Psychological Well-being of Orphan Students
A field study in some schools in the municipality of Warmas - El Oued

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Abstract:

The current study aimed to assess the level of psychological health among orphaned students and determine whether there are differences in the level of psychological health among orphaned students attributed to gender or the duration of orphanhood. To achieve the study's objectives and verify its hypotheses, we used a psychological health scale, which was administered to a sample of orphaned students across three educational stages (elementary, middle, and high school), consisting of 30 male and female students. The study was conducted in the municipality of Waramas (Al-Wadi), and the Arab Psychological Health Scale was utilized. The study aimed to:

- Identify the level of psychological health among orphaned students.
- Determine if there are gender differences in the level of psychological health among this group of students.
- Shed light on the impact of the duration of orphanhood on the level of psychological health among orphaned students.
- Identify psychological problems among orphaned students.
- Highlight the category of orphans in society.

Keywords: psychological health; orphan; student.

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1- Introduction:

Human beings seek happiness by satisfying their needs, starting with basic needs such as the need for food and drink, as life cannot continue without them. Then they move on to satisfy their secondary needs, including the need for achieving psychological health. The latter is also intertwined with primary needs and other subsequent needs. Psychological health is considered an important need for the development of human personality, as its roots extend from childhood and continue until old age through different life stages. However, the early life stages are more vulnerable because it is during this period that individuals acquire many healthy and unhealthy habits and behaviors that can affect their psychological well-being. Ultimately, an individual's psychological health is primarily derived from the family, parental treatment, and proper upbringing starting from early childhood.

The social, environmental, and cultural conditions play important roles in the development of psychological health in individuals. However, orphaned students are more susceptible to these conditions because they have experienced the deprivation of one or both parents. The absence or availability of a suitable family environment can disrupt the orphan's personality structure since the family is the primary nucleus for building society. It is a dynamic unit with its functions aimed at the psychological, physical, emotional, and even social growth of its children. The psychological bond formed as a result of the child's intimate and enduring relationship with their parents is fundamental in satisfying their psychological needs and requirements. The emotional attachment of parents is the cornerstone in achieving healthy development, which contributes to various aspects such as self-confidence, cooperation, excellence, balanced behavior, strong personality, and other positive traits. On the contrary, the breakdown of this bond may instill negative factors in orphaned students that affect their psychological health.

Psychological health is one of the most significant psychological problems that affect the lives of orphaned students. The absence of a suitable family environment leads to a profound disruption in the deprived individual's psychological, social, and even physical well-being. The presence of parents in a person's life plays a crucial role due to the love, affection, care, and nurturing they provide. With the absence of one or both parents due to death, the child feels deprived, lost, lonely, and experiences a diminished sense of self-worth. They can become trapped in sadness, frustration, and introversion. This upheaval affects the child's abilities and hinders their acquisition of educational experiences and skills. All of these factors can significantly impact the psychological health of orphaned students.

1-1- Research Problem:

The family is a highly private and immensely significant domain among the areas in which humans live. Since birth, the child lives their natural life within their family, which bears the responsibility of their care, protection, and upbringing in a healthy environment free from tensions and conflicts. It assists them in acquiring sound psychological and social health, provided that both mother and father are present. However, in the event of the death of one or both parents, a disturbance may occur, resulting in significant harm to the children, ranging from stress, anxiety, sadness, and depression to impaired physical, mental, and psychological development, among other manifestations.

Therefore, parents are considered to occupy a crucial position in the process of upbringing. The mother, as evident from psychological and educational studies, has a significant influence, and through this interaction, the child's psychological and biological needs are satisfied. In the case of the loss of one or both parents, due to the Allah's will, the children are classified as orphans and enter the realm of the orphaned child. This refers to a child who has lost one or both parents due to an accident or illness. Each of us has our own destiny and fate in the circumstances of life that individuals go through. However, this does not prevent the child from exhibiting signs of psychological health.

