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Research Paper

Impact of Demographic Factors on Psychosocial Competence of Orphan Children

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ABSTRACT

Psychosocial competence is essential for the potential development of every child. Research reveals that demographic factors do have differential impact on various psychological aspects but studies focusing on psychosocial competence of orphan children are nil almost. Hence, the present study focuses on investigating the significant impact of demographic factors on psychosocial competence of orphan children. To achieve this objective, Psychosocial Competence Scale (Ajitha. D and Vijayalaxmi A Aminabhavi, 2007) was administered on 150 orphan children aged 10-15 years residing in orphanages. Stepwise multiple regression analysis revealed that the demographic factors such as orphan status, access to media, physical health status, participation in extra-curricular activities, gender, domicile, stay duration in orphanage, academic performance, age and languages known have differential impact on various life skills and overall psychosocial competence of orphan children. The results imply the necessity of life skills intervention to orphan children to enhance their psychosocial competence in the background of demographic factors.

Keywords: *Life Skills, Psychosocial Competence, Orphan Children, Demographic Factors*

Children do not just grow in size; they mature mastering ever more complex skills in their environment (Kumar R et al., 1997). According to Erickson humans are motivated by the need to achieve competence. According to Erickson humans are motivated by the need to achieve competence. A sense of competence and a healthy personality result from successful completion of each developmental task. Failure to master these tasks leads to feelings of incompetence. However, the quality of development and ability to mastering the skills varies from child to child (Kumar R et al., 1997). WHO (1993) defines life skills as "the abilities for adaptive and positive behavior that enable individuals to deal effectively with the demands and challenges of everyday life" Equipping orphan children with life skills will make them deal efficiently with daily life challenges. But very little is explored about which demographic factors might have impact on life skills and overall psychosocial competence. Anjali. U S and Sathyamurthi. K (2018) studied 25 institutionalized adolescents. Research revealed that age, duration of stay in institution,

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parent's education, relationship status and family type had contributed to psychosocial competence of adolescents. Similarly, Bhat. A and Aminabhavi. V. A (2015), revealed that adolescents having two siblings have lower and children from upper class have better psychosocial competence. The dearth of studies on psychosocial competence of orphan children necessitated the present study.

MATERIAL AND METHOD

Objective: The present research is to study the impact of several demographic factors on overall psychosocial competence of orphan children.

Hypothesis: Demographic factors such as gender, age, domicile, physical health status, and academic performance, participation in extra-curricular activities, and access to media, languages, orphan status, and stay duration in orphanage impact significantly to psychosocial competence of orphan children.

Participants: The present study is carried out on random sample of 150 orphan children (75 orphan boys, 75 orphan girls) with age range of 10-15 years selected from different orphanages of Belagavi City, Karanataka State, India.

Inclusion Criteria: Orphan children who have lost their either (single orphans) or both (double orphans) parents and staying in orphanages.

Exclusion Criteria: orphan children who have lost their either or both parents and staying with relatives.

Variable: Psychosocial Competence.

Material

- **Psychosocial Competence Scale by Ajitha. D and Vijaylaxmi A.A (2007):** This scale consists of 75 positively and 25 negatively keyed items, covering life skills and overall psychosocial competence. Each skill has ten items with five response categories. Reliability coefficients of the whole scale is Cronbach's alpha= 0.88, Spearman-Brown Coefficient= 0.71 and Guttmann's split half coefficient=0.71 (p<0.001). The concurrent validity ranges from 0.38- 0.76 (p<0.001). **Score:** Lower the score indicates higher the skill and vice versa.

Data Collection

The primary data was collected by above mentioned scale. Demographic information about orphan children was collected from their case files. Informed consent was taken from orphanage authorities. Proper instructions were given by the investigator to children. Confidentiality of the information and anonymity of participants was maintained.

Statistical Technique Applied:

Stepwise multiple regression was applied by using SPSS to test the stated hypothesis.

