Fostering Positive Identity for Children in Orphanages in South-East, Nigeria: The Caregiving Factor

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Abstract

Children's identity is a crucial aspect of their development, and its process of development is dynamic. It is rooted in their various activities and everyday relationships, at home, in the community, and at school. Because in Nigeria, the orphanage is the core care option available for orphans and vulnerable children, there is meager information on the caregiving practices in orphanages in Nigeria with regards to developing children's identity. This study investigated caregiving practices and the extent to which caregiving practices and physical environment meet up with standards that promote its development among children in orphanages in South-East, Nigeria. The descriptive survey design was used to collect data from 77 caregivers of 287 children (0-6years) using two instruments namely; Orphanage Caregiving Activities Questionnaire (OCAQ) and the Orphanage Physical Environment Observation Checklist (OPEOC). The study has three research questions, and we are using frequency counts, percentages, mean, and standard deviation to answer them. The result showed that caregivers, to a large extent, were involved in caregiving practices that do not promote positive identity in children in the orphanages. Also, the physical environments of the orphanages were in the same category. However, to a moderate extent, water was accessible to children for drinking and hand washing, the surroundings has shades, and caregivers can supervise all children by sight and sound. These physical environments items at a moderate extent level do not meet up to the standards that promote children identity. The study recommends that government and organizations interested in children's holistic development should organize regular in-service training/workshop for orphanage caregivers and operators on the importance of children identity and how they can develop a positive identification in children under their care.

Keywords: *Positive Identity, Caregiving practices, Physical environments, Orphanages, Orphans, and Vulnerable Children*

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Background to the Study

One of the essential aspects of healthy development in children is their sense of identity. A sense of 'who a child is' is developed from birth. The child's characteristics, his/her behavior, and understanding of himself/herself, his/her family and others form who he/she is (National Council for Curriculum and Assessment (NCCA) 2009).

> As children develop an appreciation of their inner mental world, they think more intently about themselves. During early childhood, children begin to construct a self-concept which is the set of attributes, abilities, attitudes, and values that an individual believes defines who he or she is (Berk, 2003:444).

Our roles, attributes, behaviors, and associations are aspects of our sense of self we consider most important about ourselves. (Ylvisaker, 2006). Gender, race, and equal educational opportunities, among other things, help to develop who we are as individuals. Although individuals differ in many ways: language diversity, cultural diversity, gender diversity, religious diversity, and economic diversity (Selmi, Gallagher, & Mora-Flores, 2015), this diversity work together to form one's sense of self.

Children's interactions with the family members and caregivers as girls or boys result in the formation of the initial sense of self. For instance, infants use crying, smiling, cooing, or moving their bodies as signals to let their caregivers know their needs. The way caregivers respond to these signals convey information such as, "You are safe, loved and valued" or "You are unimportant," to the infants. Consequently, these messages influence their future behaviors and attitudes. The infant becomes secure, confident and happy when family members and caregivers are always responsive to his/her cues in a warm and caring manner, but the infant may become fearful and depressed when he/she receives consistently negative or mixed messages (Marshall, 1989). The responsive process in children is ongoing and occurs instantaneously during interactions, from infancy to preschool period. It affects the way preschoolers expect others to be with and treat them. During the preschool period, children overall mental image of themselves is limited to their names, physical attributes, ages, sexes, possessions, and abilities. They are just beginning to understand their unique personal characteristics and their place in the world. (Berk, 2013). A Preschool child does not comprehend that a person may be both good and bad at the same time; he sees him/herself and others as entirely good or bad.

According to Virtual Lab School (2017) and National Council for Curriculum and Assessment (NCCA) (2009), cultural background, experiences such as racial discrimination, gender disparity, unequal educational opportunities; and most especially, relationships with adults and peers have influenced a child's self- concept development. Children's significant relationships begin with their family members, then teachers and peers, and influence their sense of self, most. Early years experiences lay the foundation for an individual's sense of self and can be enduring, once; perception is established (Marsh, Ellis & Craven, 2002). If the totality of a child's experiences causes him/her to view her or himself as decent or capable, the child will likely have confidence throughout his or her life. However, a child may have a difficult time seeing herself or himself as anything else later on in life, if he/she is consistently made to feel awful or incompetent early in life (Virtual Lab School, 2017).

