

## IMPACT OF PSYCHOLOGICAL CAPITAL ON HAPPINESS AND POST TRUAMATIC GROWTH AMONG ORPHANS

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DOI: <https://doi.org/10.5281/zenodo.16932163>

### Keywords

Psychological strength, happiness, post traumatic growth, orphans

### Article History

Received on 23 May 2025

Accepted on 28 July 2025

Published on 23 August 2025

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### Abstract

The aim of the study is to investigate the influence of psychological strength on Happiness and post traumatic growth among orphans. The study employed three instruments in Urdu languages: Post-Traumatic Growth (SF) by Tedeschi and Calhoun (2004), the constructs of Happiness by Sonja Lyubomirsky & Heidi S. Lepper (1997), and Psychological Capital (Mohsin Atta)'s, to a sample of 200 orphans. Results indicated that Psychological Capital (PC) and Happiness as well as Post Traumatic Growth (PTG) are positively correlated, while Happiness and Post-Traumatic Growth did not have a relationship. The context of parent's living status did not show no significant contribution to either PC or Happiness. Regression analysis shows that psychological strengths was the major predictor of happiness. While post traumatic growth is not major predictor of psychological strengths.

### INTRODUCTION

Becoming a child or an adult without his parents from an orphanage could be one of those critical times about a child, dictating whether he live happy or miserable. Arrangements resulted in depth deprivation, emotional wounding, and absence and lost lives, as there are many reasons for children being orphaned death, abandonment, poverty, or disruption of the family. An orphanage life may provide most basic needs; shelter, food, or funds. But these children lack that love, attention, and assurance, which a child has needed for healthy growth. Numerous studies have shown that orphans are at higher risks for various psychological issues, which include stress, anxiety, trauma, and low self-esteem, weaknesses in education (Nasir, 2024) and health, and social adjustment.

Psychological research has recently come up, with the fact that despite all such potentially adverse influences

there are children who have all these difficulties, and a large number of this will have some of the strengths inside by nurturing them such that adversity is likely to help them recover and may even see them growing. The two important ones here are psychological strength and Post-Traumatic Growth (PTG).

Psychological strength includes that positive psychological capital such a desire, adaptability, and self-confidence, which can be developed over time. In the case of orphan children, these are concepts that hold real meaning; they are not just phrases but lifelines. Hope keeps their mind alive to a better future; resilience is what brings them back when they are down; optimism provides them with a positive outlook, and self-confidence builds confidence that they can shape their lives. Some very concrete, powerful influences can make a difference in how children at orphanages deal with challenges, do in

school, and relate with other people: Psychological strength strengthening.

PTG describes positive changes within the one influenced the traumatic circumstances. In addition to the scars left behind, PTG recognizes that new strengths, deeper appreciation for life, better relationships, and even greater amounts of inner courage can develop from struggles. PTG with orphan children would help tell the story less about being victimized and more about being resilient and possible.

Some other key dimensions in child development include happiness and well-being, alongside Psychological strength and PTG. Happiness is not simply feeling good during the moment; its contributes greatly to the growth of resilience, healthy coping strategies, and a sound psychological disposition over time. By creating an atmosphere that is safe, nurturing, and full of growth and bonding opportunities for children, happiness nurturers develop a path toward the flourishing of enhanced development.

The present study embraces a group of orphanage kids aged 6-19 years, exploring the role of Psychological strength, PTG, and happiness in the formation of their psychological well-being. This investigative effort will help in providing some guidance and practical insights for caregivers, educators, and mental health professionals in appreciating not only the adversities faced by these children but also the strengths that could be developed. Supporting orphanage children requires more than just providing for their basic needs; rather, it is about promoting the hope, resilience, optimism, and joy that can transform their very existence from surviving to thriving.

### **Background of the study**

#### **Theoretical Background**

**Positive Psychology Theory** (Seligman, 1998) Positive psychology is about strength and virtue. It is not about the absence of mental disorders. Instead, it's about means of building positive resources like optimism, desire, and adaptability the ingredients critical to Psychological Capital (PC) and the very foundation of well-being. Positive Psychology lays down space for the construction of PC with self-efficacy, hope, and resilience. Happiness is a core objective of Positive Psychology, referring to any event where an individual

experiences emotional well-being and contentment. It is the theory of Positive Psychology that trauma leads to growth and transformation, in accordance with the PTG concept as one of the outcomes of adversity.