RESULT

Table 1 Demographic Factors Impacting Significantly to the Problem-Solving Skill of Orphan Children (Boys=75, Girls=75)

Demographic Factors	B	SE	R^2	't'	Adjusted R^2	F
Access to Media (More Access)	4.41	1.13	0.117	3.89***		
Gender (Girls)	3.14	1.06	0.076	2.94*		
Domicile (Rural)	-2.97	1.08	0.058	-2.75*		
Physical Health (Unhealthy)	3.59	1.10	0.032	3.25***	0.297	11.51***
Orphan Status (Single Orphan)	-2.76	1.09	0.021	-2.51**		
Participation in Extra-Curricular Activities (Yes)	-2.33	1.09	0.022	-2.14**		

****p<0.001, **p<0.01, *p<0.05*

Table 1 reveals that out of several demographic factors access to media, gender, domicile, physical health, orphan status and participation in extra-curricular activities have significant impact on problem solving skill of orphan children. The collective contribution of these demographic factors is 29.7% (R^2 = 0.297), which can be predicted with high degree of confidence (F= 11.51; *p<0.000)*. Individual impact of access to media, gender, domicile, physical health orphan status and participation in extra-curricular activities is 11.7%, 7.6%, 5.8%, 3.2%, 2.1% and 2.2% respectively. The impact of access to media (t= 3.89) and physical health (t= 3.25) is significantly very high (p <0.001), orphan status (t= -2.51) significantly high (*p <0.01)* and significant (p <0.05) in case of gender (t= 2.94), domicile (t= -2.75) and participation in extra-curricular activities (t= -2.14). More specifically, orphan children who have more access to media, orphan girls, physically unhealthy have shown significantly low problem-solving skill. On the contrary, Orphan children from rural domicile, single orphan and those who participated in extra-curricular activities have shown significantly high problem-solving skill compared to their counterparts.

Table 2 Demographic Factors Impacting Significantly to the Decision-Making Skill of Orphan Children

Demographic Factors	B	SE	R^2	't'	Adjusted R^2	F
Gender (Boys)	-4.81	1.16	0.119	-4.12***		
Access to Media (More Access)	4.91	1.24	0.215	3.93***		
Domicile (Urban)	4.03	1.19	0.288	3.38***	0.308	17.54***
Physical Health (Healthy)	-3.39	1.18	0.326	-2.87*		

****p<0.001, *p<0.05*

Table 2 reveals that gender, access to media, domicile and physical health have significant impact on decision making skill of orphan children. The collective contribution of these demographic factors is 30.8% (R^2 =0.308), which can be predicted with very high degree of confidence (F= 17.54; p<0.000). Independent impact of gender, access to media, domicile and physical health is 11.9%, 21.5%, 28.8% and 32.6% respectively. The impact of gender (t= -4.12), access to media (t= 3.93) and domicile (t= 3.38) is significantly (*p<0.000)* very high, and physical health (t= -2.87) is significantly (p <0.05) high. This indicates, orphan boys, physically healthy orphans have significantly high decision-making skill. Orphan

children who have more access to media and orphans from urban domicile have significantly low decision-making skill compared to their counterparts.

Table 3 Demographic Factors Impacting Significantly to the Critical Thinking Skill of Orphan Children

Demographic Factors	B	SE	R^2	't'	Adjusted R^2	F
Orphan Status (Double Orphan)	3.21	1.28	0.055	2.51*	0.120	7.79***
Participation in Extra-Curricular Activities (No)	3.61	1.29	0.040	2.79*		
Physical Health (Healthy)	-3.41	1.27	0.042	-2.67*		

****p*<0.000, **p*<0.05

Table 3 reveals that orphan status, participation in extra-curricular activities and physical health have significant impact on orphan children critical thinking skill. Collectively they contribute 12.0% (R^2 = 0.120), which can be predicted with very high degree of confidence (F= 7.79; *p* <0.000). Independent impact of orphan status, participation extra-curricular activities and physical health is 5.5%, 4.0% and 4.2% respectively. The impact of orphan status (t= 2.51), participation in extra-curricular activities (t= 2.79) and physical health (t= -2.67) is significantly (*p* <0.05) high. More precisely, double orphans and those who did not participate in extra-curricular activities have significantly low critical thinking skill. Physically healthy orphan children have shown significantly high critical thinking skill.

