



Physical and Psychosocial Wellness among Orphaned Children in Orphanage at Mosul City

Rayyan Ibrahim Khaleel, Hana A. Jameel Alsaheed

College of Nursing, University of Mosul, Mosul, Iraq.

ARTICLE INFO

Received: 17 May 2024,

Revised: 27 May 2024,

Accepted: 30 May 2024,

Online: 3 Aug 2024

Keywords:

Physical and Psychosocial Wellness,
Orphan, Orphanage

ABSTRACT

Background Family is the foundation of community. It affects children and provides the language, culture, customs, values and attitudes of the community. It provides care and material, psychological and social care. Furthermore, it strengthens children's personality to cope with stress and life problems, be active and productive. It develops the behavioural and social skills of children to establish appropriate social relationships and achieve psychological stability. **Methods and Materials:** The current study was based on a descriptive, cross sectional study design, which conducted on a sample consisted of 50 orphans living in Dar Al-Etam in Mosul city from period (20th November 2022 to 25th January 2023). Data was collected using a structured interview questionnaire and observational check list designed by the researchers. The data was analyzed performed by statistical package for social sciences (SPSS). **Results:** The results show that the majority of the survey sample was made up of men, 62 per cent, and 38 per cent, and that about half of the survey sample was 16 years old or older. A third of the study sample then consisted of 32 percent of aged 11 to 13. The relationship between general health and gender was significant with a value of p. 016, and the relationship between general health and age was also significant with a value of p. 001. According to social needs, the study showed an important relationship between social needs, sex, and parental loss. **Conclusions and Recommendations:** The study concluded that orphans are considered to be a critical phase of the lives of orphans who are desperately in need of parent and family care because of their significant role in psychological and psychological and social development of current and future personalities. The researchers presented some recommendations: First, educate society/community on the importance of supporting orphans in capital.I

1. Introduction

The future of any society depends on the ability to promote the health and well-being of the next generation. Simply put, today's children will become citizens, workers and parents of tomorrow. If we invest wisely in children and families, the next generation will repay the costs

through their lifetime of productivity and responsible citizenship (Manik, 2020). The number of orphanages registered under the age of 17 is 23,779 (UNICEF, 2015). The children who are deprived of family care are highly vulnerable, sensitive and dangerous groups that require

Corresponding author:

E-mail addresses: rayan.ibrahim@uomosul.edu.iq (Rayyan), hanaalsaheed@uomosul.edu.iq (Hana)

doi: [10.5281/jgsr.2024.13152188](https://doi.org/10.5281/jgsr.2024.13152188)

2523-9376/© 2024 Global Scientific Journals - MZM Resources. All rights reserved.

multidisciplinary research and intervention. If we do not provide the institutionalized children with the necessary foundations for a healthy productive life, our future prosperity and security will be in jeopardy (Nakatomi et al., 2018).

Indeed, the development of standards and care protocol helps orphan children and their caregivers to also have a significant base of data on the importance of the satisfaction of biological and psychosocial needs, by providing appropriate training to caregivers and improving the care environment in child care facilities, which has a beneficial effect on the physical, emotional, social and cognitive development of children. Therefore, the aim of this study was to assess the physical and psychological and social well-being of orphans in Mosul's orphanage.

Objectives of the study:

- 1.Ensure awareness of legal rights and protections
- 2.Adress any legal barriers affecting their well being
- 3.To facilitate community engagement and involvement

2. Materials and methods

Before collecting data, letters of approval were obtained from the Higher Education Committee/the University of Mosul Nursing College. Then the medical research ethics committee is approved. A non-conjecture sample was used to select 50 orphans living in Dar al-Etam, Mosul, at the time of the data collection (November 20, 2022 – January 25, 2023).

Design of the Study:

A descriptive, cross sectional study design was utilized to achieve the aim and objectives of the study.

Tools of the Study:

Since there was no previously designed questionnaire on “physical and psychological well-being among orphaned children,” the researchers formulated a questionnaire that addresses all variables of the study that study physical and psychological well-being among orphaned children. Researchers used textbooks, earlier questionnaires based on published research literature, and questionnaires globally and locally.

Procedure of the Measurement:

- Official letters for the head manager and matron of pediatric teaching hospital for approval to collect the data.
- Explanation for the orphaned children about the study questionnaire.
- Questionnaire was distributed for each available orphaned children to fill within 15-20 minutes under the researcher's guidance.
- Field work was done three days per week to collect the data. Three to five cases were recruited per day.

