changed neighborhood thus as the environmental changes occur behavior pathology among the divorced group increases.
- c) Income: There is remarkable decline in the standard of living of a single parent.

Lowering of socio-economic status also occurs. Increase in behavioral problems is associated social exclusion & poverty, according to Bougioukos (2011). Children of single parent family are argumentative associated with less self-control. They are unable to cope with the situations emotionally & psychologically.

1.4.3 Single Parenting & Behavioral Problems

Even a small change in a family disturbs a child a lot but if the change is related to parents it leads to an immediate change in life of a child. These changes can be positive or negative. If the changes are negative then the result is the occurrence of problems in behavior commonly seen in children particularly adolescents. These problems are mild in the initial stage but can lead to disrupted behavior.

Behavior is the way in which an animal or person in response to a particular situation. When there is some difference in behavior, as set by norms of society, it is called as a behavioral problem. Operationally behavior problem is defined as the identification of the changed behavior (which can be monitored & measured) by two or more unknown persons even in changed settings.

Adolescents and youngsters experience, different kinds of externalizing & internalizing problems. Former incorporates forceful and resistant conduct, absence of self-guidelines, low responsibility, towards friends & loneliness, reduced rational capacity & scholarly success. Uneasiness, troublesome side effects & issues with social connections, addresses general internalizing problems.

Every child has one or more problem in behavior at times but these problems are more prominent in children of single parent families. Symptoms of a behavioral problems include getting annoyed, irritated, putting fault on others, denying following the guidelines, addressing, opposing, having temper & experiencing issues, in dealing with discontent. Outburst of antagonism is common, in adolescents raised in single parent families.

Some common behavioral problems are listed below-

1. ADHD- Deficit in paying attention
2. ODD –Aggression that last longer
3. ASD-Impulsive problems
4. Anxiety
5. Depression

6. Difficulty in concentrating
7. Learning problems
8. Conduct problems

Adolescents separated from families have lower academic achievement. They try to skip from school & make a mess of routine classes as compared to children of normal families, where both parents are alive. Single parenting to a child means restrictions, interfering parents, geographical constraints, psychological problems new connections within the family, like remarriage which results in reduced links, between children & single parent.

Violence in a family affects development of an adolescent, who feels ashamed hence, loses all hope & confidence in life. The anxiety level increases in fright, as to when next incident of violence will hit him/her now. Adolescents either run away from such situations or tend to become felonious or anti-social.

Costello & Laub (2020) found that the strength of the bonding of children with parents is the main component in mounting or decreasing the probability of children, showing criminal conduct. Thus it is obvious that in single parent families, children show more misconduct problems, because of feeble relations with parents.

As one of the parents is absent proper command to control & regulate and socialization is missing, from child's life which result in engagement of child in the immoral behavior. Such children are deprived in terms of health & well-being, family & social movements, associations, contrasted with children of intact families. Such children are dependent on the addiction of harmful drugs, to keep them high on esteem.

Family crisis in single parent families causes troubles related to mental peace & social strain in youngsters. When the adolescents are taken care of, they grow up into resilient individuals in such families. The family can provide either the developmental foundation or deficiencies in development of social, behavioral & emotional skills of a child. Values gained by the adolescents' influences their selection or association with peers. Role of both the parents is very important.

When children are brought up by a single parent whether mother or father, half of his/her support diminishes in terms of emotional, intellectual & psychological level which undermines his/her growth as an adult or as a responsible citizen of the

country.

1.4.4 Gender Differences in Adolescents with Single Parent

How parents treat their children also affects differences in girls & boys. According to Taylor et al. (2012) self-esteem of the adolescent girls of single parent family is found to be low, exhibiting more psychological disturbance. They feel disillusionment & negative response in life as compared to the boys. In long-term, parental divorce has been shown to have less damaging consequences, in boys, therefore, they show more locus of control in comparison to girls as studied by Amato & Keith (1991).

Although findings of Owens (2016) suggested that behavioral problems observed in boys are more as compared to girls due to large number of development interferences. Research related to the gender differences has some contradictory results for the adjustment problems, which are seen to less extent in boys as compared to girls, according to Kaye (1989).

Similar results were found by Amato & Keith in 1991. Research also indicates that no gender differences exist between boys & girls according to study conducted by Zill et al. (1993). More insight is required in this context.

1.4.5 Steps for Improvement in Life of Adolescents

Measures are required as a support to make life smoother for the single parent family & their children. Measures can be applied as-

- a) Identification of the behavior and understanding by parents is required to reduce stress in adolescents.
- b) Professional educators within school system should be hired to deal with the problems of students in their adolescent phase.
- c) Least restrictive environment should be maintained within school campus.
- d) Appropriate public education.
- e) Individualized educational plans (IEP) for students particularly having disturbance should be arranged. IEP helps to explain levels of performance & needs of students.
- f) Behavioral & emotional skills training (B.E.S.T) for a parent is required.
- g) Employee assistance plan (EAP) for a single parent is need of hour.

- h) Getting the mental health assessment for a child & parent is necessary.
- i) Guidance related to divorce on the Web portals can be used.
- j) Parenting plans should be prepared for setting the standards for making decision & resolution of dispute. It has to be set by both parents, who can encourage the agreements & discussions, amongst them.
- k) Mediators can act as a support system in negotiations, if lawyers are not able to handle the situation. Inappropriate & adversarial nature of legal system delays the judgments & thus poses a negative impact on the psychological well-being of the child.
- l) Shifting from sociological family to psychological and concerned family network is required.
- m) Consideration of the family dynamics is important rather than the family structure.
- n) Parents in their conflicts should not involve children, as passive arms or active participants as behavioral problems increases due to the child involvement, in disputes. Duration of child involvement in disputes also matters, according to Johnston et al. (1985).
- o) Remarriage may be a shielding factor for children in some cases according to Hetherington (1993) as family income, parental supervision & support increases.
- p) Joint custody of father is of great support in child development, as predicted by Bahr et al. in 1994.
- q) Societies developed for research on adolescence (SRA) must be consulted to handle the problems associated with adolescent psychology.
- r) Marriage counselors or school counselors can act as peace mediators in resolving conflicts related to the family. Adolescents can be guided to be away from pessimistic people who can drain their energy which decreases the potential to work & move ahead in life. Counselors can also help to diagnose symptoms of depression in the young minds e.g. not eating properly, not sleeping properly (poor sleeping habits lower the motivation & affects the internal drive to achieve the targets) showing mood swings, lack of confidence, low self-esteem, poor academic performance & inferiority complex of any kind. It is important to make them calm & composed so that they can avoid losing their control in bad situations.

- s) A theory was put forth by Bronfenbrenner (1994) which explains the growth of a child is in two frameworks viz. school & family. Both are necessary, to identify issues related to child psychology.
- t) Repression of feelings about worst fears in children, should be discouraged by the single parent.
- u) Pets can be kept in family who can act as peacemakers hence, provide connections within the family and can divert from tensions, in crisis.

1.4.6 Rethinking the Concept of Single Parent families

Need is of social consciousness with new structures & behaviors. Single parents can help other single parents in their critical phase of life. They can act as an opportunity for the social support which has the potentiality to promote courage, to support the way to versatility. Women could break their desperate existence after being single. They should adopt a new life plan with a satisfying work.

Adolescents can show a different behavior in inadequate circumstances. They can start taking responsibility of keeping peace within the family rather getting nurturance & safety from family they themselves can turn resilient without anybody's help. Children should be given responsibilities without any guilt so that they can feel their own need in the family.

Adoption of positive discipline is important in single parent families. Focus should be on solving problems, with appropriate solutions for children. Sitting together & sharing will certainly heal the family in the critical phase. This curative process can help the family to tackle all problems faced in difficult periods, which can be disparaging for relationships. The undesirable situations harm peace & harmony, between family members. Regular family meetings should be conducted with adolescents. In this way, they will feel empowered needed & motivated to meet their responsibilities. Children return the respect they gather & receive from their family.

Listening is important the person, who is listened, is valued. Children have their own choices that control their lives. Role of parents is to avoid demanding obedience & imposition of control over them which disrupts the relationships & rise of conflicts within the family. When this will be a common practice in a family facing crisis, children will be less affected. Single families are neither inferior or

superior to intact families. Need is of attention & concern. Differences can become failures and sources both. It depends on a person's resilience how he/she visualizes the critical phase of life.

In countries like India there were some hurdles regarding adopting single parenting by choice with respect to name and the details of the other partner viz. father. The National Commission for women (NCW) recommended to UMWCD (Union Ministry of Women & Children Development) for accepting the change in the laws regarding legal guardianship of either of the parent whether mother or father. Earlier, HMGA (The Hindu Minority & Guardianship Act) governed the right of the child according to which father is the natural guardian of the child. NCW has worked a lot for the rights of single mothers who has been abandoned by rape or domestic violence. It has also recommended to remove the term illegitimate (using for a child), as no child can be called illegitimate. This will remove the stigma associated with the single parent and the child. Supreme Court of India has given legal status as guardian to a single mother. This will surely energize single parent families.

1.5 Implications of the study

- 1) Central role of parents & educators is in shaping the future of a child especially an adolescent belonging to single parent family because such children have less financial & educational advantages as compared to families having both the parents for support. Also they receive less concentration & direction in every sphere of their life, thus becomes emotionally withdrawn. Low self-esteem of the child creates a gap in the relationship with the parent.
- 2) The biggest worry for most of the single parent families is providing an adequate role model for the missing parent. The children particularly adolescents experience serious pressure on regular basis when parents are involved, in another relationship, as soon as the separation occurs. Need is of appropriate social support to be chosen, as the role model with care.
- 3) Welfare organizations in society can render financial help to single parents at lower rate of interest. Single parents should maintain their resources for career development & future safety of family. Awareness should be passed on to these families about monetary planning so that neither parent nor children faces the brunt of financial crisis as explored by John in 2020.

5) Measures & interventions can be adopted so that our youth living in such families can overcome problems they are facing to fare well in life like the children of intact families. They are sometimes out of the control of elders. In these conditions their conduct is controlled by their own moral & social set of rules.

SUMMARY

Present youth is unaware of important domains of life, particularly the faculties of understanding & close association. Speaking to the individuals in connection and to form an organizational network can assist in decreasing strain in adolescents. This will upgrade their strength; hence provide a feeling of security & consistency in their life. Resilient adolescents enter adulthood to cope well even in adverse circumstances, such as poverty, health problems, or strained family relationships. Strength based solutions & interventions are needed for encouraging resourcefulness (clever ways to overcome difficulties) in children at risk for e.g. children raised in single parent families. Reassurance viz. advice for not being afraid, encouragement, positive relationships & support are useful in controlling behavioral problems of adolescents, so that they are able to experience good mental health. Elders can help adolescents to attain emotional self-regulation. It helps an individual to identify how to react in emotional situations & how to get control over such situations. Resilience can be achieved prospectively (developing capacities to manage future adversities), concurrently (coping well during adversities) and retrospectively (recovering well from adversities). According to Unger (2004) research on resilience must be continued everlasting so as to immunize children against chronic or even acute stressors. Connections which are relational are basic in helping adolescents so that they can adapt to stressors and act as responsive help sources that guard them from mental hurt & pain. The comprehensive child development programs need attention, in educational institutions, so that children can be vocationally guided. It will reduce the burden on single parent & will enhance their communal, enthusiastic & intellectual step up, for their betterment. In this way they can become economically self-sufficient thus can be raised into high esteem individuals. These programs could target on children who are at risk of becoming mentally weak in the light of the conditions which they face in their home & surroundings. This will increase the social capital (relationships which provide support in need) in single parent families.

CHAPTER-2

REVIEW OF LITERATURE

A survey of the work done in the concerned field is of remarkable importance in findings of the research work. Henceforth, it is a major part in of planning a study.

Survey of the related writing is an academic quest & central for the improvement of the issue. It is to discover a feasible way to deal with its answer. The significance of related investigation is introduced below-

1. It limits the danger of discarded & rejected topics, wasted endeavors and methodologies earlier found by past research work. It removes wrong & insignificant discoveries on a flawed exploration plan.
2. It makes a study fundamental & basic.
3. It gives thoughts, clarifications & speculations or theories, in tackling an issue & helps to decipher the discoveries.
4. It proposes the technique or a method for reasonable exploration of the study.
5. It makes the researcher familiar with the research problem under investigation.
6. It enables to understand the dimensions of research problem already covered.
7. It helps to identify the research methodology employed by researchers earlier.
8. It helps to identify the inadequacies of the earlier studies.

A comprehensive review of related Indian & foreign studies is classified as:

- a) Studies related to Resilience
- b) Studies related to Social Support
- c) Studies related to Self-esteem
- d) Studies related to Single Parenting

2.1 Studies in Relation to Resilience

Hess et al. (2002) has examined that resilience is a good predictor for the

positive nurturing of mothers of the adolescents & studied the relationship between factors related to resilience viz. maturity, self-esteem & mother adolescent which are responsible for parenting behavior. One hundred & eighty one mothers of adolescents were chosen as a sample, for the collection of data. Information related to fostering given by a parent & the fulfillment was analyzed through self-report & observing. It took six months. Regression analysis was performed to study the effects and factors of resilience on parental nurturing and fulfillment. This investigation discovered that maternal development & connections with adolescents described by means of harmony and better parental nurturing always give positive results. Suggestions were accommodated for intervention projects to improve mother & adolescent connections & relations.

Resilience is essential in children of divorced families, as explored by Chen & George (2005). Such families are devoid of peace & voices of children living in such families are not listened with proper attention. According to the researchers need is of empirical research which can use proper measures to protect the children so that they become more flexible & strong in the phase of separation of parents.

Greef & Ritman (2005) examined the attributes of an individual to upgrade the resilience in a family dealing with the loss of a parent. Out of the single parents selected nineteen members were females & six were male members. They were inquired about the personal qualities which were helpful in adjustment & adaptation, after family suffered a loss. Tools used for collection of data included the ego resiliency scale, family attachment scale and changeability index eight. Results obtained were qualitative which indicated the major individual characteristics of resilience. According to the study these characteristics are positivity, faith, feelings & their expression & fearlessness. These elements are considered as an asset, for increasing resilience in the single parent families.

Exploration of resilience in adolescents was performed by Fergus & Zimmerman (2005). They provided the framework for understanding healthy development of children, in juvenile phase. Research on resilience varies from research on risks & crisis to the focus on the resources & assets that can empower young people, so that they can beat the unpleasant impacts of hardiness experienced by them. Models of resilience were discussed in this study. The differences of the resilience from the

related concepts were also discussed in the study. Issues & limitations related to resilience were explained along with an outline of research on resilience related to drugs consumption conduct (which is not appropriate) & sex related risks, adopted by adolescents.

LaFromboise et al. (2006) carried out study on resilience in Indian adolescents, living in America. Sample comprised two hundred & twelve adolescents. To assess family adversity, a tool was developed which indicated that thirty eight percent of the adolescents were living in families in peril. Community support, warm & supportive mothers were associated with increase in high level of resilience & pro-social outcomes.

Hsieh & Shek (2008) studied adolescents living with single parents for gender differences in resilience. Boys experienced higher family resilience in comparison to girls.

In some dimensions of school and personal resilience girls displayed higher resilience. Adolescents living with the single parent after divorce displayed higher orientation towards elder people and had more resilience than people living with both the parents.

Levine (2009) worked on the resilience in single mothers of children with disabilities. The respondents comprised of fifteen single parents, who took part in the "Family Strengths & Childhood Disability" project of research. Interviews were arranged for mothers, with respect to their impression, for vulnerability & self-protective elements. For them the exploration of these factors in attaining resilience helps a family adaptation.

Huge differences were found in the public opinion about single mothers and the personal experiences, narrated by mothers. Ideas of resilience in family were uncovered by mothers who feel empowered as single parents. They expressed their feeling of empowerment & personal transformation, which they gained in bringing up, their disabled children in the undesirable circumstances.

Veselska & Orosova (2009) aimed to explore, the relationship of resilience with esteem for the adolescents, addicted to substance abuse. The Rosenberg scale for measuring esteem & Resilience scale for measuring resilience was used. Questions

were responded with respect to the substance misuse. Results showed that there is a relationship between conduct which is considered inept & the low esteem in male adolescents. Family attachment was related with utilizing harmful substances to lesser extent, for males & females.

The social relationships increased the chances of use of drugs. Lower self-esteem was a major cause of smoking in boys. Resilience had a blended impact on improving the probability of smoking.

These outcomes indicated that substance misuse can be counteracted, by targeting individual attributes, as well as the social & family impacts.

Cheeseman (2010) mentioned in the research work that social support in single mothers performing their multiple roles results in more positive outcomes as compared to two parent families Mednick (1987). External protective factors were endured by the single mothers chosen as sample. Although they faced number of challenges then also they used their resources in positive adaptation or being resilient.

Dolbier et al. (2010) investigated the stress related development and the capability of resilience as an intervention to enhance development & nurturing of adolescents. Undergraduates were selected randomly for the intervention program as a control group.

Assets and possessions, qualities of a stressor, change & development of an adolescent were evaluated. Results indicated that esteem and effective coping patterns can help in growth & progress of children. Research also highlighted the intervention as a promising, growth facilitation approach.

Risks & strength attained by being resilient children dealing & adapting to parental separation was investigated by Hopf in 2010. Separation is difficult & distressing event in life of adolescents and for their parents. Significant stressors & risk factors are the cause of parental separation & struggle loss of essential relations issues related to finances & remarriage were found in this study.

Grossman et al. (2011) had concentrated his study on the fifty five trans-sexual youth & tried to depict their sex development. Upsetting educational factors were identified related with their sexual orientation & characteristics. More than sixty six percent of the respondents explained that they were bullied or attacked by their

friends with respect to their sex character. Around one fifth reported ill-treatment in physical context. The more non-acceptance for their sexual orientation, the more maltreated these adolescents were.

Mental versatility or resilience was analyzed in this study by the researchers, which included attributes of an individual his/her confidence & esteem, social help experienced adaptation related to feelings. Regression analysis was performed.

It was observed that resilience represented fifty five percent of the variance with respect to psychological wellness and side effects of externalizing & internalizing problems. Results indicated that feeling focused on emotion based coping was an indicator of psychological well-being.

Plumb (2011) analyzed the connection for the support in society & resilience in family and stress due to the parents, for a child facing autistic spectrum disorder. The investigation was to find the connections between support in society, resilience & strength in the family & stress in the parents.

Sample comprised fifty guardians of children, suffering from this disorder. This study recommended that families which experience serious levels of stress, critical degrees of anxiety & worrisome behavior always try to look for community help at higher rates in comparison to normal families. Accordingly, focus on programming for such families are required that can enhance the key processes of family resilience to reduce stress.

Azam (2012) investigated resilience, in Indian adolescent females. Protective elements, in school & home were studied by the researcher. Standard tests were administered to one hundred & thirty school going adolescent girls.

Correlations were calculated & regression analysis was performed. Results showed that there is a significant & positive connection among protective factors & resilience given by home & school to the adolescent girls.

The effects of the loneliness & life satisfaction level on resilience were studied on 144 adolescents (male & female) with divorced parents by Altundag & Bulut (2014). Pearson multiple regression & moment correlation was used to analyze the data.

Relationship found was positive between resilience & satisfaction attained in life. Results revealed a strong negative relationship between loneliness level and

resilience of adolescents with divorced parents. Regression analysis showed that loneliness impairs mental health. Hence, it is considered that loneliness predicts resilience negatively.

Mota & Matos (2015) carried a study on sibling relationship, in relation to self-idea & resilience in the adolescents, living in residential support & care. The sample comprised of three hundred & eighty seven adolescents living in these cares due some sort of neglect from parents or absence of supporting financial conditions of the family having age of 12-18 years living in the northern & central Portugal. Critical & genuine emotional concerns were the cause to live in such residential communities, for the adolescents.

Bonds which are emotional in such children might give them strength to cope with troubles, during the phase of shift in such cares. Nature of the relationship & self-idea of children was studied. Resilience & its mediating effect along with the directing & moderating effect of the contact with children were studied. Outcomes showed that the nature of the relationship anticipated a positive self-idea.

Emotional problems, mental abuse & problems in behavior in adolescents and the role of esteem & resilience were explained by Arslan (2016). In this study, equation modeling was used to look at role of esteem & resilience. Relation between mental abuse & problems in handling emotions was also studied. Sample comprised 502 female & 435 male students having age between 14-19 years old were selected as the sample.

Students were from different high schools in Turkey. Results showed that there is negative correlation between mental abuse & resilience. Esteem and resilience, was found to be positively correlated. High self-esteem and resilience both are considered to reduce the conduct issues.

Mental abuse faced by adolescents, increases their emotional and behavior problems. It was concluded that resilience & esteem play a protective role in solving emotional & behavioral problems in psychologically maltreated individuals.

Pollmann (2016) surveyed twenty five European countries on well-being of single parents and provided new insights on life satisfaction of these parents. Tool used was European survey form (2008). Countries which provides stronger cultural support for single parent, result in lesser stress in their life in comparison countries with less

cultural support. Researchers also highlighted that crisis in single parent families is due to multiple reasons like financial hardships lack of support and time for children rather being single parent. Results also highlighted that children are the major source of happiness for single parent and thus provides a sense of purpose or meaning to their life according to Smith & Battle (2000).

It was also found that some European countries hold a negative mindset for single parenthood, especially Italian. This social disapproval can be a factor for dissatisfaction towards life. Analysis of the survey by the researchers highlighted that countries like America creates better employment opportunities for single parents and thus help them to reduce the life satisfaction gap between single & mothers having partners.

Gunseli & Sibel (2017) concentrated their study on the connection between life fulfillment & resilience in preschool teachers. Model based screening was used in this study.

Information was gathered utilizing the life satisfaction & resilience scale. Out of two hundred adolescents selected as a sample one hundred eighty one were females & nineteen were males.

For information from the respondents, independent sample test & variance analysis in one way was chosen. Pearson's method for finding the correlation was selected in this study.

Subscales of resilience were related with satisfaction in life. Relationship of life satisfaction & resilience revealed the real meaning of resilience. Awareness of the society about social support is important as it helps in developing resilience.

Psychosocial problems were explored by Rajan & Ngullie in (2017) along with the help seeking behavior among students in schools, in the absence of a psychologist. Two hundred & nine children were chosen by sampling which was purposive in nature from various schools situated in Kohima district (Nagaland) in India.

Questionnaire for help seeking screening inventory for multiple problems & resilience scale were utilized to analyze the factors. Boys were found to be altogether different, as compared to females with respect to hostility in school, addiction to liquor & drugs. Gender differences were found w. r. t. behavior of the adolescents.

Sharma & Jasleen (2017) undertook a study to examine the resilience & parent-adolescent attachment so as to assess the happiness level in adolescents living in families, having single parent. The Tools used were an inventory for measuring happiness, scale to measure social & economic status and a resilience scale. Administration of the tools was performed on one hundred & twenty respondents having age between 13-19 years. Adolescents belonged to the middle socio-economic group of single parent families.

Purposive sampling was adopted for the study. Statistical techniques used were correlation, t-test & chi-square test. Results indicated that adolescents with single parent, perceived, average level of happiness. Gender differences were found in the study. It was found that female adolescents were significantly happier, as compared to male respondents. Resilience was positively correlated to happiness. Similar results were found for attachment of respondents with their parents & happiness.

In 2018, resilience in adolescents was studied by Banerjee et al. The study was based on adolescents of a school in Kolkata, India. 151 students of standards 7th to 9th were chosen as a sample for the study. Main focus was on determination of level of resilience predictors among adolescents. Child & Youth Resilience Measure-12 (CYRM-12) assessed the level of resilience in adolescents. Higher score indicated more resilience. Regression analysis was applied and it was found that 57% of students were resilient. It was also analyzed that factors like family type & time spent with parents were associated with high resilience which builds up the coping capacity. Lack of resilience can lead to mal-adaptation in adolescence and psychopathology in adulthood.

Guo (2018) studied coping mechanisms (both emotion & problem oriented) which act as mediator between attachment provided to the children by the parents and the resilience of adolescents selected as a sample from single and intact families. It was found that paternal attachment was associated with resilience through enhanced problem-oriented coping in single parent and intact families. Female adolescents exhibited significantly lower levels of resilience than male adolescents did regardless of the marital status of their parents.

Garris et al. (2018) worked on adversity faced by the children and the perceptions of parents towards resilience adopted by a child. Researchers examined the community & family level factors linked with resilience. They used national survey for the health of children conducted in United States. It was used to evaluate undesirable experiences of childhood. Multivariable & bivariate logistic regression models were used to measure resilience of the child as perceived by the parents. Sixty two thousand respondents were involved having age between 6-17yrs in the survey. Inference indicated an inverse relationship, between probability of resilience & adverse experiences of childhood. Factors included amenities in the safety in neighborhood & mentorship. All were significantly associated with highly adjusted peers, as compared to children without these specific community factors.

Gartland et al. (2019) studied factors that can affect resilience, in the adolescents, when they face a social misfortune. These factors can be parent loss, poverty or any other kind of traumatic event faced by an adolescent. When positive outcomes like good mental health despite adversity is shown by a person, then term resilient is used. The family community & school are associated with these outcomes. Most important is the role of caregivers in enhancing individual coping skills for being resilient e.g. cognitive skills, academic engagement, relationship with elders & emotional regulation in the unacceptable conditions. Such factors promote resilience hence, diminishes the long term impact of any kind of hardship faced by the adolescent.

Malhi et al. (2019) studied resilience in adolescents in phase of adversity. According to the researchers no doubt resilience is a multi faceted construct, adaptive components of resilience particularly those which are counter felt by difficulties, have not been realized so far. Need is to integrate the components in neurobiological & psychosocial terms. This study emphasized the role of skill acquisition, by the use of strengthening processes in the phase of development of an adolescent. Study also provided the framework for the identification of both neurobiological & psychosocial targets for prevention & therapeutic interventions along with the individual variance in resilience.

Nebhinani & Jain (2019) worked on the resilience focused interventions, which

to promote the child's health & restoration of adaptive systems when a child faces risk of any kind. These interventions adopt universal frameworks hence generally are school based for example aptitude building strategies. Need is to design programs that can enhance resilience by strengthening protective factors thereby positively influencing mental health in children & adolescents in school settings itself. A stepped care approach is required where universal interventions are implemented, which can target the students with increased risk of mental health problems.

Satapathy et al. (2020) in their study investigated resilience in children & adolescents, when they experience traumatic life events. Assessment of the tools and the application for clinical referral & intervention was also mentioned, in this study. Twelve tools to measure resilience were reviewed for children having age, between 5-18 years. Analysis of scales was on the basis of age, item numbers, category and use of scale (for screening & profiling and for intervention) availability of manual cut off score along with many other psychometric properties. It was found after analysis that focus should be on various dimensions of resilience which are needed to be explored by more precise methods.

The outcomes of the study conducted by Matos et al. (2021) stated that if the families are not living in outrageous poverty & neediness then also they actually face problems due to finances. Pressure of financial setbacks is more pronounced in women in single parent families where ninety percent are affected. This study confirmed that generally impact on women is due to the hardships they face in such families. Moreover, the outcomes showed that the higher the neediness level the lower is the resilience in the family. Aspects related to work, information, development of individuals in the family particularly adolescents, helps to improve the assets & resources which can upgrade resilience in the family.

Yeung & Li in (2021) studied resilience education in Asian children. Reason of the study undertaken was that, in major the research performed on resilience is on western countries. The environment is challenging as there are limited applications for policy & prevention in Asia or societies in the east.

Researchers examined educational resilience, in Asia to compensate the research in western countries. In Asia, many challenging factors for e.g. poverty,

migration of laborers and increased divorced rate are present. All these factors influence the children therefore this study was planned to have more focus on the factors which can act as a barrier for all negative effects, that can increase stress. Education is an important source to get rid of the problems a person face, from various stressors viz. academic, personal or on family grounds. This paper emphasized on the efforts made by educators to promote resilience particularly when children & youth are exposed. Research performed on resilience indicates that there is grim need for an empirical investigation which can implement measures that may increase the chances for children to become resilient, in the unpleasant phases of life. Resilience is related to maturity, self-esteem & adolescent's relationships with parents specifically in single parent families. These factors are responsible for better parenting outcomes.

2.2 Studies in Relation to Social Support

Social support and its sources their relation with single parenting, were studied by Norbeck & Sheiner in 1982. Homogeneous population on variables was chosen. Variables selected were important in coping when parents are single for their financial status & professional opportunities. A structured interview and a checklist were given to thirty single women to find out the sources of social support. Behavioral & emotional development of children & adequacy of parents was measured by professional staff members at day care centre. This was considered as the criteria for the measures of performance. The adequately functioning group was separated from the inadequate group on basis of the staff ratings. Correlation with social support was found to be significant.

Gladow & Ray (1986) analyzed the supportive networks which are informal on well-being of single parents with low income. By their findings it was indicated that various kinds of supports influence, various types of prosperity. Support from companions & members of family, helps a lot in decreasing the issues faced due to finances by single parents. They are dependent on the both for help that can without delay decrease the issues they will be going to face in life. Support from companions helps in decreasing loneliness & giving greater freedom to communicate freely at ease. With relatives no relationship with loneliness was found.

Samuelsson (1997) investigated the social network in single parent families and found that boys were satisfied with the support they receive from their personal networks in comparison to girls. According to the findings of the study girls were lonely due to inadequate support. More conflicts were present in between children with single parents Children living in one-family houses experienced more conflicts between the people in their networks and correlation was found between the support they receive and behavioral problems.

Dumont & Provost (1999) examined 297 adolescents of class eighth &eleventh. Respondents were classified into three groups according to the burdens of daily life & symptoms of depression. Classification of groups included balanced or adjusted, susceptible & resilient. Analysis was performed, to classify groups on the basis of esteem, seeking help from friends, adapting & coping techniques acquired in society.

The study uncovered that esteem, critical thinking, effective coping & wrong doings among peers assisted in separating the groups. Higher confidence and esteem was found in the balanced group as compared to two other groups. More confidence was seen in resilient individuals as compared to the vulnerable group. For criminal activities among peers vulnerable populations had higher scores, than the balanced & resilient children. It was also observed that the versatile group had higher scores, on critical thinking adapting systems than the other two groups.

Lipman & Boyle (2005) worked on supporting groups or social support for single mothers. Single mothers face many psychological problems. Sample comprised of 116 single mothers of the children having age in range 3-9 years. Group sessions were assigned to mothers having duration of ten weeks which offered a list of community resources (part of social support). In the intervention group mothers had improved scores for self-esteem & mood in comparison to the control group.

Factors that influence the social & personal adjustment in adolescents, with reference to gender, age & class were examined by Lavakare in 2009. 263 students were selected as a sample randomly from twenty six schools situated in city of Mumbai. California test of personality and problem check list were the tools used

for the data collection. The results indicated that the social & personal adjustment status is an indicator for physical ailments & behavior problems. Personal and social adjustment had an inverse significant relationship with both the physical ailments & the behavior problems.

Beets et al. (2010) studied the social help rendered by parents & the physical work performed by the adolescents. Four classifications of support in social context were distinguished with the difference in the underlying mechanisms viz. intangible & tangible. Two classifications were further given viz. tangible support i.e. instrumental (for e.g. help for fee payment & transportation) & second is conditional which refers to the supervision or caretaking. The intangible help is further partitioned into the two different categories motivational & related to benefits (also called as informational support). Result of the study showed positive relationship, among the two support systems & also with the physical activities or work carried over by adolescents.

Relationship between assistance & support provided by friends and the mental & conduct related problems among adolescents whose parents died or were infected with viral infection (AIDS) was analyzed by Li et al. (2010). Interventions for coping or adapting were provided & assigned in random manner to these families. Assessment was again made after two years of interventions provided. Adolescents who had more help from friends revealed lower levels of depression or misery. They suffered from fewer behavioral problems. Adolescents having negative impact from their role models had more of the conduct issues. Social support essentially decreases in depression. A person, who suffers such impacts, needs more of social support & interventions programs to reduce depression from their lives. Role models selected by adolescents of such families, should be positive & normal in behavior.

Salami (2010) investigated resilience, esteem & social help in response of adolescents to aggression & violence. Researcher also explored relation in between aggression, violence & post-traumatic stress disorder in adolescents along with the moderating effect of social support, resilience & self-esteem on this disorder. Tools were applied for the response to aggression, resilience, self-esteem & symptoms of the disorder on two hundred & eighty school adolescents, chosen randomly from Kwara state, Nigeria. Information was gained through regression.

