

**The relation of Familial Support with Obsessive-Compulsive Disorder among a Sample of Orphan high school Students in Southern Al-Mazar District**

"المساندة الأسرية وعلاقتها بالوسواس القهري لدى عينه من الطلبة الأيتام في المرحلة الأساسية العليا في لواء المزار الجنوبي"

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**Abstract:**

The aim of this study is to investigate the familial support and its relationship with the obsessive- compulsive disorder among a sample of orphan students at highschool in southern Al-Mazar district in Jordan. To achieve the goals of the study, a sample of (80) orphan students was selected from the high schools of the directorate of education in southern Al-Mazar. Two scales were developed: the familial support scale and the obsessive -compulsive disorder scale. Both scales were verified for their psychometric characteristics. The study was applied at the beginning of the first semester of the academic year 2019/2020 on the study sample. The study adopted the descriptive correlation approach. Results indicated that the level of familial support among orphan students was medium in total and the level of obsessive compulsive-disorder was high.

The results also indicated a significant statistical inverse relationship between familial support and obsessive-compulsive disorder, In addition to significant statistical differences for the total score of the familial support scale based on the variable of gender.

In light of the results revealed by the study, a group of recommendations were suggested among which offering support for orphan students and improving communication by talking to them and listening to what they say without reacting strangely to the queer ideas they offer.

**Keywords:** Familial Support; Obsessive- Compulsive Disorder; Al-Al-Mazar; Orphans

تهدف الدراسة إلى الكشف عن المساندة الأسرية وعلاقتها بالوسواس القهري لدى عينة من الطلبة الأيتام في المرحلة الأساسية العليا في لواء المزار الجنوبي في المملكة الأردنية الهاشمية، ولتحقيق أهداف الدراسة تم اختيار عينة من الطلبة الأيتام في مدارس مديرية التربية والتعليم للواء المزار الجنوبي بواقع (80) طالبا يتيما في المرحلة الأساسية العليا، وتم تطوير مقياسين هما مقياس المساندة الأسرية ومقياس الوسواس القهري والتحقق من خصائصهم السيكومترية وتم تطبيق الدراسة ببداية الفصل الدراسي الأول 2019/ 2020م على عينة الدراسة واستخدام المنهج الوصفي الارتباطي، وأظهرت النتائج إن مستوى المساندة الأسرية لدى الطلبة الأيتام كان متوسطا بالدرجة الكلية، وأظهرت النتائج كذلك أن مستوى الوسواس القهري كان مرتفعا، وقد تبين وجود علاقة عكسية ذات دلالة إحصائية بين المساندة الأسرية والوسواس القهري. ووجود فروقات ذات دلالة إحصائية للدرجة الكلية لمقياس المساندة الأسرية لمتغيرات الجنس. وفي ضوء هذه نتائج الدراسة توصلت الدراسة إلى عدد من التوصيات ومنها تقديم المساندة للطلبة الأيتام والتحدث معهم والاستماع إلى ما يقولون، وعدم الانفعال من غرابة الأفكار التي يطرحوها.

**الكلمات المفتاحية:** المساندة الأسرية؛ الوسواس القهري؛ الأيتام؛ لواء المزار.

## **Introduction:**

Family is the first group to embrace child , receive child and creates a feeling of belonging and citizenship within this child as the child's personality is shaped through his/her family within which he/she lives and this explains the reason of the double role and importance of the family in present times in addition to the multiple external influences in the child's life. Thus, the topic of family interest has attracted many researchers and psychologists to study several concepts related to family such as the concept of familial support which indicates the feeling of support from others and from the family in particular.

Familial support is defined as a pattern of work and a large group of activities that reinforce the positive nonofficial social networks through programs and societal services, and the main focus for these services is upon the early intervention with the aim of reinforcing and protecting the health and welfare as well as the rights of all children and youths and their families and at the same time, giving particular attention to weak ones who are vulnerable ( Murray, 2016).

Family support is also defined as a group of strategies directed towards the family unit but at last it benefits the individual as these strategies aim to assist family members who play a basic role in providing with support and instruction for their families . These strategies are designed , implemented and funded by a flexible way that treats the emotional, physical and material welfare for the whole family members. Researchers conducted over the past 20 years has consistently indicated a positive relationship between familial support and the families' ability to reinforce

flexibility , keeping on the care giver health, and reducing and overcoming stress ( National Agenda on Family Support Summit, 2011 ).

