Resilience and self-efficacy among orphan and non-orphan children: a comparative study

Mengistu Tebikew[1] and Wohabie Birhan Bitew[2]

[1]Department of Psychology, Debre Markos University, Debre Markos Ethiopia
[2]Department of Psychology, Injibara University, Injibara, Ethiopia
Corresponding author: Wohabie Birhan Bitew; email: wohabie.Birhan@inu.edu.et

Abstract

The purpose of this study was to assess the difference between orphan and non-orphan children in their resilience and self-efficacy status. The study was carried out in two public elementary schools found in Debre Markos town. A total of 310 children whose mean age was 12.5 years were selected using proportional stratified random sampling method. The questionnaires adopted from Connor Davidson's Resilience Scale and the Self-Efficacy Questionnaire for Children (SEQ-C) were used to assess resilience and self-efficacy respectively. MANOVA *and Pearson's correlation were conducted using SPSS version 20 at 5% level of significance. Participants were composed of 205 (66%) non-orphaned, 65 (21%) single orphaned, and 40 (13%) double orphaned children. A statistically significant mean differences were observed among the three groups of children in their self-efficacy and resilience status. Double orphan children had significantly higher resilience and self-efficacy status than both single orphan and non-orphan groups. Mean differences between single orphan and non-orphan children in terms of both resilience and self-efficacy were not statistically significant. It is possible to conclude from the findings that the more children face challenges as a result of having lost both parents, the more efficacious they become. The findings may have implication to parents and caregivers to give opportunities for their children to experience challenges to develop resilience and self- efficacy.*

Keywords: Children, Resilience, Self-efficacy, Orphan, Non-orphan

Introduction

Resilience is defined as the ability to bend but not break, bounce back, and perhaps even grow in the face of adverse life experiences (Southwick et al., 2014) and successfully cope with adversity, life stressors, and potentially traumatic events (Sewasew et al., 2017). It is a phenomenon which cannot be directly measured, but could only be inferred (Worku et al., 2018). It is a dynamic process encompassing positive adaptation within the context of significant adversity (Luthar et al., 2000, as cited in Daniel et al., 2007).

Self-efficacy is defined as people's judgments of their capabilities to organize and execute courses of action required to attain designated types of performances (Bandura, 1986, as cited in Schunk, 1991). Self-efficacy theory suggests that people

get their efficacy from their performance accomplishments, and observation (Schunk, 1991). Schunk further state that a person who has a low sense of efficacy for carrying out a task could avoid it while capable of accomplishing it will participate in the task.

Self-efficacy arises from diverse sources of information conveyed by direct and mediated experience (Bandura, 1978). Bandura further states that people's personal efficacy determines coping behaviour and effort in the face of obstacles and aversive experiences. Resilience and self-efficacy have a bidirectional relationship. For example, children who are resilient in the face of adversity are also found to be self-efficacious (Hamill, 2003).

Literature shows that there are various definitions and classifications of orphaned children. The United Nations International Children's Emergency Fund defines the word orphan as a child who has lost one or both parents (UNICEF, 2020). Some scholars define orphaned children as those whose fathers or mothers or both parents are dead. In referring to the number of parents that a child has lost, children who have lost one of their parents are categorized under single orphans while those who have lost both parents are classified as double orphans (Sewnet et al., 2021).

There are 147 million orphans (0–17 years) globally, out of which 14.9 million lost one or both parents due to an AIDS-related cause in 2021 (UNICEF, 2022). Similarly, UNICEF, the Joint United Nations Programme on HIV/AIDS (UNAIDS) United States Agency for International Development (USAID) (2004) report shows that 12.3% of all children under age 18 in sub-Saharan Africa were orphans (Daniel et al., 2007).

In Africa it is estimated that more than 12 million children have become orphans due to HIV AIDS, and these children are at the risk of losing access to education, health care, and proper nutrition (Rivers et al., 2008). A study conducted in 38 sub-Saharan African countries in 2010 revealed that 26.8 million children were paternal orphans and more than 26.3 million were maternal orphans (Belsey & Sherr, 2011). In terms of age, more than 50% of these orphans were between15-17 years.

Demographic and Health Survey (2005) in Ethiopia found that 23% of 15-17 aged children have lost one or more parent and the prevalence of orphan children within child population in Ethiopia is estimated to be 12% (Sewnet et al., 2021). Natural and social disasters such as drought, famine, displacement, migration and conflict are the main causes for the death of parents leading to being orphaned (Campfield, 2019).