Psychological health is considered the state of well-being in which a child enjoys physical and psychological health. It is a relatively stable mental and emotional state, free from tensions, deviations, and disorders. In this state, the individual is psychologically and socially aligned with oneself and one's environment, experiencing happiness. Moreover, it is characterized by the ability to achieve self-fulfillment, utilize one's capabilities, and have self-acceptance and self-satisfaction. It also involves achieving psychological, personal, and social balance, emotional stability, and other aspects.

Psychological health is the complete or optimal harmony and adaptation between different psychological functions, along with the ability to cope with normal psychological crises that occur in a person's life while experiencing happiness and satisfaction. It affirms one's self-worth, utilizes their capabilities and potentials in a positive manner that aligns with their thoughts and beliefs. This led us to delve into scientific research and explore the level of psychological health among orphaned students, considering their psychological, emotional, and social challenges resulting from the loss of one or both parents. Given the importance of the topic addressed in the study, the following general question was posed:

- **What is the level of psychological health among orphaned students?**

Accordingly, the following sub-questions arise from it:

1. Are there statistically significant differences in the level of psychological health among orphaned students attributed to the variable of gender?
2. Are there statistically significant differences in the level of psychological health among orphaned students attributed to the variable of years of being an orphan?

1-2- Study Hypotheses:

- General Hypothesis:

  The level of psychological health among orphaned students is low.
- Subsidiary Hypotheses:

  1. There are statistically significant differences in the level of psychological health among orphaned students attributed to the variable of gender.

  2. There are statistically significant differences in the level of psychological health among orphaned students attributed to the variable of years of being an orphan.

1-3- Importance of the Study:

The importance of the study lies in the nature of the research topic, which is considered an urgent necessity that requires academic investigation. This is based on the variables of the topic, which include:

- This study contributes to researchers in the fields of psychology, education, and social sciences.
- It may serve as a reference for future research, where researchers can draw information to study this topic or related subjects.
- The study aims to understand the level of psychological health among orphaned students.

1-4- Study Objectives:

The main objective of conducting this study is to:

- Determine the extent of psychological health among orphaned students and their mood state, whether in academic achievement, family, or society.
- Identify differences in the level of psychological health among orphaned students based on their gender.
- Determine the impact of the duration of being an orphan on the psychological health of orphaned students.
- Identify the psychological problems faced by orphaned students and shed light on this specific group.

1-5- Operational Definitions

1-5-1- Psychological health: The ability of a student to harmonize with oneself and with the society they live in, experiencing satisfaction, happiness, and enjoying a life free from tensions and disturbances, filled with enthusiasm, motivation, and emotional balance. It also refers to the scores obtained on a psychological health scale.

1-5-2- Orphaned student: In this study, an orphaned student refers to an individual who is enrolled in the three education levels (primary, middle, and high school) and has lost one or both parents. They are typically between the ages of 6 and 16 and live within a family while continuing their educational studies.

1-6- Theoretical Framework:

The theoretical aspect of the study focuses on clarifying the concepts of both psychological health and orphaned students. The definitions are as follows:

Firstly: the definition of psychological health

There are numerous attempts to define psychological health when faced with behavioral disorders, and psychological health encompasses multiple meanings and definitions. The most important ones include:

- **Psychological health**: It is the complete harmony among various psychological functions, along with the capacity to cope with ordinary difficulties surrounding individuals, and the positive sense of activity and vitality.
- **Psychological health can be defined as**: "the individual's ability to experience happiness, believe in their own worth in life, form genuine relationships with others, and also their ability to return to their natural state after exposure to trauma or psychological stress. Psychological health is a complementary part of general health" (Jamal Abu Dalou, 2009, p. 34).

- **Hamed Zahran (1974) defines psychological health as**: "a positive state that includes the enjoyment of mental and physical health, rather than being devoid of symptoms of mental illness" (Sara Ghumari, 2018, p. 16).

Secondly: the definition of an orphaned student

A- Definition of a student: A student is an individual who engages in the process of learning, and they are a vital pillar in the educational process. They are its principle and objective. Moreover, modern educational processes are governed by the education system, teacher preparation, curriculum development, and textbooks that align with students' talents, levels, thinking methods, and activities.
A student is an individual who seeks knowledge or engages in educational sessions, whether in educational institutions or learning centers. They possess a drive for learning and are essential in the learning process (Amal Al-Boush, 2017, p. 78).