It was observed that openness to violence & aggression was related to symptoms associated with the trauma. The moderating influence of resilience & self-esteem was also found on exposure to aggression. The effects of trauma are weaker in adolescents who are resilient & had appropriate esteem & social support.

Stewart & Suldo (2011) explored the help & resources in society and adolescent's well-being in their early stage. This study explained that how social help, from guardians & educators can help to reduce psychopathology (i.e., externalizing & internalizing manifestations) along with maintaining health (i.e., life fulfillment). Sample of the study comprised three hundred & ninety school students. Scholastic accomplishment was explored in the relation with support from friends & psychological wellness. Social support was found to be an indicator of psychological well-being & life fulfillment. Parent support was the most important indicator of all the signs of emotional wellness. Accomplishment in academics helped in, reducing the externalizing behaviors (parent support important). School mate support worked as a support for the average students. Success in studies, moderated psychopathology among students with low parental help as the results of the study indicated.

Strauss (2011) examined the salutogenic perspective in single parent families. It was found that both internal strength & social support are predictors for decreasing the negative behaviors among the adolescents of single parent families in spite of hardships. Reframing of thoughts and supportive communication in such families contributed to resilience and well functioning of the family.

Association between parental depression & child maladjustment was studied by Chen & Kovacs (2013). According to the researchers, strengths & potential protective mechanisms are promoters of resilience. Five factors specifically integrity or goodness of fit, self-esteem & confidence, self-adequacy, social help, family working & openings for change, were main noticeable factors in this study.

Explanation of risk & hazards, resources & their management, discovery of the abilities & capacities for the development & advancement of family connections or relationships and the social help, were the principles, which emerged from this study. The main focus should be on formation of collaborative relationships in the family & society, according to the researcher.

The risk factors for the suicidal or self destructing ideation on three hundred & ninety two adolescents were explored by Brausch & Decker in 2014. Parental support & self-esteem were considered as protective variables & moderators for self-destructive ideation. Eating, disorders, depression & body satisfaction were also studied. They were found as the critical indicators of self-destructive ideation.

Result for the body satisfaction was found to be insignificant. The connection between depression & self-destructive ideation was moderated by parental support & self esteem. The relation between disordered eating patterns & suicidal ideation was directed by peer support. Results highlighted the significance of analyzing & interpreting the role of defensive or protective variables for suicidal tendencies in children, particularly adolescents.

Angley et al. (2015) explored the family functioning, social support & competence of parents. The study explored the connection between family functioning, social support & capital, on the competence of parents. Study also included satisfaction & self-efficacy in adolescent mothers and their partners. Focus of the study was to find out the relationship between social support & efficacy of parents. Participants were pregnant adolescent females & their associates. The structured interviews were completed with the assistance of audio computer, during six months postpartum of pregnancy.

Modeling at multiple levels was used to evaluate the influence of support, on the outcomes of parents. Interdependence model was used to study the responses. Results indicated that there is an increase in the satisfaction of parents ($p < 0.001$) & self efficacy ($p = 0.006$) with more of social support. It was also found that more satisfaction of parents is also linked with the high functioning of the family. Same results were found with parenting satisfaction with functioning of the partner in the family.

Fengqiang et al.(2016)explored the relationship among addiction of surfing internet, events in life, social help & hostility. To study the internal structures of these four factors study was planned. Three hundred & sixty three students were chosen, through the strategy of cluster sampling. Respondents were approached to finish up with the four tools.

Internet addiction scale, self-rating check list, for tracking life events, a scale to measure perceived social support & a questionnaire related to aggression were provided for the data collection. Results showed-Aggression was found to be correlated positively with addiction of internet & negatively associated with social support. Addiction of internet was correlated with life occasions positively & the relationship found with social support was negative. Life occasions & social help played numerous roles between aggression & internet aggression.

Taylor et al. (2016) studied practices of parents & their perceived social support. They also studied relations of the social competence in children. Sample constituted 674 mothers & 430 fathers. Longitudinal relationship of social support & behavior of parents was examined. Relationship was also studied for social competence of adolescents, in intact & single parent families. All constructs were significantly correlated & found to be stable for both models. Monitoring of parents as reported by fathers & mothers and warmth of parents as reported by the child, were correlated. Perceived social support contributed to social competence. It had a positive relation to monitoring of mother. The study focused on the comparison of the behavior of parents in these two families.

Williams (2016) examined the coping strategies, stress & social support, along with their relationships in mothers chosen as a sample, from single & intact families. Sample of 173 married mothers (in intact family) was selected for the study raising a child by staying at home. Sample also constituted ninety eight single mothers, which included-

1. Never married
2. Divorced
3. A committed relationship
4. Widowed

Tools used to collect the data, were-

- a) Coping questionnaire
- b) Perceived stress scale
- c) Social support scale.

An independent sample test was conducted. It was found that the married women

had more social support than single mothers who face more stress, as compared to mothers in intact families. On the basis of the measures of coping insignificant results were found. Insignificant difference was obtained using analysis of covariance, between coping strategies & stress among mothers by controlling social support. More insight is required in this context. Importance of social support was highlighted in this study.

Conger (2017) worked on promoting strengths & resilience in single mother families. To be a mother for a single woman (who feels powerless, against dangers & risks associated with financial difficulties and poor working conditions) is considered as challenging. Children of such families experience many kinds of maladjustment problems. Analyzing the factors, which can add to the success of single parents along with nurturing is one of the best methods, which can further help in adjustment of children in these families. Two factors that generously add to single mother's success are-

- a) Fostering practices should be positive
- b) Open to change

The researchers' highlighted the significance of the factors which can act as risk modifiers & can act as behavioral interventions.

According to, Chakravorty et al. (2021) family is an effective & emotional supportive network for the child. Family has been a consistent & significant unit of examination. Goal of a family is to improve & comprehend development, in humans. Progressions in the foundation of family in social & monetary context are the basic necessities. Till date very few examinations are conducted in India, to explore the family size & family developmental designs. Few investigations for the potential causes of monetary & social repercussions in a family were studied. Specifically, very less knowledge is available about who is losing or acquiring in a family because of the uncommon changes in different family forms, in India. Need is to study & investigate the family demography in India. Researchers emphasized to concentrate the study of a family coordination & network towards social, financial & demographic advancement. Family can serve as unit for individuals to select & make choices of their own behaviors in the society.

It can be concluded that social interaction & communication is important for maintaining self-identity of an individual. When a person is socially apt achievement in life is more. Support from companions, family & friends helps to lessen the loneliness in life particularly in an individual who belongs to single parent families.

Peers are always open to communication thus can provide a greater freedom for discussions. Parental help stays the best mark for dealing with emotional & behavioral issues during the adolescent phase.

2.3 Studies in Relation to Self-Esteem

Epstein, J. L. (1995) researched the relationship of single parent involvement & their self-esteem to the participation in their child's educational program. Parent enclosure was studied. It was found that those parents, who took part in the parent association had high levels of esteem & confidence. The performance of the researcher focused on the following -

1. Parent inclusion.
2. Significance of parent involvement.
3. Financial status.
4. Factors identifying for confidence & esteem in concern with participation of parents.

The study uncovered a relation between parent association & esteem which was found to be significant. The parents, who took part in a training program for the children, had more self-esteem than the non-participants.

Overholser et al. (1995) examined the deficits in self-esteem & self-destructive inclinations, among adolescents. Intend of the study, was to inspect the connection between shortfalls of esteem & propensities to the self-destruction in young adolescents who were dealing with mental problems. Two hundred & ninety school students. An unusual connection between self-destructive inclinations & esteem was inspected by examining the hopelessness, misery, depression & sadness of the adolescents. Gender differences were estimated on the basis of the status after hospitalization. It was found that males had higher esteem than females. School students scored high in their self-esteem as compared to mental patients.

Correlations were found to be similar for hospitalization status on basis of the gender. It was concluded that low confidence & esteem were associated with high levels of discouragement, depression, sadness & self-destructive ideation. Low esteem was firmly associated with feelings of sorrow, unhappiness & self-destructive tendencies in adolescents.

Lanz (1999) studied differences in self-esteem on the basis of parent & child communication in separated, divorced and single parent families who have adopted a child. Sample consisted of 450 adolescents of these three types of families. Tools used were the Parent-adolescent communication scale (Barnes & Olson), the Rosenberg self-esteem scale and socio-demographic items. Relationship of the adolescents with separated & single parent was poor in comparison with that of peers. The results also indicated that adoptive children had better relationship with their single parent as compared to their separated single parent. Contrary results were found in relation to self-esteem, adoptees showed lower self-esteem than the other groups of adolescents. No gender differences on the basis of self-esteem were found in either of the family disputed (separated or divorced) or adoptees.

Lane et al. (2002) examined the self-esteem of adolescent females & their mothers, in intact & single mother families. 59 mother daughter pairs of intact families & 31 mother daughter pairs of single mother families from an urban area, were included the sample. Causal comparative research was used. Self-esteem inventory given by Coopersmith was completed by mothers & the adolescents. The information filled by mothers gave an idea about the relationship of mother with their daughters & the environment in the family. 't'-tests were used to estimate the self-esteem scores. The outcomes showed that juvenile females, in dual parent families had higher, self-esteem & confidence than the young females living in the single parent families. The investigation showed that there is a certain relationship between esteem of female teenagers and the degree of total self-esteem of mothers.

Mann et al. (2004) studied the relation of esteem advancement and emotional well-being. It is essential for mental & social prosperity. It impacts the goals of an individual & the interaction, with others.

The study focused on the significance of self-esteem as a defensive element & a

protective factor in physical & psychological wellness. Investigation was performed to state that high esteem can initiate better well-being & the social conduct. It is related with dealing in a wide range of mental & social issues. Low esteem is associated with many internalizing problems like self-destructive inclination, dietary issues & psychological stress. It is also linked with several externalizing problems for example brutality & misuse of drugs.

It was found that advancement in level of self-esteem is very important in the improvement of both mental & actual well-being. Focal point of the study was on developing the programs to enhance self-esteem and confidence which are the essential components of emotional well-being.

Relationship between parent & adolescents' self-esteem was examined by Yaacob, in 2006. According the researcher mother child relationship forms the basis of every future relationship. The result of the advancement & development of an adolescent depends upon their self-image strength. They should give up their self-image to promote a more developed self-appreciation. It was assessed that working of the entire family is dependent on the personal relations & intimacy of the young mind in a family.

Self-esteem of the boys living with single mothers & single fathers having the age between 9-14 years was studied by Lowenstein & Koopman in 2008. Self-esteem was investigated in relation to the following-a) Time spent by the child in a single parent home. b) Quality of relationship between the parent & child.

Results uncovered that there was an insignificant difference between adolescents living with single mothers & with single fathers. Insignificant correlation was found in between esteem of adolescents & the time spent by them with the single parents along with the nature of the parental relationship. More insight is required in this context according to the investigators.

Zakeri & Karimpour (2011) examined the relationship between self-esteem & the nurturing method adopted by the parents. 546 adolescents were selected as a sample of the study. Coopersmith's self-esteem inventory & Steinberg's parenting styles scale (2005) were used for the assessment. The simultaneous multiple regressions of self-esteem scores on the nurturing methods of parents uncovered acknowledgment by the parents & mental autonomy were indicators of the self-

esteem. Examination of the results of independent sample test showed that the mean score of girls in terms of their behavioral problems was more than boys in the strict parenting style.

Atindanbila et al. (2012) conducted a on the self-esteem survey design was used for the study. The Rosenberg Self-esteem Scale was used to collect the data on the self-esteem of the participants. The results showed that the self-esteem of the adolescents is not dependent on the type of parenthood but on complex interaction of the factors example relationship between the parent & child environment of school. It was also found in the study that male adolescents had more self-esteem than the female ones. The study also recommended that self-esteem is a concern for all children whether they belong to dual family or single parent family. Insignificant results ($p>.0.05$) was the reason behind these recommendations.

Driscoll (2012) investigated the connection between the nurturing styles of parents & self-esteem of the adolescents. Information from hundred & eighty three respondents was gathered through an internet based survey. Nurturing styles of parents were surveyed by using a four component model & esteem was assessed by using two distinctive scales. Various examinations were finished. It was concluded that esteem changed with the age also with the nurturing styles of parents. The study explored the relation of variables & their dependence on each other.

Tam et al. (2012) investigated nurturing styles, adopted by parents and correlated them with self-esteem, drug or substance abuse, behavioral problems & academic achievement of adolescents. The nurturing styles were classified as permissive & authoritative. The study had the focus on the effects of the parenting style on esteem of adolescents (self-esteem and self-efficacy are important parts of self-concept).

One hundred & twenty adolescents were participants, for the study. Equal number of males & females constituted the sample. Research method involved a survey administered on the sample to collect the information. Authoritative parenting was highly linked to self-esteem whereas permissive parenting was not found to be associated with esteem of the respondents.

Sprecher et al. (2013) suggested that self-esteem can be developed, in any stage of life or later phases of life as well. It is a major component, as connections

between parent & child can be improved by enhancing it. Low esteem has a great impact on the dangerous practices adopted by the children in adolescence. Secure relations high esteem & confidence in life are strong defensive factors for risky behaviors. These factors had gained much support through various researches, performed till date.

Relation between the societal position of peers & their self-esteem was explored by Sveningsson in 2013. Respondents were equal number of males & female adolescents who were classified into neglected, famed, rejected, questionable, normal & unclassified according to their position in the society. The results demonstrated that economic well-being in society depends on self-esteem & vice versa. Most popular group had maximum mean value of total self-esteem score on the subscale of relation to other people. The neglected adolescents had the minimum mean for total self-esteem. Their relation to other people was also feeble.

Risky behaviors during adolescence are related to insecure attachments & low self-esteem. The avoidant attachment style is associated with the risk of involvement in externalizing behaviors. This finding was a major finding, of the study. This study also proposed that esteem can act as a diluter or a moderator between the hazardous practices adopted by children in adolescence. Research on self-esteem and its applications provides a valuable space for the examination in future explorations, regarding adolescents.

Esteem in a sample of three hundred & fifty six adolescents, was analyzed by Alami et al. (2014). Sample was chosen from single & dual parent families. In this study two hundred & fifty children were from intact family and one hundred & six were from the families having single parent. Questionnaires for assessing self-esteem & parenting styles perceived by adolescents were used for data collection. To find out the relation between self-esteem of the adolescent and the nurturing styles of parents, Chi-square test was applied. Results were found to be statistically significant. Authoritative style of parenting was dominant in both types of families. Significant differences on the basis of esteem of the respondent income of family, level of education, job of parents and their nurturing styles were found. As indicated by the researchers outcomes of the study can be utilized in changing the nurturing styles and their dimensions so that esteem can be improved.

In an Indian context, Sharma & Pandey (2015) examined parenting styles & their effects on self-esteem of adolescents. Four types of parenting styles were enlisted by the researchers-

- a) Authoritarian
- b) Authoritative
- c) Permissive
- d) Neglectful parenting

These parenting styles & their effect on self-esteem of the adolescents were the focus of the study. Careless & neglectful approach adopted by the parents towards youngsters has a negative influence on them. From the NCR region of India, 60 males & 60 females were selected as a sample of age between 16-18 years. Adolescents selected were psychologically & physically strong. They were school going & had the same financial condition with same social status. Results demonstrated that there was an insignificant difference between permissive & authoritative nurturing on the esteem of adolescents'. Both of these styles helped the children to enhance their self-esteem and bring up their confidence in life. Authoritarian parenting had a negative relation with the adolescent's self-esteem. Gender differences in relation to self-esteem were found to be insignificant.

Enejoh et al. (2016) explored that very less knowledge is available on the impact of self-esteem on the risky sexual behavior. To overcome the limitation they performed, research on the association of sexual behavior involving risk and also the relation with self-esteem. Rationale of this study was to know whether high self-esteem predicts lower sexual behavior in comparison to adolescents with less esteem. Survey was performed on three hundred & sixty adolescents of high schools situated in Nigeria. The Rosenberg scale was utilized to know about adolescent's esteem. A screener for HIV was used to explore the sexual conduct problems. Chi square ratio was used to determine the differences, on the basis of the tools applied. 't'-test was conducted to find out the differences on the basis of the mean scores provided by the screener & on the basis of esteem. Gender differences were not found on the basis of self-esteem of adolescents. Programs aimed at reducing risky sexual behavior. Interventions should be provided by the educators

& researchers to raise the self-esteem of adolescents.

The influence of the category of single parenting on student's self esteem was found by Kimani in (2016). The sample of adolescents was from high schools situated in Kenya. Causal comparative method was used to carry the research design. 18 secondary students were selected for choosing the sample of study which comprised of 180 students from single parent families. Purposive and stratified sampling was used for the selection of the sample. A self-esteem tool was applied on students along with other questionnaires. Descriptive & inferential statistics included analysis of variance for data analysis. Insignificant results were found in relation to the type of single parenting & the levels of self-esteem of the adolescents. More explorations were recommended for future to know the significance of self-esteem in school going adolescents raised in single parent families. The study suggested that since low esteem in adolescents, is a reason to worry therefore guardians, counselors, instructors, guides and grown-ups people in adolescent's life, should follow a more comprehensive approach by using unique strategies to enhance self-esteem.

Relationship between resilience, self-efficacy, parental rearing, inefficient coping strategies was explored by Koskinen in 2016. Inventory for coping given by Carver in 1997, was used to assess respondents coping styles. The general self-efficacy scale was utilized to assess the self-efficacy of the respondents. Resilience scale given by Smith et al. in 2008, was used to measure resilience. The parental authority survey proposed by Buri in 1991 was utilized to evaluate parental rearing. Regression analysis was performed to assess the relationship between these variables. Respondents who participated in the study were one hundred & twenty nine in number.

Results of the study indicated that the adolescents with low self-viability, low esteem and resilience used maladaptive adapting techniques, frequently to cope up with the circumstances. Discoveries from this study, focused on the requirement for interventions to expand individual's self-adequacy, esteem & flexibility, so that people are able to utilize more versatile & adapting techniques.

Henriksen et al. (2017) conducted a study on esteem and its linkage to psychological well-being & mental health. Few studies are undertaken in relation to self-esteem & attention problems of adolescents. According to the researchers

there is dire need in the improvement of the manifestations in self-esteem so as to overcome of the nervousness & misery from the life of immature children viz. adolescents. Information was gathered from adolescents from a psychiatry department in Norway. Self-reports were used to estimate the stress in adolescents in relation to self-esteem. Re-evaluation of respondents after three years was performed. Uneasiness, anxiety, attention problems & depression in children can be lessened by applying principles to enhance self-esteem. Results featured the significance of the increase in worldwide esteem with respect to emotional issues & problems related to attention.

Relation of maltreatment of children & envy along with the moderating & mediating effects of self-esteem & social support in adolescents was studied by Xiang in 2018. Information was gathered from four hundred & twenty six students. They were assessed using the scale which measured abuse in children. Envy scale, Rosenberg's scale & a tool for measuring social support were used in the study. The outcomes indicated that self-esteem mediates and moderates the relationship between abuse of children & jealousy.

Examinations related to analysis of mediation effect further uncovered that impact of jealousy & abuse can be mediated through the help from society and esteem. Further investigations showed that the male adolescents had higher abuse scores thus generally have lower levels of social support in comparison to female adolescents. Psychological interventions focusing on individuals of both genders in relation to abuse should be adopted at all levels of education, by the stakeholders of society.

Malik et al. (2022) investigated the influence of socio-demographic factors on the social development and self-esteem of adolescents. Focus of the study was also on the influence of the absence of parents on children. Quantitative cross sectional survey was conducted to collect the data from the adolescents of single & intact parent families.

Outcomes confirm the approach of a strong family system to strengthen the functioning of families by emphasizing the joint & extended family connections which can help in making marital relationship emotionally strong and lessen the family conflicts. This will reduce the problems in behavior associated with children.

Various studies conducted on self-esteem indicated that it is an important

parameter for reducing the problems faced by children in their adolescent phase. All that is needful is a training to groom the self-esteem of a child at risk by all elders, whether parent or an educator. Need is of more attention given on gender basis of self-esteem in future studies undertaken. Educational adjustment is better in boys with single parent as compared to girls, according to some researchers. Contrary results were also given by some researchers. According to them, boys with single parent had low self-esteem & academic achievement as compared to girls.

2.4 Studies in Relation to Single Parenting

Izikoff & Pardeck (1983) compared the self-concepts of the adolescents from intact & non intact families. The self-concept of the children was measured by Piers Harris self-concept scale. Multiple regression approach was used to analyze the data. According to the results, the self-concepts of the children in the non-intact families were found to be positive.

Krein (1986) studied the effect of living in a family having single parent on attainment of education and earning of men. Three speculations came into being on earnings and educational attainment. The analysis indicated that living in such families has a direct effect on education. Although the impact was less on the earnings via education. The effect was found to maximum in pre-school years.

Krein & Beller (1988) studied the relationship of the parent & children in a single parent family. Focus was also on relationship of the parent and its effect on promoting the adjustment, self-concept & anxiety among the students. Differences among the children belonging to family having single parent were found on the basis of family relationships with regard to social, educational & emotional adjustment. Results were found to be significant. It was also explored that boys had better educational adjustment than girls.

Examination of children in single mother & father families was conducted by Schnayer & Orr in 1989. Intent of study was to investigate characteristics relating to differences in behavioral problems of children according to the difference in the gender, of the single parent. Mother was found to be more successful as a single parent, to raise the children, although it does not mean that fathers as a single parent are not competent. Sample included equal number of single mothers & fathers along with sixty two children of such families. Child behavior checklist

given by Achenbach & Edelbrock in 1983 was used to assess the behavioral problems of children. Insignificant results were found, for the scores obtained for behavioral problems of children from single mother and father families. Suggestions & implications for research in this context were recommended in the study.

Smith (1990) explored the social consequences of single parenthood. One of the major consequences for children born in the family having single parents is loneliness which is due to the lack of social support. For six years interviews were conducted on a sample.

Results indicated that many kinds of changes, in such single parents can be observed over time in relation to community participation and feeling of powerlessness. The findings lay stress on the usefulness of natural support systems for single parents, which pointed a reflection towards the societal burdens, placed upon lone parents.

It was found by Langlois & Fortin in 1994 that mental prosperity, troubles & esteem of an individual are impacted by monetary factors. Mothers of single parent families experience more inconvenience and discomfort than mothers in intact families who are less affected by the emotional wellness issues. More insight is required regarding positives & negatives of single parenting and the links between single parenting & mental health, as indicated by the researchers.

Ary et al. (1999) found that when conflicts in the family are experienced, child association and connection in the family are less. Such families show less supervision by the parents. Thus association with peers having more problems in behavior can be seen. The influence of problematic peers increases the problem behaviors in children of such families.

It was examined by Kleist in 1999 that families, which involve single parenting, are not considered as non-traditional families these days. In developed countries, most of the families involve a single parent.

Therefore, interest of researchers has grown to study children's well-being & single parenting. It is a wrong & common notion, that single parent families are disadvantageous to well-being of the children. More of research is required to study the effects single parenting on the well-being of children. Role of the family

counselors was also implicated in this study.

Brodsky & Katherine (2000) explored the goals & strategies adopted by resilient, single mothers who were poor & resided in urban areas. Semi-structured interviews were arranged & conducted for single mothers having age in the range of 26-46 years. Analysis was performed using a standard data analysis. Resilient mothers' implemented planned strategies which were similar to their goals in neighborhood context to achieve parenting goals. They also instilled values in their children along with protection. In this manner, the undisciplined behavior of children was controlled, which included verbal instruction loss of privileges and physical punishment.

Mandara & Murray (2000) examined the family characteristics that affect the youth living in a single parent family who were found to be at risk which attributed to their low self-esteem. Girls & boys of age 15 were chosen as a sample from secondary schools, in California. Sample constituted parents who were married, divorced & unmarried single mothers.

Results found were-

- a) Higher self-esteem was found in boys of an unmarried parent. Income of family along with functioning was also considered, in this study.
- b) Marital status of the parents did not affect the self-esteem of girls.
- c) Families having higher income had more likable & lovable children with appropriate self-control.
- d) Family functioning was related to self-esteem of the adolescent.
- e) Differences in the response of male & female adolescents in the family
- f) Family functioning & its quality diluted the effects of single parenting.

Murry et al. (2001) evaluated review of the research, which linked parenting, of single parent families with the development of child its outcomes & well-being of the mother. Need is to conceptualize & assess the parenting process in these families to examine the circumstances which are responsible to enhance or hamper the successful parenting among the mothers so that behavioral problems of child can be controlled. Implications for future studies were to work out the interactions between monetary stress & behavior of the single parent, having mediocre income.

According to Hilton & Desrochers (2002) control & the married status of the parents show a direct and significant effect on emotional and behavioral problems faced by the children. Financial crisis, gender of the parent, conflicts in parents, coping by parents, has shown influence, on the behavior of children. The findings suggested that the stress is experienced by parents in coping with few resources; when they have to rear a child single handedly. It is quite upsetting for parents. Thus parents try to have control over the children in single parent families' which results into growth of children with disruptive behaviors.

There are families where parents live together without being married. This is called as cohabitation. Well-being of adolescents was studied by Manning & Lamb (2003) in single, married & in cohabiting families. Investigators used the national longitudinal data, for the study of the health of thirteen thousand adolescents to assess their well-being in the cohabiting parent families. Children living in cohabiting families are equipped with more problems in behavior than children in normal intact families. Adolescents with the single parent were found to be more delinquent & had poor academic grades, than teens living with the cohabiting step-parents.

Stress was explored by Cairney et al. (2003) along with the social support & depression. It was planned in mothers who were single & married. A survey related to health on the basis of national population, was performed for analysis of data. Two thousand and nine hundred married & single mothers were selected as respondents. The moderating & mediating effects of the social support on stress were found.

The relation of depression with the family structure was also analyzed by the logistic regression techniques. Analysis predicted that single mothers had more stress that too chronic along with depression as compared to married mothers. Lower levels of the social support & social involvement were perceived by single mothers, as compared to married mothers. They contacted with their friends and family less frequently in comparison to married mothers.

Multivariate analyses were performed which indicated that the low social support & the stress both are responsible for the depression, in single parents. Results suggested that stress has multiple sources viz. proximal & distal stressors. Both should be examined for single mothers.

Pagani et al. (2003) studied aggression & associated risk factors towards mothers by adolescents. The socio-economic factors parenting & the family environment influences were studied on adolescent aggression with help of the data collected from the study of children. Adolescents suffering from physical aggression were more destructive towards their mothers physically and verbally. Gender differences found were insignificant. Adolescents are more hyperactive if the family environment is not positive findings of the study indicated. It was also found that lack of relationships in the family & absence of control leads to compromising behaviors whereas sound relationships results into conventional behaviors.

Cognitive ability & its relation with the parenting styles adopted by parents were explored in children at elementary level of school by Tiller et al. in 2004. A self-administered survey on experiences in the family along with parenting styles was administered, on the parents, in the study for the collection of data. Interviews were also arranged for children in their schools. An inventory for testing an intellectual ability was administered on children. It was found that socio-economic characteristics are better predictors for the cognitive ability of children in comparison to parenting styles.

Lee et al. (2007) conducted a longitudinal study, on the gender of child & parent along with the involvement of parents, in the academics of adolescents belonging to single parent families. It was found that gender of both i.e. parent & child, interacted with the involvement of the parent in the achievement of the child in academics, which is affected differentially. Girls brought up with highly involved single father had better grades in academics than the other groups. Need is to pay more attention to gender specific effects in studies to be conducted in future for the involvement of single parents, in the academics of children, according to the researchers.

Losel et al. (2007) examined the different forms of aggressive behavior. Aggression & its experience in society, was also studied by the researchers. 102 male students, who were aggressive, average, competent & victimized were chosen as a sample.

Aggressive response is impulsive predicts hostility, anger, violence & delinquency. Aggressive responses have no positive responses. Effects of processing of the information & experiences of aggression in society were revealed by multivariate analyses. The significant prevalence of self-reported antisocial behaviors & aggressive tendencies were found in secondary school students in Botswana. Boys were higher on consumption of alcohol, drugs & aggression as compared to girls. Poor parent relations were significantly related to aggression.

Significance of the social support on the parenting styles of single mothers, having low income was explored by Woody & Woody, in 2007. Support from friends & family was measured by the social support scale. Parental satisfaction scale, measured the satisfaction of mother. Parent indicator for success, measured the effectiveness & success of the mother as a parent. Parent satisfaction & parent success, both had a high level as reported by the results of study. High levels of social support from friends & family was also reported by mothers. Results also indicated a strong relation between parenting & support perceived, from the family. Relation was found to be weak for the support from society & parenting.

Behavior problems in children were studied by Hilton & Desrochers (2009). Sample was selected from intact & single parent families. The data was collected from parents of children having age between 6-10years. Interviews were conducted. & standard questionnaires were used to collect the data. Path analysis, indicated that control of parents & their status, whether married or not, proved to be significant & had direct effect on the behavior problems experienced by children. Conflicts in parents, gender & their financial stress, influences the behavior of children, through the control posed by the parents. To rear a child by a single parent is a difficult and a challenging process. To meet the deficits of single parent families, children's response is quite disturbing in behavior. Implications for the improvement in practices adopted by such families to control the behavior of child were also discussed in the study.

Hsieh & Leung (2009) conducted a study on single parents, separated by divorce and the factors which were protective for adolescents in such families. The study investigated adaptation problems suffered by adolescents in divorced parent

families. Respondents were two ninety one youths (forty percent were living with single fathers & rest were living with single mothers). Adolescents had adaptation problems at many levels as indicated by the results of the study. Social support & the functioning of the family had an effect on the level of adaptation adopted by the adolescents. Regression analysis indicated that the most important role is played by functioning of a family amongst all factors. Families which are interconnected & social, protects youth from the adaptation problems provides confidence in handling interpersonal relationships & in attaining resilience.

Single motherhood can also adopted by choice. The experiences of such motherhood were explored by Kotwal & Prabhakar in 2009. Artificial insemination was adopted for child birth & the experiences of mothers were examined in this study. Personal as well as emotional characteristics of the mother were analyzed. Mothers have to face physiologically in this process of artificial insemination. On legal & ethical grounds also mother has to suffer alone along with economic hardships.

Avci & Guçray (2010) examined non-violent & violent adolescents having age in range of 14-18 years in terms of anger expression. Occurrence of delinquent behaviors & psychological problems were also taken into account. State trait anger scale was used, to measure the anger levels & expressions. Family functions were measured by McMaster family assessment measure. Personal information form was used to measure the alcohol use by the family members having psychological problems & criminal behaviors. The families involving aggressive adolescents have more conflicts in solving problems along with other deficits. These can be listed as, ineffective receptiveness, association & communication, control of behavior & functioning in general as compared to the families having less aggressive adolescents. Results also indicated that the violent group had more problems in the behavior than the control group.

Bronnimann (2010) studied the stress of single mothers, along with its effects, on the care of child. Mixed results were obtained, about the ability of mother to provide quality care. Tool used was a Likert scale having six questions, which were given to the single mothers of children attending the master's college & preschools in the Santa Clarita valley. The results of the study indicated that the

single mothers successfully provided adequate child care, in spite of the stress they face.

Imtiaz et al. (2010) examined the social factors that affect the aggressive behavior in a sample of 175 children of single parent family. It was chosen from Bahauddin Zakariya University, Pakistan. Results indicated that attitude towards the religious sect, family environment towards education, job dissatisfaction, media violence & relationships with the peer group causes aggressive behavior among youth.

Jackson et al. (2010) examined the higher levels of parental stress in divorced families. The contact between parent & child in single parent family is less therefore associated with increased behavior problems. Researchers also found that harsh discipline shown by a single mother to control the child is moderated by the association of child with biological fathers who are not living with them thus their problems in behavior can be controlled. Less contact with the father elevated the stress in mother which increases the behavior problems, in children.

Olatunde & Abisola (2010) studied the academics of children, in disputed families. The effect of family structure was studied on the academic achievement of children. Two hundred students were selected randomly from the high schools. In this study survey research design adopted was descriptive in nature. A questionnaire related to adolescence was also administered on respondents. Correlation was found using the Spearman formula. Significant differences were calculated in the academic achievement of adolescents chosen for study from the broken & intact homes.

