



AMERICAN UNIVERSITY OF BEIRUT

THE RELATIONSHIP BETWEEN PERCEIVED  
SOCIAL SUPPORT AND PSYCHOLOGICAL WELL-BEING  
AMONG ADOLESCENT ORPHANS:  
THE CASE OF AN ORPHANAGE IN LEBANON

by  
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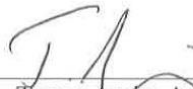
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# ABSTRACT

## OF THE THESIS OF

Hala Camille Sarieddine

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Title: THE RELATIONSHIP BETWEEN PERCEIVED SOCIAL SUPPORT AND PSYCHOLOGICAL WELL-BEING AMONG ADOLESCENT ORPHANS: THE CASE OF AN ORPHANAGE IN LEBANON

Although existing research has revealed a relationship between social support and psychological well-being among youth, this relationship has not been explored enough among students living in orphanages. The purpose of this study was four-folds: (a) to describe the nature of social support provided by the orphanage to its students; (b) to understand how adolescent students perceive social support from the main sources (i.e., parents, teachers, and peers); (c) to determine the specific sources of support (i.e., parent, teacher, or peers) most predictive of well-being outcomes; and (d) to investigate gender differences in the relationship between multiple sources of support on psychological well-being among adolescent students residing at an orphanage. A mixed methods approach and a correlational research design were used to conduct this study. The participants included a total of 160 adolescent students who live and go to school at an orphanage in Lebanon. The resulting data were analyzed using regression and thematic analysis techniques. The results of the hierarchical linear regression indicated that social support from teachers, classmates, and people in my school were statistically significant predictors of well-being, while parents and close friends were not significant predictors of well-being. Gender was neither a statistically significant moderator of social support, nor a statistically significant main effect. On the other hand, six qualitative themes were identified: support from teachers and supervisors and the specific subthemes in relation to this theme were: (a) material support, (b) academic support, (c) advice and conflict resolution, and (d) emotional and moral support. The second theme was support from friends and in this regard, participants mentioned two types of support: (a) academic support and (b) emotional and moral support. The third theme was support from counsellors, participants mentioned (a) emotional and moral support and (b) advice. The fourth theme was health support and saw no subthemes as well as theme five pertaining to self-support. Lastly, in theme six of evaluation of support, participants mentioned (a) physical abuse should be addressed (b) emotional and moral support should be improved (c) more activities organized and (d) rules and policies should be revised.

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# CHAPTER 1

## INTRODUCTION

The current study centered on the perceived social support and psychological well-being as experienced by adolescent students living in orphanages. Through this mixed-methods and correlational study, the researcher aimed to provide insight into the experiences of students living at an orphanage in Lebanon. Although existing research has been conducted on the topic of the association between social support and psychological well-being among youth, this relationship has not been explored among students living in orphanages (Ryan, Kalil, & Leininger, 2009). Determining the nature of social support perceived by orphans and how it affects their psychological well-being may lead to recommendations for improved support and outcomes in orphanages. In the long term, orphans could be better assisted if the proper social support is determined and provided.

The first chapter will serve as an introduction to the current study. First, the researcher provides background information about the topic of this research. Subsequently, the researcher presents the problem statement and the purpose of the study followed by a discussion of the central research questions and hypotheses, as well as the nature of the study. Definitions that were central to this research are presented, as well as the assumptions associated with this research, and the scope, delimitations, and limitations of the study. The researcher presents the significance of this research to demonstrate the need for the current research study. A summary concludes this chapter.

## **1.1. Background**

Adolescence is the time of key changes in family and social relationships. To elaborate, this time includes marked changes in the relationships that adolescent considers his or her main sources of support. The support network is, without a doubt, one of the adolescent's main resources for coping with change and new situations (Hombrados-Mendieta, Gomez-Jacinto, Dominguez-Fuentes, Garcia-Leiva, & Castro-Travé, 2012). In addition, school is an important and relevant social context, as adolescents spend much of their time at school in the company of teachers and classmates. Experiences at school profoundly affect the development of adolescents, as well as their views, attitudes, and social relationships. Although researchers have shown that social support is an important predictor of psychological well-being in children and young people (Ryan et al., 2009), what literature leaves unclear is the issue of the amount and type of perceived support during adolescence.

The traditional responsibilities of schools and educators have primarily centered on promoting achievement and academic success within children. Attending to the socio-emotional needs of students is often a secondary aim within the school setting, despite evidence showing the critical linkage between socio-emotional health and students' development and academic success (Stewart & Suldo, 2011). This lack of focus on students' socio-emotional needs may be responsible for gaps in service provision. Specifically, epidemiological researchers have indicated that although 20% of school aged students exhibit symptoms consistent with the psychological disorders as indicated in the Diagnostic and Statistical Manual of Mental Disorders, Fourth Edition (DSM-IV), relatively few youths are identified as having problems or receive psychological care (Costello, Mustillo, Erkanli, Keeler, & Angold, 2003). In other

words, the provision of effective mental health care is crucial, as psychological problems during adolescence may significantly impair development and achievement.

Social support is an expansive construct that describes the physical and emotional comfort given to individuals by their family, friends, and other significant people in their lives (Stewart & Suldo, 2011). Through interactions with others, the basic needs of people are met; more importantly, however, these social relationships act as buffers for life's stressors, thereby promoting one's general well-being. Accordingly, multiple sources—such as family, friends, neighbors, peers, and teachers—must be taken into account when examining this vast construct. Previous researchers have shown that actual receipt of social support is not necessary for achieving beneficial outcomes; the perception that one has received support is often adequate, a phenomenon that researchers have identified as perceived social support (Stewart & Suldo, 2011).

Although the importance of social support in promoting the psychological well-being—in addition to promoting other aspects, such as the physical health, mental health, and academic achievements—of adolescents is very well documented, little is known about the buffering role of social support among students living in an orphanage. The need for social support is compelling for orphans who have lost one or both their parents, and for children with other orphan-related characteristics such as children from broken families, children from families facing social and financial difficulties, and children who have no care from family members, and thus have no choice but to be admitted to some sort of care institution. In light of the above, the current study centered on the relationship between perceived social support and the psychological well-being of adolescent students residing at an orphanage in Lebanon.

The orphanage is a non-profit, social philanthropic institution for public service. It is presently in the care of a board of trustees which was recognized in the administrative decree by the Ministry of the Interior. The orphanage provides orphans, children of broken homes, and socially difficult cases—of both genders—with lodging, food, clothing, and schooling. These services are provided in seven buildings belonging to the institution, and benefit over 450 children between 3 and 21 years of age from all religions. The orphanage does charge a minimal tuition fee for students; however, the socio-economic background is always taken into consideration, and only a few are charged. The criteria to be admitted to the orphanage includes a certificate of death of either parent, a divorce certificate, a medical report in case of a disability of either parents, and a certificate from the mayor of the village or town of residence in case of extreme financial difficulties. In certain cases, where no official documentations are present, the orphanage conducts its own investigation to make sure that the case truly deserves assistance.

Living spaces consist of large dormitories. They are well-lit, heated, ventilated, and provided with simple but comfortable bedsteads and beddings, as well as closet space for each individual. The dormitories are divided into two sections, one for boys and one for girls, and each of the sections is subdivided by age groups. Close to the dormitories are situated the bathing and sanitary facilities, which are provided with hot water all year long, as well as laundering facilities. The orphanage provides the children and staff with three meals a day, as recommended by the World Health Organization (WHO, 2014). A bakery has recently been established and is under strict quality and health control. The school caters for students from kindergarten to grade 9 or what is equivalent to a Brevet in the Lebanese system. Next to the main campus, stands a

vocational school, which consists of a modern building comprising dormitories, classrooms, a laboratory, and a workshop space. Although admission priority is given to the orphanage's school, a few day students are also admitted. It provides teaching and training in business administration, general mechanics, general electricity, and electronics. Its main languages are Arabic and English, with French as an additional language taught for 4 hours a week to the students of business administration. Three physicians offer their free services intermittently to the orphanage, and only one of them is paid for his services. It is also noteworthy that the orphanage receives many proposals from physicians who offer their free services. In addition, a volunteer psychologist visits the orphanage on a weekly basis. This year, the orphanage hired two full-time counselors who coordinate with the volunteer psychologist. Based on the observations of the director, only those who are facing severe difficulties get to see the visiting psychologist. The orphanage has a dispensary that is officially licensed by the Ministry of Health. Furthermore, all students, teachers, and personnel of the orphanage are covered by a group accident insurance plan. The orphanage also comprises of a theater hall large enough for 350 spectators where recreational activities are conducted for the students, such as music, plays, and lectures. The orphanage has six playgrounds, three of which are covered for sports activities throughout the year.

Electricity is provided for the whole orphanage by "Electricité du Liban." When the power is off, power-generating units belonging to the orphanage take over. Fuel is provided from the local market. Due to the inadequacy of its water supply, the orphanage has had to dig an artesian well in order to cut high water costs. In addition, two very large water tanks have been built in the new building. Thus, it is adequately supplied with power and water. The orphanage and the vocational school rely entirely



on donors' contributions, small assistance from the Lebanese government, and some philanthropic organizations. All contributions, whether in cash or in resources, are listed in the monthly newsletter, which carries and shows all incomes and expenses, along with the activities conducted in the orphanage. The orphanage and the schools are administered by the Administrative Director, the Treasury, the Comptroller, and the Chairmen of the teaching sections. The Administration is supervised by the Board of Trustees, who develop plans for improving the various services of the orphanage and prepare projects for the future implementation.

## **1.2. Statement of the Problem**

In recent years, and across the globe, an increasing number of studies, seminars, and events have taken to heart the issue of successful outcomes for students residing at orphanages (Weissberg & Owen, 2005). According to Davig and Spain (2003), the first year and especially the first month are crucial for residing students' sense of perseverance, as it is extremely important for such institutions to provide adequate social support that assists in the psychological well-being of those students. Consistent and reliable social support can mean the difference between a child developing into an emotionally well-adjusted young adult or experiencing significant mental distress, depression, and other psychological challenges (Caserta, Punamäki, & Pirrtiliä-Backman, 2016a). A lack of social support or other resources within orphanages can lead youth to leave before they are of legal age.

Youth who leave orphanages before they are of legal age often lack significant social and cultural capital and must overcome additional obstacles leading into adulthood (Meli, 2015). Orphans can be psychologically traumatized depending on the

circumstances and timing of their parents' death, making the support of childcare professionals, mentors, and counselors essential (Meli, 2015). Orphans are more likely than the general population to have low educational attainment, which also means they are more likely to experience lower socioeconomic status and less favorable health outcomes over their lifetimes. Thus, orphans who drop out of school before they are of legal age are placing themselves in a particularly vulnerable situation and are predisposed to additional hardship (Birungi, 2017).

In many societies, a post-secondary degree is considered an important accomplishment and means of securing a job which provides more than the minimum resources required to sustain oneself (Ellis, 2006). According to the Organization for Economic Cooperation and Development countries (OCED), one third of new entrants leave the orphanage without a degree (Caserta et al., 2016b). In France, for example, 40% of new orphans do not continue at the orphanage until legal age. In comparison, 25% to 30% of Swiss orphans at the same level run away from the orphanage (Caserta et al., 2016b). The above findings, in addition to gaps in existing literature, have necessitated further research to better understand the relationship between perceived social support and the psychological well-being among adolescent students in Lebanese orphanages, as well as gender differences pertaining to perceived social support and well-being among adolescent students in Lebanese orphanages. Determining the nature of the social support experienced in Lebanese orphanages may provide insight into whether it is possible to improve outcomes for orphans through new or enhanced means of social support.

### **1.3. Purpose of the Study**

The purpose of this study focused on four aspects: (a) to describe the nature of social support provided by the orphanage to its students; (b) to understand how adolescent students perceive social support from the main sources (i.e. parents, teachers, and peers); (c) to determine the specific sources of support (i.e., parent, teacher, or peers) most predictive of well-being outcomes; and (d) to investigate gender differences in the relationship between multiple sources of support on psychological well-being among adolescent students residing at an orphanage.

### **1.4. Research Questions**

The researcher developed the following research question and sub-questions to guide this study.

RQ1: What is the relationship between perceived social support and the psychological well-being of adolescent students residing at an orphanage in Lebanon?

RQ1.1: How is social support from primary sources (i.e., parents, teachers, and peers) perceived by adolescent students residing at an orphanage in Lebanon?

RQ1.2: How does gender affect the relationship between perceived social support and the psychological well-being of adolescent students residing at the orphanage?

## 1.5. Theoretical Framework

The theoretical framework of this research includes Bronfenbrenner's (1977) socio-ecological theory and Barrera's (1986) social support theory. Socio-ecological theory describes how human behavior and development are shaped by social environments, which, in turn, are also influenced by human behavior. According to this theoretical perspective, there are multiple spheres of influence within social environments that influence human behavior. The different levels included in Bronfenbrenner's (1977) model are individual, interpersonal, organizational, community, and public policy. Different factors and aspects of behavior are influenced by different spheres; the development of cultural values, for instance, is influenced by the community sphere, while the individual sphere influences personal knowledge and attitudes (Bronfenbrenner, 1977). In Bronfenbrenner's ecological model, the mesosystem comprises the interrelations among major settings containing the developing individual at a particular point in his or her life. The interaction among family and school are within the mesosystem and both are equally relevant contexts. In the context of the current study, socio-ecological theory will be a useful tool to frame the influence of perceived social support and other elements of the participating adolescent students' social environment in relation to their psychological well-being.

The second component of the theoretical framework is social support theory, which centers on the subjectivity of individuals' experiences and the role of social support. According to Barrera (1986), the term *social support* is used broadly and vaguely to refer to multiple related concepts that can be empirically evaluated. Rather, Barrera (1986) distinguished between the related concepts of social embeddedness, perceived social support, and enacted support. Social embeddedness refers to social

connections with others across various social environments. Perceived social support describes the cognitive self-appraisal of the extent of one's available and reliable sources of social support. Lastly, enacted support describes actions and behaviors that are clear indications of providing support or assistance (Barrera, 1986). During this research, social support theory will be used to frame and delineate the different forms of social support that are available to participants.

### **1.6. Nature of the Study**

The researcher conducted this study using mixed methods and a correlational research design. The mixed methods approach was selected in order to most effectively address the research questions, wherein the qualitative component of this research provided insight into the experiences and perceptions of the participants, while the quantitative component elucidated the nature of the relationship between perceived social support and psychological well-being as experienced by the participants. Correlational research is usually performed to determine whether two or more variables are related (Price, Chiang, & Jhangiani, 2015). A correlational design was appropriate for this study because the researcher's aim was to determine the relationship between the variables of perceived social support and psychological well-being among participants. The participants included 160 adolescent students, the whole sample size, who are residing and receiving their education at an orphanage in Lebanon. Participants took part in semi-structured interviews and completed a questionnaire. The resulting data were analyzed using regression and thematic analysis techniques.

## 1.7. Definitions

The following definitions are provided due to their relevance to the topic of the present study:

**Social support.** Social support describes the actuality or perception that an individual has a network of supportive individuals, is cared about, and has help available to them when needed (Davila & Levy, 2006).

**Psychological well-being.** Psychological well-being describes the degree to which individuals have positive interpersonal relationships, personal autonomy, personal skills, a sense of purpose, and development on a personal level (Rueger, Malecki, & Demaray, 2008a).

## 1.8. Assumptions

As with any research, assumptions are associated with this study. First, the researcher assumed that all participants would answer the questionnaire and interview questions honestly and to the best of their ability. The researcher advised the participants that they had the opportunity to leave the study and revoke their participation at any time if they felt uncomfortable. The researcher constantly reminded the participants that they would remain anonymous when the results are published. Additionally, the researcher assumed that data gathered through interviews and questionnaires would be sufficient to address the four components of the purpose of this research. The interview protocol was semi-structured to ensure that sufficient detail was gathered and follow-up information could be obtained.

### **1.9. Scope and Delimitations**

The scope of this research was limited to the examination of the relationship between perceived social support and psychological well-being among students living in an orphanage in Lebanon. The only other variable examined within the context of the aforementioned relationship was gender. The researcher chose this focus due to an existing gap in the research pertaining to the relationship between perceived social support and psychological well-being for students living in orphanages (Ryan et al., 2009); existing researchers have highlighted the importance of social support for the well-being of adolescents (Hombrados-Mendieta et al., 2012). Thus, it was important to understand how the experience of being an orphan or living in an orphanage may affect how social support is perceived, as well as how it affects psychological well-being.

### **1.10. Limitations**

Research is affected by limitations which are outside of the researcher's control. First, findings pertaining to gender differences may have been affected by an unequal number of male and female participants taking part in the study. The selected sampling procedures resulted in this limitation, despite efforts to recruit approximately the same number of male and female participants. Additionally, the young age of participants could have potentially affected their comprehension of the interview and questionnaire items. Both the interview protocol and questionnaire items were simplified and reviewed by other researchers to gather additional opinions about how easily both may be comprehended by participants.

### **1.11. Significance**

The significance of the current study was its contributions to existing literature by investigating the relationship of perceived social support and the psychological well-being of adolescent students residing at the orphanage in Lebanon, moderated by gender. Moreover, the other purpose was to examine both independent and unique effects in the association of multiple sources of social support on several outcomes in adolescence. The findings of this study also provided significant insights into differences in perceived social support from multiple sources among this under-researched population. Once completed and reported, the findings of this study may help stimulate the orphanage's administration to assist teachers and non-instructional members of staff to increase the levels and quality of support in order to alleviate mental health distress. Interventions such as peer support groups, social skills training for isolated and shy teenagers, positive peer culture interventions, and teacher mentorship could be most effective for the enhancement of psychological well-being.

Previous researchers have presented promising evidence of the importance of social support in promoting the physical and mental health of children and adolescents (Caserta et al., 2016b). Empirical researchers have consistently shown that social support is an important predictor of psychological well-being in children and young people (Rueger et al., 2008a). In addition, there is strong evidence in the literature on gender differences in how boys and girls perceive and utilize support (Rueger et al., 2008a). The current researcher, however, found no studies relating to the importance of the relationship between the perceived social support and psychological well-being among adolescent students residing at an orphanage, or how gender may affect this



relationship. The findings of the current study may expand existing literature by examining this relationship within an under-researched population.

### **1.12. Summary**

In summary of this chapter, the current study centered on perceived social support and psychological well-being as experienced by adolescent students living in orphanages. Although existing research has been conducted to determine the relationship between social support and psychological well-being among youth, this relationship has not been explored among students living in orphanages (Ryan et al., 2009). A mixed methods approach and a correlational research design were used to conduct this study with 160 adolescent students who live and go to school at an orphanage in Lebanon. The resulting data were analyzed using regression and thematic analysis techniques. The following chapter, Chapter 2, contains a review of literature which is relevant to the present research.

## CHAPTER 2

### REVIEW OF THE LITERATURE

The second chapter of the study contains the review of the previous reports on the research subject. There were four specific purposes in performing the current research study: (a) to describe the nature of social support provided by the orphanage to its students; (b) to understand how adolescent students perceive social support from the main sources (i.e. parents, teachers, and peers); (c) to determine the specific sources of support (i.e., parent, teacher, or peers) most predictive of well-being outcomes; and (d) to investigate gender differences in the relationship between multiple sources of support and psychological well-being among adolescent students residing at an orphanage. In this section, the researcher clarifies the concept of social support, presents the terminology associated with it, and reviews the previous data available on the subject.

Studies of social support are relatively recent, and researchers have addressed social support from different angles, sometimes leading to contrasting conceptual definitions. The current researcher, therefore, proposed to trace the “pioneers” of the concept—which, according to Vaux (1992), is critical in order to lay the groundwork for the definitions used for this research. Next, the researcher attempted to identify the different dimensions of social support, as well as the sources and functions most often reported by the authors. The researcher concludes the chapter with a summary of the research reviewed.

## **2.1. Social Support in Context**

Social support is discussed more frequent under the literature of health sciences and psychology (Hefner & Eisenberg, 2009), but is growing in the academic field. The study of social support is deemed to be a promising avenue that can lead to the understanding of certain phenomenon encountered in education, such as the provision of support and assistance to adolescents as students in utmost need of their care and attention. Grant and Yeatman (2012) identified that the well-being of orphans has recently been targeted and explored in the academic research (as cited in Salifu Yendork & Somhlaba, 2015). The research of Salifu Yendork and Somhlaba noted how the well-being of children in orphanages and the effect of social support have received much support in the field of education with the aim of improving the welfare and condition of the orphans. The perceived social support of both children and adolescents is a significant source of strength and guidance that could have positive psychological outcomes.

Although the importance of social bonds for the general well-being of the human being has been revealed more than decades earlier (Hefner & Eisenberg, 2009), the actual term of social support only appeared in the 1970s (Goldsmith, 2004). The idea is not new, but has other popular terms such as friendship, caring, sense of community, to name but a few (Hefner & Eisenberg, 2009). Goldsmith (2004) argued that social support is an umbrella that covers a process that links an individual commitment to positive social relationships and well-being. The concept of social support is rooted in most of the major theories of psychology, including Bowlby's psychoanalysis and attachment theory, which emphasizes the importance of harmonious interpersonal relationships, starting with the mother, on human development and well-

being in general (Davila & Levy, 2006). Bronfenbrenner's (1977) framework addresses the socio-ecological theory and the advances in the psychology of development (Hombrados-Mendieta et al., 2012). Social psychology is also interrelated, which has gone beyond the privileged framework of the mother-child relation. This attempts to study the complexity and especially the influence on the development and the blossoming of the individual, the interactions that he/she maintains at any age with his family environment, and the social context.

During the 1970s, three authors contributed greatly (Vaux, 1992). The first was physician and epidemiologist John Cassel, who clearly highlighted the role of the psychosocial processes, including social support, in the etiology of diseases (Barrera & Ainlay, 1983). According to Cassel, the absence of meaningful social links with loved ones could increase the vulnerability of the human being to certain physical diseases (Barrera & Ainlay, 1983). This researcher attributed the function of protecting the individual against the difficult events of life and their impact on health to social support. Gerald Caplan was the second researcher identified by Vaux (1992); this researcher agreed with Cassel's conception, but with the difference that he would rather evoke the notion of a "support system" not limited to family or friends, but could also extend to the neighborhood and the community. For this author, the support system makes a special contribution to protecting the individual's balance and well-being from everyday pressures, crisis situations, and life-changing episodes. Finally, similar to the previous authors, Sydney Cobb (1976) recognized the importance of social support in relation to stress and well-being. Cobb described the concept of social support as having a social environment that allows a person or

subject to perceive that he or she feels esteemed, loved, worthy, and part of a network of caregivers (Cobb, 1976).

## **2.2. Social Network, Social Integration, and Social Support:**

### **Concepts to Distinguish**

The primary studies mentioned above all align with the growth in interest for the process where social relationships have benefits on health, well-being, and quality of life; research on social support has then grown considerably, particularly in the sciences, medical, and social services fields (Goldsmith, 2004). Such an interest is not surprising, given that social support is associated with a longer life expectancy, reduction in the incidence of some diseases, improved mental health, reduction of several social problems, and preventing stress at work (Goldsmith, 2004). According to Hefner and Eisenberg (2009), however, the concept of social support is not the only one to account for the subtlety and complexity of these relationships. In order to differentiate their respective contributions and to measure them in a specific manner, it is important to distinguish the three concepts of personal social network, social integration, and social support (Hefner & Eisenberg, 2009). Further, Felton and Shinn (1992) called for the higher-level of thinking in perceiving the three concepts of social network, social integration, and social support. For Felton and Shinn, these concepts go beyond the individual level and must involve other parties to succeed in achieving the goal of providing the adequate social support.

### ***2.2.1. The Social Network***

The personal social network refers to all the stable, generally positive social bonds, maintained by an individual (Muller & Lemieux, 2000). Such a network can be described by its size (i.e., the number of people forming the network) and its density (i.e., the number of people connected in this network in relation to its size; Muller & Lemieux, 2000). Among the other criteria for reporting the existence of a personal social network, the links can be based on the normative or effective aspects (Muller & Lemieux, 2000). In the first case, each occupies a role in relation to other (e.g., father, son, neighbor, etc.). In the second, reciprocal feelings of proximity animate the members of the network. The network can also be based on exchange relations, allowing the pooling of resources in the internal environment in which the individual resides (Muller & Lemieux, 2000).