Data Analysis:

Data entry and analysis were achieved by using a Statistical Package for the Social Science (SPSS, Version 22).

3. Results

Table (1) Distribution of the study sample according to their general health scale throughout the study period.

Domains	Item	Total sample					
		Frequency			Mean	S. D	Total Mean
		Strong agree	agree	disagree			
Health Wellness	Did you feel healthy and well	34	11	5	2.58	.673	2.1470
	Were you physically active "ie, you are playing and take place	35	13	2	2.69	.508	
	Were you able to walk and run easily?	32	12	6	2.52	.707	
	Do you feel energized and energetic?	30	16	4	2.52	.646	
	I find it difficult to take care of my general appearance	7	18	25	1.64	.722	
	I suffer from fatigue and general weakness	9	14	27	1.64	.776	
	I miss school because I'm tired	9	13	28	1.62	.780	
	I have difficulties sleeping	13	19	18	1.90	.789	
	I do my homework with difficulty because of the fatigue	12	20	18	1.88	.773	

The table shows that the majority of the sample of 34 (68%) felt healthy and fit, 30 (60%) were energetic and energetic, and 25 (50%) were not able to care for their general appearance. However, 32 (64%) suffer from sleep difficulties.

Table (2) Distribution of the study sample according to their social needs throughout the study period.

Domains	Item	Total sample					
		Frequency			Mean	S. D	Total Mean
		Strong agree	agree	disagree			
Social Needs	I find myself apart from others in my thought pattern.	24	11	15	2.180	.8734	1.9430
	I can't find anyone who can help me solve my problems.	19	16	15	2.080	.8291	
	I suffer from feeling socially isolated.	11	13	26	1.700	.8144	
	I do not feel valued by others.	7	17	26	1.620	.7253	
	I feel afraid of establishing social relationships with colleagues.	9	14	27	1.640	.7762	
	I feel that other people make fun of me when I am with my fellow students.	7	6	37	1.400	.7284	
	I tend to reach out to others as compensation for the absence of one or both of my parents.	20	18	12	2.160	.7918	
	Get involved in school activities and events.	7	13	30	1.540	.7343	
	I feel happier working with others than alone.	9	23	18	1.820	.7197	
	I'm glad to make new friends.	23	14	13	2.200	.8330	
	My relationship with my friends is not very strong.	29	11	10	2.380	.8053	
	I collaborate with teachers at school.	16	11	23	1.860	.8809	
	I don't feel friendly when I interact with others.	18	17	15	2.060	.8184	
	I give up my right to others.	27	13	10	2.3400	.79821	
	I feel like others are making fun of me.	32	9	9	2.460	.7879	
	I am afraid of establishing social relationships with those around me.	26	16	8	2.360	.7494	
	I accept myself for who I am, despite the loss of one or both of my parents.	12	12	26	1.720	.8340	
	I try to overcome my fears of others myself.	19	13	18	2.020	.8687	
	I find my future dark.	10	18	22	1.760	.7709	
	I am worried about the future in light of the loss of one or both of my parents.	11	6	33	1.560	.8369	

The table shows that 35 (70%) of the sample found no one to help solve their problems. In addition, about half of the survey sample felt socially isolated 24 times (48%). More than two-thirds of the 38 respondents (76%) tended to communicate with others as compensation for their parents' absence. On the other hand, only 10

percent (20%) felt the relationships of friends were weak. Furthermore, only 15-30% of the population felt comfortable in conversation with others. Furthermore, 33 (66%) of the study population did not believe that one or both parents had lost their parents because they were concerned about the future.

Table (3) Distribution of the study sample according to their psychological needs throughout the study period.

Domains	Item	Total sample					
		Frequency			Mean	S. D	Total Mean
		Strong agree	agree	disagree			
Psychological Needs	I feel psychologically coping despite the harsh circumstances resulting from the loss of one or both of my parents.	27	13	10	2.340	.7982	2.3320
	I feel psychologically comfortable in my school.	26	14	10	2.340	.7982	
	I feel protected by those around me.	20	17	13	2.140	.8083	
	Losing one or both of my parents makes me feel alienated.	19	16	15	2.0800	.8290	
	Losing one or both of my parents makes me feel insecure from those around me.	20	17	13	2.1400	.8083	
	Losing one or both of my parents made me hopeless about the future	18	11	21	1.9400	.8900	
	The loss of one or both of my parents made other people interfere in my life.	33	10	7	2.5200	.7351	
	I feel happy when others praise me.	29	16	5	2.4800	.6773	
	The loss of one or both of my parents makes me sad.	34	6	10	2.3800	.8141	
	I feel safe and secure with my peers.	26	16	8	2.3600	.7494	
	I hate when others make me feel weak.	27	9	14	2.2600	.8762	
	I try to make my own decisions without resorting	27	11	12	2.3000	.8391	