According to recent statistics, one in 10 children under age 18 does not live with a biological parent, and 7 percent of these children are either maternal or paternal orphans (UNICEF, 2017). Likewise, the Amhara National Regional State Bureau of Women and Children Affairs (2013) reported that the number of orphaned children in this region is 53%.

Literature on the well-being of orphaned children is scanty and focused on some other issues, like their material needs and living arrangements (Ntuli et al., 2020). Earlier studies on both orphan and non-orphan children indicate that the former lag behind in their academic performance and are more often malnourished and stunted (Coneus et al., 2014). However, a study conducted in Jimma showed that orphan children showed higher overall self-esteem than those living with their families (Aboud et al., 1991).

Orphan children suffer from higher levels of psychosocial problems than their non-orphaned peers and they are victims of discrimination and other psychosocial problems (Afework, 2013). Orphans are more likely to suffer from behavioral problems and suicidal thoughts than non-orphans (Cluver et al., 2007, as cited in Alem, 2020). In some psychological measures like depression, post-traumatic stress disorder, orphans are believed to be more susceptible than their non-orphan counterparts (Bhargava, 2005; Cluver et al., 2007, as cited in Alem, 2020). Orphans suffer from lower resilience and self-efficacy due to loss of a parent and lack of income (Goodman et al., 2015). On the other hand, a study in Ghana showed that there was no difference between the orphans and non-orphans in the measures of self-efficacy and resilience (Salifu Yendork & Somhlaba, 2015). Likewise, Govender et al. (2014) found that there was no significant difference in resilience between orphans and non-orphans. However, Chi and Li (2013) found that double orphans scored higher anxiety and lower self-esteem than did single orphans.

It was also reported that being orphan makes children psychologically stronger and successful. For instance, Save the Children International (SCI, 2015) reported that orphan and vulnerable children are somewhat more resilient than those who are non-orphan and those orphan children trained on resilience showed lower level of school absenteeism, high academic performance, high self-efficacy, and lower anti-social behavior than their peers who are not provided the training. However, the report did not disclose the level of this psychosocial skill training across double orphan, single orphan and non-orphan children, separately.

Self-efficacy and resilience are two concepts that enhance each other. Previous studies indicate that resilience and self-efficacy are positively related to each other and an

increase in one will increase the other (Djourova et al., 2020). Self-efficacy promotes resilience of orphan children through fostering competence and self-worth during adversities (Salifu Yendork & Somhlaba, 2015).

Several studies have been conducted on orphan and non-orphan children so far at both global and national levels. To mention a few, the importance of efficacy beliefs and coping mechanisms in resilient adolescents (Hamill, 2003); personality differences between orphans and non-orphans (Emmanuel, 1991); psychosocial wellbeing of orphan and vulnerable children at orphanages (Sebsibe, 2014); outcomes of orphanhood in Ethiopia (Camfield, 2011); a comparative study of psychological wellbeing between orphan and non-orphan children in Addis Ababa (Afework, 2013); a comparison among orphans and non-orphans in their cognitive styles and level of aspiration (Samyukta, 2016); risks, protection, and resilience among OVC in Chilga woreda, Ethiopia (Belay & Missaye, 2014). However, these studies did not address whether being non-orphan, single or double orphan matters in the development of resilience and self-efficacy. Therefore, this study aimed to investigate the level of resilience and self-efficacy among single orphan, double orphan and non-orphan children. Specifically, the study aimed to: 1) examine if there is a difference in resilience and self-efficacy in double orphan, single orphan and non-orphan children; 2) examine the relationship between self-efficacy and resilience among non-orphan, single orphan and double orphan children.

Methods

Study approach and design

Quantitative cross-sectional survey was employed in this study for it is an appropriate design that fits to achieve the research objectives.

Population

The study was conducted in two public primary schools, namely, Edetibeb and Endemata, found in Debre Markos town administration in Amhara regional state, Ethiopia. The main reason for the selection of these two schools among others was comparatively the prevalence of orphan children within these two schools was higher than others (Debre-Markos town Education Office, 2018). The total number of students in the two schools was 1391 at the time of data collection. The aggregate number of students in Edetibeb and Endemata were 704 and 687 respectively. From the overall student population of the two schools (n=1391), 925(66%) were non-

orphans, 285 (21%) were single orphans, and the rest 181(13%) were double orphans.