Familial support has several forms as indicated by Kyzar , Turnbull, Summers and Gomez ( 2012) , first, the emotional support which indicates the assistance related to improving the psycho-social performance regarding reducing stress and improving the positive attitude for emotions and second , the physical assistance which indicates the assistance related to improving the physical health ( such as health and nutrition tests ) or the daily living skills of handicapped family members ( such as assisting the child to use the toilets , taking food and going around his/her environment ).

The other form of support is the material support which indicates the assistance related to improving support access to the adequate financial resources and completing the necessary tasks ( such as transferring to the doctor appointment, looking after children to enable parents to work and assisting with household works so as the family has time to spend time together ).

The fourth form of support is the informational one which indicates the assistance related to the verbal and written knowledge offered by either the internet or via video and publications which leads to improve the decision making process.

In general, studies have indicated a significant statistical relationship between familial support and the familial life quality but they also indicated that this relationship was mediated due to the stress suffered by parents. Other studies have found large effects for support on family satisfaction and welfare and there are those which indicated a beneficial effect for social support for the parents on reducing stress .

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There has been a difference in the scales assessing the independent variable – familial support – whether regarding the resources of support ( family, friends, professionals ) or the type of support offered ( emotional, physical, material, informational ). This might be attributed to the lack for a general unified and acceptable definition for familial support and due to this difference, there are no conclusions about the effect of any specific type of support despite most studies has investigated nonofficial resources for support ( School of Social Work, 2015).

Albanani (2011) sees that human isn't only exposed to Psychosomatic psychosis, but also there is a disorder that affects some people and this disorder is the obsessive compulsive disorder which is a common one that is characterized by making human forced to make movements and desires against his/her will although he/she recognizes that they are opposite the realty and social rules, and this order is seen as compulsive movements and thoughts and individual won't make compulsive acts unless the obsessions are existed while obsessions may exist without the existence of the compulsive acts.

Obsessive-compulsive disorder is one of the mental disorders that fall under the category of anxiety disorders according to the fourth statistical diagnostic manual of psychiatry. It includes images, ideas and mental motives that appear to the individual frequently against his will. The terms obsession and compulsion refer to two different phenomena The compulsive actions are mental or physical actions and movements performed by the individual to reduce the tension caused by the obsessions (Rimawi, Rimawi, 2014).

### **Statement of the Problem:**

Orphan students in southern Al-Mazar district suffer many negative feelings that hinder their personal , social and emotional development, and these feelings include obsessive thoughts and ideas and compulsive actions – which became highly prevalent – that highly take over individual and restrict his/her daily activity, responsibilities , duties , and personal, social and professional roles.

The lack for psychological studies on familial support and its relationship with possessive compulsive disorder among orphan students in the Jordanian environment for the researcher best knowledge was the motive to address this topic in particular.

The problem of the study is represented by the following questions :

- 1- What is the level of familial support among orphan students at the higher basic stage in southern Al-Mazar district?
- 2- What is the level of obsessive compulsive disorder among orphan students at the higher basic stage in southern Al-Mazar district?
- 3- Are there significant statistical differences on the scale of familial support among orphan students at the higher basic stage that are attributed to the variable of gender in southern Al-Mazar district?
- 4- Is there a significant statistical relationship between familial support level and obsessive compulsive disorder level among orphan students at the higher basic stage in southern Al-Mazar district ?

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### **Significance of the Study:**

The importance of the study is lies in that it uncover the level of familial support and its relationship with obsessive compulsive disorder among orphan studentsat the higher basic stage in southern Al-Mazar districtas well as highlighting an important phenomenon related to an influential developmental stage and important age category which is the category of orphan students at the higher basic stage in southern Al-Mazar district , in addition, the importance of the study also lies in that it adds more knowledge to enrich the Arabian and Jordanian literature and offers several tools for measurement related to the variables and it is expected that psychologists and sociologists to benefit of its results.

### **Terms of the Study:**

The terms of the study were conceptually and procedurally defined as follows:

**\* Familial Support :** according to the American Psychological Association (2015), familial support is offering periodic services for families of handicapped individuals or individuals with chronic diseases in order to reinforce their ability to look after the individual or to mitigate stress related to familial life, examples on this include the daily and night care , training care providers, behavioral consultant, taking or transferring to appointments and brotherhood services such as consultation.

**Procedurally,** familial support is represented by the score obtained by participant on the items of the familial support scale in this study.