B- Definition of an orphan:
- **In technical terms**: An orphan is someone who has lost their father and has not reached adulthood.
- **It is also defined as:** A child whose father has passed away and has not reached the age of maturity. Once the boy reaches adulthood, he is no longer considered an orphan unless he has mental deficiency or insanity, in which case he remains under the status of an orphan and continues to receive support. As for a girl, she remains under support until she gets married, as a confirmation.

- **The United Nations Children's Fund (UNICEF**): defines an orphan as a child who has lost one or both parents during childhood and is taken care of by relatives or social institutions for their education and livelihood. An orphan is referred to as someone who has lost their father, while a "latim" is someone who has lost both their father and mother. The orphanhood status continues until the girl gets married or until the boy completes his education or reaches the age of adulthood (Rania Dridi, 2020, p. 16).

2- Methodology and Instruments of the Study:

2-1- The adopted methodology in the study:

To achieve the objectives of the study and ensure the validity of its hypotheses, a descriptive-exploratory approach was followed due to its ability to provide an accurate and objective description of the phenomenon. This approach allows for both qualitative and quantitative expressions, enabling the researcher to answer the study's questions and hypotheses and assess the level of psychological health among orphaned students.

Descriptive-exploratory methodology: This methodology is commonly used in natural and social sciences. It relies on various types of observation, as well as classification and statistical analysis, accompanied by explanation and interpretation of these processes. The descriptive approach is considered one of the most suitable research methods for understanding phenomena and extracting their characteristics (Mohammed Mohammed Qasim, 1999, p. 60).

2-2- Limitations of the Study:

2-2-1- Time limitations:

The main study was conducted during the period from May 17th to May 21st, 2023.

2-2-2- Spatial limitations:

The study was conducted in the municipality of Waramas (El-Oued). It was implemented in the primary school (Bashir Rizki), the middle school (Hareez Al-Tajani), and the high school (Shawya Al-Jabari).

2-2-3- Human limitations:

The study included 30 orphaned students, consisting of 16 females and 14 males. They were also categorized based on the duration of orphanhood as follows: less than one year of orphanhood, more than one year of orphanhood, and more than two years of orphanhood. These categories were specified to provide further insight into the study as shown in the table below:

Table (1) : shows characteristics of the study sample

Sex	Orphanhood Period	Less than a year	More than a year	More than two years and older
14 Male		2	4	8
16 Female		6	2	8
30		8	6	16

2-3- Study sample:

The study sample was selected from students enrolled in the three levels (primary, middle, and high school) in the municipality of Waramas (El-Oued). The sample consisted of 30 orphaned students, including 16 female students and 14 male students. In this study, a purposive sample, also known as a purposeful sample, was utilized.

This sample was named as such because the researcher selects it according to the specific purpose they aim to achieve through the research. The selection is based on the availability of certain characteristics in the sample, which are the same characteristics that exist in the target population of the research (Mohammed Sarhan, 2019, p. 176).

2-4- Data collection tools:

The data collection tool used in this study was the primary instrument, which is:

• The Arabic Scale for Mental Health:

- Description of the scale:

This scale was developed by Abdul Khaleq (2016). It consists of 40 items, all of which are positive indicators of mental health. Each item is formulated in an affirmative manner rather than negation. The scale includes five response alternatives (Always - Often - Sometimes - Rarely - Never).

Thus, the final version of the Arabic Scale for Mental Health consists of 40 positive items without any negation formulation. These items are distributed across six dimensions.