Participants and sampling

Sample size was estimated using Yamane's (1967) sample size calculation formula. Accordingly, 310 students (22% of the population) were taken as samples of the study Proportional stratified random sampling method was employed to select 310 children from the three strata, that is, non-orphan, single orphan and double orphan. Accordingly, 40 double orphans (M= 20, F=20), 65 single orphans (M= 33, F=32) and 205 non-orphans (M=102, F=103) attending their education from grade 5^{th} to 8^{th} participated in the study. The age range of these participants was from 11-14 years and the mean age was 12.6 years.

Data collection techniques

To assess participants' resilience, we employed Resilience Scale that consists of 25 items (CD-RISC, 2003) adapted from Connor Davidson. Each of the items of the resilience scale was rated on a 5-point scale (0-4) with higher scores reflecting greater resilience was used to measure resilience. These items had good internal consistency ($\alpha = 0.89$). Self-Efficacy Questionnaire for Children (SEQ-C) (Bandura et al., 1999) was employed to measure their self-efficacy. The questionnaire consisted of 24 items, with three dimensions: academic self-efficacy, social self-efficacy, and emotional self-efficacy. Each dimension comprises 8 items. The scale has validity and reliability evidences and its internal consistency (alpha) estimates ranged from 0.85 to 0.88.

Pilot test was conducted on 60 students having similar demographic characteristics (non-orphan n=8, single orphan=13, and double orphan n=39) of samples of the study in one of the schools found in Debre Markos city administration. After the pilot test, the reliability (internal consistency) of the resilience and self-efficacy test items were 0.76 and 0.87 in Cronbach's Alpha, respectively. After the pilot study, one item in the resilience scale was found to be redundant and thus cancelled and the questionnaire for the main study consisted of 24 items.

Data analysis techniques

Descriptive and inferential statistics were applied to analyze the data. Bivariate correlation was used to check the relationship between resilience and self-efficacy. Since the study has two dependent variables (self-efficacy and resilience) and one categorical independent variable, one-way MANOVA was employed.

MANOVA was employed to examine whether the observed mean differences among double orphan, single orphan and non-orphan children varry significantly. Based on the multivariate analysis result, there were significant differences between groups of the independent variable (parental status) in resilience and self-efficacy level. Besides, Pearson's product moment correlation coefficient was used to examine the strength and direction of relationships among variables. Analyses were conducted using Statistical Package for Social Sciences (SPSS) version 20.

Ethical considerations

Ethical clearance was obtained from Institute of Education and Behavioral Sciences, Debre Markos University. Informed consent was obtained from respective schools and from all participants and they were informed not to write their name in the questionnaire. All participants were informed that they had the right to withdraw from participating in the study if they are not interested. Anonymity was applied in order not to reveal the identity of participants both in the data collection and analysis process.

Results

In this section, data analysis of resilience and self-efficacy of non-orphan, single orphan and double orphan children has been presented. The number of male and female participants was almost the same (Table 1). Meanwhile, the number of non-orphans (n=205) was greater than the aggregate number of both single and double orphans (n=105).

Table 1. Participant' demographic characteristics in terms of sex and Parental status (n=310)

variables	**Double orphan**		**Single orphan**		**Non orphan**		**Total**	
Sex	N	%	N	%	N	%	N	%
Male	20	6.4	32	10.3	102	33	154	49.7
Female	20	6.4	33	10.9	103	33	156	50.3
Total	40	13	65	21	205	66	310	100

As shown in table 2, double orphan children have higher mean of resilience (M=97.5, SD=5.7) than single orphan (M= 88.7, SD= 9.9) and non-orphan (M=86.9, SD= 10.5) groups. Similarly, single orphan children have higher resilience mean than non-

orphan and lower than double orphan children. It was also found that double orphan children had higher mean of self-efficacy (M=93.5, SD=6.7) than non-orphans (M=89, SD= 10.8) and single orphans (M=88.1, SD= 8.2). Non orphans have slightly higher self-efficacy mean score than single orphans. Among these, 35 (59.3%) were males and 24 (40.7%) were females. This implies male orphan children were more resilient than female orphans.

The mean score of self-efficacy was found to be 89.4 (SD=9.9). Based on this distribution, M ± SD (89.4 ± 9.9) was taken to label the higher and lower efficacious participants. Thus, we labeled participants who scored greater than 89.4 + 9.9 (> 99.3) as higher efficacious participants, and those who scored less than 89.4-9.9 (< 79.5) as lower efficacious. Participants who achieved in between 79.5 and 99.3 were considered as moderately efficacious.