Table 4 ***Demographic Factors Impacting Significantly to the Creative Thinking Skill of Orphan Children***

Demographic Factors	B	SE	R^2	't'	Adjusted R^2	F
Physical Health (Healthy)	-4.39	1.06	0.061	-4.13***	0.291	13.21***
Orphan Status (Single Orphan)	-5.58	1.10	0.079	-5.07***		
Languages Known (Multi-linguistic)	-4.62	1.06	0.078	-4.34***		
Access To Media (More Access)	3.89	1.12	0.046	3.46***		
Age (10-11)	4.22	1.28	0.051	3.28***		

****p<0.001*

Table 4 reveals that physical health, orphan status, languages known, access to media and age have significant impact on creative thinking skill of orphan children. These factors collectively impact 6.1%, 7.9%, 7.8%, 4.6% and 5.1% respectively, which can be predicted with high degree of confidence (F= 13.21; *p* <0.000). The impact of physical health (t= -4.13), orphan status (t= -5.07), languages known (t= -4.34), access to media (t= 3.46) and age (t= 3.28) is very highly significant (*p*<0.001). In other words, orphan children who are physically healthy, single orphan, multi-linguistic orphan children have shown significantly high creative thinking skill. Orphan children who have more access to media and 10-11 years old have shown significantly low creative thinking compared to their counterpart respectively.

Table 5 Demographic Factors Impacting Significantly to the Empathy Skill of Orphan Children

Demographic Factors	B	SE	R^2	't'	Adjusted R^2	F
Orphan Status (Double Orphan)	4.79	.99	0.121	4.82***	0.292	16.34***
Access to media (Less Access)	-3.93	1.07	0.104	-3.67***		
Academic Performance (Good)	-2.95	1.01	0.051	-2.92*		
Stay Duration in Orphanage (Below 5 Years)	-3.81	1.41	0.035	-2.70*		

****p<0.000, *p<0.05*

Table 5 reveals that orphan status, access to media, academic performance and stay duration in orphanage have significant impact on empathy skill of orphan children. The collective impact of these demographic factors is 29.2% (R^2 =0.292) which can be predicted with very high degree of confidence (F= 16.34; p<0.000). Collective impact of orphan status, access to media, academic performance and stay duration in orphanage is 12.1%, 10.4%, 5.1%, and 3.5%. The impact of orphan status (t= 4.82), access to media (t= -3.67) is very highly significantly (p<0.000), and academic performance (t= -2.92), stay duration in orphanage (t= -2.70) is significant (p<0.05). More specifically, double orphan children have shown significantly low empathy skill. Orphan children who have less access to media, academically good performers and whose stay duration is below five years have significantly high empathy skill compared to their counterparts.

Table 6 ***Demographic Factors Impacting Significantly to the Self-Awareness Skill of Orphan Children***

Demographic Factors	B	SE	R^2	't'	Adjusted R^2	F
Physical Health (Unhealthy)	5.02	1.12	0.099	4.47***	0.186	9.52***
Access to Media (Less Access)	-3.57	1.17	0.062	-3.04*		
Orphan Status (Single Orphan)	-2.80	1.13	0.025	-2.47*		
Participation in Extra-Curricular Activities (No)	2.26	1.11	0.022	2.02*		

****p*<0.001, **p*<0.05

Table 6 reveals that physical health, access to media, orphan status and participation in extra-curricular activities have significant impact on self-awareness skill of orphan children. The collective impact of these demographic factors is 18.6% (R^2 =0.186), which can be predicted with high degree of confidence (F= 9.52; p<0.000). Individually, the impact of physical health, access to media, orphan status and participation in extra-curricular activities is 9.9%, 6.2%, 2.5% and 2.2%. The impact of physical health (t= 4.47) is very highly significant (p<0.000), access to media (t= -3.04), orphan status (t= -2.47) and participation in extra-curricular activities (t= 2.02) is significantly (p<0.05) high. It means that, physically unhealthy orphan children, those did not participate in extra-curricular activities have shown significantly low self-awareness skill. Orphan children who have less access to media and single orphan children have shown significantly high self-awareness skill than their counterparts respectively.

Table 7 ***Demographic Factors Impacting Significantly to the Coping with Emotions Skill of Orphan Children***

Demographic Factors	B	SE	R^2	't'	Adjusted R^2	F
Physical Health (Unhealthy)	3.99	1.02	0.114	3.89***	0.244	13.05***
Access to Media (Less Access)	-3.69	1.11	0.080	-3.32***		
Gender (Boys)	-3.85	1.07	0.048	-3.59***		
Orphan Status (Double Orphan)	2.31	1.16	0.022	2.09*		

****p<0.001, *p<0.05*

Table 7 reveals that physical health, access to media, gender, and orphan status have significant impact on coping with emotions skill of orphan children. The collective impact of these factors is 24.4% (R^2 =0.244), which can be predict with high degree of confidence (F= 13.05; p<0.000). Individual impact of physical health, access to media, gender, and orphan status is 11.4%, 8.0%, 4.8%, and 2.2%. The impact of physical health (t=3.89), access to media (t= -3.32), gender (t= -3.59) is significantly (p<0.001) very high, and orphan status (t=2.09) is significantly (p<0.05) high. Specifically, orphan children those have less access to media, orphan boys have shown significantly high coping with emotions skill. Physically unhealthy orphans and double orphans have shown significantly low coping with emotions skills than their counterparts.