Tanaka et al. (2010) examined conflicts among parents on the basis of self-report measures. It was found that aggression which is proactive can be related to delinquency & hyperactivity. These externalizing symptoms were due to the conflicts in a family. Hypothesis that reactive aggression is related to attention problems was accepted in this study. Such problems can be moderated by control, cohesion & relationships in the family. The findings were mixed regarding the relationship between the aggressive nature of the children and externalizing symptoms.

Emery & Rowen (2011) explored the adolescents' experience of parental divorce.

Researchers found that parental divorce is counted as one of the difficult experiences, faced by the adolescents in their childhood stage. Difficult and unacceptable changes in the family are experienced by children during the phase of divorce of the parents. Parent child relationships are troublesome along with the rise in parental conflicts & economic hardships in such families.

It was also found that despite of the bitter experiences given by various stressors children were resilient when their parents were getting divorced i.e. children did not suffer long lasting & psychological problems. For the resilient children divorce is a painful memory but not invulnerability. Such troublesome relations in the family can create serious concerns for adolescents. Considerations for the future research include whether to give too much autonomy to the adolescents along with the responsibility or not.

Henderson (2011) conducted a study on single mothers who were found resilient. A case study was conducted on the mothers of adolescents who were successful in academics, in the elementary schools, of urban areas. The intent of this case study was to broaden the qualitative research & to inform single parents, as well as the educators about the factors that can result in positive academic outcomes.

In depth, interviews were conducted. Responses of the mothers were analyzed, after every interview. Conclusions were drawn by categorizing and coding the statements also from the ideas gained from the experiences. It was ascertained that important patterns & themes were noted during the study.

The results of this study yielded the following-

- a) The ability of single mothers to overcome from the adverse & critical situations influenced the academic success of their children.
- b) Upbringing of the single mothers also influenced their children.
- c) Friends supported the mothers along with the family.
- d) Mothers were able to persevere in difficult times due to their deep faith in God.

Moderating influence of the environment in the family during the phase of conflicts between parents was studied Jackson et al. in 2011. Levels of the expression of anger & its reaction was studied by the researchers in both non-

depressed & depressed adolescents. One hundred & forty adolescents were chosen as a sample.

These adolescents helped their parents in solving the problems which arose due to conflicts. The expression of anger along with the heart rate was measured. Significant differences were found in depressed & non-depressed individuals on the basis of their reactivity and response to anger & heart rate in the disturbed family environment. Findings have shown that the anger & depression in adolescents was attuned, to the less extent in such environments.

Oluwatosin & Joseph (2011) attempted to study the effects on academic achievement & truancy behavior in single parent families. Sample comprised of two hundred & fifty secondary school students. A self-designed tool was used to study the effects of such parents on academic success of students by the researchers. Independent sample test was used in analyzing the difference between academic achievement of adolescents of single parent & intact family. On analysis insignificant results were obtained.

Significant differences on the basis of truant behavior of the adolescents from single & intact parent families were found. Counseling for enhancing the self-esteem & self-concept in adolescents of single parents was recommended in the study. This study provided the implications, to control the behavioral problems, in children, in the phase of disagreements, between parents.

Depression, anxiety & stress were studied by Malik & Irshad in 2012 to analyze the relationship of single parenting and its contribution to behavior problems in children of such families. Sample constituted thirty three parents & thirty three school going children. Information regarding demographics was collected. A scale was used to measure stress, depression & anxiety in the study.

Questionnaire was used for assessing the behavior problems in children. Independent sample tests & Pearson's correlation were applied as statistical techniques to analyze the results. Single parents were found to have higher scores in terms of their anxiety, depression & stress as compared to the control group. Results were also significant for the behavior problems experienced by children. Hypotheses framed for the purpose of study were accepted. It was concluded that single parenting contributes to the behavior problems in children as more

depression, stress & anxiety is found in these parents.

Well-being of children was examined by Phillip in 2012, in relation to their as family structure & climate. Sample chosen comprised of two hundred & seventy eight adolescents. Questionnaires for the assessment of structure of the family (single, step or nuclear) & climate of family in relation to the satisfaction level & negative effects of the family environment was completed. Indicators for the well-being were found. These indicators comprised of self-esteem, aspirations and the expectation for education & optimism. It was found that the family climate & adolescent well-being are significantly related.

Loke & Mak (2013) worked on family processes & peer influences on the substance misuse & other risky behavior adopted by 805 adolescents of secondary schools. The adolescents engaged in smoking & drinking were having authoritarian parents involved in conflicts. Friends who were found habitual for smoking & drinking were the major contributors, to smoking & drinking in adolescents, chosen as a sample of study. Need is to improvise the family functioning by strengthening monitoring & interpersonal skills in parents.

Anderson (2014) studied the experiences of strength gained by single mothers of school going children in crisis. There is dearth of research performed that highlights the healthy functioning in single parent families headed by females, according to the researcher. In such families family growth can be stimulated in positive direction & development like normal intact families. This is the reason that such families are termed as resilient families.

A research design, which incorporated in-depth interviews with four mothers & their eight children was utilized to explore the strength within the family. Snowball & purposive sampling techniques were used to select the participants of the study. Those mothers & children were selected, who had experienced the strength, in difficult situations are able to reflect on their experience.

The understanding of inner strength was gained by single mothers as-

- (a) Discovering self by introspection.
- (b) Using emotions to understand their real selves.
- (c) Priorities of inter-personal relationships.

(d) Creation of the destiny of their children.

(e) Able to achieve resilience to overcome adversity.

Findings indicated that the strength of women is important, for the family & its sustenance. Females are able to create harmony in the family by building strong human relations. Implications & suggestions for theory, practice & research were to provide sensitive & thoughtful care to the families headed by a single parent. Strength of single parent families needs attention & understanding at root level. This will help them to affirm the control over difficult conditions that can affect their lives.

Babalis et al. (2014) examined the effect of divorce on the performance of children, in school & behavior. 314 students constituted the research sample, from urban & suburban parts of Greece. 118 teachers were provided Pupil Behavior Rating Scale (PBRS) for completion. Students along with their parents were given a questionnaire, for personal information and demographic characteristics. The correlation results were found to be significant. Family type, behavioral problems & performance in school were related to each other. Findings revealed that family pattern affects the school progress as well as emotional development of a child. Normal environment of the family sound relationships & communication of children with parents are important to develop respect & trust in family. The support of society to the single parent families makes a positive difference in the behavior of a child.

Boylu & Ozturk (2014) explored the changes in the leisure consumption in single parent families. 119 single parent employees at the Hacettepe University, in Ankara, Turkey, were chosen as participants. 76.5% families were headed by females as a single parent rest of the included families was headed by single male parent. More than a half had a college degree and rest had an education which was attained, in a secondary school.

Results indicated that due to economic reasons, single parent families experienced a decrease in consumption in activities, such as going to the cinema, theatre, concerts, participating in the sporting events and eating out. Because of

financial strain they are often less involved, in amusement activities.

Khan et al. (2014) studied the association of family environment & family structure with aggression in children having a rural background. A survey was conducted for exploring the family environment & its association with aggression in children. Aggression is a behavior of an individual that results in short-tempered reactions & outbursts of anger.

It is a clinical problem in children in some of the communities. Interviews were conducted with parents to know about their family structure & environment. They were also inquired about the aggressive behavior of children, in school & at home. Information was collected. Respondents were 384 in number. Results of the study indicated that the aggressive behavior in children leads to anger, violence & lack of tolerance especially when family environment is disturbed.

Inter-relationships were examined by Singh & Kiran (2014) in relation to family structure & delinquent behavior of children. Family structures chosen in this study were, families having both the parents families headed by single mother or father & step families. An attempt was made to study the adverse effects of the family on delinquency. Ineffective communication within the family accounted for the engagement of children in delinquent actions. Results indicated that decision making & the family structure had a significant effect on child behavior. The findings suggested that family structure is a major cause of juvenile delinquency.

Troxel et al. (2014) explored sleep related problems in adolescents, who belonged to the families, having a single parent. Respondents were the healthy adolescents without any disease. Actigraphy was used to measure sleep. Self-reports were gathered for seven successive nights. Results assessed the sleep duration & efficiency. Wake-up problems were also assessed through self-reports. Regression analysis was applied on the sample to know the relation between sleep & the family structure (depressive symptoms & education of parents, conflicts in family and financial stress were adjusted in the study). Poorer sleep efficiency, along with short sleep duration during the week was found for the adolescents in single parent family as compared to the adolescents of intact family.

Adhikari et al. (2015) conducted a study on the perceptions of parents and

teachers on the behavioral problems observed in children. Focus of the study was also on the strategies adopted to deal with the behavioral problems. For gathering the information from the respondents, interviews were conducted. Results indicated that school environment & community members, are the main causes, for the child behavioral problems which in turn affect harmony of the family, personal growth & social consistency. Children had severe behavior related problems. The findings of the study focused on the interventions from parents, teachers & stakeholders in community so that a uniform & practicable approach can be applied to tackle the problems in behavior in children.

Casual comparative approach was utilized by Bonab & Arshady (2015), to find out the behavioral disorders in adolescent girls with single parent & intact families. Fifty seven adolescents with single mothers & sixty adolescents belonging to the intact families, constituted the sample. YSR (youth self report) framed by Achenbach (2001), was used to collect the data. It was analyzed by the descriptive statistics & inferential statistics. Significant differences in 't' values were found in relation, to the conduct disorder & symptoms of psychological distress, between two groups. Means of the scores related to all observed symptoms in the children with a single parent, were higher than children of the intact families.

Harden et al. (2015) explored the pressure of the increase in the genetic influence on the breaking of rules that were associated, with the development of puberty with chronological age. Twins in their childhood & adolescent age were selected as a sample having age in between 8-20 years. Sample was selected from a public school. Pubertal development scale & child behavior checklist were used in this study. Genetic modeling was applied to find out the genetic & environmental factors that influences aggression in adolescents. Rules breaking were moderated by pubertal status, along with the increase in age. Genetic etiology of aggression had no developmental differences. Results also indicated that environmental factors, related to the family, which initiate rule breaking & aggression in children decreases with age, but increases with puberty if age is controlled.

Kumar & Thakur (2015) conducted a study on the levels of aggression in relation to family environment in secondary school students. Scale given by Mathur & Bhatnagar (2004) was used to measure aggression. Family environment was

analyzed by a scale framed by Bhatia & Chadha (1993). Sampling involved non-probability method for the selection of district. Sampling involving probability was used to select adolescents from 10 senior secondary schools of the district. The results indicated the significant negative relationship between aggression of adolescents with family environment and its five dimensions namely cohesion, acceptance & caring, conflict, active recreational orientation & independence. On the basis of gender and area significant differences between mean scores were found in relation to aggression, in adolescents.

Lee & McLanahan (2015) examined the structure of the family (divorce & remarriage) & the effects on the academic, psychological & emotional problems. Sample chosen for the study was eighth graders. Problems were found to be more in boys which became more severe when biological mother is absent and the natural father has the custody of the child. Multinomial Model was used to find the unique association of the structure of family. An interaction between the gender of adolescent & parent who has the custody of child is important which critically influences the outcomes.

Cole & Anderson (2016) studied the influence of family interaction & the aggression development in adolescents. Sample was selected using purposive sampling approach. Teachers were also interviewed in school. Focus of the study was on group discussions with adolescents in school. Single mothers headed the family of these adolescents. On the basis of bullying behavior of peers & aggression gender differences were prominent in the study. Family has a significant role to play in the attainment of pro-social behavior & aggression in children.

Daryani et al. in 2016 examined single parenting and child psychopathology and to explore the effects of risk factors. In this study the sample comprised of 385 adolescents included both male & female. It was hypothesized that when single mothers are engaged psychologically controlling the behaviors of their children more of depressive symptoms are found with externalizing disorders. The results found were contradictory. Less severe anxiety and depressive symptoms were found in psychologically controlled children as compared to two parent family. It was inferred that single mothers and their parenting practices are compromised due to demands

and stress on them. To find out the gender differences was also included in the study. Girls were found to be more susceptible to depressive symptoms through controlling parenting psychologically.

Taylor (2016) conducted a study, to examine the challenges which are faced by individuals, after the death of their partners. Sample constituted nine widows & three widowers. Thorough discussions were made regarding their experience after the loss of their partner. The discussions included-

- a) Experience after death.
- b) Dynamics of the family.
- c) Coping or adaptation after death.
- d) Involvement of community.
- e) Advice received from the family, after death.

Results of the discussions provided a direction to the therapists engaged in counseling after crisis. Implications for further research were provided in the study to understand this vulnerable population & also to render services, in need.

Tilov & Tornyova (2016) conducted a study on the family environment and its influence on the reduction in aggression in adolescence. The self-assessment questionnaire was used for the study. Six hundred & four students enrolled in eight secondary schools & vocational schools in the Town of Plovdiv, in southern Bulgaria, were chosen as a sample with age, in between 14-18 years. Results of the study indicated the role of family environment which is associated with physical, mental and emotional development of an adolescent. The study also indicated that authority of the parent is the most significant determinant for the behavior, of an adolescent.

Behere & Basnet (2017) studied the effect of structure of a family on the mental health & behavioral problems in children. The study was conducted on 154 patients admitted in a pre-adolescent unit at a behavioral health center. It was found that 89% of the children were from families having disruption in the structure of family, rest 11% involved children of intact families. Two third of the children out of total sample were exposed to physical abuse & trauma. More attention deficit hyperactivity disorder (ADHD) was seen in the children with a single parent as compared to the children of intact families. ADHD was found to be associated

with oppositional defiant & mood disorder. Significant differences in family structure predicted the presence of various disorders among children.

Jiménez & Estévez (2017) explored the role of environment in family & classroom on the development of characteristics in an individual. Empathy, attitude towards authority & the manner in which social reputation is perceived were important characteristics of the study. The focus was also on the characteristics that lead to aggression in school. Gender was used as the basis to analyze the relationships among variables. Mexican adolescents having age between 12-18 years were selected as the sample. Out of this sample 45% were male. Meditational effects among variables were studied. Results of the study indicated that empathy, reputation in the society & the attitude towards authority helped to moderate aggressive behavior, experienced by children, at school.

Nematollahi et al. (2017) studied the mal-adaptation & behavioral problems shown by the female adolescents along with self-esteem. Sample of adolescents were chosen from single & intact families. This study involved a casual comparative approach. Sample consisted of 52 students of single & two parent families each. For collection of the data short form of young schema questionnaire, Achenbach's' youth self-report & self-esteem scale given by Coopersmith were used. Independent sample test & analysis of variance were used to analyze the data. The results indicated significant differences in terms of self-sacrifice, illness, incompetence, failure & suppression between the two groups. Results of the study also indicated that there was a significant difference in the subscales of problems related to attention & withdrawn symptoms, aggressive and anxious behavior along with the social problems between the two groups.

Richter & Lemola (2017) worked on growing of a child with a single mother and life satisfaction in adulthood. Single parenting is very common in societies in present days. Satisfaction towards life in six hundred & forty respondents was studied. They had spent their life with a single mother since childhood. Respondents were also selected for the study that lived only a part of their life with both of the parents. They had faced the separation of parents later in life. Study also included the participants who had grown in families having both the parents. Results of the study indicated that children who lived in single parent family had least

satisfaction towards life in comparison to other two groups. It was also indicated in the study that life satisfaction of the children in single parent family declines with age and it further decreases with the change of socio-economic condition of the family. Educational success can act as a moderator for the problems faced by children of single parent family.

Taylor & Conger (2017) studied the developmental consequences of the economic hardships & poverty on family functioning. According to the researchers, adjustment problems in adolescence, is of grave concern in present society. When children are weak in social context and deprived then they are suffering with economic, emotional, behavioral & physical problems at worst level.

Family serves as a medium to influence the development of children & adolescents in all possible contexts viz. social, emotional, psychological & economical. Perspectives, projected & planned in the study for the growth & development of children are-

1. Variations in the conditions of the family environment should be least e.g. poverty. Change in the conditions of the family changes, the well-being & functioning abilities of child.
2. Differences in characteristics of a child, may be his/her behavior is responsible for disruptions in functioning of family.

Zoleykha (2017) studied the life spent by the adolescents of single & intact families. Focus of the study was also on the behavioral problems faced by adolescents of single parent family. Total two hundred & fourteen adolescents were selected for the study. Fifty percent of the respondents were from the intact families, as well. Equal number of male & females were selected. Causal comparative approach was followed. Significant differences were obtained in terms of the behavioral problems shown by two groups. Anxiety & depression were more among children with the single parent. Implications were provided for the future research on single parenting for the betterment of adolescents.

Muratori et al. (2018) conducted a study on the behavioral problems of adolescents and the interventions & training which can be provided to parents to control the aggression in children. Children with disruptive behavior are at greater risk for delinquency & and also suffer from anxiety disorders. Family factors are

responsible in childhood psychopathology.

Harsh and non-responsive parenting practices are the major cause of the behavior problems in childhood which leads to non-compliance behavior in children. Kindness, involvement & monitoring are the attributes which are lacking in parents when children are engrossed with severe behavioral problems. Training of parents should be considered crucial for dealing & controlling conduct problems, of children. Behavior of parent towards the child is required to be changed so that a child can change his/her behavior.

In the Indian context, Nasir & Bhat (2019) worked on single parenting and the impact on adolescents. They mentioned that children particularly in adolescent phase are less expressive as compared to the children of intact families where environment is said to be ideal in terms of their growth & development.

Resources like perceived social support are found to be absent in the Indian culture as compared to the western countries where financial assistance from the government is of great help to single parents. When parents are not financially sound their psychological well-being is also affected which poses a negative impact the on growth & development of children. Anger & conflict are often seen in the children of single parent. They participate in recreational social activities to lesser extent thus are found to be less assertive. Many factors can influence their coping strategies like self efficacy, optimism & resilience. These positive features can control the behavior of child in a right direction.

Gupta & Kashyap in 2020, worked on the well-being of an adolescent which is challenged in single parent families whether it is emotional, behavioral, educational, psychological or social. In an ideal setting both father & mother have a specific role to play, which provides a sense of security & stability to their children. In single parent families these expectations are not fulfilled. In India, single parent families are increasing affected by various factors. One of the important factors is the influence of western societies. Emphasis in this article was on coping strategies, adopted by single parents for the difficult situations faced by them in improving well-being of their adolescents.

Mohan & Priya (2020) explored in their descriptive study about the peer group relationship & self-esteem in adolescents of single parent families. Imbalanced family

systems can create a sense of insecurity in adolescents. In such families there is lack of proper concern & support. This reduces self-esteem in them. They look for more & more of support in their peer group. Data was collected, from two schools of Kollam district in Kerala by a survey conducted using a questionnaire. Sample included 51 adolescents of class 8th-12th. The tools consisted of socio-demographic data peer group relation scale & Rosenberg's scale to measure the self-esteem. Results have shown a significant relation between self-esteem & peer group relationship of adolescents.

Mishra et al. in 2021 conducted a study on single parenthood. This study concentrated on case studies related to divorced single mothers in the Indian context. According to the researchers change in family structure in India has given rise to single parent families enormously. Very less research is performed on the problems faced by single parents particularly women. The single parenthood poses a serious challenge to women in India. After the marital disruption to earn the livelihood for a single mother seems very difficult & challenging.

Stigma is always associated with single mothers who have been divorced thus live separately without their partners. They have to manage care of child besides earning their livelihood alone. Life is full of constraints for a single family. The children are suffering from various psychological issues at worst level. Social support & strategies to maintain family requires attention as they influence mental & physical health of the children & adolescents. Families which involves both of the parents are organized, interconnected, protects youth from the adaptation problems and provides confidence in handling the interpersonal relationships for achieving resilience. In single parent families defensive or protective factors should be isolated. These includes social values which are constructive & ethical, policies which proves helpful, encouraging environment in schools, responsive peers, improved relationships in a family, personal skills e.g. self-efficacy. All of these qualities are important to manage resilience in life.

Overview of the Review

After analysis of the literature it has been found that there is increase in number of children in single parent families which is has linked to many of the problems including delinquency, pregnancy in teenage and drug abuse which are considered of

the nation's serious social problems. It is widely believed that single parent families represent a risk factor for children.

Review of the literature regarding single parenting and the variables associated with it also suggest that in today's world there are many people opting for single parenting despite the challenges associated with it. Few single parents try to overcome the hurdles by incorporating principles of resilience and bring up their child in happier environment as that of intact families. In western countries adopting surrogacy for bearing a child is common but in Asian culture there is gradual stepping to this idea of adopting single parenting. While Indian society is slowly opening up to the idea of single parenthood their numbers are still small. Support from family and other companionships help single mothers thrive, professionally and personally. Appropriate social support is helpful in getting relieved from the behavioral problems especially for children living in single parent family. Self-reported antisocial behaviors and aggressive tendencies are seen more in boys as they are higher on consumption of alcohol & drugs as compared to girls. In few studies contradictory results were found. It was predicted in the studies undertaken by the researchers that female adolescents perceived more happiness in their life thus are found more flexible as compared to male adolescents.

Need is to reduce the family conflicts so as to recover the family conditions, with proper parental monitoring that might help in reducing problem in behaviors. Research also indicated that group sessions conducted for single parents had enhanced scores for self-esteem & resilience. Resilient mothers can implement designed strategies to achieve parenting goals & instill values in their children along with their safety or security. Recommendations are needed for the intervention programs to augment parent adolescent relationships so as to diminish all kind of problems. It is a vital prerequisite for children to develop resilience & maintain their self-esteem in difficult times for the progress or development of any country.

2.5 Rationale of the Study

In India, twenty five percent of population comprises adolescents having age 11-19 years. They are facing problems in terms of health & education parameters at the worst level. This report was released by UNICEF (State of the World's Children, 2019). Attainment of early maturity due to responsibility & improper parenting are the factors that can lead to the deterioration of mental & emotional

well-being of the adolescents. Focus of the interventions could be on four areas viz. substance abuse, violence victimization, sexual behavior, mental health & suicide related behavior that contributes to considerable morbidity in adolescents.

Data on health behaviors and experiences among school students across the country should be gathered and needs attention. Empowerment of the adolescents is the main focus of UNICEF in India so that our youth can be transformed into efficient leaders & change makers. Need is to support the potential of adolescents in precise direction according to, 'The United Nations Children's Fund', (2011). It is very engaging responsibility of parents, guardians & educators, to harness the power & energy of adolescents in apt direction. If adolescents are healthy, safe, well-equipped, with appropriate life skills India can grow & develop politically, socially & economically. To invest in this segment of population is the best way to influence the nation for the development in all fronts. As per world meter elaboration data of United Nations (October 14, 2020) Indian population is about 1,369.56 million which is equivalent to 17.5% of the total world population. The youth population accounts to 460 million. India has more population of adolescents as compared to other countries thus need is to value it. Consideration of their problems is essential at core level.

Present study, deals with adolescents of Haryana state. It is at the third rank in crime rate in India after Delhi & Kerala, according to NCRB report released in year 2019. The state recorded the highest abetment to suicide cases & murders. Cases were involved in making physical contact demands for sexual favors, making insulting remarks & showing pornography to women. Haryana was second in the country with 890 such cases. Haryana's crime rate under Indian Penal Code is highest.

It is 284.39 as compared to National crime rate viz. 218.67. In this state crime rate has increased to 802.9 (57.1% over the numbers for, 2016). There are several cases pertaining to attempting murder, kidnapping, assault, riot and theft, which were registered between January and August in year, 2018 (2019 September 23, Tribune News Service).

Focus of the study is on the adolescents of single parent families. Single parent

households are getting higher mostly headed by single mother. In India, domestic violence is seen in single parent families. Thus adolescents are affected and their well-being is debilitated & ruined. Over three fourths of women have neither sought help nor confronted about the brutality they face in families. In such circumstances adolescents go through apprehension, depression & many other behavioral problems. If our youth is saved from the evils & troubles they can act as powerful human resource. Our society can be healthier & stronger perfect democratic society.

Twenty eight percent of Haryana's population is under age 15. They are suffering from different or diverse categories of problems in behavior, which become stern when parents are not together thus children are not clear about what their parents expect from them. As a result child reacts to this inconsistency, with misbehavior.

Sudden loss of one of the parent leave child traumatized hence develops coping deficits which leads to behavioral difficulties. It has been explored that conventional family systems are not followed in present scenario. This is disruptive for the sound foundation of society hence contributes to major social problems faced by children that will certainly pass on to future generations.

When children hear their friends talking about the disputes among their parents or the circumstances they are being provided for growth they feel resentment & hatred thus grip them with a feeling of an inferiority complex. They feel absence of their missing parent & feel helpless that void cannot be filled which is present in their life.

They stop believing in themselves. They have trouble in communicating with people & making friends. They are unable to set goals for themselves. These negative psychosocial effects destroy their life. These problems often lead to inept coping. They turn to consumption of alcohol, drugs or turn to commit crimes. Adolescents living with single parent recognize their non-availability as a sign of insignificance. They imbibe themselves with a feeling of loneliness. They are many times trapped in anguish or despair.

Children of single parent families bear with low self-esteem, amplified anger &

irritation towards life. Due to lonesomeness children are always stressed out. They feel as if they do not fit in this cultural norm. In extreme cases develop bulimia, self-mutilation or suicidal ideation. 6.46% of mental disorders are found in India, in adolescents according to Malhotra & Patra (2014). One of the main causes of a mental disorder is the substance misuse & physical condition of adolescents which is being affected at terrible level according to Sunitha & Gururaj (2014).

Purpose to plan the study on single parenting, is to get into source of the problem & to outline the solutions so that we can save our country from juvenile delinquency, in the absence of support of parents. Redefining & re-energizing children of single parent families with keenness & care is important. It is one of the major factors which can stop our children from adopting risk taking behaviors and simultaneously the factors, which provoke them, to become juvenile delinquents.

Need is to get along with the family, to build in some emotional competence & resilience so that inborn talents can be retained, leading to positive directions. Psychological & physical characteristics serve as the internal factors to survive in crisis. Extended & immediate family, along with the community factors can influence, the increase, in their ability to handle with parental divorce or separation.

Proper encouragement by parents defensive factors like relations with peers in school, sympathetic elders or grown-ups including neighbors, enhances flexibility & successful adaptation in children hence turning them to be resilient. Adolescents should have incredible versatility & the capacity to become accustomed to every new situation in their life. Since 1960s resilience in children has been considered & studied, by various researchers. Earlier research related to resilience focused on examining the risk factors which were stressful related life events. Now focus of the academicians is on the defending factors which include the personal traits & activities of an individual along with affirmative family relationships.

Main emphasis of research is on human strength, nowadays. The deficiencies & dysfunctions are being avoided in present times. To moderate the factors affecting life in a negative way several self-protective variables are required which helps in the moderation of stress. Parent whether mother or father in single parent families is often employed therefore children receive less consideration & guidance in every

sphere of their life. Children living with mothers have an emotional support & contact with fathers has the tendency to perform in academics.

Need is to remove the lacuna & pitfalls. Single parents have to recognize the needs of their children & should admit their achievement, readily. They should recognize the ongoing struggle in adolescence. In this way the teen will feel less lost hence try to release a certain amount of the self-judgment which can increase the level of self-esteem to some extent.

One of the essential & basic needs for all individuals, particularly in adolescence, is appropriate self-esteem. Role played by the counselors & teachers in relieving children adolescents & adults of single parent families from the worrying psychological issues is of central importance. Bitter experiences eventually harm the progress of an individual. It has been often seen that research on single parents poses a problem. They generally do not provide information regarding their divorce & their adjustments. It is seen that the instruments for the assessments measures a definite behavior. These tools are standardized according to certain norms & values. There are certain changes in these values with time and due the lack of the change performed in the tools sometimes assessments are not accurate.

Need is to emphasize that disturbed relation of the parents is the cause of detrimental influence on the development of child, not only, the absence of a parent. If children are able to understand this fact then adolescence can be a period of hopefulness during which resiliency can be practiced hence bright future, happiness, success & psychological growth can thus be anticipated throughout life.

This study has the focus on the social support, resilience & self- esteem. Center of attention is on the impact of these variables in controlling behavioral problems among adolescents of single parent family. Need is to study the relevance of resilience & appropriate social support which can increase the self-esteem of a child in need. Strong self-esteem does not mean that child can be prevented from becoming a destructive personality. People possess adequate self-esteem can still become criminals. Need is to inculcate values among young minds so that resilience & rise in self-esteem goes hand in hand for betterment. To maintain the well-being through the ups & downs of life level of self-esteem should be maintained & raised in children.

Need of hour is to extend the idea of individual resiliency to resilience in family. It is a promising concept to control the problems in children. A family is resilient when in the poor or critical conditions the coping is performed successfully by overcoming the challenge. Attention is required in studying resilience in single parent families.

Families can be categorized to be less or more resilient. It is important to mention that families may be resilient in one of the circumstance but not others. It is important to emphasize & perform the research on family resilience. It is concerned with the focus to search for factors which can weaken the harmful effects of risks for example social support that helps in increasing the family strength. If members of a family at risk are aware about how to act, in adverse conditions self-confidence of the single parent as well as child increases.

Children in such families work harder because they have faced hardships in life, from an early age and learnt in a better way how to deal with life on its own terms. Parental resilience helps to improve the relationship with children and simultaneously induces resiliency in them.

Resilient parents are able & more efficient to face challenges hence try to maintain a sanguine approach, in grave situations. Resilient parents have better relationships with their children. They are more reliable & try to maintain a steady pace while managing the behavior of their children therefore emotional & behavioral problems decreases to an extent.

Resources include supportive relations of friends & the family, which constitutes their external strength. The inner strength is gained by attaining resilience through spiritual nature, humor & faith in God. Use of positive emotions e.g. laughter can reduce the strain & tension within the family. Thus the ability to handle problems and to deal with them, also improves.

Parental resilience promotes relationships in society. This approach of remaining flexible, furnishes parents with important social connections in a period of necessity and the goals set by parents can be achieved without any obstacle or hindrance. Engagement in activities which can relieve stress is important for single parents. Thus, the inevitable challenges in life are met by the family, in crisis.

Educational programs can also foster resilience, in children. Parents can be counseled by school authorities so as to reduce the conflicts by knowing the actual conditions of the family & child. Emphasis should be on practicing committed & successful parenting.

Policies adopted by schools should be child centered to reduce effectively the externalizing & internalizing behavioral problems. Rules & regulations set by school authorities should involve empathy towards wards of single parent as they are already in need of love and support strengthening the inter family & intra family bonds can also contribute to resilience in such families.

Yeginsu in an article mentioned that the British government in year, 2018 appointed a Ministry of loneliness to address the issue of isolation among a large section of population which comprised single parent families. Similar demands for government interventions have been raised in Australia.

In India, with breakdown of traditional family system 56 million Indians are also suffering from loneliness. It therefore highlights an acute need for the effective social support systems. Loneliness is an epidemic which is creeping very fast. It is leading to various mental disorders. Children of such families are trying to seek comfort in digital devices hence suffer with more problems related to a lonely life.

They are developing more behavioral disorders like the consumption of harmful substances to combat their loneliness which leads to a poor coping mechanism. A study conducted by Laldieri (2018) indicated that young generation is lonelier than the older generation.

Loneliness multiplies several times in children of single parent families. Support within such fragile families, is important, Community & social organization support would be a great help to such families. It is both human & needful to rely on supports outside the nuclear family.

Present study highlights certain objectives which are important for betterment of an individual, family, society, community & ultimately our nation. Emphasis is on role of development of necessary features to get rid of the behavioral problems in adolescents who are in need of support.

Salutogenic perspective should be adopted which has focus on coping. Family

belief systems can be made strong by making strong expressive bonds within the family. Education is incomplete unless it enables a person to probe into the social context of learning which helps in understanding and overcoming all prevailing violence in our society. Healthy relationship between parents, school administrators, counselors, teachers and a student is the most significant need of hour.

Problems are to be picked up & sorted at the earliest. This will help to save the young children from all ills they can face in the society. Eventually, it will help in development of the nation. Considering this fact the study has been planned.

