

The conduct disorder in children of unknown parentage - A descriptive comparative study in the orphanage of Sétif

اضطرابات المسلك لدى الأطفال مجهولي النسب- دراسة وصفية مقارنة بدار الطفولة المسعفة بسطيف

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Abstract: This study aimed to highlight the most significant conduct disorders among children of unknown parentage, through a comparative descriptive study of a sample from the Child Protection Center in the Province of Setif. The Conduct Disorder Scale for Late Childhood by Bou Al-Ainine was applied to a sample of (08) cases of both sexes. The study found a difference in the type of conduct disorders in children of unknown parentage compared to their peers, as well as a statistically significant variation in the severity of conduct disorders within the same sample based on gender.

- **Keywords:** conduct disorders, orphanage, unknown parentage.

الملخص: هدف هذه الدراسة يمكن في تسليط الضوء على أهم اضطرابات المسلك لدى الأطفال مجهولي النسب، عن طريق دراسة وصفية مقارنة لعينة من أطفال دار الطفولة المسعفة بولاية سطيف، أين تم تطبيق مقياس اضطراب المسلك لدى الأطفال في مرحلة الطفولة المتأخرة لبو العينين على عينة قوامها 08 حالات من الجنسين.

توصلت الدراسة إلى وجود اختلاف في نوع اضطرابات المسلك لدى الأطفال مجهولي النسب مقارنة بأقرانهم، وتباين دال في حدة اضطرابات المسلك لدى نفس العينة على أساس الجنس. الكلمات المفتاحية: اضطراب المسلك، طفولة مسعفة، مجهولي النسب.

- **Introduction:**

Behavior is considered a powerful reflection of an individual's mental health. Whether this behavior manifests within the family system or at the broader social context, it requires careful examination. An individual who demonstrates a high level of adaptability and balance is generally considered mentally healthy, unless

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behavioral disorders or disruptions emerge on their daily functioning. Based on this, a distinct clinical category known as conduct disorders has been established in diagnostic frameworks such as the Diagnostic and Statistical Manual (DSM) and the International Classification of Diseases (ICD) as a distinct category. These manuals provide descriptive clinical charts and list of symptoms that must be met to confirm or rule out a diagnosis of behavioral disorder.

Magdy Mohamed Al-Dessouki (2015) notes that the term "conduct disorder" first appeared as a diagnostic category in the eighth revision of the ICD in 1965 and in the second revision of the DSM in 1968. Since then, the classification has been expanded within two systems that follow different approaches to distinguishing its subtypes. The diagnostic criteria have continued to evolve through the successive revisions of these diagnostic classification manuals.

Conduct disorder, in its pathological form, is characterized by a consistent pattern of behavior that violates the values and fundamental rights of others. It also manifests as defiance and rebellion against established frameworks, governing laws, and newly introduced norms within systems of social control. This makes conduct disorder a complex challenge for both families and social institutions, whether in terms of identification, intervention, or treatment. While the family serves as the primary unit responsible for raising the individual and instilling proper behaviors, societal institutions play an active and essential role in this process. In cases where the family structure is disrupted or absent, full responsibility falls on social institutions to compensate for the family's role, as seen in case with children of unknown parentage or those residing in child protection centers.

Algeria's statistical records indicate that the country witnesses the birth of approximately 3,000 illegitimate children annually; however, other sources suggest that this number is much higher, as most of these births occur outside public hospitals and clinics. In this context, lawyer Fatima Zahra Ben Braham stated to El Khabar newspaper that "the Ministry's figures date back to ten years ago and have not been

updated,” adding that the real number is continuously increasing, with over 45,000 new cases of assisted children recorded annually. Furthermore, the phenomenon of illegitimate children in Algeria faces serious custody challenges: many of these children are not admitted into child protection centers, with only a small fraction receiving institutional care. This situation has fostered the emergence of networks that reclaim newborns, often with the cooperation of unmarried mothers who resort to selling their babies for substantial sums of money. (Redouane, 2015, p. 11).