\* **Obsessive-Compulsive Disorder** : according to the psychological concepts' dictionary of the American Psychological Association (2015), it is a disorder that is characterized by repeated and overlapping thoughts (obsessions) that stimulate the performance of hostile or compulsive rituals. Obsessions involve pollution, dirt, or disease.

**Procedurally**, Obsessive-Compulsive Disorder is the score obtained by participant on the Obsessive-Compulsive Disorder scale developed for the purposes of this study.

\* **Higher Basic Stage** : grades from 7<sup>th</sup> to 10<sup>th</sup>.

### **Limitations of the Study:**

**The results of this study are limited to :**

- **Spatial Limits** : it was limited to orphan students at the higher basic stage in southern Al-Mazar district.
- **Time Limits** : the study was applied during the first semester of the academic year 2019/2020 .
- **Objective Limits** : the study was limited to orphan students at the higher basic stage and its results were determined by the extent of validity and reliability of its tools and results were generalized on the population from which the sample was derived .
- **Human Limits**: orphan students at the higher basic stage in southern Al-Mazar district.

### **Early Studies**

In Coleman's (2018) study, which aimed to analyze pertinent views on family support based on the views of elderly African-American seniors with



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HIV / AIDS, the results indicated four themes affect the familial support that should be emphasized , these are: family separation, little communication, maternal support, and the formation of new relationships. This study also confirmed that more depth is needed in family work and support.

The study of Schnettler et al (2018) aimed to identify the correlation between family support and satisfaction about life related to nutrition and familial life. Results of the study indicated the need for improving the familial support , practical life and balance between mothers in order to reinforce adolescents' satisfaction about the various life aspects in double families.

Chacon et al ( 2018) conducted a study to identify the symptoms of Obsessive-compulsive disorder among children whom one of their first degree relatives has a OCD and they were diagnosed. Results indicated that three children (45% ) of the OCD and suffered higher rates of compulsive behavior as they came from families with low socioeconomic status. In addition, 26 children (39.4%) were diagnosed with OCD and finally, results indicated a genetic correlation with children who were assessed.

In a study conducted by Katapodi et al ( 2017) to predict the long-term effect of family bonding and support for young survivors of breast cancer from biological relatives. Data were collected from a random sample of breast cancer survivors and their first or second degree relatives. Models of interdependence between the active partner has explored , stimuli, the interrelationship between surviving patients and the level of family support provided by relatives . The study sample consisted of 310 survivors of breast cancer and 431 relatives of the first and second degree. Statistical analyzes

were conducted using SPSS and MPlus to analyze the characteristics of the sample, resources were described by means, and standard deviations. Results indicated that familial support had a great effect at the familial bonding , self-efficacy , reducing depression and receiving care.

Hye-Jin( 2017) conducted a study that aimed to identify the effect of self-sufficiency and familial support in the relationship between patient's awareness and the healthy behaviors among tuberculosis patients . Results indicated a positive correlation between the self-sufficiency and familial support and to improve the healthy behaviors among the TB patients, it is necessary to develop the management plan that focuses not only on patients' awareness , but also on self-sufficiency and the role of familial support.

The study of Pedly et al. (2017) aimed to use qualitative methods to explore the perspectives of families with a member suffering of Obsessive-compulsive disorder . Results indicated that Obsessive-compulsive disorder is resulted from nonadjustable internal factors , in particular, the personal characteristics. Results also indicated an ambiguity regarding the limits between Obsessive-compulsive disorder and the personal characteristics and health and mental problems of the person suffering Obsessive-compulsive disorder and these patients represent a source of depression for their families, and it was also indicated that this disorder is curable.

Skapinakis, et al. (2016) conducted a study that aimed to compare the whole available treatments at once and they used all the direct and indirect data related to Obsessive-compulsive disorder represented by medical and psychological interventions to manage this disorder among adults. Results indicated that psychological treatment interventions were more efficient than medical ones but there were dangerous restrictions

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regarding that most psychological treatment experiences included patients who had stable doses of anti-depression medicines.

H-Tang et al. ( 2016) Investigated the relationship between familial support, love attitude and high school students' welfare . The results of the study indicated that the level of familial support , love attitude and high school students' welfare was high in addition the explanatory power of the four demographic variables ( gender, class, family structure and socioeconomic status) was 2.40% in favor of the welfare variable.

Early studies were utilized to determine both concepts of familial support and Obsessive-compulsive disorder in addition to determining the most important references and theories addressed here.