In connection to the current research, Kana'iaupuni, Donato, Thompson-Colón, and Stainback (2005) identified that social networks and relationships affect the health of individuals. In their study, they identified that special attention must be provided to the social support found in the social networks as it is through this avenue that supportive resources are also conveyed and transmitted. For Kana'iaupuni et al., both kin and non-kin networks have been proven to fight the physical and emotional problems that individuals face in their daily lives.

According to Belle and Benenson (2014), an individual, especially a child's "physical, emotional, and social well-being" (p. 55) is heavily dependent to a certain extent on his or her connection with their relatives, peers, and friends. A child or adolescent's relationship with his or her parents, family members, relatives, and friends could provide him or her with a significant support that could positively impact his or

her overall well-being. In terms of the institutionalized organizations that provide care for children and adolescents, the research by Varda and Talmi (2018) reported that the systems of care in the United States is still unable to maximize the involvement of both the family and friends of individuals as they lay the programs and plans to assist such persons. Berkman, Glass, Brissette, and Seeman (2000) stressed that social relationships powerfully influence the physical and mental well-being of an individual.

### ***2.2.2. Social Integration***

Originally from the work of Durkheim, social integration refers to the degree to which a person participates and invests in the social environment and more generally in the field of social relations (Berkman et al., 2000). To measure this, researchers note—for example—the number of socially recognized roles that the person assumes and the frequency of his social or community activities (Cohen & Wills, 1985). To illustrate, the involvement of the community in support of others less fortunate may strengthen social integration and decrease alienation on the part of the less privileged.

### ***2.2.3. Social Support***

As for the concept of social support, there is no scholarly consensus about its definition (Hupcey, 1998; Williams, Barclay, & Schmied, 2004). While the majority of the scholars have agreed on the general nature of social support, the variety of studies testified to the scientific interest of researchers in different and complementary facets of a concept that is clearly not easily circumscribed (House, 1988). For the purpose of this study, a conceptual analysis method inspired in particular by Hupcey (1998) was used. In various definitions by significant authors,

the conceptual analysis method was employed to address the meanings of the concept from different ontologies (e.g., etymological, historical, formal, praxiological, etc.) to compare and produce a conceptual network, and then to formulate the operational definition adopted. Thus, towards the end of the analysis, the current researcher established a definition of the concept of social support that echoed the majority as reported by the authors. The definition uncovered mirrored the perception that the presence of supportive social interactions positively influences the well-being of the individuals, the individual's ability to overcome the periods of crisis, and the transitions they make in their lives (Goldsmith, 2004).

The definition adopted above also reflects the multidimensional nature of the concept (Canty-Mitchell & Zimet, 2000). For example, in this study, social support refers to the dispensation of tangible resources, emotional or informative, which help the individuals receiving them to supplement or to strengthen their efforts to adjust to new and challenging situations (Dumont & Provost, 1999). Social support also refers to the perceived benefits of the individuals' interactions with the members of their personal social network or participation in social groups. Various scholars have noted that orphans benefit from social support when they perceive and acknowledge the availability of people that are able to provide support in different forms.

### **2.3. The Dimensions of Social Support**

Social support and the relationships by the people involved can be approached and viewed from different angles (Vaux, 1992). Social support could then be founded in the structural aspect, its functionality, or the perception of the quality of



available support (Angle, Divney, Magriples, & Kershaw, 2015). Rush (2002) emphasized that social support has transformed into a standard of interpersonal connectedness that provides access to environmental resources that are vital to an individual's "social performance, well-being, and major life issues" (p. 115).

According to Tadesse, Dereje, and Belay (2014), it is crucial to keep track of children's psychosocial well-being as it impacts all aspects of their lives, from their competence to learn to becoming productive citizens as they grow older. When a child loses a parent or both parents, they are then faced with several psychosocial issues such as "grief, hopelessness, anxiety, stigmatization, physical and mental violence, labor abuse, lack of community support, lack of parental love, withdrawal from society, feelings of guilt depression, and more" (p. 294). These psychosocial issues could then be expressed by children in different ways, usually in a negative manner, such as living on streets, committing unlawful acts, and exposing themselves to cope with their situation (Tadesse et al., 2014).

As per Ong, Yi, Tuot, and Chhoun (2015), childhood is a fundamental period in an individual's general growth and development; however, this development could be interrupted if the family environment is threatened due to the disease or eventually the death of one or both parents as well as the guardians. The loss of the parents and guardians may lead to the withdrawal and depression of the adolescents. Matyash and Volodina (2015) echoed that the establishment of the psychological strength and capacity is especially crucial in the teenage years of individuals, as they most often believe that their temporary problems and issues are already extremely adverse. Hence, Matyash and Volodina believed that special attention must be given to children and

adolescents' psychological stability to ensure their wellness and welfare throughout the lifespan. In this regard, the three dimensions of social support will be discussed.

### ***2.3.1. The Support Network***

This first dimension of social support corresponds to the support network, which is a subset of the personal social network, as described above (Vaux, 1992). The individuals ask the support network for help when they are in need, which Vaux also referred to as a *resource*. The resources of the support network cover both the size of the network, its composition, and the nature of the links identified between its members and the persons concerned. Based on Donev's (2005) report, support networks could also be referred to as social relations. Support networks could influence the personal, emotional, and overall well-being of an individual (Donev, 2005). This researcher noted how support networks permit individuals to identify a "mutual obligation that permits people to feel cared for, loved, esteemed, and valued" (p. 2). Social network could also assist in shaping the attitudes and behaviors of an individual where they can pattern their actions based on what they observe from their networks.

### ***2.3.2. The Support Behaviors***

The second dimension of social support refers to behaviors and actions to help the individuals in need of help (Barrera, 1986). The support received is said to be active—and not potential—because it refers to the effective use of the resources of the social network (Angley et al., 2015). Occurring in a relationship setting, helping behaviors include listening, comforting when in distress, lending money, helping with a task, showing affection, encouraging others, giving advice, and others (Angley et al., 2015).

### ***2.3.3. The Subjective Assessment of the Support***

The third dimension of social support refers to the evaluation of support by the individuals themselves or to their degree of satisfaction with the help given by others (Vaux, 1992). The subjective appreciation of support itself includes many dimensions, such as the feeling of receiving sufficient support, the satisfaction with the support received, the perception that support needs are being met, the perception of the availability of support, the adequacy of support, and the confidence that support will be available when needed. According to Barrera (1986), in a literature review of social support from a general perspective, the subjective appreciation of support is undoubtedly the dimension most often studied in the literature. The present research was no exception because the existence of social relations between individuals and their environment—in this case, between the students residing at the orphanage and their social network—was not necessarily perceived as a great deal of support. According to Barrera (1986), it seems that social support is related to the personal experience of the individuals in the situation of seeking or receiving help rather than to a set of objective circumstances. In fact, according to Dumont and Provost (1999), an assessment of quality and quantity of support received can only be made from information on the so-called structural characteristics of a social network. This justifies the fact of measuring the perception of support by the individuals themselves.

The complexity of the concept of social support is expressed not only by the diversity of its dimensions, but also by that of its sources and functions (Dumont & Provost, 1999). Each of the dimensions described above may be characterized according to a source from which the support comes (i.e., the person or persons in the

support network who provide help) and a specific function (i.e., the nature of the behaviors deployed in order to bring special help to others).

## **2.4. Sources of Social Support**

According to Vaux (1992), social support cannot be defined without emphasizing the importance of its source or sources. In this regard, Buote et al. (2007) stressed the need to distinguish between formal sources and informal sources of social support. In this section, the two sources of social support will be explained thoroughly.

### ***2.4.1. Formal Sources***

Formal sources of social support refer to people who belong to formal networks, such as government agencies, directorates, institutions, departments, communities, and other established social organizations (Buote et al., 2007; Lu, Li, & Patel, 2018). Lu et al. (2018) described formal sources as the “material and spiritual assistance” that are provided by formal institutions, following specific laws and policies (p. 2). The support from formal sources are deemed by Lu et al. as stable and regular. In the context of the orphanage, an example could be the Ministry of Education, the Ministry of Recreation and Sport, or the financial assistance program represented by the program directors and professors. Formal networks can manifest themselves through specialists in guidance, in support of learning, or any other stakeholder with pre-established functions.

#### ***2.4.2. Informal Sources***

Informal sources of social support include help provided by parents, friends, family, peers, spouses, etc. (Buote et al., 2007). As per İkiz and Savi Çakar (2012), parents and peers are both vital providers of social support. Lu et al. (2018) described that informal sources are often perceived with the notion of being uncertain. Although much less structured than formal support, support from informal sources is updated more flexibly than the previous source. It is more accessible and is not subject to the constraints of bureaucracy, specialization of procedures and rules, or eligibility criteria for services.

In the opinion of Buote et al. (2007), informal sources of support are of paramount importance. As major agents of socialization, family and friends represent the first reference point of the individual who, even in contact with structured institutions, spontaneously seeks support (Buote et al., 2007). Realized in a communicative perspective, the work of Goldsmith (2004) indicates that the mere fact of talking about one's problems with one's family and friends is an important contribution to the well-being of the individual. Regardless of age, friendships particularly favor the well-being of both men and women (Miething et al., 2016). Among other benefits, the fact of having friends who one can rely on would enhance feelings of self-esteem and personal worth (Miething et al., 2016). Compared to women, however, men are more sensitive to the amities and friends, and they are more likely to suffer from anxiety, depression, and psychological distress than their female counterparts (Miething et al., 2016).

Friends serve as valuable assets when a person goes through periods of major transitions in life, such as the entrance to the orphanage. MacKenzie (1999) clearly

illustrated that with respect to freshman orphans, the role of positive friends in the adjustment of these new orphans to the orphanage environment whether they reside there or receive services during the day is very important. According to the same researcher, the support of friends facilitates the adjustment of new orphans to all facets of the orphanage environment. In addition, the adjustment to the social dimension of the institution would be particularly favored.

## **2.5. The Functions of Social Support**

The multidimensional nature of the concept is also reflected in the different functions assumed by the social support through the interpersonal relationships of the individual. It is essential to take these functions into account for three reasons. First, each of them constitutes a social resource that contributes, in its own way, to the fulfillment and the maintenance of the equilibrium between the human being (Sarason, Levine, Basham, & Sarason, 1983). Second, some functions may be inadequate or ineffective in some situations, hence the importance of distinguishing between what works and what does not (Cohen & Wills, 1985). Finally, a better understanding of different forms of social support facilitates the development of more targeted and effective prevention and intervention strategies (Cohen & Wills, 1985).

The notion of social support functions is firmly rooted in an ecological conception of human behavior which supposes that in order to develop and flourish, the human being, like any living being, needs to have access to a number of resources and to preserve and increase them (Coyne & DeLongis, 1986). In keeping with this view, social resources are recognized, along with material resources, as a necessity of

life that contributes to the psycho-social balance of the individual, its development, and well-being (Coyne & DeLongis, 1986).

Today, researchers studying perceived social support have acknowledged the pivotal role of parental support as a robust unique predictor of adjustment and indicator of mental health for both boys and girls (Rueger et al., 2008b). One significant study conducted by Caserta et al. (2016b) on Rwandan children can be utilized as a starting point in the study. The perception of social support of children living in an orphanage in Rwanda was higher in terms of all sources of social support than among children in other living environments. In the above study a higher-level of perceived social support from relatives, communities, and adults was associated with high-level of emotional well-being and only adult support was associated with low mental distress. Furthermore, the results related to functional perceived social support indicated that emotional support and companionship support were equally important in their association with higher level of emotional well-being and lower levels of mental distress. To illustrate, the results of the above study enabled the researcher to highlight the importance of having different sources of social support and their function in relation to psychological well-being. It is worth noting, however, that the subjects in the study (Caserta et al., 2016b) were orphans who have suffered from a genocide and have been victimized and subject to the immeasurable burden of trauma and the isolation from the community. In contrast, the researcher's subject were orphans who only suffer from difficult life circumstances, abandonment, and the death of a parent on a very limited scale. As a result, the current researcher expected to find data which could prove that varied prevention and intervention methods of support could lead to significant

findings in the perception of social support among students residing in orphanages, and hence, could yield to better psychological well-being adjustment.



# CHAPTER 3

## METHODOLOGY

### **3.1. Introduction**

There were four main objectives in conducting the study: (a) to describe the nature of social support provided by the orphanage to its students; (b) to understand how adolescent students perceive social support from the main sources (i.e. parents, teachers, and peers); (c) to determine the specific sources of support (i.e., parent, teacher, or peers) most predictive of well-being outcomes; and (d) to investigate gender differences in the relationship between multiple sources of support on psychological well-being among adolescent students residing at an orphanage. This chapter will include details about the research methods used for this study. In the first sections, the researcher presents the chosen setting and research design while the subsequent section describes the role of the researcher, followed by the methodology. Participant selection logic and instrumentation are also presented. In the third section, the researcher provides information on the data collection techniques, followed by the data analysis plan. The researcher also discusses the threats to validity and the issues of trustworthiness. A summary concludes this chapter.

### **3.2. Setting**

The setting for this research was an orphanage, a non-profit, social philanthropic institution located in Lebanon. The orphanage provides orphans (boys and girls) with lodging, food, clothing, and schooling. These services are provided in seven buildings

belonging to the institution. Living spaces consist of large dormitories. The vocational school is nearby which offers additional dormitories, classrooms, a laboratory, and a workshop space. The orphanage also has a dispensary, a theater hall large enough for 350 spectators, and six playgrounds.

### **3.3. Research Design**

The study adopted a mixed method research design combining quantitative and qualitative approaches. For the quantitative part of the study, the researcher used two instruments to collect data. The Child and Adolescents Social Support Scale was used to assess social support, and the Well- Being Scale was used to assess the psychological well- being. For the qualitative part of the study, the researcher used an interview protocol using semi- structured questions to understand the phenomena of perceived social support, describe the social services provided by the orphanage, and explain existing psychological problems.

The researcher selected a correlational research design to guide the study. Correlational research is used to determine whether two or more variables are related (Creswell & Creswell, 2017), and it was selected because the objective of this research was to examine the nature of the relationships between the variables of psychological well-being and perceived social support. Specifically, a this design was appropriate for the present study because the researcher examined the relationship between variables that were independent from each other and not manipulated or experimentally controlled. Inferences about the relationships between the variables were made from the regression models obtained. The researcher focused on the recognition of the relationships between certain variables in order to better understand,

describe, or identify the potential causes or consequences that could be associated with it in subsequent studies.

Correlational research is useful for exploring relationships between variables and addressing research problems that cannot be studied in the laboratory, for ethical, practical, or financial reasons (Borg, 2005). Researchers must be very cautious, however, in interpreting relationships between variables because correlational designs do not allow one to conclude without doubt that one variable is the cause of another (Borg, 2005).

### **3.4. Role of the Researcher**

The scope of the researcher's participation in the study included designing of the research, collecting data from participants, and analyzing the data gathered. The researcher had no prior relationship with participants. The researcher's only interactions with participants concerned the collection of interview and questionnaire data. While the researcher had some preconceived notions pertaining to the association between perceived social support and psychological well-being, the researcher was careful when interacting with participants to keep discussions and interactions free of bias. The interview questions and questionnaire items were not asked in a way that led participants to certain answers.

### **3.5. Participants**

#### ***3.5.1. Population***

The orphanage population consists of 400 residential students and 450 students who are receiving inclusive education at the main school. For the purpose of this study,

adolescent students aged between 12 years and 18 years were selected, for a total of 160 adolescent students who were residing and receiving their education at the orphanage during the time of the research.

### **3.5.2. Sample**

This sample included adolescents from different socio-demographic backgrounds and different levels of academic and social problems according to the school psychologist, managing director, teachers, and supervisors. The researcher followed a random sampling by approaching the aforementioned groups to participate in the research as they have unique perceptions and experiences that may help improve the content of the research. The sample included 90 boys (56.25%) and 70 girls (43.75%) and distributed across the following age ranges: 12 years ( $n=40$ ), 13 years ( $n=45$ ), 14 years ( $n=35$ ), 15 years ( $n=15$ ), and 16-18 years ( $n=15$ ). The mean age was 14 years old ( $SD=1.48$ ).

### **3.6. Instruments**

The primary instruments used to collect data were the Child and Adolescent Social Support Scale (Malecki & Demary, 2001; see Appendix B) and the Well-Being Scale (Khamis, 2000; see Appendix C), both of which were adopted from previous studies. Items from these two scales were compiled into a questionnaire to be completed by the participants. Because all participants were English literate, both questionnaires were administered in English. For the qualitative aspect of this study, which had the aim of understanding the phenomena of perceived social support, describing the social services provided by the orphanage, and explaining existing psychological problems,

the researcher developed and used a semi-structured interview protocol (see Appendix D).

### ***3.6.1. Well-Being Scale***

The Well-Being Scale (WBS) was used to assess the psychological well-being of adolescents (Khamis, 2000). The WBS is a nine-item scale measuring the psychological well-being of people in terms of a variety of emotions, physical and mental strength, and active force. The words “happy,” “cheerful,” and “delighted” were used to measure happiness; “relaxed,” “calm,” and “safe” were used to measure peacefulness; and “active,” “responsive,” and “healthy” were used to measure vigorousness. Participants were asked to report to what extent they felt each emotion and state during the past month. The ratings were made on a four-point scale (0 = *not at all*; 4 = *extremely*), with the high scores indicating high well-being and the low scores indicating low well-being. The total score of the nine items was used to measure psychological well-being.

Using a principal-component analysis with a varimax rotation of eigenvalues greater than or equal to 1.0, the scale generated two factors. Only items with loadings of at least .50 were selected to be included among the factors. Based on the study of Khamis (2000), the Cronbach’s alpha for the total scale was 0.86, which showed an acceptable internal consistency reliability of the measure of psychological well-being. Nevertheless, if the researcher found a child unhappy, inactive, and/or not responsive, the researcher instantly referred the child to the in-house part-time psychologist in the orphanage.

### ***3.6.2. Child and Adolescent Social Support Scale***

Social support was assessed using the Child and Adolescent Social Support Scale (CASSS; Malecki & Demaray, 2001). The CASSS is a rating scale measuring students' perceived social support. For the purposes of this study, CASSS level 2 form grades 3-12, was used. It measures four types of perceived support (i.e., emotional, instrumental, appraisal, and informational) from five different sources (parents, teachers, classmates, close friends, and school) (Malecki, Demaray, & Elliot, 2004). Each of the five subscales corresponds to one of the sources of support and consists of 12 items, with a total number of 60 items. Each source subscale has three items corresponding to each of the types of support. For instance, "My teacher helps me solve problems by giving me information," is an example of a question from the Teacher subscale, regarding informational support. Students read each statement describing a specific supportive behavior and respond by rating how often they receive that support from that source in the frequency ratings and how important that support is to them in the importance ratings. Frequency ratings consist of a six-point Likert Scale from 1 (*Never*) to 6 (*Always*). Importance ratings consist of a three-point Likert Scale ranging from 1 (*Not Important*) to 3 (*Very Important*). Subscale frequency and importance scores on the CASSS are calculated by summing the frequency ratings on the 12 items on each subscale (Malecki, Demaray, & Elliot, 2004). In addition, a total frequency score was calculated by summing all five frequency-ratings' subscale scores. Subscale and total importance scale scores were computed using the importance ratings but were intended only for use in clinical interpretation. The measure of perceived social support in this

study was measured using the frequencies of perceived social support from each of the five sources of parents, teachers, classmates, and friends, and people in my school.

There is a strong evidence that scores on the CASSS are reliable and valid for its intended purposes. The CASSS manual (Malecki, Demaray, & Elliot, 2004) reports evidence for strong internal consistency. Specifically, coefficient alpha reliability estimates for the total frequency score was 0.97 ( $n = 657$ ). For the frequency subscales, coefficient alpha reliability estimates were 0.93 to 0.96 ( $n = 586$  for Parent, Teacher, Classmates, and Close Friend subscales ;  $n = 586$  for School subscale). Test- retest reliability ( 8- 10 weeks) ranges from .75 to .78 for the frequency score and ranged from .58 to .74 on the frequency subscales ( Malecki et al., 2004). Coefficient alpha reliability estimates for the total importance scale was 0.97, while the coefficient alpha reliability estimates for the importance subscales ranged from 0.88 to 0.95.

### ***3.6.3. Semi-Structured Interview Protocol***

The researcher used an interview protocol to obtain the perceptions and experiences of the participants to understand the phenomena of perceived social support, describe the social services provided by the orphanage, and explain existing psychological problems. An informal interview was conducted to ask the samples of adolescent students in the orphanage and describe the phenomena of perceived social support experienced during their stay in the orphanage.

An interview was conducted to allow the participants to express themselves freely regarding the topics being asked. The researcher administered the interviews using semi-structured questions. These semi-structured questions were open-ended, thus allowing the respondents to have considerable freedom in answering the questions

(Horrocks & King, 2010). The open-ended type questions could be freely answered by the respondent and were administered by the researcher during the interview in an attempt to ask questions that were uninfluenced and would elicit a wide variety of responses (Yin, 2009). Open-ended questions are ideal for collecting detailed information about an individual's thoughts and behaviours. In order to prepare for the individual interview sessions, an interview guide which primarily contained open-ended questions was prepared. With a pre-determined set of questions, the likelihood that all the key topics would be discussed increased. The researcher aimed to ensure inter-rater reliability for the semi-structured interview protocol in order to increase the likelihood that future researchers using this instrument would reach similar conclusions (McLeod, 2007). To promote inter-rater reliability, the researcher wrote the interview questions using clear, concise language that defined any potentially subjective concepts (e.g., support; McLeod, 2007). To do so, a colleague with CITI certification was present during the first set of 10 interviews to assist the researcher in the data collection process and assessment of the questions for purposes of inter-rater reliability and replication.

### **3.7. Research Ethics**

The procedures enacted during this research followed the current ethical standards for psychological research established by the American Psychological Association. Regarding the main data collection, the orphanage received a written information about the purpose, procedure, and the rights of participants. IRB approval as well as parental consent were obtained prior to data collection. Participants with parental consent were given an assent/consent form to sign if they chose to participate in the research study. All participants were assured that participation was voluntary, and



that they were free to withdraw their participation at any time. This was only valid until all questionnaires were handed in; thereafter, to ensure anonymity, it was not possible to trace individual forms. All electronic data were stored in a password-protected computer, while all physical documents were stored in a locked file cabinet.

### **3.8. Data Collection Procedure**

All 160 adolescent students included in the sample completed an interview and questionnaire as described below. Adolescent students were selected using probability sampling. Probability sampling entails selecting a sample of participants who are representative of the research population and thus, generalizations can be made regarding the population (Borg, 2005). The adolescent students included in the study were chosen randomly, and only those willing to participate in the study were included. The samples of adolescent students were recruited from an orphanage in Lebanon. After obtaining the Institution Review Board (IRB) approval from the American University of Beirut, and consent from the director of the orphanage to conduct the research, the researcher also sought permission to address all adolescents residing at the orphanage aged 12-18, and hand a participation pack to all 160 adolescents. All 160 adolescents attended this session so that nobody was left out or could be identified as taking part or not. The students have no access to their phones, nor do they have email access; therefore, this was the only way to reach them.

The researcher explained the purpose and goals of the study and the participants' roles namely were: (a) taking the survey questionnaire or (b) participating in the survey questionnaire and individual interviews. The researcher also explained that the first three adolescents from each group (12, 13, 14, 15, 16, 17, and 18) who assented to take

part in the interview were selected. The reason here was simply because the researcher only needed 20 to 25 interview participants. During the first scheduled session, the participation pack consisted of: (a) an invitation to participate letter and (b) two copies of the parental informed consent, one in English and one in Arabic. The researcher's and chair's contact details were on the letters and the potential participants were asked to call either the researcher or the chair should they have any questions. The adolescents were requested to take the participation pack home during their weekend visit, asking their parent/s/guardian to read and possibly sign the consent form. The researcher and the 160 adolescents scheduled a second meeting and agreed on the time and date together. The researcher waited for 2 weekends to allow students to have ample time to sign the consent forms because some students do not go home every weekend. After the 2-week interval, the researcher met with the all adolescents to submit the envelopes. The researcher opened the envelopes and checked for consent. Those who obtained parent/legal guardian consent were asked to remain in the room, while those who did not obtain consent were asked to leave. The researcher distributed another participation pack that included: (a) an invitation to participate letter, (b) an assent form for students aged 12-17 years; and (c) a consent form for students aged 18 years and above. Adolescents could decide independently whether they want to provide assent may choose from (a) questionnaire only or (b) questionnaire and individual interview. In the same session, the researcher checked the assent/consent forms, asked those who chose to participate to stay the room, and selected the students who assented for the interview. To ensure confidentiality and privacy of the participants, the researcher scheduled a day and time for data collection and another day for the interview. In both of the above meetings, the researcher was alone.