Table (02): Illustrates the dimensions of mental health according to the Arab Scale of Mental Health.

figure	Dimension	Paragraph numbers	Number of paragraphs
1	satisfaction	1, 3, 4, 6, 40	5
2	Self-confidence	2, 11, 14, 16, 28, 33, 35, 36, 38	9
3	Optimism	5, 8, 17, 19, 29, 30	6
4	gladness	7, 9, 10, 12, 20, 22, 39	7
5	Purpose of Life	23, 24, 26, 27, 37	5
6	Stability	13, 15, 18, 21, 25, 31, 32, 34	8
7	Overall Degree of Mental Health	1-40	40

- **Satisfaction**: It is a general evaluation of life circumstances, derived from comparing an individual's aspirations with their actual achievements. It can also be defined as having a positive orientation towards life.
- **Self-confidence**: It refers to an individual's self-perception of their abilities and capacities to face different circumstances in life. This confidence grows through the attainment of personal goals, starting with thoughts in the individual's mind and manifesting in reality through planning and utilizing past experiences.
- **Optimism**: In the broader sense, optimism in the Arabic language means expecting good things to happen. It is a hopeful outlook towards the future, where individuals anticipate the best, await positive outcomes, and strive for success, excluding any other possibility.
- **Joy**: It is the expansion of the chest with immediate pleasure, often associated with physical and worldly pleasures. It is synonymous with happiness and cheerfulness.
- **Purpose of life**: It is a state that individuals strive to achieve in order to give their lives value and significance worth living for. It occurs as a result of satisfying their fundamental motivation, which is the will for meaning.
- **Psychological stability:** It is the individual's sense of tranquility, self-acceptance, and harmony with oneself and others. It involves tolerance, simplicity, and spontaneity in dealing with oneself and others, as well as a sense of physical and mental well-being (Hana Ghazi, 2022, p. 52).

5-2 The statistical methods adopted in the study:

Any researcher resorts to statistical methods that help them obtain data and results through which they analyze the phenomenon under study. In this study, the Statistical Package for the Social Sciences (SPSS) was used. The data was encoded, entered into the computer, and processed using the following techniques:

2-5-1- Descriptive and inferential statistics:

- Frequencies and percentages.
- Mean and standard deviation.
- Histograms.

5-2-2- Inferential statistics:

- Chi-square test (Chi-square test) to examine the significance of differences in levels of mental health among orphaned students.
- Independent samples t-test to determine the significance of differences in mental health scores based on gender (males/females) among orphaned students.
- One-way analysis of variance (ANOVA) to examine the significance of differences in mental health scores among orphaned students based on duration of orphanhood (one year or less/two years or less/more than two years).
- Scheffe's test for pairwise post hoc comparisons between unequal-sized groups.

3- Discussion of Results:

3-1- Presentation and analysis of the study results:

3-1-1- Presentation and analysis of the results of the first hypothesis: The majority of orphaned students exhibit a low level of mental health.

To test this hypothesis, we conducted a Chi-square test of goodness of fit. After ensuring the assumptions and conditions of the Chi-square test, the results were as follows: (Please note that the letter "t" is an abbreviation for frequencies in the table (01)).

Table (03): Significance of differences in levels of mental health among orphaned students.

Levels of mental health	t	%	Ka^2 value	Df	P-value	Statistical significance
Low mental health	8	27	5.60	2	0.06	**Non-function**
Moderate mental health	6	20				
High mental health	16	53				
Total	30	100				

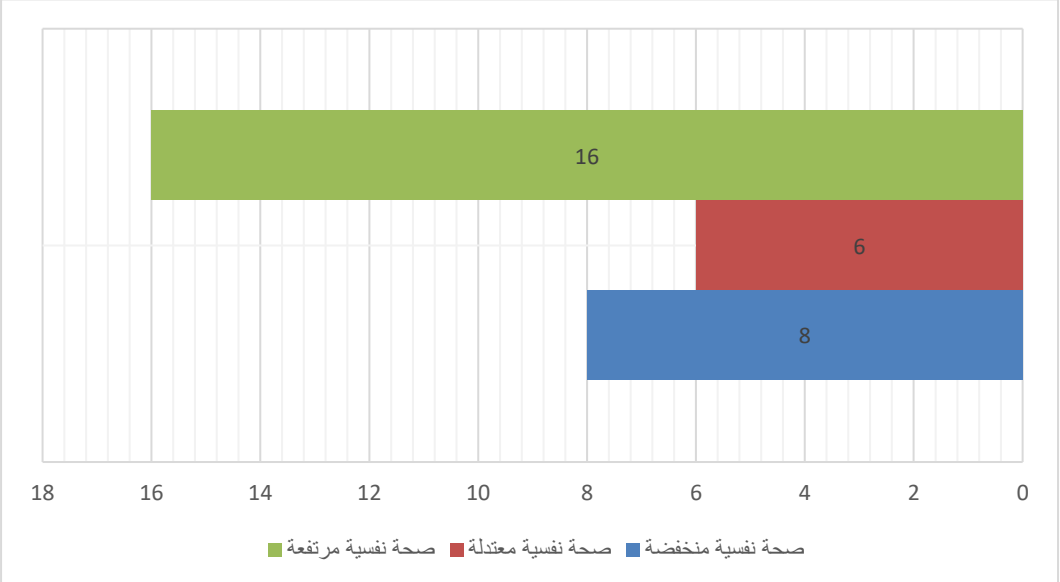
From Table (03), it is evident that the difference in levels of mental health among orphaned students is not statistically significant. This is supported by the calculated Chi-square value of 5.60, which is smaller than the tabulated Chi-square value of 5.99, with a probability value of 0.06 greater than the significance level (α). Therefore, the difference observed in the levels of mental health among orphaned students is not meaningful.