Besides, there is the assertion that in the development of children's self-esteem and confidence, an affirmative sense of identity is essential. It enables children to feel a sense of both individuality and belonging in their social world. They are more likely to be optimistic, do well in school, more open to people from other backgrounds, and have a strong and positive feeling about their parents and grandparents. They feel safe and confident about themselves and their roots (Tsang, Hui, & Lawl, 2012). Therefore the study sought to investigate fostering positive identity for children in orphanages in South-East, Nigeria: the caregiving factor.

Statement of the Problem

Nigeria has one of the highest records of OVC in the world (OVC-CARE Project, 2009), and this figure keeps on increasing as due to terrorist attacks, ethnic and religious disputes HIV/AIDS, poverty, breakdown in a traditional family system, etc. The orphanage has become one of the foremost care options available to OVC. Consequently, many of these children are in the orphanages. However, institutional care has been shown by research to have harmful effects on children, and if nothing is done to provide quality care for these children, their development and that of the society at large will be severely affected. The global goal of a peaceful world without violence will be farfetched. The management of these institutions in a professional manner still poses worrying challenges in Nigeria. Institutional care in Nigeria is to operate on the best interests of the child among many other guiding principles. Significant among these is caring for the children in an environment that promote their sense of identity. But meager information is known about caregiving practices that enhance children's distinctiveness in the orphanages; hence, the need for this study. This paper, therefore, explored the orphanage caregiving environment; which comprises the caregiving practices and the physical environment; in South-East, Nigeria.

Purpose of the Study

This study, therefore, seeks to;
1. Examine caregiving practices of orphanage caregivers in South-East Nigeria
2. Ascertain to what extent caregiving practices of the orphanages in South-East, Nigeria meet up with the standard that develops children's identity?
3. Assess the extent to which the physical environment of the orphanages in South-East, Nigeria, meets up with the standard that builds children's identity.

Research Questions

The following research questions guide the study:
1. Which caregiving practices in orphanages in South-East Nigeria can build children's identity
2. To what extent do the caregiving practices of orphanages in South-East, Nigeria meet up with the standards that promote children's identity?
3. To what extent do the physical environments of orphanages in South-East, Nigeria meet up with the requirements that develop children's identity?

Literature Review

The development of identity is in eight-stage progression over the human life span. They include; infancy, early childhood, childhood, puberty, adolescence, early adulthood, middle adulthood, and late adulthood (1902-1994 cited in Oswalt, 1999). Each stage is evident in a psychosocial crisis that involves challenging a vital question and is described by alternative traits that are potential outcomes from each issue. Resolving a crisis in favor of a healthy alternative enhances development. According to Erik Erikson (Tsang, Hui & Law1, 2012), identity is organized, is learned, and is dynamic, and it has emotional consequences for an individual when assessed.

A vital foundation for children's social and emotional development is identity. There is a relationship between identity, feelings of security, and self-worth. For a group it can come from many ways; membership to a community-centered on religion, political or social values, frequently used language, ethnicity, or national origin, based in part on the shared experience of being targets of racism and whatever the child's family considers essential in defining who is "like us." For children who are in the category that others value less, creating a firm and positive group identity is very important, it provides them the resiliency and moral support for challenging the biases they may face in that bigger context that devalues them. Positive self-identification may, in some circumstances lead to negative labeling of those belonging to other groups. (Cooper and Collins, 2009 cited in V Cooper, 2014),

Developing personal identity is a dynamic process which includes imitation and identification in shared activities, including imaginative, role-play (Göncü, cited in Tsang, Hui &Law1, 2012). The daily multiple activities children engage in, and their interaction in everyday settings with parents, teachers, peers, and others at home, in the community and at preschool is crucial in this development. Through these interactions, the child best describes identity as constructed, co-constructed, and reconstructed. Other vital resources for building children's sense of who they includes; non-verbal communication, dialogue, text, and electronic media. Also seven experiences, acceptance, and respect, success with meaningful tasks, the association of positive role models, honest feedback, genuinely challenging and significant assignments, opportunities for useful peer interaction and coping with defeats contribute to the development of a positive and suitable sense of self (Ylvisaker, 2006). Another major resource for personal identity is the everyday conflicts children witness – and contribute to even as babies and toddlers (Dunn, 2004 cited in Jelic, 2014).