Table 8 Demographic Factors Impacting Significantly to the Coping with Stress Skill of Orphan Children

Demographic Factors	B	SE	R^2	't'	Adjusted R^2	F
Gender (Boys)	-2.72	1.27	0.103	-2.13*	0.288	9.59***
Orphan Status (Single Orphan)	-5.17	1.28	0.039	-4.04***		
Age (12-13)	-4.71	1.48	0.050	-3.17*		
Access to Media (More Access)	3.64	1.28	0.045	2.85*		
Stay Duration in Orphanage (Above 5Years)	3.04	1.29	0.038	2.34*		
Physical Health (Unhealthy)	2.94	1.23	0.021	2.38*		
Participation in Extra-Curricular Activities (Yes)	-2.78	1.21	0.025	-2.29*		

****p*<0.001, **p*<0.05

Table 8 reveals that gender, orphan status, age, access to media, stay duration in orphanage, physical health and participation in extra-curricular activities have significant impact on coping with stress skill of orphan children. The collective contribution of these demographic factors is 28.8% (R^2 = 0.288), which can be predicted with very high degree of confidence (F= 9.59; p<0.000). Individual impact of gender, orphan status, age, access to media, stay duration in orphanage, physical health and participation in extra-curricular activities is 10.3%, 3.9%, 5.0%, 4.5%, 3.8%, 2.1%, and 2.5% respectively. The impact of orphan status (t= -4.04) is significantly (p<0.000) very high, and gender (t= -2.13), age (t= -3.17), access to media (t= 2.85), stay duration in orphanage (t= 2.34), physical health (t= 2.38) and participation in extra-curricular activities (t= -2.29) is significantly (p<0.05) high. More specifically, orphan boys, single orphans, 12-13 years old orphans, those participated in

extra-curricular activities have shown significantly high coping with stress skill. Orphans with more access to media, who stayed more than five years in orphanage and physically unhealthy orphans have significantly low coping with stress skill compared to their counterparts.

Table 9 ***Demographic Factors Impacting Significantly to the Interpersonal Relationship Skill of Orphan Children***

Demographic Factors	B	SE	R^2	't'	Adjusted R^2	F
Access to Media (More Access)	4.79	1.10	0.150	4.33***	.256	11.27***
Participation in Extra-curricular Activities (Yes)	-3.38	1.04	0.060	-3.23*		
Academic Performance (Good)	-2.56	1.06	0.027	-2.42*		
Orphan Status (Single Orphan)	-2.23	1.02	0.022	-2.18*		
Gender (Boys)	2.60	1.22	0.022	2.12*		

****p*<0.001, **p*<0.05

Table 9 reveals that access to media, participation in extra-curricular activities, academic performance, orphan status and gender have significant impact on interpersonal relationship skill of orphan children. The collective impact of these demographic factors is 25.6% (R^2 =0.256), which can be predicted with very high degree of confidence (F= 11.27; *p*<0.000). Individual impact of access to media, participation in extra-curricular activities, academic performance, orphan status and gender is 1.5%, 6.0%, 2.7%, 2.2%, and 2,2% respectively.

The impact of access to media (t= 4.33) is significantly (*p*<0.000) very high, participation in extra-curricular activities (t= -3.23), academic performance (t=-2.42), orphan status (t= -2.18) and gender (t= 2.12) is significantly (*p*<0.05) high. In other words, orphan children who participated in extra-curricular activities, academically performed good and single orphan children have shown significantly high interpersonal relationship. Orphan children who have more access to media and orphan boys have shown significantly low interpersonal relation compared to their counterparts.