To clarify further, we find that the highest frequency among orphaned students is in the high level of mental health category, estimated at 16 students with a percentage of 53%. On the other hand, the low level of mental health category has a frequency of 8 students, accounting for 27%. The moderate level of mental health category has a frequency of 6 students, representing 20%.

These results lead us to reject the first hypothesis stated as: "The majority of orphaned students exhibit a low level of mental health".

The following figure graphically represents the levels of mental health among orphaned students.

Figure (01): Levels of Mental Health Among Orphaned Students.



From Figure (01), it is evident that the highest frequency among orphaned students is in the high level of mental health category, estimated at 16, followed by the low level of mental health category with a frequency of 8. The moderate level of mental health category has a frequency of 6 among orphaned students.

3-1-2- Presentation and analysis of the results of the second hypothesis: There are statistically significant differences at the significance level (α) between male and female orphan students on the mental health scale.

To verify this hypothesis, we conducted an independent samples t-test, and after confirming the assumptions and conditions of the t-test, the following table illustrates the test results and statistical significance:

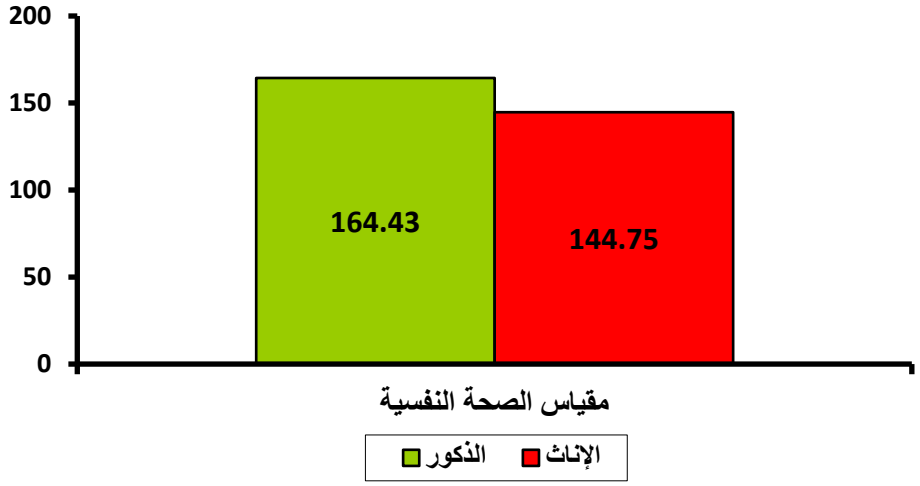
Table (04): Significance of the differences between the means of male and female orphan students on the mental health scale.

