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Comparative Study

Emotional and Behavioural Problems in Orphans and

Non-Orphans: A Comparative Study

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ABSTRACT

Summary: All children whether orphans or non-orphans are like wet cement whatever falls on them makes an impression, adolescents are vulnerable children and this study aims at the emotional and behavioural problems in orphans and non-orphans living in two different environments, which is nonorphans living with parents and orphans living in an orphanage, thus I did a comparative study to explore the emotional and behavioural problem as well as to see if there is any similarity between them in the current scenario. Method used: This study was done with the sample size of sixty dividing into 30 orphans and 30 nonorphans, the sample size was of mixed population (of girls and boys). Socio demographic details were taken as the age needed for this study was between 11-16yrs. The SDQ which was strength and difficulty questionnaire was used to assess emotional and behavioural problems in them. **Result:** The result of this study showed about 70% of the total population having emotional and behavioural and although there was such a high percentage there was significant between the orphans and non-orphans which says environment plays a huge role. It was analysed that orphans were having increased emotional and behavioural problem than non-orphans but non orphans were also suffering with emotional and behavioural problems. It was also analysed that both the groups were having a different increase in different problem areas. Non-**Orphans: Borderline:** it was analysed that 10% population was having borderline emotional problem, 6.66% was having borderline conduct problem, 6.66% was having borderline hyperactivity, 16.66 was having borderline peer problem and 13.33% was having borderline prosocial issues. Abnormal: it was analysed that about 23.33% population was on the abnormal spectrum on emotional problem scale, 23.33% on the conduct problem scale, 6.66 on the hyperactivity scale, 36.66% on the peer problem scale and 13.33% on the prosocial scale. Orphans: from the sample of(n=30), Borderline: it was analysed that around 26.66% of the orphan population was on the borderline spectrum of emotional problem scale, 3.33% borderline on the conduct scale, 23.33% on the hyperactivity scale, 13.33 on the peer problem scale and 30% on the prosocial. Abnormal: it was analysed that 23.33% of the population was on the abnormal spectrum of emotional scale, 43.33% abnormal on the conduct scale, 53.33% on the peer problem scale and 23.33% abnormality in the prosocial scale.

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Keywords: Orphans, Non-Orphans, Living Environment, Emotional Problem, Behavioural Problem.

Children are like wet cement, whatever falls on them makes an impression. (Haim Ginott)

dolescence is a time which is marked by transition of many psychological and physiological characteristics. This psychosocial stage is marked by nutritional, physical, psychological, sexual, and biosocial transition between childhood into adulthood. Many problems begin with this period with having consequences for later life. Number of behavioural and emotional problems arise as a part of their psychosocial needs with varying degrees of severity.

Children/adolescents living in orphanage are not lucky to get the support, love, care, warmth of their parents. They are deprived of all the love care and affection that the children living with the families get and deserve.

Orphans, known as children without one or both parents come into this category. These children grow up without the attention and the support of their families have poor levels of learning and knowledge and suffer from absence of adults in socializing (Meintjes & Giese, 2006).

In addition to this family and environment are the essential components in the child's life, they play a crucial role in development and source of socialisation in the society. Children grow up and form healthy relationships with family members, learn ways to strengthen their bond of friendship manage emotions in a healthy way.

This study is to find out emotional and behavioural problems in orphans and nonorphans: a comparative study to find out whether there is any similarity between them in the current scenario where there are so many platforms to express oneself.

There are many affects rates and expression of mental problems such as new pressures and other changes may place children at risk for the development of severe problems or disorders at younger ages.

Adolescent and Parents

In most of the families, however the period of increased conflict in early adolescents is followed by the establishment of a new parent-adolescent relationship. Emancipation from parental authority and from emotional dependence upon parents begins in childhood but the process is greatly increased during the early adolescent years In order to function effectively as an adult, the adolescents must begin to detach himself or herself from the family and develop independence in behaviour, emotions, values and beliefs. The ease of transition to fuller independence in later adolescence depends to a great extent on the attitudes parental attitude during preceding years The intensity of conflict between parents and adolescents is largely based on type of parenting Parents who remain authoritative-warm and supportive but firm and clear about rule and its enforcement have relationship with adolescents with the least enduring problem (Steinberg and Morris, 2001).The conflicts between parent and adolescent are universal but the resolution of conflict ending up with warm relationship is based on the parent adolescent relationship especially authoritative child rearing practice. Adolescents have always been an important focus of study for researchers. Studies have highlighted emotional problems such as depression, anxiety, and difficulties in social

interaction as well as behavioural problems such as hyperactivity and conduct problems in them. Among the children too, some groups are more at risk of developing these psychological problems than the others. Children and adolescents who are orphans, runaways, or abandoned by families and bring reared in institutional homes are more vulnerable than others.

