

Exploring Mental Health among Orphaned Children

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Abstract

Mental health issues among children are on the rise, especially among orphaned individuals. Mental health problems can adversely affect the physical, social, and emotional well-being of both children and adults. This study aims to explore the mental health of orphaned children in terms of their mental health status, the factors influencing their mental health, and their coping strategies when facing mental health issues. The research employed qualitative counseling group research methodology and utilized the Depression, Anxiety, and Stress Scale (DASS) questionnaire to assess the mental health levels of orphaned children. Interviews were conducted to investigate the factors affecting their mental health and their coping mechanisms. Five randomly selected orphaned girls from the Orphanage Welfare Association participated in the study. Data collected were analyzed using thematic analysis and descriptive analysis. The findings of the study revealed that among the key factors affecting the mental health of orphaned children were peer relationships, school-related factors, living conditions, and mystical disturbances. However, coping strategies employed by these children to deal with stress included emotional focus (sharing with friends, journaling, drawing, screaming, singing, avoidance, hitting walls), physical activities and play, distraction through engaging in activities, and praying. In conclusion, orphaned children are more prone to facing mental health issues compared to their non-orphaned peers. The relevant authorities and organizations such as the Department of Social Welfare (JKM) and related stakeholders play a crucial role in addressing the mental health problems faced by orphaned children.

Keywords: Mental Health, Orphaned Children, Factors, Coping Mechanisms.

Introduction

In 2019, the issue of mental health became increasingly serious when the Ministry of Health Malaysia (MOH) estimated that as many as 424,000 children were grappling with mental health issues in the country, making it an epidemic. It was estimated that one out of every 20 children aged 5 to 9 in Malaysia was now experiencing mental disorders. The MOH statistics for 2019 also indicated that 2.3% of adults and 9.5% of children aged 10-15 were facing mental

health problems, and the MOH projected that these percentages were expected to continue rising. This issue could have detrimental effects on the nation. Mental health problems can adversely affect the physical, social, and emotional well-being of children. Therefore, it underscores the importance of nurturing mental health from childhood through adulthood.

When a child is grappling with problems, they may struggle to think more clearly, leading to behaviors that are beyond their control. Various factors can influence children, including poverty, educational underachievement, family issues, health influences, individual strengths and weaknesses, physical health, crime, and antisocial behavior (Rutter and Smith, 1995; CDC, 2011).

Therefore, one of the interventions in addressing the mental health of orphaned children is through conducting group counseling. In this process, orphaned children gain self-awareness and appropriate coping strategies when facing mental health issues. According to Gladding (2021), group counseling is a group session involving two or more participants who meet face-to-face, interact with each other, and depend on each other to achieve common goals. The goals of group counseling include assisting in tasks related to work, education, personal and interpersonal problem-solving, or emotional mental disorder recovery.

This study aims to explore the mental health of orphaned children by

- (i) Identifying the mental health of orphaned children,
- (ii) Exploring factors that affect the mental health of orphaned children, and
- (iii) Assessing coping mechanisms for the mental health of orphaned children.

Literature Review

Mental Health of Orphaned Children

Numerous studies have been conducted, and the statement by the Ministry of Health (KKM) is corroborated when KKM statistics indicate that 9.5% of children are experiencing mental health issues. According to a study by Raudhati et al (2020), the mental health levels of orphaned children in the Social Welfare Board in Bireuen Regency, Indonesia, revealed that 25% of orphaned children face behavioral and emotional problems. The majority of these problems were related to peer issues (31.7%), followed by emotional symptoms (27.9%), behavioral problems (19.2%), and hyperactivity (7.7%). These findings confirm the existence of mental health issues among orphaned children, resulting in negative emotions. Therefore, monitoring and early intervention for the mental health of orphaned children are imperative.