Children are social actors when they are born, with personal agency, with an awareness of 'self as subject,' (or 'I'). Gradually, the sense of 'self as object' (or 'me') which is changing and reflective emerge (Miell, 1990 cited in Tsang, Hui & Lawl, 2012). Identity encompasses both 'I' and 'me.' According to Bame Nsamenang, Director of the Human Development Resource Centre in Bamenda, Cameroon:

> *Identity is an agentic core of personality by which humans learn to increasingly differentiate and master themselves and the world. It gives meaning and purpose to life and perspective to human efforts. Through it, individuals come to situate themselves, for instance, as belonging to a distinct 'race', place, ethnicity, nationality, gender, or culture.*

Kindalini Early Childhood Learning Centres (2017) opined that children develop well-informed and confident self-identities when they;

1. Feel recognized and appreciated for who they are
2. Explore different characters and points of view in dramatic play
3. Share parts of their culture with the other children and educators
4. Use their home language to build meaning
5. Develop durable foundations in both the culture and language/s of their family and the larger community without conceding their cultural identities
6. Exploit their social and cultural heritage through an encounter with older people and community members
7. Reach out and connect for comfort, support, and friendship
8. Rejoice and share their contributions and successes with others

According to Tsang, Hui & Law1 (2012), identity refers to how a person answers the question "Who am I?" A sense of identity is vital because it relates to mental health, wellbeing, self-esteem, and success in life. How one defines himself - his image- is influenced by a natural human tendency to use labels. Concerning children in orphanages, growing up as members of excluded or dominated groups may have difficulty achieving a positive sense of self. Adults must help them develop and maintain positive identity by giving positive feedback regularly and by fostering resilience, using the right strategies. (Tsang, Hui & Lawl, 2012). This will promote healthy development in them, helping to reduce crime and problems associated with institutionalization.

The way children view 'self' enter into interpersonal encounters, and engage with the world is determined by early learning within the family. Children come to associate the human face, voice, and touch with particular skin color or tone if they spend their early years in more homogeneous families and communities. Very young children react to racial differences when they first encounter them. By age three, children can put their reactions to skin color into words (Goodman, 1964 cited in Pulido-Tobiassen & Gonzalez-Mena, 1999). They notice their skin color and can know the difference between theirs and that of other family members or friends. Preschool children express curiosity about all kinds of variances. They are starting to classify people, just as they learn about differences between colors and shapes. Three and four years old children talk about physical contrasts between themselves and others, between boys and girls and among skin colors, hair textures, and eye shapes. The children also become mindful of differences in language, in family make-up, and in what happens in each others' homes. As the children are getting to early grades, they have begun understanding racial differences consciously (Goodman, 1964 cited in Pulido-Tobiassen & Gonzalez-Mena, 1999)

We achieve these processes within many different family forms. But a safe and stable context for development is more important than the precise structure of any family. Usually, parents (and other caregivers) are the core medium through which young children can achieve their rights (United Nations Committee on the Rights of the Child, 2005, Paragraph 16). The best way to support the positive personal development of young children growing up in adverse circumstances is to improve the identity and stability of their families. As children move into