Environment

There is a significant body of research that suggests that a child's environment can have a significant impact on their development and overall well-being. In particular, there are several areas where the environment can play a critical role:

- 1. Physical environment: The physical environment in which a child grows up can have a significant impact on their development. For example, exposure to environmental toxins, poor housing conditions, and inadequate nutrition can all have negative effects on a child's physical and cognitive development.
- 2. Social environment: The social environment, including family relationships, social support networks, and the overall social context in which a child grows up, can have a profound impact on their mental health and well-being. For example, exposure to domestic violence, parental substance abuse, and other forms of family conflict can all have negative effects on a child's mental health.
- 3. Cultural environment: The cultural environment in which a child grows up can also have a significant impact on their development. For example, exposure to different languages, traditions, and customs can help broaden a child's perspective and shape their worldview.

Overall, it is important to recognize that the environment can play a critical role in shaping a child's development, and that efforts to promote healthy environments for children are essential for supporting their growth and well-being.

Living with parents vs living in orphanage.

Living in an orphanage versus living with parents can have a significant impact on a child's life. Children who live with their parents generally have a more stable and nurturing environment, with access to emotional support, love, and care. On the other hand, children living in an orphanage may not have the same level of emotional support and nurturing and may be more susceptible to experiencing feelings of loneliness, rejection, and abandonment. Living with parents allows for a more personalized approach to care, as parents can provide individual attention and tailor their parenting styles to their child's needs. They can also provide a stable and predictable home environment that allows children to develop a sense of security and belonging. Parents are typically invested in their child's future and can help them navigate various challenges that arise, such as academic, social, and emotional struggles. Living in an orphanage, however, can be a quite unique experience. Children may not have the same level of individual attention and may not receive the same level of emotional support and guidance as they would with parents. In addition, they may be exposed to difficult living conditions, including overcrowding and insufficient resources. Children in orphanages may also have limited access to educational opportunities and may struggle to form meaningful relationships with caregivers and other children.

Overall, while living in an orphanage may be necessary for some children, it is generally better for children to live with their parents or other family members whenever possible, as it provides a more stable and nurturing environment for their growth and development.

- 1. Socialization and peer relationships: Adolescents in both groups need social interaction and peer relationships to develop their identity and sense of self. They may also face similar challenges related to peer pressure, fitting in, and finding their place in social groups.
- 2. Academic and career aspirations: Orphan and non-orphan adolescents may share similar academic and career aspirations, such as wanting to attend college, pursuing a particular career path, or developing specific skills or talents.
- 3. Emotional and psychological needs: Adolescents in both groups may have emotional and psychological needs, such as the need for support, guidance, and a sense of belonging. They may also experience similar mental health challenges, such as depression, anxiety, and stress.
- 4. Development of life skills: Both orphan and non-orphan adolescents need to develop life skills, such as economic management, time management, and problem-solving, to prepare for adulthood.

Overall, despite the unique challenges faced by orphans, they still share many similarities with non-orphans in terms of their developmental needs and experiences.

1. Psychological Impact: Orphans may experience psychological distress because of the loss of a parent or both parents. This can manifest in a variety of ways, such as depression, anxiety, and behavioural problems. Non-orphans may also experience psychological distress, but it may be less severe and more related to typical life stressors.

It's important to note that these differences are generalizations and may not apply to all orphans and non-orphans. Additionally, there are many factors that can influence a child's experience, such as their age, gender, culture, and individual circumstances.

REVIEW OF LITERATURE

Studies have also shown that the prevalence of emotional and behavioural problems among children and adolescents brought up in institutions like orphanage is higher as compared with similarly aged adolescents brought up by their own families.

