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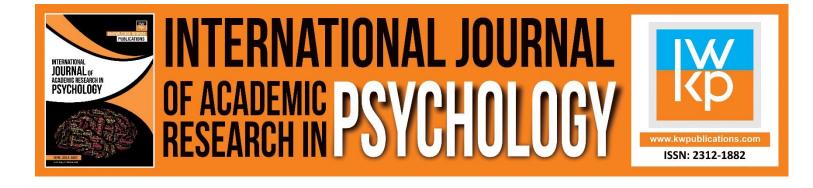
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Differences of Mental Health among Orphan and Non-Orphan Adolescents

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Abstract

The study aims to identify the differences of mental health among orphan and non-orphan adolescents in Malaysia. This study used a quantitative method. The sample comprised of 240 orphans and 240 non-orphan adolescents, aged 13 to 17 years old selected through multistage sampling. The validated Malay version of Depression, Anxiety, Stress Scale 21 Item (DASS21) used in this study to measure mental health among the orphan and non-orphan adolescents. The findings showed that there have differences of mental health among orphan and non-orphan adolescents which is orphans had significantly higher level of mental health problem than non-orphan respectively; depression, anxiety and stress. Result revealed that all parties including government organization, non-governmental organizations (NGOs), orphanage centers and guardians need to regulate actions such as program implementation and intervention to ensure the continuity of mental health especially among orphan adolescents in Malaysia.

Keywords: Mental Health, Depression, Anxiety, Stress, Orphan Adolescent, Non-Orphan Adolescent.

Introduction

Mental health is an important element for childhood and adolescents health development (Greydanus & Merrick, 2012; Waddell *et al.*, 2007). Adolescents who have good mental health are able to recognize their own abilities, can handle normal stresses in life and able to contribute to the community (World Health Organization, 2012). However, there are psychological issues that contributed to the mental health disorders among adolescents nationwide (Mohammadzadeh et al., 2017a; Chen *et al.*, 2017; Aud, Ramani & Frohlich, 2011; Suldo & Shaffer, 2008).

Based on reports from the World Health Organization (WHO), mental health disorders in children and adolescents have increased each year and this issue will continue to increase by 50% until 2020 (Bayera *et al.*, 2010). In 2015, the National Health and Morbidity Survey Statistics has been implemented by the Ministry of Health Malaysia (MOH), found that adolescents are among those

with the highest number of people experiencing mental health, especially aged 16 to 19 years of which 29.2% comprised 4.2 million people more than 31 million Malaysians (Ministry of Health, 2015).

However, mental health disorders are highest among orphan adolescents who living in orphanages. Previous studies showed that mental health disorders among orphans are higher than non-orphans adolescents (Mohammadzadeh *et al.*, 2017a; Hashim *et al.*, 2011; Kaur & Rani, 2016; Bhat, Rahman, & Bhat, 2015). Studies have shown adolescents who living in orphanages are exposed to various emotional disorders such as depression, anxiety and stress (Mohammadzadeh *et al.*, 2017a; Nurulwahida, Aizan & Khaliza, 2014; Lehman et al., 2013). In Asia, there are 68.9 million orphans who shown the largest number in the world (Orphan Facts & Statistics, 2005). Based on statistics from the United Nations (UN), over 400 thousand children in Malaysia have been orphaned since 2015 and this number is expected to increase every year (Lakshiny, 2015). However, there are no detailed statistics stating the exact number of orphanage in Malaysia because as many unregistered with formal organizations (Mohammadzadeh *et al.*, 2017a).

According to the growing number of orphans, it seems that the orphanage are the primary choice for those who are unlucky to live with other relatives (Polihronakis, 2008; Nair, 2014). In Terengganu, orphan adolescents from all the district were centered at the Terengganu Orphan Welfare Organization (PERKAYA) which is this situation make a crowded number of orphan adolescents and gave a distress to guardians to control to all residents (PERKAYA, 2017). Orphans those living at the orphanages are seen to face that environment to continue their daily lives without enough attention from their guardians. Therefore, they are more likely to have various of emotional and behavioral problems such as depression, anxiety and stress which are totally different compared to non-orphan adolescents (PERKAYA, 2017).

Previous study showed that orphan adolescents suffered high emotional problem compared nonorphan adolescents at a school in Acera, Ghana (Yendork & Somhlaba, 2015). According to Cluver and Gardner (2006), orphan adolecents in Cape Town, South Africa experiencing mental health disorders such as depression and anxiety. Studies have shown orphan adolescents brought up in orphanages are exposed to various of emotional and behavioral problems such as depression, anxiety, stress and anti-social behavior (Lehmann et al, 2013; McLaughlin, Zeanah, Fox, & Nelson, 2012; Fawzy & Fouad, 2010).