Table 2: *Descriptive statistics of resilience and self-efficacy for double orphan, single orphan and non-orphan children in terms of sex (n=310)*

Variables	Parental status	Sex	Mean	Std. Deviation	N
Resilience	Double Orphan Children	Male	99.45	4.65	20
		Female	95.45	5.96	20
		Total	**97.45**	**5.65**	**40**
	Non Orphan Children	Male	87.55	10.76	102
		Female	86.16	10.25	103
		Total	**86.85**	**10.5**	**205**
	Single Orphan Children	Male	88.03	9.72	32
		Female	89.36	10.22	33
		Total	**88.7**	**9.92**	**65**
		Male	89.2	10.68	154
		Female	88.03	10.24	156
		Total	**88.61**	**10.46**	**310**
Self-efficacy	Double Orphan Children	Male	93.35	6.7	20
		Female	93.65	6.77	20
		Total	**93.5**	**6.65**	**40**
	Non Orphan Children	Male	89.63	11.93	102
		Female	88.4	9.49	103
		Total	**89.01**	**10.76**	**205**
	Single Orphan Children	Male	87.06	7.83	32
		Female	89.09	8.6	33
		Total	**88.09**	**8.23**	**65**
		Male	89.58	10.73	154
		Female	89.22	9.11	156
		Grand Total	**89.4**	**9.93**	**310**

Trace row in bold shows significant mean differences between groups of parental status (Table 3). Statistically, there was a significant mean difference between double orphan, single orphan, and non-orphan children when considered jointly on the variables resilience and self-efficacy taking, *Pillai's Trace* = 0.131, *F(4, 614)*= 10.736, $p < 0.001$. Thus, there are indeed significant mean differences between double orphan, single orphan and non-orphan children's resilience and self-efficacy.

Table 3. *Multivariate tests of resilience and self-efficacy measures among double orphan, single orphan and non-orphan children.*

		Value	F	Hypothesis df	Error df	Sig.	Effect	Noncent. Parameter	Observed Power[d]
Parental Status: non-o-orphan, single orphan and double orphan	Pillai's Trace	0.131	10.736	4	614	0	0.065	42.946	1
	Wilks' Lambda	*0.87*	*11.009[b]*	*4*	*612*	*0*	*0.067*	*44.037*	*1*
	Hotelling's Trace	0.148	11.281	4	610	0	0.069	45.123	1
	Roy's Largest Root	0.14	21.451[c]	2	307	0	0.123	42.902	1

A separate ANOVA test conducted for each dependent variable showed that there were significant differences between double orphan, single orphan and non-orphan groups on resilience, *F(2, 307)*= 19.16, $p < 0.001$ with different mean values of double orphan (M= 97.45), single orphan (M= 88.7) and non-orphan (M= 86.8). It was also found that there were significant ean differences between double orphan, single orphan and non-orphan groups in terms of self-efficacy, *F(2, 307)*= 4.2, *p*= 0.016 with different mean values of double orphan (M= 93.5), single orphan (M= 88.1) and non-orphan (M= 89).

Post hoc tests (Scheffe & Games-Howell) on resilience among the three groups showed that double orphan children were more resilient than single orphan and non-orphan children. But, single orphan and non-orphan children have similar resilience status which is much less than double orphans.

In a similar way, we conducted a post hoc test for self-efficacy using Scheffe's and Game-Howell tests. Scheffe's test for double orphan children's mean (M = 93.50) and non-orphan children's observed mean (M= 89.02) had a significant statistical difference at $p = 0.032$. Also, there was a statistically significant mean difference between double orphan children and single orphan children's self-efficacy with $p = 0.025$. The mean difference between double orphan (M = 93.5) and non-orphan (M =

89.02) was 4.5, whereas double orphan (M = 93.5) and single orphan (M = 88.1) children had 5.4 mean difference. But, the observed mean difference (between non-orphan and single orphan children was not significant (*p = 0.803)*.

Table 4. Correlations among resilience, self-efficacy, age and gender

Variables	Resilience	Self-efficacy
Resilience	1	
Self-efficacy	.673**	1
Age	-0.058	-0.118*

Significance level α= 0.05 (2-tailed)

Based on Pearson's (r) correlation (Table 4), it was found that the relationship between resilience and self-efficacy was positive (r= 0.67, p < 0.001*)*. Age was found to have a negative but significant relationship with self-efficacy (r = -0.118, p = 0.038). However, age was found to to be non-significantlly associated with resilience (r = -0.058, p = 0.305).