There have been several studies conducted on the emotional and behavioural problems in orphans living in orphanages and non-orphans living with their parents. Here is a brief review of the literature:

- 1. Emotional and Behavioural Problems in Orphans: A study conducted by Juffer and colleagues (2012) found that institutionalized children were at a higher risk for emotional and behavioural problems than children living with their biological families. The study also found that the longer the child stays in an orphanage, the greater the risk for emotional and behavioural problems.
- 2. Impact of Adoption: A study by Hansberger and colleagues (2007) found that children who were adopted from orphanages had higher levels of emotional and behavioural problems compared to non-adopted children. However, the study also found that the adopted children showed significant improvement in their emotional and behavioural functioning after being adopted.
- 3. non-orphans living with parents: A study by Sroufe and colleagues (2005) found that children who were securely attached to their parents had fewer emotional and behavioural problems compared to children who were insecurely attached. The study also found that parents who were responsive and sensitive to their children's needs had children with better emotional and behavioural outcomes.

4. Effects of Foster Care: A study by Van Ijzendoorn and colleagues (2005) found that children who were placed in foster care had better emotional and behavioural outcomes compared to children who remained in institutional care.

There is a significant body of literature exploring emotional and behavioural problems in orphans and non-orphans. While there is some variation in findings across studies, a few consistent patterns have appeared.

METHODOLOGY

Purpose/Objectives

- 1. The purpose of this research is to compare the two environments, to see whether there is any similarity or differences in the emotional and behavioural problems suffered by adolescents in these two different environments.
- 2. To study the prevalence of behavioural and emotional problems and types in adolescents living in these environments.
- 3. To study the impact of emotional and behavioural problems on the child's life.

Sample

- The sample compromises of 60 mixed population of boys and girls where 30 are from children living with parents and 30 are from the orphanage. The study was done in Lucknow, Uttar Pradesh.
- In this present study, the term Orphan refers to the children who have lost both or single parent and the term children is used to refer both children and adolescents.

Variables

This research holds dependent and independent variable.

- Independent variable in this research is Living Environment,
- Dependent variable is the **Emotional** and **Behavioural problem**.

Inclusion Criteria

- 1. The inclusion criteria of this research include adolescents aged between 11 to 17 years old who are living in orphanage.
- 2. The adolescents ages between 11 to 17 living with their parents.

Exclusion Criteria

The exclusion criteria of this research include:

- 1. Children suffering from any severe disability from severe intellectual disability to chronic medical illness.
- 2. Those children who were living in the orphanage for less than 1 month

Tools

The tool used for this present research was SDQ questionnaire and self-made sociodemographic detail paper for collecting the data.

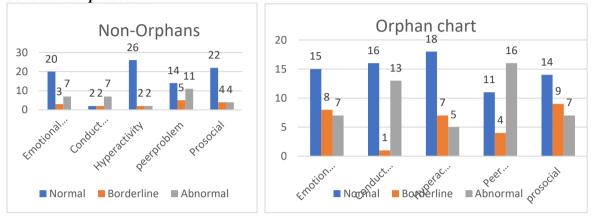
What is SDQ?

The Strengths and Difficulties Questionnaire (SDQ) is known as a brief and quick emotional and behavioural screening questionnaire for children adolescents and young people. The tool work by capturing the perspective of children and young people, their parents, and teachers, that is this tool can take the perspective by different age groups.

Administration: The questionnaire takes about between five and ten minutes to complete. All versions of the questionnaire can be given to the proper respondent to complete themselves. The questionnaire was given to the sample population.

RESULT ANALYSIS

Table No 1: shows the number and percentage of population affected with emotional and behavioural problem.



Non-Orphans: taking from the sample of 30 of non-orphans about 66.66% population was on the normal range of emotional problem. 70% population was not having conduct problem 86.66% was not having hyperactivity around 46.66% population was not having peer problem and 73.33% population was normal in prosocial behaviour. **Borderline:** it was analysed that 10% population was having borderline emotional problem, 6.66% was having borderline peer problem and 13.33% was having borderline prosocial issues. **Abnormal:** it was analysed that about 23.33% population was on the abnormal spectrum on emotional problem scale, 23.33% on the conduct problem scale, 6.66% on the hyperactivity scale, 36.66% on the peer problem scale and 13.33% on the prosocial scale.

Orphans: from the sample of (n=30), it was analysed that 50% orphans of the population were on the normal spectrum of emotional scale, 53.33% on the normal spectrum of conduct scale, 60% normal on the Hyperactivity scale, 36.66% normal on the peer problem scale and 46.66% normal or the prosocial scale. **Borderline:** it was analysed that around 26.66% of the orphan population was on the borderline spectrum of emotional problem scale, 3.33% borderline on the conduct scale, 23.33% on the hyperactivity scale,13.33 on the peer problem scale and 30% on the prosocial. **Abnormal:** it was analysed that 23.33% of the population was on the abnormal spectrum of emotional scale, 43.33% abnormal on the conduct scale, 53.33% on the peer problem scale and 23.33% abnormal on the scale.