group care and education, further sensitive support is needed to enable them to construct new identities which do not conflict with the family and cultural identity they have acquired at home. When we give children messages of respect, love, approval, and encouragement, it helps them to develop a positive sense of who they are and a feeling that they have a significant contribution to make wherever they are (The Simple Life, 2017). The orphanage, which is a form of institutional care in Nigeria is one of the prominent care options available for vulnerable abandoned, orphaned children with different ethnic, cultural, and economic backgrounds within the country. These children are generally known as orphans and vulnerable children (OVC). An orphan in Nigeria is as a child (0-17 years) who has lost one or both parents. A child is prone if he is exposed to abuse or deprivation of basic needs, care and protection due to the circumstances of his birth or immediate environment and thus disadvantaged relative to his or her peers (FMWASD 2008). A child who has inadequate access to education, health, and other social support, has a chronically ill parent, lives in a household with terminally or chronically sick parent(s) or caregiver(s), lives outside of family care (lives with extended family, in institution, or on the street), or is infected with HIV is termed vulnerable (FMWASD, 2006). Anne Kielland and the World Bank's OVC (2004) cited in OVC-CARE Project, (2009) identified fourteen different categories of OVC in Nigeria. In the study, the youngest OVC groups are found among orphans in:

1. Households headed by elderly caretakers or children,
2. Households where the remaining parent or caretaker is ill, living with a disability or traumatized,
3. Families where the child is "unwanted" (e.g., by a step-parent) and therefore neglected, abused or exploited,
4. Streets, institutions and extreme work place (but this last group is relatively small for this young age group) (OVC-CARE Project, 2009)

Although we can find disparity in care among institutions (orphanages), the St. Petersburg—USA Orphanage Research Team, (2008) reported the general characteristics of institutional care as following:

1. Group sizes tend to be large (typically 9–16 children per ward, although in extreme cases the number may approach 70).
2. The number of children per caregiver is large (approximately 8:1 to 31:1, but a few institutions have lesser children per caregiver).
3. Groups tend to be homogeneous concerning ages and disability status. Children are periodically "graduated" from one age group to another, perhaps as many as two or three times in the first two or three years of life.
4. Caregivers for any single child tend to change regularly due to high staff turnover; caregivers may work long shifts (e.g., 24 hours) and be off three days; we do not assign them consistently to the same group, caregivers may get up to two months vacation. The result is that a child may see anywhere from 50 to 100 different caregivers in the first 19 months of life.
5. Other adults tend to come and go in children's lives, including medical and behavioral specialists, prospective adoptive parents, and volunteers who may visit for only a week or a few months.

6. Caregivers typically receive little training, and the training they do receive is more focused on health issues than on social interaction. They spend the vast majority of their hours feeding, changing, bathing, cleaning children and the room, and preparing food rather than interacting with the children. Caregivers are invariably female, so children rarely see men.
7. When caregivers perform their caregiving duties, it is likely to be in a business-like manner with little warmth, sensitivity, or responsiveness to individual children's emotional needs or exploratory initiatives. contrariwise
8. Children in orphanages are vulnerable, besides institutionalization hurts children, therefore providing quality childcare is crucial to promote their development.

Some factors are essential in optimal early child care. These include; a safe environment, proper nutrition, and medical care, and most notably, the steady presence of stable, caring adults (Center on the Developing Child 2010; Shonkoff, 2010). Contrariwise, Orphans, and Vulnerable Children (OVC), often face chronically unpleasant conditions such as inadequate nutrition, unstable relationships with guardians or caregivers, unsafe environments, and lack of opportunities in learn and socialize. Challenging situations and lack of care and nourishment can result to physiological damages—"toxic stress," in very young children, with potentially lifelong consequences both for children and communities. Toxic stress affects the entire organism, including the development of the body's stress response systems, the architecture of the developing brain, the cardiovascular system, and the immune system (National Scientific Council on the Developing Child, 2006). Over time, the developmental processes necessary for positive adaptations in learning, behavior, and health are likely affected by the risk factors. OVC are particularly at risk during early childhood (Garcia, Pence, and Evans, 2008, cited in USAID, 2011).

Caregiving is a chief determinant of a child's sense of identity; caregiving behaviors are mediators between social, health, and caregiver attributes and the child's survival, growth, and development. Early learning takes place in the arms of the parent or caretaker, and the quality of this main learning has a core influence on all subsequent advancements in life – be they emotional, social or intellectual, (Rygaard, 2008). To be shielded from the most threatening features of their environment, children who live in hard conditions are dependent on the nurture of primary caregivers. It is the most effective help children can get to compensate for other deficiencies (Engle & Lhotka, 1999).