### **Comment on Early Studies:**

It can be noted that the mentioned above early studies have addressed the level of familial support within various contexts with various variables while this study came to identify the relationship between the level of familial support and Obsessive-compulsive disorder among the category of orphan students at the higher basic stage and this what distinguishes this study from other studies as it is the first one applied on this category.

### **Methodology:**

To achieve the objectives of this study, the descriptive relational approach was adopted and this approach is based on collecting data and studying the phenomenon as it is in realty and identifying the relationships between two or more variables to determine the correlations among them and digitally expressing this correlation .

### **Population and Sample of the Study:**

The population of the study included all orphan students at the high basic stage in the schools of Southern Almazar Directorate of Education during the first semester of the academic year 2019/2010 from which a sample of 80 male and female orphan students were randomly selected.

### **Tools of the Study:**

Data collection tools for this study were represented by two main scales as follows:

#### **1- Obsessive-Compulsive Disorder Scale:**

The scale of obsessive-compulsive disorder was developed based on the study of Albanani (2011) as well as the early studies and the theoretical literature related to the topic of the study. The scale was consisted of 32 items on which participants responded with yes/no and received a score on each item responded at the same direction in line with the estimation key for the following scores :

- Items upon which participants received 1 score when responding with " Yes " :

32, 30, 29, 27, 25, 24, 23, 21, 20, 19, 18, 17, 16, 15, 14, 13, 12, 11, 9, 8, 7, 6, 5, 4, 3, 2, 1.( 27 items ).

- Items upon which participants received 1 score when responding with " No " :

31, 28, 26, 22, 10 .( 5 items ).

Mean of the total scores obtained by participants was between 10.58 and 21.90. And the scale included a group of obsessive-compulsive disorder

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dimensions as follows: 1- A general factor of obsessive-compulsive disorder which measured by the following items : 8, 9, 10, 14, 16, 18, 20, 23, 26, 28, 30, 31, 32.

2- Order, accuracy and organization which measured by the items: 3, 5, 13, 15, 19.

3- Frequency and counting which measured by the items: 4, 16, 24, 27, 29.

4- Review which measured by the items: 2, 3, 6, 11, 21.

5- Acquiring compulsive thoughts which measured by the items: 12, 27, 32.

6- Rumination which measured by the items: 7, 14, 18, 25, 26.

7- Slow which measured by the items: 1, 2, 22.

8- Scrutinizing which measured by the items : 15, 17, 19

### **Validity and Reliability of the Tool:**

#### **Validity:**

The validity of the scale was verified and calculated using the internal consistency method where the values of correlations were calculated between each item and the total score of the scale as shown in table (1).

**Table (1)Correlations between each item and the total score of the scale of Obsessive-compulsive Disorder**

Item No	Total score	Total score	Item No	Item No	Total score
1	0.27**	12	0.26**	23	0.61**
2	0.41**	13	0.34**	24	0.45**
3	0.38**	14	0.52**	25	0.37**
4	0.40**	15	0.46**	26	0.30**
5	0.27**	16	0.52**	27	0.35**
6	0.37**	17	0.450**	28	0.49**
7	0.432**	18	0.34**	29	0.52**
8	0.58**	19	0.52**	30	0.37**
9	0.47**	20	0.58**	31	0.35**
10	0.25**	21	0.50**	32	0.37**
11	0.37**	22	0.20**		

Table (1) indicates that all correlation values were statistically significant at (0.01) which in turn indicates the high level of the scale's consistency and validity.

### **Reliability:**

The reliability of the scale was verified by applying it on a pilot sample of 20 from the population of the study and outside its original sample and CRONBACH alpha reached (0.90) and was calculated using the half split method which reached (0.88) and this indicates a high reliability of the scale and hence it was accepted for the purposes of this study.

### **2- The Familial Support Scale:**

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The 10-items familial support scale of Soushi(2017) was used and this scale has 7 alternatives from 1 to 7 .

**Scoring :**the 10 items of the scale indicated the individual's needs and satisfaction about the forms of support he/she receives from treatment , and here participants were asked to response the items of the scale based on what expresses his/her satisfaction with the highest score of support received by the participant=70 and the lowest one = 10 with a hypothetical mean of 50 scores.

### **Validity:**

The validity of the scale was verified and calculated using the internal consistency method where the values of correlations between the item and the total score of the scale were calculated and the value was (0.70) which indicates a high validity of the scale.