Discussion

Findings in the current study indicated that double orphan children were significantly more resilient and efficacious than single orphan and non-orphan while single orphan and non-orphan children had no significant difference in their self-efficacy and resilience status. The result is consistent with Govender et al. (2014) and Ntuli et al. (2020) study, which states that despite orphans face lack of food security, poverty, and strained extended family relations, they are resilient. Likewise, the same study conducted on orphan and non-orphan children in Ghana (Salifu Yendork & Somhlaba, 2015) revealed that orphaned children were more resilient than non-orphan ones. In line with this, Rutter (1985) agrees that the more risks children exposed to, the more likely they experience it and thus become more resilient. Meanwhile, Baarøy and Webb (2008) conducted a study in Tanzania on the Psychosocial wellbeing of orphan, foster and non-orphan children and found that there was no significant difference among the three groups. Likewise, Govender et al. (2014) found that there was no significant difference in resilience and other psychosocial well-being measures between orphans and non-orphans.We hypothesize that the inconsistency in the findings might be sample size differences in the two studies.

We tried to investigate whether resilience and self-efficacy differ across gender and age. Yet, age and gender were not factors to the observed mean differences across

double orphan, non-orphan, and single orphan children in both resilience and self-efficacy.

Resilience and self-efficacy were found to be correlated across double orphan, single orphan, and no orphan children. Similarly, Sagone and Caroli (2013) found similar results and attributed that the more individuals reported high levels of resilience, the more they perceived themselves as efficient. This implies that resilience predicts self-efficacy and vice versa.

This study has limitations in sampling for small sample for the orphan children. Therefore, researchers interested to conduct a similar study in the area need to conduct with proportional sample size of the non-orphan, double orphan and single orphan children.

Conclusion

Orphan children were found to be more resilient, and had greater self-efficacy than their non-orphan children. This implies that the economic and other hardships that orphan children experience in their lives make them stronger, and the challenges they face are just opportunities towards success in future life.

Acknowledgements

We would like to thank the teachers, principals, and the students of Endimata and Edetibeb primary school for providing valuable information and facilitation in the data collection process. We would also like to thank all the children in the two schools who completed the questionnaire

Conflict of interest

There are no competing interests regarding this work.

Authors' contribution statement

Mengistu Tebikew was involved in the conception, design, data collection, and analysis. Wohabie Birhan Bitew contributed to drafting the paper, revising it critically for intellectual content and in the final approval of the paper to be published.

Author information

Wohabie Birhan Bitew is an Associate Professor of Psychology at Injibara University. Currently, he is offering courses to MA and PhD students of Psychology and advising theses and dissertations.

Mengistu Tebikew is a lecturer in Psychology in the institute of Educational and Behavioral Sciences, Debre Markos University

References

Aboud, F., Samuel, M., Hadera, A., & Addus, A. (1991). Intellectual, social and nutritional status of children in an Ethiopian orphanage. *Social Science and Medicine*, *33*(11), 1275–1280. https://doi.org/10.1016/0277-9536(91)90075-N

Alem, S. K. (2020). Investigating psychosocial problems of orphan children in primary schools. *Journal of Pedagogical Research*, *4*(1), 46–56. https://doi.org/10.33902/jpr.2020058810

Baarøy, J., & Webb, D. (2008). Who are the most vulnerable? Disaggregating orphan categories and identifying child outcome status in Tanzania. *Vulnerable Children and Youth Studies*, *3*(2), 92–101. https://doi.org/10.1080/17450120802195359

Bandura, A. (1978). Self-efficacy: Toward a unifying theory of behavioral change. *Advances in Behaviour Research and Therapy*, *1*(4), 139–161. https://doi.org/10.1016/0146-6402(78)90002-4

Belsey, M. A., & Sherr, L. (2011). The definition of true orphan prevalence: Trends, contexts and implications for policies and programmes. *Vulnerable Children and Youth Studies*, *6*(3), 185–200. https://doi.org/10.1080/17450128.2011.587552

Campfield, L. (2019). *Outcomes of orphanhood in Ethiopia : A mixed methods study. https://www.jstor.org/stable/41476542*

Chi, P., & Li, X. (2013). Impact of parental HIV/AIDS on children's psychological well-being: A systematic review of global literature. *AIDS and Behavior*, *17*(7), 2554–2574. https://doi.org/10.1007/s10461-012-0290-2

Coneus, K., Mühlenweg, A. M., & Stichnoth, H. (2014). Orphans at risk in sub-Saharan Africa: evidence on educational and health outcomes. *Review of Economics of the Household*, *12*(4), 641–662. https://doi.org/10.1007/s11150-012-9167-4