The Physical environment is another feature of quality childcare (Wortham, 2006 in Barbour, Barbour, and Scully, 2014, Odolowu, 2011). It helps to shape the behavior and development of children. The quality of the environment determines the level of involvement of the children and the interaction between adults and children. It comprises the environment inside and outside an ECE facility (OECD, 2010b cited in UNICEF, 2011). Research suggests that three specific physical environment design features are most significant in early learning: space fostering exploration, independence, and development (a child's sense of self and willingness to play), spatial quality (through space, color, light, noise, and materials), and integration of outdoors and the indoor environment. Early learning centers should be 'homely,' inviting,

bright and linked to the outdoors, with participants describing how space "welcomes the child, makes them feel safe and encourages learning" (Berris, & Miller, 2011). However, Harkness (2011) opined that crucial safety factors to consider are the group size and adequate supervision of the children.

Knowing the importance of developing a good sense of identity in young children and the role of caregivers in the development of OVC, there is a need to explore the caregiving practices and physical environment of children in the orphanages. Also, to ascertain if they promote children identity in the orphanages, thereby reducing the adverse effects of institutionalization on children and reducing crimes in the society.

Methodology

The study adopts a descriptive survey research design. The population comprises all government registered orphanages in South-East, Nigeria. The sample size includes fifteen (15) orphanages for young children, in Abia, Anambra, and Imo States. These are selected through multistage sampling (involving, simple random sampling, stratified). Two research instruments are used for the study; the Orphanage Caregiving Activities Questionnaire (OCAQ) and the Orphanage Physical Environment Observation Checklist (OPEOC).

The Orphanage Caregiving Activities Questionnaire (OCAQ), a two-part questionnaire; was developed and validated by the researchers (reliability value of 0.861). The first part of OCAQ (section A) which contains 10 items is made up of general information, it elicits information from the respondent on the ownership, location, registration status of the orphanages, number of children (0-6yrs) under their care, ages and years of work experience of caregivers and reason why caregivers decided to work in the orphanage. Section B seeks information on caregiving activities in the orphanages. It contains 22 items of which caregivers responses are rated on a 4 point scale- Never, Sometimes, Most of the times and Always).

The Orphanage Physical Environment Observation Checklist (OPEOC) consists of twenty-two (22) items that need to be found in the orphanage physical environment of which 14 of them are for indoor and 8 for the outdoor physical environment. The responses to the items are coded as No, to a little extent, to moderate, large, and a very large extent. The researchers developed OPEOC, and its validity established by experts in education, psychology, and statistics in terms of the appropriateness and adequacy of the instruments with regards to research questions of the study. The reliability values of the instruments are determined using inter-raters reliability and Pearson Product Moment Correlation coefficient is employed as the statistical tool, giving a value of 0.81. The researchers personally administer the research instrument. Frequency counts, percentages, mean, and standard deviation is used for data analysis.

Results
Research Question One: Which caregiving practices in orphanages in South-East Nigeria can build children's identity

Table 1: Caregiving Practices

S/N	Statement of Items	Mean	SD	Decision
1	I seek medical attention when a child is sick	3.48	.68	LGE
2	A child is given food when he is hungry	3.75	.43	VLGE
3	I look into the child's (children) eyes and talk to him while feeding him	2.87	.88	LGE
4	I take care of different children from time to time	1.18	.51	LE
5	I praise the child when he does something good	2.79	.78	LGE
6	I scold the child when he does something wrong	2.05	.72	ME
7	When the child (children) is sad or have problems, I allow him to solve his problems by himself	3.10	.62	LGE
8	I make the child to stay on his own when he clings on me so that I can have time to do other things	3.04	.50	LGE
9	When a child is not sleeping, I make him lie down or quietly sit down in one place	2.60	.77	LGE
10	I use cartoons and television programs to keep the child busy when he is awake.	2.64	.86	LGE
11	The child is kept indoors and not allowed to play outside	3.14	.60	LGE
12	I plan the child's activities and direct him to do exactly what I want him to do.	2.09	.88	ME
13	I organize play and communication activities for the child and play with him	1.81	.89	ME
14	I read books and look at pictures with the child	1.83	.80	ME
15	I tell stories to the child	2.12	.65	ME
16	I sing songs to or with the child, including lullabies	2.19	.49	ME
17	I name, count or draw things with the child	2.05	.63	ME
18	I ask and answer the child 's questions	2.36	.71	ME
19	The child is allowed to use household items and objects found outside to play	1.44	.85	LE
20	The child toys are locked up in a safe place so that he does not spoil them	2.84	.93	LGE
21	The home environment is kept clean and safe for the child to live and play	3.90	.42	VLGE
22	I take the child to activities/programs outside the home	1.82	.84	ME
	Weighted average	2.50		LGE