Another study conducted by Mahanta et al (2022) found that 18.5% of orphaned children aged 10-19 were exposed to behavioral or mental stress. Among 65 children aged 10–19, 18.5% experienced behavioral and mental stress. Emotional issues (32.3%) and misconduct (23%) were significantly observed among adolescent boys. For instance, children exposed to abuse and neglect, social marginalization, lack of care and affection were found to be more susceptible to psychosocial stress. Therefore, orphaned children need to be cared for with love and attention compared to their non-orphaned counterparts.

Factors Affecting Mental Health

According to the study by Włodarczyk et al. (2017), it is argued that factors influencing mental health issues in children include environmental factors, parental factors, peer relationships,

and schooling. These external factors can impact a child's cognitive, social, and emotional development. If a child is socially isolated or bullied by peers, they may develop a dislike for school and experience negative emotions, such as fear. Therefore, childhood mental health issues are closely related to external factors, and interventions should be aimed at addressing these factors.

In line with the study conducted by Raudhati et al (2020), it was found that prosocial behavior and mental health problems among orphans are influenced by the health status of the orphaned child and experiences of conflict. When orphaned children have health problems or have experienced trauma, they are more likely to develop mental health issues such as stress, depression, and anxiety. These children are still mentally immature compared to adults, which makes it challenging for them to think rationally. These factors can significantly impact the mental health of orphaned children and disrupt their future life and learning outcomes.

Coping Strategies

Coping strategies refer to actions taken to resolve or alleviate problems being faced. Prolonged negative effects can lead to mental health issues such as anxiety, depression, and stress. Therefore, orphaned children employ various coping strategies to deal with their challenges. Based on a study conducted by Cagande et al (2022), orphaned male adolescents tend to use problem-focused coping strategies, such as planful problem solving, and emotion-focused coping strategies, like escape/avoidance, when dealing with stress or problems. On the other hand, orphaned female adolescents tend to use emotion-focused coping strategies, seeking social-emotional support, and problem-focused coping strategies, seeking social support. These gender differences highlight the variety of coping strategies employed by orphaned adolescents.

Furthermore, religious coping, which involves turning to one's religious beliefs and practices, is closely related to human well-being. This coping strategy has a positive impact on an individual's quality of life and their ability to cope with adverse situations. According to Weber & Pargement (2014), the positive effects of religious coping stem from the positive beliefs associated with religion as a whole, which helps individuals address psychological problems. For example, individuals of the Islamic faith may pray and turn to their God as a way to ease their emotions and find inspiration through the process of prayer.

Methodology

Research Design

This study employs a qualitative research approach with group counseling to conduct the research. Strauss and Corbin (1990) define qualitative research as any research that produces findings not through statistical procedures or other quantitative methods. Group counseling will involve in-depth interviews and surveys as an initial assessment.

Population and Sample

The researcher has chosen orphaned children as the target population for this study due to their interest in this group. The sample selection is based on convenience sampling, which means using readily available or easily accessible data. A total of 5 samples will be selected

from the age group of 10-16 years among orphaned children in the Islamic Orphanage Welfare Organization in the Jasin District of Melaka.

Instruments

This study will use a questionnaire like the Depression, Anxiety, and Stress Scale (DASS) as an initial assessment of the mental health levels of orphaned children. According to the study by Musa et al (2020), the DASS-21 item has high reliability in measuring the levels of depression, anxiety, and stress in individuals, with Cronbach's alpha values between 0.92 (depression), 0.86 (anxiety), and 0.86 (stress). These reliability values are acceptable and demonstrate that the DASS-21 item can effectively measure the intended aspects.

Additionally, focus group sampling will be used to investigate factors and coping methods. According to Krueger, as cited in Sabitha (2006), a focus group is a form of interview involving 6-12 people discussing one or two issues for about one to two hours. The interviewers in a focus group are known as facilitators or moderators.

Conducting the Study

The study is carried out by obtaining approval from the supervisor at the Islamic Orphanage Welfare Organization in the Jasin District of Melaka through an application. The organization's supervisor, who acts as the guardian for the orphaned children, will sign a consent form for them to participate in the counseling sessions. Respondents are briefed on the ethics and confidentiality of counseling. A total of 3 counseling sessions are held with 3 specific sub-modules, which are (i) the mental health levels of orphaned children, (ii) factors affecting mental health, and (iii) coping mechanisms for mental health (refer to Appendix B). Each session will last for 60-90 minutes, with sessions spaced one week apart. Voice recording is used for the purpose of report writing.