2.6 OBJECTIVES OF THE STUDY

The present research aims to study the psychological constructs of resilience, social support & self-esteem in relation to behavioral problems of adolescents with a single parent. Considering the limitations & gaps cited in the review the current research puts forward the following major objectives to achieve-

1. To explore the gender differences in resilience, social support & self-esteem of adolescents with single parent.
2. To investigate the behavioral problems of adolescents of single parents, on basis of their gender.
3. To find the difference in behavioral problems of adolescents of single parents & intact families.
4. To examine the differences in resilience, social support & self-esteem of adolescents of single parents & intact families.
5. To find out the relationship among resilience, social support, self-esteem & the behavioral problems of adolescents with single parent.
6. To investigate the moderating effect of social support, in relation to resilience & self-esteem on the behavioral problems of adolescents with single parent.

In the light of objectives & literature review, for the present study following hypotheses were framed for empirical testing.

2.7 HYPOTHESES OF THE STUDY

1. Significant gender difference exists on basis of resilience, social support & self-esteem of adolescents with single parents.
2. Significant differences exist in the behavioral problems, of adolescents of single

parents on basis of their gender.

3. There are significant differences in the behavioral problems of adolescents with single parent & intact families.
4. There are significant differences in resilience, social support & self-esteem of the adolescents of single parent & intact families.
5. There is a significant relationship among resilience, social support, self-esteem & the behavioral problems of adolescents with single parents.
6. There is a significant moderating effect of the social support, in relation to resilience & self-esteem, on the behavioral problems of adolescents with single parents.

2.8 DELIMITATIONS

Due to scarcity of time & financial resources, the study was delimited to-

1. Only one state of India i.e. Haryana.
2. Only five districts of Haryana (for selection of the sample).
3. Only ten CBSE affiliated urban public schools of a district.
4. Four hundred middle age adolescents only.
5. Students of IXth and Xth standards only.

CHAPTER-3

METHODS & MATERIALS

3.1 Variables

a) **Predictor variables:** In the present study, 'Resilience', 'Social Support' & 'self-esteem' are the predictor variables.

b) **Criterion variable:** It refers to the 'behavioral problems' in adolescents, in this study.

3.2 Research Design

A research design is the overall draft of any research study clearly drawing the boundaries within which all activities with defined ways are carried out. The nature of investigation led the researcher to use causal comparative research method. In this sort of exploration an investigator makes an attempt to find out the outcomes of the comparison that exist between or among different categories or groups of people. It accomplishes to recognize a connection of cause & effect relation between at least two groups that differ in two ways. One of the groups has a mark, that other group does not possess. Each group has a characteristic but to a different level.

It identifies a causative relationship between, predictor & criterion variable, after an event has already occurred. The objective is to decide if the predictor variable is affecting the criterion variable by the comparison of two or more group of persons. This research design is used in social sciences to draw valid general conclusions, from the facts discovered.

According to Sakind (2010) the studies associated with casual exploration plan, usually get a consideration of researcher which is dependent on circumstances that have happened in real world. Assessment on writing on a particular subject of interest is particularly significant as it helps a researcher in determining which extraneous variables may exist in the situation, which is under the consideration.

Survey techniques & tools like questionnaires & rating scales are used as an organized attempt to analyze, interpret & report the status of groups or area. Casual comparative studies involve measurement, classification, analysis, comparison & interpretation of the phenomena.

3.3 Population & Sample

In behavioral science investigations sample is the fraction of a population. Ideally speaking in any field of an investigation population should be examined in the order that the findings may be valid for it. But to study the universe is practically an impossible task.

It has been proved by researches in various fields that a properly selected sample can yield sufficiently reliable & valid data. Results obtained for a truly representative sample can be generalized for the population from which it is drawn.

In this study, purposive sampling procedure was adopted, to select 9th & 10th class students, studying in CBSE affiliated public schools of state, Haryana. Students represented adolescents in this study.

As the adolescents studying in class 9th & 10th were of age group 14-16, therefore, the sample represented of the middle age adolescents. Five districts of the state i.e., Haryana, were selected purposively i.e. one each, from east, west, north, south & central zone.

Four hundred middle aged adolescents (200 male + 200 female) of the CBSE affiliated schools, were chosen as a sample for the study by systematic random sampling method.

Eight students (4 male + 4 female) from each school were selected through purposive sampling procedure. Out of eight students, four were with a single parent & four were from the intact family.

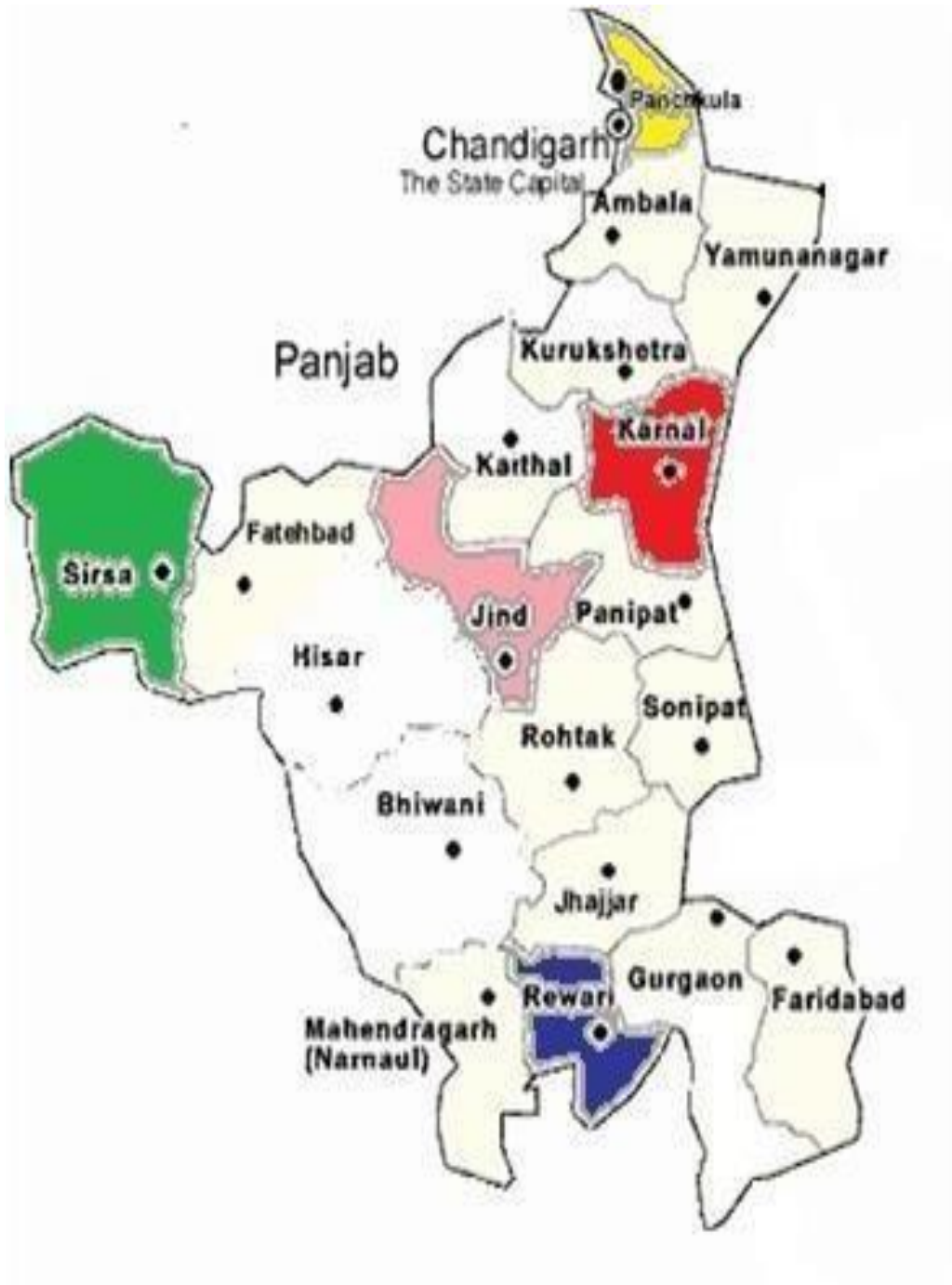
First of all Haryana state was divided in five zones- Central, West, East, North & South. One district from each zone was selected purposively i.e. farthest district from the central district (from each direction) namely-

Jind, Sirsa, Karnal Panchkula & Rewari respectively which is depicted in fig.3.1. Finally 10 schools from each district were selected by systematic random sampling.

Eight students (4 male +4 female) from each school were selected purposively. These students were of class 9th & 10th (2 male- 9th + 2 female-9th & 2 male-10th +2 female-10th). Out of these 2, one respondent was from single parent family & the other one, was from intact family (in each case).

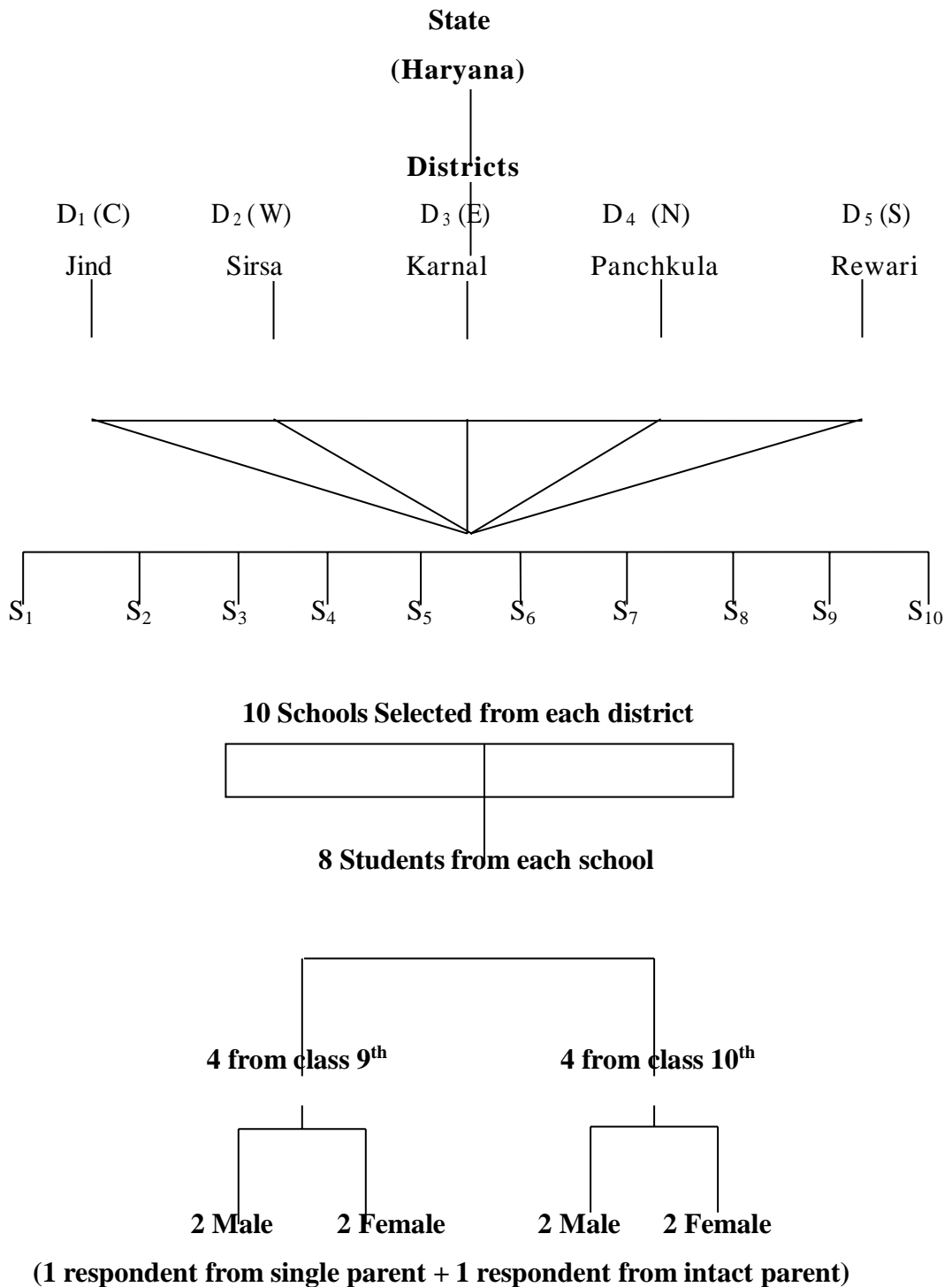
Fig. 3.1 & 3.2 represents the districts & sample selected for the study-

Fig. 3.1



Districts selected from Haryana state for data collection

Fig.3.2



Schematic representation for selection of the sample

Sampling

Multistage sampling was used in the study which is as follows-

1. Purposive sampling for selection of districts.
2. Random sampling for selection of schools.
3. Purposive sampling for selection of students.

To summarize:

STAGE	SAMPLE	UNIT
I	Five districts of Haryana state, were selected purposively i.e. one each, from east, west, north, south & central zone.	District
II	Ten CBSE affiliated public schools, from each district were selected on random basis. (systematic)	School
III	Purposive sampling for participants.	Student

3.4 Distribution of Sample

The distribution of sample is presented in the following section in the Table numbers: 3.1(a) to 3.1(e).

Table 3.1 (a)

Distribution of Sample: Jind

District(Central Zone of Haryana)

S. No.	School	M	F	T
1.	Kali Ram D.A.V Public School	2+2	2+2	8
2.	B.R.S.K. International Public School	2+2	2+2	8
3.	Pioneer High School	2+2	2+2	8
4.	St. Columbus Public School	2+2	2+2	8
5.	Moti Lal Nehru Public School	2+2	2+2	8
6.	Maharishi Vidyamandir	2+2	2+2	8
7.	Indus Public School	2+2	2+2	8
8.	St. Mary International Public School	2+2	2+2	8
9.	D.A.V School	2+2	2+2	8
10	Guru Dhronacharya Sr. Sec. School	2+2	2+2	8

N=80, M=Male, F=Female & T=Total

Table 3.1 (b)
Distribution of Sample: Sirsa District
(Western Zone of Haryana)

S. No.	School	M	F	T
1.	A.V. International School	2+2	2+2	8
2.	Vivekanand Vasisth Madhyamic School	2+2	2+2	8
3.	Lala Jagannath Jain Public School	2+2	2+2	8
4.	G.R.G. Sr. Sec. School	2+2	2+2	8
5.	R.S.D Sr. Sec. School	2+2	2+2	8
6.	D.A.V High School	2+2	2+2	8
7.	Sawan Public School	2+2	2+2	8
8.	Maharaja Agarsain High School	2+2	2+2	8
9.	Shanti Niketan Public School	2+2	2+2	8
10.	Sutlej Public School	2+2	2+2	8

N=80, M=Male, F=Female & T=Total

Table 3.1 (c)
Distribution of Sample: Karnal District
(Eastern Zone of Haryana)

S. No.	School	M	F	T
1.	D.A.V Public School	2+2	2+2	8
2.	S.D. Model Public School	2+2	2+2	8
3.	Tagore Baal Niketan	2+2	2+2	8
4.	Guru Harkrishan Public School	2+2	2+2	8
5.	Dyal Singh Public School	2+2	2+2	8
6.	Pratap Public School	2+2	2+2	8
7.	Nirmal Public School	2+2	2+2	8
8.	S.D. Adarsh Public School	2+2	2+2	8
9.	O.P. Vidya mandir School	2+2	2+2	8
10.	R.S. Public School	2+2	2+2	8

N=80, M=Male, F=Female & T=Total

Table 3.1 (d)
Distribution of Sample : Panchkula
District(Northern Zone of Haryana)

S. No.	School	M	F	T
1.	Saint Solider Divine Public School	2+2	2+2	8
2.	Chaman Lal D.A.V. Public School	2+2	2+2	8
3.	Manav Mangal Public School	2+2	2+2	8
4.	Sutlej Public School	2+2	2+2	8
5.	Blue Bird High School	2+2	2+2	8
6.	Bhavan Vidyalaya	2+2	2+2	8
7.	Doon Public School	2+2	2+2	8
8.	D.C Model Public School	2+2	2+2	8
9.	Hansraj Public School	2+2	2+2	8
10.	D.A.V. Sr. Sec. School	2+2	2+2	8

N=80, M=Male, F=Female & T=Total

Table 3.1 (e)
Distribution of Sample: Rewari District
(Southern Zone of Haryana)

S. No.	School	M	F	T
1.	Somany Vidyapeeth Public School	2+2	2+2	8
2.	Delhi Public School	2+2	2+2	8
3.	Rishi Public School	2+2	2+2	8
4.	Holy Child Public School	2+2	2+2	8
5.	Madhu Sudan Public School	2+2	2+2	8
6.	Jain Public School	2+2	2+2	8
7.	Vivekanand High School	2+2	2+2	8
8.	Cambridge Public School	2+2	2+2	8
9.	Uma Bharti Public School	2+2	2+2	8
10.	Greenfield Public School	2+2	2+2	8

N=80, M=Male, F=Female & T=Total

3.5 Description of Tools

An analyst or a researcher requires the information through various tools, which differ according to the difficulty, plan, organization & translation. It becomes important to choose from the accessible tools the best that can provide information for the testing of various hypotheses. To understand human behavior numerous psychological tools have been developed. There is no solitary psychological tool available which can tell about all aspects of an individual. Consequently, for every specific objective purposeful tool is developed.

Taking these factors into consideration the investigator decided to use the following tools for the present study-

1. Connor Davidson Resilience Scale (CD-RISC), given by Connor & Davidson in 2003 measures the resilience in adolescents.
2. A measure of perception of the social support which is a short description of the original Interpersonal Support Evaluation List, ISEL (Cohen & Hoberman, 1983) measures adolescents' social support to cope up in stressful conditions. Interpersonal Support Evaluation List (ISEL-12) used in present study was given by Cohen et al. in 1985.
3. Self-esteem scale given by Rosenberg in 1965 was used to assess adolescents' self-esteem.
4. Youth Self Report framed by Achenbach (2001) was used to assess the behavioral problems, of adolescents.

3.5.1 Connor-Davidson Resilience Scale (CD-RISC)

In this study resilience is the coping skills of the adolescents in difficult life situations which include single parenting. When the individual uses his/her practices may be mental or physical, in advancing his/her individual resources, for shielding from stressors he/she is said to be resilient. In difficult terms, versatility exists in an individual who can create mental & social abilities to resist the push in panic during tragedy & disorder. They continue to overcome & recover effectively from the incidence without extended haul adverse results. This scale assesses how well the person is equipped to spring back in unpleasant circumstances. People who are powerful are smart enough to travel through

the difficult phases in life. CD-RISC was developed by Connor & Davidson, using previously related constructs such as hardiness, which was explained by Kobasa et al. in 1982. The CD-RISC depends on the functional sense of plasticity which is the aptitude to "prosper in spite of intricacy."

Since its advancement in 2003 the CD-RISC has been tried in different settings, with a range of populations viz. general & clinical for individuals having psychiatric problems & post-traumatic stress disorder. It has been modified into different versions, later.

3.5.1.1 Content of the Scale (Factor analysis)

CD-RISC is grouped into five subscales or factors which are called as the components of resilience. These subscales or factors are mentioned in Table 3.2.

Table 3.2

Five Factors of CD-RISC (2003)

S. No.	Factors
1.	Individual ability, high expectations & diligence
2.	Trust in one's impulses & patience in negative affects
3.	Positive acknowledgment of changes & secure connections
4.	Control
5.	Religious impacts

In a study conducted on adolescents Yu & Zhang (2007) replicated the analysis for the innovative factors given by Connor & Davidson in 2003. They calculated Cronbach's ' α ' value in a range 0.88-0.89 for the scale & 0.83, 0.66, 0.66, 0.58 & 0.50 for factors 1-5 respectively.

The novel five variable structures were also confirmed by Sharma & Sharma in (2016) in a study conducted on one hundred & sixty workers of an Indian organization. One more study in India was conducted by Sidheek et al. in 2017. They found the four factor understanding utilizing investigative variable

analysis particularly strength, positive thinking, creativity & reason in children.

3.5.1.2 Psychometrics of the Scale

The CD-RISC is a concise, self-evaluated or rated amount of adaptability that has sound psychometric properties. The CD-RISC has demonstrated good reliability (0.88-0.89) & test-retest reliability (0.87). Psychometric properties of the Connor Davidson Resilience Scale (CD-RISC) were studied in the Indian context, by Singh & Xiaonan in 2017. It was viewed as a valid & a dependable measure by the researchers. Scores attained from the CD-RISC are related to the decrease in the degree of stress perceived. It indicates a good convergent validity. This scale correlates with resilience related measures for example adapting in stress, confidence & positive thinking. The development of the construct proposes that the individuals who experience the ill-effects of use of drugs are not strong enough to handle adversity in comparison to their counterparts.

3.5.1.3 Scoring for Connor Davidson Scale (CD-RISC)

The CD-RISC consists of 25 items. These are evaluated on a 5-point Likert scale having range from 0-4. These responses are: not true at all (0), rarely true (1), sometimes true (2), often true (3) & true nearly all of the time (4). Thus the resultant scores lie between 0-100. Total scores are calculated by summing all 25 items. A higher score indicates higher resilience. The scale shows that resourcefulness or resilience in a person is modifiable. It may be improved as children are not born with inherent resilience. Overwhelmed people develop unhealthy coping mechanisms as there is a dearth of resilience in such individuals. With the help of protective factors of the environment (social) & biological pathways it can be improved. More remarkable the improvement higher will be the worldwide improvement.

3.5.2 Interpersonal support evaluation list (ISEL-12)

Social support plays an important role in protecting people from the harmful effects of stress like weakening of immune system, production of fewer antibodies, than normal according to Syme (1985). Social support can call upon a feeling of satisfaction, to the recipient. It helps a person to confront an obstruction & advances less devaluation in understandings of hostile situations by the forceful use

of adapting actions as indicated by Cohen (2004). Social help is placed to influence the well-being through direct impacts on cardiovascular cycle according to Uchino et al. (2012). Social help is a mediator in decreasing pressure for keeping up with mental affluence. In a recent study an assessment of perceived social support using ISEL-12 was performed by Bobday et al. in 2020. Findings indicated that increase in social support confers resilience to stress. Social support is very effective to combat solitude as indicated by Masi et al. (2011) in their study.

3.5.2.1 Description of the Measure

The Interpersonal Support Evaluation List (ISEL-12) was given by Cohen et al. in 1985. It has 12 items for respondents. ISEL-12 is broadly employed as a short form list to evaluate social support. It has been used recently in a study conducted by Moubayed (2021) for examining the relation in between general health & perceived social support among college & school students.

3.5.2.2 Psychometrics of the Measure

This list has 3 different subscales (to measure three dimensions):

- a) Appraisal- the openness to communicate with concern.
- b) Belonging- an accessibility of individuals to get things done.
- c) Tangible- an ease to access material aid.

Reliability for total scale is 0.85. Reliability values for three subscales are given in Table 3.3.

Table 3.3

Reliability Coefficients of the Items (Subscales, ISEL-12)

S. No.	Subscale	Items Included	Reliability
1	Appraisal	2,4,6 & 11	0.78
2	Belonging	1,5,7 & 9	0.76
3	Tangible	3,8,10 & 12	0.66

Research has also indicated that for the undergraduate students as a sample, alpha ranges from 0.77-0.86 & for general population alpha is included in range

of 0.88-0.90 mentioned in Measuring the functional components of social support, Sarason & Sarason, 1985 Social support: theory, research & application. Validation of ISEL-12 scores was performed by Merz et al. in 2014 among English & Spanish speaking Hispanics. Alpha value ($\geq .70$) suggested the acceptable steadiness for the total score & for all languages. Convergent validity correlates positively with other support scales for e.g. Inventory of Socially Supportive Behaviors & Partner Adjustment Scale. Correlations between the total score of ISEL-12, proportions of interpersonal association & settlement, strain, dejection & life commitment were calculated to assess convergent validity. ISEL-12 scores were associated with incorporation of the network, commitment in life & contrarily with stress, nervousness & despair. All correlations were found to be moderate in magnitude. In another study on social support as the moderator conducted by Bahari et al. in 2012 reliability of ISEL-12 was calculated & alpha was found to be 0.80 indicating it to be highly reliable measure.

3.5.2.3 Scoring for ISEL-12

Respondent rates each item based on how true or false they feel. Each aspect of the list is measured on a 4-point scale ranging from “definitely false” to “definitely true”. Four total response options with score are: definitely false (0), probably false (1), probably true (2) & definitely true (3). The ISEL-12 scores make a general social help score. For positive statements (3, 4, 5, 6, 9 & 10) a higher score demonstrates higher ease of help rendered by people in society. Higher score on negative or reverse statements (1, 2, 7, 8, 11 & 12) addresses the lower accessibility of help. Total score on this list identifies with the scores of informal networks & life commitment.

3.5.3 Rosenberg’s Self-esteem Scale (RSES)

By the pre-adulthood stage the youngster gets an understanding of the self-assessment & self-idea so that the clear undertakings can be upgraded or subdued by previous self-belief. It was also revealed by Kaplan (1980) that esteem is very feeble when misery, delinquency, substance mishandling & school dropout is experienced. It is normally seen before puberty. Unfortunate family factors include physical & sexual maltreatment, family disruption, struggle & partition from parent(s).

When esteem & confidence in the adolescent phase is at elevated level it may reduce the effects of adverse consequences. Self-esteem is the indicator of problems faced by an individual & maintenance of the emotional well-being in such situations. Bagley et al. (1997) investigated the standards of the validity of Rosenberg's scale. Researchers have worked on this scale & accounted for its brief & reliable nature which can enormously help the assessment of interventions. It also improves emotional wellness & social change of a person.

3.5.3.1 Description of Scale

Esteem of middle aged adolescents in the present study was estimated by the Rosenberg's scale (1965). The scale was used for the very first time on a sample which comprised of 5024 secondary school adolescents. Ten schools were chosen randomly from New York. The scale evaluates the worldwide esteem which is the positive & negative disposition towards the self.

In 1969, Kaplan & Pokorney used this scale for the work on the perceptive power of self-esteem. Implication of these findings was the association of impaired self-esteem with negative behaviors. This scale is the most extensively used tool to measure this attribute. Rosenberg & Simmons (1972) used this scale for adaptation and to study the youth in U.S. RSES was called as one dimensional measure of self-esteem by Blascovich & Tomaka in 1991. Later Gray et al. (1997) studied the analysis of items for this scale.

Factor analysis identified a single common factor, i.e. self-esteem, contrary to some previous studies that extracted separately, self-confidence & self-depreciation factors. Now this scale is regarded as a standard against which new measures are evaluated. Initially this scale was used for adolescents but it is also applied to measure the esteem of adults in present times.

Therapists, psychologists & medical professionals use this scale all over the world because of the ease of administration scoring & brevity which helps to estimate positive or negative feelings about the self. Shanmugam & Kathyayini worked on the assertiveness & self-esteem of the Indian adolescents in 2017 using Rosenberg's self-esteem scale. According to them assertiveness & esteem in young minds is the instrument for communication & expression without mental disturbance in various situations.

Self-esteem helps to maintain socially supportive relationships. Belhekar (2019) studied latent structure of Rosenberg self-esteem scale for an Indian Data. The results supported the view that RSES has a primary component of positive self-appraisal & a secondary component self-appraisal.

3.5.3.2 Psychometrics of the Scale

Exploring the psychometric properties of a tool implies looking for its quality, which can be relied upon & its validity. Reliability is also called as consistency. The precision of a tool is its validity. Since the advancement of the scale, researchers have examined both. Internal consistency of this scale is 0.77. The minimum coefficient of reproducibility is 0.90. Scalability of items of this scale is 73% according to Rosenberg, 1965. Test-retest reliability of this scale was found to be 0.85 as explored by Silber & Tippett (1965). It was also analyzed by Sinclair et al. (2010) that suppositions conducted a thorough examination of its construction & psychometric tests, which supported the basic creation of the scale. Alpha coefficients for the RSES ranged from 0.72 to 0.87 for various samples (high school students, parents & civil servants). Test and re-test correlations ranged from 0.82 to 0.88. Amahazion (2021) examined the evidence for the validity & reliability of Rosenberg self-esteem scale in young & adolescents. The acquired discriminant & convergent validity coefficients for most of the part of the scale, fit with the experimentally tested & expected continuum which led to understanding of scores of Rosenberg's scale to measure self-esteem.

3.5.3.3 Scoring of the scale

RSES was initially designed as Guttman scale after Guttman (1944). Now it is commonly used as a Likert scale. The individual response to the items of the scale, predicts to what extent they agree on them. This scale incorporates ten statements to be responded, from strongly agree to strongly disagree. A portion of the scale is reverse scored. Some of the items are positive in nature. Reverse scoring is to diminish fatigue and to maintain the consideration & attention of the respondent & person's attitude can be measured clearly. The scoring ranges from 0-40. Score less than 20 indicate low self-esteem. Higher scores indicate high on self-esteem.

Scores are obtained as follows:

Scoring for Items (positive): 1, 2, 4, 6 & 7

strongly agree	4
agree	3
disagree	2
strongly disagree	1

Scoring for Items (negative): 3, 5, 8, 9 & 10

strongly agree	1
agree	2
disagree	3
strongly disagree	4

3.5.4 Youth Self Report (YSR)

A distinct phase of the development of human beings is adolescence. Experiences of past & ventures for the future are involved in the minds of young children in this stage. On global level adolescents are facing many problems, which include mental disorders of various categories. It was explored by Murthi (2017) that the reports of the survey at the national level releases the details of these disorders. Seven percent of the adolescents having age between 13-17 years suffer from various psychiatric disorders. Today more than 200 million Indians are suffering from mental illness. The World Health Organization predicted that, by 2020 twenty percent of the Indian population will suffer from various mental problems, as explored by Sagar et al. (2017). Therefore, need is of the appropriate tools to assess the problems suffered by children & adolescents so that the preventive measures can save their adulthood, which is a very responsible phase of life. Efforts of Achenbach's from year 1958, explained the details of mental problems found in children & adolescents. It was compared to the existent diagnostic system at that time viz. diagnostic & statistical manual (DSM). One thousand patients suffering from mental problems were used for data collection.

The mental health of these patients was discussed & analyzed. The research on these patients led to the framing of child behavior checklist which was at the initial phase of development. Later, this list was further adapted, to collect the information from the parents. After the completion of the adaptation work a standardized child behavior checklist (CBCL) applicable to children of 6-11 years was developed. It was extended further to the male & female children having age between 6 to 16 years.

In 1979, a manual for CBCL was released by Achenbach & Edelbrock. After some significant changes in the version of CBCL given in 1979 changes in items & their content were performed hence a new version of CBCL was released in 1991. These changes can be applied to the children having age between 4-18 years. The significant changes involved the behavior profile of a child having complete information from the child, parents & teachers. All of these changes & work done led to the framing of youth self-report (YSR) & teacher report form (TRF). Focus of designing of these tools was to improve the practicality & application of these tools for the assessment of the problems faced by all children & adolescents.

The focus was also on the assessment of multiple symptoms of the problems, faced by both genders of all age groups. An empirical assessment system was created by Achenbach in 2001. This was represented by ASEBA. This system was applicable in many settings viz. for the purpose of research for detection of mental problems of children in school & in forensic science. In the present study YSR is applied for assessing the behavioral problems of the adolescents with a single parent. It is a tool which involves a self-report filled in by respondents themselves. It is helpful in screening & detecting the numerous problems, experienced by children related to their behavior. YSR was given by Achenbach in 2001. It consists of 112 items. It is applicable on the adolescents having age in between 11-18 years (2001 revision). This measure yield scores on eight, empirically derived syndrome scales (narrow band scales) namely worried or anxious, depressed, introvert or withdrawn, having complaints related to body, problems in society suffering from thinking & attention problems, aggressive nature and tendency of not following rules & regulations.

These problems were grouped as internalizing & externalizing. DSM oriented scales were also added to this scale in 2001. YSR is helpful in rating of self on the basis of an individual mental health which suffers due to the behavioral problems in an individual. Competence in behavior or mal-adaptation in behavior along with the general functioning in children is assessed by this tool.