**Broaden and Build Theory** of Positive Emotions, according to Fredrickson (2001): This theory elucidates how those states called positive affect broaden thought action repertoires, increase creativity, resiliency, and social bonding. In the long run, these broadened views generate personal enduring resources. Positive emotions can be resilience and hope, the two components of PC. The positive emotion happiness itself opens possibilities in terms of coping with challenges. Positive emotions create avenues by which trauma can be processed healthily, thus laying the groundwork for PTG. For example, a sense of gratitude can emerge when seeing meaning in hardship.

**Masten Resilience Theory** (2001) Resilience theory focuses on how individuals rebound from adversity, maintain or regain their psychological equilibrium. Resilience is not so much to do with survival as it is with adaptation and growing all through. PC directly incorporates resilience as one of its four pillars. Resilience enables individuals to recover from setbacks and to use challenges as opportunities for self-growth. Resilient people typically report higher levels of happiness due to their ability to sustain emotional steadiness. On PTG, an emerging area on resilience, people not only heal but become stronger, taking in emotional and personal growth.

The theory regarding post-traumatic growth by Tedeschi & Calhoun (1996) mentions how people experience significant changes in positive ways after facing trauma. Improvements in relationships or inner strength, a deeper appreciation for life, and spiritual growth are the areas where such positive changes may occur. Components of PC include optimism and resilience, both of which facilitate PTG by striking the right chord of hope and meaning configured after trauma. Naturally, PTG correlates with improved life satisfaction and emotional well-being that upping the happiness quotient. This theory underpins the phenomena identified with PTG, explaining the mechanism through which such growth occurs via cognitive processing of trauma.

**Problem Statement**

In spite of the essential requirement of psychological health in orphans, especially in place lacking resource there is an enormous gap in research focusing on the interaction between psychological strength (Nasir, 2025), happiness, and post-traumatic growth (PTG) among this vulnerable group in Pakistan. Orphans often go through severe trauma, loss, and instability, which brings about increased risks of anxiety, depression, and deviant behavior. Though Psychological strength is well established as an important tool for facing challenges, achieving good results and PTG represents a mechanism for positive psychological post-traumatic growth, the dynamics of how each relates to happiness among Pakistan's institutionalized orphans are poorly explored. Current literature tends to emphasize negative effects or be geographically specific, neglecting the characteristic cultural, socioeconomic, and resource limited settings found across Pakistan's orphanages. As a result, there is little empirical support to inform the creation of targeted, culturally adapted interventions that can successfully utilize psychological strength to promote happiness and PTG, ultimately improving the overall mental health and life satisfaction of these youth. This distance prevents caregivers, policymakers, and mental health practitioners from putting in place complete support systems that go beyond the narrow focus on deficits to actually supporting resilience and positive psychological growth among orphaned youth.

**Research Gap**

There is a current body of work that has a number of significant gaps in relation to the psychological wellbeing of orphans, with a specific reference to Pakistani orphanages. First, there is a glaring lack of context-based knowledge about how psychological strength, happiness, and Post-Traumatic Growth (PTG) interact within these specific cultural, socio-economic, and frequently resource limited settings. The mostly in research on orphans has previously been conducted in Western or African environments, and there is consequently a large knowledge gap for South Asian environments such as Pakistan. Secondly, the interaction between happiness and PTG in low-resource environments is not well understood; the study presented here, for example, did not find

any correlation between the two, and this implies that the positive change that results from PTG does not necessarily lead to greater happiness in these difficult environments. This divergence merits further study to elicit the mediating factors involved. Third, a major research gap is the absence of longitudinal assessment of the impact of institutional care on psychological, educational, and social outcomes. Existing research, such as this study, is largely cross-sectional, and these constraints the observation of long-term development and causal interactions between psychological strength, happiness, and PTG across time. Fourth, in spite of established gender differences in coping style and needs, little research specifically investigates how male and female orphans experience and cope with psychological strength, happiness, and PTG in orphanages. Finally, the role of particular environmental and confounding variables, like care quality, peer connections, and institutional assets, on these psychological outcomes remains poorly examined. In addition, excluding orphans who are physically or mentally challenged from these types of studies leaves a further gap, restricting understanding of the psychological well-being throughout the whole range of the orphan population. Closing these gaps is essential to inform better, targeted, and culturally acceptable interventions to truly enhance orphaned children's mental health and satisfaction with life.