The teachers did not assist in the data collection process. The researcher was responsible for data collection, as well as recruiting and consenting parents and children. Nevertheless, as mentioned earlier a colleague with CITI certification was present to assist the researcher in the data collection process and assessment of the questionnaires for purposes of referral. All 160 adolescents attended this session so that nobody was left out or could be identified. The questionnaire session took place after a regular school, during the 1-hour break after lunch, and before the afternoon study session. This ensured that the participants did not miss their study sessions. The interviews were audio-recorded and transcribed by the researcher.

Students' names were not collected on the questionnaires; only gender and age were collected. All students received an unmarked envelope in which they placed the completed questionnaire, sealed, and returned to the researcher. After the completion of the questionnaires, the researcher and his colleague checked the papers immediately while participants were still in the room. In case that participants screened positive for emotional disturbance, they were guided and immediately referred to the in-house psychologist. Data were only collected when the in-house part-time psychologist was available on campus. The participants received refreshments, exercise books, pens, and pencils as tokens of gratitude for their participation.

After all documents were collected, the researcher placed the sealed envelopes securely in a post box in the boot of the car and locked the car. Regarding the records from the survey, they were monitored and audited without violating confidentiality. To secure the confidentiality of the students' responses, the students' names were not requested. All codes and data were kept in a locked filing cabinet in the Principal Investigator's office. Data access was limited to the Principal Investigator and

researcher working directly on this project. All data will be destroyed responsibly after the required retention period (usually 3 to 5 years).

A power analysis was conducted using the G\*Power sample size calculator to estimate the sample size required for this study. The sample size was calculated based on Cohen's effect size, the level of significance (alpha level), and the power of the study, which is the likelihood of rejecting a false null hypothesis. An *a priori* power analysis was conducted considering the statistical test of linear regression analysis with five predictors (i.e., five sources of perceived social support from parents, teachers, classmates, friends, and school; and gender), a statistical power of 0.8, a medium effect size of 0.15, and a level of significance of 0.05. The result of the computation showed a minimum sample size of 55 samples (see Appendix A). A minimum of 55 different sets of responses in the survey to measure the data of the different study variables from the adolescent students were obtained in order to achieve the required statistical power for a quantitative study of 80%. Participants' responses were tallied in an Excel spreadsheet.

### **3.9. Data Analysis Procedure**

The researcher exported the data from Excel to the SPSS statistical analysis software program for quantitative analysis. Before completing further analysis, the researcher screened the data for detection and correction of erroneous data (Warner, 2013).

Prior to addressing the research questions of the study, descriptive statistics (e.g., percentage, frequency, mean, and standard deviation) were calculated for the data of each of the study variables used in this research. Central tendency measures of mean, standard deviation, and minimum and maximum values were used to summarize data of

continuous measured study variables of psychological well-being and the different measures of perceived social support. On the other hand, frequency and percentage summaries were used to summarize the data of the categorical measured study variable of gender. Moreover, stratification by gender was done to illustrate the distribution of the scores of the five sources of social support in addition to the well-being scores, and presented by box plots. Add to that, the two independent sample t-test was calculated for each social support type score stratified by gender in order to highlight the statistically significant differences between males and females across these scores. Additionally, Kendall rank correlation was used to measure the association between gender, wellbeing and social support subtypes while Pearson correlation was used to measure the association between psychological wellbeing and social support subtypes.

The researcher then performed tests on the data to ensure that it met the necessary assumptions for the parametric analysis used for this study. The specific analysis used was a multiple linear regression analysis. There were several assumptions that needed to be met. These included that: (a) the data of the dependent variable should be continuously measured; (b) there should be no outliers in the dataset; (c) the data of the dependent variables should be normally distributed; and (d) homoscedasticity. Outlier investigation was conducted by investigating z-scores of the data set. A z-score greater than 3 or less than -3 is considered to be an outlier. This rule of thumb was based on the empirical rule. Normality testing was conducted through investigation of skewness and kurtosis statistics and histogram should be investigated to assess normality of the dataset of the dependent variable of psychological well-being score. To determine whether the well-being score followed normal distribution, skewness statistics greater than three indicated strong non-normality and kurtosis statistics

between 10 and 20 also indicated non-normality (Kline, 2005). The assumption of homoscedasticity was tested using Levene's test of homogeneity of variance. The *p*-value of the Levene's test should be greater than the level of significance value of 0.05 to show homoscedasticity, meaning that the variance of the dependent variable of psychological well-being should be equal or homogenous across the different predictor variables of perceived social support and gender. These assumptions must be met, or the well-being score must be transformed, in order to use it to produce linear regression model.

The researcher conducted a multiple linear regression analysis to determine the relationship of the psychological well-being and perceived social support sub-types scores among adolescent students residing at the orphanage in Lebanon moderated by gender. The independent variable in the regression was the perceived social support, which had five measures: the perceived social support from parents, teachers, classmates, close friends and school. The dependent variable was psychological well-being. A linear regression statistical test is typically used to measure the size of the effect and direction of the effect of each independent variable on a dependent variable (Neuman, 2009). Specifically, a hierarchical regression analysis was conducted to determine how the independent variable (the five social support sub-types score), impact the dependent variable (psychological well-being score), as well as to determine the effect of gender on the relationship between perceived social support and the psychological well-being. Gender differences were represented in the regression model.

To operationalize the hierarchical regression, the regression included multiple blocks. The first block of the regression model analyzed the significance of how the variable of gender impacts the independent variables to the dependent variables. A level

of significance value of 0.05 was used in the regression analysis to determine whether the independent variables significantly impacted the dependent variable and whether there was a significant moderation effect. The independent variables significantly impacted the dependent variable if the  $p$ -value of the  $t$ -statistics to test the individual impact of an independent variable to the dependent variable is less than or equal to the level of significance value. This meant that the perceived social support has a significant impact on psychological well-being. The parameter estimate (unstandardized coefficient) was examined to determine whether it was statistically different than zero. If that parameter estimate was significant at the level of significance of 0.05, the null hypothesis would be rejected, implying that there is a statistically significant impact by the independent variable on the dependent variable. Then, the beta coefficients of the regression were investigated to determine the magnitude of the impacts of the independent variables on the dependent variable. This statistic was used to show how much change in the dependent variable could be explained by variations in the independent variables (social support scores and gender). A positive regression coefficient means a positive impact indicating that the dependent variable would increase if the independent variable increased. A negative regression coefficient means a negative impact indicating that the dependent variable would decrease if the independent variable increased.

Then, the interaction terms between the independent variable and the moderator (gender) was added in the second block of the regression model. There were five interaction terms since there are five measures of the independent variable of perceived social support. There was a significant moderation effect by gender on the relationship between perceived social support and the psychological well-being if there is a

significant change in the *R*-square value of the regression model when the interaction terms are added to the regression model. The *R*-square value was used to show if the regression model has a strong or weak explanatory power. A significant change in the *R*-square value was observed if the *p*-value of the *R*-square change was equal or less than the level of significance value of 0.05. The researcher determined the degree and direction of the moderation effect through the beta coefficients of the interaction terms.

In the qualitative portion of the study, the researcher conducted thematic analysis (Braun & Clarke, 2006). The researcher selected this technique because its aim is to identify themes, or patterns of meaning. This procedure involved six steps. In the first step, data familiarization, the researcher read and re-read the transcribed interview data in order to become familiar with the content. In the second phase, coding, the researcher created succinct phrases to describe the critical features of the data. In the third step, initial theme generation, the researcher evaluated and compared the generated codes in order to determine how they related to one another; these similarities became the initial themes, which the researcher reviewed and revised in the fourth step. The fifth step involved naming and defining the themes more clearly. The final step was to create an analytic narrative that contextualized the findings in relation to the previous body of literature (Terry et al., 2017).

### **3.10. Threats to Validity**

Addressing potential threats to validity is important when conducting research. Threats to validity associated with this study were relatively few. The researcher was careful to ensure internal validity by not drawing generalizations pertaining to the causation of the relationship between perceived social support and psychological well-



being, as such is not the intent of correlational research (Creswell & Creswell, 2017). External validity was ensured by limiting the scope of generalizations and conclusions related to this study to adolescents living in orphanages, as this is the research population being studied (Creswell & Creswell, 2017). Drawing conclusions concerning larger populations of adolescents or young adults could potentially affect research validity, as the unique experience of being an orphan and living in an orphanage could affect how social support is perceived and how psychological well-being is affected by perceived psychological support.

### **3.11. Summary**

In summation of this chapter, this mixed-methods and correlational study was conducted at an orphanage in Lebanon. The researcher selected a correlational research design because the objective of this research is to examine the nature of the relationships between the variables of psychological well-being and perceived social support. A sample of 160 adolescent students who are residing and receiving their education at the orphanage was selected to participate. Participants were between the ages of 12 and 18 years. The primary instruments used to collect data were the Child and Adolescent Social Support Scale (Malecki & Demary, 2001), the Well-Being Scale (Khamis, 2000), and a semi-structured interview protocol developed by the researcher. The ethical standards for psychological research as established by the American Psychological Association were adhered to throughout this study. The results of this study are presented in Chapter 4.

## CHAPTER 4

### RESULTS

#### **4.1. Introduction**

After carrying out the necessary statistical tests abovementioned, this chapter portrays the obtained results. Before proceeding to the quantitative data analysis, the researcher performed the reliability tests for both the CASSS and WBS instruments using the Cronbach alpha coefficient. The Cronbach alpha is a measure of internal consistency, that is, how closely related a set of items are as a group. It is considered to be a measure of scale reliability (Neuman, 2009). The psychometric data for both instruments were consistent with the original studies (see Table 1). The following section includes the preliminary analysis of the quantitative results followed by a presentation of tables and box plots. The successive section present the results of the qualitative results followed by the summary of the chapter.

Table 1- Reliability Tests for Social Support Scale and Psychological Well- being Scale

	Number of Items	Frequency	Importance
		Cronbach's alpha	Cronbach's alpha
Parent support	12	0.91	0.83
Teacher support	12	0.88	0.86
Classmate support	12	0.92	0.92
Close friend support	12	0.95	0.94
School support	12	0.94	0.94
Total Social Support	60	0.93	0.92
	Items	Cronbach's alpha	
Psychological Well-being Scale	9	0.83	

## 4.2. Quantitative Results

### 4.2.1. Preliminary Analysis

Of the 160 adolescent students only 98 participated in the well- being and social support data sets. The frequency of males was 37, which represent 38% of the participants, and the frequency of females was 61, which represent 62% as illustrated by the following table and graph representation (see Table 2 and Figure 1).

Table 2- Gender Distribution of Participants

		Gender			
		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	Male	37	37.8	37.8	37.8
	Female	61	62.2	62.2	100.0
	Total	98	100.0	100.0	

Figure 1- Histogram of Gender Distribution

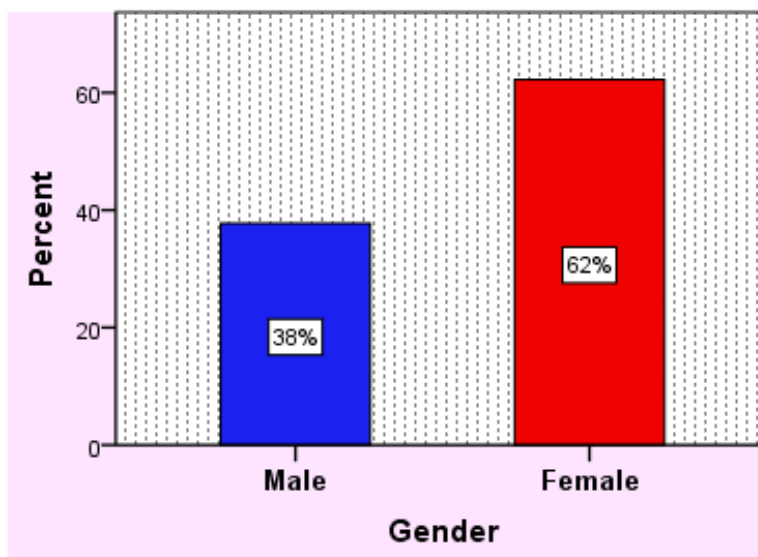
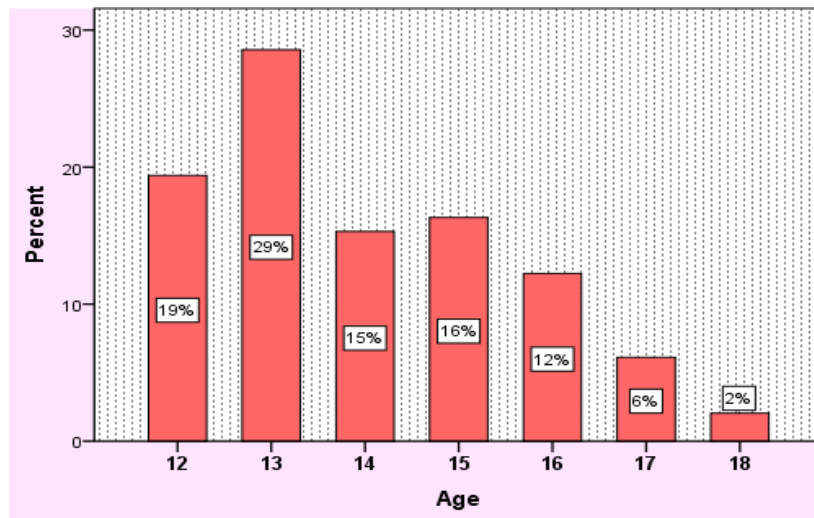


Figure 2 represents a histogram and frequency counts for the age of participants. Participants' age ranged from 12 to 18 years (Mean = 14, SD = 1.62). With respect to age distribution, 19 participants were in the age group of 12 years and represent 19%, 28 were in the age group of 13 years and represent 19%, 15 were in the age group of 14

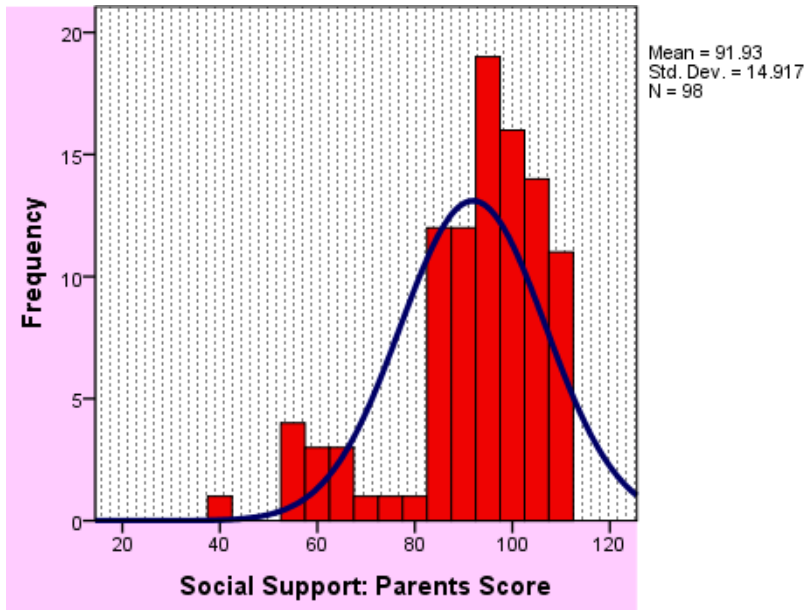
years and represent 15%, 16 were in the age group of 15 years and represent 16%, 12 were in the age group of 16 and represent 12%, 6 were in the age group of 17 years and represent 6%, and 2 were in the age group of 18 years and represent 2% of the 98 participants.

Figure 2- Frequency Count and Percentage of Participants' Age Histogram



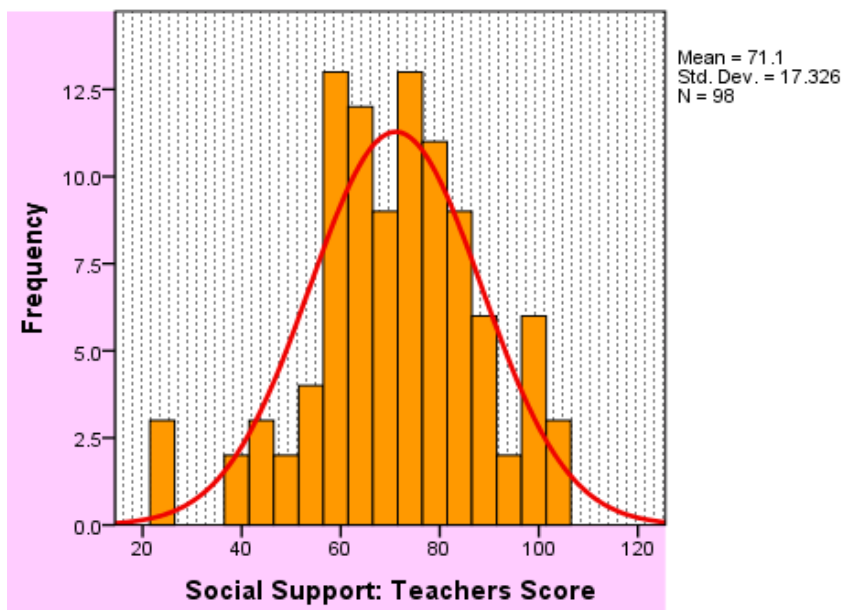
For the Child and Adolescent Social Support Scale, perceived social support was measured from 5 different sources: parents, teachers, classmates, close friends, and school support. The section below will represent the descriptive data of each of the aforementioned social support sources. For the social support scores from parents, the mean average was 91.93, the median was 95.50, with a standard deviation of 14.91. The range was 68 with a minimum value of 40 and maximum value of 108 (see Figure 3).

Figure 3- Histogram of Social Support: Parents' Score



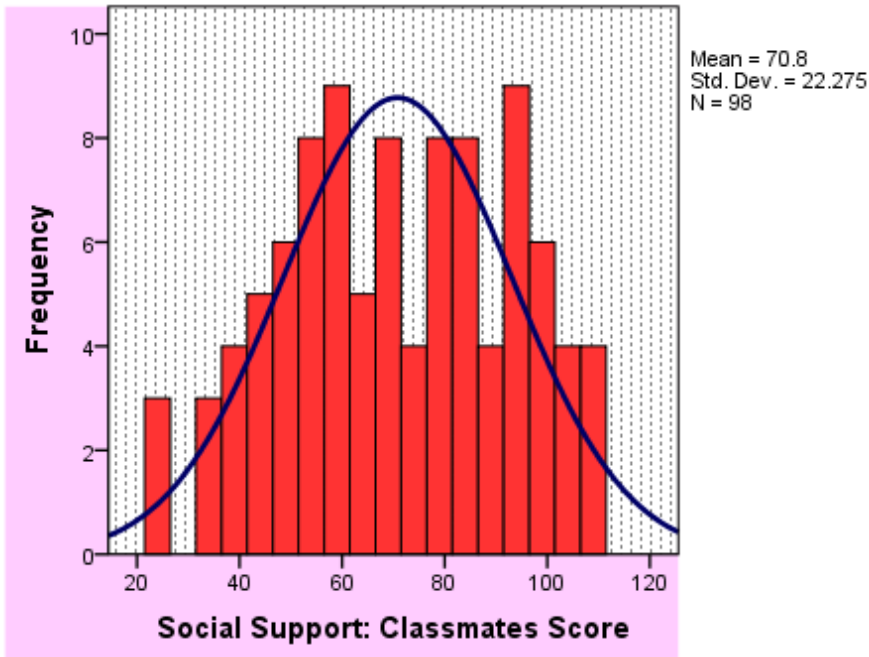
In the next section discussing social support scores from teachers, the mean was 71.10 with a standard deviation of 17.32. The minimum score is 24 and maximum score is 106 as represented in the below table and graphical representation (see Figure 4).

Figure 4- Histogram of Social Support: Teachers' Scores



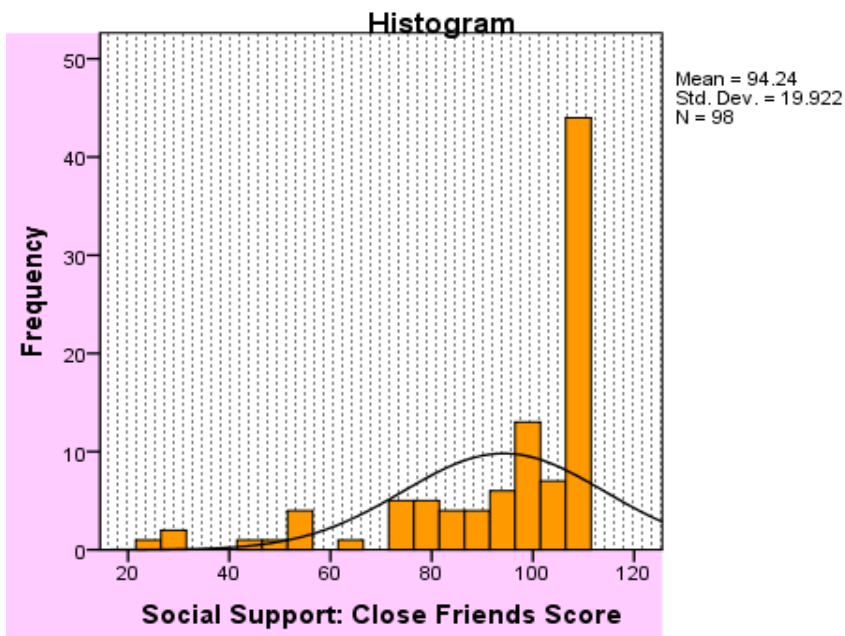
For the social support scores from classmates, the data showed that the mean was 70.80 and the standard deviation was 22.27. The range was 84 with minimum value of 24 and maximum value of 108 (see Figure 5).

Figure 5- Histogram of Social Support: Classmates' Scores



Social support scores for close friends had the highest mean of 94.24, a median of 102.20, and a standard deviation of 19.92. The range for this score was 84 with a minimum value of 24 and a maximum value of 108. The graphical representation below showed that more than 45 participants perceive social support from close friends as very important (Table 6 & Figure 6).

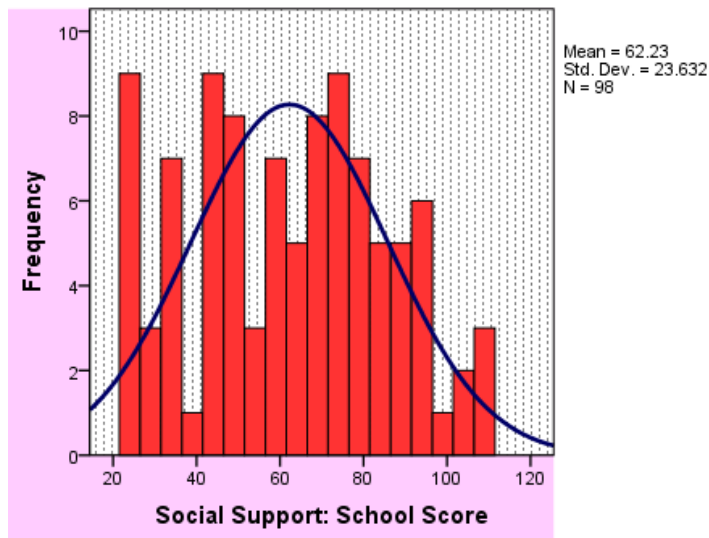
Figure 6- Histogram of Social Support: Close Friends' Scores



School support scores had the lowest mean of 62.23 and a standard deviation of 23.63. The range for this score was 84 with minimum value of 24 and maximum of 108. As represented in the table and graph below, social support from the school was the weakest source of social support as compared to the other four sources of support (see Figure 7).