LE=To Little Extent: 0.50-1.49   ME=To Moderate Extent: 1.50-2.49
LGE=To Large Extent: 2.50-3.49   VLGE= To Very Great Extent: 3.50 and above

The result of the study (table 1) shows the following as caregiving practices that can develop positive identities of children in the orphanages; seeking medical attention when a child is sick; feeding a child when he/she is hungry; looking into the child's (children) eyes and talking to him/her while feeding him/her, praising the child when he/she does something good, organizing play and communication activities for the child and playing with him/her, reading books and looking at pictures with the child, telling stories to the child, singing songs to or with the child, including lullabies, naming, counting or drawing things with the child, asking and answering the child's questions, allowing children to use household items, and objects found outside to play, keeping the home environment clean and safe for the child to live and play and taking the child to activities/programs outside the home.

The result (table 1) also shows caregiving practices that hinder the development of a positive identity of children in the orphanages. These include; taking care of different children from time to time, scolding the child when he does something wrong, allowing the child to solve his/her problems by himself/herself when the child is sad or have issues, making the child stay on his/her own when he/she clings on me (caregiver) so that I (caregiver) can have time to do other things; When a child is not sleeping, I make him lie down or quietly sit down in one place, using cartoons and television programs to keep the child busy when he/she is awake, keeping the child indoors and not allowing him/her to play outside, planning the child's activities and directing him to do exactly what I (caregiver) want him/her to do and locking up the child's toys in a safe place so that he/she does not spoil them.

Research Question Two: To what extent do the caregiving practices of orphanages in South-East, Nigeria, meet up with the standards that promote children's identity?

The result of the study (table 1.0) shows that positive caregiving practices in the areas of provision of food ($x = 3.75$, SD=0.43) and hygiene ($x = 3.9$, SD=0.42), to very large extent meet up with the standard that develop positive identity, while the areas of praising the children ($x = 2.79$, SD=0.78), and ensuring their good health ($x = 3.48$, SD=0.68) are at the level of large extent. However, negative caregiving practices that do not develop children identity to a large extent are practiced by caregivers. They include: I scold the child when he does something wrong ($x = 2.05$, SD=0.72), When the child (children) is sad or have problems, I allow him to solve his problems by himself ($x = 3.10$, SD=0.62), I make the child to stay on his own when he clings on me so that I can have time to do other things ($x = 3.04$, SD= 0.50), When the child is not sleeping, I make him lie down or quietly sit down in one place ($x = 2.60$, SD= 0.77), I use cartoons and television programs to keep the child busy when he is awake ($x = 2.64$, SD =0.86), The child is kept indoors and not allowed to play outside ($x = 3.14$, SD=0.60), I plan the child's activities and direct him to do exactly what I want him to do ($x = 2.09$, SD=0.88) and The child toys are locked up in a safe place so that he does not spoil them ($x = 2.84$, SD=0.93).