### **Reliability:**

Reliability of the scale was verified through the half split method( odds and evens ) and after computing the data , the correlation between the odd and even items and the results indicated that the Pearson correlation was (0.56) and was corrected by Spearman Brown correlation and reached a value of (0.71) which is significant at  $\alpha \leq 0.05$  and this value indicates accepted reliability for the scale.

### **Results:**

**Results of the first research question: What is the level of familial support among orphan students at the higher basic stage in southern Al-Mazar district?**

To answer this question, means and standard deviations of participants' scores on the the familial scale items were calculated as shown in table (2).

**Table (2) :Order of the familial support scale items based on Means and SDs**

No	Item	Mean	SD	Rank	Sig
1	Are you satisfied with your family treatment in general	5.4	0.741	1	High
3	Are you satisfied with what is offered to you at home ( lighting, heating and the sleeping place .	5.21	0.698	2	High
2	Are you satisfied with the care and support offered to you by family.	4.5	1.23	3	Medium
4	Do you make all the house daily works .	4.48	0.95	4	Medium
5	Are you satisfied with the toys offered to you by the family	4.28	0.73	5	Medium
8	Are you satisfied with the presents and rewards offered to you by the family	4.23	0.844	6	Medium
10	Are you satisfied with nutrition and clothes offered to you by the family	4.18	1.23	7	Medium
7	Are you satisfied with the amount of acceptance you	4.16	1.11	8	Medium



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	receive from the family				
6	Are you satisfied with the amount of love, warmth and feelings from the family	4.1	0.981	9	Medium
9	Are you satisfied with your pocket money from the family	4.0	0.954	10	Medium
Total		4.46	0.47	---	Medium

Table (2) indicates that the means of the familial support scale ranged between 4.00 and 5.4 with item 1 stating " Are you satisfied with your family treatment in general "as the highest one reaching a mean of 5.4 at a high level and item 9 stating " Are you satisfied with your pocket money from the family" with a mean of 4.00 at medium level . The total mean score of the scale was 4.46 at a medium level.

**Results of the second research question : What is the level of obsessive compulsive disorder among orphan students at the higher basic stage in southern Al-Mazar district?**

To answer this question, means and standard deviations and percentages of participants' scores on the dimensions of the obsessive-compulsive disorder scale and the scale's total score were calculated as shown in table (3).

**Table (3)**

**Order of the obsessive-compulsive disorder scale based on percentages**

No	Dimensions	Items No	Mean	SD	%	Rank
8	Scrutinizing	3	2.74	0.416	91%	1
1	General factor for obsessive-compulsive disorder	13	10.1	0.98	78%	2
5	Acquiring compulsive thoughts	3	1.97	0.774	66%	3
4	Reviewing	5	3.21	0.927	64%	4
2	Order , accuracy and organization	5	3.1	1.31	62%	5
6	Rumination	5	3.1	1.19	62%	6
3	Frequency and counting	5	2.77	0.881	55%	7
7	Slow	3	1.33	0.513	44%	8
		32	22.5	0.762	70%	—

Table (3) indicates that the means of percentages of the participants' responses on the dimensions of the obsessive-compulsive disorder scale ranged from 1.33 to 10.1 with the dimension of Scrutinizing as the highest reaching a percentage of 91% followed by the dimension of " General factor for obsessive-compulsive disorder " as second with a percentage of 78% and last came the dimension of slow with a percentage of 44%.

**Results related to the third research question : Are there significant statistical differences on the scale of familial support among orphan students at the higher basic stage that are attributed to the variable of gender in southern Al-Mazar district?**

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To answer this question, means and standard of participants' total scores on the familial support scale based on the variable of gender and then the t test for independent samples was performed to determine the differences between the means based on gender as shown in table (4).

**Table (4)**

**T test for independent variables to determine the differences between the means of the familial support scale's total score based on the variable of gender**

<b>Gender</b>	<b>No</b>	<b>Mean</b>	<b>SD</b>	<b>T value</b>	<b>Sig</b>
<b>Male</b>	<b>33</b>	<b>4.23</b>	<b>0.984</b>	<b>2.11</b>	<b>*0.03</b>
<b>Female</b>	<b>47</b>	<b>5.1</b>	<b>0629</b>		

Table (4) indicates statistically significant differences at  $\alpha \leq 0.05$  of the familial support scale's total score for participants' responses based on the variable of gender where the t value reached 2.11 with a significance 0.03 and these differences were in favor of female participants with a mean of 5.1 compared to male participants with a mean was 4.23.