Figure 7- Histogram of Social Support: School Scores



For the well-being score, the mean was 18.79 and median of 20.50. The standard deviation was 8.13 and it had a range of 35 with minimum value of 0 and maximum value 35. The graphical representation illustrated that one participant scored 35 indicating a very high well-being score while most of the participants' scores ranged from 12 to 30 (see Figure 8).

Figure 8- Histogram of the Well-Being Scale Scores

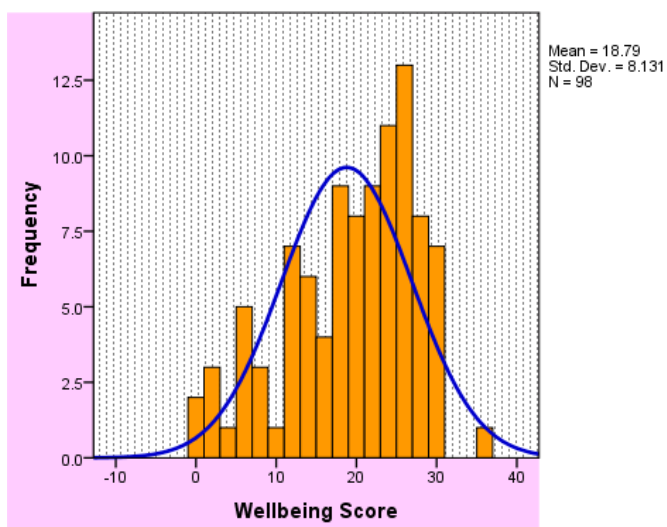


Table 3- Descriptive Data of All Social Support Sub-type Scores & Well-being Score

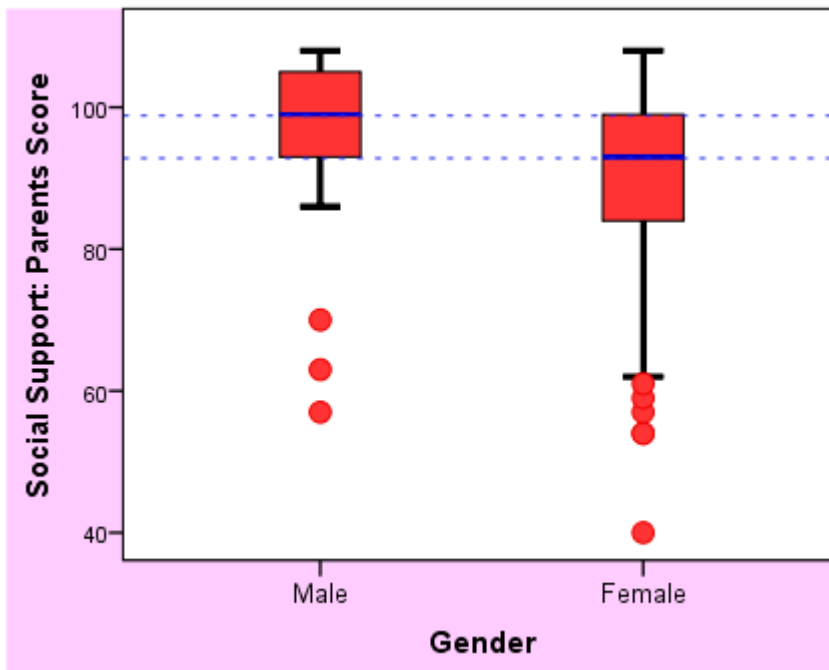
Descriptive Statistics of All Scores							
		Parents score	Teachers score	Classmates score	Close friends score	School score	Wellbeing score
N	Valid	98	98	98	98	98	98
Mean		91.93	71.10	70.80	94.24	62.23	18.79
Median		95.63 <sup>a</sup>	71.86 <sup>a</sup>	69.00 <sup>a</sup>	102.20 <sup>a</sup>	64.00 <sup>a</sup>	20.50 <sup>a</sup>
Mode		108	59 <sup>c</sup>	61 <sup>c</sup>	108	24	25
Std. Deviation		14.91	17.32	22.27	19.92	23.63	8.13
Skewness		-1.36	-.41	-.13	-1.78	.02	-.59
Std. Error of Skewness		.24	.24	.24	.24	.24	.24
Kurtosis		1.51	.39	-.91	2.72	-.97	-.46
Std. Error of Kurtosis		.48	.48	.48	.48	.48	.48
Range		68	82	84	84	84	35
Minimum		40	24	24	24	24	0
Maximum		108	106	108	108	108	35
Percentiles	25	86.22 <sup>b</sup>	60.00 <sup>b</sup>	54.00 <sup>b</sup>	87.50 <sup>b</sup>	44.00 <sup>b</sup>	13.00 <sup>b</sup>
	50	95.63	71.86	69.00	102.20	64.00	20.50
	75	102.86	82.50	89.25	107.80	80.40	24.94

We can conclude from the scores of the five sources of social support that social support from close friends was the strongest, followed by social support from parents, then teachers, classmates and finally the school social support.

### Social Support Scores Stratified by Gender

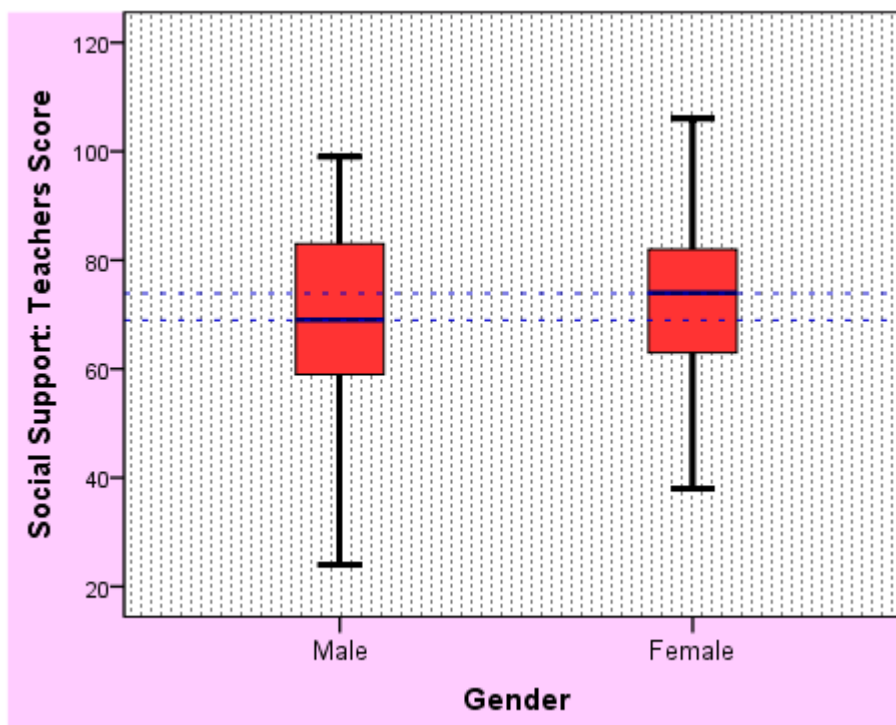
The following section of the study illustrates scores of the five sources of social support: parents, teachers, classmates, close friends, and school, stratified by gender. Sources of parent support by gender highlighted a higher mean for males than for females as shown by the box plot graph (see figure 9). This concludes that males perceive social support from parents as stronger than do females. In addition, the box plot graph illustrated 3 outliers in the male's sample and 4 in the female's sample.

Figure 9- Box Plot of Social Support: Parents' Scores Stratified by Gender



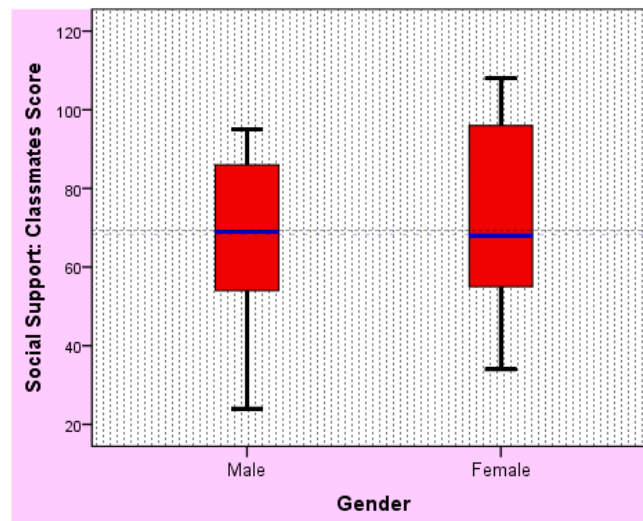
Teachers scores stratified by gender reflected a higher mean in the female's sample of the participants as compared to the male's participants as illustrated in the box plot representation (see Figure 10). This concludes that females perceive social support from teachers as stronger than do male participants.

Figure 10- Box Plot of Social Support: Teachers' Scores Stratified by Gender



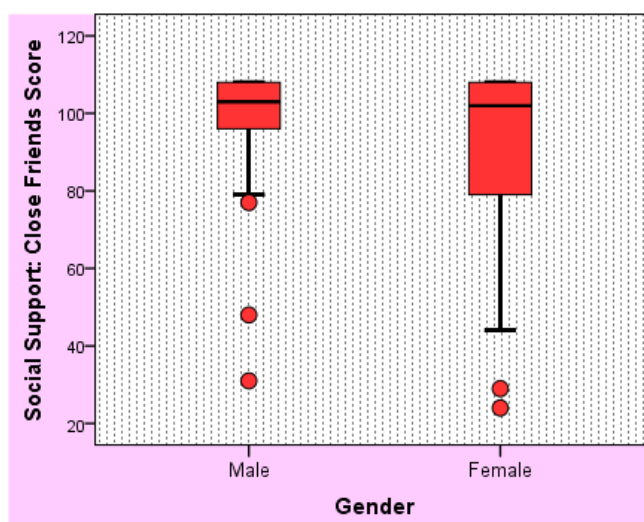
Social support from classmates stratified by gender reflected almost similar results of the mean average score (see Figure 11). It can be deduced that both female and male's participants perceive social support from classmates in the same manner.

Figure 11- Box Plot of Social Support: Classmates' Scores Stratified by Gender



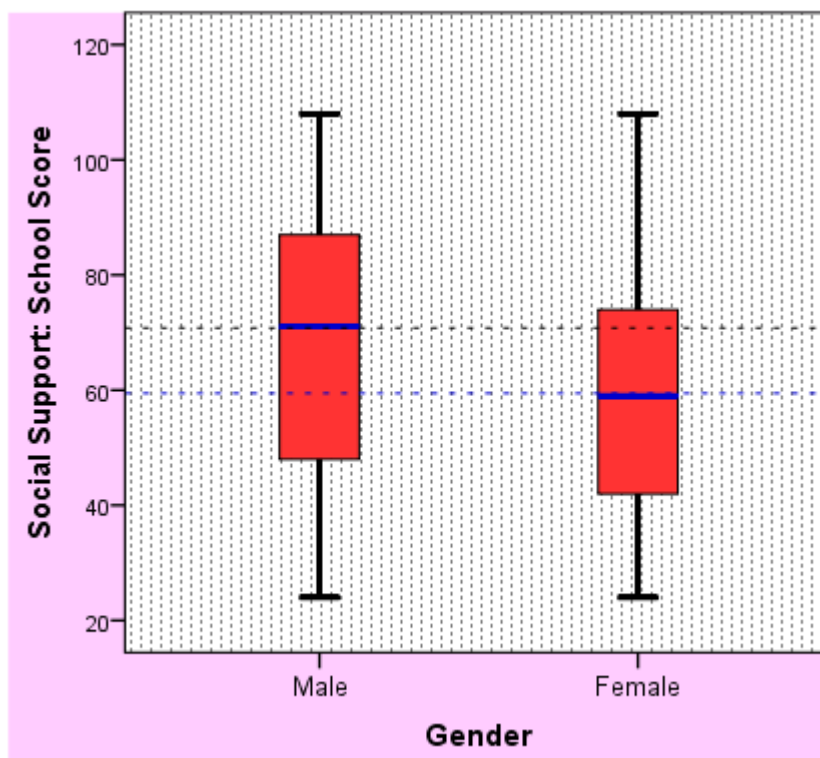
As illustrated in the box plot below (see Figure 12), social support from close friends has the highest mean average score and is almost as strong on both the female and males sample of the participants. The above findings align with the results previously demonstrated in figure 6. The box plot also illustrates 3 outliers in the male participants and 2 in the female sample.

Figure 12- Box Plot of Social Support: Close Friends' Scores Stratified by Gender



School scores stratified by gender showed a higher average mean in male's participants as compared to female's participants as illustrated in the box plot graph (figure 13). This concludes that male participants perceived social support from school as stronger than female participants.

Figure 13- Box Plot of Social Support: School Scores Stratified by Gender



It can be deduced that the mean average score for the close friend's category was the highest source for both female and male participants. The parents score category had the second highest mean average score with a stronger male perception than female participants followed by teachers score category with a stronger female perception than male participants. Classmate scores stratified by gender had the fourth highest mean average score with almost the same perception by both female and male

participants. School social support scores stratified by gender exhibited the least average mean score with male participants demonstrating higher perception of school support than female participants.

#### Wellbeing score stratified by gender

The following section of the study demonstrates the Well- Being Scale scores stratified by gender. The results illustrate almost similar mean average scores for both female and male participants as represented in the box plot graph below (see Figure 14). Perception of well- being is not significantly different in both male and female participants with one outlier in the male sample of participants.

Figure 14- Box Plot of Well- Being Scale Scores Stratified by Gender

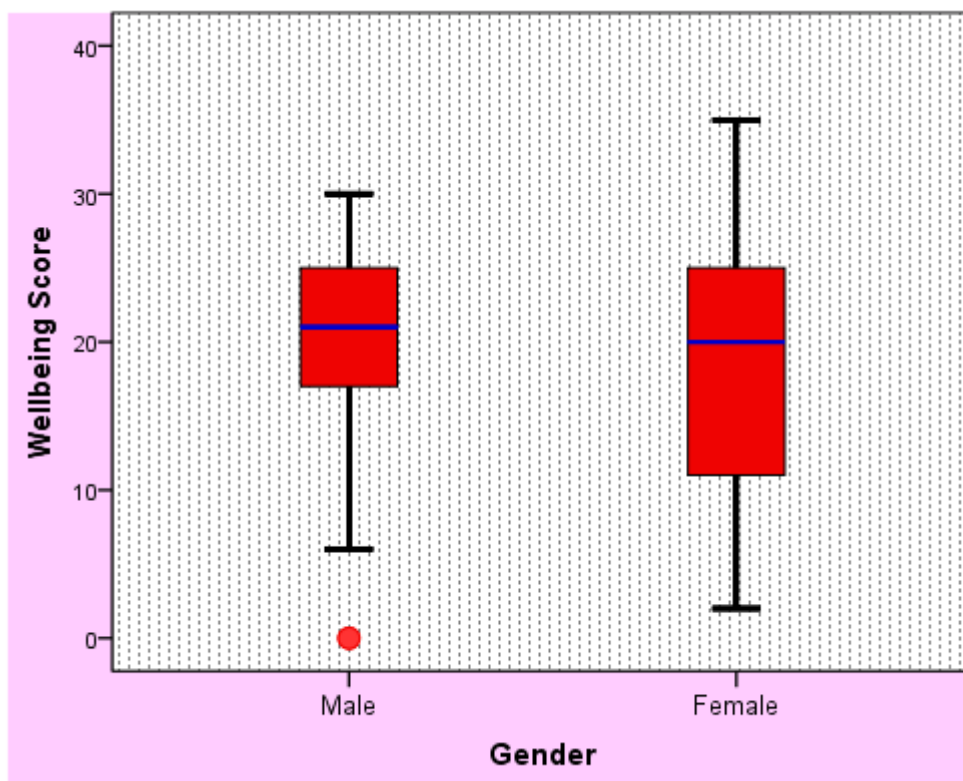


Table 4- Mean and Standard Deviation for Each Social Support Sub-type Scores and Well- Being Score Stratified by Gender

Group Statistics					
	Gender	N	Mean	Std. Deviation	Std. Error Mean
Social support: parents score	Male	37	96.89	12.22	2.00
	Female	61	88.92	15.67	2.00
Social support: teachers score	Male	37	67.41	18.78	3.08
	Female	61	73.34	16.12	2.06
Social support: classmates score	Male	37	67.92	20.82	3.42
	Female	61	72.54	23.10	2.95
Social support: close friends score	Male	37	97.62	16.85	2.77
	Female	61	92.20	21.44	2.74
Social support: school score	Male	37	68.08	25.70	4.22
	Female	61	58.69	21.74	2.78
Wellbeing score	Male	37	20.03	7.45	1.22
	Female	61	18.03	8.48	1.08

#### Two Independent Sample t-test

The two independent sample t- test for each score was calculated to highlight the statistically significant differences between males and females. From the below table, we can deduce that there was no statistically significant difference except for parents score with mean difference of 7.97 and p-value of 0.01 (see Table 5).



Table 5- Two Independent Samples T-test For Each Score Stratified By Gender

		Levene's				T-test for Equality of Means				
		Test for								
		Equality								
		of								
		Variance								
		s								
						95%				
						Mean	Confidence			
						Sig.	Differenc	Std. Error	Interval of	
						(2-	e	Differenc	the	
						tailed)	(Male-	e	Difference	
						Female)			Lower	Upper
									r	r
Social support: parents score	Equal variance assumed	2.36	2.64	96	.010*	7.97	3.01	1.98	13.96	
	Equal variance not assumed		2.80	89.96	.006	7.97	2.84	2.33	13.61	

		Levene's Test for Equality of Variance				T-test for Equality of Means				
		F	Sig.	t-test	df	Sig. (2-tailed)	Mean Difference (Male-Female)	Std. Error Difference	95% Confidence Interval of the Difference	
									Lower	Upper
Social support: teachers score	Equal variances assumed	.38	.53	1.66	96	.10	-5.93	3.57	-13.04	1.16
	Equal variances not assumed			1.59	67.31	.11	-5.93	3.71	-13.35	1.47

		Levene's		T-test for Equality of Means						
		Test for								
		Equality								
		of								
		Variance								
		s								
				95%						
				Mean		Confidence				
				Sig.	Differenc	Std. Error	Interval of			
				(2-	e	Differenc	the			
				tailed)	(Male-	e	Difference			
					Female)		Low	Upper		
							r	r		
Social support: classmate s score	Equal variance assumed	1.13	.28	-.99	96	.32	-4.62	4.64	-13.83	4.59
	Equal variance not assumed				82.28	.31	-4.62	4.52	-13.62	4.37

		Levene's				T-test for Equality of Means				
		Test for								
		Equality								
		of								
		Variance								
		s								
						95%				
						Mean	Confidence			
						Sig.	Differenc	Std. Error	Interval of	
						(2-	e	Differenc	the	
						tailed)	(Male-	e	Difference	
							Female)		Low	Upper
									r	r
Social support: close friends score	Equal variance assumed	5.01	1.31	96	.19	5.42	4.13	-2.78	13.63	
	Equal variance not assumed		1.39	88	.16	5.42	3.90	-2.32	13.17	

		Levene's Test for Equality of Variance			T-test for Equality of Means					
		F	Sig.	t-test	df	Sig. (2-tailed)	Mean Difference (Male-Female)	Std. Error Difference	95% Confidence Interval of the Difference	
									Lower	Upper
Social Support:	Equal variances assumed	1.45	.23	1.93	96	.05	9.39	4.85	-.24	19.03
	Equal variances not assumed			1.85	66.52	.06	9.39	5.06	-.70	19.49

		Levene's				T-test for Equality of Means				
		Test for								
		Equality								
		of								
		Variance								
		s								
						95%				
						Mean	Confidence			
						Sig.	Differenc	Std. Error	Interval of	
						(2-	e	Differenc	the	
						tailed)	(Male-	e	Difference	
							Female)		Low	Upper
									r	r
Wellbeing Score	Equal	3.59	1.17	96	.24	1.99	1.69	-1.36	5.35	
	assumed									
Wellbeing Score	Equal		1.21	83.76	.22	1.99	1.63	-1.26	5.25	
	assumed									

## Correlations

In the present study Kendall rank correlation was used to measure the association between gender, wellbeing and social support subtypes while Pearson correlation was used to measure the association between psychological wellbeing and social support subtypes. Our aim is to determine the strength of the relationship between gender and the variable of wellbeing, gender and the subtypes of social support, and between wellbeing and the subtypes of social support among the sample of 98 participants (see Table 6). Male was coded as (0) and female was coded as (1). The correlation between the gender and the variable well-being, exhibited a 8 % relationship between gender and well-being with a p value of  $0.29 > 0.05$  which implies that there is no significant correlation between gender and well-being in both the males and females sample of the participants as illustrated in Table 12.

The correlation between gender and social support from parents is equal to 25% with a p value of  $0.02 < 0.05$  which implies that there is a significant correlation between males and females related to parents support. In other words, females are less supported by parents than males by 25 %. The correlation between gender and social support from teachers demonstrated results of 11 % with a p value of  $0.16 > 0.05$  which implies that there is no significant correlation between males and females related to teachers support. As for the correlation between gender and social support from classmates, the results illustrated a relationship of 6 % with a p value of  $0.40 > 0.05$  which implies that there is also no significant correlation between males and females related to classmates support. Furthermore, the correlation between gender and social support from close friends is equal to 10 % with a p value of  $0.21 > 0.05$  which implies that there is no significant correlation between males and females related to close

friends support. Finally, results for the correlations between gender and social support from school demonstrated a 16 % relationship with a p value of 0.048 <0.05 which implies a significant correlation between males and females related to school support but in favor for males. It can be deduced that social support from parents and school were the only significant correlated scores sourced by gender.

Table 6- Kendall Rank Correlations of Gender and Each Social Support Sub-Type Score, and Pearson Correlation of Well-Being Score and Each Social Support Sub-Type Score

Kendall Rank Correlations				
		Kendal Correlation	P-value	
Gender	Wellbeing	-0.08	0.29	
	Social support	Parents	-0.25	0.02**
		Teachers	0.11	0.16
		Classmates	0.06	0.40
		Friends	-0.10	0.21
		School	-0.16	0.04**
			Pearson Correlation	P-value
Wellbeing	Parents	0.11	0.24	
	Teachers	0.29	0.003**	
	Classmates	0.29	0.003**	
	Friends	0.09	0.34	
	School	0.28	0.005**	



The correlation between the variables of perceived social support from the five categories of support: parents, teachers, classmates, close friends, and school and psychological well-being were also examined in this present study (see Table 6). Results for the correlation between well-being and social support from parents were 11% with a p value of  $0.24 > 0.05$  which implies that there is no significant correlation between well-being and social support from parents. The same implied to social support from close friends. However, correlation between well-being and teacher support was 29% with a p value of  $0.03 < 0.05$  which implies there is a significant correlation between well-being and teacher support. The same results were yielded for the correlation between well-being and classmates support which also implies that there is a significant correlation between well-being and classmates support. The last category of social support, school support, has shown significance in the correlation between well-being and social support from school with 28% correlation and p-value 0.005. The results of the correlation conclude that social support from teachers, classmates and school is important for the well-being of the participants and more could be invested in this area.

### Regression Models

The present study also used hierarchical multiple linear regression models with ordinary least square estimation of the coefficients to test for the association between the five social support subtypes, gender and social support subtypes\*gender interaction terms as independent variables and well-being (see Table 7). Specifically, this analysis addressed the sub-research question 2, which asked: How does gender affect the relationship between perceived social support and the psychological well-being of

adolescents residing at the orphanage? Firstly, we regressed each social support subgroup score as independent variables on the wellbeing score as dependent variable. The results have shown that when the teachers support score increased by one unit, the well-being score increased by 0.13 units as it is significant with the p value  $0.003 < 0.05$ . Simultaneously, an increase in the classmate social support score by one units increased the well-being score by 0.10 units and it is significant also with the p value  $0.003 < 0.05$ . With respect to school social support, as it increases by one unit the wellbeing score increases by 0.09 units with p-value of 0.005.