Data Analysis

In this study, descriptive analysis will be used to identify the mental health levels of orphaned children. According to Chua (2011), descriptive analysis aims to obtain numbers or frequencies about the collected respondent information and to address the research objectives such as identifying the levels of a variable under investigation.

Furthermore, to examine the factors and coping methods used by orphaned children in dealing with mental health issues, the researcher has employed manual thematic analysis to analyze interview data. Clarke & Braun (2013) state that thematic analysis is the process of identifying patterns or themes in qualitative data and is a fundamental method for analyzing qualitative data that should be mastered.

Findings of the Study and Discussion**Demographics**

Table 1

Demographics Respondent

| Respondent(R) | Name | Age |
|---------------|---------|----------|
| R1 | Balqis | 13 Tahun |
| R2 | Nabilah | 16 Tahun |
| R3 | Dania | 11 Tahun |
| R4 | Nasuha | 10 Tahun |
| R5 | Allya | 13 Tahun |

Five respondents were selected as the sample for this study. All of them are females and aged between 10 to 16 years old. They are orphaned children residing at the Islamic Orphanage Association of Daerah Jasin. The consent forms were signed by their guardian, who is also the chairman of the organization.

Domain 1: The Mental Health Status of the Orphaned Children

What is interesting about the findings of this study is that before the DASS (Depression, Anxiety, and Stress Scale) test was administered, a brief interview was conducted regarding their awareness of their mental health. It was found that they were aware of their individual stress levels but could still manage. The following quotes represent this aspect:

R1: "I feel happy and stressed, but not sad. I feel very stressed and isolated by others at school. But I can still handle it."

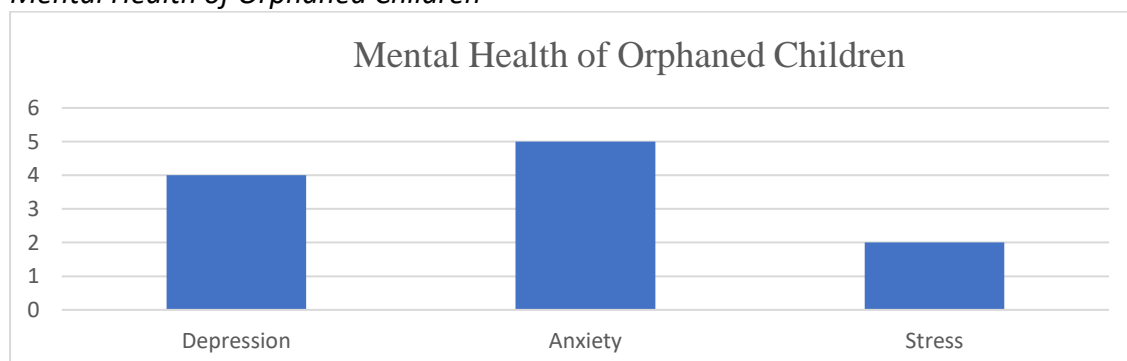
R2: "I feel a little stressed, but it can be managed."

R3: "I feel stressed, but it can still be managed."

R4: "I feel a little stressed, and it's okay."

R5: "Sometimes there is stress, sometimes there is happiness. Sadness is occasional."

Table 2

Mental Health of Orphaned Children

Overall, the study found that the respondents in the orphanage have mental health issues. Specifically, four individuals have depression issues, five have anxiety issues, and two have stress issues. (Refer to Table 2).

This is also reflected in the following quotes:

R1: "I feel depression, stress, and isolation by others. These feelings have been there for a long time, but I never thought of suicide. But I never thought about why."

R2: "I feel anxious and uneasy quickly, but I don't know why."

Most of the respondents agree with the results of the DASS test but do not know the reasons behind it.