	to anyone else.						
	I feel free to determine my own lifestyle	19	13	18	2.0200	.8687	
	I tend to solve my problems myself.	31	12	7	2.4800	.7351	
	I boldly express my opinion and thoughts freely.	29	14	7	2.4400	.7329	
	I feel my freedom is restricted compared to my friends.	16	20	14	2.0400	.7814	
	I feel satisfied with my work done.	35	10	5	2.6000	.6700	
	I feel happy when I accomplish something new.	38	9	3	2.7000	.5802	
	I feel self-esteem when I succeed in achieving my goals in life.	40	7	3	2.7400	.5646	
	I develop my abilities and capabilities through the love of knowledge.	25	15	10	2.3400	.8233	

According to the results, most of the survey samples (80%) felt emotionally comfortable at school. 37 percent (70 per cent) feel isolated because they have lost one or both parents. 37 (74%) of the samples felt uncomfortable with people around them because one or two parents

had lost. Most of the survey (86%) involved people who lost one or both parents and died. 43 percent (86 percent) of them tend to solve their problems themselves. Finally, 47% (94%) of the population in the study felt good about themselves when they achieved their life goals.

Table (4) Relationship between physical wellness, psychosocial needs and socio demographic characteristic of the study sample

Dependent variable	Independent variable	Chi-square test	D.F	P-value (Sig).
General Health wellness	Gender	2.880	1	.016 Sig
	Age	17.680	3	.001 H. Sig
	Loss of parents	11.320	2	0.85 N. Sig
Social Needs	Gender	2.880	1	.090 N. Sig
	Age	15.430	3	.011 Sig
	Loss of parents	11.320	2	0.05 Sig
Psychological Needs	Gender	2.880	1	0.00 H. Sig
	Age	17.680	3	0.67 N. Sig
	Loss of parents	11.320	2	.003 H. Sig

the table show a high significant relationship between the psychological needs and gender and loss of parents at p. value (0.00, .003 respectively). But there is a not significant relationship between psychological needs and age p. value 0.67.

4. Discussion

Physical and psychological well-being is represented by positive well-being, high satisfaction with self and life in general, continuous efforts to achieve important personal goals, independent life direction, and established a positive social relationship. Furthermore, it is associated with a general sense of happiness, enjoying life, relaxation, and psychological security that is lacking in orphans' homes. Lack of self-esteem is related to lack of positive reinforcement. As a result, the physical and psychosocial well-being of orphans is poor.

Improvements in understanding the physical and psychological needs of orphan children are particularly important for public health, as they may affect their achievement level and be considered the basis of adult health (Alqahtani, 2021). Therefore, the current study aims to assess the physical and psychological well-being of school-age children at the Mosul Orphanage.

In the current study, it was shown that psychological well-being is the last rank because the satisfaction of basic needs is the essence of mental condition, and in the table (3), most of the sample felt alienated by losing one or two parents. In most studies, the loss of one or two parents, or the loss of another person's life, affects their lives and most people tend to solve their problems themselves.

Furthermore, the present study revealed that social needs quality declined due to low social belonging, lack of happiness and security, and anxiety of orphans. As a result, their social well-being is low. Table 2 shows that most of the sample could not find anyone who could help solve the problem, and that about half of the sample was socially isolated.

This result is consistent with Borzak and Shalali (2017), Muhammad (2017), Salami and Jaloul (2017), which demonstrates some characteristics of orphans and those in social care homes, arguing

the importance of family education and the harm associated with parental loss, and the correlation between orphans' physical and psychological and social well-being.

The current study shows that there is a significant relationship between age, general health and well-being and social needs, as shown in Table 4. This important relationship can be attributed to the good practices of children, and is generally promoted and improved with a higher educational level of children's age and hand, enabling children to become more aware of the negative aspects of their lives at orphanage houses and to try to make them the best they can be. The current school-aged children are typically from the fourth to sixth grade (more than two-thirds of the orphans studied over the age of 12 were in secondary school). This finding was supported by Abd El-Kader (2016), who noted that children with orphanages at the age of the elderly tended to follow a healthier lifestyle than children with younger children, and concluded that there was a significant positive correlation between the observation of the biosocial needs of the subjects and their age and educational level. In addition, the results of the research of Adirimi et al. (2019) and Chemwende and Mbogo (2021) are consistent with the findings that there is a significant association between the welfare of subjects in the study and their education and age.