Furthermore, caregivers moderately, and in some cases to a little extent, engage in positive activities that promote child identity through early learning, use of play and communication activities in childcare and provision of play materials. The practices are; I organize play and communication activities for the child and play with him ($x = 1.81$, SD=0.89), I read books and look at pictures with the child ($x = 1.83$, SD=0.80), I tell stories to child ($x = 2.12$, SD=0.65), I sing songs to or with the child, including lullabies ($x = 2.19$, SD=0.49), I name, count or draw things with the child ($x = 2.05$, SD= 0.63), I ask and answer the child's questions ($x = 2.36$, SD=0.71), The Child is allowed to use household \items and objects found outside to play ($x = 1.44$, SD=0.85), I take the child to activities/programs outside the home ($x = 1.82$, SD= 0.84). These are below acceptable standards.

Research Question Three: To what extent do the physical environments of orphanages in South- East, Nigeria, meet up with the requirements that develop children's identity?

Table 2: Responses on Orphanage Physical Environments

		F(%) NO	F(%) TLE	F(% TME)	F(%) LGE	F(%) VLGE	Mean	SD	Decision
	INDOOR								
1	The room has enough space for children	0(0)	0(0)	6(40)	6(40)	3(20)	3.80	0.78	LGE
2	House is properly ventilated and airy	0(0)	1(7)	3(20)	9(60)	2(13)	3.80	0.78	LGE
3	The interior of the house is not dark	0(0)	1(7)	3(20)	9(60)	2(12)	3.80	0.78	LGE
4	Room not overcrowded with furniture	0(0)	0(0)	7(47)	7(47)	1(7)	3.60	0.63	LGE
5	Child-size chairs, tables, cots, beddings, etc. available	0(0)	0(0)	5(33)	8(53)	2(13)	3.80	0.68	LGE
6	House is clean	0(0)	0(0)	3(20)	10(67)	2(13)	3.93	0.59	LGE
7	Toilet is clean	0(0)	0(0)	5(33)	10(67)	0(0)	3.67	0.49	LGE
8	Water accessible to children for drinking and hand washing	0(0)	1(7)	7(47)	6(40)	1(7)	3.47	0.74	ME
9	Electric wires and outlets covered	0(0)	0(0)	1(7)	13(87)	1(7)	4.00	0.38	LGE
10	Sharp edges in the room covered	0(0)	0(0)	1(7)	13(87)	1(7)	4.00	0.38	LGE
11	Cleaning/toxic fluid and medicine out of reach of children	0(0)	0(0)	1(7)	13(87)	1(7)	4.00	0.38	LGE
12	Glass jars/other breakable items/sharp objects put away	0(0)	0(0)	2(13)	12(80)	1(7)	3.93	0.46	LGE
13	Waste bins available and accessible for children to dispose of the waste	0(0)	1(7)	4(27)	8(53)	2(13)	3.73	0.8	LGE
14	The cooking area situated away from the children	0(0)	0(0)	1(7)	3(20)	11(73)	4.67	0.61	VLGE
	Weighted Average for indoor =		3.87	0.61	LGE				
	OUTDOOR								
15	Outdoor play space available with enough space for climbing, running, and swings	1(7)	2(13)	3(20)	4(27)	5(33)	3.67	1.29	LGE
16	Environment has shades	1(7)	4(27)	6(40)	3(20)	1(7)	2.93	1.03	ME
17	The environment not littered with debris	0(0)	2(13)	4(27)	7(47)	2(13)	3.6	0.91	LGE
18	Play space not muddy	0(0)	0(0)	5(33)	9(60)	1(7)	3.73	0.59	LGE
19	Play areas have fences or natural barriers that prevent access to animals, unauthorized people, and other hazards.	0(0)	0(0)	0(0)	4(27)	11(73)	4.73	0.46	VLGE
20	The caregiver can supervise all children by sight and sound	0(0)	2(13)	7(47)	6(40)	0(0)	3.27	0.7	ME
21	First Aid kits available	0(0)	0(0)	2(13)	6(40)	7(47)	4.33	0.72	LGE
22	Fire Extinguisher and other safety equipment available	1(7)	0(0)	2(13)	10(67)	2(13)	3.80	0.94	LGE
	Weighted Average for Outdoor =		3.76					0.83	LGE
	Weighted Average for physical Environment =		3.82					0.72	LGE