**Literature Review**

It has been consistently established by research that orphans have a comparatively diminished quality of life and experience lesser life satisfaction than non-orphans (Hailegiorgis et al., 2018). The existing literature has dealt with the influences of some specific adverse life circumstances such as HIV infection, abuse, and psychological distress (Nichols et al., 2014; Operario et al., 2011; Cluver et al., 2012; Hermenau et al., 2015). In China, studies on orphan populations remain few and generally focus on behavioral or psychological maladjustments of these orphans (Guan & Wang, 2011; Ling et al., 2020). Although some studies have empirical (Wang et al., 2020; Wang, Zhang, et al., 2009) and intervention specific findings (Wang et al., 2019) under the frameworks of positive psychology and orphan mental well-being, little has been conducted on the life satisfaction of orphans from ethnic minority groups-

such as Tibetan children. It is important to fill this gap since cultural background may determine how children would cope and their well-being.

Resilience refers to an ability that helps one to adjust in the face of stress or trauma (Windle, 2011). It plays an important role in enhancing life satisfaction (Abolghasemi & Varaniyab, 2010; Liu et al., 2012). Resilience, for youth who are socioeconomically disadvantaged, positively predicts their life appraisal in the face of adversity (Wu et al., 2021). Ledesma (2014) argued that resilience mitigated the impact of threats on the life of a person by exerting intra and interpersonal resources thereby achieving less negative outcomes. For orphans, resilience serves to ameliorate and buffer against stress while enabling them to retain emotional stability and positive evaluations of life despite adversities (Masten, 2001).

### **Psychological Capital and Happiness**

Psychological strength is regarded as a constellation of self-efficacy, hope, optimism, and resilience, which became a very important avenue for securing subjective well-being (Avey, Luthans, & Jensen, 2009). Orphans that have high Psychological strength are shown to be happier and with high life satisfaction (Mutiarah Mirah Yunita, 2022). Each of the subdomains uniquely contributes to:

Hope encourages children to make plans and picture a world brighter in future they live with a struggle less hopelessness (Snyder et al., 2002).

According to findings by the research of Luthans, Stone, and Davis, 2007, confidence is positively linked to positive expectancies and is found to negatively influence the levels of depressive symptoms. Such quality fosters adaptive coping, lowers stress, and sustains an individual, emotionally stable (Masten, 2001).

Self-efficacy facilitates orphans to feel a sense of control as well as taking responsibility in education, relationships, and personal development (Bandura, 1997; Maddux, 2009).

It is Meta analytically demonstrated that Psychological strength interacts synergistically with emotional well-being, especially among vulnerable groups such as orphans (Avey et al., 2011). Psychological strength interventions like resilience training and goal setting were found to increase subjective happiness and life

satisfaction in underprivileged youth populations (Lopez et al., 2009; Werner & Smith, 1992).

In addition to coping and survival, most orphans exhibit Post-Traumatic Growth (PTG), which are positive psychological changes experienced after trauma (Tedeschi & Calhoun, 2004). PTG is exhibited in increased appreciation of life, more resilient relationships, strength, and a new perspective on life. Studies have shown that orphan children tend to create meaning in common experiences, establish intimate peer relationships, and build resilience in the face of loss (Zeanah et al., 2005). Support from institutions and communities in the form of caregiving and education programs aids significantly in enabling PTG (Phakathi & Van Wyk, 2020).

PTG is also influenced by cultural settings. Research conducted in South Asia indicates that social welfare systems and collective family systems assist orphans in re conceptualizing trauma and establishing growth focused perspectives (Kamran & Malik, 2017). This calls for culturally responsive models in supporting PTG in orphan care.

Psychological strength and PTG are intertwined very closely, whereby Psychological strength delivers the psychological resources of hope, resilience, optimism, and self-efficacy that facilitate growth from trauma (Masten, 2001; Luthans et al., 2007). PTG, on the other hand, produces renewed meaning, gratitude, and more resilient relationships, which feed directly into greater happiness and life satisfaction (Joseph & Linley, 2004; Calhoun & Tedeschi, 1998).

For orphans, joy is not only a product of PTG but also a state that promotes development and resilience. Children with greater PTG reports tend to have more effective emotional regulation, self-esteem, and social connectedness all crucial elements of well-being (Tedeschi & Calhoun, 2004; Lopez et al., 2009). This indicates that interventions that seek to build Psychological strength might not only safeguard against misery but also initiate PTG, thus enhancing global happiness and psychological health.