Mental Health Scale	Sample n	Arithmetic mean $\bar{X}$	Standard deviation S	Average spreads	TC value	P-value	Statistical significance
Male	14	164.43	23.82	19.68	2.02	0.053	**Non D**
Females	16	144.75	28.78				

It is evident from the data in Table (04) that the average scores of male orphan students on the mental health scale are (164.43) with a standard deviation of (23.82), while the average scores of female orphan students on the mental health scale are (144.75) with a standard deviation of (28.78). The result of the t-test (2.02) is less than the tabulated t-value (2.05), with a calculated probability value (0.053) greater than the significance level (α). This indicates that the gender difference (male/female) does not lead to variation in the scores measuring the mental health of orphan students. This result leads us to reject the second hypothesis, which states that there are statistically

significant differences at the significance level (α) between male and female orphan students on the mental health scale.

Figure (02): Displays the average scores of male and female orphan students on the mental health scale.



It is evident from Figure (02) that the average scores of male orphan students on the mental health scale (164.43) are relatively higher than the average scores of female orphan students on the mental health scale (144.75).

3-1-3- Presentation and analysis of the results of the third hypothesis: There are statistically significant differences at the significance level (α) among orphan students on the mental health scale attributed to the duration of orphanhood. To verify this hypothesis, we conducted a one-way ANOVA test, and after confirming the assumptions and conditions of the F-test, the following table illustrates the test results and the statistical significance.

Table (05): Results of the one-way ANOVA analysis for the significance of differences in the means of orphan students on the mental health scale attributed to the duration of orphanhood.

Mental Health Scale	Sample n	Arithmetic mean $\bar{X}$	Standard deviation S	P value (fc)	P-value	Statistical significance
One year or less	8	131.25	31.62	5.03	0.014	**function**
Two years or less	6	154.00	33.48			
More than two years	16	165.25	16.18			
Total	30	153.93	27.97			

It is evident from Table (05) that the average scores of orphan students on the mental health scale, with an orphanhood duration of more than two years, were 165.25 with a standard deviation of 16.18. This is followed by the average scores of orphan students with an orphanhood duration of two years or less, which were 154 with a standard deviation of 33.48. Lastly, the average scores of orphan students with an orphanhood

duration of one year or less were 131.25 with a standard deviation of 31.62. The result of the F-test (5.03) is greater than the tabulated F-value (3.35), with a calculated probability value (0.01) smaller than the significance level (α). This indicates that the difference in orphanhood duration (one year or less / two years or less / more than two years) leads to variation in the scores measuring the mental health of orphan students. This result leads us to accept the third hypothesis, which states that there are statistically significant differences at the significance level (α) among orphan students on the mental health scale attributed to the duration of orphanhood.

And the question that comes to mind is: In favor of what do these differences point? This is after obtaining statistically significant differences between the means of mental health measurement scores for orphan students attributed to the duration of orphanhood (one year or less / two years or less / more than two years).

To answer this question, we compare the means of mental health measurement scores for orphan students attributed to the duration of orphanhood (one year or less / two years or less / more than two years), and the following table presents the results of the post hoc comparisons.

Table (06): Significance of post hoc comparisons between the means of mental health measurement scores for orphan students according to the duration of orphanhood.

	Orphanhood Period	Sample N	Arithmetic mean $\bar{X}$	Difference on average	P-value	Statistical significance
Mental Health Scale	One year or less	8	131.25	22.75	0.22	Non S
	Two years or less	6	154			
	One year or less	8	131.25	34	0.01	S
	More than two years	16	165.25			
	Two years or less	6	154	11.25	0.61	Non S
	More than two years	16	165.25			