No = 0.50-1.49 LE = To Little Extent: 1.50-2.49 ME = To Moderate Extent: 2.50-3.49 LGE = To Large Extent: 3.50-4.49 VLGE = To Very Great Extent: 4.50 and above

Table 2 reveals the extent to which the orphanage physical environments meet up with the standards that develop children's identity. The physical environments record a weighted average of 3.82 (to a large extent). The indoor (3.87), and outdoor (3.82) environments to a large extent meet with acceptable standards; all the items in the indoor environment are provided to a large extent except item no 8 on water accessible to children for drinking and hand washing (⎕ =3.47; SD=0.74) which was to a moderate extent while the cooking area situated away from the children (⎕ = 4.67; SD=0.61) revealed very large extent.

items on the outdoor physical environment are also provided in large extent, except items no. 16 (Environment has shades) with ⎕ =2.93; SD= 1.03 and no. 20, (Caregiver can supervise all children by sight and sound) with ⎕ = 3.27; SD=0.7) which are at the moderate extent category. Item no. 19 on play areas having fences or natural barriers that prevent access to animals, unauthorized people, and other hazards revealed ⎕ = 4.73; SD = 0.46) showing it came under 'to a very large extent' category.

Discussion of Findings

Caregivers were involved in caregiving practices, of which some can develop children positive identity while others hinder positive identity development in children. To a large extent, their caregiving practices in the areas of provision of food, hygiene, healthcare, and praising children when they do right can develop positive identity of children. But, unfortunately, they played down on psycho-social stimulation; inculcating in the child the spirit of inquiry and creativity through the exploration of nature, the environment, art, music and playing with toys, etc. and protection and participation. This report is in line with The St. Petersburg—USA Orphanage Research Team (2008) general description of institutional care. The caregivers seem not to understand the importance of play, and psycho-social stimulation in developing young children's identity, as far as they are concerned, the child should look healthy and the environment neat, which is not a holistic approach to childcare. The negative and substandard caregiving practices in the orphanages will hinder us from producing the child of our dream-the child that is developed holistically, who has a positive identity.

The result of the study also revealed that generally, the physical environments of the orphanages in South-East, Nigeria, to a large extent meet up with standards that promote positive child identity in terms of facilities, learning, and safety. It concurred with Oduolowu (2004) which reported the physical environments of childcare centers as appropriate, with essential features/ items like space, furniture, and learning materials available to a large extent. The result is contrary to the report of the USA Orphanage Research Team, which stated that the orphanage environment is typically deficient, (The St. Petersburg - USA Orphanage Research Team, 2005). However, in considering individual items, items no. 8, 16, and 20 were provided at the moderate extent category. These include water accessible to children for drinking and hand-washing, Environment having shades and caregiver can supervising all children by sight and sound. These items not being available in orphanages to a large extent have great implications for children's optimal development. Children need to have free access to drinking water and water for washing their hands regularly, which makes them stay healthy. Also, the outdoor environment where children play needs to have shades to protect them from the intense heat of the sun and the caregivers at all times need to be available when the children are playing, to monitor what they are doing, play with them and help the children out when they encounter problems while playing. The physical environment should be conducive for the children to play, as this promotes their positive identity and all-round development.

Conclusion

Positive identity is a crucial aspect of development in children; the task of developing it can be challenging but rewarding. The caregiving factor is very important as caregivers' practices and the environment go a long way in determining the best outcomes in children. We should, therefore, ensure that caregivers; especially those that take care of the orphan and vulnerable children, engage in best practices that develop children positive identity. It will lead to the holistic development of the child, school success, and the development of society at large.

Recommendations

Based on the findings of the study, we recommend the following:

1. Immense awareness should be created in orphanages and childcare centers on the importance of positive identity in children by the government, and organizations interested in children's development. They should also organize regular in-service training, and workshops for orphanage caregivers and operators on the importance of, children positive identity, and how to develop positively.

2 There should be regular supervision of the orphanages by the government to ensure that caregiving practices and physical environment especially in the areas they were found to be below an acceptable standard meet up to a large extent with the requirement that promotes children identity.

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