Quoting the results

R3: "I agree with the result, but I don't know why."

R4: "I agree with the result."

R5: "I agree, because I only feel a little stressed."

According to the findings of this study, orphaned children have early awareness of their stress-related issues and tend to experience mental health problems such as stress, depression, and anxiety. This is consistent with Mahanta et al (2022), who reported that children aged 10-19 years experience emotional and behavioral problems at a rate of 32.2% and 23%, respectively. These findings demonstrate that orphaned children are prone to mental health problems like stress, anxiety, and depression.

These findings are also supported by the study conducted by Raudhati et al (2020), which examined the mental health levels of orphaned children in the Social Welfare Agency of Bireuen Regency, Indonesia. They found that 25% of orphaned children faced behavioral and emotional problems. This is because orphaned children do not have parents to share their stories with or teach them how to cope with these issues.

Domain 2: Exploring Factors Affecting the Mental Health of Orphaned Children

Theme 1: Peer Relationships

The respondents involved in this study identified peer relationships as the primary factor causing stress. They are children who are currently attending secondary school and have peers at school or in the hostel. This study identified three sub-themes within the peer relationships factor.

Sub-theme: Teasing and Bullying

The study found that respondents' stress was primarily caused by teasing and bullying by their peers. Peers emerged as the main factor causing stress for the participants in this study. For instance, when R1 wrote the dialogue "I'm stressed because the boys bother me, tease me, and bully me, they're mean". Quotations from respondents below illustrate this sub-theme:

R1: "I've been feeling like this for a long time, since I was 11 years old" (I'm stressed because the boys bother me, tease me, and bully me, they're mean) dialogue in the drawing.

R3: "My friend bullies me, always asks for answers to my school papers, but I don't give them. And he always gets angry and mentions my dad's name, it makes me sad" (my dad has passed away).

R5: *"The boys in the dormitory say I don't have parents" (my face is ugly, dirty, and I don't have parents) dialogue in the drawing.*

Sub-theme: Emulating Lifestyle

Only one respondent mentioned that a peer who emulated their lifestyle made them uncomfortable and stressed. This respondent depicted a woman wearing a black headscarf in a picture. The following quotations from the respondent illustrate this sub-theme:

R4: *"There is someone who copies my lifestyle; I feel uncomfortable and stressed."*

Theme 2: School Factors

All respondents are students in different secondary schools; hence, they spend a significant amount of time at school. The study identified three sub-themes within school factors causing stress.

Sub-theme: Heavy Schoolwork

The research found two respondents who stated that heavy schoolwork was putting pressure on them. They depicted their homework books in an illustration and were supported by the following quotations from the respondents, demonstrating this sub-theme:

R1: *"Having a lot of schoolwork stresses me out."*

R2: *"There's a lot of schoolwork that requires essay paper. We don't have textbooks anymore, we just use folders, so the essay paper tears easily, and we have to buy it ourselves. This makes me feel pressured."*

Sub-theme: Teacher Personality: Strict, Caning, and Pressure

One of the sub-themes identified in this study is the personality of teachers who are strict, cane students, and put pressure on them. Two respondents depicted a teacher in their artwork as one of the causes of stress. The following quotations from the respondents illustrate this sub-theme:

R2: *"This is our school schedule, every time it's English class, I feel stressed because the teacher always pressures the students."*

R4: *"There are other teachers who cane students, but the science teacher is strict and gets angry with me. I'm afraid of him."*

Sub-theme: Unable to Focus Due to Noise

Furthermore, only one respondent expressed that they were stressed because they couldn't focus due to a noisy classroom environment. The following quotation from the respondent illustrates this sub-theme:

R4: *"I can't concentrate when it's noisy, and I tell them to be quiet."*

Theme 3: Living Conditions

All respondents are placed in a full-time orphanage and spending a lot of time in the dormitory. This study identified three sub-themes within the living conditions factor, which are heavy household chores, clutter, and crowded and noisy environments.