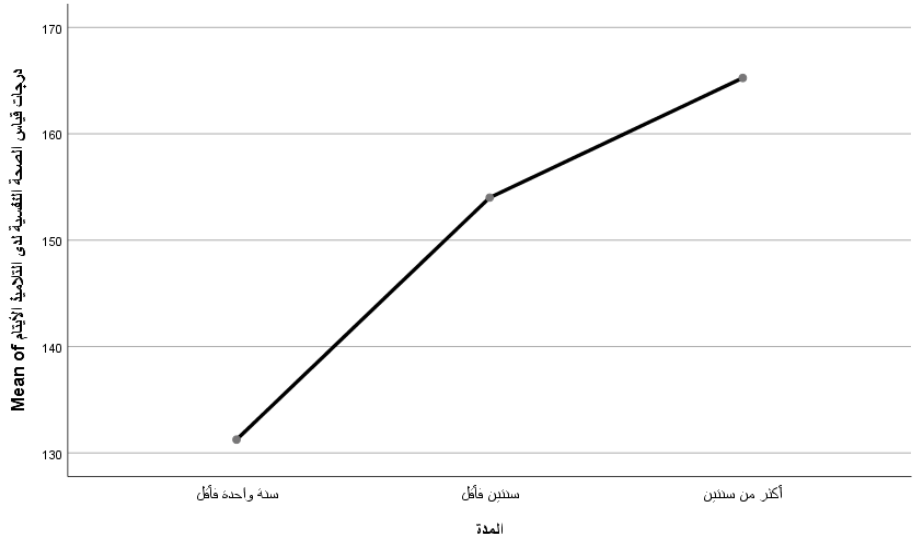
It is evident from Table (06) that the difference between the average scores of orphan students on the mental health scale, with an orphanhood duration of one year or less, and the average scores of orphan students with an orphanhood duration of two years or less, was 22.75. This difference is not statistically significant, with a calculated probability value of 0.25, which is greater than the significance level (α). This indicates that the difference in orphanhood duration (one year or less / two years or less) does not lead to variation in the scores measuring the mental health of orphan students.

However, the difference between the average scores of orphan students on the mental health scale, with an orphanhood duration of one year or less, and the average scores of orphan students with an orphanhood duration of more than two years, was 34. This difference is statistically significant, with a calculated probability value of 0.01, which is smaller than the significance level (α). This indicates that the difference in

orphanhood duration (one year or less / more than two years) leads to variation in the scores measuring the mental health of orphan students.

Finally, we find the difference between the average scores of orphan students on the mental health scale, with an orphanhood duration of two years or less, and the average scores of orphan students with an orphanhood duration of more than two years, was 11.25. This difference is not statistically significant, with a calculated probability value of 0.64, which is greater than the significance level (α). This indicates that the difference in orphanhood duration (two years or less / more than two years) does not lead to variation in the scores measuring the mental health of orphan students.

The following figure (03) : presents the graphical differences between the average scores of orphan students on the mental health scale attributed to the duration of orphanhood (one year or less / two years or less / more than two years).



It is evident from figure (03) that the average scores measuring the mental health of orphan students with an orphanhood duration of more than two years was 165.25, which is the highest, followed by the average scores of orphan students with an orphanhood duration of two years or less, which was 154, and finally the average scores of orphan students with an orphanhood duration of one year or less was 131.25.

3-2- Interpretation and Discussion of the study results:

3-2-1- Interpretation and Discussion of the First Hypothesis:

By presenting the first hypothesis, which states that "the majority of orphan students have a low level of mental health," and presenting its results, it becomes apparent that the difference in levels of mental health among orphan students is not statistically significant. This is evidenced by the calculated chi-squared value (5.60) being smaller than the tabulated chi-squared value (5.99), and with a probability value of (0.06) greater than the significance level (α). This means that the difference in mental health levels among orphan students is not significant. It is also found that the level of mental health among orphan students can also be high. Therefore, a low level of mental health is not necessarily completely associated with orphan students. This study has shown that the majority of those who support orphan students, such as family, friends, teachers,

and associations, are striving to meet their psychological, social, and biological needs. Additionally, some orphan students are also fully aware of their needs.

Their needs, they achieve a high level of mental health by themselves, through their perception and complete acceptance and satisfaction with their surroundings, achieving happiness for themselves through simple means, feeling optimistic and expecting the best in the future. They also have a strong will and high self-confidence in achieving goals, starting with ideas in their minds and finding their way into reality through planning, regardless of the circumstances they live in. This aligns with the study by Wolf (1979), which concluded that the death of a parent in childhood does not in itself lead to later maladjustment. Providing families with concepts that explain and interpret the idea of death or orphanhood helps overcome feelings of grief and minimizes the possibility of psychological disorders.

On the contrary, we may find that a group of students who live with their families may have low mental health due to pressures and problems between parents, lack of stability within the family, and a lack of security. There are many examples of this in our daily lives.