**Results of the fourth research question: Is there a significant statistical relationship between familial support level and obsessive compulsive disorder level among orphan students at the higher basic stage in southern Al-Mazar district ?**

To answer this question, the Pearson correlation was used to determine the relationship between the familial support level and the

obsessive-compulsive disorder level among orphan students at the schools of SouthernAlmazar directorate of education as shown in table (5).

**Table (5)**

**the Pearson correlation was used to determine the relationship between the familial support level and the obsessive-compulsive disorder level among orphan students at the schools of Southern Almazar directorate of education**

		Obsessive-compulsive disorder level
Familial support level	Pearson correlation	-0.321
	Sig	*0.04

Table (5) indicates an adverse statistically relationship between the familial support level and the obsessive-compulsive disorder level among participants where the Pearson correlation value reached -0.321 with a significance of 0.04.

### **Discussion and Recommendations :**

The study revealed the responses on its questions and following is the discussion of these results and interpreting them in light of early literature, and also, in light of these results, a group of recommendations are suggested.

**Discussion of the first research question's results: " Results of the first research question: What is the level of familial support among orphan students at the higher basic stage in southern Al-Mazar district?**

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The results indicated that the means of the familial support scale ranged between 4.00 and 5.4 with item 1 stating " Are you satisfied with your family treatment in general "as the highest one reaching a mean of 5.4 at a high level and item 9 stating " Are you satisfied with your pocket money from the family" with a mean of 4.00 at medium level . The total mean score of the scale was 4.46 at a medium level. This result is attributed to that orphan students experience a status of breakdown and the lack for bonding due to the loss of one of the parents , in addition, they suffer a lack for psychological tranquility due to the lack for a real familial support.

This result is in agreement with the study of Schnettler et al (2018) which investigated the relationship between familial support and satisfaction about nutrition and familial life and indicated the need for improving the familial life, but disagrees with the study of Katapodi et al (2017) and that of Hong-Tang et al (2016) which indicated high familial support.

### **Discussion of the second research question's results : "What is the level of obsessive compulsive disorder among orphan students at the higher basic stage in southern Al-Mazar district?"**

The means of percentages of the participants' responses on the dimensions of the obsessive-compulsive disorder scale ranged from 1.33 to 10.1 with the dimension of Scrutinizing as the highest reaching a percentage of 91% followed by the dimension of " General factor for obsessive-compulsive disorder " as second with a percentage of 78% and last came the dimension of slow with a percentage of 44%. This result is attributed to the psychological status experienced by these students due to the fears

controlling them and anxiety about the future which generates frequent behaviors among them in their daily life.

This result disagrees with that of Kim et al about the decreased obsessive-compulsive disorder among patients , and here the researcher stresses the need for offering support to orphan students , talking to them ,listening to what they say, and not to be surprised by the queer ideas they give , therefore, it is necessary to vary the activities for them which leads them to lose focus on obsessive.

**Discussion of the third research question's results : "Are there significant statistical differences on the scale of familial support among orphan students at the higher basic stage that are attributed to the variable of gender in southern Al-Mazar district?"**

The t test for independent samples indicated statistically significant differences at  $\alpha \leq 0.05$  of the familial support scale's total score for participants' responses based on the variable of gender where the t value reached 2.11 with a significance 0.03 and these differences were in favor of female participants with a mean of 5.1 compared to male participants with a mean was 4.23.This result is attributed to the weakness of females by nature and need for continuous support , in addition, Islam calls to take care of females and concerning about them.

**Discussion of the fourth research question's results:" Is there a significant statistical relationship between familial support level and obsessive compulsive disorder level among orphan students at the higher basic stage in southern Al-Mazar district ? "**

An adverse statistically relationship between the familial support level and the obsessive-compulsive disorder level was indicated among

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participants where the Pearson correlation value reached -0.321 with a significance of 0.04. This result is attributed to that orphan students lack for stability in their life and experience continuous anxiety and fears of present and future due to the instability in their lives.

### **Recommendations:**

In light of the results of the study , the following recommendations are suggested:

- 1- Offering a program that provides with continuous familial support to male and female orphan students.
- 2- Conducting training course that clarify the mechanism of dealing with obsessive-compulsive disorder among orphan students.
- 3- Providing with support to orphan students , talking to them, listening to what they say and not to be surprised by the queer ideas they give .
- 4- Variation of the activities for them which leads them to lose focus on obsessive.

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