In 2017, a local study have found that orphans living in orphanage centers in Selangor suffer from depression, anxiety and stress (Mohammadzadeh *et al.*, 2017a). Another study in 2014 showed that orphan adolescents in Malaysia exposed to Major Depression Disorder (MDD) (Wan Salwina *et al.*, 2014) than non-orphan adolescents (Kaur *et al.*, 2014; Wahab *et al.*, 2013; Hashim *et al.*, 2011). More than 50% of orphans have mild to severe depression in Kelantan (Ramli *et al.*, 2010). Furthermore, according to Mohammadzadeh *et al.* (2017b) study also indicates that orphans have higher levels of stress compared to non-orphan adolescents (Yaacob *et al.*, 2009; Sulaiman et. al., 2009).

However, only a few local studies have examined the psychological well-being or conducted educational interventions among adolescents who living in orphanages (Mohammadzadeh *et al*,

2017b; Syazrah et al., 2015; Nurulwahida, Aizan & Khaliza, 2014; Wan Salwina *et al.*, 2014; Ramli, Yahaya & Lazin, 2010; Roslee *et al.*, 2004). In addition, local reseachers have not yet give the proper attention on studies among between group of adolescents; orphan and non-orphan. Local studies have focused on mental health among different samples such as school students (Norhayati, 2013; Hashim *et al.*, 2011) and IPT students (Shamzaeffa & Tan, 2016; Shamsuddin, *et al.*, 2013; Nurhaila, *et al.*, 2011). Therefore, information about mental health among orphan adolescents is very limited and the lack of information in this area become the major challenge to develop effective intervention and treatment programs among orphan adolescents in Malaysia. Hence, this current study is an effort to contribute information on mental health among orphan adolescents, which by identifying the different levels of mental health among orphan and non-orphan adolescents.

Methodology

Sample and Procedure

A total of 240 adolescents from one orphanage center and 240 non-orphan adolescents in a school in Terengganu, Malaysia, aged 13 to 17 year olds are involved in this descriptive study. The samples were selected using multi stage sampling. The orphan adolescents who has lost biological father and both parents were involved in this current study (the condition in the orphanage). Meanwhile, for those still have both parents and live together in category as non-orphan adolescents.

Research Instrument

Data collection was carried out by administered validated Malay version of Depression, Anxiety, Stress Scale 21 Item (DASS21) to measure mental health among samples.

Depression, Anxiety, Stress Scale 21 Item (DASS21)

Depression, Anxiety, Stress Scale version 21 Item (DASS21) is a modified questionnaire from the DASS version of the 42 questionnaire developed by Lovibond and Lovibond (1995). The translated DASS21 questionnaire has been used in this study to measure the level of depression, anxiety and stress with reliability (depression, 0.8; anxiety, 0.74 and stress 0.79) (Ramli *et al*, 2007). The answer format for this questionnaire consists of four likert scale to describe the samples' condition throughout the week before answering the questionnaires from (0) Never, (1) Sometimes, (2) Often and (3) Almost Always.

Data Analysis

In this study, the quantitative data obtained was processed and analyzed using the Statistical Package for Social Sciences (SPSS) for WINDOW version 23.0. Methods of inferential statistical analysis of Independent Sample t-Test were used to determine the differences of mental health (depression, anxiety and stress) among the samples.

Findings

Based on the DASS21 questionnaire, the mental health level is measured based on the elements of depression, anxiety and stress. The findings show that there was a significant difference in the score of depression between orphan and non-orphan adolescents; t (478) = 6.27, p <.001. Thus, the results of the study showed that the level of depression of orphans was higher (m=2.38, Sd=0.85) compared with non-orphan adolescents (m=1.89, Sd=0.85). In addition, the results also showed that there was

a significant difference in the score of anxiety between orphan and non-orphan adolescents; t (478) = 5.03, p <.001. The results showed that the level of anxiety among orphans was higher (m=3.44, Sd=1.31) compared to non-orphan adolescents (m=2.82, Sd=1.37). Moreover, there was also significant difference in the score of stress between orphan and non-orphan adolescents; t (478) = 2.15, p <.05. The results showed that the level of the stress among orphans was higher (m=1.73, Sd=0.89) compared to non-orphan adolescents (m=1.57, Sd=0.75). The overall findings are shown in Table 1.