Sub-theme: Heavy Household Chores

One respondent expressed that ironing clothes made them stressed. The respondent depicted an iron and a headscarf in their artwork. The following quotation represents this sub-theme:

R1: "I feel stressed when I have to iron clothes."

Sub-theme: Clutter

Additionally, one respondent expressed that they disliked having a cluttered bedroom. The image of a cluttered room was depicted on the drawing paper. The following quotation illustrates this sub-theme:

R4: "I don't like a cluttered room; it stresses me out when I see clutter."

Sub-theme: Crowded and Noisy Places

One respondent mentioned feeling stressed when in crowded and noisy places. R4 drew a picture of a crowded area. The following quotation represents this sub-theme:

R4: "I don't like crowded places; it makes me feel stressed and worried because I get disturbed by the crowd."

Theme 4: Mystical Disturbances (Supernatural Entities)

In the study, one respondent (R1) expressed stress because they have been able to see ghosts since childhood. This condition has caused them to feel stressed. They depicted ghost, including a pocong and a long-haired ghost, in their artwork. The following quotation from the respondent illustrates this theme:

R1: "I'm afraid because I can see ghosts, ghost are everywhere, and they don't speak to me. I've been able to see them since I was a child, but I haven't told anyone, including my late father."

Theme 5: Numerous Dormitory Rules

The study found one respondent who stated that the numerous and strict dormitory rules caused them stress. They drawing a dormitory rulebook in their artwork. The following quotation illustrates this theme:

R4: "The dormitory rules make us unable to get enough sleep. For example, if there's an event outside the day before an exam, we have to attend that event and can't go to extra classes."

This study identified five themes of factors affecting the mental health of orphaned children, which are peer factors, school factors, living conditions, mystical disturbances, and strict dormitory rules. Regarding peer factors, the study found that orphaned children felt pressured when they were teased or bullied by their peers, especially when the teasing was related to their deceased parents, which hurt their feelings. As for school factors, issues such as heavy schoolwork, strict and caning teachers, and an inability to concentrate due to a noisy environment were identified. These findings are consistent with the research by Wlodarczyk et al (2017), which suggests that factors affecting children's mental health include

environmental, parental, peer, and school-related factors. This is because schools and living environments are spaces heavily occupied by orphaned children, and thus, environmental and peer factors significantly influence them, whether directly or indirectly.

Domain 3: Assessing Coping Mechanisms for the Mental Health of Orphaned Children

Theme 1: Emotion-Focused Coping

The study revealed that most respondents used emotion-focused coping mechanisms. Six sub-themes were identified in this study, which include sharing stories with friends, writing in a diary, drawing, screaming and singing, punching walls, and avoiding.

Sub-theme: Sharing Stories with Friends

One respondent believed that sharing stories with friends could reduce their stress. The following quotation represents this sub-theme:

R2: "I share with Laila. Less stress."

Sub-theme: Writing in a Diary

Another respondent felt that writing in a diary could help reduce stress. The following quotation illustrates this sub-theme:

R3: "I write about him, I write in my diary about him, and I get angry with him, and I feel relieved."

Sub-theme: Drawing

One respondent believed that drawing helped in reducing stress. The following quotation demonstrates this sub-theme:

R2: "Drawing can reduce stress."

Sub-theme: Screaming and Singing

Two respondents felt that screaming and singing were coping mechanisms to reduce stress. The following quotations represent this sub-theme:

R1: "I like to sing; I feel calm and relieved."

R5: "I scream behind the dormitory alone; I feel relieved after screaming."

Sub-theme: Punching Walls

One respondent believed that punching walls to release tension could help reduce stress. The following quotation illustrates this sub-theme:

R5: "Sometimes, I punch the wall. It doesn't hurt; I feel relieved after punching."

Sub-theme: Avoidance (Sleeping and Keeping Quiet)

Additionally, two respondents thought that sleeps and quiet could help reduce stress. These behaviors are a form of avoidance coping. The following quotations represent this sub-theme:

R1: "Hmm, I just act like I don't know." "I just let it be."

R4: "I just sit, stay quiet. It's okay for a while."