Nevertheless, support from parents and friends were both non-significant predictors for well-being at the 0.05 level of significance with p-values of 0.24 and 0.34, respectively. The initial regression models with only the main effects of the five social support types were regressed and compared to a more complex model that included these main effects plus the inclusion of gender as a moderating variable (see Table 7). Gender was entered as a dummy variable by which it was entered as (0) for males and (1) for females. The results concluded that gender is not affecting the relationship between social support and the well-being of both male and female participants i.e. gender was not significant predictor in all the tested models. Finally, in the last section of the quantitative analysis, the researcher introduced an interaction term between the five subtypes of social support: parents, teachers, classmates, close friends and school, and the variable of gender by creating an interaction terms: parents\*gender, teachers\*gender, classmates\*gender, friends\*gender and school\*gender. After running the regression models for every social support subtypes item with gender and its interaction term, the results concluded that gender and the interaction term created are not statistically significant with p-values  $> 0.05$  as represented in Table 13.

Table 7- Regression Models

			Psychological well being							
			Unstandardized B-Coefficient	T- test	P-value	95%		R	R <sup>2</sup>	P-value
Predictors	Moderator	Interaction term				Confidence interval				
Model 1	Parents	Teaches	0.06	1.16	0.24	[-0.04 - 0.17]	0.11	0.01	0.24	
		Teachers	0.13	3.01	0.003	[0.04-- 0.22]	0.29	0.08	0.003	
		Classmates	0.10	3.01	0.003	[0.03-- 0.17]	0.30	0.08	0.003	
		Friends	0.04	0.95	0.34	[-0.04- -0.12]	0.09	0.09	0.34	
Block 1	Parents	School	0.09	2.88	0.005	[ 0.03-- 0.16]	0.28	0.08	0.005	
		Parents	0.05	0.88	0.37	[-0.06- -0.16]	0.15	0.02	0.37	

			Psychological well being						
							95%		
			Unstandardized	B-Coefficient	T- test	P-value	Confid		
Predictors	Moder	Interaction					ence	R	R <sup>2</sup>
	ator	term				interva			
						l			
	Gender		-1.59	-	0.3	[-5.07-			
				0.9	6	--1.89]			
				0					
Teachers			0.15	3.2	0.0	[0.06 --			
				9	01	-0.24]			
	Gender		-2.89	-	0.0	[-0.14-	0.	0.1	
				1.7	8	--0.34]	34	1	
				7				0.0	
Classmates			0.11	3.1	0.0	[0.04--			
				7	02	-0.18]			
	Gender		-2.51	-	0.1	[-5.74-	0.	0.1	
				1.5	2	--0.70]	33	0	
				4				0.0	
Friends			0.03	0.8	0.4	[-0.04-	0.	0.0	
				0	2	-0.11]	14	2	
								0.3	
								6	

			Psychological well being							
			Unstandardized B-Coefficient	T- test	P-value	95%		R	R <sup>2</sup>	P-value
Predictors	Moderator	Interaction term				Confidence interval				
	Gender		-1.81	-	0.2	[-5.20-				
				1.0	9	--1.58]				
				6						
	School		0.09	2.6	0.0	[0.02--				
				9	08	- 0.16]				
							0.	0.0	0.0	
	Gender		-1.12	-	0.5	[-4.43-	29	8	1	
				0.6	0	--2.19]				
				7						
Block 2	Parents		0.19	0.8	0.3	[-0.26 -				
				5	9	--0.65]	0.	0.0	0.4	
	Gender		6.43	0.5	0.6	[-	16	2	6	
				1	0	18.24--				
						31.10]				

			Psychological well being							
			Unstandardized B-Coefficient	T- test	P-value	95% Confid ence interva l		R	R <sup>2</sup>	P-value
Predictors	Moder ator	Interaction term								
		Parents*Gen der	-0.08	-	0.5	[-0.34 -				
				0.6	1	-- 0.17]				
				5						
Teache rs			0.12	0.8	0.4	[-0.17-				
				0	2	- 0.42]				
	Gende r		-4.27	-	0.5	[-17.5 -	0.	0.1	0.0	
				0.6	2	- 9.04]	34	1	09	
				3						
		Teachers*G ender	0.02	0.2	0.8	[-0.16 -				
				1	3	-- 0.20]				
Class mate			0.14	1.1	0.2	[-0.11-				
				1	6	-- 0.41]	0.	0.1	0.0	
	Gende r		-1.07	-	0.8	[-	33	1	1	
				0.1	4	12.04--				
				9		-9.90]				

			Psychological well being								
			Unstandardized B-Coefficient	T- test	P-value	95% Confid ence interva l			R	R <sup>2</sup>	P-value
Predictors	Moder ator	Interaction term									
		Classmates*	-0.02	-	0.7	[-0.17-					
		Gender		0.2	8	--0.13]					
				7							
Friend			0.21	1.2	0.2	[-0.12--					
s				6	0	-0.54]					
	Gender		8.11	0.8	0.3	[-					
	r			8	8	10.14--	0.	0.0	0.3		
						26.38]	18	3	6		
		Friends*Gen	-0.10	-	0.2	[-0.29-					
		der		1.0	7	-0.08]					
				9							
School			0.14	1.2	0.2	[-					
				5	1	0.08—	0.	0.0	0.0		
						0.36]	29	8	3		
	Gender		0.89	0.1	0.8	[-8.50--					
				9	5	-10.30]					

			Psychological well being							
			Unstandardized B-Coefficient	T- test	P-value	95%		R	R <sup>2</sup>	P-value
Predictors	Moderator	Interaction term				Confidence interval				
		School*Gen	-0.03	-	0.6	[-				
		der		0.4	4	0.17—				
				5		0.10]				

*Note. Gender was entered as a dummy variable, male gender was coded as (0) and female gender was coded as (1)*

#### R and R-square model

Additionally, the R and R-square for each model was reported, R- square represents the amount of variation of dependent variable explained by the independent variables. We can deduce that delta R-square has increased respectively between models presented in both block 1 and block 2 regression models. But, in both blocks it was found that neither gender nor the interaction term was statistically significant. For example,  $\Delta R^2$  for the second model in block 1 and second model of block 2 was (0 %) increase ( $0.116 - 0.116 = 0$ ) (See Table 8).



Table 8- Amount of Variation of Yi Explained by the Xi

	Block	R	R <sup>2</sup>	$\Delta R^2$
Model 1	Block 1	0.15	2%	0%
	Block 2	0.16	2%	
Model 2	Block 1	0.34	11.6%	0%
	Block2	0.34	11.6%	
Model 3	Block 1	0.33	10.9%	0.1%
	Block 2	0.33	11%	
Model 4	Block 1	0.14	2%	1%
	Block 2	0.18	3%	
Model 5	Block 1	0.29	8%	0%
	Block 2	0.29	8%	

#### Explanatory Models

Moreover, in order to find an overall association (explanatory) between all the social support subtypes, the psychological wellbeing and gender, two full multiple linear regression models and one reduced linear model were built using a backward regression stepwise method with probability to enter=0.05 and probability to remove=0.05 with 95% confidence interval (Tables 9 to 17). The R-square for these models ranged between 16%, 18% and 16% respectively, with p-values of 0.005 for the two full models and 0.001 for the reduced one. To determine whether the regression assumptions were met, the residuals were analyzed to determine normality Q-Q plot (i.e., the quantiles of residuals should align with those of a normal distribution) and

constancy of variance and absence of trend in the residuals. Additionally, the effect of leveraging, extreme observations was investigated. Because gender as a moderator was not found to be significant and the diagnostics were not different across models, residuals for the three models were analyzed. The researcher's analyses of residuals and extreme observations have shown that none of the observations substantially biased the regression coefficients and there is sufficient variance constancy and lack of trend in the residuals.

Only two predictors of the reduced model were found to be significant (teachers scores and classmates score) with p-values of the coefficient of 0.012 and 0.018 respectively.

Conclusion: gender is not a significant predictor in both the hierarchical multiple linear regression models and the explanatory multiple linear regression models.

Table 9- Explanatory Model 1: Psychological Wellbeing and All Social Support Subtype Scores Regression

Model summary									
Model	R	R Square	Adjusted R Square	Std. Error of the Estimate	R Square Change	Change statistics			Sig. F change
						F Change	df1	df2	
1	.40 <sup>a</sup>	.16	.120	7.62	.165	3.63	5	92	.005

Table 10- ANOVA of Explanatory Model 1

Model	Sum of Squares	df	Mean Square	F	Sig.
Regression	1058.81	5	211.76	3.63	.005 <sup>b</sup>
Residual	5353.68	92	58.19		
Total	6412.50	97			

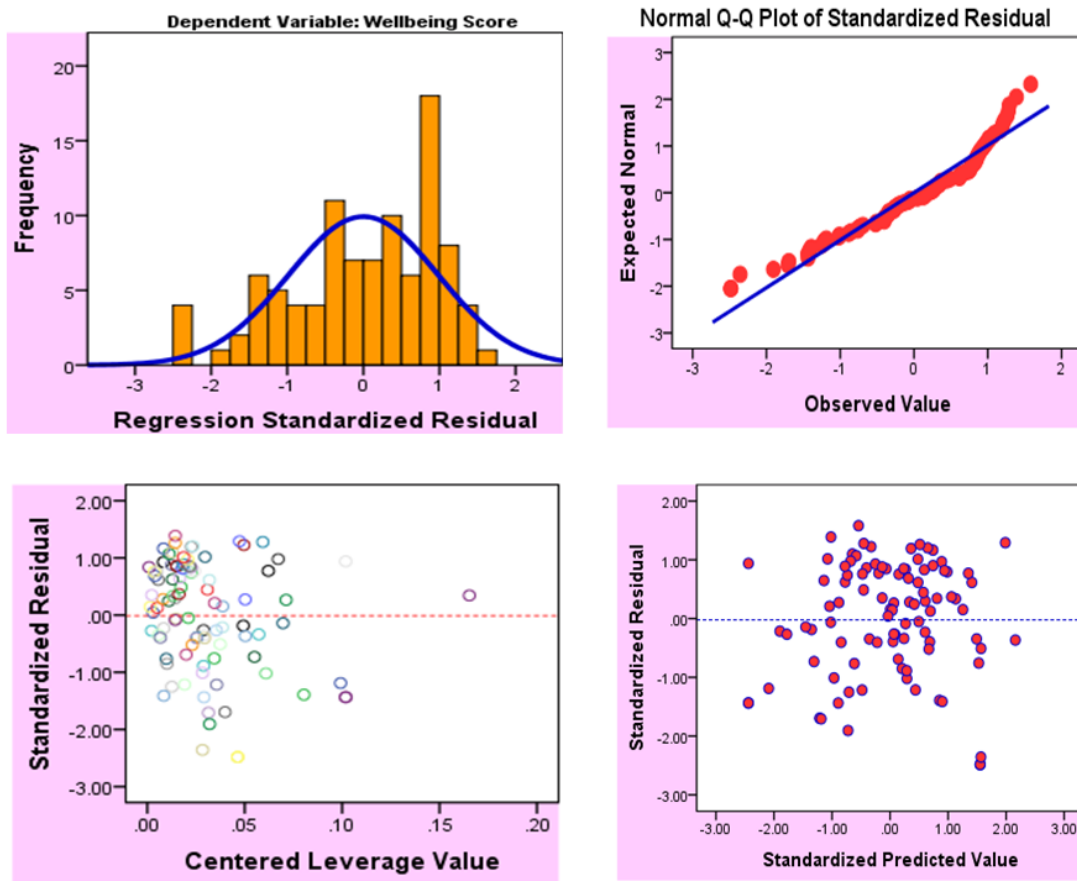
Table 11- Regression Coefficients of Explanatory Model 1

Psychological wellbeing							
Coefficients							
Social support: Predictors	Unstandardized		Standardized		P- value	95% confidence	
	coefficients	Std. Error	coefficients	t-test		Lower bound	Upper Bound
	$\beta$		Beta				
(Constant)	-3.30	6.78		-.48	.62	-16.77	10.16
Parents score	.07	.05	.13	1.32	.18	-.03	.18
Teachers score	.09	.05	.19	1.65	.10	-.01	.20
Classmates score	.07	.03	.21	2.03	.04***	.002	.15
Close friends score	.01	.04	.03	.31	.75	-.07	.09
School score	.03	.04	.08	.74	.46	-.05	.11

Note. Dependent Variable: Wellbeing Score

Independent variables: Parents score, Teachers score, Classmates score, Friends score, School score

Figure 15- Diagnostic Plots of Explanatory Model 1



*Note.* Diagnostic plots:

Top right and left plots assess the normality of the residuals with both histogram plot and normal Q-Q plot.

Bottom right and left plots assess whether observations reached the critical threshold for leveraging observations that bias coefficients. None reached a Cook's distance greater than 0.5

Table 12- Explanatory Model 2: Psychological Wellbeing and All Social Support Subtype Scores Regression and Gender as Moderator

Model Summary									
Model	R	Adjusted R Square	Std. Error of the Estimate	Change Statistics					
				R Square Change	F Change	df1	df2	Sig. F Change	
1	.42 <sup>a</sup>	.18	7.59	.18	3.37	6	91	.005	

Note. <sup>a</sup> Dependent Variable: Wellbeing Score

Table 13- ANOVA of Explanatory Model 2

Model		Sum of Squares	df	Mean Square	F	Sig.
2	Regression	1168.35	6	194.72	3.379	.005 <sup>b</sup>
	Residual	5244.14	91	57.62		
	Total	6412.50	97			

Note. <sup>a</sup> Dependent Variable: Wellbeing Score

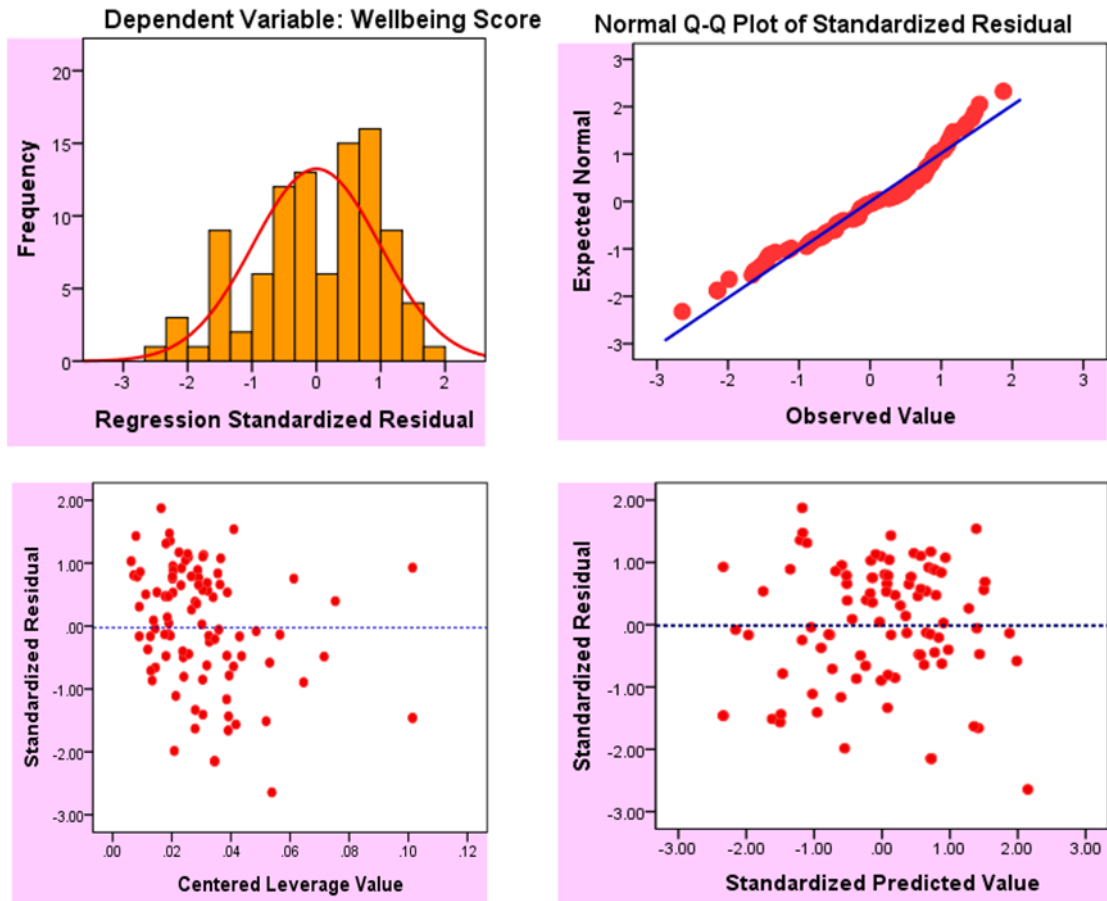
<sup>b</sup> Predictors: (Constant), Gender, Parents Score, Teachers Score, Classmates Score, Close Friends Score, School Score

Table 14- Regression Coefficients of Explanatory Model 2

Model	Unstandardize		Standardize	T	Sig.	95.0%	
	d Coefficients		d			Confidence	
			Coefficients			Interval for B	
	B	Std. Error	Beta			Lower Bound	Upper Bound
(Constant)	1.25	7.51		.16	.86	-13.67	16.18
Parents Score	.05	.05	.10	1.03	.30	-.05	.17
Teachers Score	.11	.05	.24	1.98	.04**	.00	.23
Classmates Score	.08	.03	.23	2.19	.03***	.00	.16
Close Friends Score	.01	.04	.03	.30	.76	-.07	.09
School Score	.01	.04	.02	.23	.81	-.076	.09
Gender	-2.43	1.76	-.14	-1.37	.17	-5.94	1.07

Note. <sup>a</sup>Dependent Variable: Wellbeing Score

Figure 16- Diagnostic Plots of Explanatory Model 2



*Note.* Diagnostic plots:

Top right and left plots assess the normality of the residuals with both histogram plot and normal Q-Q plot.

Bottom right and left plots assess whether observations reached the critical threshold for leveraging observations that bias coefficients. None reached a Cook's distance greater than 0.5

Table 15- Explanatory Model 3: Wellbeing, Teachers Score, Classmates Score and Gender

Model Summary									
Model	R	R Square	Adjusted R Square	Std. Error of the Estimate	Change Statistics				
					R Square Change	F Change	df1	df2	Sig. F Change
1	.40 <sup>a</sup>	.16	.14	7.53	.16	6.29	3	94	.001

Note. <sup>a</sup> Predictors: (Constant), Gender, Classmates Score, Teachers Score

<sup>b</sup> Dependent Variable: Wellbeing Score

Table 16- ANOVA of Explanatory Model 3

Model		Sum of Squares	df	Mean Square	F	Sig.
1	Regression	1073.10	3	357.70	6.29	.001 <sup>b</sup>
	Residual	5339.39	94	56.80		
	Total	6412.50	97			

Note. <sup>a</sup> Dependent Variable: Wellbeing Score

<sup>b</sup> Predictors: (Constant), Gender, Classmates Score, Teachers Score

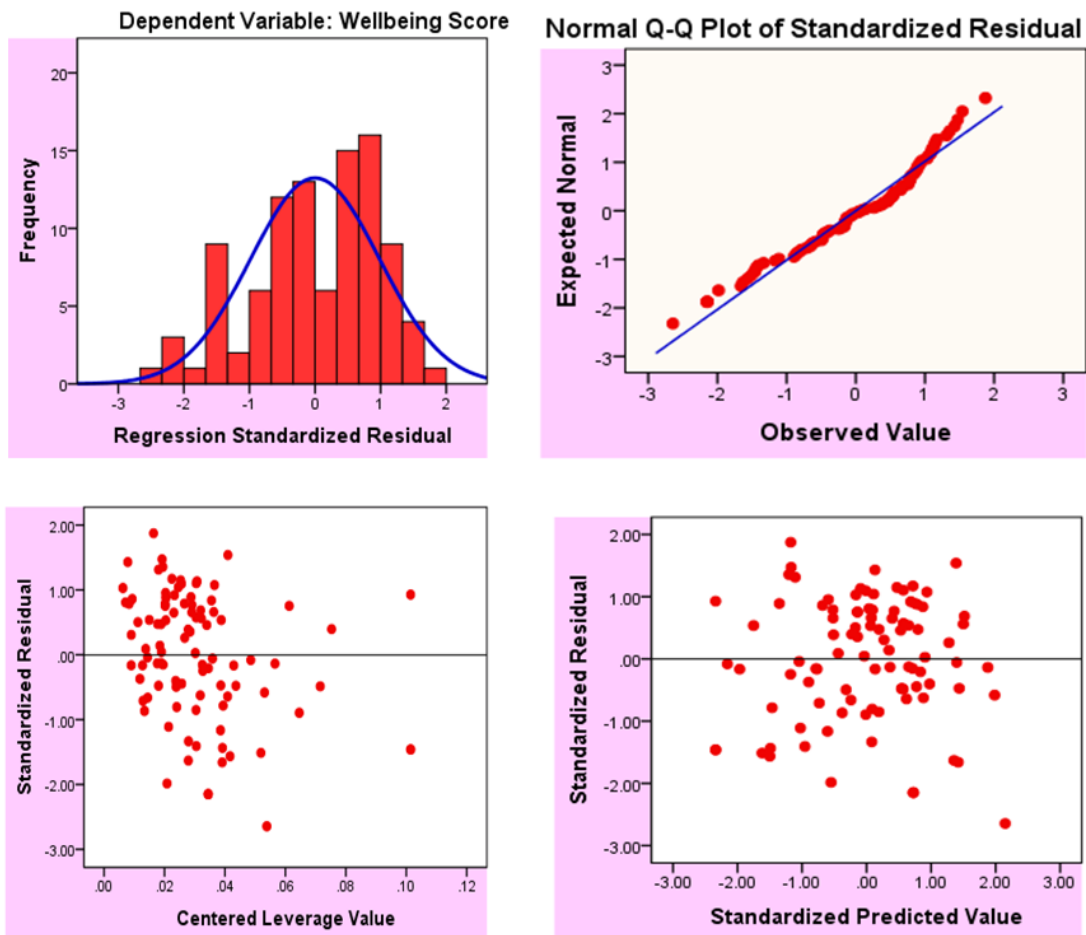


Table 17- Regression Coefficient of Explanatory Model 3

Coefficients									
Model	Unstandardized coefficients		Standardized coefficients	t	Sig.	95.0% Confidence interval for B		Collinearity statistics	
	B	Std. error				Lower bound	Upper bound	Tolerance	VIF
1 (Constant)	9.14	4.10		2.23	.02	1.00	17.29		
Teachers score	.12	.04	.25	2.56	.01*	.02	.21	.89	1.11
Classmate score	.08	.03	.23	2.41	.01*	.01	.15	.91	1.09
Gender	-	1.59	-.18	-	.05	-6.27	.05	.96	1.03

Note. <sup>a</sup>Dependent Variable: Wellbeing Score

Figure 17- Diagnostic Plots of Explanatory Model 3



*Note:* Diagnostic plots:

Top right and left plots assess the normality of the residuals with both histogram plot and normal Q-Q plot.

Bottom right and left plots assess whether observations reached the critical threshold for leveraging observations that bias coefficients. None reached a Cook's distance greater than 0.5

### **4.3. Qualitative Results**

In this section, the researcher reports the qualitative results of the study.

Qualitative results were obtained from 21 in-depth interviews with adolescent students who study and live in the orphanage in Lebanon. Parental consent was required in order for the participants to participate in interviews. The researcher used semi- structured interview protocol with open- ended questions. Semi- structured protocols follow a general format, though leave sufficient space for the participants to add things themselves (Wethington & McDarby, 2015). The general format of the interview protocol, which included a set of prepared questions as well as overall topics for the interview (Kallio et al., 2016), was prepared by the researcher in advance. Follow- up questions and further probing questions were added if needed on a case- by- case basis.

The researcher performed thematic analysis using the procedure outlined by Terry et al. (2017) in order to translate the participants' interview data into themes and subthemes. NVivo12, a qualitative data analysis software, was used to ease the analysis process. The specific measures taken to analyze the data were as follows. First, data were carefully reviewed several times so that the researcher could familiarize herself with the data. In a second step, initial codes were generated. This step referred to the identification of basic units of meaning and labeling them with a code. As initial codes were generated, the researcher started to see similarities and patterns within the data, which led to a third phase; the identification of preliminary themes and subthemes. However, the researcher made sure to code all data before moving on to this third step.