### **Research Objectives**

1. To investigate the correlation between Psychological strength on happiness and post traumatic growth among orphans.
2. To see the population attributes differences (age, gender, education, duration

of living in orphanage, parents living status, siblings living in same orphanage) with pointer to study types.

### Hypotheses

1. Psychological strength is supportive indicator of post traumatic growth among orphans.
2. Psychological strength deliver as a positive predictor of happiness among orphans.
3. There is a positive relationship between post traumatic growth and happiness among orphans.

### Significant of the study

The importance of this research, "Impact of Psychological Capital on Happiness and Post Traumatic Growth among Orphans," is twofold, largely attributed to its attention on a very vulnerable group of people. Orphans, who are regularly exposed to extreme trauma, loss, abandonment, and social isolation, are adversely affected both mentally and in terms of their overall well-being. This study directly answers these key concerns by examining the contribution of Psychological strength which include of desire, optimism, resilience, and self-confidence, as a crucial internal resource for such children. By showing the positive relationship between Psychological strength and happiness, and its significance in post-traumatic growth, the research offers vital insights to construct evidence based interventions. These interventions may involve resilience training, goal orientation exercises, and social bonding activities, which are all aimed at increasing emotional well-being and preventing long term trauma effects. In addition, the outcomes provide tangible advice on training caregivers and educators so that they can build positive settings to foster optimism and self-efficacy in orphanages. At a wider level, the research highlights the need for Pakistan's public policy to be reformed on a priority basis to enhance orphanage facilities, educational development, and psychological counseling services, promoting comprehensive models of care that give precedence to Psychological strength development. By adding to the scarce literature on South Asia's orphans and identifying the promise of post-traumatic

growth for this group, the study not only contributes to the scholarly base but sets the stage for subsequent culturally responsive, longitudinal work. Ultimately, the purpose of the present work is to take empirically derived results and transfer them into useful interventions that create more resilient, happier, and richer lives for the orphaned children.

### Research Methodology

#### Research design

Cross sectional correlation research design is used to examine relationships among the variables using survey method

#### Sample

Sample of orphans (N=200) is drawn by using purposive sampling method from Orphan homes of Rawalpindi and Islamabad. Sample's age is between 6 to 19 years (M= 12.15 SD =3.41).

#### Data Collection Tool

##### 1: Psychological Capital

Psychological capital was measured with the Anila's Psychological Capital Scale (Atta & Afzal, 2018). This 34-item scale measures four subscales: resilience (items 1-13), self-efficacy (items 14-20), hope (items 21-28), and optimism (items 29-34). The responses are recorded on a 4-point Likert. The higher the score, the more psychological capital, and the lower the score, the lower the resilience, desire, self-confidence, and optimism. Internal consistencies reported are acceptable with Cronbach's alphas being .87 for the composite scale, .84 for resilience, .74 for self-efficacy, .67 for hope, and .68 for optimism (Atta & Afzal, 2018). The composite Psychological Capital score is utilized in this current study.

##### Post Traumatic Growth

Post-traumatic growth is assessed with the Posttraumatic Growth Inventory Short Form (PTGI-SF) (Tedeschi & Calhoun, 2011). The PTGI-SF is a 10-item self-report tool intended to capture positive growth after explore to traumatic events. Items are scored on a 6-point Likert scale. Scores reflect higher perceived post-traumatic growth. The PTGI-SF has been found to be reliable in earlier studies, with a Cronbach's alpha of .86 (Tedeschi & Calhoun, 2011).

**Happiness**

Subjective happiness is measured with the Subjective Happiness Scale (SHS) (Lyubomirsky & Lepper, 1999). This 4 item measure assesses overall subjective happiness on a 7-point Likert scale, with increased values indicating increased happiness. Item 4 is reversed coding. The SHS has evidenced high internal consistency, with Cronbach's alpha equal to .88 (Lyubomirsky & Lepper, 1999).