Descriptive Statistics							
	N	Range	Minimum	Maximum	Sum	Mean	Std. Deviation
Emotional	29	9	0	9	126	4.34	2.595
conduct	29	8	0	8	73	2.52	2.370
Hyperactivity	29	7	0	7	96	3.31	2.072
peer problem	29	9	0	9	107	3.69	2.206
prosocial	29	9	1	10	210	7.24	2.294
Total	29	24	8	32	601	20.72	6.347
Valid N (listwise)	29						

Table No 2: Shows the descriptive analysis of non-orphans living with parents.Descriptive Statistics

Table 1 shows the descriptive analysis of scores of non-orphans living with parents, it includes sample size, range of the scores, minimum, maximum, sum, mean and standard deviation for each of the subscales (Emotional Scale, Conduct, Hyperactivity, Peer, Prosocial). The mean value for the total sample size 29 is 20.72 and standard deviation is 6.347.

	N	Range	Minimum	Maximum	Sum	Mean	Std. Deviation
EMOTIONAL SCALE	29	8	0	8	144	4.97	2.179
CONDUCT	29	8	0	8	93	3.21	2.470
HYPERACTIVITY	29	9	1	10	144	4.97	2.212
PEER	29	6	1	7	131	4.52	1.975
PROSOCIAL	29	10	2	12	178	6.14	2.263
TOTAL	29	22	12	34	691	23.83	6.077
Valid N (listwise)	29						

Table No 3: Shows the descriptive analysis of orphans living with parents.Descriptive Statistics

Table 2 shows the descriptive analysis of scores of orphans living with parents, it includes sample size, range of the scores, minimum, maximum, sum, mean and standard deviation for each of the subscales (Emotional Scale, Conduct, Hyperactivity, Peer, Prosocial). The mean value for the total sample size 29 is 23.83 and standard deviation is 6.077.

Paired Samples Test										
Paired Differences									Significance	
					95% Confidence Interval of the Difference					
		Mean	Std. Deviation	Std. Error Mean	Lower	Upper	t	df	One-Sided p	Two-Sided p
Pair 1	Emotional - EMOTIONAL SCALE (ORPHAN)	62069	3.40602	.63248	-1.91627	.67489	981	28	.167	.335
Pair 2	conduct - CONDUCT (ORPHAN)	68966	2.76591	.51362	-1.74175	.36244	-1.343	28	.095	.190
Pair 3	Hyperactivity - HYPERACTIVITY (ORPHAN)	-1.65517	3.09696	.57509	-2.83319	47715	-2.878	28	.004	.008
Pair 4	peer problem - PEER (ORPHAN)	82759	3.23009	.59981	-2.05625	.40108	-1.380	28	.089	.179
Pair 5	prosocial - PROSOCIAL (ORPHAN)	1.10345	3.33107	.61857	16362	2.37052	1.784	28	.043	.085
Pair 6	Total - TOTAL	-3.10345	8.47831	1.57438	-6.32843	.12153	-1.971	28	.029	.059

In the table, the "Significance" column shows the level of statistical significance for each pair of variables. The level of significance is a measure of the probability of obtaining the observed difference in means if there is no true difference between the two variables.

The "One-Sided p" and "Two-Sided p" columns show the p-values for a one-tailed and twotailed hypothesis test, respectively. The p-value is the probability of obtaining a test statistic as extreme as, or more extreme than, the observed test statistic, assuming the null hypothesis is true.

Looking at the table, Pair 3 (Hyperactivity - HYPERACTIVITY (ORPHAN)) has a significant p-value of .004 for the one-tailed hypothesis test and .008 for the two-tailed test. This suggests that there is a statistically significant difference between the two variables in this pair, and that this difference is unlikely to have occurred by chance. Pair 5 (prosocial -

PROSOCIAL (ORPHAN)) also has a significant p-value of .043 for the one-tailed test and .085 for the two-tailed test. This suggests that there is a statistically significant difference between the two variables in this pair, but the significance level is lower than in Pair 3.