With regards to the third phase, themes and subthemes represent larger ideas, ones which may involve the interaction of several coded units of meaning. Once the preliminary theme list had been compiled, the fourth step was to double check the

content of the themes and subthemes against original data to be sure the preliminary themes accurately reflected the data, Thus, in this step, the themes and subthemes were reviewed and finalized. Then, in the fifth step, the themes were defined, meaning that they were accredited key terms of short phrases that represented the meaning of the themes and subthemes.

The final stage of the analysis was to interpret the final list of themes and produce a report. The below sections report on the results of the qualitative thematic analysis of the data. Verbatim responses of the participants were incorporated to support established themes and guarantee that the results were directly from the participants' shared lived experiences and not the researcher's personal perceptions or ideas. Tables were used that reported on how frequent certain ideas were mentioned by participants, and by whom. The themes that resulted from the thematic analysis were: (a) support from teachers and supervisors, (b) support from friends, (c) support from counsellors, (d) health support, (e) self-support, and (f) evaluation of support. In the below sections, the results are elucidated and discussed in detail. Direct participant quotes and frequency tables are used to support the claims and illustrate the findings.

#### ***4.3.1. Support from Supervisors and Teachers***

The first theme related to the perceived support from supervisors and teachers in the orphanage. In this regard, all 21 participants (100%) mentioned receiving support from their supervisors and teachers in one way or another. The specific subthemes in relation to this theme were: (a) material support, (b) academic support, (c) advice and conflict resolution, and (d) emotional and moral support.

Eighteen participants (85.7%) mentioned material support, mostly referring to the supply of stationary, clothes, and other material, but also to the provision of activities. Eighteen participants (85.7%) reported that they receive good academic support from their supervisors and teachers. Participants strongly appreciated such support as participants viewed good education as paramount. Third, 17 participants (81%) said they often went to their supervisors or teachers for advice and conflict resolution. These participants stated that when they would be in a fight with fellow students, they would often consult their supervisors or specific teachers for help in resolving the issue.

Lastly, 11 participants (52.4%) found supervisors and teachers useful for emotional and moral support. All subthemes are further explored in the following sections and direct participant quotes are used to support and illustrate claims. Table 24 provides information regarding the subthemes, how frequently they were mentioned, and by whom.

Table 18- Frequency Table of Subthemes – Theme 1: Support from Supervisors and Teachers

Subtheme	Participant code	Percentage (%; n=21)	Frequency
Material support	P2, P8, P9, P10, P11, P12, P13, P14, P15, P16, P17, P18, P19, P20, P21, P22, P23, P24	85.7%	26
Academic support	P2, P4, P8, P10, P11, P12, P13, P14, P15, P16, P17, P18, P19, P20, P21, P22, P23, P24	85.7%	24
Advice and conflict resolution	P1, P2, P3, P4, P8, P9, P11, P12, P14, P16, P17, P18, P19, P20, P21, P23, P24	81%	43
Emotional and moral support	P1, P2, P3, P4, P8, P11, P12, P17, P20, P21, P23	52.4%	25

*Note.* There are no participants 5, 6 and 7.

#### Material support

Eighteen participants (85.7%) mentioned material support, mostly referring to the supply of stationary, clothes, and other material, but also to the provision of activities. Participant 24 explained that “in general, everything we may need or ask for is provided when needed.” Participant 8 detailed:

The staff members here are really good. They provide us with everything we ask for. They give us clothes, money, and anything we need. (...) if we need any stationary at school, they will immediately provide it. I am very grateful to the teachers, staff members and orphanage director.

Participant 10 appended:

In general, they provide us with everything we ask for. If we need something for our beddings or clothing's, we ask the supervisor in charge of the dormitory where I sleep. If we need stationary, we ask the supervisor at the school.

Participant 9 similarly said that “at the beginning of the year, when I joined the orphanage, they gave us stationery and things for the dormitory like bed linens.”

Participant 12 added:

If I need personal resources, I turn to the supervisor in charge of the dormitory where I sleep. If need stationary, I will turn to the supervisor in charge at school. Anything we may need or ask for is available for us.

Participant 17 stated:

Mr. Rabih and Mr. Kamal, the supervisors in charge of the boys' section, provide us with everything we may need or ask for. Mr. Rabih will always remind us that we may turn to him whenever we may need anything

Lastly, Participant 2 explained how teachers and supervisors also organized fun activities and things to do:

(...) She organizes the activities at school, she does fun stuff. We even asked her for certain things and she did them. And at days, she does [organize] entertaining stuff for us. (...) For example, we asked her for a scouts program

and she provided it.

### Academic support

Eighteen participants (85.7%) reported that they receive good academic support from their supervisors and teachers. Participants strongly appreciated such support, as they viewed good education as paramount. Participant 15 stated in this regard that “the education is very good and the teachers at school will give us all the support we may need.” Similarly, Participant 17 found that “education is good” and that “teachers always provide support when we need it.” Participant 13 explained that “among my classmates, I am the smartest one in class” and explained that he would not turn to his friends for support. Instead, he stated, “If I needed academic support, I turn to my subject teachers.”

In terms of who they would turn to for support, participants explained that they would consult different people according to the time of day and the availability of supervisors and teachers. Participant 17, for example, stated that “during the day, I turn to the subject teachers. In the afternoon, I will turn to the teacher available during the study session.” Similarly, Participant 8 said, “For academic support, I ask my teachers for help. In the afternoon study session, I would ask the teachers that is in the room with us.”

Participant 13 added, “During the afternoon study session, we also have a teacher available to help us if we needed support.” Further, this participant added, “Sometimes I may also turn to Mr. Kamal, the supervisor in charge of the boy’s section.” Lastly, Participant 11 explained:



If I need academic support, I turn to my teachers and supervisors. In the afternoon, we also have teachers to help us. If the teachers are unavailable, I turn to Mr. Rabih and Mr. Kamal, the supervisors in charge of the boy's section.

Participant 4 elucidated in more detail what such academic support would look like:

Sometimes, when our academic teachers try to teach a subject and we don't get it. They will keep repeating a topic until you fully understand it. They always support us with extra work. I go up to my supervisor and she advises me to do well.

#### Advice and conflict resolution

Seventeen participants (81%) said they often went to their supervisors and/ or teachers for advice and for conflict resolution. Participant 14 explained in this regard that "in case someone has a problem, they will listen and help resolve it." Participant 2 similarly added that "they advise us" and "guide us on how to deal with certain people."

Participant 16 further appended, "When something is annoying me, they would listen to me, advise me and give me ways to resolve my problems."

With reference to who participants would turn to for advice, Participant 12 explained that "most of the time, I turn to the supervisor in charge of the dormitory where I sleep. She also listens to us and help us resolve our problems." This participant explained that she might turn to someone else depending on the problem, stating, "If the problem takes place in the dormitory, I turn to the supervisor in charge. If the problem takes place in the playground, I turn to one of the supervisors on duty." Participant 1 similarly explained:

It depends what kind of support I need. If the problem is related to the dormitory, I seek help from the supervisor in charge of my section and we try to resolve it together or within us two only. If the problem is bigger, it may sometimes reach the orphanage director and is resolved through her.

Participant 16 made a similar comment:

If the issue annoying me was not so serious, I would turn to Mr. Kamal or Mr. Rabih, the supervisors in charge of the boys' section. When the issue is serious, I turn to Miss Hayat, the orphanage director.

Participant 12 mentioned a specific supervisor, going by the name Miss Hind. She explained:

She is like a mother to me. She listens to me, guides me, advises me, and tells me what do when I face a problem. I feel very comfortable around her. Most girls turn to Miss Hind for support. We all love her.

Participant 2 mentioned going to the same supervisor and added that “she understands us the most, and she’s very easy to talk to.” The participant explained, “We like to tell her everything. She hears us out and advises us. Even when we have problems with the supervisors or our friends, we go to her.” Lastly, Participant 12 added:

If some students are not comfortable sharing their stories with any of the teachers or supervisors, they may seek the support of the orphanage director. She also listens to students and help them resolve their problems. She is a very good lady.

Participant 21 similarly said that she relies on a specific supervisor, explaining, “I will turn to Miss Sumaya, the supervisor in charge of the dormitory where I sleep.

She is like our own mother. We don't hide things from her. She really helps us resolve our problems." More specifically, this participant stated, "She will listen to me, highlight the areas I did wrong, and guide my behavior. She will tell that I need to be calm when faced with a problem and control my anger."

More specifically in relation to conflict resolution, 14 participants (66.7%) stated that when they would be in a fight with fellow students, they would often consult their supervisors or specific teachers for help in resolving the issue. Participant 8 explained in this regard that she would go to supervisors when in need of friendship advice or conflict with friends:

I would turn to a member of staff and/ or teacher that is close to me or that I feel comfortable with. Sometimes I turn to the supervisor in charge of the dormitory where I sleep. Sometimes to Miss Samia or Miss Noha, the general supervisors. They are all available to help us. (...) They listen to us and help us. For example, if we fight with someone, they tell us not hit or yell at them. Instead they tell us to report it to a member of staff. The staff member will tell us how to deal with the situation.

Participant 20 explained that "if a friend hits me, I prefer not to hit him back. I choose to turn to either Mr. Kamal or Mr. Rabih, the supervisors. They will help me resolve the problem." He stated that "they will listen to us, try to understand the problem, and advise us." Similarly, Participant 19 said that "they will listen to us, try to understand the problem, advise us by telling us not to do it again, and then ask us to be friends again." Participant 1 recalled an example of such a situation:

I had a fight with a friend, and we went to the head of supervisors. She sat with both of us, listened to us first, then highlighted where we both went wrong and

told us that as friends we should always be next to each other, we should understand each other, respect each other's point of views and opinions, and not magnify the problem. At the end, the problem was resolved in her office and we were friends again.

Eight participants explained that they would first try to resolve the problem themselves before turning to a supervisor. Participant 16, for example, explained that "First, I will try to resolve it with my friend. If the problem is not resolved, I would turn to Mr. Kamal. He will help me resolve the problem." Similarly, Participant 11 reported that he would first try to solve the problem himself, but stated that "if the problem escalates, I turn to a teacher or supervisor." This participant said that "they help us resolve our problems" and "they guide us." According to the participant, supervisors and teachers "listen to us" and "give us advice;" more specifically, "they tell us that our friends are like our siblings and we should not fight." Participant 23 added:

They will listen to both of us and try to understand the problem or conflict. If it was my fault, I get punished. If it's the other boy's fault, he will get punished.

They will then make us reconcile / come to terms with one another.

Participant 3 indicated, "If we have trouble with our friends, Miss Nibal will also help us resolve our problems." More specifically, this participant explained:

She will call me first, and asks me about the problem (why I fought with my friend). She then calls the other girl and ask her the same thing. She will tell us "it's ok, you are all friends here and should treat each other like sisters. You are sleeping in the same room, eating the same food, and studying in the same classroom. You should not upset each other." She makes sure we are friends

again and that the problem is resolved. Miss Nibal is very kind to us. She treats us like her own children.

Participant 4 shared a last statement and explained that supervisors “help me ignore the things that are negative.” She explained that “if I have a problem, the supervisor and/ or teacher tells me to ignore it, but I don’t. I like to stick to my problems.” Thus, this participant explained that the advice given by supervisors would not always be suitable or the best possible advice: “I started it, and I should take it till the end. For example, if I fight with a friend, I don’t like to ignore the problem. I stick to it until I resolve it.”

#### Emotional and moral support

Eleven participants (52.4%) found supervisors and teachers useful for emotional and moral support. Participant 3 explained in this regard that “The supervisors are good. We feel comfortable around them. If we turn to them for support, they make you feel better.” Participant 2 similarly said that “they give us moral support” and that “there are times when I open up about what has bothered me and how my day has looked.” Participant 1 added, “Sometimes we may turn to a supervisor whom we are close to or hold a good relationship with, she with provide the support we need.” Participant 12 appended:

They always provide support when needed. They support you like your own parents do. They are very good. We can never pay back the orphanage for all the good they do for us. Some students here have no parents; the orphanage staff members compensate for the absence of their parents.

Participant 3 made a similar statement and believed that “they understand us maybe because they have had the same experience like us.” The participant referred to a specific supervisor:

If I need support, I turn to Miss Nibal because I know her very well. Miss Nibal is very good. When we sit with Miss Nibal, we feel like we are with our mother at home, we don't feel we are sitting with a supervisor.

In alignment, Participant 2 explained that “there is a particular teacher my peers seek to talk to about their problems. Her name is Miss Hind, and we all like her for being open minded and easy to talk to.” Participant 12 mentioned the same supervisor: “I usually to Miss Hind, she helps me when I am not feeling well.” This participant explained that “I really like her. Whenever I am annoyed or upset, I seek her support.” Participant 17 mentioned a different supervisor, stating, “Mr. Rabih will always remind us that we may turn to him whenever we may need anything or want talk to our parents.” Participant 20 further added, “Miss Ibtissam, my English teacher, whom I feel very comfortable with. She hears me and tries to resolve my problems.” Participant 8 mentioned another specific teacher for emotional support, recalling, “She helps me in everything. Takes care of me. She takes care of all the students. She is fair and does not favor someone more than others. I like all staff members.” This participant then added:

I always like to express my gratitude to the orphanage director. Every time I speak to her, I cry. I really love the orphanage director. She is the best. I have been here for 9 years and she has never addressed me negatively.

### 4.3.2. Support from Friends

A second theme related to support from friends and was mentioned by all 21 participants (100%). In this regard, participants mentioned two types of support: (a) academic support and (b) emotional and moral support. Both subthemes are further explored in the following sections and direct participant quotes are used to support and illustrate claims. Table 25 provides information regarding the subthemes, how frequently they were mentioned and by whom.

Table 19- Frequency Table of Subthemes – Theme 2: Support from Friends

Subtheme	Participant code	Percentage (%; n=21)	Frequenc y
Academic support	P3, P8, P10, P11, P12, P14, P15, P16, P17, P18, P19, P20, P21, P22, P23, P24	76.2%	17
Emotional and moral support	P1, P2, P3, P4, P10, P12, P13, P14, P15, P18, P20, P21, P22, P23, P24	71.4%	32

Note. There are no participants 5, 6 and 7.

### Academic support

A first subtheme was academic support. This theme related to how 16 participants (76.2%) would consult their friends and classmates for academic support. For example, Participant 14 said, “Sometimes I may turn to my friends for support.” Participant 19 made a similar comment and added that she would consult “usually older students” for academic support. Participant 22 similarly said that she turns to “classmates and/ or students older than me.” Participant 23 further added that she would usually turn to her teacher, but that “in the afternoon, I turn to my classmates for support.” Participant 20 added that “my friends and I usually sit together, complete our homework and help each other.”

Four participants (19%) mentioned asking help from their friends in the vocational school. Participant 10 said in this regard, “Since I am the only girl in grade 9 who resides in the orphanage, I don’t have any of my classmates in the afternoon. I ask my friends in the vocational school.” Similarly, Participant 12 stated, “In the afternoon, I turn to the girls in the vocational school for academic support.”

Although the previous quotes illustrated how academic support from classmates was considered beneficial, one participant said that her friends would sometimes not be available or willing to help her which she found frustrating:

If we have a spelling test, I go to my friends to help me memorize the words because I can’t usually do it by myself. Sometimes, my friends bother me because when they seek my help, I help them instantly, however, when I seek their help they tell me “We don’t feel like it or I want to sleep or I don’t want to help you with your studies”. This really bothers me.



However, this participant explained that especially if she would need help with English, her supervisor would not be able to assist as her proficiency in English is low: “Miss Nibal is not English proficient, so we seek help from our classmates.”

#### Emotional and moral support

A second subtheme related to emotional and moral support from friends. In this regard, 15 participants (71.4%) said they would usually consult their friends for moral support. According to Participant 1, “The support we get is good, specifically when from friends” because “we are all friends here, we stay together, and we like each other.” The participant explained that “problems between us don’t last too long, it’s just a period and it will pass.” Similarly, Participant 10 explained, “My friends are always next to me. If I ever have an incident with a friend, it doesn’t last long. We quickly try to resolve it.” Participant 18 agreed, stating, “The presence of my friends next to me is what keeps me here.”

Participant 23 stated that she would turn “to close friends, the ones I trust. They calm me down. They help me feel better.” In respect to the previous theme, trust seemed to play a particularly relevant role in seeking emotional and moral support and participants therefore said they would only open up and share their personal concerns and affairs with their closest friends. Participant 12 explained:

Everyone here has someone he/ she feels more comfortable with. One should not trust people randomly and go around sharing his/ her stories. You should stick to one or maybe a few friends you trust and is most comfortable with to share your stories with.

In alignment, Participant 4 said, “I do share stuff with my friends of course, my close ones are the ones I trust.” In addition, Participant 2 stressed that “You can’t trust in anyone randomly, but I do sometimes turn to my close friends.” She elaborated, “I do have a very close friend that I sometimes share my stories with. Once I do, I feel better.” Participant 3 further added, “I will tell my friend Sara. When she sees me crying, she approaches me and asks me why am I crying. I tell her. Sara has been with me for a long time and I feel comfortable telling her.”

Two participants specifically said they would only tell their friends general and non-personal things. Participant 24, for example, said that “I would only share general stuff with my friends.” Participant 18 similarly stated that “if the matter is not personal, and I feel I need to talk, I will turn to my best friend.” This participant further appended:

You can’t randomly trust anyone because if they’re upset at you, they will betray you. This has happened to me many times. I trust certain girls, and when we have a disagreement, they go tell on you. I only trust my best friend.

Seven participants (33.3%) specifically mentioned that they would prefer consulting their friends for emotional and moral support rather than their teachers or supervisors. Participant 2 explained, “We do have one teacher that we may turn to for support, but we usually prefer our friends.” This participant further stated, “Usually, I turn to my friends” because “we are closer to our friends than to the supervisors” and that therefore “we don’t usually turn to them for support.” Participant 1 similarly shared, “If the matter is personal, I prefer to talk to my friends, the ones very close to me, and not the supervisors and/or counselors.” Participant 10 agreed, stating, “I don’t

turn to any teacher or supervisor because I feel my friends are better, they understand me better.” The participant further appended:

Although the members of staff are available for us but I always prefer to turn to my friends. What I like about the orphanage is the fact that after 13 years, we are all friends, we stay next to each other, we support each other, we listen to each other.

Participant 22 shared a similar idea:

I feel it is better to trust your close friend with your secrets and not a member of staff. A friend is from the same age group. He will be able to understand better. Members of staff here are from an older age group. I don't feel they will be able to understand me.

Participant 14 further found that teachers and supervisors would not be able to give the proper support because “there are many students here at the orphanage, do you really think they can hear us all out?” In addition to the previous, Participants 10 and 15 added that their classmates and friends would also give them material support when necessary.

Participant 10 said in this regard:

Nowadays, we are short on feminine hygiene products. When needed, we borrow from each other. We are all like a big family here. Whenever we need anything, we always ask our friends. We are like sisters.

Participant 15 similarly said, “We share everything we have, from food to stationery, with each other.”

### ***4.3.3. Support from counselors***

A third theme related to the support from counselors, which only 12 participants (57.1%) mentioned. Contrariwise, nine participants (42.9%) specifically said to never have consulted a counselor and this for different reasons. Participant 16 explained that he had never consulted a counselor because “They never asked me to visit the counselor.” Participant 19 added, “It never crossed my mind.” This participant explained, “I did see a few of my friends go to their office, but I don’t know for what reasons.”

Like Participant 16, Participant 9 and Participant 23 respectively said that “I never felt that I had to visit them” and “I never felt the need to.” Participant 24 similarly said she had never felt the need to consult a counselor and added that “in the presence of my mother, I don’t feel the need to.” This participant said that her mother worked in the orphanage and that she therefore would always consult her mother rather than anyone else. Participant 13 explained, “I don’t like to share my stories with anyone.” This participant said that he does not share personal stories with anyone, including his friends, teachers, and supervisors.

The 12 participants (57.1%) who had consulted a counselor in the past reported positive experiences. Participant 12, for example, said that she went “once or twice maybe,” but then stopped going because “I felt I was feeling better so I thought, ‘Why should I keep on going?’” This participant explained, “I feel that if I continue to go, I will really believe that I am psychologically ill, which is not the case.” Participant 18 similarly linked counselling to psychological illness, stating, “She really made me feel better at the time, but I don’t like visiting doctors and/or psychiatrist.” This participant added, “By nature, I don’t like to see doctors in general, particularly psychiatrists.”

With reference to the specific reasons or types of support these 12 participants (57.1%) would be consulting a counselor for, two subthemes were developed: (a) emotional and moral support and (b) advice. Both subthemes were further explored in the following sections and direct participant quotes are used to support and illustrate claims. Table 26 provides information regarding the subthemes, how frequently they were mentioned, and by whom.

Table 20- Frequency Table of Subthemes – Theme 3: Support from Counselors

Subtheme	Participant code	Percentage (%; n=21)	Frequency
Emotional and moral support	P1, P2, P3, P10, P12, P18	28.6%	19
Advice	P1, P2, P3, P4, P10, P12	28.6%	20

*Note.* There are no participants 5, 6 and 7.

#### Emotional and moral support

A first subtheme related to counselors as a source for emotional and moral support. This type of support from counselors was mentioned by six participants (28.6%). Participant 2 explained, “We do trust the counselors the most. We tell them what’s bothering us.” Participant 1 added, “They help students who are upset or annoyed to feel better by giving them moral support. They are very good.” This participant also emphasized going to counselors rather than teachers and supervisors for emotional support because “the counselors are clear, and I trust that when we talk it

stays confidential. I trust them.” With reference to counselors’ support, this participant explained:

I have a close friend who is always pessimistic and who always feels that certain things are impossible to happen. She sat with the counselor and has now improved and is feeling much more optimistic. (...) The counselor gave her moral support and told her that she should trust that things will pass and that her life will get better.

Participant 2 similarly emphasized the value of such support, adding, “Even when you fail a class or a subject, they always tell you that you can do it. They tell us don’t be pessimistic and you will make it. Even when you’re bothered, they tell you it’s going to be okay.” This participant more specifically mentioned the type of communication counselors apply and explained that “their style of communication is nice. When someone talks to you in a positive manner you always accept it and receive it positively.” Participant 10 further reported that “many students, old or young, seek their support when not feeling well. They help students feel better.” This participant elucidated:

They are helping the young students with behavioral issues. I feel that the young students’ behavior has also improved. Furthermore, the counselors are providing more activities, such as drawing, coloring, and painting. These activities are allowing the students to use their free time more fruitfully. Students used to get bored in their free times. Students are happier and look forward to such activities.

Participant 18 shared a positive personal experience with visiting a counselor:

It was on a Monday. I came back to the orphanage after a long weekend and I was really upset and in tears all day. When the counselor saw me crying, she escorted me to her room and started soothing me. (...) Miss Nadia drew me a ladder and explained the different stages in life and how we deal with different things that we may face at each stage. She really made me feel better at the time.

### Advice

A second subtheme related to support from counselors in the form of advice, which was mentioned by six participants (28.6%). Participant 2 stated, “They are very good. They treat you like you’re mature and give you proper advice.” Participant 1 more specifically said:

If I am annoyed, upset, or not feeling well, I go to the counselor and she helps me feel better. She gives me advise and sometimes solutions. They have their own methods and ways, like, they listen to us, try to understand the problem, then give us advise. They try to tell us where we went wrong, give us solutions, and guide our behavior. They tell us to always behave within the boundaries of the orphanage.

Participant 12 added:

I visited them once when I was going through some hard time at home. I was psychologically not feeling well so I turned to them for support. They gave me tips and techniques that can help me deal with my problems from home.

This participant continued:

They taught me that when I have a problem and don’t trust sharing it with others, I may go sit alone or lock myself in an empty room where no one can

hear me, and speak to that person whom I am annoyed with or by. I will speak my heart out, as if this person is in front of me.

Participant 3 explained that he had visited the counselors as well before, but “only in the beginning of the year when I had to stay in the orphanage for the first time during the weekend.” This participant explained:

I usually don't stay here during the weekend. I was annoyed from my friends and went to tell her. After listening to me, she called my friends and asked them to speak to me appropriately and not yell at me when I ask them a question. She helps resolve my problems.