3-2-2- Interpretation and Discussion of the Second Hypothesis:

The second hypothesis states that "There are statistically significant differences in the level of mental health among orphan students attributed to the gender variable." The results of this hypothesis indicate that when comparing the means of orphan male students (164.43) and orphan female students (144.75), we notice that there are only slight differences in their levels of mental health. Therefore, this indicates homogeneity between orphan male and female students. Additionally, comparing the standard deviations of males (23.82) and females (28.78) shows that there are only slight differences, suggesting that gender difference (males/females) does not lead to variations in the measurement of the level of mental health among orphan students.

This could be attributed to the family or those around them in achieving mental health between genders, by providing and meeting their psychological and physical needs within or outside the families of orphan students regardless of their gender. A suitable family atmosphere and a healthy social environment help orphan students of both genders to achieve satisfaction, stability, and the realization that life has meaning. Orphan students, whether male or female, may have developed maturity, awareness, a strong personality, self-confidence, and self-reliance in achieving good mental health.

Our study is consistent with the study of Mohamed Ikhlas (1998), which also found no statistically significant differences between male and female students who are the children of deceased mothers in terms of personal and social compatibility.

3-2-3- Interpretation and discussion of the results of the third hypothesis:

The results of this hypothesis, which states "There are statistically significant differences in the level of mental health among orphan students attributed to the variable of years of orphanhood," indicate that the duration of orphanhood has an impact on the mental health of orphan students. In this study, the years of orphanhood were categorized as (one year or less, two years or less, and more than two years). To test this hypothesis, a one-way analysis of variance (ANOVA) was conducted.

The results showed that the average scores of orphan students on the mental health scale, who had been orphans for more than two years, was 165.25. The average scores of orphan students who had been orphans for two years or less was 154, and finally, the average scores of orphan students who had been orphans for one year or less was 131.25.

From these results, it is evident that there are differences among the groups. The standard deviation for orphan students on the mental health scale, who had been orphans for more than two years, was 16.18, while the standard deviation for orphan students who had been orphans for two years or less was 33.48, and the standard deviation for orphan students who had been orphans for one year or less was 31.62. This indicates that the differences in the duration of orphanhood (one year or less, two years or less, and more than two years) lead to variations in the levels of mental health among orphan students.

To determine the significance of the differences, after comparing the means of the mental health scale scores among orphan students with different durations of orphanhood (one year or less / two years or less / more than two years), and as presented in Table (5) displaying the post-hoc comparisons, the results were as follows:

- The difference in the duration of orphanhood between the categories (one year or less / two years or less) does not lead to variation in the mental health scale scores among orphan students, because the two durations are very close and do not constitute a clear difference in the level of mental health in this group.
- The difference in the duration of orphanhood between the categories (one year or less / more than two years) leads to variation in the mental health scale scores among orphan students, because there is a wide difference between the two durations. The average mental health scale score for orphan students with a duration of orphanhood of one year or less was 131.25, while the average mental health scale score for orphan students with a duration of orphanhood of more than two years was 165.25. The difference in the average score was 34. These results indicate a significant difference in favor of the duration of orphanhood.
- The difference in the duration of orphanhood between the categories (two years or less / more than two years) does not lead to variation in the mental health scale scores among orphan students. Similarly, these two durations are very close, and they also do not constitute a clear difference in the level of mental health for this study group.

4- Conclusion:

Through examining the topic of mental health among orphan students, it was concluded that the majority of orphan students exhibit a high level of mental health. Additionally, it was found that there were no statistically significant differences attributed to the gender variable, but there were statistically significant differences attributed to the variable of years of orphanhood. Based on these results, the following recommendations are proposed:

- Conduct more in-depth and comprehensive studies that link mental health with other variables.
- Raise awareness among orphan students regarding their mental health by recognizing their true potential and teaching them skills for planning a healthy future.

- Support and extend assistance to charitable organizations that care for orphans to continue their humanitarian service.
- Conduct further research and studies in the field of mental health among orphan students.
- Shed more light on the orphan category in society.
- Develop programs to improve mental health for different groups in society, such as individuals with special needs.

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