The other pairs (Pair 1, 2, 4, and 6) do not have significant p-values at the conventional significance level of .05. However, the significance levels for Pair 2 (conduct - CONDUCT (ORPHAN)) and Pair 4 (peer problem - PEER (ORPHAN)) are close to .05, showing that there may be a trend towards significance in these pairs.

RESULT DISCUSSION

Adolescence is time which is marked by transition of many psychological and physiological characteristics. This psychosocial stage is marked by nutritional, physical psychological, sexual transition and biosocial transition between childhood and adulthood. Many problems begin with this period with having consequences for later life. Many behavioural and emotional problems arise as a part of their psychosocial needs with varying degrees of severity.

Many children/adolescents living is not lucky to get the support, love, care, warmth of their parents. They are deprived of all the love care and affection that the children living with the families get and deserve. In addition to this family and environment are the essential components in the child's life, they play a crucial role in development and source of socialisation in the society. Children grow up and form healthy relationships with family members, learn ways to strengthen their bond of friendship manage emotions in a healthy way.

This study tried to find out emotional and behavioural problems in orphans and nonorphans: a comparative study to find out whether there is any similarity between them in the current scenario where there are so many platforms to express oneself. SOME SIMILARITIES BETWEEN ORPHAN AND NON-ORPHANS.

Adolescents, whether they are orphans or non-orphans, share many similarities in terms of their developmental needs and experiences. Some of the similarities between orphan and non-orphan adolescents include:

- 1. Physical and cognitive development: Both groups experience the physical and cognitive changes that come with adolescence, such as hormonal changes, growth spurts, and brain development.
- 2. Socialization and peer relationships: Adolescents in both groups need social interaction and peer relationships to develop their identity and sense of self. They may also face similar challenges related to peer pressure, fitting in, and finding their place in social groups.
- 3. Academic and career aspirations: Orphan and non-orphan adolescents may share similar academic and career aspirations, such as wanting to attend college, pursuing a particular career path, or developing specific skills or talents.
- 4. Emotional and psychological needs: Adolescents in both groups may have emotional and psychological needs, such as the need for support, guidance, and a sense of belonging. They may also experience similar mental health challenges, such as depression, anxiety, and stress.
- 5. Development of life skills: Both orphan and non-orphan adolescents need to develop life skills, such as economic management, time management, and problem-solving, to prepare for adulthood.

Overall, despite the unique challenges faced by orphans, they still share many similarities with non-orphans in terms of their developmental needs and experiences.

Some Differences

The primary difference between orphans and non-orphans is that orphans have lost one or both parents, while non-orphans have at least one living parent.

Here are some added differences between orphans and non-orphans:

- 1. Family Structure: Orphans typically do not have parents or close family members to provide them with emotional and financial support. Non-orphans, on the other hand, have the support of at least one parent or other family members.
- 2. Economic Status: Orphans may face economic hardship, as they may not have access to the financial resources that non-orphans do. They may also be at higher risk of poverty and lack of education. Non-orphans, meanwhile, are likely to have a more stable financial situation and greater access to educational opportunities.
- 3. Social Support: Orphans may also experience a lack of social support, as they may not have access to extended family or community networks. Non-orphans typically have a larger support network, including family, friends, and other community members.
- 4. Psychological Impact: Orphans may experience psychological distress because of the loss of a parent or both parents. This can manifest in a variety of ways, such as depression, anxiety, and behavioural problems. Non-orphans may also experience psychological distress, but it may be less severe and more related to typical life stressors.

It's important to note that these differences are generalizations and may not apply to all orphans and non-orphans. Additionally, there are many factors that can influence a child's experience, such as their age, gender, culture, and individual circumstances.

Abnormal spectrum						
Scales	Orphans	Nonorphans	Difference			
Emotional Problem	23.33%	23.33%	0%			
Conduct Problem	43.33%	23.33%	20% inc. in orphans			
Hyperactivity	16.66%	6.66%	10% inc. in orphans			
Peer Problem	53.33%	36.66%	17.33% inc. in orphans			
Prosocial	23.33%	13.33%	10% inc. in orphans			

CONCLUSION

Borderline spectrum

Scales	Orphans	Nonorphans	Difference
Emotional Problem	26.66%	10%	16.66% inc. in orphans
Conduct Problem	3.33%	6.66%	3.33% inc.in nonorphans
Hyperactivity	23.33%	6.66%	16.67% inc. in orphans
Peer Problem	13.33%	16.66%	3.33% inc. in non-orphans
Prosocial	30%	13.33%	16.67% inc. in orphans

Based on my research, there is a significant difference between the emotional and behavioral problem of orphans and non-orphans one living with parents and the other living in orphanage when it comes to emotional and behavioral problems. Orphans are more likely to

experience these problems due to a variety of factors, such as the trauma of losing a parent, instability in their living situations, and limited access to resources like education and healthcare. These issues can lead to mental health problems such as depression, anxiety, and behavioral issues.