3.5.4.1 Psychometrics of the YSR

This instrument has adequate psychometric properties. Mean test-retest reliability for empirically based scale, is 0.84 and for DSM oriented scale is 0.81. Internal consistency was found to be 0.71- 0.95 (for empirically based scale. It is 0.67-0.83 for DSM oriented scale. Criterion validity is applicable to the clinical, non-clinical & other diverse forms. YSR has a strong support for its content validity. It is applicable for consultation & research. It is also used for refinement & feedback for all non-referred & referred children as all of the items discriminate significantly, ($p < 0.01$) on the basis of demographics.

3.5.4.2 Scoring of YSR

There are two parts of YSR. In the first division information of gender, class, age participation in sports & other school activities, hobbies, contribution in works of household, academics & relationships of the child, is evaluated. In the second division behavioral problems in general are assessed on the basis of open ended questions which are 112 in number. Participant assigns a score of a '0' for not true, '1' for sometimes true & '2' if the statement is very true. Score based on his/her score measures his/her problems due to behavior.

3.6 Procedure of Data Collection

After selecting sample of school adolescents concerned authorities were contacted by the investigator to seek permission for administering relevant tools on the students. Parents were contacted for their consent by the school receptionist with the help of class teacher. The investigator established proper rapport with the students before administering the research tools. Students were asked to fill up their personal information. Respondents were requested to read general instructions. After the instructions each tool was administered students were requested to record the responses for each item given in different tools.

Students were instructed to respond without any hesitation. Every care was taken by the investigator to clarify the doubts and to explain the difficulties of items. The respondents were ascertained about confidentiality of their information, given to the researcher. They were further requested to fill in the information for all statements or items enlisted in the tool. In this way the data was collected from 400 school adolescents of the CBSE affiliated schools of Haryana state.

3.7 Statistical Techniques

The purpose of research was to study resilience, social support & self-esteem of adolescents of single parent. Statistics is basic to all research activities. The role of the statistics in research is to analyze the data and drawing of conclusions. Following statistical techniques were employed in the present study- independent sample tests, correlation analysis & regression analysis (Hayes's process) for moderation.

CHAPTER -4

ANALYSIS, INTERPRETATION OF DATA AND DISCUSSION OF RESULTS

After the data is collected it has to be analyzed. It is a crucial step in the educational research after which the result could be out streamed. To arrange the data in a series of Tables & to draw the conclusions is termed as analysis. It involves the division of factors analyzed from complex into simple & then arranging for interpretation into a sequence. The task of investigation is incomplete without interpretation. It is associated with drawing of inferences by examining the results of analysis critically. In this study, the data was arranged, analyzed & interpreted, in accordance to five sections. These are:

1. First section deals with the descriptive analysis explaining an overview of resilience, social support, self-esteem & behavioral problems of adolescents with the single & intact parent.
2. The second section is for the application of 't' test for the exploration of the gender differences in resilience, social support & self-esteem of adolescents with the single parent and to explore the gender differences in the behavioral problems of adolescents of single parent.
3. The third section applies the independent sample test for-
 - a) Exploring the difference in behavioral problems of the adolescents of single & intact families.
 - b) Examining the differences in resilience, social support & self-esteem of the adolescents of single parent & intact families.
4. The fourth section deals with the finding of the relationship between variables for the middle age adolescents of single parents chosen as the sample.
5. The fifth section deals with the investigation of the moderation effects of the social support with respect to resilience & self-esteem on the behavioral problems of adolescents with single parent.

All sections pertain to the findings & discussions related to the objectives of the

study. Following distribution of participants under different levels of all the four scales was observed-

Resilience	Single(n)	Intact(n)	Total (N)
Low	166	29	195
Intermediate	30	125	155
High	04	46	50
Total	200	200	400

Social Support	Single(n)	Intact(n)	Total (N)
Low	37	01	38
Medium	137	51	188
Adequate	26	148	174
Total	200	200	400

Self-esteem	Single (n)	Intact(n)	Total (N)
Low	130	27	157
Moderate	68	118	186
High	02	55	57
Total	200	200	400

Behavioral Problems	Single (n)	Intact (n)	Total (N)
Mild	12	68	80
Borderline	110	126	236
Severe	78	06	84
Total	200	200	400

4.1 DESCRIPTIVE STATISTICS & ANALYSIS

Data was checked for normality by computing the skewness, kurtosis & standard error as shown in Table 4.1. The majority of the data for different variables was normally distributed falling in the range of 'z' value -1.96 to +1.96. Hence, Parametric statistics were applied for statistics considering it reliable.

Table 4.1

'z' Scores for predicting Normality of the Sample

	\bar{X}	M	S.D	Skewness	S.E of Skewness	'z'	Kurtosis	S.E of Kurtosis	'z'
Single Family									
R	39.2	40.0	11.6	0.13	0.17	0.76	0.77	0.45	1.71
S.E	17.9	18.0	4.50	0.55	0.29	1.89	0.28	0.24	1.16
S.S	18.2	18.0	4.94	0.16	0.17	0.94	-0.71	0.37	-1.9
B.P	77.6	76.0	27.8	0.58	0.30	1.93	0.83	0.45	1.84
Intact Family									
R	62.4	62.0	12.8	-0.01	0.15	-0.67	-0.22	0.33	-0.7
S.E	26.4	27.0	5.67	-0.13	0.18	-0.72	-0.98	0.51	-1.9
S.S	27.3	27.5	5.44	-0.29	0.17	-1.70	-0.72	0.35	-2.1
B.P	41.1	41.0	13.9	0.49	0.28	1.75	0.95	0.52	1.82
Overall									
R	50.8	50.0	16.9	0.13	0.12	1.08	-0.45	-0.24	1.87
S.E	22.1	21.0	6.62	0.30	0.16	1.87	-0.83	0.41	-2.02
S.S	22.8	23.0	6.90	0.07	0.42	0.17	-0.86	0.46	-1.86
B.P	59.3	52.0	28.5	0.98	0.59	1.66	1.06	0.61	1.73

Note: Acronyms used: \bar{X} : Mean, M : Median, S.D :Standard Deviation

R: Resilience, S.E: Self-esteem, S.S: Social support & B.P: Behavioral Problems

Before further analyzing the results on the basis of objectives, scores on the basis of the variables chosen for the study were assessed as follows-

4.1.1 Assessment of Resilience

For the assessment of resilience, the total score of the resilience scale framed by Connor Davidson in 2003 was used. Respondents were middle age adolescents, studying in class 9th & 10th belonging to single & intact families. As the total score of the scale is 100 therefore it is represented in form of the percentage in the overview

of resilience possessed by adolescents as follows-

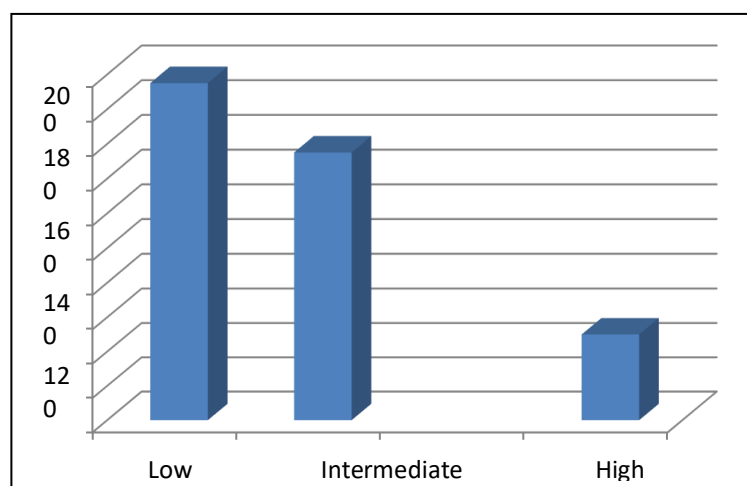
Table 4.1.1
Scores Distribution to Measure Resilience

Sr. No.	Scores expressed in%	Adolescents
1.	50% & below (low resilience)	195
2.	51-75% (intermediate resilience)	155
3.	76% & above (high resilience)	50

Interpretation

Table 4.1.1., presents an outline of the resilience experienced by 400 middle age adolescents of class 9th & 10th of single & intact families selected as sample of the study. Approximately 48.75% of the adolescents scored low on resilience scale & only 12.5% adolescents from the sample can be categorized as well adjusted group. The rest of the adolescents were found with intermediate resilience (38.75%). Results are supported by the study conducted by Nourian et al. (2016). Classification of adolescents on the basis of resilience is represented in fig 4.1.

Fig 4.1



Frequency distribution of resilience scores of adolescents

4.1.1.1 Examining Resilience in Adolescents of Single Parent

The present study is based on the middle age adolescents with single parent. Children with single parents need resilience to navigate the turmoil they face in such families. Serious challenges are faced by them viz. breakdown of family after experiencing loss due to death in the family. Furthermore, earlier the child learns the skills for building up resilience more positive the outcomes are experienced according to report given by UNICEF (2013).

This sub-section explains an overview related to resilience possessed by 200 adolescents of single parents. Table 4.1.1.1., provides the frequency distributionscores of the adolescents, on the basis of resilience.

Table 4.1.1.1
Scores on the basis of Resilience Scale
(Adolescents: Single Parent)

Sr. No.	Scores expressed in percentage	Participants
1.	50 % & below (low resilience)	166
2.	51-75% (intermediate resilience)	30
3.	76% & above (high resilience)	04

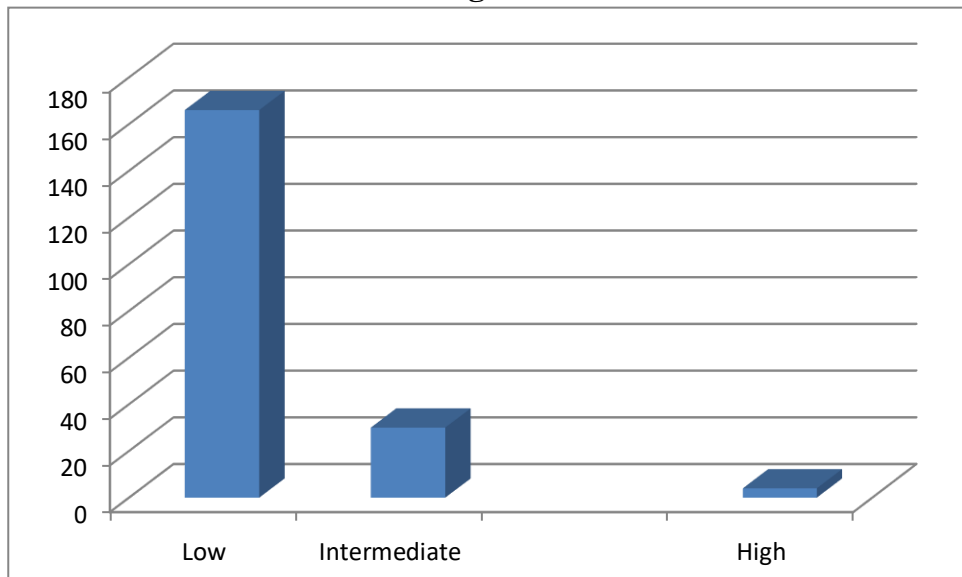
Interpretation

As inferred from the data given in Table 4.1.1.1., most of children of the single parent families lie within the group of low resilience individuals. This accounts for 83% of the respondents of single parent families. Only 2.0% adolescents fall in the category of high resilient individuals. Rest of the respondents i.e. 15% fall in category of intermediate resilience.

According to Dias & Cadime (2017) the home environment is an important predictors of resilience. Support of the elders is required to develop the social skills

& positive rational thinking in the critical phase so that adolescents can enter the adulthood with the adequate coping strategies according to Goldstein & Brooks (2014). Resilience is important for proper steering ups & downs of life. The frequency distribution of the adolescents of single parent families on the basis of resilience is depicted in fig.4.2.

Fig 4.2



Distribution of resilience scores of adolescents

(Single parent)

4.1.1.2 Overview of the Resilience in Adolescent with Intact Family

In normal circumstances resilience is important to promote health & helps to attain the personality traits, like perseverance & determination, as stated by Affi & Macmillan (2011). Resilient individuals interpret life in a meaningful way. They empower any kind of the transition they face. Hope & enthusiasm prevails in the life of a resilient individual.

Out of total sample of the four hundred adolescents of single & intact parents two hundred comprised of single & intact parent families each. After an overview of the resilience achieved, by children of single parent analysis of resilience for adolescents from intact families was performed. Evaluation of the level of resilience possessed by adolescents of intact families is mentioned in tabulated form as-

Table 4.1.1.2
Distribution of Scores for Measuring Resilience
(Adolescents: Intact Family)

Sr. No.	Percentage of scores	No. of Adolescents
1.	50% & below (low resilience)	29
2.	51-75% (intermediate resilience)	125
3.	76% & above (high resilience)	46

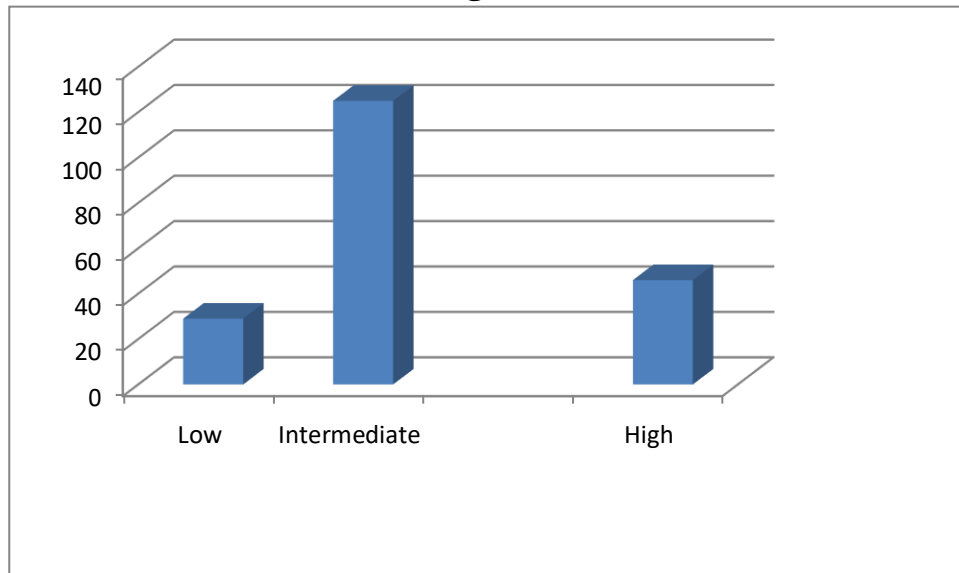
Interpretation

It can be observed from the values given in Table 4.1.1.2 that 23% of the adolescents has shown high resilience in comparison to the adolescents with single parent, where it is only 2.0%. Adolescents of these families having intermediate resilience were found to be 62.5%. Such adolescents adjust well in life & self-regulate their impulses which arise to take the risk in life with the support of their families. Only 14.5% adolescents were found to be low in resilience. Khurana et al. (2019) confirmed in their study that aggression can be controlled by adopting the ideology of resilience while treating or handling present youth. The results of their study indicated a negative & significant relationship between resilience & aggression.

Crime rate is increasing progressively. Children of all families are becoming vicious & destructive. Although the problem is more in high risk families having less parental care, either both the parents are absent or the child is with a single parent. Challenges can be faced in the implementation of certain prevention strategies helping adolescents to overcome their negative phase of life, positively. These strategies can strengthen the protective factors in the family, school & community, according to Rani et al. (2020). Segregation of the children of intact families on the

basis of the resilience is shown in fig. 4.3.

Fig 4.3



**Frequency distribution of resilience scores of adolescents
(Intact family)**

Summing up the analysis of resilience in adolescents as respondents is as follows-

Summary table for the assessment of Resilience in adolescents

	Categorization	Scores on the basis of %	Family		Total
			Single	Intact	
Resilience	Low	50% & below	166	29	195
	Intermediate	51-75%	30	125	155
	High	76 & above	04	46	50
Total			200	200	400

4.1.2 Analysis of Social Support

Social support refers to the support from a social network, as defined by Taylor in 2007. It provides faith in the individuals to solve the problems whether physical or psychological more effectively. During 1905-1955 a study on physiological & physical health in relation to social support was performed by Pratt. According to the researcher, it enhances the life quality & protect us against undesirable life events.

When people are trusted & treasured social support has shown to reduce the consequences of stress. Social networks whether formal (e.g. church) or informal (e.g. neighbors) provide a sense of belonging & safety. It is literally a life saver for families at risk of any kind. A tool to measure social support & its perceptions given by Cohen & Hoberman in 1985 was used to measure the social support for adolescents. The social support score was used to obtain the frequency distribution which is given in Table 4.1.2.

Table 4.1.2
Distribution of Scores of Adolescents
(ISEL-12)

Sr. No.	Scores range	Participants
1.	1-12 (poor social support)	38
2.	13-24 (medium social support)	188
3.	25-36 (adequate/good social support)	174

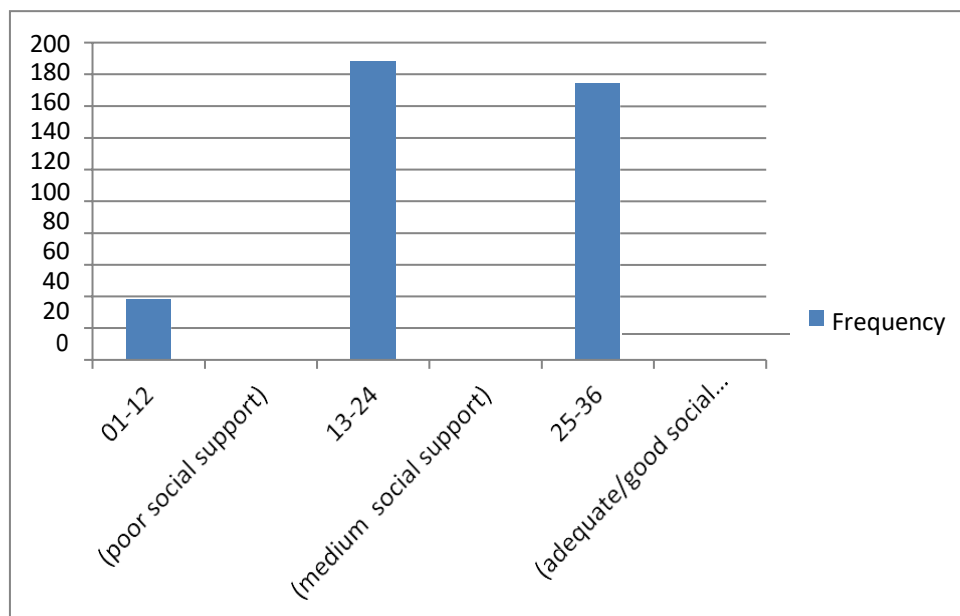
Interpretation

Here is a brief overview of the social support acquired by the 400 adolescents (middle age) selected as sample, of the study. Out of total sample, 174 adolescents had adequate social support. Only 38 adolescents had low social support. Rest of the adolescents (188) belonged to the category of medium social support. Need is to preserve the natural helping skills of people. The person who is acquiring the assistance should maintain equilibrium between the formal & informal support, received. According to Gottlieb (1985) social support can act as a resource for resisting stress related illness, which includes both physical & mental. It reduces

psychological suffering in individuals which includes nervousness & sadness. Social support is a factor for resilience which cut down the effects of anguish as explored by Lee (2020).

Low social support & disrupted social networks are often associated to the nervous tension experienced after suffering any trauma, schizophrenia & various mental disorders. Individuals high at social support use self-regulated mechanisms to organize & check their mental health problems. Fig 4.4 represents the frequency distribution of adolescents on the social support scale.

Fig 4.4



Frequency distribution of scores obtained on ISEL-12

4.1.2.1 Assessment of the Social Support for Adolescents with Single Parent

Studies consistently show that the individuals exposed to traumatic events like losing a dear one in a family carry higher risk of developing various health problems. Children of single parent families face many tribulations in life. Progress is hindered almost at every stage of life. Single parents have low social support, hence are often less capable to manage all situations alone. They try to command children, by their stern discipline and thus children bear problems due to brittle relationship of the single parent. Depiction of the frequency distribution of scores attained by the adolescents with single parents on ISEL -12 is given in the Table 4.1.2.1.

Table 4.1.2.1
Frequency Distribution of Scores of Adolescents with Single Parent on Interpersonal Support Evaluation List

Sr. No.	Range of scores	Participants
1.	1-12 (Low social support)	37
2.	13-24 (intermediate social support)	137
3.	25-36 (adequate social support)	26

Interpretation

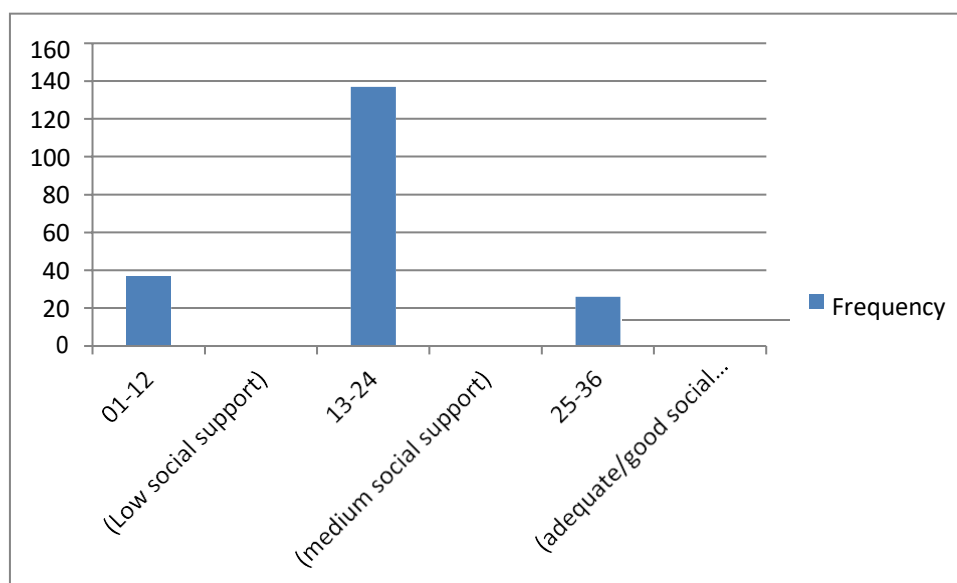
As interpreted from the Table 4.1.2.1., out of two hundred adolescents selected as a sample 37 adolescents from the single parent families belonged to low social support category. Adolescents found with adequate social support were only 26 in number. Negative effects of the single parenting are detrimental to the development of a child. Number of children in the intermediate or medium category were 137.

According to Harkness et al. (2019) the low cognitive function is experienced by such adolescents thus they are unable to uplift themselves much in life due to less educational avenues. These children have higher probability of committing crimes. They are keen to have harmful substances like drugs to keep their esteem high. They feel secure within themselves by consuming these substances.

Smith (2020) explored that the feeling of being alone, abandonment, grief & monetary crisis have effects like increased danger of violent behavior in children.

Social support has been implicated in the mediation of serious phases of life for e.g illness and recovery from any pressure. Fig. 4.5 represents the frequency distribution of the adolescents with single parent (on ISEL-12).

Fig 4.5



Distribution of scores obtained on ISEL-12 (Single parent)

4.1.2.3 Overview of the Social Support for Adolescents in Intact Families

The influence of the social skills, family configuration, conviction and social support appraisals are the potential predictors of adolescent psychological well-being. Social skills of understanding & resourcefulness, civility, self-control are very essential to predict the psychological comfort & happiness in adolescents, according to Englert & Bertram (2015).

As an intervention the focus could be on the acquisition of will power in children to lessen the unsympathetic effects of the societal influences in their decisive phase of development.

Development of the adolescents is dependent on families which have crucial role to play thus regarded as essential segments of societies. Presence of both parents has important role to play in the educational & financial accomplishments along with the control of the behavior of adolescents. The distribution of scores for adolescents on basis of their perceived support is given below-

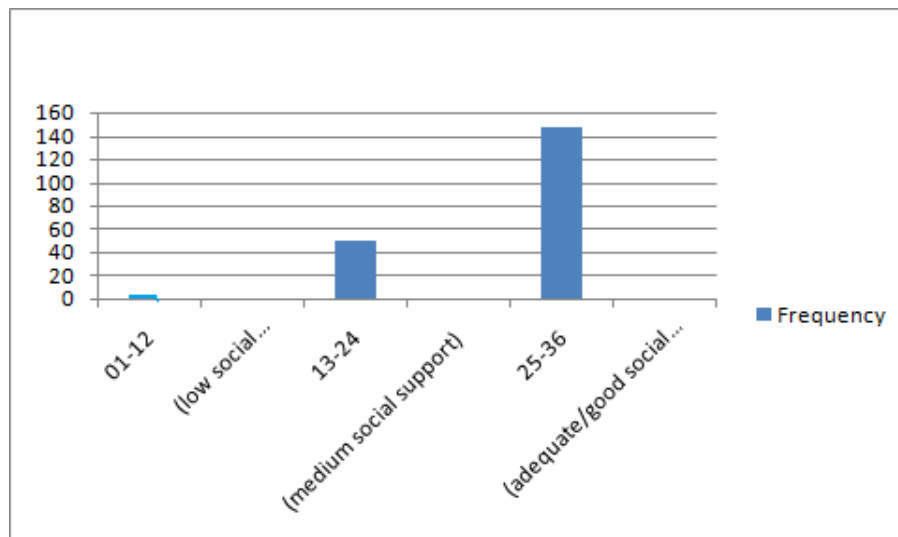
Table 4.1.2.2
Distribution of Scores of Adolescents(ISEL-12)
(Intact Family)

S. No.	Scores range	Adolescents
1.	1-12 (less social support)	01
2.	13-24 (medium social support)	51
3.	25-36 (good social support)	148

Interpretation

The results in the Table 4.1.2.2., indicates that 148 students out of 200 possessed adequate social support which accounts to 74 % of adolescents. Only one adolescent, had low social support. Rest of the children (51) had medium social support. Following fig. represents the score obtained by adolescents on ISEL-12.

Fig 4.6



Frequency distribution of scores obtained on ISEL-12
(Intact family)

Petersen & Hamburg (1986) stated that the most significant consideration in lives of the adolescents in intact families is the presence of both of the biological parents and the positive influence of peers. They rely on these two supportive factors a lot.

Following is the tabulation of the assessment of social support of adolescents, selected for the sample, of study-

Summary Table for assessment of Social Support of adolescents

	Categorization	Range of scores	Family Type		Total
			Single	Intact	
Social Support	Poor	1-12	37	01	38
	Medium	13-24	137	51	188
	Adequate	25-36	26	148	174
Total			200	200	400

4.1. 3 Exploration of Self-esteem of Adolescents

An individual can have different level of self-esteem in the different phases & domains of life therefore it can be changed. In the middle or late adolescence & in early adulthood self-esteem stabilizes. Therefore identification of the core factors that decreases the self-esteem of an individual is important at the earliest. Support for coping with difficult situations for overcoming them rather than avoiding them is crucial as indicated by Larson (2000).

Scale given by Rosenberg in 1965 was administered by the researcher on four hundred middle age adolescents taken as a sample, for the analysis of the self-esteem. Items were answered from strongly agree to strongly disagree. The score ranged from 0-40. The highest score for the entire scale is 40. The lowest score is 0.

Adolescents who scored above 75% of the score (i.e. 30) were enlisted under high self-esteem category as compared to children having scored below 50% of the highest score (i.e. 20).

The students having the scores in range of 50-75% of the total score were

categorized to possess average or moderate self-esteem. Analysis of adolescents on the basis of various categories framed for self-esteem is presented below-

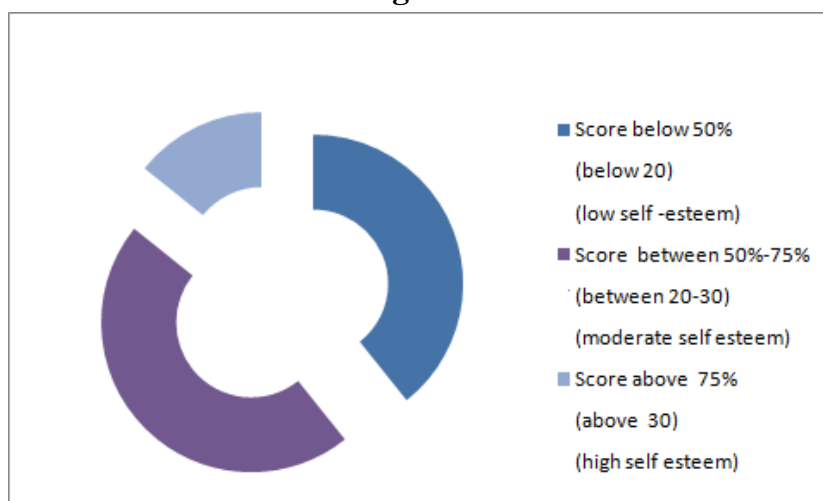
Table 4.1.3
Categorization of Adolescents (Rosenberg's Scale)

Sr. No.	Category	No. of Respondents
1.	Score below 50% (below 20) (low self-esteem)	157
2.	Score between 50%-75% (between 20-30) (moderate self-esteem)	186
3.	Score above 75% (above 30) (high self-esteem)	57

Interpretation

As inferred from the Table 4.1.3., 186 adolescents, out of the four hundred chosen as the sample, had moderate self-esteem. Only 57 respondents possessed high self-esteem. Rest of the students (157) belonged to low esteem category. Fig.4.7 illustrates the scores range & frequency distribution of adolescents.

Fig. 4.7



Categorization of adolescents on basis of their self-esteem

Studies conducted by Harter in 1990 have indicated that about one third of children struggle with low self-esteem in their early adolescent period. It is considered as a time of unpredictable or fluctuating self-esteem. Adolescents have varying levels of self-esteem as it is governed by many factors like gender, family type & social class.

4.1.3.1 An Overview of Self-esteem of Adolescents with Single Parents

Coping efficiency of the children of the dual families is balanced by the social support they receive, thus gaining resilience in life for the increase in self-esteem. Krauss et al. (2020) studied the effect of family environment & disrupted married life of the single parent on late childhood & adolescence. The effects of negative emotions of the parent are being transferred to the adolescent as low self-esteem & dissatisfaction of relationships as stated by Marshall et al. (2014).

Representation of the self-esteem of adolescent with the single parent is as follows-

Table 4.1.3.1

Adolescents with Single Parent on self-esteem Scores

S. No.	Category on the basis of self-esteem	No. of Participants
1.	Score below 50% (below 20) (low self-esteem)	130
2.	Score between 50%-75% (between 20-30) (moderate self-esteem)	68
3.	Score above 75% (above 30) (high self-esteem)	02

Interpretation

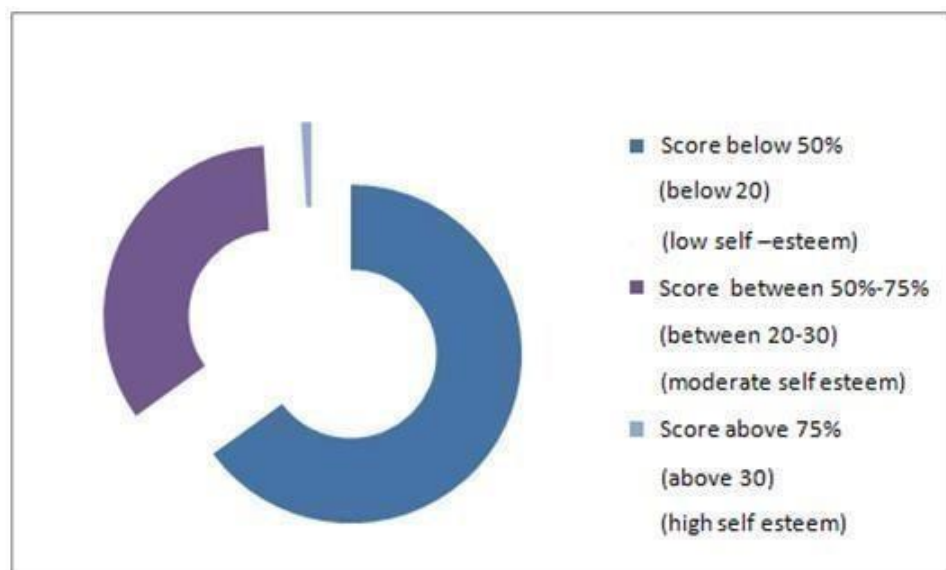
Table 4.1.3.1., gives the information about the score of adolescents of the single parents, on the basis self-esteem scale. 130 students out of 200 i.e. 65% were found to be low at self-esteem. 1% of the respondents were categorized to possess high self

-esteem. Rest 34% of the adolescents had moderate self-esteem.