**Ethical consideration**

The moral integrity of this research, "Impact of Psychological Capital on Happiness and Post Traumatic Growth among Orphans," is above all else,

especially considering the vulnerable status of its subjects. Such considerations are whether or not to secure informed consent from both authorities and the children themselves, their self-initiated with the right to withdraw without discipline, and keeping strictly confidential all data gathered. The research is structured to avoid causing any possible physical, social, or psychological harm and participants are thoroughly informed regarding the nature of the study to ensure openness. Overall, such steps highlighted a dedication to ensuring the safety and rights of the orphan children while seeking useful insights into their psychological well-being

**Summary of Statistics**

**Table 1**

**Demographic Characteristics of the Sample (N = 200)**

Sr. No.	Variables	Categories	f (%)	M(SD)
1	Age	6-19 years		12.15(3.41)
2	Education	3-6 class	91(45.3)	
		6-10 class	109(54.2)	
3	Gender	Male	89(44.5)	
		Female	111(55.5)	
4	Duration of living in orphanage	Don't know	36(18.0)	
		1-3 year	4(2.0)	
		3-5 year	76(38.0)	
		More than 5	84(42.0)	
5	Parent Living status	Only Mother Alive	39(19.5)	
		only father Alive	5(2.5)	
		Both expired	97(48.5)	
		Both Alive	59(29.25)	
6	Sibling living in same orphanage	Yes	65(32.5)	
		No	135(67.5)	

Table 1 demonstrates the demographic characteristics of the sample of study. The sample included 200 orphan children with the mean age of 12.15. The education level of the participant was distributed as 45.3 percent in grade 3 to 6 class, 54.2 percent in grade 6 to 10. The gender discrimination showed 55.5 percent female, and 44.5 percent male. Regarding the duration of living in orphanage, 18.0 percent did not know how long they had been there, 2.0 percent had been living in the orphanage for 1-3 year, 38.0 percent for 3-5 years, 42.0 percent for more than 5 years.

Parents living status revealed that 19.5 percent had only their mother alive, 2.5 percent had only their father alive, 48.5 percent reported that both parents were not alive, 29.25 percent had both parents alive. Regarding sibling living in the same orphanage 32.5 percent of participant reported living with their siblings, while 67.5 percent did not

**Reliability Estimates of Scales.** Alpha reliability coefficients were calculated for Psychological Capital, Happiness, and Posttraumatic Growth. Descriptive statistics such as mean, standard deviation, range, and skewness and Kurtosis were also obtained for the study variables.

**Table 2**  
Means, Standard Deviations and Alpha Reliabilities for all the Study Variables (N = 200)

Scales	N	M	SD	$\alpha$	Range		Skewness	Kurtosis
					Potential	Actual		
PC	200	46.63	10.58	.75	4-136	70-124	.22	.10
Happiness	200	20.71	5.63	.75	4-28	5-28	-1.1	.52
PTG	200	29.78	7.10	.62	6-60	9-46	.12	-.10

Noted: PC= Psychological capital, Happiness, Post traumatic growth (PTG).

The tables 2 provide overview of three main variables. The (PC) Psychological capital, Happiness, post traumatic growth (PTG). The reliability of Psychological capital (PC) is .75, Happiness is .75 and post traumatic growth has an reliability of .62. All scales showed acceptable reliability, and the data was normally distributed according to skewness and Kurtosis value.

**Table 3**  
Correlations between IV and DV of the Study

Variables	1	2	3
1. PC	1	.16*	.40**
2. Happiness		1	.10
3. PTG			1

\* $p < .05$ . \*\* $p < .01$

Noted: PTG= Post traumatic growth, Happiness, PC= Psychological capital

The table 3 demonstrates relationship between independent and dependent variables. The results show that Psychological capital (PC) has a significant positive correlation with both Happiness and Post traumatic growth (PTG). The happiness is significant correlated with PC but show no correlation significant with PTG. On the other hand PTG is only significant correlated with PC.

**Table 4**  
Linear Regression Analysis on Psychological Capital ,Happiness and Post Traumatic Growth (N=200)

PTG	Happiness					95% CI				
	B	SE B	$\beta$	LL	UL	B	SE B	B	LL	UL
Variable	.27	.04	.40	.18	.36	.08	.03	.16*	.01	.16
PC	R = .40, R <sup>2</sup> = .16, $\Delta$ R <sup>2</sup> = .16 (F = 39.88)					R = .16, R <sup>2</sup> = .02, $\Delta$ R <sup>2</sup> = .02 (F = 5.71**)				

Noted: PTG= Post traumatic growth, Happiness, PC= Psychological capital

The results in Table 4 show that PC is not significant predictor of PTG. PC is significant predictor of Happiness. In terms of Happiness, PC accounts for 2% of the variance with a statistically significant beta coefficient.