While non-orphans may also experience emotional and behavioral problems, the prevalence and severity of these issues are greater among orphans. It's important to note, however, that not all orphans will experience emotional and behavioral problems, and factors such as age, gender, and social support can also play a role in how they cope with their circumstances. Overall, orphans are a vulnerable population and require added support and resources to address their emotional and behavioral needs. This may include counselling services, access to education and healthcare, and programs that help them develop positive coping mechanisms and social skills.

REFERENCES

- Akella, D., & Jordan, L. P. (2013). Examining the effects of institutionalization on the development of young children: A review of the literature. International Journal of Child and Adolescent Health, 6(2), 153-165.
- Almas, A. N., & Zaman, S. (2013). Emotional and behavioral problems among orphan and non-orphan children: A comparative study in karachi. Journal of Dow University of Health Sciences, 7(2), 58-62.
- American Psychiatric Association. (2013). Diagnostic and statistical manual of mental disorders (5th ed.). Washington, DC: Author.
- Centres for Disease Control and Prevention. (2019). Children's mental health. Retrieved from https://www.cdc.gov/childrensmentalhealth/index.html.
- Hussain, I., Ahmad, A., & Khan, M. A. (2016). Psychological well-being of orphan and non-orphan children. Journal of Social Sciences and Humanities Research, 4(2), 273-280.
- Johnson, D. E., Guthrie, D., Smyke, A. T., Koga, S. F., Fox, N. A., Zeanah, C. H., & Nelson, C. A. (2010). Growth and associations between axiology, caregiving environment, and cognition in socially deprived Romanian children randomized to foster vs ongoing institutional care. Archives of Paediatrics & Adolescent Medicine, 164(6), 507-516.
- Merikangas, K. R., He, J. P., Burstein, M., Swanson, S. A., Avenevoli, S., Cui, L., ... Swendsen, J. (2010). Lifetime prevalence of mental disorders in U.S. adolescents: Results from the National Comorbidity Survey Replication–Adolescent Supplement (NCS-A). Journal of the American Academy of Child and Adolescent Psychiatry, 49(10), 980–989.
- National Institute of Mental Health. (2018). Child and adolescent mental health. Retrieved from https://www.nimh.nih.gov/health/topics/child-and-adolescent-mental-health/ind ex.shtml.
- National Institute on Drug Abuse. (2021). Substance use and mental health. Retrieved from https://www.drugabuse.gov/publications/drugfacts/substance-use-co-occurring-mental-disorders.
- Nelson, C. A., Zeanah, C. H., Fox, N. A., Marshall, P. J., Smyke, A. T., & Guthrie, D. (2007). Cognitive recovery in socially deprived young children: The Bucharest Early Intervention Project. Science, 318(5858), 1937-1940.
- Ollendick, T. H., & King, N. J. (2018). Handbook of Child and Adolescent Anxiety Disorders. Springer.

- Smyke, A. T., Zeanah, C. H., Fox, N. A., & Nelson, C. A. (2009). A new model of foster care for young children: The Bucharest Early Intervention Project. Child and Adolescent Psychiatric Clinics, 18(3), 721-734.
- Substance Abuse and Mental Health Services Administration. (2018). Key substance use and mental health indicators in the United States: Results from the 2017 National Survey on Drug Use and Health (HHS Publication No. SMA 18-5068, NSDUH Series H-53). Rockville, MD: Author.
- Weisz, J. R., Bearman, S. K., Santucci, L. C., & Jensen-Doss, A. (2017). Initial test of a principle-guided approach to transdiagnostic psychotherapy with children and adolescents. Journal of Clinical Child & Adolescent Psychology, 46(1), 44-58.
- Youssef, R. M., Attia, M. S., Kamel, M. I., & Hegazy, N. N. (2014). Behavioral and emotional problems among children living with their parents, institutionalized children, and street children in Alexandria, Egypt. Egyptian Journal of Medical Human Genetics, 15(4), 337-342.

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Conflict of Interest

The author(s) declared no conflict of interest.

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