According to Martinez et al. (2020) due to absence of social help & networks the internalization of social ethics is observed to less extent in adolescents of such families. Economic hardships are faced & experienced by the children of such families which adds to their hassles of life.

Marital issues lead to the angry parenting hence the consequence is low self-esteem of the child, grown-up in such families. Children reared in single-parent family endure with all problems the parent is facing leading to disturbance in the rational and intellectual well-being according to Watt (2019). Fig.4.8 shows the frequency distribution of adolescents on basis of their self-esteem.

Fig.4.8



Self-esteem of adolescents with single parent

4.3.1.2 Analysis of Self-Esteem of the Adolescents with Intact Families

According to Barber (2003) children in the intact families have conditions for the optimal development characterized by fewer demeanor problems & mature self-reliance. Emotional & academic growth of a child is being checked constantly, as both parents provide the assistance children require for their nurturance according to Bada & Ayodele (2012). Parents constantly try to enhance accord of their married life so as to augment social & cognitive interests of the children. They try to be aware,

watchful & supervise all the activities of their children in multiple domains that too at home & away from home. Table 4.1.3.2., given below mentions the score of adolescents on the basis of performance on self-esteem scale given by Rosenberg (1965).

Table 4.1.3.2
Segregation of the Adolescents of Intact
Parents for the Scores of
Self-esteem Scale

S. No.	Segregation of scores	No. of Respondents
1.	Score below 50% (below 20) (low self-esteem)	27
2.	Score between 50%-75% (between 20 -30) (moderate self-esteem)	118
3.	Score above 50% (above 30) (high self-esteem)	55

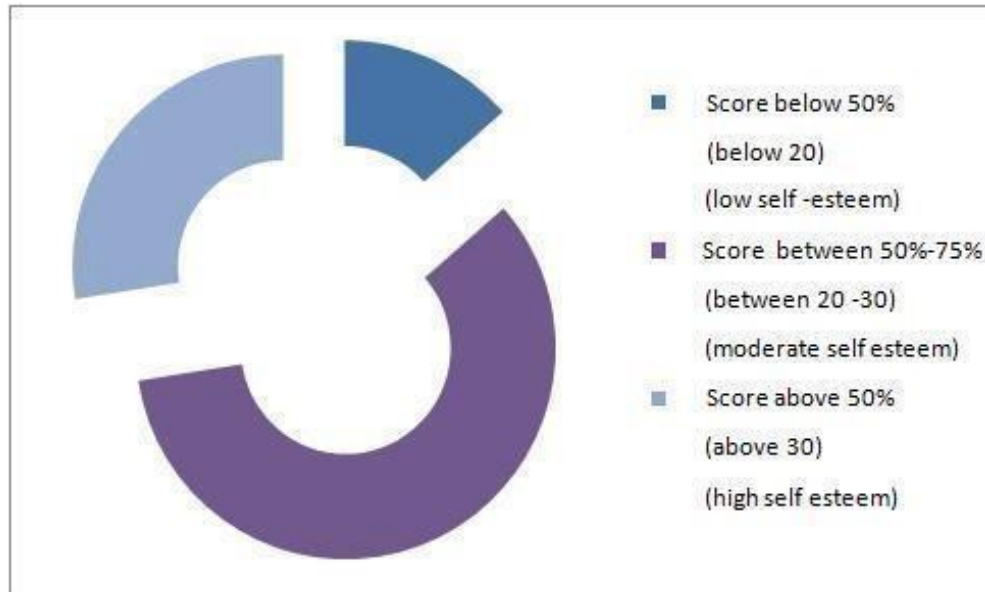
Interpretation

After getting the information from Table 4.1.3.2., it is concluded that only twenty seven adolescents from the intact families had low self-esteem. Fifty five respondents scored high on this scale. Rest of the adolescents had moderate self-esteem (118). According to Harris & Orth (2019) family consistency & the hold in intact families are the factors that keep these children in high self-esteem. Therefore, the control of the family is central to boost up the self-esteem of a child.

It is a well recognized in psychological literature. Parents should not show disapproval for their children. They should avoid using pessimistic words. Focus could only be on the positive qualities. Fig.4.9 explains the frequency distribution of

the adolescents of intact family on the basis of their self-esteem scores.

Fig 4.9



**Segregation of adolescents on basis of their self-esteem
(Intact family)**

Presented here, is a summary to outline the assessment of the self-esteem-

Summary Table for the Assessment of Self-esteem of Adolescents

	Category	Percentage Categorization	Family Type		Total
			Single	Intact	
Self-esteem	Low (Below 20)	Score below 50%	130	27	157
	Moderate (Between 20-30)	Score below 51-75%	68	118	186
	High (Above 20)	Score above 75%	02	55	57
Total			200	200	400

4.1.4 Overview of the Behavioral Problems of Adolescents

Behaviorally adolescence is associated with the volatile emotions, exploration of personal identity, learning of navigation of peer relationships and transition to independence. Adolescents are more independent, but often they are out of direct control of adults. Thus, behavior of an adolescent can be determined by his/her own moral code as explained by Levy in 2020 in a study.

All adolescents are not so blessed or fortunate to receive an ideal social support, from the family. They develop several maladaptive patterns in emotional & behavioral spheres due to lack of social support. According to the research performed by Kessler et al. (2007) school going adolescents have to confront with many kinds of problems.

Regular incorporation of mental health services can act as a support system in schools. Social support can serve as a useful approach to bolster resilience & self-esteem in adolescents so that they can liberate themselves from at least some of the problems according to Dangi & Joseph (2021). These traits are the outstanding predictors for their physical & mental health.

Studies are being conducted in this context in different parts of the world. Research indicates that the behavioral & emotional problems are common & widespread in adolescents. According to a report given by Pathak et al. in 2011, adolescents comprises one fifth of the Indian population. Therefore decline of their problems at all levels need awareness or notice from all elders.

Majority of problems in adolescents have their roots in the bothered or worried family environment. Children who often feel unhappy, anxious, fearful & angry exhibit lack of concentration forgetfulness, impulsiveness & difficulty in controlling their emotions. Neglected children feel abandoned thus such children deal with many troubles for e.g. nervousness, aggression, frustration & depression. More attention & research is essential in India, on the psychological strength of these children.

Behavioral problems of the 400 middle age adolescents selected as a sample, were assessed by using Youth Self Report, given by Achenbach in 2001. After calculating Q_3 (84.29) & Q_1 (37.9) values categories of adolescents, on the basis of behavioral problems were identified viz. mild, borderline & severe.

Categorization of the behavioral problems in adolescents on the basis of computed ‘Q’ values is given in Table 4.1.4.

Table 4.1.4
Behavioral Problems of Adolescents on the Basis of ‘Q’ values

S. No.	Scores	Category	Number of Adolescents
1.	38 & below	Mild	80
2.	39-83	Borderline	236
3.	84 & above	Severe	84

Interpretation

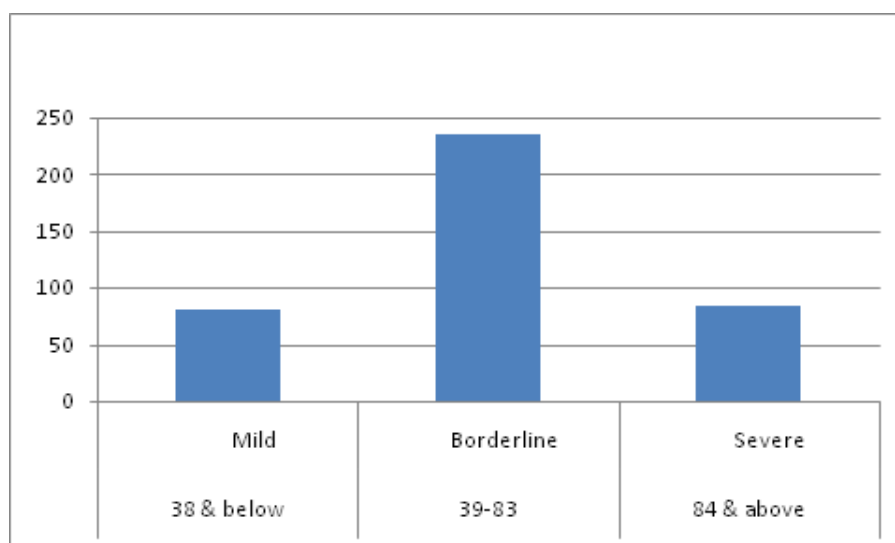
Table 4.1.4., represents the number of adolescents with behavioral problems categorized as mild, borderline & severe. In all out of a total sample of 400 respondents, 80 (20%) were grouped as ‘mild’ & 84 (21%) adolescents were classified under ‘severe’ category. In the study approximately sixty percent of the respondents i.e. 236 (59%) were placed in the ‘borderline category’ of behavioral problems. It becomes an important role for all educators to transform life of adolescents at risk, so that they can be switched back to less problematic from the borderline individuals.

Results were confirmed by a study performed by Magai in 2018 on adolescents. Youth Self-Report given by Achenbach (2001) was used in this study to measure the behavioral problems of adolescents. 27% of the adolescents in this study were enlisted in borderline & 17% in clinical or severe category. Rest of the adolescents was of borderline category. Difference lies in the desires & demands of an adolescent. This results into the upsetting behaviors in the adolescent phase. Number of studies performed indicates that young people tend to get involved in offending & truanting

thus develop risk for constant pattern of problem behavior as explained by Hasan & Husain (2016). Similar explanation was stated by Ara (2015). Unhealthy & harsh family environment characterized by negative communication, verbal conflicts & rejection accounts for more of the behavioral problems. According to Dryfoos (1991), millions of children are in need of immediate & intensive intervention for the high risk behavior.

Adolescents are not willing to seek help from their elders in need rather tend to seek help of peers. At the age between 14-17 years adolescents face problems to maximum extent so need is to intervene in their life whenever & wherever possible to counteract their wrong actions. Fig.4.10 represents the categories of behavioral problems of the adolescents taken as the sample of the study.

Fig 4.10



Adolescents on basis of their behavioral problems

4.1.4.1 Assessment of the Behavioral Problems of Adolescents with Single Parent

Adolescents born in single parent families are at risk which leads to the accumulation of behavioral problems in adolescents both externalizing (e.g. aggression) & internalizing (e.g. anxiety). Single parent does not regularly interact & involve in day to day activities of their children as they are themselves suffering from mental health issues. They try to bring discipline to the life of their children but cannot manage single handedly. Therefore, there is a lack of authority to control

which results in the change in behavior of the child especially in an adolescent phase. Such children are seen restless rather enthusiastic towards life.

Children develop risk taking attitude with people unrelated to them hence chances of behavioral problems are more according to Carlson & Corcoran (2001). Children do not fare well in life as compared to two parent families & experience of behavioral problems at all levels. Table 4.1.4.1., presents the frequency distribution for the categorization of behavioral problems of the adolescents with single parent.

Table 4.1.4.1
Problems in Behavior of Adolescents (Single Parent)

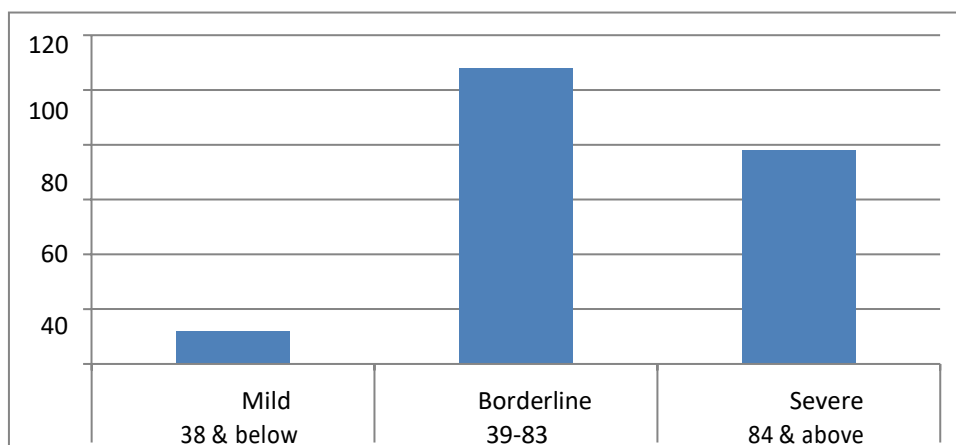
S. No.	Range of scores	Segregation	Frequency
1.	38 & below	Mild	12
2.	39-83	Borderline	110
3.	84 & above	Severe	78

Interpretation

It can be inferred from Table 4.1.4.1., that 39 percent (78 out of 200) of the adolescents of single parent families were suffering with severe behavioral problems. Only 6 percent (12 out of 200) were found in the category of mild behavioral problems. 110 adolescents were at borderline category. Parental supervision & direction is less in single parent families, as stated by Brown (2006). If suitable interventions are not applied at this stage then number of adolescents with severe behavioral problems will increase, enormously. Research performed by Shek et al. in 2008, indicated the association of psychological outcomes & family functioning, which is related to behavioral control of the adolescents. Need is of quality support

which is of worth which can connect child with the youth programs in community for the positive social development. Single parent families need more help in this context. Fig 4.11 depicts the behavioral problems of adolescents with single parent.

Fig. 4.11



Single parent adolescents, on basis of behavioral problems

4.1.4.2 Analysis of Behavioral Problems of Adolescents (Intact Families)

Information regarding the behavioral problems of adolescents belonging to intact family is given below-

Table 4.1.4.2

Behavioral Problems of Respondents (Intact Parent Family)

S.No.	Score range	Category	Participants
1	38 & below	Mild	68
2	39-83	Borderline	126
3	84 & above	Severe	06

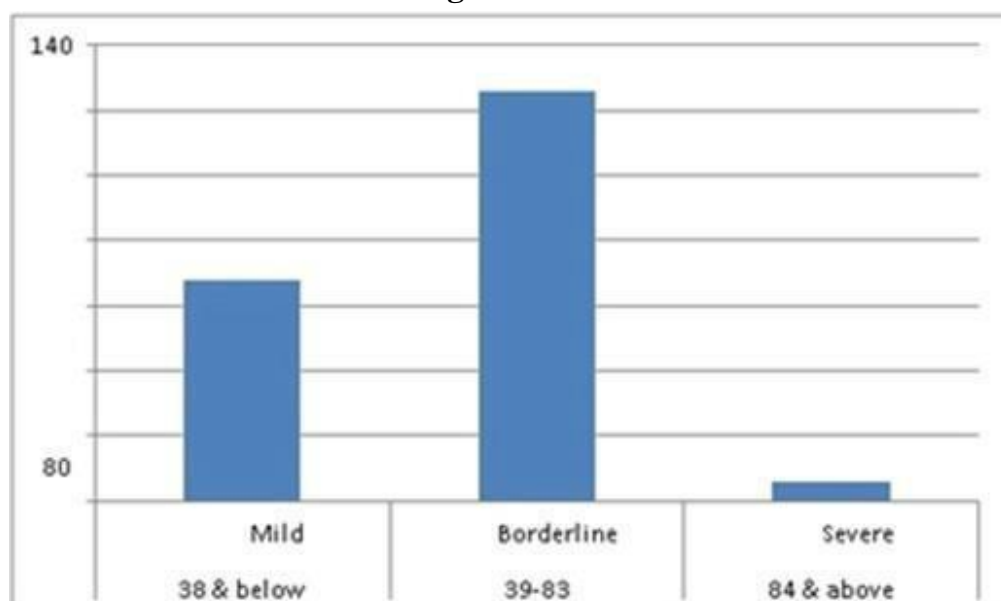
Interpretation

As interpreted from Table 4.1.4.2., it was found that only 6 children of the intact family can be categorized to suffer from severe behavioral problems. It accounts to only three percent of the total sample of two hundred adolescents. 68 respondents possessed low problems in their behavior. This can be credited to the support & compassion the adolescents obtain from both parents.

Generally directions & ways chosen for betterment of children, at all levels are found to be appropriate in intact families thus children are secure & safe according to Harkness (2016). Family as entity is considered important for relevant socialization of the children. In intact families children are reared in a disciplined manner and parents try to instill basic, moral, social & spiritual beliefs in their children, as informed by Santrock (2002).

According to Stephen (2016) relationships are better in intact families. Children listen to their parents. Behavior of the child as well as parent influences each other. Transmission of social self with the guidance of parents is fundamental when child reaches the adolescent phase. Fig 4.12 depicts the categorization of adolescents on the basis of their behavioral problems.

Fig 4.12



Adolescents of intact family on the basis of problems in behavior

Children in the intact families are exposed to stimulation of cognitive abilities as well as opportunities in learning. They keep themselves engaged in work and projects as finances are sound in dual families due to more source of income. They show wide range of positive outcomes and suffer with less behavioral problems as compared to children of single parent families.

To put succinctly, the behavioral problems of adolescents chosen as sample are summarized as follows-

	Categorization on the basis of Q_1 & Q_3		Family		
			Single	Intact	Total
Behavioral Problems	Mild	38 & below	12	68	80
	Borderline	39-83	110	126	236
	Severe	84 & above	78	06	84
Total			200	200	400

SECTION-II

4.2 GENDER DIFFERENCES BETWEEN RESILIENCE, SOCIAL SUPPORT, SELF-ESTEEM & BEHAVIORAL PROBLEMS OF ADOLESCENTS WITH SINGLE PARENTS

This section deals with the application of 't' test on the sample of 200 adolescents of single parent families for exploring the gender differences in relation to resilience, social support, self-esteem & behavioral problems.

Two objectives are considered in this section. Analysis & discussion of first objective of this section is as follows-

4.2.1 Analysis of Gender Differences on basis of Resilience, social support & self-esteem

OBJECTIVE-1

To explore the gender differences in resilience, social support and self-esteem of

adolescents with single parent.

Results of the independent sample test conducted are entered in Table 4.2.1

Table 4.2.1

**Comparison of Male & Female Adolescents of Single Parents on the Scores
(Resilience, Social Support & Self-Esteem)**

	Male (n=100)		Female(n=100)		't'-value	df	p-value
	Mean	SD	Mean	SD			
Resilience	37.4	11.0	41.1	11.0	2.23	198	0.03*
Social Support	16.9	5.0	19.6	4.5	3.94	198	0.01**
Self-esteem	16.4	3.6	19.6	12.0	5.35	198	0.001**
*Significance at 0.05 level							
**Significance at 0.01 level							

Interpretation

Table 4.2.1., gives the differences of resilience, social support & self-esteem on the basis of gender of adolescents, belonging to single parent families. Findings revealed to be significant at 0.01 & 0.05 levels. Thus hypothesis of the existence of significant gender differences for resilience, social support & self-esteem among the adolescents of a single parent was accepted. It can be concluded from the results of the study that female adolescents reported more resilience, social support & self-esteem as compared to male adolescents.

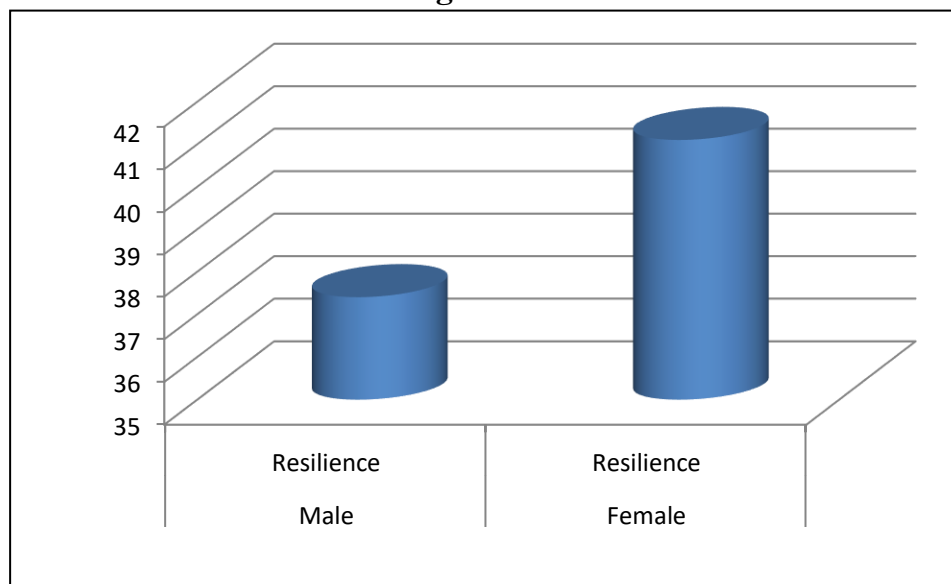
Results are discussed in following subsections-

4.2.1.1 Differences on basis of Resilience

This sub-section involves comparison of the variable resilience, on basis of the gender for two hundred middle age adolescents studying in class 9th & 10th, with single parent. It has been found that when males face hard times they tend to rely on independence whereas females utilize their support systems. Therefore, when exposed to any hardship males & females differ in their way of adjustment. Thus path towards achieving resilience is different. Findings are in accordance with study documented

by Azam (2012). It was revealed in this study that, protective factors whether from school or home act as the adequate social support, to enhance the resilience in adolescent girls, in that way increases their self-esteem & confidence towards life. Gender differences are experienced by adolescents, as the factors to shield in hard conditions which are different for males & females as explored by Prabhu & Shekhar(2017).Mean score for resilience reported higher values for female adolescents as depicted in fig. 4.13.

Fig. 4.13



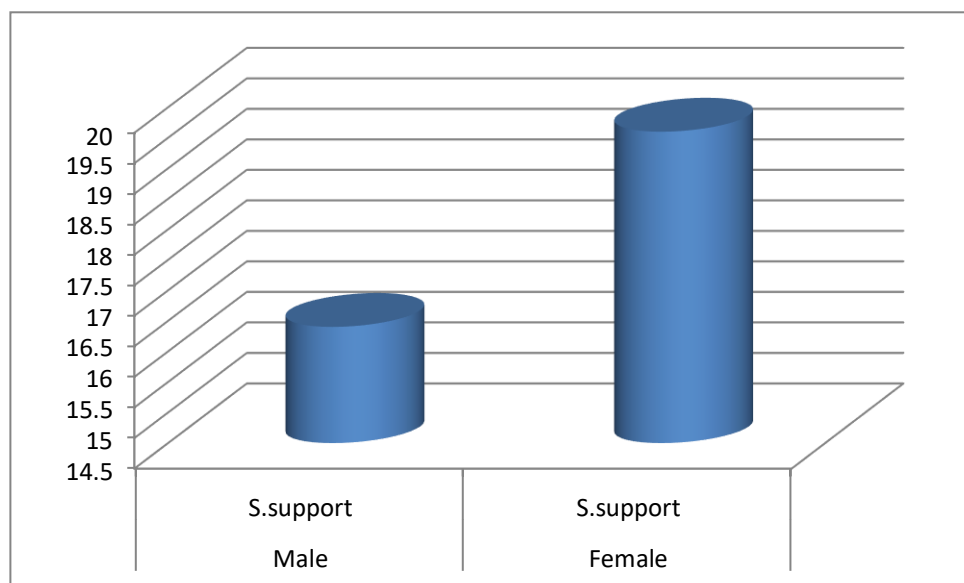
Comparison of male & female adolescents on the basis of Resilience

4.2.1.2 Examining Gender Differences on basis of Social Support

Mental health is affected by social problems therefore social support is considered as the essence for the well-being of an individual. Significant people who can provide a relationship of the concern, constitute the social support. How this support is perceived by males & females creates a gender difference as cited by Siddiqui et al. (2021) in their research. Burdens from the demanding environment control the social relationships of male & female adolescents, thus different nullifying sources are used in form of social support. In the Indian context social support & self-esteem among adolescents was studied by Devi & Jyotsna in, 2016. It was found that females are more capable to mobilize the resources. They are always interested that the situation

could be improvised. Thus, in emotional disturbance females tend to acquire more of support. Girls are able to form connections with their parents & teachers. They are apt in forming positive connections with their peers in school as well. Males tend to have intimate relationship with only few people. Calculated results for gender differences are illustrated by fig 4.14.

Fig 4.14



Differences in the social support perceived by adolescents

4.2.1.3 Gender Differences in Adolescents on basis of Self-esteem

Many social, biological, cognitive & environmental factors help in the improvement of self-esteem in adolescents. According to Martinez & Garcia (2020) concern of the parents for their children is essential. It is measured as a factor for improvement of self-esteem in the adolescent phase. The present study concentrates on the deficiency of the heed or attention due to loss of one of the parent. One of the focuses is to study the effect on self-esteem, in adolescents on basis of gender. It is an efficient & important way for understanding & prediction of human behavior. The physical development in adolescent impacts his/her body image. Thus, it is considered that the cause of gender differences in self-esteem is due to the perceptions towards self, in adolescence. Different self-evaluation criteria are chosen by males & females consequently gender differences exists on the basis of their self-esteem. This disparity

is seen more in adolescence. Both utilize unlike sources to develop their self-esteem. Females have more importance of judgment or evaluation in their life. Males put together more comparison of their life, in social context. Females generally report positive social support as compared to males. There is a link between social relationships & self-esteem which is a cause of gender difference as explored by Gujar & Ali (2019). Data was analyzed by Bleidorn et al. (2016) in a large sample chosen from different countries. According to the researchers, self-esteem can increase with age. They also mentioned in their study that gender differences influence the self-esteem of an individual. These differences on the basis of self-esteem were found to less extent in developing nations like, India. In developed countries like U.K these differences were relatively larger. It was also assessed by Ogihara & Elmer in 2020 that global evaluation of the self have similar pattern over the life course in men & women. Gender differences are represented through fig.4.15.

Fig 4.15

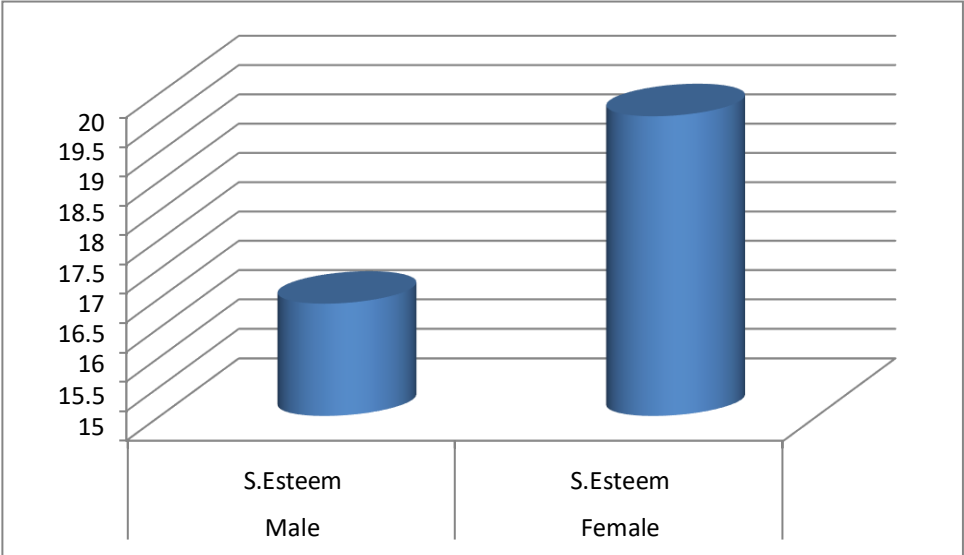


Illustration of gender differences on the basis of self-esteem

4.2.2 Analysis of Gender Differences on basis of Behavioral Problems

This sub-section deals with the second objective viz. analysis of gender differences among adolescents with single parent on the basis of their behavioral problems. Young people are characterized by an escalated growth, simultaneously

with a vulnerable or susceptible phase which is governed by many parameters. Need is to study factors & problems that can hold back their capability to grow according to their ability, aptitude & potential. Hence, when it comes to the adolescents of single parents, it becomes a matter of vital concern.

OBJECTIVE-2

To investigate the behavioral problems of adolescents of single parents on the basis of gender.

This part involves analysis & discussion of gender differences of the behavioral problems of 200 adolescents with single parent. Results of the independent test conducted for difference in the problems in behavior of male & female adolescents is given in Table 4.2.2.

Table 4.2.2
Results for Gender differences in Behavioral Problems of Adolescents
(Single Parent)

	Male (n=100)		Female (n=100)		t-value	df	p-value
	\bar{X}	SD	\bar{X}	SD			
Behavioral problems	89.1	28.4	66.2	22.0	6.35	198	0.0001**

Note \bar{X} : Mean & ** refers to significant level at 0.01 level

Discussion of results

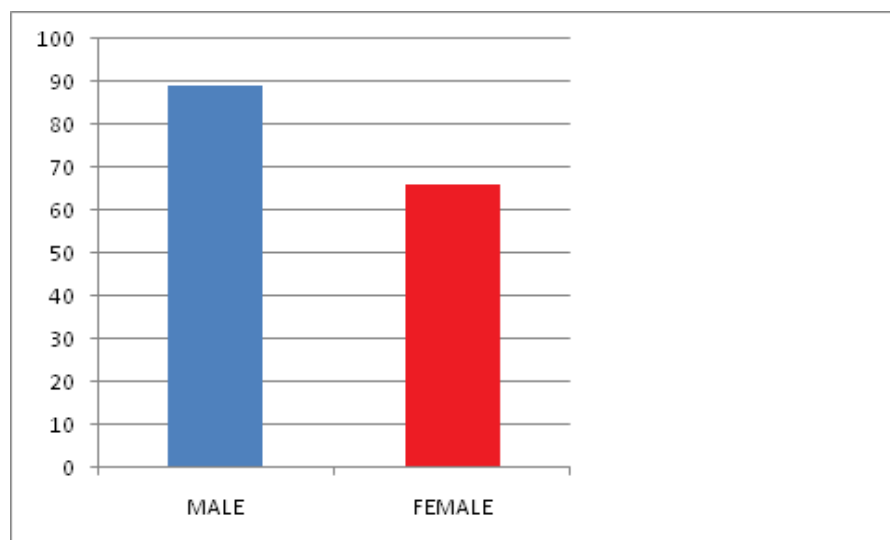
Result for the gender differences, in behavioral problems as mentioned in Table 4.2.2., was found to be significant at 0.01 level. Adolescents living with the single parents are different in their behavior, research has indicated. Differences exist on the basis of gender which predicts problems due to behavior significantly, after controlling for the other factors. A meta-analysis of psychiatric problems & related studies was performed by Singh & Gururaj in 2014.

Results of the study indicated that boys suffer from more nervousness & apprehension, anxiety & mood disorders, in comparison to girls as indicated by

Kristoffersen (2015) assessed the psychosomatic mechanisms underlying adolescent upsetting disorders using the Child Behavior Checklist. Significant & large negative coefficients of the behavioral problems in male adolescents in comparison to females, were found. Researchers indicated that depression, maladjustment, criminal & violent behavior are the common problems seen more frequently in boys as compared to girls. Jyothi (2015) has conducted a study on single parenting & the problems in behavior, faced by adolescents. It was found that boys are more prone for the externalizing problems, like belligerence or violence as compared to girls.

Lau et al. (2021) conducted a research on the attention problems of adolescents. It was explored that male adolescents suffering with attention deficit hyperactive syndrome scored high on their score for externalizing problems ($p=0.026$) as compared to female adolescents. The gender differences in relation to the scores on internalizing problems were found to be insignificant ($p=0.129$) according to the results. The results of a recent study conducted by Kroese (2021) suggested that a productive & dynamic society can be raised when requirements of children at risk or facing hazard of any sort are considered. Misbehavior of such children needs proficient interventions by competent educators as explained by Dadd & Tully (2019). Gender differences in the behavioral problems are shown in fig 4.16.

Fig 4.16



Gender differences in behavioral problems of adolescents

SECTION-III

4.3 STUDY OF THE DIFFERENCES IN BEHAVIORAL PROBLEMS, RESILIENCE, SOCIAL SUPPORT & SELF-ESTEEM OF ADOLESCENTS OF SINGLE & INTACT PARENT FAMILIES

Following section deals with the findings of differences in the behavioral problems, resilience, social support & self-esteem of adolescents of single & intact parent families. Objectives 3th & 4th will be discussed in this section. First of all, differences on the basis of behavioral problems will be discussed viz. objective-3

4.3.1 Examining the significant differences in the behavioral problems of adolescents

OBJECTIVE-3

To find the difference in behavioral problems of adolescents of single parent and intact families.