#### ***4.3.4. Health Support***

A fourth theme which was mentioned by 17 participants (81%) related to where participants would go for health support. In this regard, 16 participants (76.2%) mentioned going to the pharmacy. Participant 12 stated, “I go to the pharmacy. She will give the medication I need.” Similarly, Participant 21 said, “I go to the pharmacy for medication or go the doctor.” Participant 20 reported, “I will go to the pharmacy or doctor. In case my illness is contagious, they may ask me to go home, for my safety and the safety of others.” Participant 8 added, “If I need health support, I go to the pharmacy and the nurse will give me medicine...if I don't feel better, the supervisor will take me upstairs to my dormitory, give me my medications and provide me with food.” This participant further said that “we also have general medicine doctor and a dentist” and that “if we tell them we have trouble with our vision, they take us to the eye doctor. He checks up on us. We don't pay for this service.” Participant 12 confirmed this statement.



Besides going to the pharmacy, three participants also said they would go to their supervisor. Participant 3, for example, said that “if it is health-related, Miss Nibal will ask us to stay in bed and will call for the pharmacist in the orphanage to come check on us.” Participant 17 added, “If I was in the boy’s section, I go to Mr. Kamal, he usually keeps some medications in his office.”

Only Participant 14 said to not go to the pharmacy and to rather “wait till the weekend when I go home.” The participant explained, “I’m shy to walk over to the girl’s section, where the pharmacy is. But I may go to Mr. Kamal, he usually keeps medication in his office.” Participant 9 confirmed that there indeed is no pharmacy in the boys’ section, stating, “We do not have a pharmacy in the boy’s building. So, they ask us to go to the pharmacy in the girl’s building.”

#### ***4.3.5. Self-Support***

A fifth theme related to self-support; this was mentioned by 16 participants (76.2%). These participants explained that for certain things—especially personal affairs—they preferred to keep things to themselves and not look for the support of others. Participant 4 said in this respect, “I don’t like sharing personal information. And sometimes I just don’t feel like it.” Similarly, Participant 1 said, “When I am not feeling well, I usually keep it to myself.”

Participant 3 appended that “I sometimes choose to sit alone and not tell anyone about what may be bothering me. I sit alone and cry.” This participant explained that “there are many supervisors that support us” but added that “when I feel upset and I want my parents, I don’t like to go to the supervisors.” The participant stated that in such situations, “I feel that they will not be able to help me.” Participant 9 similarly

stated, “I don’t like to turn to anyone because I see no use in doing so.” Participant 21 concurred with this sentiment, adding:

When annoyed or upset, I sit alone. I don’t like to speak when I am in such a state. I usually feel annoyed or upset when I miss my friends from my old school. No one will be able to compensate for my old friends.

More specifically, this participant felt that “if I speak about my old friends, I will only miss them more. So, I prefer to sit alone and think of them.” Lastly, Participant 8 explained why he did not like sharing certain things with others and rather work through them himself:

I don’t usually like going to anyone when I’m feeling like this, I would rather keep it to myself. I don’t even like going to play with my friends until I feel better. Last time, I was sad and annoyed from someone, and whilst sitting alone, Miss Amal approached me and asked me what’s wrong and why I am sitting alone. I said I was annoyed and wanted to sit alone, so she insisted that I was annoyed at her. I kept telling her that it was not from her, then she said she will report this to Miss Ghada. I didn’t understand the point of it, why would she do that? I just needed to sit alone. Later that day, I went up to her and told her that I was personally just annoyed and couldn’t be around anyone till I felt better.

In alignment with the previous statement, 10 participants (47.6%) specifically stated to not seek for support from friends or supervisors because they did not trust them to keep the conversation private. In this regard, Participant 2 said that “you can’t tell the supervisors about everything. There are certain things that should remain in your heart.” Participant 10 agreed:

I have trust issues with them. For example, a friend of mine used to extremely trust a supervisor but unfortunately this supervisor really let her down. The supervisor tried to justify why she had to report or reveal certain information to the administration but I still think it was not right. One should be trustworthy. I never trusted this same supervisor anyways.

Participant 2 similarly stated:

I don't like to put my trust in people. You never know when this person can betray you. Sometimes, you try to trust people that you don't expect anything bad from, and then you end up regretting why you did.

Participant 24 further explained that "supervisors understand and analyze things the way they want and spread stories instead of keeping secrets." She expressed her dissatisfaction with this, stating that "as students in the vocational school, this really annoys us. It is a problem we are all facing." Six participants (28.6%) said to not trust their friends and classmates with personal stories. Participant 12 said in this regard that "you can't trust anyone with your personal matters. In the case of my friends, I don't feel they can understand my problems and help me." Participant 4 added, "Once, when I was annoyed, I told my friend about it, and she swore to her life that she wouldn't talk but she did go about telling others." Participant 18 similarly added:

You can't randomly trust anyone because if they're upset at you, they will betray you. This has happened to me many times. I trust certain girls, and when we have a disagreement, they go tell on you. I only trust my best friend.

Participant 20 explained:

I don't trust any of my friends. If I ever share anything with them, they will spread it around. I only trust two of my friends. I would tell them what is

annoying me but not my problems at home. What happens at home, stays at home.

Participant 8 shared a last statement in this respect:

When it's something personal, I don't feel comfortable nor do I like to put my trust into people. There was a time when I shared why I was annoyed to a friend, and they went and told all the other kids. That was the first and last time I do that. They went and told the kids and the teachers; it was everyone's discussion. I was very upset, and continued talking to the kids, but never opened up about anything personal again. I don't even trust one girl at school, they are just my school mates.

With reference to conflict resolutions, nine participants (42.9%) indicated that they would rather solve issues with their friends themselves before consulting a supervisor or teacher. Participant 15, for example, said that to solve the situation himself, "I stop speaking to my friend and I try to stay away from him. (...) If the problem is not resolved instantly, I will wait on it for some time and resolve it later." This participant said he would never consider consulting a teacher or supervisor because "I don't like to snitch." He explained, "To me, snitching is like swearing at God. I don't like this habit at all." The participant explained that he once had told a supervisor that he was annoyed with one of his friends and that the supervisor punished his friend too harsh:

My friend and I were playing and my friend started swearing. I was really annoyed and I went and told one of the supervisors. The supervisor hit my friend and made him stand by the wall. (...) after this incident I decided to stop telling the supervisors because I don't like to see any of my friends being hit or

punished. Also, I don't want my friends to stop liking me so I try to avoid any trouble.

Participant 12 similarly said that she prefers to solve issues herself to avoid bringing her friend in trouble. She elucidated:

If I was personally annoyed by my friends and I go up to the supervisor to tell her about my friend, I am worried that my friend would think that the supervisor is turning me against her, when that is not the case. That is why I feel it is not necessary to share my personal stories with others.

Participant 18 similarly said, "It's not a matter of mistrust, but the problem at the orphanage is that when a matter reaches a member of staff, it immediately escalates even if the matter was not serious or worth it." The participant further explained:

Once I had a fight with a friend. Someone reported us to Miss Hayat, the orphanage director. I got expelled for 1 week. Although at the time of the incident, my friend and I resolved the problem immediately between us.

Participant 8 shared another example, recalling that she was reluctant to turn in a friend who was annoying her because "I'm worried that they would yell at her, punish her or even hit her." The participant elucidated:

Last year, we had a supervisor called Miss Jamili, they punished my friend and I in the toilets. We were just playing, and Miss Noha went and told Miss Jamili that we were fighting, Miss Jamili came up to me and hit me with a thick stick and punished us for 30 minutes in the toilets. We did not tell anyone, even the orphanage director. And that's why I prefer keeping things to myself and not talking.

Participant 17 made a similar comment, appending that “I never even thought of turning to someone for support.” He recalled:

They are very harsh here at the orphanage. How will they hear me and support me? They may instantly hit. For example, today, during the afternoon study session, the teacher hit me when he saw me talking to my friend.

To close this theme, a last statement was added by Participant 10:

When I have negative thoughts, I always compare my living circumstances to others who may be worse than me, like homeless children. I thank god for being here at the orphanage. I have to think in such a way. I am sleeping in a secure place. I am eating good food. The place is clean and hygiene. I have to think of others in order to stop any negative pattern of thoughts. I have to be thankful. If it was not for the orphanage, I may not have gotten a good education or a home to live in. That is what keeps me strong or helps me grow stronger.

#### ***4.3.6. Evaluation of Support***

A sixth and last theme related to participants’ evaluations of the support provided by the orphanage. In this regard, 15 participants (71.4%) evaluated the support provided by the orphanage as positive, although that did not mean that no improvements should be made. Indeed, 13 participants found that the support given and the ways in which teachers and supervisors handle situations could use some improvements. In this regard, participants mentioned that (a) physical abuse should be addressed, (b) emotional and moral support should be improved, (c) more activities need to be organized, and (d) rules and policies should be revised. These four subthemes were further explored in the following sections and direct participant quotes are used to

support and illustrate claims. Table 27 provides information regarding the subthemes, how frequently they were mentioned and by whom.

Table 21- Frequency Table of Subthemes – Theme 6: Evaluation of Support

Subtheme	Participant code	Percentage (%; n=21)	Frequency
Physical abuse should be addressed	P8, P9, P10, P12, P13, P15, P17, P19	38.1%	12
Emotional and moral and support should be improved	P4, P8, P9, P10, P17, P21, P22	33.3%	14
More activities need to be organized	P9, P10, P15, P18, P22	23.8%	6
Rules and policies should be revised	P4, P9, P13, P18	19.0%	8

*Note.* There are no participants 6 and 7.

#### Physical abuse should be addressed

A first subtheme related to physical abuse, which included hitting, shouting, and deprivation of food. With reference to this subtheme, eight participants (38.1%) expressed that physical abuse should be addressed and even forbidden, as they regarded it as an unsuitable way of punishment. Participant 13 said in this regard that “hitting students should be forbidden.” Participant 17 agreed and added that “understand that some students misbehave and make trouble, but supervisors or teachers should not

instantly hit, yell or deprive us from meals.” Similarly, Participant 15 said that “teachers and supervisors should stop hitting students.” The participant explained that instead, “If a problem occurs, the supervisors should listen and understand the issue before punishing or hitting the student” because “sometimes, students get punished when it is really not their fault.” Participant 9 further appended:

Whatever the situation is, the supervisors should hold themselves from hitting the students. It really annoys me when I see a student being hit. I try to put myself in that student’s shoe. We leave our own homes to come live here and not get hit by others.

Participant 8 similarly said:

Some teachers physically abuse students in a rough manner. They harm the students badly. They pull them from their hair. I worry so much that anyone would physically abuse me. (...) Some students have personal problems and they should not be physically abused. This is my point of weakness. It’s not fair to physically abuse a boy or girl. If a student does anything wrong, they don’t have to physically abuse him/ her or even yell. They should listen to the student and help him/ her understand how to behave appropriately.

The participant recalled a specific situation and explained:

There was an incident when two girls had a fight, and reported to the supervisors. The supervisors attacked and started hitting them both when they weren’t even getting that rough between themselves. She even scratched one of the girls on the face. That’s why I keep telling my friends “don’t get into trouble, don’t start fights, and don’t let anyone ever hit or yell at you” but some girls listen and others don’t.



In alignment with this experience, Participant 10 explained, “I don’t like to see a child being hit by others. I used to get hit when I was young. I don’t like others to go through the same experience.” This participant explained to not like “the supervisors’ way of dealing with students, whether young or old.” According to this participant, “Counsellors are really helping in this matter, but it’s still happening” because “counselors are not always around the students.” The participant explained:

They leave at 2 o’clock, and although the orphanage director disapproves of any form of abuse, I think she is unaware of what is going on. Even if she does, I think the supervisors tell her the wrong version of the story or a twisted version or even try to hide parts of it. They don’t convey the right picture.

Participant 9 made a last addition in terms of hitting and found it to be wrong, but qualified, “I must be honest that some students have no manners and really trigger or provoke the supervisors. Supervisors don’t intend to hit the child, but sometimes they feel they have to.” Three other participants similarly found hitting to be a justified punishment in some cases.

Besides hitting, five participants (23.8%) also negatively evaluated supervisors’ practice of yelling. Participant 10 said in this regard that “supervisors tend to yell a lot” and “sometimes they don’t want to listen.” Participant 12 similarly explained to not like “the way supervisors deal with students.” This participant explained that “sometimes they yell at students” and that “supervisors should be more understanding and should have an open mind when dealing with students.” Participant 8 confirmed, detailing:

Some of the staff members do not have enough patience especially when students fight. They instantly yell at the students. I understand that sometimes

they have the right to yell at the students but I hate it when they yell for no reason or when they don't have the right to. I don't like anyone to yell at me. Participant 9 added, "If a child does anything wrong, the supervisors should not instantly yell." According to this participant, "They should try to understand the situation first, listen to him, and help the child by giving him tips and guidance."

#### Emotional and moral support should be improved

A second perceived shortcoming referred to the lack of emotional and moral support provided by the orphanage, which was mentioned by seven participants (33.3%). For example, Participant 22 perceived that "We do not have much support here." This participant explained in more detail:

You come here alone, unlike at home where you have someone who is on top of things and who asks about you, and about how you feel. For example, here at the orphanage, it's fine with them if we don't eat or if we have a problem. There is no extra care and attention.

Similarly, Participant 9 found that "there is no support in general," stating:

They don't even encourage us. For example, the young children really need moral support, they need to be constantly encouraged otherwise they will grow to be depressed. (...) Even when it comes to me, who do I turn you? At the end of the day, he is only a supervisor and can't help much. All he can tell us is study or "if you are not happy, you may leave the orphanage and go back home. (...) All we do is eat, go to school, eat again, study, have dinner, shower and sleep. The supervisor does not interfere with us unless there is a problem.

In addition, Participant 8 stated that staff would sometimes not believe students, which she found frustrating. She explained:

Once I raised my voice at two supervisors who had accused me and asked me to follow them to the orphanage director for something I had not done, and at the time it was the girls in my class who reported me and said that it was my fault for what had happened. I was feeling ill and they kept triggering me to go, and as we went to see the director she dismissed them when she saw that it was indeed not my fault. That's why I raised my voice at them, and they kept pushing my buttons and not listening. Even the director believed me, and they did not.

Further, two participants added that some supervisors would make nasty comments to the students. Participant 10, for instance, said in this regard that "Some supervisors here may snap comments at me that hurt me." She further explained:

If I go tell a supervisor about what is annoying me, she would also say things like "look at your circumstances at home, you should appreciate your existence here". I really appreciate the orphanage and am very grateful to everything they do for us and how much they care for us. I have been here for 13 years now. But again I don't like this way of talking. That is why I avoid sharing my stories with the supervisors.

Participant 17 appended:

I feel humiliated, they make me feel like an orphan. They are harsh. They hit us. They keep on telling us "if you are not happy here, take your stuff and go home." I feel very emotional. They make us feel like we have no parents, which is not the case. We do have parents, but we have problems at home. All my

friends are psychologically tired. They all say things like “I hate my life, life is very harsh on us.

This participant said that he would be grateful “if they allow us to call up our parents more regularly,” as “it really makes me feel better when I speak to my parents.” As Participant 21 concluded, however, “Although they try their best to take care of us and give us love (as much as they can), it still would not compensate for the love we get from our parents.”

#### More activities need to be organized

This third subtheme and the frustration associated with it was shared by five participants (23.8%). This related to the lack of activities that the orphanage organized to keep the children busy. Participant 22, for instance, explained, “There is a lot of boredom. For instance, it could be good to add more activities in the afternoons or during weekends.” Participant 9 agreed, adding that this was especially important for the youngest ones. He elucidated:

Children here are doing the same thing every day. There are children who are only 10 or 11 years-old who really need to be encouraged on a daily basis. If I was 10 years old, and am hearing and doing the same things daily, I would feel depressed.

This participant explained that boredom and depression could be easily avoided by “adding or introducing new things” because “we do the same things every day. We wake up, eat, study, eat, study, eat, shower and sleep. We really need something new or different to our daily routine.” Participant 10 agreed, explaining:

This year they introduced a scout program on Saturday but the lady in charge of the program does not know how to deal with the students. Her behavior is authoritative. (...) I participated twice in the program, but I no longer feel like going. The program is boring. The activities are always the same.

Participant 15 reported:

I wish we can have an extra playground to play football in the afternoon. We are allowed to play football, but we only have one playground, and most of the time the older boys are using it to play football. I also wish we had a gym or computers to play games.

Only one participant, Participant 18, stated that the introduction of new activities would not help him personally because “whatever activities they try to implement will never distract me or take away my worries.”

#### Rules and policies should be revised

A fourth and last subtheme related to the rules and policies, which were perceived as outdated and too strict by four participants (19%). On this topic,

Participant 9 said:

The policies or regulation should be changed. I understand that the regulations are very strict and rigid in the boy’s section, but it should be changed. The world is developing, yet you feel that they are still following old regulations.

Regulations should be enhanced and improved.

More specifically, this participant found that for example students should be allowed to personalize their rooms more and buy things for themselves. The participant explained:

We feel our rooms are boring, we use them just for sleep. (...) We do have a DVD player and movies in the common living room but all the movies are old. We can't get our own movies because they have to make sure that the movie is appropriate to watch. They censor parts of it.

Participant 9 continued:

Moreover, we like to get our own electrical heater to the room. We do have one in the common living room area but we are not allowed to use it night. What if we don't like the food served? What do we eat? Honestly, I don't like the food here at the orphanage, it's not clean.

Participant 18 mentioned the sleeping hours and stated that she would like to sleep longer:

I wish we can change the sleeping hours and delay it in the morning. We have to wake up at 5-5.30 a.m., finish our chores, and be ready for breakfast by 7 a.m. I don't mind the chores, on the contrary, I love working. But getting up really early is what bothers me.

#### **4.4. Summary**

This chapter began with clarifying the empirical approaches used to address the association of the well-being (DV) variable with the four social support subtypes (IVs) with gender as a moderating variable (IV). These subtypes were support from teachers, classmates, friends, and parent(s), and school. For the quantitative portion of the investigation, only 98 children were sampled compared to the initial goal of 160. Hierarchical linear regression demonstrated that social support from teachers, classmates and school were statistically significant predictors of well-being increase,

and that gender was neither a statistically significant moderator of social support nor a statistically significant main effect. The assumptions for the linear regression models were also supported.

For the qualitative portion of this study, six themes were identified: (a) support from teachers and supervisors, (b) support from friends, (c) support from counsellors, (d) health support (e) self-support, and (f) evaluation of support. A first theme related to the perceived support from supervisors and teachers in the orphanage. In this regard, all 21 participants (100%) mentioned receiving support from their supervisors and teachers in one way or another. The specific subthemes in relation to this theme were: (a) material support, (b) academic support, (c) advice and conflict resolution, and (d) emotional and moral support.

Eighteen participants (85.7%) mentioned material support, mostly referring to the supply of stationary, clothes, and other material, but also to the provision of activities. Eighteen participants (85.7%) reported that it is possible to obtain good academic support from their supervisors and teachers. Many participants strongly appreciated such support, as participants viewed good education as paramount. Third, 17 participants (81%) said that they often went to their supervisors or teachers for advice and conflict resolution. These participants stated that when they would be in a fight with fellow students, they would often consult their supervisors or specific teachers for help in resolving the issue. Lastly, 11 participants (52.4%) found supervisors and teachers useful for emotional and moral support.

A second theme related to support from friends and was mentioned by all 21 participants (100%). In this regard, participants mentioned two types of support: (a) academic support and (b) emotional and moral support. A first subtheme was academic

support and related to how 16 participants (76.2%) would consult their friends and classmates for academic support. A second subtheme related to emotional and moral support from friends. In this regard, 15 participants (71.4%) said they would usually consult their friends for moral support, mostly because they felt most closely to them.

A third theme related to the support from counselors, which only 12 participants (57.1%) mentioned. With reference to the specific reasons or types of support these 12 participants (57.1%) would be consulting a counselor for, two subthemes were developed: (a) emotional and moral support and (b) advice.

A fourth theme which was mentioned by 17 participants (81%) related to where participants would go for health support. In this regard, 16 participants (76.2%) mentioned going to the pharmacy, which was available in the orphanage. The participants explained that the pharmacy was in the girls' section, and there was no pharmacy available in the boys' section.

A fifth theme related to self-support and was mentioned by 16 participants (76.2%). These participants explained that for certain things—especially personal affairs—they preferred to keep things to themselves and not look for the support of others. Ten participants (47.6%) specifically stated to not seek for support from friends or supervisors because they did not trust them to keep the conversation privately. With reference to conflict resolutions, nine participants (42.9%) said they would rather solve issues with their friends themselves before consulting a supervisor or teacher.

A sixth and last theme related to participants' evaluations of the support provided by the orphanage. In this regard, participants mentioned that (a) physical abuse should be addressed, (b) emotional and moral support should be improved, (c) more activities need to be organized, and (d) rules and policies should be revised.



In Chapter 5, the researcher provides a more detailed evaluation of the findings, as well as a comparison of the findings of this study with existing literature. In this chapter, the researcher discusses the limitations, recommendations, and implications that were linked to this study. Lastly, the research paper closes with a few concluding paragraphs.

## CHAPTER 5

### CONCLUSIONS AND RECOMMENDATIONS

#### **5.1. Introduction**

The purpose of this study was four-folds: (a) to describe the nature of social support provided by the orphanage to its students, (b) to understand how adolescent students perceive social support from the main sources (i.e., parents, teachers, and peers); (c) to determine the specific sources of support (i.e., parent, teacher, or peers) most predictive of well-being outcomes; and (d) to investigate gender differences in the relationship between multiple sources of support on psychological well-being among adolescent students residing at an orphanage. Findings confirmed that perception of social support from teachers, classmates and school are predictors of well-being, and that gender was neither a statistically significant moderator of social support nor a statistically significant main effect.

In this chapter, the results presented in Chapter 4 are interpreted and compared to the conclusions in existing literature. Further, the limitations as well as the recommendations and implications of the study are discussed before closing the study with a conclusion that recaptures the aim of the study, the findings, and the value of this study. These results are tied to the qualitative results in the succeeding discussion.

#### **5.2. Discussion/Implications**

For the qualitative portion of this study, six themes were identified: (a) support from teachers and supervisors, (b) support from friends, (c) support from counsellors,

(d) health support, (e) self-support, and (f) evaluation of support. In alignment with previous literature participants mentioned both formal and informal sources of support. Formal sources of social support refer to people who belong to formal networks, and may include support from counsellors and health practitioners (Buote et al., 2007). Informal sources of social support include help provided by teachers and supervisors, and friends and peers (Buote et al., 2007).

In regards of the first theme related to the perceived support from supervisors and teachers in the orphanage, all 21 participants (100%) mentioned receiving support from their supervisors and teachers in one way or another. This was in alignment with the quantitative results of the study which demonstrated that teachers and people in my school were both significant predictors of well- being. According to literature, perceived school- related support is strongly associated with students' life satisfaction and well- being given that adolescents spend most of their times at school (Stewart, T., & Suldo, S., 2011). Higher perceived social support from teachers has been associated with greater psychological wellbeing, self-esteem, less frequent depressive symptoms and social adjustment among adolescents (Stewart, T., & Suldo, S., 2011). The specific subthemes in relation to this theme were: (a) material support, (b) academic support, (c) advice and conflict resolution, and (d) emotional and moral support.

Despite the above findings, the results of theme six of the qualitative part of the study implied that seven participants (33.3%) mentioned that emotional and social support was insufficient and should be further improved. In other words, a few supervisors and teachers were trustworthy and supportive, and that most would not be a great source of support. Some participants indeed reported negative experiences with some staff members that had broken their trust, for example, by sharing their secrets,

family situation, and other personal information with others. Additionally, some participants said that some supervisors would make them feel uncomfortable and would humiliate them rather than support them. Such unsupportive behavior often resulted in reluctance to consult supervisors and teachers for support, which was an undesirable finding. These findings implied that in terms of emotional and moral support and advice, perceived support coming from teachers and supervisors was available thus remains an area that needs improvement. It is worth mentioning that among theme one and theme six, three participants (participants 8, 17, and 21) overlapped. In alignment with the previous findings, Stewart and Suldo (2011) found that attending to the socio-emotional needs of students is often a secondary aim within the school setting, despite evidence showing the critical linkage between socio-emotional health and student development and academic success. The findings of this study indeed implicated that teachers and supervisors would focus more on the provision of academic support—which participants positively evaluated—and would perceive emotional and moral support as less paramount.