Table 10 Demographic Factors Impacting Significantly to the Effective Communication Skill of Orphan Children

Demographic Factors	B	SE	R^2	't'	Adjusted R^2	F
Participation in Extra-curricular Activities (No)	4.08	.997	0.090	4.09***	0.188	9.62***
Access to Media (More Access)	3.47	1.06	0.042	3.25***		
Orphan Status (Single Orphan)	-3.42	1.02	0.042	-3.34***		
Domicile (Urban)	-2.64	1.02	0.036	-2.57*		

****p<0.001, *p<0.05*

Table 10 reveals that participation in extra-curricular activities, access to media, orphan status, and domicile have significant impact on effective communication skill of orphan children. The collective impact of these demographic factors is 18.8% (R^2 =0.188) which can be predicted with high degree of confidence (F= 9.62; *p*<0.000). Individual impact of

participation in extra-curricular activities, access to media, orphan status, and domicile is 9.0%, 4.2%, 4.2% and 3.6% respectively. The impact of participation in extra-curricular activities (t= 4.09), access to media (t=3.25) and orphan status (t= -3.34) is significantly very high, and domicile (t= -2.57) is significantly (p<0.05) high. More precisely, orphan children who did not participate in extra-curricular activities and have more access to media have shown significantly low effective communication skill. Single orphans and orphans from urban domicile have significantly high effective communication skill compared to their counterparts.

Table 11 ***Demographic Factors Impacting Significantly to the Overall Psychosocial Competence of Orphan Children***

Demographic Factors	B	SE	R^2	't'	Adjusted R^2	F
Access to Media (More Access)	36.54	8.58	0.128	4.25***		
Physical Health (Healthy)	-37.22	8.23	0.073	-4.52***		
Gender (Girls)	22.01	8.05	0.055	2.73*	0.310	14.38***
Participation in Curricular Activities (No)	27.91	8.24	0.038	3.38***		
Orphan Status (Single Orphan)	-24.52	8.33	0.040	-2.94*		

***p<0.001, *p<0.05

Table 11 reveals that access to media, physical health, gender, participation in extra-curricular activities and orphan status have significant impact on overall psychosocial competence of orphan children. Collective impact of these demographic factors is 31.0% (R^2 = 0.310), which can be predicted with very high degree of confidence (F= 14.38; p<0.000). Individual impact of access to media, physical health, gender, participation in extra-curricular activities and orphan status is 12.8%, 7.3%, 5.5%, 3.8%, and 4.0% respectively. The impact of access to media (t= 4.25), physical health (t= -4.52) participation in extra-curricular activities (t= 3.38) is significantly (p<0.000) very high, gender (t= 2.73) and orphan status (t= -2.94) is significantly high (p<0.05). More specifically, orphan children who have more access to media, orphan girls, who did not participate in extra-curricular activities have shown significantly low overall psychosocial competence. Physically healthy orphans and single orphans have shown significantly high overall psychosocial competence compared to their counterparts.

DISCUSSION

The finding of single orphan children showing significantly higher problem solving, creative thinking, self-awareness, coping with stress, interpersonal relationship, effective communication skills as well as overall psychosocial competence compared to double orphan children may be explained in the background of Erikson's (1950) theory that what the children learns through its interaction with its mother is a foundation of basic trust and mistrust of the world in general and other people in particular (Gross, 1997). More specifically, having either parent acts as a booster that makes the child more enthusiastic about life and actively engages in various activities that improve psychosocial skills to solve problems, think creatively and relate to others. On the contrary, double orphan children naturally develop pessimistic attitude and its impact is found on their lower critical thinking, empathizing with others as well as not coping with emotions. The present study supports the

finding of Bowlby (1956) in which it was observed that children separated from parents had more day dreaming, less initiation, over excited, more rougher in their play and less competitive compared to those who stayed with parents as reported by Gross (1997).

Compared to the real-life situation in which the child is expected to think in a multi-directional way, having more exposure to media makes the child think uni-directional which resulted in lower problem solving, decision making and creative thinking. Similarly, spending more time on the screen decreases their degree of socialization, which further irritates them with even smaller life disparities and results in low stress coping and overall psychosocial competence. Screen time is most often a passive behavior, with little learning opportunities. Children aren't mature enough to apply things they learn from screens to what they experience in life. Research has shown that excessive use of electronics can cause shrink of gray matter which controls functions such as memory, muscle control, emotion, speech, self-control etc. Volume reduction has also been seen in the frontal lobe, the striatum, which is involved in suppression of social urges, and in the insula which is responsible for empathy and the ability to read social cues. The present study findings are also falling in line with the above observations.