This sub-section provides the result on the basis of independent sample test which are mentioned in the following Table 4.3.1.

Table 4.3.1
Significance in Behavioral Problems of the Adolescents of Single Parent & Intact Families

	Single Parent		Intact families		't' value	df	'p'-value
	Mean	S.D	Mean	S.D			
Behavior problems	77.6	27.8	41.3	15.3	16.2	398	0.001**

Note :**Significance at 0.01 level & n =200 in each case

Discussion of results

As concluded from the information mentioned in Table 4.3.1., result was found significant for the difference in behavioral problems of the adolescents of single and

the intact family chosen as the sample of study. Results are in accordance with the study conducted by Schick (2002). Researcher found that children of separated or broken homes are socially fearful thus not able to deal with the attention problems, therefore achieved less in their studies.

Exposure to agony & pain is the cause various disorders like oppositional defiant disorder & bad disposition. Family changes from the two parent family to single parent family increases the behavior related tribulations in the long run among children.

According to Stack et al. (2018) family unit in the single parent families is a risk factor whereas intact family serves as a protective unit for saving the children from all harms & dangers of society. Parasar & Maurya (2015) indicated that when strength of mind or focus is less due to the constant worry in mind it pose as an aspect to increase various problems in single parent families.

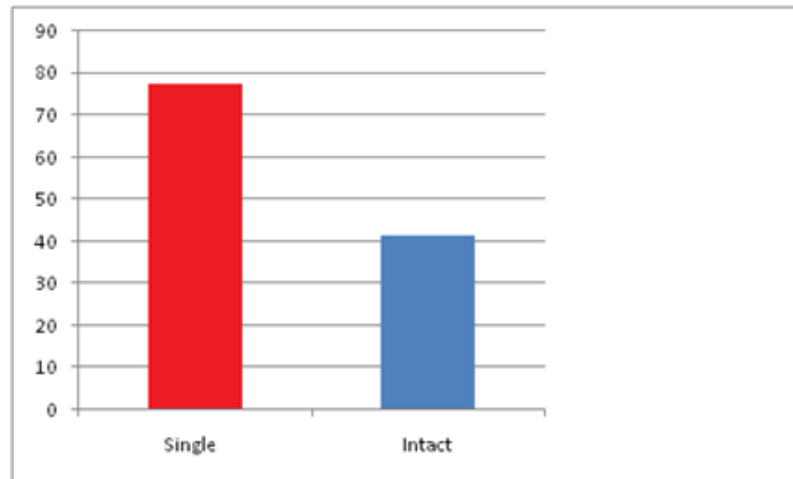
A variety of psychiatric disorders due to the use of harmful narcotics is commonly seen among children of disputed families. Training of parents is important to deal with the problems faced by adolescents. Parents are the most powerful force in their children's life therefore, can manipulate behavior of children in a positive direction.

If parents have tensed relationship then children have mixed feelings about their separation. Children of such parents withdraw into themselves misbehave show distress & find the difficulty in their attentiveness whether at school or home.

Uncertainty is faced by such children & suffers from the variety of conduct problems & anti-social behavior. Nuclear families are considered normal families, where both of the parents are alive, to look after the needs of their children as a result fewer behavioral problems are found in the children.

Abedini (2017) investigated behavioral problems faced by the children in single & intact families by causal comparative approach. Youth self-report (Achenbach's, 2001) was used to measure the problems in behavior. Findings have shown differences in behavioral problems in two groups. These differences were found to be significant. Mean differences in behavioral problems of adolescents of single & intact families are depicted in fig. 4.17.

Fig.4.17



Mean score for the behavioral problems for adolescents (Single & Intact)

4.3.2 Analysis of the significant differences in Resilience, Social Support & Self-esteem in Single and Intact parent families

The following objective is dealt in this sub-section:

OBJECTIVE-4

To examine the differences in resilience, social support & self-esteem of adolescents of single parents & intact families.

Results of this sub-section are mentioned in Table 4.3.2.

Table 4.3.2

Resilience, Social Support & Self-esteem of Adolescents

	Single parent Families		Intact Families		t-value	df	p-value
	\bar{X}	S.D	\bar{X}	S.D			
Resilience	39.2	11.6	62.5	12.9	18.91	398	0.001**
Social Support	18.3	4.9	27.4	5.4	17.47	398	0.02*
Self-esteem	18.0	4.5	26.4	12.9	16.50	398	0.001**

Note₁ **Significance at 0.01 level & *Significance at 0.05 level

Note₂ \bar{X} refers to mean & n= 200 in each case

Interpretation

Table 4.3.2., shows the 'p' values for the significance of the variables viz. resilience, social support & self-esteem of the adolescents of single & intact parent families at 0.01 & 0.05 levels. As observed from the result it is understood that unbroken or intact families are considered as tough families, in comparison to broken homes or single parent families. Problem solving & emotion based coping is seen readily in such families. Thus the hypothesis of the significant difference in these variables w. r .t single & intact families is accepted.

Discussion of results

To emerge stronger, life challenges could be faced in a constructive way. In intact families resilience is provided by the family itself as a strength or support by both the parents. This support helps to develop child's internal resources for example, self-confidence and esteem. Findings of the study conducted by Dilgasa (2018) revealed a statistically significant relationship, between adolescent's family structure & the psychosocial adjustment. It was discovered that adolescents from the intact families are better in their tuning with the society than adolescents from non-intact families. Dysfunctional family environment is a reason for significant problems whereas relevant social behavior is shown by adolescents growing up in intact family, according to Knöchelmann et al. (2020). If the support rendered to such families is unconditional it will certainly lead to the enhancement of well-being of person along with the self-esteem. After all pleasure, happiness & satisfaction stems out from family itself.

In an Indian study conducted by Khan & Deb (2021) on resilience & childhood adversity, it was clarified that in intact families relation between child & parent is encouraging & accommodating. Synchronization in the family is responsible for resilience in adolescents.

It was reported in an interview given by adolescents of single parents that the environment of the family was the cause of abuse in childhood faced by them. Similar results were provided by Sunaina et al. (2019). In this study resilience among adolescents of single & intact adolescents was compared. Random sampling was used, to collect the data of one hundred & twenty adolescents. On the basis of the independent sample test it was concluded that there were significant differences in

resilience in adolescents of single & intact families. Poor regulation in single parent families leads to poorer functioning or working of family, less command of the parent & feeble relation between the parent & child. It was documented by Joshi & Kaul (2018), in their study.

The contentment towards life in families at risk decreases in such children particularly adolescents as they tend to be intimidating & unreceptive for that reason, suffering with psychological damage thereby disturbing the temper & outlook. Loss of the emotional power & approach for children due to the guilt ridden attitude of the parents further impedes the development of an adolescent in constructive direction, thus reduces the self-esteem. Beer in 1989 found that self-esteem of the children in divorced families is less than those who belong from the homes where parents are together. Bynum & Durm (1996) surveyed the adolescents of age between 13-18 years for their self-esteem. It was found out that those adolescents, who received mental & emotional assistance had higher self-esteem. Mustapha et al. (2019) used a descriptive survey across six schools in Nigeria. Researchers assessed the self-esteem of adolescents of separated parents. They explored that parent's help or support can raise the self-esteem of a child during course of separation. Mean differences in resilience, social support & self-esteem of adolescents of single & intact family are illustrated in fig. 4.18.

Fig 4.18

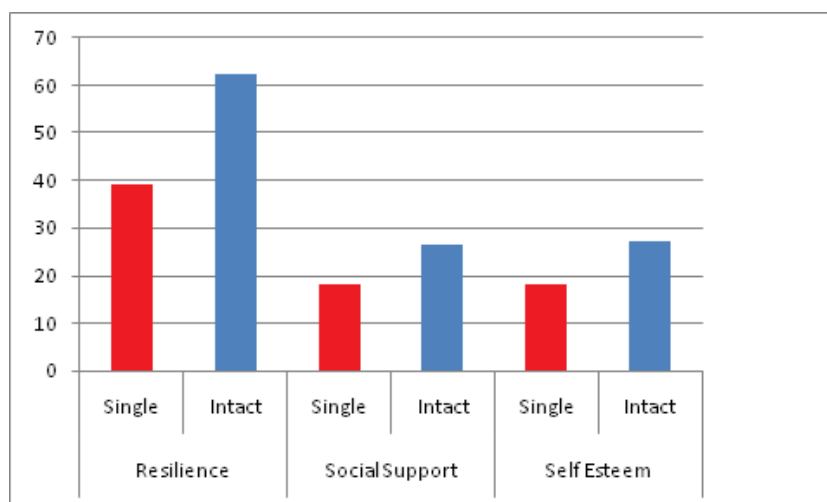


Illustration of the scores of resilience, social support & self-esteem

SECTION-IV

4.4 CORRELATION ANALYSIS

In this section relationship of resilience, social support, self-esteem & behavioral problems of adolescents with single parent is discussed, under respective sub-sections.

OBJECTIVE-5

There is a significant relationship among resilience, social support, self-esteem & behavioral problems of adolescents with single parents.

Pearson coefficient of correlations was calculated. Values are mentioned in Table4.4.

Table 4.4
Correlation Co-efficient Values for Pairs of Variables

Variables		Resilience	Social Support	Self-esteem	Behavioral Problems
Resilience	Pearson Correlation	1	0.39**	0.48**	-0.50**
	P-value		0.00	0.00	0.00
Social Support	Pearson Correlation	0.39**	1	0.50**	-0.15*
	P-value	0.00		0.00	0.038
Self-esteem	Pearson Correlation	0.48**	0.50**	1	-0.29**
	P-value	0.00	0.00		0.00
Behavioral Problems	Pearson Correlation	-0.50**	-0.15*	-0.29**	1
	P-value	0.00	0.038	0.00	
** Significance at 0.01 level					
* Significance at 0.05 level					

As observed from Table 4.4., the values of correlation between variables viz. resilience, social support & self-esteem are positive & significant at 0.01 level. As hypothesized, it is retained that resilience & self-esteem of adolescents is affected by the social support, acquired & experienced by them in life. Results also show that all of these variables are related to each other. Depressing and unconstructive changes in a single parent family can be counteracted by external societal or public agents like peer group which can reinforce child's coping in stress.

It is also inferred from the result, that these variables are called hopeful attributes for the adolescents. They tend to lessen their behavioral problems. The correlation obtained between resilience & self-esteem with behavioral problems was found to be negative & significant at 0.01 levels. For social support & behavioral problems the value of correlation coefficient obtained is -0.15 which is found to be significant at 0.05 level.

Discussion of results

4.4.1 Resilience & Social Support

A relationship with a coefficient value of 0.39 is obtained, between resilience & social support in the present study. Study performed by Liu et al. (2021) confirmed the results of inter-correlation between the variables selected for the study. Improvement in the rational or intellectual health & flexibility in thoughts can be retained by the application of resilience along with proper social support. In this study a self-constructed scale was used to assess social support. Connor Davidson Scale (2003) was used to measure resilience in children.

World Health Organization (2019) highlighted the serious concerns for mental health conditions of the adolescents & problems in behavior associated with it. Consequences are connected to the disrupted family configuration & disgrace, associated with such families. Such disruptions can be diluted by adopting the principles of resilience.

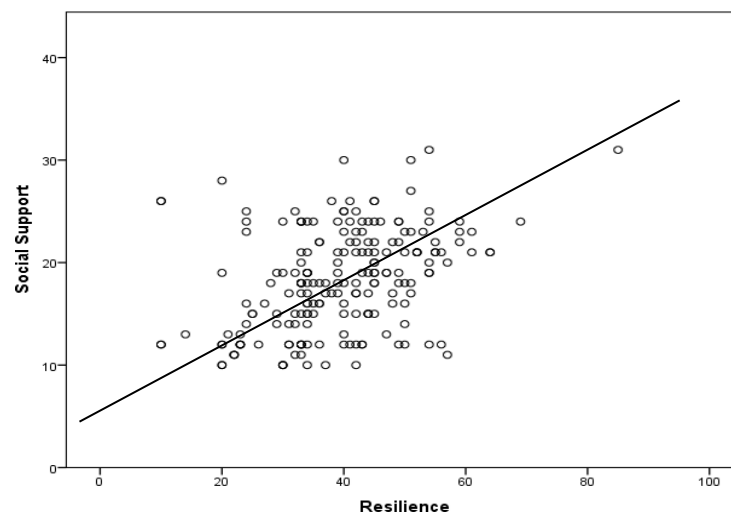
Zhai et al. (2019) provided similar results based on the life proceedings & the alternations in society which were associated & mediated by role of resilience. For the adolescents of single parent families both home & school environment along with the collaboration amongst the two are key concerns for resilience which can

control the adjustment.

Engagement & commitment of such children increase in society voluntarily as they fit well, according to the norms & moral standards of the society. Support from the family is important & impulsive for the recovery process due to the stress of situations faced by the adolescents of such families. Such families prosper or thrive to unable mitigation of the tensions within the family by proper regulation as explored by Meenakshi et al. (2018). Positive support of friends fulfills the lacuna & transforms the adolescents of families at risk into a resilient individual as stated by Saraswati & Suleman (2018).

A descriptive correlation analysis was performed by Salim et al. (2019). It was found that social support moderates the relationship between resilience & stress thereby increasing the competence of a person to adjust. In an analysis, Zheng et al. (2021) indicated that resilience is positively correlated with social support & mental health. This study provided evidence for socio-emotional selective theory developed by Carstensen (1992) which provided many practical implications for helping adolescents, to attain resilience. Need is to extend the literature on the importance of social support, which emphasizes the need to incorporate social support so as to augment resilience as explained by Dey et al. (2019). Fig. 4.19 illustrates the relationship between resilience & social support through a scatter diagram.

Fig 4.19



Correlation of resilience with social support

4.4.2 Resilience & Self-esteem

This sub-section deals with the discussion of relationship, between resilience & self-esteem of the adolescents belonging to single parent families. Results show a positive correlation viz. 0.48 between resilience & self-esteem which is significant at 0.01 level. The results were confirmed by various researchers, conducting studies on adolescents. Relation between these two variables is important to maintain physical & general health of an individual.

Studies indicate that well-being of a person is dependent on his/her self-esteem which is affected by his/her resilience. Both are indicators of healthy psychological & social condition of a person hence self-confidence & ability to cope with unpleasant situations faced in life increases.

Adequate self-esteem acts as a defending factor for risk taking outlook in children & adolescents. It is helpful in increasing resilience in children. It is the ability of bouncing back after facing disappointments in life for example, loss of a loved one or any other stressor.

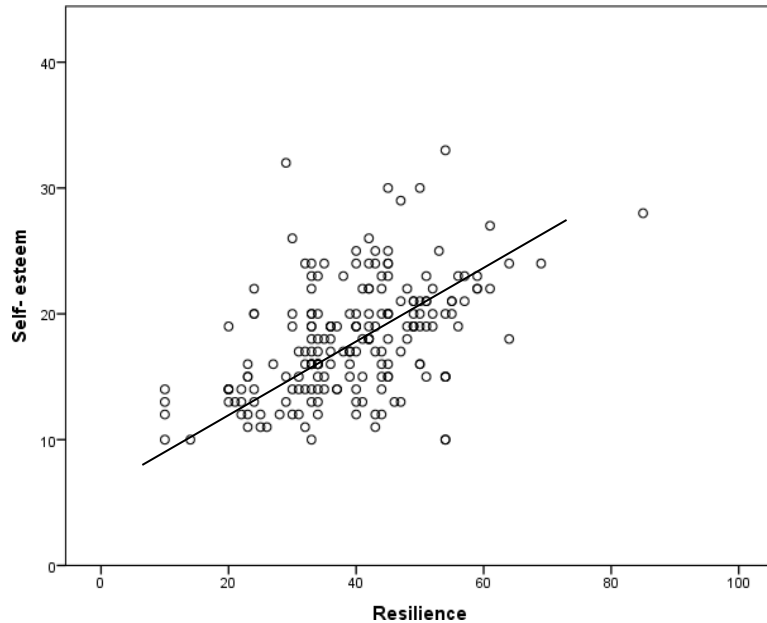
Mehrotra & Chaddha (2013) explored that factors perseverance, self-esteem & coping help to amplify resilience in children of the families in peril. In such families parent support can reduce the parent child, arguments or disagreements. Resilience & self-esteem play a mediating role in resolution of divergence or differences among children in single parent families. Regression analysis conducted by Chamuah (2019) on adolescents indicated that resilience & self-esteem both are fundamental in improving the mental well-being.

Development of mental resilience predicts the absence of dysfunctional behavior, in individuals which further helps them in the acknowledgment of capacities & adapting to the problems faced in life. Adolescents, who were lacking resilience are often found to be besieged hence adopt unhealthy & damaging mechanisms to overcome the hardships they face in life.

Sagone & Indiana (2020) reviewed many articles related to resilience. It was found that it is highly correlated to self-esteem. Study emphasized that promotion programs for resilience are needed to develop self-esteem in the adolescents.

Fig 4.20 illustrates the relationship between resilience & self-esteem-

Fig 4.20



Relationship of resilience with self-esteem

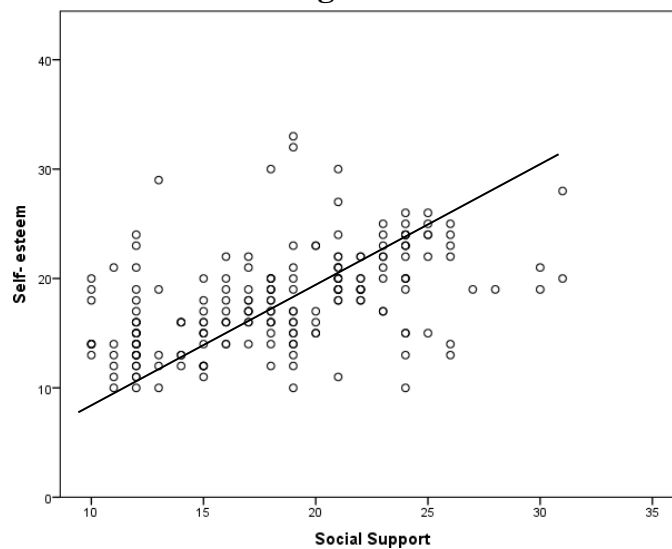
4.4.3 Social support & Self-esteem

Social support & its relation to self-esteem are explained in this sub-section. The value of the Pearson correlation coefficient between these variables was found to be 0.50 which is significant at 0.01 level. In a descriptive study, conducted on adolescents by Ikiz & Cakar (2010) the relation between social support from friends & self-esteem was found to be significant & positive ($r = 0.404$, $p < 0.01$). Similar results were obtained for the relationship of self-esteem & social support from family ($r = 0.507$, $p < 0.01$). Correlation was also found to be positive & significant with the perceived social support from teachers ($r = 0.435$, $p < 0.01$).

Results indicated that adolescents who perceive enough social support had higher self-esteem, which in turn contributed to their psychological well-being. This research considered high self-esteem as a psychological resource that can promote many outcomes such as happiness, performance in academics, competence in society & popularity in peer group. According to Gupta & Kashyap (2020) a family serves as a link between society & children. Illustration of the association between social help

(support) & self-esteem is shown in fig. 4.21.

Fig 4.21



Representation of correlation of self-esteem & social support

4.4.4 Resilience & Behavioral Problems

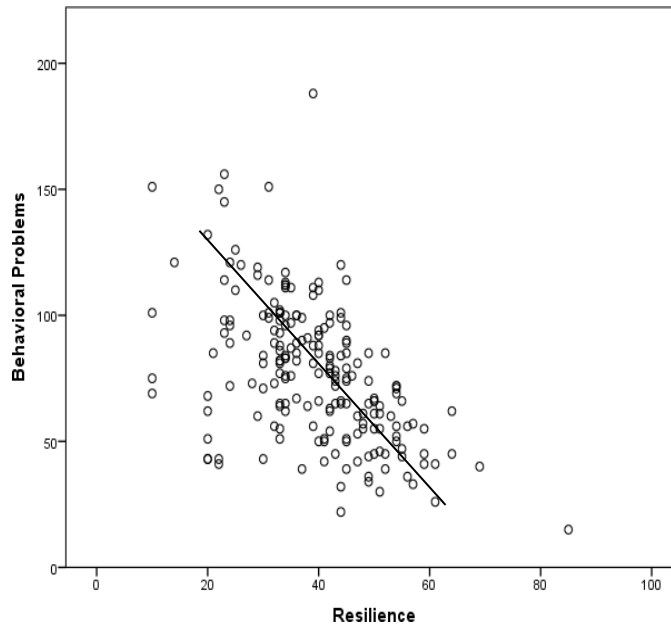
In this sub-section the effects of resilience on problems due to behavior, in adolescents of single parents is discussed. To adapt well in the presence of significant sources which are stress related, is resilience. Results of many practical studies, conducted all over the world suggest that resilience is negatively correlated with the problems related to well-being & behavior of a person.

Less resilient person is found to be anxious, depressed & less satisfied in life. High resilience is required to moderate the symptoms of depression & anxiety. It was found that resilience is negatively correlated to depression in a recent study performed by Wu et al. (2020). Resilience helps in decoding & disrupting the biological mechanisms associated with mental problems, whether they are related to behavior or emotions.

Resilience can mediate the relationship between ill treatment, the behavioral & emotional problems faced by the adolescents in single parent families. Behavioral problems like hyperactivity & problems associated with the conduct among adolescents are shown to be increasing in India as researched by Edlina (2019).

Fig.4.22 explains the negative correlation between resilience and behavioral problems with the help of a scatter plot.

Fig.4.22



Relation of resilience with behavioral problems of adolescents

4.4.5 Social support & Behavioral problems

Social support & its relation to the behavior problems in adolescents are discussed in this sub-section. Problems due to behavior lead to non-successful transition from the adolescent to adulthood stage of life. Acquisition of tasks in hand performing roles for society according to the expectations is difficult in the adolescent phase when a child has to become responsible therefore problematic behavior occurs.

Circumstances provided to a child in a single parent family are not conducive due to dearth of the support systems. Disruption in associations among family members is common in such families therefore problems due to behavior of child emerge as a consequence.

An appropriate support from the society may act as a shield which can neutralize the deteriorating condition of a child. Social ties selected for the support by the adolescent should be diluting for the behavioral problems rather precipitating.

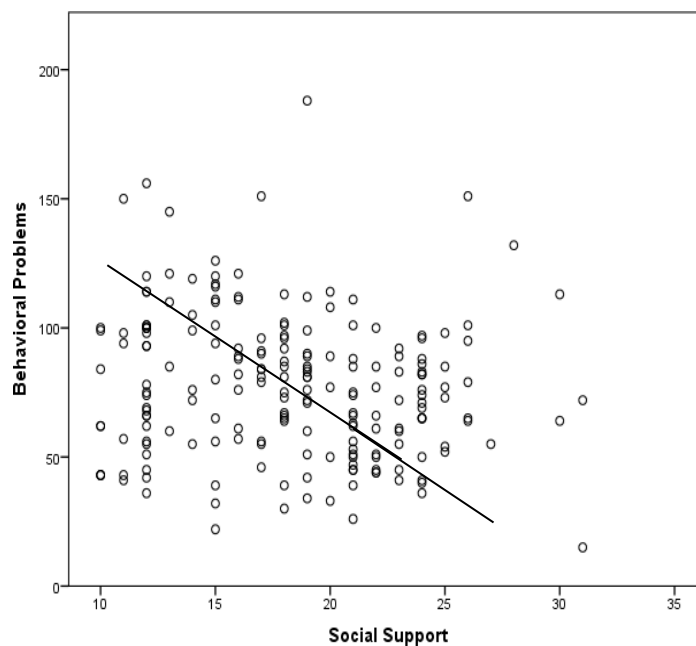
Negative correlation between the social support & behavioral problems was found by Zhou et al. (2017) in a research performed. As mentioned in this study both objective (family & friends) & subjective support (care) are required by a child when seclusion is a part of life. Lack of the satisfactory relationships or the gap between the actual &

desired level of communication between these relationships comprises of the loneliness & rejection in a single parent family.

Important is to utilize appropriate social support so that a child can protect himself/herself from indulging in unacceptable behaviors viz.offence of any kind. The intervention which can provide a help or resource for single parent adolescents is of utmost importance.

Single parent should be more responsive to various externalizing & internalizing behavior problems, shown by the child. Care should be taken to tackle the situation at the earliest by their involvement. Effective ways of dealing with adolescents can only help them to get rid of the behavioral & emotional difficulties they face. Fig.4.23 explains the negative correlation between social support and behavioral problems experienced by adolescent with single parent.

Fig.4.23



Correlation of social support with behavioral problems

4.4.6 Self-esteem & Behavioral Problems

Self-esteem of the adolescents in relation to the behavioral problems is examined in this subsection. A negative & significant correlation (-0.29) was obtained between self-esteem & behavioral problems of the adolescents of single parent families.

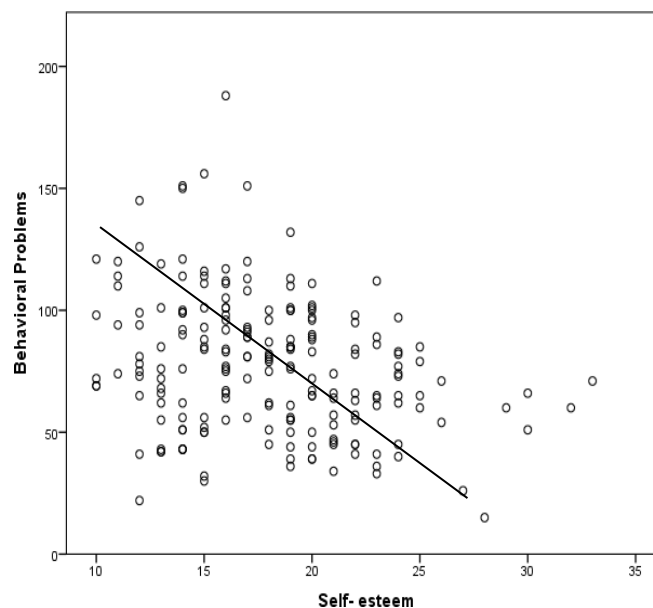
Results were attuned to the study performed by Hamid (2021). For interpersonal development self-esteem is considered to be a major psychological factor, particularly in adolescence.

Single parenthood may projects a risk factor for a child as it often leads to distress & depression. Loss of self-esteem is an important side effect faced by the child with a single parent thus it becomes one of the strongest factors to predict behavioral problems experienced by the children as explained by Leary et al. (1995).

Children with low esteem grow into youth having anti-social behavior. Such children are raised into adolescents with many pessimistic emotions which can lead to alteration in their conduct. They indulge in self-criticism & hook up themselves in feelings of unease, dejection & anger persistently.

In India, the prevalence of the child & adolescent psychiatric disorders is on the rise therefore such studies are of great concern. These orders are linked to morbidity as well as income sources are less which can further be associated with poor health indices & infrastructures in developing nations like India. Correlation between self-esteem & behavioral problems is depicted in fig. 4.24.

Fig. 4.24



Self-esteem & behavioral problems-a negative relationship

SECTION- V

4.5 MODERATION OF SOCIAL SUPPORT, IN RELATION TO RESILIENCE & SELF-ESTEEM ON BEHAVIORAL PROBLEMS OF ADOLESCENTS

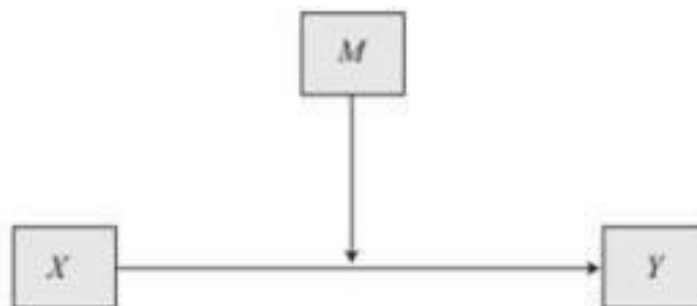
This section deals with moderation analysis related to following objective-

OBJECTIVE-6

To investigate the moderating effect of social support in relation to resilience & self-esteem on the behavioral problems of adolescents with single parents.

In this section linear regression performed for the moderation analysis is explained. To study the moderating effect, one of the predictor selected for study is resilience or self-esteem which is the independent variable (X). Second predictor is the moderator which is social support (M). The dependent variable is the behavioral problems of the adolescents of single parents. It is can also be designated as the outcome variable (Y). Fig 4.25 represents the relation between M, X & Y.

Fig.4.25



Conceptual diagram for representation of moderation analysis

To summarize:

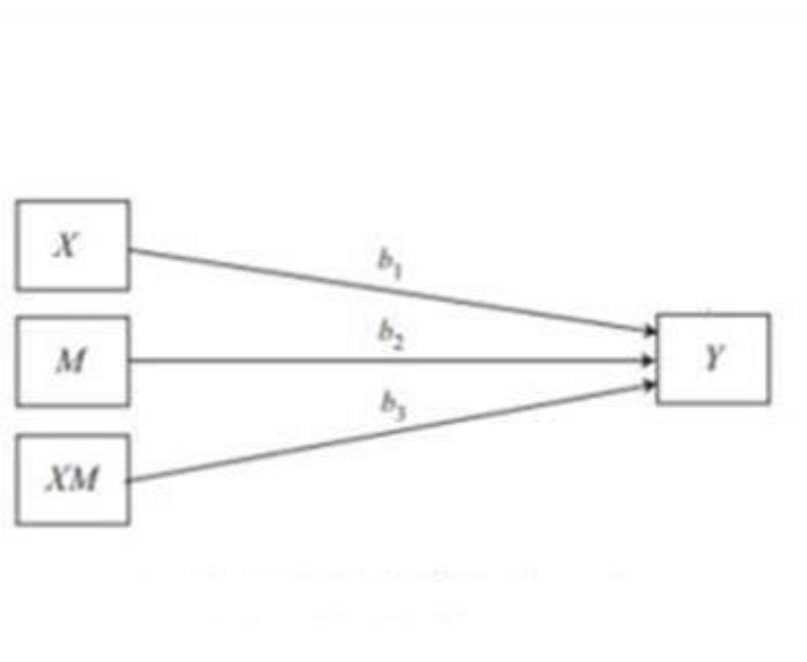
M= Moderator (Social support)

X= Independent Variable (Resilience or self-esteem)

Y= Dependent Variable (Behavioral Problems)

Fig.4.26 explains the conditional effects of X on Y.

Fig 4.26



Statistical diagram for representation of moderation analysis

The ‘b’ values & the associated standard errors were calculated for analysis. Each ‘b’ value was compared to zero using a ‘t’-test. The confidence interval for ‘b’ was also produced.

Results of the moderation analysis were calculated by choosing resilience or self-esteem as the independent variable for the overall sample of two hundred adolescents with single parents.

4.5.1 Moderating effect of Social Support in relation to Resilience on Behavioral Problems of Adolescents with Single Parent

With help of process macro developed by Hayes (2018) moderation analysis was performed. Results of analysis are tabulated as follows-

Table 4.5.1
Social Support as Moderator for Resilience
(In Relation to Behavioral Problems of Adolescents)

Variable	'b'	SE-b	't'	'p'
Constant	78.61 [74.21-82.13]	1.75	44.89	0.00
Resilience (I.V)	-1.26 [-1.57- -0.94]	0.16	-7.9	0.00
Social support (M)	0.30 [-0.431-0.03]	0.37	0.80	0.40
Resilience X Social support	-0.05 [-0.09-0.11]	0.02	-1.93	0.048
R ² =0.29				

Interpretation

The results mentioned in Table 4.5.1 indicates that the interaction of resilience with social support was found to be significant ($p < 0.05$) with 0.29 as the R² value. R squared value is low. It indicates that the independent variable (resilience) is correlated with the outcome variable (behavioral problems) but it is unable to explain the variability to more extent in relation to dependent or outcome variable.

Result indicates that the relationship between resilience & behavioral problems is moderated by social support. Thus hypothesis for social support to be a moderator, in relation to resilience for the behavioral problems is accepted for the selected sample of 200 adolescents with single parent.