Daniel, M., Apila, H. M., Bjørgo, R., & Lie, G. T. (2007). Breaching cultural silence: Enhancing resilience among Ugandan orphans. *African Journal of AIDS Research*, *6*(2), 109–120. https://doi.org/10.2989/16085900709490405

Djourova, N. P., Rodríguez Molina, I., Tordera Santamatilde, N., & Abate, G. (2020). Self-Efficacy and Resilience: Mediating Mechanisms in the Relationship Between the

Transformational Leadership Dimensions and Well-Being. *Journal of Leadership and Organizational Studies*, *27*(3), 256–270. https://doi.org/10.1177/1548051819849002

Goodman, M. L., Lloyd, L. E., Selwyn, B. J., Morgan, R. O., Mwongera, M., Gitari, S., & Keiser, P. H. (2015). Factors associated with general self-efficacy and resilience among youth heads of households in Kenya. *Journal of Health Psychology*, *21*(10), 2229–2246. https://doi.org/10.1177/1359105315573443

Govender, K., Reardon, C., Quinlan, T., & George, G. (2014). Children's psychosocial wellbeing in the context of HIV/AIDS and poverty: A comparative investigation of orphaned and non-orphaned children living in South Africa. *BMC Public Health*, *14*(1). https://doi.org/10.1186/1471-2458-14-615

Hamill, S. K. (2003). Resilience and self-efficacy: the importance of efficacy beliefs and coping mechanisms in resilient adolescents. *Colgate University Journal of the Sciences, January 2003*, 115–146.

Ntuli, B., Mokgatle, M., & Madiba, S. (2020). The psychosocial wellbeing of orphans: The case of early school leavers in socially depressed environment in Mpumalanga Province, South Africa. *PLoS ONE*, *15*(2), 1–17. https://doi.org/10.1371/journal.pone.0229487

Rivers, J., Mason, J., Silvestre, E., Gillespie, S., Mahy, M., & Monasch, R. (2008). Impact of orphanhood on underweight prevalence in sub-Saharan Africa. *Food and Nutrition Bulletin*, *29*(1), 32–42. https://doi.org/10.1177/156482650802900104

Rutter, M. (2001). Resilience in the face of adversity. *Wool Record*, *160*(3686), 31. https://doi.org/10.1192/bjp.147.6.598

Sagone, E., & Caroli, M. E. De. (2013). Relationships between resilience, self-efficacy, and thinking styles in Italian middle adolescents. *Procedia - Social and Behavioral Sciences*, *92*(Lumen), 838–845. https://doi.org/10.1016/j.sbspro.2013.08.763

Salifu Yendork, J., & Somhlaba, N. Z. (2015). Do Social Support, Self-efficacy and Resilience Influence the Experience of Stress in Ghanaian Orphans? An Exploratory Study. *Child Care in Practice*, *21*(2), 140–159. https://doi.org/10.1080/13575279.2014.985286

Schunk, D. H. (1991). Self-Efficacy and academic motivation. *Educational Psychologist*, *26*(3–4), 207–231. https://doi.org/10.1080/00461520.1991.9653133

Sewasew, D., Braun-Lewensohn, O., & Kassa, E. (2017). The contribution of guardian care and peer support for psychological resilience among orphaned adolescents in Ethiopia. *Contemporary Social Science*, *12*(3–4), 175–188. https://doi.org/10.1080/21582041.2017.1384048

Sewnet, S. S., Derseh, H. A., Desyibelew, H. D., & Fentahun, N. (2021). Undernutrition and associated factors among under-five orphan children in Addis Ababa, Ethiopia, 2020: A cross-sectional study. *Journal of Nutrition and Metabolism*, *2021*. https://doi.org/10.1155/2021/6728497

Southwick, S. M., Bonanno, G. A., Masten, A. S., Panter-Brick, C., & Yehuda, R. (2014). Resilience definitions, theory, and challenges: Interdisciplinary perspectives. *European Journal of Psychotraumatology*, *5*(February). https://doi.org/10.3402/ejpt.v5.25338

UNICEF. (2017). *2017 Status Report on Early Childhood Care and Education in Pacific Island Countries*.

Worku, B. N., Abessa, T. G., Franssen, E., Vanvuchelen, M., Kolsteren, P., & Granitzer, M.

(2018). Development, social-emotional behavior and resilience of orphaned children in a family-oriented setting. *Journal of Child and Family Studies*, *27*(2), 465–474. https://doi.org/10.1007/s10826-017-0908-0