Table 5

Mean, standard deviations and t-values for male orphan and female orphans on Psychological capital (PC), Happiness and Post traumatic growth (PTG) (N=200)

Variables	Male		Female		t(198)	P	95% C1		Cohen's d
	M	S.D	M	S.D			UL	LL	
PC	95.96	9.42	93.56	11.36	1.63	.04	5.29	-.50	0.22
Happiness	20.92	5.82	20.54	5.50	.46	.19	1.95	-1.21	
PTG	28.93	7.17	30.45	6.99	-1.51	.89	.45	-3.5	

Noted: PTG= Post traumatic growth, Happiness, PC= Psychological capital

Result in table 5 shows the mean, standard deviation and mean differences between male and female on psychological capital (PC), happiness and post traumatic growth (PTG). The results indicate a significant gender difference on PC. While no significant difference observed on Happiness and Post traumatic Growth (PTG). Males scored higher on PC compared to female. These findings suggest that male report higher levels of PC. While gender differences in Happiness and PTG are not significant.

Table 6

Mean, standard deviations and t-values for orphans who siblings are living in orphanage on psychological capital (PC), Happiness and Post Traumatic Growth PTG (N=200)

Variables	Yes		No		t(198)	P	95% C1		Cohen's d
	M	S.D	M	S.D			UL	LL	
PC	95.41	10.01	94.25	10.87	.72	.56	4.31	-1.00	
Happiness	21.26	4.70	20.45	6.03	1.03	.02	2.48	-.73	0.06
PTG	30.20	7.78	29.57	6.77	.55	.05	2.85	-1.61	

Noted: PTG= Post traumatic growth, Happiness, PC= Psychological capital

The results in Table 6 show the mean, standard deviation, and mean differences between Orphans with and without siblings living in the same orphanage on Psychological Capital (PC), Happiness, and Post-Traumatic Growth (PTG). The results indicate no significant difference in Psychological Capital (PC) and Post Traumatic Growth (PTG), while significant differences were observed for Happiness. Orphans living with siblings in the orphanage scored higher on Happiness compared to those without siblings in the orphanage.

Table 7

Mean, standard deviations and t-values for education level on psychological capital (PC), Happiness and Post Traumatic Growth PTG (N=200)

Variables	3-6		6-10		t(198)	p	95% CI		Cohen's d
	M	S.D	M	S.D			UL	LL	
PC	94.04	10.25	95.12	10.87	-.72	.47	1.88	-4.05	
Happiness	20.37	5.52	21.00	5.73	-.78	.43	.95	-2.20	
PTG	28.31	6.64	31.00	7.26	-2.70	.00	-.72	-4.63	0.38

Noted: PTG= Post traumatic growth, Happiness, PC= Psychological capital

The results in Table 7 show the mean, standard deviation, and mean differences between Orphans with different level of education on psychological Capital (PC), happiness, and post-traumatic growth (PTG). The results indicate no significant difference in Psychological Capital (PC) and Happiness as the scores for both groups were similar. The significant differences were observed in Post traumatic growth (PTG). With orphans in the 6-10 education level scoring higher compared to those in the 3-6 level.

Table 8

Means, Standard Deviations and F-values of parental status on Variables of the Study ((N= 200)

Variables	Only Mother Alive (n=39)		Only father alive (n=5)		Both Alive (n=59)		Both expired (n=97)		F	p
	M	SD	M	SD	M	SD	M	SD		
PC	96.89	11.09	97.40	6.18	93.54	9.06	94.24	11.35	.96	.41
Happiness	20.41	6.43	19.80	8.22	21.47	4.03	20.42	6.02	.52	.66
PTG	32.46	6.99	29.60	6.10	28.93	7.34	29.22	6.88	2.38	.07

Noted: PTG= Post traumatic growth, Happiness, PC= Psychological capital

df =199

Note:  $\eta p^2$  =Partial eta squared values are suggestive of significant effect size. Cohen (1969) classified effect of 0.2 as small, 0.5 as medium, and 0.8 or higher as large.

Table 8 presents results of mean, standard deviation, and F-values for orphans on Psychological Capital (PC), Happiness, and Post-Traumatic Growth (PTG). The results reveal that this whole variable is not significant with pc, happiness and post traumatic growth.