Discussion of results

The moderating effect of social support reduces the morbidities in children suffering from the problems in such high risk families. According to Yang (2021) both social support & resilience are helpful in alleviating the stress in an adolescent. Psychological training for the parents & relatives who are the support systems of children in the single parent families is important.

It can be provided by counseling so that such children can increase their resilience. Schools may act as the important support element in this context as affirmed by Baltaci (2015). In a current study based on an interactive relationship of social support & resilience on individual's mental health by Li et al. (2021) it was found that social support acts as a moderator for reducing the problems faced by children at both emotional & behavioral levels.

4.5.2 Moderating effect of Social Support in relation to Self-esteem on Behavioral Problems of Adolescents with Single Parent

In this sub-section moderating effect of social support on self-esteem in adolescents is discussed.

Results were calculated for moderation analysis is as follows-

Table 4.5.2

Effect of Social Support as Moderator on Self-esteem (In Relation to Behavioral Problems of Adolescents)

Variable	'b'	SE-b	't'	'p'
Constant	78.47 [74.22-84.72]	2.16	36.39	0.00
Self-Esteem (I.V)	-1.71 [-2.68- -0.75]	0.49	-3.5	0.00
Social support (M)	-0.03 [-0.91-0.85]	0.45	-0.07	0.95
Self-Esteem X Social support	-0.07 [-0.26-0.11]	0.09	-0.82	0.42
$R^2 = 0.08$				

Interpretation

Result for studying the effect of social support in relation to self-esteem so as to predict the behavioral problems of adolescents was found to be insignificant in the hypothesized direction.

Results can be represented as: $b = -0.07$, 95% CI $[-0.26-0.11]$, $t = 0.09$, $p > 0.05$.

Low value of R^2 (0.08) shows that very less proportion of variation is experienced for the outcome or dependent variable (behavioral problems of the adolescents) with single parents. Insignificant results can be inferred from the risk taking attitude of a child being alone therefore tends to get or seek more of social support which may not work in positive direction thereby increasing the problems, in behavior. Although results are statistically insignificant then also it remains a fact that resilience, social support & self-esteem, can help better (when effects are seen together) for reduction of the behavioral problems in adolescents than individual variables. Social support increases the recognition of self-worth & self-esteem in an individual which subsequently affects the psychological well-being as stated by McCarthy & Hoge in 1984.

According to Keles et al. (2020) violent behavior or aggression is moderated by resilience, self-esteem & social support. Several researchers tried to find the role of social support as a moderator with respect to self-esteem for predicting the problems in behavior in adolescents. Results found were mixed & inconclusive in some studies. According to Camara (2017) when a child faces stressful events during adolescence, elevation in the maladaptive behavior is seen due to inappropriate social support, they seek, as a coping strategy. To search for support is considered as a useful strategy so as to cope with the stress & development. Similar results were predicted by Valarmathi et al. (2015). Unhealthy support affects the mental health negatively, hence reduces self-esteem of a child. Despite non-significant moderation results for self-esteem this study has important research implications. To mobilize social support with careful planning is need of hour to protect the vulnerable children from the harm of loneliness & depression in single parent families as explored by Dor in 2021. With the change of moderator i.e. social support, the association of depression & negative life events also changes. To get rid of the problems in behavior, moderating effect of social support is required in the early adolescence which can increase the feeling of gratitude towards the social support they receive.

CHAPTER-5

FINDINGS, EDUCATIONAL IMPLICATIONS AND SUGGESTIONS FOR FURTHER RESEARCH

The analysis, interpretation & discussion of results have been provided in chapter-4. The present chapter deals with three sections viz. presentation of the findings of study, the educational implications based on these findings & the suggestions for future research.

5.1 FINDINGS

5.1.1 Findings based on Descriptive Analysis

i) Assessment of Resilience

a) The resilience of four hundred middle age adolescents studying in class 9th & 10th of single and intact families was analyzed in the present study. 48.75% of the adolescents possessed low resilience scores as measured by Connor Davidson scale, used as a tool for the study. 12.5% adolescents from the sample accounted for high resilience. Rest of the adolescents were possessing intermediate resilience (38.75%). Classification of adolescents on the basis of resilience, is represented in fig. 4.1. Findings are arranged in Table 4.1.1.

b) Resilience of the adolescents of single parents was further investigated, for depth analysis. Out of total sample of 400 adolescents, 200 were selected from single parent families. The overview is mentioned in Table 4.1.1.1. Many adolescents of single parent families belonged to the group of low resilient individuals. This accounts for 83% of the respondents of single parent families. 2.0% adolescents were found in the category of highly resilient individuals. Intermediate resilience was possessed by 15% of the adolescents. Scores are highlighted with help of fig. 4.2.

c) 200 adolescents of intact families were assessed for their resilience. Figures are mentioned in Table 4.1.1.2. Examination of resilience indicates that 23% of the adolescents confirmed high resilience in comparison to the adolescents with single parent, where it is only 2.0%. Majority of the adolescents (62.5%) of intact families were classified into individuals with intermediate resilience. 14.5% of the adolescents were found to possess intermediate resilience. Scores of resilience of the respondents

of intact families is depicted by fig.4.3.

ii) Analysis of Social Support

a) A brief analysis of the social support possessed by four hundred middle age adolescents selected a sample for the study was conducted. As observed out of the total sample 174 adolescents had adequate social support. Only 38 adolescents, possessed low social support. Rest of the 188 adolescents belonged to the category of having medium social support. Results are shown in Table 4.1.2., & represented by fig.4.4.

b) Often it is seen that single parents have low social support hence they are less proficient to handle all challenges alone. Findings for the social support of the adolescents of single parent families have been enlisted in Table 4.1.2.1. Out of 200 adolescents selected as a sample, 37 adolescents from single parent family possessed low social support. Adolescents found with adequate social support were only 26. Scores representing intermediate resilience were for 137 respondents out of 200. Distribution of scores is presented through fig 4.5.

c) The results of Table 4.1.2.2., indicate that 148 students out of 200, had good quality social support. This accounted to 74%. Only a single child had less social support. Rest of the children taken as a sample (51) had medium social support. An overview of the analysis of support gathered by adolescent, of intact families, is explained with the help of fig.4.6.

iii) Exploration of Self-esteem of adolescents

a) Scale given by Rosenberg in 1965 was administered by the researcher on 400 middle school adolescents of class 9th & 10th to study their self-esteem. As inferred from Table 4.1.3., many adolescents i.e.186 out of 400 chosen as the sample had moderate self-esteem. Only 57 students possessed high self-esteem. Rest of the students (157) belonged to low esteem category. Fig.4.7 is used to express the results on the basis of self-esteem scores.

b) In a single parent family children live a disturbed life, therefore have low self-esteem. Table 4.1.3.1., provides the information about the score on the basis self-esteem scale. 130 students out of 200 i.e. 65% are low at self-esteem. Only 1% was categorized to possess high self-esteem. Rest of the students (i.e. 34%) had moderate self-esteem. Depiction of scores is performed by, fig. 4.8.

c) After getting the information from Table 4.1.3.2., it was interpreted, that only 27 adolescents from intact families had low self-esteem. 55 adolescents scored high on

their esteem. Rest of the adolescents (118) was found to have moderate self-esteem. Optimal growth of children in an intact family is characterized by fewer conduct problems mature self-reliance with positive values & goals thus, categorized as high esteem individuals. Fig.4.9 represents the scores, on the basis of esteem.

iv) Overview of Behavioral Problems

a) Behavioral problems of 400 adolescents, selected as a sample were assessed after calculating Q_3 (84.29) & Q_1 (37.9) values. Categories of adolescents on the basis of behavioral problems were identified as mild, borderline & severe. Table 4.1.4 depicts the number of adolescents, who fall in these categories. In all, out of a total sample of 400 respondents, 80 were grouped as 'mild' & 84 fall under 'severe' category. Approximately sixty percent respondents in the study i.e.236 (59%) were in 'borderline category' on the basis of scores. Fig.4.10 was used to present the overview of the scores of the behavioral problems suffered by the adolescents studying in class 9th & 10th. Required is to prevent the children from entering in the category of severe cases ridden with various behavioral problems.

b) Adolescents who are not able to receive an ideal social support (for e.g. in single parent family) develop several maladaptive patterns, in emotional & behavioral spheres. This leads to the accumulation of the behavioral problems in adolescents both externalizing (e.g. aggression) & internalizing (e.g. anxiety). It can be concluded from Table 4.1.4.1 that 39 percent (78 out of 200) of the adolescents, of single parent family were suffering with severe behavioral problems & only 6 percent (12 out of 200) were categorized as suffering from mild behavioral problems. 110 adolescents were at borderline category. Expression of scores is done through fig 4.11.

c) Family as a unit is very important for socialization of children. Parent in intact families, raise the children in highly structured & discipline manner, therefore they are less hard towards society & parents. Table 4.1.4.2., provides the information about the behavioral problems of adolescents. Only 3% children of intact families were found in the category of severe behavioral problems out of the total sample of two hundred adolescents. 34% adolescents possessed mild problems in their behavior. Rest 63% adolescents were in borderline category. Fig 4.12 depicts the scores.

After going through the results of the study it becomes imperative for educators & parents to be responsible enough, so as to provide a good & fair support system in promoting resilience & enhancing self-esteem of adolescents in trouble of any kind

so as to lessen the problems due to behavior.

5.1.2 Findings on the basis of Objectives

In the light of the objectives, hypotheses & discussion of results, the findings of the present study are-

Objective I: To explore the gender differences in resilience, social support & self-esteem of adolescents, with single parents.

In the present study gender analysis on the basis of resilience, social support & self-esteem for adolescents belonging to single parent families, was performed. Results were found to be significant on the basis of the 't' test conducted and mentioned in Table 4.2.1. Hypothesis pertaining to this objective was accepted. Female adolescents were found to be more resilient in undesirable situations faced by them with the single parent. It can be accounted for the ability of the female adolescents to acquire more of support in society which further accounts for more self-esteem, as compared to the male adolescents. Fig.4.13., 4.14.& 4.15 were used expressed the mean score obtained by the adolescents of single parent families on the basis of gender differences in resilience, social support & self-esteem respectively.

Objective II: To investigate the behavioral problems of adolescents of single parents, on basis of gender.

It was observed on analysis for above mentioned objective that the female & male adolescents of single parent families differ significantly with respect to their behavioral problems, which helps to retain the hypothesis for the existence of gender differences due to behavioral problems in adolescents with single parents. Findings in Table 4.2.2., shows the significance of the 'p' value at 0.01 level. Gender is an important predictor of the problems in behavior as indicated by the investigation. Representation of mean scores on the basis of behavioral problems is shown through fig. 4.16.

Objective III: To find the difference in behavioral problems of adolescents of single parents & intact families.

One of the purposes of the present study was to find out the difference in behavioral problems in adolescents of single & intact families. Significant differences in behavioral problems of adolescents of single & intact families were found (Table 4.3.1) thus the hypothesis framed in relation to this objective is accepted. In intact

families, both emotions based coping & problem solving coping is seen readily, therefore handling with grave situations, is considered efficient which is generally absent from single parent families. Fig.4.17 expresses the difference in behavior.

Objective IV: To examine the differences in resilience, social support and self-esteem of adolescents of single parents & intact families.

Results are mentioned in Table 4.3.2. The 'p' values for significance of the variables viz. resilience, social support & self-esteem of adolescents of single & intact parent families were calculated. Results were significant at 0.01 & 0.05 levels. Related hypothesis was accepted. Fig.4.18. explains the differences for these variables w. r. t. adolescents of single parents & intact families.

Objective V: To study the relationship among resilience, social support, self-esteem and behavioral problems of adolescents with single parents.

Results are provided in Table 4.4. Pearson coefficients indicated that variables resilience, social support & self-esteem were found to be positively correlated. Relationships of resilience, social support & self-esteem with the behavior problems in adolescents with single parent were found to be negative which indicates that these variables are helpful in decreasing the unconstructive outcomes, practiced by children of such families. As hypothesized, it is retained that resilience & self-esteem of adolescents is affected by the social support, acquired & experienced by them, in life. From the results it can be generalized & recognized that fortification or reinforcement the child's coping, in any kind of trauma or strain can increase the resilience in children thus provides relief, thus they can keep themselves in high esteem and free from behavioral problems. Relationships are expressed with the help of scatter plots viz.4.19-4.24.

Objective VI: To investigate the moderating effect of social support in relation to resilience & self-esteem on the behavioral problems of adolescents with single parents.

a) Results of linear regression analysis are specified in Table 4.5.1. It reflects the role of social support as moderator, for the relationship between resilience & behavioral problems. Results were found to be significant ($p < 0.05$) thus hypothesis for the interaction of resilience with social support in relation to behavioral problems was accepted. R squared value was found low (0.29) which indicates that the

independent variable (resilience) is correlated with the outcome variable (behavioral problems) but it is unable to explain the variability to more extent in relation to dependent or outcome variable (behavioral problems).

b) Results in Table 4.5.2., revealed the moderating effect of social support in relation to the self-esteem on behavioral problems of adolescents with single parent. Results were found to be insignificant at 0.01 level in hypothesized direction for self-esteem, although it is true that such children possess less support in upsetting & distressing conditions of the family. Thus show more harmful & depressing psychological outcomes along with problems in their behavior.

Value of variance was also found to be low (0.08) shows that, very less proportion of variation, is experienced, for the outcome or dependent variable (behavioral problems of adolescents with single parents). It can be inferred from the insignificant results that the social support assessed by children of such families in crisis, may not be suitable as the selection of the peers or companions by them are involved in wrong doings.

Here, are some of the implications for school authorities including teachers for saving children from deterioration or worsening of their behavior which is affecting society directly.

5.2 EDUCATIONAL IMPLICATIONS

The present study is full of practical insights for parents, teachers, educators and psychologists so that they can support the children in their education to excel. Results markedly indicate that the children of single parent families need more of support in comparison to children of intact families, so as to get rid of problems they are suffering from.

Lower performance in academics with lower grades can lead children to drop their studies as compared to children of families where both parents are there to help them (after controlling all other socio-economic factors). Adolescents have both the cognitive and emotional capacity to learn, deepen & develop their skills hence help from the teachers in schools becomes critical.

Effect of involvement of school on children of single parent families

1. Schools can turn for correctives measures and can pay more emphasis to children deficiencies in academics (due to single parenting). Advanced formal programs for

enrollment of children can be developed for promotion of better grades and credits. In this way their attendance in school and completion of the tasks given can be improved. This would surely lessen the dropout rate. Such children in need will feel good while coming to school despite of the adverse circumstances in the family.

2. Support from the school (important part of society for a child) can improve a level of trust and relationship with the teachers & children can be improved. This way, problems in behavior can also be lessened.

3. Improved social skills & behavior of children at risk allows them adjust better in school environments.

4. Multi-disciplinary cooperative strategies can be adopted so that children can be saved from bullying behavior. This will stop them from being frustrated. In that way, to some extent aggression can be controlled. Relevant intervention programs can be blended in the curriculum to get rid of the problems faced by the educators in schools related to aggression in adolescents.

5. Appropriate follow up is required at times by the mental health professionals in school, if handling the problems of behavior in children is not possible to control. The main focus could be on the main reason of the suffering of child which further leads to problematic behavior. Information about child's behavior at multiple levels is required to be collected by medical health trainees.

Evidence could be compared from parent, teacher and self-report given by the child. This comparison is necessary as the children's functioning differs from one context to another viz. home versus school, to make the problems more clear & understandable. To control & reassess after providing suitable interventions multiple informants are required.

6. Understanding & affirmative relationships in the society are very important to make responsible decisions by the children, in their adolescent phase. Core curriculum based education related to the aspects of sexuality can be provided to students especially to girls, to make them aware of reproductive health in future life.

7. Comparison with children of intact families could be avoided as each child has unique abilities. Peer mediation programs can be considered so that children of intact families can help children of single parent family to create the harmonious environment in school.

8. Vocationally children at risk can be engrossed with constant guidance about their career for curtailing the negative emotions in children.

9. Children should be taught to de-emphasize the problems faced with single parents & maintaining healthy relationship with them, for sustaining with positive energy. Students can be made aware in school about different family structures. This will help them to learn about family diversity as part of the life.

10. Emphasis could be on discovering strengths and increasing hopefulness in children with single parents to improve their mental health.

11. Aid to the needed child could be timely managed.

12. Encouragement and appreciation also empowers thus helpful in nurturing esteem and confidence in children facing the critical situations (like behavioral challenges). By adopting this approach they can turn into less vulnerable and more responsible children.

School authorities, teachers & parents have the central role to provide an affable environment for the best possible psycho-social development of children in need. Approval or recognition from all educators can substitute the supervision by parents in single parent families.

That way, self-confidence in children increases. To identify with compassion & application of proper tuning & strategies with the suffering of children is an important duty of an educator. This kind of emotional & mental support (which children gain from the professionals of an institution) has always been significant. Therefore, role of school as a multi-component system is fundamental to handle children in need.

Effectual strategies could be adopted by school authorities for developing essential life skills for facing hard hitting situations. Reassurance for children by the educators is required as it is necessary to urge the adolescents to take the ownership & control of their behavior.

Concern for single parent families needs attention as circumstances to succeed in life for them are less conducive. If teachers are aware of remedial or counteractive measures which are feasible, and beneficial, practical helpful then problems can be solved easily. In this way, children will be less vulnerable for being involved in

inappropriate behaviors.

5.3 Implications for single parents

This study has implications for parents as well. They are required to be made literate about how to deal effectively with themselves as well as with the development of their children during misfortunes. Constructive measures could be adopted by parents, for the proper development of children grown in the sensitive environment. In single parent families source of stress cannot be changed, so the best strategy known, is adaptation to the situation after controlling it. Patterns followed in maintaining the relation in the family can be changed as a prevention strategy. Emotion focused authoritative parenting could be adopted in single parent families. Hope, impulse control, assertiveness, delayed gratification, stress tolerance & sense of self can be inculcated in children so that they can prepare themselves for future. Single parents could encourage their children on three basic dimensions i.e. wisdom, worth & proficiency. By application of these dimensions, problem in their children due to behavior will decrease, by itself. Parents and children should rely on honest friends, who act as helping hands so that they can recover early from the loss, by getting the emotional support which can surely make their life easier (Nieuwenhuis,2020).

5.4 Role of Society

Study has implications for government & non-government organizations to help single parent families financially so that they can feel stability thus can help their children to grow with adequate resources. Requirement is of the initiatives, taken by the government for starting the programs for the sustenance of single parent families, at national level. If single parenting is supported positively, then the negative impacts on children will be the least.

5.5 Suggestions for further research

1. A large sample of school students, from different states may be undertaken with the same set of variables.
2. Similar study may be undertaken on the adolescents of government schools.
3. Study may be undertaken on college going adolescents and youth to build understanding about the field.
4. Studies on variables e.g. frustration, social avoidance, alienation & aggression can be performed by the future researchers in relation to single parenting.

5. Experimental studies can be conducted for adolescents, to study the effect of training programs for building, self-esteem & resilience in adolescents.
6. More studies can be conducted on the gender basis of the single parent viz. effect on child's behavior in fatherless & motherless single parent homes.
7. Research can be conducted on the demographic variables like socio-economic status in relation to children of single parent family.
8. Future research should concentrate on the reason of single parenting and the effects on children. Research on the length of absence of the parent & the type of absence (permanent or temporary) requires attention with regard to the impact on children.

5.6 CONCLUSIONS

1. Results of present study underline the importance of encouraging attributes like resilience, self-esteem and social support to lessen the problems due to behavior exhibited by children with single parent. The scores obtained on Youth self-report are helpful in the detection of students having more problematic behavior, residing in single parent families.
2. Through this research attention is drawn more towards the joint or extended family system which has now been changed to nuclear family system. Children are not getting enough support from the elder members of the family particularly in critical periods. They look in for support from friends which may not be conducive for their betterment and can lead to problems in behavior.
3. Results of the study highlights that children of single parent family are different from intact families in relation to the variables chosen for the study i.e. resilience, self-esteem, social support. These differences are the underlying cause of their behavioral outcomes.
4. Attention is drawn towards an important issue keeping in mind the increased number of single parent families and the increase in behavioral problems of children with lot of unmet needs. Thus children suffer with more social difficulties.
5. A number of intervention packages based on the socio emotional needs of children can be developed on the basis of this research. It has the significance for advancement of society and adolescent development & well-being.

Results of the study convey that if appropriate social support is provided to these

families then negative effects of being single parent status will surely lose its concern. Children with a single parent have more problems, in behavior. Reflections are seen in adolescence along with later life. Therefore, all parents could stop their children indulging from experiencing traumatized proceedings e.g. conflicts in family leading to separation or divorce by avoiding solo parenting. A single parent cannot fulfill the needs of children alone and sometimes expose them to crisis, which further leads to dissatisfactions towards life with a changed behavior. Focus of the single parent could be on, how situation of these children can be made better rather on how negatively their family situation is affecting them. Most importantly the study recognizes the importance of children being raised with help of both parents. Attachment with both the parents provides feeling of fullness in a child's life hence they consider their life having worth & also valuable. Efforts could be taken by parents in strengthening their dual families.

This study will certainly impose significant challenges for all heads, teachers, leaders, officers & decision makers at local & national levels. If success is achieved, in fighting with these challenges children, adolescents, young people, families, communities & societies can be saved from long lasting effects of the behavioral problems (in both social & economic terms). Improving the resilience in the education system development of cognitive traits & planning purposively to help children to be more assertive in making own decisions should be the core principle of building better education in schools.

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Tamanna Rathee

Investigator

Preliminary Information of the respondent&Instructions

Name of the student:

School:

Class:

Gender: Male/Female

Permanent address:

Family: Single or Intact

Contact Number of Parent/s

Instructions:-

The scales provided to you measures resilience, social support, self-esteem and the problems in behavior. You have got alternatives to respond to each of the statements for all scales. You have to tick mark which suits you the most. Please do not leave any statement unanswered. The information given by you will be used in the research work only.

APPENDIX-A
CONNOR DAVIDSON RESILIENCE SCALE

<u>Item No.</u>	<u>Description</u>	<u>Response</u>				
		<u>Not true at all</u>	<u>Rarely true</u>	<u>Some-times true</u>	<u>Often true</u>	<u>True</u>
1.	Able to adapt to change.					
2.	Close and secure relationship.					
3	Sometimes fate or God can help.					
4.	Can deal with whatever comes.					
5	Past success gives confidence for new challenge.					
6.	See the humorous side of things.					
7.	Coping with stress strengthens.					
8.	Tend to bounce back after illness or hardship.					
9.	Things happen for a reason.					
10.	Best effort no matter what.					
11	You can achieve your goals.					
12.	When things look hopeless, I don't give up.					
13.	Know where to turn to for help					
14.	Under pressure, focus & think clearly.					
15.	Prefer to take the lead in problem.					

	solving					
16.	Not easily discouraged by failure.					
17.	Think of self as strong person.					
18.	Make unpopular or difficult decisions.					
19.	Can handle unpleasant feelings.					
20.	Have to act on a hunch.					
21.	Strong sense of purpose.					
22.	In control of your life.					
23.	I like challenges.					
24.	You work to attain your goals.					
25.	Pride in your achievements.					

Appendix-B

THE INTERPERSONAL SUPPORT EVALUATION LIST

<u>Item No.</u>	<u>Description</u>	<u>Response</u>			
		<u>Definitely false</u>	<u>Probably false</u>	<u>Probably true</u>	<u>True</u>
1.	If I wanted to go on a trip for a day (for example, to the country or mountains), I would have a hard time finding someone to go with me.				
2.	I feel that there is no one I can share my most private worries and fears with.				
3.	If I were sick, I could easily find someone to help me with my daily chores.				
4.	There is someone I can turn to for advice about handling problems with my family.				
5.	If I decided one afternoon that I would like to go to a movie that evening, I could easily find someone to go with me.				
6	When I need suggestions on how to deal with a personal problem, I know someone I can turn to.				
7	I don't often get invited to do things with others.				

8.	If I had to go out of town for a few weeks, it would be difficult to find someone who would look after my house or apartment (plants, pets, garden, etc.).				
9.	If I wanted to have lunch with someone, I could easily find someone to join me.				
10.	If I was stranded 10 miles from home, there is someone I could call who could come and get me.				
11.	If a family crisis arose, it would be difficult to find someone who could give me good advice about how to handle it.				
12.	If I needed some help in moving to a new house or apartment, I would have a hard time finding someone to help me.				

Appendix-C
ROSENBERG'S SELF-ESTEEM SCALE

<u>Item No.</u>	<u>Description</u>	<u>Response</u>			
		<u>Strongly agree</u>	<u>Agree</u>	<u>Strongly disagree</u>	<u>Disagree</u>
1.	I feel that I am a person of worth, at least on an equal plane with others.				
2.	I feel that I have a number of good qualities.				
3.	All in all, I am inclined to feel that I am a failure.				
4.	I am able to do things as well as most other people.				
5.	I feel I do not have much to be proud of.				
6.	I take a positive attitude toward myself.				
7.	On the whole, I am satisfied with myself.				
8.	I wish I could have more respect for myself.				
9.	I certainly feel useless at times.				
10.	At times I think I am no good at all.				

Appendix-D
YOUTH SELF-REPORT

ItemNo.	<u>Description</u>	<u>Not true</u>	<u>Sometimes true</u>	<u>Very true</u>
1.	I act too young for my age.			
2.	I drink alcohol without my parents approval.			
3.	I argue a lot.			
4.	I fail to finish thing that I start.			
5.	There is very little that I enjoy.			
6.	I like animals.			
7.	I brag.			
8.	I have trouble concentrating or paying attention.			
9.	I can't get my mind off certain thoughts.			
10.	I have trouble sitting still.			
11.	I am too dependent on adults.			
12.	I feel lonely.			
13.	I feel confused or in a fog.			
14.	I cry a lot.			
15.	I am pretty honest.			
16.	I am mean to others.			
17.	I day dream a lot.			
18.	I deliberately try to hurt or kill myself.			
19.	I try to get lot of attention.			
20.	I destroy my own things.			
21.	I destroy things belonging to others.			
22.	I disobey my parents.			
23.	I disobey at school.			
24.	I don't eat as well I should.			
25.	I don't get along with other kids.			

26.	I don't feel guilty of doing something I shouldn't.			
27.	I am jealous of others.			
28.	I break rules at home at school or elsewhere.			
29.	I am afraid of certain animals, situations or places, other than school.			
30.	I am afraid of going to school.			
31.	I am afraid of I might think or do something bad.			
32.	I feel that I have to be perfect.			
33.	I feel that no one loves me.			
34.	I feel that others are out to get me.			
35.	I feel worth less or inferior.			
36.	I accidently get hurt a lot.			
37.	I get in many fights.			
38.	I get teased a lot.			
39.	I hang along with kids who get in trouble.			
40.	I hear sounds or voices that other people think aren't there.			
41.	I act without stopping to think.			
42.	I would rather be alone than others.			
43.	I lie or cheat.			
44.	I bite my finger nails.			
45.	I am nervous or tense.			
46.	Parts of my body make nervous movements.			
47.	I have nightmares.			
48.	I am not liked by other kids.			
49.	I can do certain things better than most kids.			
50.	I am too fearful or anxious.			
51.	I feel dizzy or lightheaded.			
52.	I feel too guilty.			
53.	I eat too much.			
54.	I feel overtired without good reason.			

55.	I am overweight.			
56.	I suffer from physical problems without knowing medical cause.			
57.	I physically attack people.			
58.	I pick my skin or other parts of body.			
59.	I can be pretty friendly.			
60.	I like to try new things.			
61.	My school work is poor.			
62.	I am poorly coordinated or clumsy.			
63.	I would rather be with older kids than my own age.			
64.	I would rather be with younger kids than my own age.			
65.	I refuse to talk.			
66.	I refuse certain things over and over.			
67.	I run away from home.			
68.	I scream a lot.			
69.	I am secretive or keep things to myself.			
70.	I see things that other people think aren't there.			
71.	I am self conscious or easily embarrassed.			
72.	I set fires.			
73.	I can work well with my hands.			
74.	I show off or clown.			
75.	I am too shy or timid.			
76.	I sleep less than most kids.			
77.	I sleep more than most kids day or night.			
78.	I am inattentive or easily distracted.			
79.	I have a speech problem.			
80.	I stand up for my rights.			
81.	I steal at home.			
82.	I steal from places other than home.			
83.	I store up things I don't need.			
84.	I do things other people think are strange.			

85.	I have thoughts that what other people would think are strange.			
86.	I am stubborn.			
87.	My mood and feelings change suddenly.			
88.	I enjoy being with people.			
89.	I am suspicious.			
90.	I swear or use dirty language.			
91.	I think of killing myself.			
92.	I like to make others laugh.			
93.	I talk too much.			
94.	I tease others a lot.			
95.	I have a hot temper.			
96.	I think about sex too much.			
97.	I threaten to hurt people.			
98.	I like to help others.			
99.	I smoke , chew or sniff tobacco.			
100.	I have trouble sleeping.			
101.	I cut classes or skip school.			
102.	I don't have much energy.			
103.	I am unhappy sad or depressed.			
104.	I am louder than other kids.			
105.	I use drugs for non medical purposes.			
106.	I like to be fair to others.			
107.	I enjoy a good joke.			
108.	I like to take life easy.			
109.	I like to help other people when I can.			
110.	I wish I were of opposite sex.			
111.	I keep from getting involved with others.			
112.	I worry a lot.			

Appendix-E

LIST OF EXPERTS

1. Dr. Sangeeta, Professor, Department of Education, K.U., Kurukshetra.
2. Dr. Manish, H.O.D., Psychology Department, L.P.U., Phagwara.
3. Dr. Pradeep, ex. H.O.D, Psychology Department, L.P.U., Phagwara.
4. Dr. Hariom, ex. Associate Professor, Psychology Department, L.P.U., Phagwara.
5. Mrs. Vandana Vohra, Counselor, St. Theresa's Convent School, Karnal.
6. Mr. Hitesh Gupta, Computer Teacher, St. Theresa's Convent School, Karnal.
7. Miss Fiza, Mathematics teacher, St. Theresa's Convent School, Karnal.

LIST OF PUBLICATIONS

S.No.	Title of Research paper & Names of Authors	Name of Journal or Conference Attended	Publication Date	ISSN, Vol. & Issue No.
1.	Relationship of Resilience, Self-esteem & Social Support on Behavioral Problems of Adolescents of High School. Paper presented by Tamanna Rathee	Paper presented in 14 th International Conference at, Shivalik College of Dehradun, India.	31 Dec, 2018 II nd Session. (Evening)	
2.	Effect of Resilience and Self-esteem on Behavioral problems of Adolescents of Single Parent Authors: Tamanna Rathee & Dr.Zahoor Ahmad Lone	International Journal of Social Sciences. UGC approved Journal No.48887.	05,May,2019	ISSN No. (2249-2496) Vol. 09 Issue-05

3.	<p>Raising Resilient Adolescents.</p> <p>Authors: Tamanna Rathee & Dr. Zahoor Ahmad Lone</p>	<p>Shodh Sarita, Journal of Arts, Humanities & Social Sciences UGC Approved Care Listed, Journal.</p>	<p>28, December, 2020.</p>	<p>ISSN No. (2348- 2397) Vol. 07 Issue-28</p>
4.	<p>Oral presentation on Research paper- Raising Resilient Adolescents.</p> <p>Paper presented by Tamanna Rathee</p>	<p>In National e-Conference on Education & Development organized by School of Social Sciences Lovely Professional University, Punjab.</p>	<p>26, September, 2020</p>	
5.	<p>Behavioral Problems in Adolescents with Single Parent.</p> <p>Authors: Dr. Zahoor Ahmad Lone & Tamanna Rathee</p>	<p>In Contemporary Issues of Social Science Vol.-1 Section II Perspectives of Social Environment.</p>	<p>2020</p>	<p>ISBN-978- 93 5274-655-2 Pages 232-236</p>

6.	<p>Relationship of Resilience, Self-esteem and Social Support on Behavioral Problems of Adolescents of High School</p> <p>Authors: Tamanna Rathee & Dr. Zahoor Ahmad Lone</p>	<p>Towards Excellence</p> <p>UGC Care Listed Journal</p>	<p>December, 2021</p>	<p>ISSN 0974-035X</p> <p>Vol-13</p> <p>Issue-4</p>
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