The results show that gender, social and psychological needs have important relationships ($P=0.00$) as shown in Table 4 (Table 4). This important relationship can be explained by expected gender differences: Elattar et al. has supported the fact that women reported more development and well-being than men. (2019) To evaluate the impact of emotional, behavioral problems and the length of orphanage housing on their happiness in the city of Benha, Egypt. Similarly, Moyo et al. (2015) studies the impact of orphanage on their well-being in Mtoko, Zimbabwe, and shown that the gender relations of the children studied are important for their well-being.

5. Conclusions

Based on the findings of this study, it can be concluded that orphanhood is considered a crucial stage in the lives of orphans who are in dire need

of parental and family care because of its great role in the psychological construction of their current and future personalities as well as psychological and social wellbeing.

6. Recommendations

1. the orphanage home needs to improve counseling services to the orphans and to educate them on self-awareness.

2. The care givers should be trained on best practices to handle the orphans. Moreover, there should be improvement on recreational services for the children, including social activities, which mostly put orphans together rather than letting them be isolated.

4. The government, institutions and communities should play the role of ensuring that orphaned children are provided with social services and psychological support as well as counseling training for caregivers in order to minimize children's psychological complexities.

7. References

- [1]. Abd-el-Kader N. (2016). Effect Educational Program on Bio-psycho-social well-being of Orphanage Children, dissertation thesis. Cairo Governorate, Nigeria.
- [2]. Adedigba O, Bafemi K, Musa S. (2018). psychosocial development of orphaned children in Kwara State, Nigeria. 2(1). <https://uilspace.unilorin.edu.ng>.
- [3]. Alqahtani M. M. (2021). A Proposed program to improve quality of life for the orphans at social care homes. *Journal of Educational and Social Research*.11(1). P.p: 256. Available at: <https://doi.org>.
- [4]. Borzak, K. and Shalali, A. (2017). Quality of life for orphan adolescents: A field study in Laghouat, Algeria. *Journal of Legal and Social Sciences*, 1 (4). P.P: 77-112.
- [5]. Chemwende F. W, Mbogo R. W. (2021). Impact of Orphaned and Vulnerable Children's (OVC) intervention programs on their holistic wellbeing in Kenya. *Consortium Journal of Educational Management and Leadership*. 2(1). P. p: 105-120.
- [6]. Elattar N. F. M, Alabd A. M. A, Mohammed R. E. (2019). Impact of orphan Children's emotional and behavioral problems and length of institutionalization on their life satisfaction. *East African Scholars Journal of Nursing and Midwifery*. 1(3). P. p: 76-84. Available at: <https://fnur.stafpu.bu.edu.eg>.
- [7]. Elizabeth A, Maheswari S. (2017). A study to assess the physical health status of children aged between 6-12 years in selected orphanages. *International Journal of Bioassays* 6 (01). P.p: 5214-5217.
- [8]. Manik G. (2020). A study on childhood development in early stage. *Scholarly research journal for interdisciplinary studies*. 7(59). P.p:6.380. Available at www.srjis.com.
- [9]. Moyo S, Susa R, Guadiana E. (2015). Impact of institutionalization of orphaned children on their wellbeing. *IOSR Journal of Humanities and social science*.; 20(6). P. p: 63-69.
- [10]. Muhammad, E. (2017). Effectiveness of logotherapy program in developing the quality of life in a sample of orphan adolescents (M.A. thesis). Ain Shams University, Egypt.
- [11]. Nakatomi T, Ichikawa S, Wakabayashi H, Takemura Y. (2018). Children and adolescents in institutional care versus traditional families: a quality-of-life comparison in Japan. *Health and quality of life outcomes*.16(1). P.p:144-153.
- [12]. Salami, D. and Jaloul, A. (2017). The orphans' quality of life and its achievement. *Qabas Journal of Humanities and Social Studies*, 2 (2). P. p:41-60.
- [13]. Unicef statistics. The State of the World's Children. United Nations publication ISBN. 2020.
- [14]. Ahmed, A. S., Khaleel, R. I. (2023). Prevalence of Stunting and Wasting among Children Aged 6-24 Months in Mosul City. *Journal of Global Scientific Research*.8(9): 3215-3221.