In order to rebuild trust and stimulate adolescents to consult their teachers and supervisors, the researcher recommended that supervisors and other staff members need to be made more aware of their role expectation as parent substitute. The St. Petersburg—USA Orphanage Research Team (2008) stated that close emotional ties with caregivers may serve as a protective factor and aid in overall development, it may be advisable for the orphanage to implement formal training on caregiving practices with a specific focus on emotional and psychological support. This is especially true, considering that the need for social support is compelling for orphans who lost one or both their parents, and for children with other orphan-related characteristics such as

children from broken families, children from families facing social and financial difficulties, and children who have no care from family members, and thus have no choice but to be admitted to some sort of care institution (Davig & Spain, 2003). Further evidence was brought forward by Danilova (2019), who stated that adolescents living in orphanages show significantly less self-trust in all spheres of life than teenagers from full families. More specifically, this author found that this group needs to be supported in their educational endeavors, intellectual activities, and in the formation of meaningful and emotional relationships. Based on these findings, the current researcher advises orphanages to make their staff members and in particular supervisors more aware of their significant role in the psychological well-being of orphans as this may significantly contribute to children's psychological well-being. To encourage this, the orphanage may want to consider organizing educational sessions for their staff members where they can outline their expectation of staff members and give them tips on how to be a better support to the children residing in the orphanage.

A second theme related to support from friends and was mentioned by all 21 participants (100%). According to the findings of the quantitative results, support from classmates was a significant predictor of well-being. The way support from classmates evolves, as shown in the quantitative part of the current study, is consistent with the findings of studies that have analyzed support from friends. This may be accounted for by the fact that teenagers' network of close friends are more likely to be formed by classmates, as they spend a great deal of their time at school, which is one of the main contexts in which friendship with peers develop. (Hombrados-Mendieta et al., 2012). According to Malecki, C. K., & Demary, M. K. (2001), some studies distinguished between "classmates" and "friends" in their assessment of peer relationship, whereas

others assessed support from both classmates and friends as single peer category.

Although this variation in how “peer” is defined is common in the child and adolescent literature, research has shown that classmate support is more strongly associated to student adjustment than close friend support (Malecki, C. K., & Demary, M. K., 2001). According to Buote et al. (2007), informal sources of support such as friends and peers are of paramount importance. As major agents of socialization, friends indeed represent the first reference point of the individual who, even in contact with structured institutions, spontaneously seeks support. In this regard, participants mentioned two types of support they would consult their friends for: (a) academic support and (b) emotional and moral support.

Despite the above findings, theme five, self- support, saw that 10 participants (47.6%) specifically stated to not seek for support from friends or supervisors because they did not trust them to keep the conversation private, and six participants (28.6%) specifically said to not trust their friends and classmates with personal stories. Based on the previous findings and with the aim to strengthen the relationship between students, the researcher recommends organizing team-building sessions for students where they can learn about trust and friendship. Such an approach may stimulate students to respect and support their peers, trust each other, and consult each other for both advice and emotional/academic support. Considering that friendships form crucial support systems (Buote et. al., 2007) and friends play a vital role in any person’s psychological well-being, the orphanage should invest in strengthening the bonds between their students.

A third theme related to the support from counselors, which was only mentioned by 12 participants (57.1%). These participants reported that they would consult counselors for (a) emotional and moral support and (b) advice. The support from

counselors was not measured and tested as a predictor in the current study's quantitative analysis.

Although 12 participants (57.1%) mentioned support from counselors, 9 participants (42.9 %) specifically said to never have consulted the counselors and this for different reasons. Although, the support from counselors was not measured and tested as a predictor in the current study's quantitative analysis, it can be deduced from the qualitative results that neither the role of the counselor is clear for the students residing at the orphanage nor the procedures for seeing one. In this light, the researcher suggests that the counselors' role and responsibilities should be made clear for teachers, staff members, and students. The counselors could introduce themselves during the opening week at school, talk about how they provide help, and discuss physical location as well as office hours. According to Stewart, T., & Suldo, S. (2011), middle schools with more developed counseling programs observed positive outcomes among their students and reported higher level of academic achievement; a greater sense of happiness, safety and security at their institution; and fewer problems with socializing and interpersonal relationships. This may be accomplished by preparing and delivering classroom guidance lessons which impact all students in a preventive and proactive manner, studying data to determine which students are not adequately serviced, and using data to improve program delivery and implementation. Furthermore, counselors could invest in individual counseling, group counseling, and intervention programs such as peer- assistance, positive social skills, and study skills and more.

A fourth theme, which was mentioned by 17 participants (81%), related to where participants would go for health support. In this regard, 16 participants (76.2%) mentioned going to the pharmacy, which was available in the orphanage. Several

participants explained that the pharmacy was in the girls' section, and there was no pharmacy available in the boys' section. As a result of the pharmacy's location in the girls' section, boys seemed to be relatively uncomfortable and hesitant to go to the pharmacy when they felt ill. Although not explicitly said, male participants seemed to feel uncomfortable with the idea of encountering females when going to the pharmacy. This was not a strange observation, as Lebanon is a country with generally strict and traditional gender norms. Based on this finding, it may be useful to consider either implementing a pharmacy in the boys' section or moving the pharmacy to a more neutral zone. Such changes may make feel both genders more comfortable with going to the pharmacy and may encourage them to seek proper health support early on rather than too late. The variable of health support was not measured and tested as a predictor in the quantitative analysis.

A sixth and last theme related to participants' evaluations of the support provided by the orphanage mentioned that (a) physical abuse should be addressed, (b) emotional and moral support should be improved, (c) more activities need to be organized, and (d) rules and policies should be revised. With reference to physical abuse, eight participants (38%) did not agree with some of the disciplinary strategies that supervisors and other staff members would often apply. According to participants, one strategy that was applied quite frequently was physical punishments and more specifically hitting. Participants found that physical abuse was applied too frequently, and indicated that supervisors would often hit children for minor violations or even completely unfairly. Moreover, some participants found hitting or yelling wrong in any situation and said it should not be allowed under any circumstances. Most participants found hitting unacceptable, especially considering that some individuals have



psychological problems and need care and understanding instead of harsh treatment. Thus, participants recommended staff to listen to the children and advise them, rather than punish them by hitting, yelling, or depriving them of basic needs such as food.

The above findings implicated a large communication gap between students and supervisors. According to participants, supervisors would indeed sometimes not listen to students and misinterpret the situation, which then would lead to an unjust punishment such as hitting or yelling. As a result, some participants said they would not consult their supervisors for support, which was an undesirable finding. Thus, it seemed that physical abuse would even drive students and supervisors further apart from each other. Some participants explained that counsellors have been trying to address this issue and have attempted to guide supervisors in such a way that hitting and yelling would be avoided. Several participants indicated, however, that physical abuse remained relatively common. This was an undesirable finding, especially considering that supervisors and other staff members were implicitly expected to fill in the role of parental figures. Furthermore, Sherr, Roberts, and Gandhi (2017) also found that physical abuse may directly or indirectly affect cognitive development as well jeopardize the child's emotional and intellectual development and social adjustment. Furthermore, teachers who apply physical punishments may instigate peer-on-peer violence (Sherr, L., Roberts, K. J., & Gandhi, N., 2017). As such actions seemed to have created a larger communication gap between students and supervisors, the researcher recommended that (a) orphanages should organize training sessions where supervisors and other staff members are taught about the negative impacts of such harsh punishments on the psychological well-being and development of their students, and (b) counselors should lead such training sessions as they are experts on the matter and

might be able to provide supervisors and other staff with the tools and knowledge of how to approach children and go about certain situations. Such training may stimulate better communication and potentially limit physical abuse such as hitting and yelling.

A third subtheme and frustration that was shared by five participants (23.8%) related to the lack of activities that the orphanage organized to keep the children busy. In this respect, participants explained that there were not enough activities to do and they were often bored. These findings implied organizing activities could stimulate children and possibly could positively contribute to their well-being as it would avoid boredom and feelings of loneliness. According to Shafiq, Haider, and Ijaz (2020), organizing activities are especially significant because individuals who experience boredom and feelings of loneliness are more prone to depression and negative psychological well-being. Furthermore, it is plausible that organizing activities could contribute to the formation of strong and positive relationships between peers, teachers, and supervisors, which could stimulate positive well-being in orphaned adolescents. Moreover, provision of activities such as sports, arts/ crafts, drama, cooking etc., enable students to broaden their horizons and develop into well- rounded individuals. Also, academic subject- related activities could be targeted at specific year groups or student ability. School staff could be employed for activity provision, primarily due to cost consideration, as well as supporting links with the community. Last, a fourth and last subtheme related to the rules and policies which were perceived as outdated and too strict by four participants (19%). These participants found that the orphanage policies were too strict and should revise them. It may therefore be useful for the orphanage to review their policies and consider relaxing some of their rules and restrictions and giving more freedom to the oldest ones.

The findings of this study also have theoretical implications. In this regard, the findings of this study were mostly in line with the socio-ecological theory of Bronfenbrenner's (Hombrados-Mendieta et al., 2012). According to this theory, there are multiple levels of influence and behaviors both shapes are shaped by the social environment. The findings of study indeed imply that the way teachers, supervisors, counsellors, and friends communicate and interact with participants impacts and shapes participants' behavior. For example, participants explained that when teachers and supervisors yell at them or apply physical punishments, they feel less inclined to consult them for problems. In contrast, participants said that they would consult teachers and supervisors they felt close with and who they felt would understand them better. Thus, the ways in which teachers and supervisors communicate and socially interact with participant's impact participants' choice whether or not to consult teachers and supervisors when they experience problems.

Another theoretical implication was that the findings of this study confirm the notion of subjective appreciation of support as a crucial dimension of social support. According to Barrera (1986), social support is mostly related to the personal experience of the individuals in the situation of seeking or receiving help rather than to a set of objective circumstances. In this respect, the subjective appreciation of support itself includes many dimensions, such as the feeling of receiving sufficient support, satisfaction with the support received, the perception that support needs are being met, the perception of the availability and the adequacy of support and, finally, the confidence that support will be available when needed. These same dimensions were raised by participants and implicate the relevance and importance of the notion of subjective appreciation of support.

### **5.3. Limitations of the Study**

The current study was affected by some limitations which were outside of the researcher's control. A first limitation pertained to sampling issues. For the quantitative part of the study, only 98 children were randomly sampled, compared to the initial goal of 160. In addition, the self-reported data on the quantitative part of the study may have introduced respondent bias. With reference to the qualitative portion of the study, only 21 students were interviewed. As a result, only the perceptions and ideas of the students that were interviewed were reflected; if another larger sample was taken, the results may have been more diverse. The results, therefore, could be expanded further to include the perceptions and ideas of a population of children residing in other orphanages.

Another limitation linked to the qualitative part of this study referred to the possibility of researcher bias. To control this, inter-rater reliability was conducted to limit the possibility of this type of bias. Unlike quantitative studies that entail the use of hard and unambiguous data, qualitative findings are prone to interpretation. It should therefore be considered that if another researcher had carried out the current study, different themes may have emerged, resulting in a different presentation of the results. The principles of dependability and confirmability may limit the researcher's bias.

Another limitation pertained to gender differences were affected by an unequal number of male and female participants taking part in the study. Sampling procedures resulted in this limitation despite efforts to recruit approximately the same number of male and female participants. Additionally, the young age of participants could potentially have affected their comprehension of the interview and questionnaire items.

Both the interview protocol and questionnaire items were simplified and reviewed by other researchers in order to gather additional opinions about how easily both may be comprehended by participants; however, it is important to keep this in mind as a potential study limitation.

#### **5.4. Recommendations for Future Research**

In relation to the current study, several recommendations for future research can be made. One recommendation pertains to addressing sampling issues. The current study only incorporated young students from one orphanage, namely an orphanage in Lebanon. As a result, perceptions and ideas of children residing in other orphanages were left unexplored. To gain more knowledge on the subject and the experiences of the target populations with social support systems and the effects of such on their psychological well-being, one recommendation is for future researchers to carry out similar studies to enlarge their geographical boundaries that might include adolescent student residing at an orphanage from greater Beirut and/ or reach out to the different governorates of Lebanon. This shall make the study and its findings more representative and generalizable of adolescent students residing at orphanages. Additionally, it may also be useful to increase the sample size and include other sources of information such as counselors, and possibly even family members. The perceptions of such individuals may further contribute to a better understanding of the phenomenon.

Another recommendation is to adjust the interview protocol and focus more on particular areas—for example, parents and/ or legal guardians, which was not a significant predictor of positive well-being. Aligned with the literature of the study, researchers studying perceived social support have acknowledged the pivotal role of

parents' support as a robust unique predictor of adjustment and indicator of mental health for both girls and boys (Rueger et. Al, 2008b). According to Stewart, T., & Suldo, S. (2011), parent support emerged as the strongest predictor of all indicators of mental health, underscoring the saliency of supportive family context in facilitating psychological wellness. Therefore, it could be clearly said that parents and/ or legal guardians indeed play a significant role in the psychological well-being of participants, and it may be useful to investigate their role in more detail, especially in the context of an orphanage.

Further, it may also be useful to explore the possible usefulness of specific training for supervisors, teachers, and other personnel regarding how they can provide the best possible support for students. The results of the qualitative part of this study implied that staff plays a vital role in the psychological well-being of children residing in orphanages; however, the focus was not on the role of supervisors, and therefore, it may be useful for future researchers to pay more attention to such. As a result, it is advisable to replicate the study with a focus on these aspects to obtain a more in-depth understanding of the phenomenon.

## **5.5. Conclusion**

The purpose of this study was: (a) to describe the nature of social support provided by the orphanage to its students, (b) to understand how adolescent students perceive social support from the main sources (i.e. parents, teachers, and peers); (c) to determine the specific sources of support (i.e., parent, teacher, or peers) most predictive of well-being outcomes; and (d) to investigate gender differences in the relationship

between multiple sources of support on psychological well-being among adolescent students residing at an orphanage.

In recent years, and across the globe, an increasing number of studies, seminars, and events have taken to heart the issue of successful outcomes for students residing at orphanages (Weissberg & Owen, 2005). According to Davig and Spain (2003), the first year and especially the first month are crucial for residing students' sense of perseverance, as it is extremely important for such institutions to provide adequate social support that assists in the psychological well-being of those students.

This research was conducted using mixed methods and a correlational research design. Mixed methods were selected in order to most effectively address the research questions; the qualitative component of this research lent insight into the experiences and perceptions of the participants, while the quantitative component helped to elucidate the nature of the relationship between perceived social support and psychological well-being as experienced by the participants. For the qualitative part of this research, 21 participants took part in semi-structured interviews.

For the quantitative portion of the investigation, only 98 children were sampled compared to the initial goal of 160. Hierarchical linear regression demonstrated that social support from teachers, classmates, and people in my school were the statistically significant predictors of well-being, and that gender was neither a statistically significant predictor nor a moderator of well-being. The assumptions for the linear regression models were also supported.

For the qualitative portion of this study, six themes were identified: (a) support from teachers and supervisors, (b) support from friends, (c) support from counsellors, (d) health support, (e) self-support, and (f) evaluation of support. Each of these themes

were further divided into subthemes. A first theme related to the perceived support from supervisors and teachers in the orphanage. In this regard, all 21 participants (100%) mentioned receiving support from their supervisors and teachers in one way or another. The specific subthemes in relation to this theme were: (a) material support, (b) academic support, (c) advice and conflict resolution, and (d) emotional and moral support.

A second theme related to support from friends. This theme was mentioned by all 21 participants (100%). In this regard, participants mentioned two types of support: (a) academic support and (b) emotional and moral support. A third theme related to the support from counselors, which only 12 participants (57.1%) mentioned. With reference to the specific reasons or types of support that these 12 participants (57.1%) would be consulting a counselor for, two subthemes were developed which respectively covered (a) emotional and moral support and (b) advice.

A fourth theme which was mentioned by 17 participants (81%) related to where participants would go for health support. A fifth theme related to self-support and was mentioned by 16 participants (76.2%). These participants explained that for certain events, such as personal affairs, they preferred to keep things to themselves and not look for the support of others. The main reasons for this were lack of trust in others and to avoid bringing their friends in trouble.

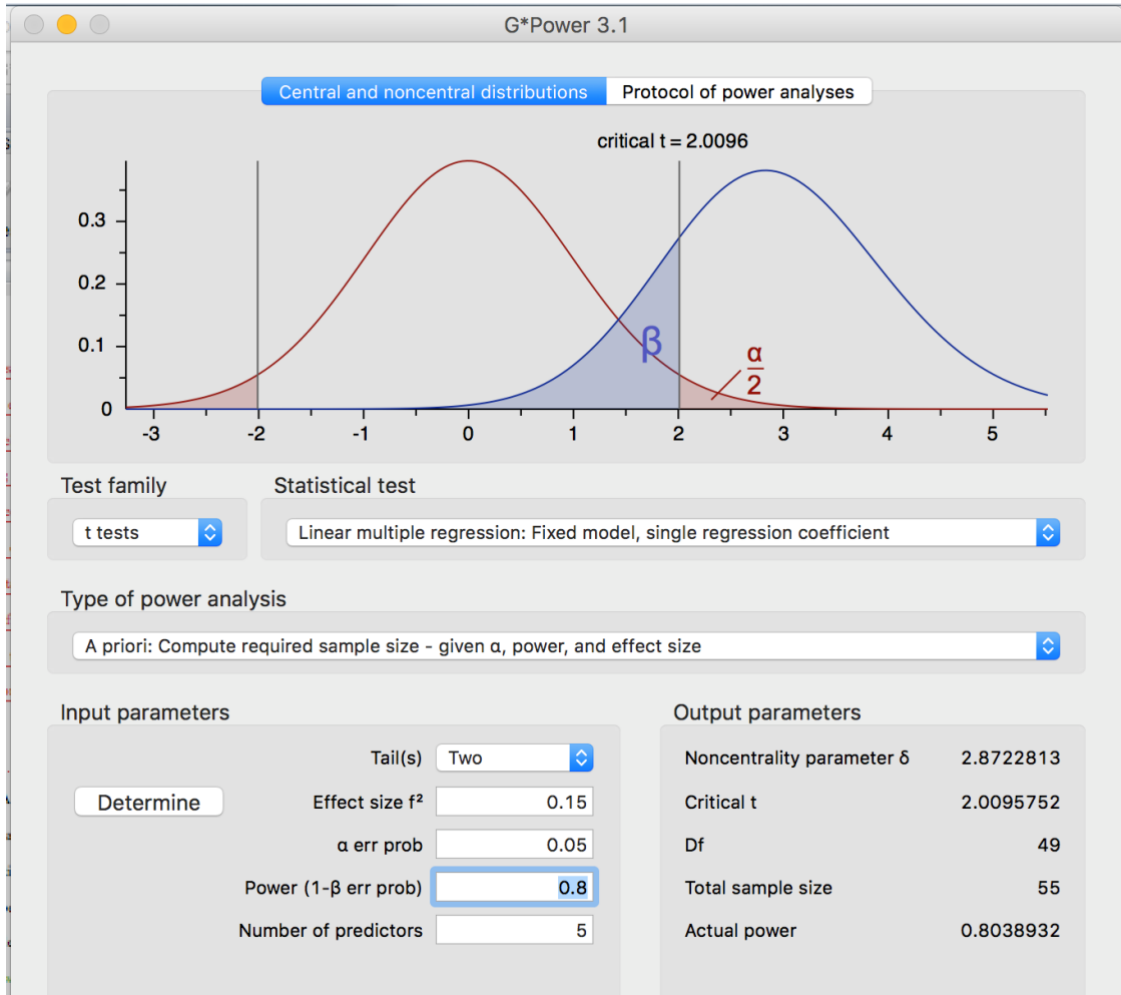
A sixth and last theme related to participants' evaluations of the support provided by the orphanage. In this regard, participants mentioned that (a) physical abuse should be addressed, (b) emotional and moral support should be improved, (c) more activities need to be organized, and (d) rules and policies should be revised.



In conclusion, the findings suggested that support is indeed provided by the orphanage, although improvements are paramount. For example, many evaluated physical abuse as unnecessary and said that supervisors and teachers should be more patient with the children. Trust was also regarded as an important factor and participants explained that they had trust issues with both their friends and supervisors. Although counselors had already interfered in this regard and seemed to guide teachers and supervisors, participants implied that such training was paramount and recommended that the orphanage should invest more resources in such. According to the literature of the study, the notion of social support is firmly rooted in an ecological conception of human behavior which supposes that in order to develop and flourish, the human being needs to have access to a number of resources and to preserve and increase them (Coyne & DeLongis, 1986).

# Appendix

## A - G\*Power Sample Size Computation



## B - Construct Loadings for the CASSS (Level 1 and Level 2)

Table 4  
Construct Loadings for the CASSS (Level 1 and Level 2)

Item #/Stem	Level 1	Stem	Level 2
<b>My parent(s) . . .</b>			
1. express pride in me	.598	listen to me when I'm mad	.590
2. help me practice things	.618	express pride in me	.672
3. make suggestions . . .	.630	help me practice things	.623
4. help me make decisions	.652	make suggestions . . .	.730
5. give me good advice	.669	help me make decisions	.703
6. help me make up my mind	.580	give me good advice	.703
7. help me find answers	.726	help me find answers	.757
8. praise me when I do . . .	.604	praise me when I do . . .	.700
9. politely point out my mistakes	.647	reward me when . . .	.589
10. tell me how well I do on tasks	.624	tell me how well I do on tasks	.713
<b>My teacher(s) . . .</b>			
11. listens if I'm upset . . .	.708	cares about me	.698
12. cares about me	.703	is fair to me	.720
13. is fair to me	.720	understands me	.756
14. understands me	.671	tries to answer questions	.735
15. explains things when . . .	.648	explains things when . . .	.780
16. shows me how to . . .	.627	gives good advice	.762
17. gives good advice	.629	makes it okay to	.741
18. helps me when I want to . . .	.683	helps me when I . . .	.784
19. helps me solve problems by . . .	.550	helps me solve problems.	.749
20. praises me when I've tried . . .	.615	praises me when I've tried . . .	.655
<b>My classmates . . .</b>			
21. act nice to me	.740	ask me to join activities	.779
22. ask me to join activities	.752	do nice things for me	.861
23. do nice things for me	.800	spend time doing things	.839
24. spend time doing things	.780	help me with projects . . .	.771
25. help me with projects . . .	.717	make suggestions when . . .	.785
26. make suggestions when . . .	.725	treat me with respect	.780
27. treat me with respect	.806	ask me for suggestions	.686
28. tell me how to do new . . .	.716	say nice things to me . . .	.779
29. say nice things to me . . .	.771	notice my efforts	.756
30. give me positive attention	.750	give me positive . . .	.849
<b>My close friend . . .</b>			
31. understands my feelings	.699	understands my feelings	.813
32. makes me feel better when . . .	.683	makes me feel better . . .	.803
33. helps me solve my . . .	.717	spends time with me	.753
34. shows me how to do new . . .	.735	helps me solve my . . .	.823
35. sticks up for me when . . .	.729	spends time with me	.809
36. spends time with me when . . .	.685	shares his or her things	.782
37. helps me when I need it	.778	helps me when I need it	.854
38. asks if I need help	.643	gives me advice	.767
39. tells me he or she likes . . .	.643	explains things when . . .	.781
40. accepts me when I make . . .	.735	calms me down when . . .	.773

Note. All values are significantly different from zero. ( $p < .001$ ).

**C - The Well-Being Scale Factor Structure with Loadings  
for the Well-Being Scale (N = 150)**

Item Number	Item Description	Factor Loadings
(During the past month I felt)		
Factor 1: Happiness and peacefulness		
2	Cheerful	0.85
3	Delighted	0.81
4	Relaxed	0.72
5	Calm and peaceful	0.57
6	Safe	0.58
Factor 2: Vigorousness		
8	Responsive	0.81
9	Healthy	0.71

## D - The Semi-Structured Interview Protocol

1. Within the orphanage, who do you turn to for support?
2. How do orphanage staff members provide support when students need it?
3. In what ways do orphanage staff members provide support?
4. How do you feel about support provided by the orphanage?
5. What are the strengths of support provided within the orphanage? In other words, what do you appreciate about the support that is provided?
6. What are the weaknesses of support provided within the orphanage? In other words, how might support provided within the orphanage be improved?
7. For what reason(s) do you seek support most often (i.e. academic help, friendship advice, needing resources, health, etc.)?

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