	Orphan Adolescents		Non-orphan adolescents		
Mean	Sd	Mean	Sd	t	Sig
2.38	0.85	1.89	0.85	6.267	0.00
3.44	1.31	2.82	1.37	5.031	0.00
1.74	0.89	1.57	0.75	2.152	0.03
	3.44	3.44 1.31	3.44 1.31 2.82	3.44 1.31 2.82 1.37	3.44 1.31 2.82 1.37 5.031

Table 1.0 Differences of mental health among orphan and non-orphan adolescents

Discussion and Conclusion

Mental health disorders such as depression, anxiety and stress among adolescent and early adult worldwide is currently estimated to range from 5 to 80% in different populations (Sahoo & Khess, 2010). Depression, anxiety and stress also are among major psychiatric conditions being prevalent in contemporary youth (Buzdar et al., 2015). However, previous studies have shown that adolescents living in orphanage centers suffer from mental health problems rather than non-orphan adolescents (Mohammadzadeh *et al.*, 2017a; Hashim *et al.*, 2011; Kaur & Rani, 2016; Bhat, Rahman, & Bhat, 2015).

The result of the current study, reported that orphans have emotional problems such as depression, anxiety and stress higher than non-orphan adolescents. This explained that orphan adolescents was experienced lower mental health. The results of previous studies in Malaysia also showed that orphans living in orphanage centers are more depressed (Mohammadzadeh *et al.*, 2017a) and exposed to Major Depression Disorder (MDD) (Wan Salwina *et al.*, 2014) compared to non-orphan adolescents (Hashim *et al.*, 2011; Kaur *et al.*, 2014). In addition, more than 50% of orphan adolescents have mild to severe depression (Ramli *et al.*, 2010). The result of the current study have also shown consistent findings with previous studies which is orphans have experienced higher levels of anxiety and stress than non-orphan adolescents (Mohammadzadeh *et al.*, 2017a; Wahab *et al.*, 2013; Yaacob *et al.*, 2009; Sulaiman, Hassan, Sapian, Vizata, & Saifuddin, 2009).

Besides, oversea studies revealed that orphans adolescents have experienced high depression (Kaur & Rani, 2016; Workye, 2015; Bhat *et al.*, 2015; Bhat, 2014) and exposed to behavioral problems such as aggressive and anti-social behavior (Lehmann *et al*, 2013; Simsek *et al.*, 2007) compared to adolescents who still have both parents (Akshita Singh & Suvidha, 2016; Irshad, 2015; Kumar *et al.*,

2014; Wild *et al.*, 2006). The difference of negative events experienced by orphan adolescents has caused them suffering mental health disorders such as depression, anxiety and stress (Elegbeleye, 2014; Sujatha & Jacob, 2014; Fawzy & Fouad, 2010; Thabet *et al.*, 2007) compared to non-orphan adolescents (Dorsey *et al.*, 2015; Afework, 2013; Nyamukapa *et al.*, 2010; Kaggwa & Hindin, 2010; Olley, 2008).

The negative event such as lost of parents at an early age, has caused orphan adolescents lost of parental attachment in their lives. Living in orphanages, deprived orphan adolescents from their parents attention and loves. They faced the different environment before the death of their parents (Irudayasamy, 2006). Negative outcomes are very common among orphan adolescents due to poor care-giving from guardian at orphanages (Thabet *et al.*, 2007). These situation influenced orphan adolescents to experience emotional disorders such as depression, anxiety and stress (Deutsch *et al.*, 2015; Dorsey *et al.*, 2015; Afework, 2013) compared with non-orphans adolescents who still have the opportunity to get attention, love and affection from their parents (Hashim *et al.*, 2011; Harms *et al.*, 2009).

In conclusion, the purpose of this study was to identify the difference in mental health among orphan and non-orphans in Terengganu, Malaysia. The findings of this study were in agreement with the majority of previous studies that confirmed the differences of mental health among orphan and nonorphans adolescents. The information obtained from this current study provide benefits and implications to various parties such as the State Social Welfare Department (JKM), non-governmental organizations (NGOs), parties in the orphanage care centers, teachers and other parties involved in the management of orphanages especially in Terengganu, Malaysia.

Unfortunately, there is not much reliable data and information of mental health among orphan adolescents from various categories such as "maternal orphan" (a child who has lost her/his mother), "paternal orphan" (a child who has lost her/his father), and lost both parents living in orphanage in Malaysia. Since this current study only examines orphan adolescents from "paternal orphan" (a child who has lost her/his father) and lost both parents categories, this situation makes it a major limitation to be taken by future researchers to ensure the continuity of mental health among orphan adolescents, especially in Malaysia. Further studies with different orphans in all orphanage centers in Malaysia, different ages and races as well as to use different tools are suggested to reach a reliable image of mental health among orphan adolescents Malaysia with more thoroughly and comprehensively.

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