Another finding is healthy orphan children have shown high decision making, critical and creative thinking skills as well as overall psychosocial competence reflects the quote "sound mind in a sound body". Physical health status of a child influences learning experience, academic success and acquiring life skills. Kohl and Iii (2013) study on effects of physical activities showed that children responded faster and with greater accuracy to a variety of cognitive tasks after participating in a session of physical activity. Unhealthy status of child hampers cognitive skills such as problem solving and being aware of one-self as well as less tolerance capacity and thereby shows low coping with emotions and stress.

The positive impact of participation in extra-curricular activities on problem solving, coping with stress and interpersonal relationship skills is note worthy. Participating in any form of the cultural, art, music or sports events provides a more fertile natural setting in which the child learns to deal with situation effectively which serves as stress reliever and also improves social relationships. On the contrary, not participating in extra-curricular activities make the child to feel deprived of the opportunities to think critically, communicate effectively and thereby reduces the self-awareness and overall psychosocial competence.

Orphan boys showing higher decision making, coping with emotions and stress skills may be attributed to the fact of enjoying more freedom given by orphanage authorities to participate in several activities and to get expose to various situations. Whereas, orphan girls are more controlled and restricted by being exposed to various life situations. Thus, this discrimination in socializing orphan girls and boys lead to the low overall psychosocial competence in orphan girls.

The fact of orphan children coming from rural domicile showing high problem solving skill may be due to minimum interaction of elderly people in upbringing of children make the child to solve their problems independently. Orphan children from urban domicile due to their exposure to multi-languages, cultures and dealing with educated people, may have contributed to their effective communication skill. On the opposite, their lower ability to make choices can be attributed to the fact that they have less freedom to deal with the forces of life. This naturally curbs their capacity to make choices.

Orphan children staying in orphanages below five years fascinated about their peer group tend to cope high with their peer group, resulting in high empathy. Children with long duration of stay at orphanages might have the feelings not getting any outlet to relieve their stress thus resulted in low coping with stress.

Another observation is impact of good academic performance on high empathy and interpersonal relationship skill may be due to more matured and developed cognitive skills.

The younger orphan children due to absence of attachment of their own family members may suffer from higher loading of negative emotions which curbs the child's capacity to think creatively. Orphan children of 12-13 years showing high stress coping skill compared to the younger (10-11) and elder (14-15) counterparts maybe due to the fact that younger one is not mature enough and elder one is undergoing emotional turmoil which is natural due to hormonal changes during that period.

Finally, orphan children with multi-linguistic background showing high creative thinking may be due to exposure to wider group of people coming from different linguistic background and thereby getting an opportunity to have abundant information.

CONCLUSION

Above discussed facts led to the following conclusions:

- Single orphan children have high Problem solving, creative thinking, self-awareness, coping with stress, interpersonal relationship, effective communication skills and overall psychosocial competence. Double orphan children have critical thinking, empathy and coping with emotions skills.
- Orphan children with more access to media have low problem solving, decision making, creative thinking, coping with stress, interpersonal relationship, effective communication skills and overall psychosocial competence. On the contrary, those who with less access to media have high empathy, self-awareness and coping with emotions skills.
- Physically healthy orphan children have high decision making, critical and creative thinking skills and overall psychosocial competence. Physically unhealthy orphan children have low problem solving, self-awareness, coping with emotions and stress skills.
- Orphan children participating in extra-curricular activities have high Problem solving skill, coping with stress and interpersonal relationship skills. Those who did not participated have low critical thinking, self-awareness, effective communication skills and overall psychosocial competence.
- Orphan boys have high decision making, coping with emotions and stress skills. Orphan girls have low Interpersonal relationship and overall psychosocial competence.
- Orphan children with rural domicile have high problem solving skill whereas those with urban domicile have high effective communication skill but low decision making skill.
- Orphan children with lower duration stay in orphanages have high empathy skill whereas those with more stay duration have low coping with stress.
- Orphan children with good academic performance have high empathy and interpersonal relationship skills.

- Younger orphan children have low creativity whereas those aged 12-13 have high coping with stress.
- Orphan children who are multi-linguistic have high creativity.

Social Implications

The study results suggest the need to train orphan children to develop their psychosocial competence through life skill intervention programs. This attempt would undoubtedly lead to the proper use of the human resources of orphan children who are isolated and deprived of the benefits and opportunities of society.

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Conflict of Interest

The author(s) declared no conflict of interest.

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