Table 9

Means, Standard Deviations and F-values of duration of living in orphanage on Variables of the Study ((N= 200)

Variables	Don't know (n=36)		1-3 year (n=4)		3-5 year (n=76)		More than 5 year (n=84)		F	p
	M	SD	M	SD	M	SD	M	SD		
PC	99.11	13.87	96.00	15.68	92.40	8.44	94.67	10.04	3.40	.01
Happiness	20.33	6.48	11.75	4.19	20.84	5.02	21.19	5.55	3.79	.01
PTG	31.36	6.82	30.00	6.97	28.22	6.83	30.50	7.30	2.13	.09

Noted: PTG= Post traumatic growth, Happiness, PC= Psychological capital

df =199

The outcome in Table 9 presents the mean, standard deviation, and F-values of orphans as a function of orphanage duration on Psychological Capital (PC), Happiness, and Post-Traumatic Growth (PTG). The implications are that there is a statistically significant difference in PC scores depending on orphanage duration. Likewise, there was a statistically significant difference in Happiness, with orphans. For PTG, the difference was not statistically significant.

**Table 10**  
**Post hoc analysis of group difference on Happiness, and PC with orphanage duration (N=200)**

Variable	orphanage duration	orphanage duration	M.D	S.E	95% CI	
					LL	UL
PC	Don't Know	3-5 years	6.70*	2.10	2.55	10.85
		More than 5 years	4.44*	2.07	.358	8.53
		3-5 years	8.58*	2.91	2.84	14.32
Happiness	Don't Know	3-5 years	-9.09*	2.83	-14.6	-3.50
		1-3 years	-9.44*	2.82	-15.01	-3.86
		More than 5 years				

\*p<.05, \*\*p<.01, \*\*\*p<.001, NS=Non significant

Noted: Happiness, PC= Psychological capital

The orphans who belonged to Don't Know Group were consistently found to report higher levels of happiness and psychological capital than orphans who were defined with longer durations in orphanages. Orphans having no idea how many years they were in an orphanage had higher psychological capital than those who spent 3 to 5 years or more than five years staying in an orphanage. Orphans who lived in an orphanage between 3 and 5 years reported higher happiness levels compared to those who do not know how long they have been in such institutions. In addition, orphans in the 3-5 year group were happier than their counterparts in the 1-3 years bracket. The results indicated that the group of 1-3 years duration was the least happy, and on the contrary, psychological capital decreases with time spent in the orphanages.

**Finding**

The research provided a number of intriguing results on the psychological well-being of orphans, specifically in relation to the interaction of Psychological strength, happiness, and post-traumatic growth (PTG). All of the psychometric tools used the Psychological Capital scale, the Subjective Happiness Scale, and the Post-Traumatic Growth scale are found to have acceptable internal consistency, validating their reliability for the constructs being measured. There is a strong positive correlation between Psychological Capital and Happiness (beta = .16, p < .05), and regression analysis also supported Psychological strength as a positive predictor of happiness, explaining 2% of its variance. On the other hand, although Psychological strength also showed a strong positive correlation with PTG (beta = .40, p < .01), it did not come out as an important indicator of PTG in the regression model, and thus the first hypothesis is rejected. In addition, a significant lack of

correlation was seen between Happiness and PTG, which contradicted the proposed relationship and indicated a more intricate process within this at risk group, possibly mediated by the scarce resources that are characteristic of the orphanage environment.

**Conclusion**

This research illustrated that psychological capital strongly increases happiness and post-traumatic growth (PTG) among orphans, highlighting its critical importance to their psychological well-being. Yet the failure of a significant relationship between happiness and PTG indicates that these measures might evolve separately within this group. The enhancement of psychological capital, in addition to easing environmental difficulties, seems essential to promoting resilience and long term positive functioning in orphan children.

**Recommendation**

This research has a number of limitations that need to be noted. First, the sample is limited to Rawalpindi and Islamabad orphanages, and therefore generalization to other areas in Pakistan or other socio-cultural settings is limited. Second, the utilization of self-report instruments might have resulted in response bias due to recall issues or social desirability. Moreover, the cross-sectional design limits causal inferences and fails to reveal changes in psychological capital, happiness, or post-traumatic growth over time. Lastly, the research excluded orphans who had noteworthy physical or mental disabilities and failed to effectively explore gender differences, both of which could have informed us on the dynamics of psychological well-being among orphans.

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