Theme 2: Sports and Play

All respondents agreed that engaging in sports and play helped reduce stress and made them feel happy. They reside in the same dormitory and participate in similar activities. The following quotations represent this sub-theme:

R1: "I like playing carrom with friends, less stress."

R2: "In the evenings, I play badminton with friends, less stress."

R3: "I play with Nasuha, when she annoys me, I get angry and scold her, and I feel happy."

R4: "I play with Dania; we play badminton and tag."

R5: "I play badminton with friends. It feels enjoyable."

Theme 3: Distracting Attention Through Various Activities

One of the themes identified in this study is distraction through various activities, such as watching TV, folding clothes, and reading comics and novels.

Sub-theme: Watching Funny Cartoon Shows

One respondent believed that watching TV could reduce stress. The following quotation illustrates this sub-theme:

R5: "When I feel stressed, I watch funny cartoon shows, like 'Came and Learn,' and I feel less stressed."

Sub-theme: Folding Clothes

Another respondent thought that folding clothes helped reduce stress. The following quotation represents this sub-theme:

R2: "I fold clothes everyday," "I am tidy up myself; it doesn't feel burdensome, and I feel less stressed."

Sub-theme: Reading Comics or Novels

One respondent believed that reading comics or novels could help reduce stress. The following quotation demonstrates this sub-theme:

R5: "I like reading comics or novels; it makes me feel less stressed and calm."

Theme 4: Praying

In addition, one of the empowerment themes found in this study is through praying. Two respondents believe that prayer can relieve stress. Here are excerpts that illustrate this theme:

R5: "I will pray to reduce stress."

R1: "I ... erm ... I sleep and pray, feel calm."

In addition, this study also found that orphaned children's coping mechanisms for mental health include emotional focus, self-distraction, exercise, and prayer. Supported by the studies conducted by Cagande et al (2022), concluded that adolescent girls tend to use emotional focus coping mechanisms in seeking social-emotional support. Examples of emotional focus coping mechanisms from the study include sharing stories with friends, journaling, screaming and singing, self-punching, and avoidance. It is because orphaned girls are more sensitive, and their coping mechanisms are limited by their environment. Therefore, they tend to share with their roommates rather than seeking help from adults or outsiders.

Furthermore, the study also found that one coping mechanism is through praying, which can help reduce stress. It is in line with the research by Weber & Pargement (2014), which states that the positive effects of religion come from the positive beliefs inherent in religion as a whole, and these coping mechanisms help address human psychological problems. All of the orphaned children in this study are Muslims, so they adhere to a prayer schedule established by the welfare organization. This practice helps them pray on time and find peace. Therefore, prayer is considered one of the best coping mechanisms for finding tranquility and relief, especially for those who practice Islam.

Conclusion

As conclusion, this study found that orphaned children tend to face more mental health problems compared to typical children. This is because orphaned children doesn't have parents to provide guidance and share stories with. There are various factors that affect the mental health of orphaned children, especially bullying by schoolmates and the heavy workload in school. They have to solve emotional problems and schoolwork by their own without burdening others. In contrast, orphaned girls prefer to use emotional coping strategies such as avoidance, sharing with roommates, screaming, singing, journaling, and hitting walls. Religious coping also helps orphaned children reduce the daily stress they face. Therefore, these findings can be utilized by the Department of Social Welfare (JKM) and related parties to emphasize the importance of counseling as an intervention in helping orphaned children's mental health. Thus, JKM needs to make efforts to recruit more counselors to handle the increasing number of orphaned children, especially after the COVID-19 pandemic. This is also supported by the Department of Social Welfare (JKM), where 273 counselors will be responsible for providing regular counseling to children who are traumatized after becoming orphans due to the COVID-19 pandemic (Berita Harian, 2021). This can help in the better and more effective emotional and mental recovery of orphaned children because counseling is ongoing. However, this study has limitations in that it was not conducted comprehensively. Therefore, as a suggestion, future research can be carried out more comprehensively and involve various groups of children.

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