The harm caused by the current status of an illegitimate child is very profound, especially during childhood, which is critical age for personality development and identity formation. This period shapes not only physical health and education but also psychological well-being. childhood is a phase of crystallizing thoughts and behaviors, typically influenced by family dynamics, where parents play a major and active role in forming and nurturing the child's personality. A child is inherently vulnerable and requires comprehensive care- materially, morally, and psychologically- to integrate effectively into their family and society, ensuring a stable and emotionally balanced life. However, for a child of unknown parentage or one residing in a child protection center, the situation becomes far more complex. In these cases, the caregiver takes the place of the parents, and peers at the center substitute for siblings, fundamentally altering the family structure, the interaction patterns, communication styles, and relational dynamics.

The separation of a child from their mother is one of the most significant threats to their psychological well-being. As the primary caregiver, the mother fulfills the child's earliest needs and serves as a source of support, security, emotional bonding, and affection. Then comes the role of the father, the extended family, and the broader social environment. Any relational disruption experienced by the child can negatively impact their psychological and social life. Consequently, children of unknown parentage or those in child protection centers often exhibit different behaviors from those of other children- especially on how they interact with their environment and

the outside world. During initial contact, these children are often cautious, wary, and, in some cases, aggressive or withdrawn. Gaining their trust typically takes longer compared with other children and noticeable differences in their normal behavior are observed.

Behavioral challenges in orphans and children of unknown parentage have been documented in numerous studies. One notable study conducted by researcher Ismail Yasser Youssef Mahmoud in Palestine and published in 2009, explored the most common behavioral issues among children in care institutions and those deprived of family care. It also investigated the extent to which these problems vary based on the duration and type of loss, the age of the child at the time of deprivation, as well as gender, type of institutional care, and educational level.

The researcher utilized a descriptive-analytical approach, selecting a sample of 133 boys and girls aged 10 to 16 years from shelter institutions in the Gaza Strip. The instruments employed included the Challenges and Difficulties Scale (translated by Dr. Abdelaziz Thabet), the Neurosis Inventory (developed by Dr. Ahmed Abdelkhaleq), and the Children's Depression Inventory (CDI) (developed by Maria Kovacs). Key statistical techniques applied in the analysis were frequencies, percentages, arithmetic mean, standard deviation, relative weight, Pearson correlation, independent samples t-test, and one-way ANOVA (Yasser Youssef Mahmoud, 2009, p. 136).

The study found that children without family care most commonly face behavioral issues, neurosis, depression, and emotional symptoms, with social problems and hyperactivity also present. Females displayed more hyperactivity based on substitute mothers and specialists, while males reported higher depression and neurosis. Gender-segregated institutions were identified as more effective types of care.

The findings indicated that children placed in foster families exhibited fewer behavioral issues. Children with poor academic performance were reported by both mothers and children to have more problems with peers, as well as higher levels of

depression and general issues compared to high-achieving children. Moreover, children who were deprived of their fathers due to divorce had more peer-related problems (according to both mother and child), whereas children whose fathers passed away showed fewer behavioral problems, especially with peer interactions (Yasser Youssef Mahmoud, 2009, p. 136).

These findings pertain to behavioral difficulties observed among children residing in care institutions. In the context of conduct disorders, severity vary widely among children, but many exhibit significant psychological impairments. These impairments may include poor academic achievement, difficulties with social interactions, and frequent conflicts with parents or teachers, as well as an increased risk of engaging in antisocial or criminal behavior. Such behavioral patterns have been documented in clinical research. For instance, O'Reilly (2005) reported that in the United Kingdom, approximately 7.4% of boys and 3.02% of girls aged five to ten showed symptoms of conduct disorder. Moreover, 40% of children aged seven to eight diagnosed with conduct disorder were subsequently classified as delinquents during adolescence. Additionally, over 90% of juvenile offenders had a history of conduct disorder during childhood (Al-Dessouki, 2015, p. 07).

This field study was designed to empirically examine conduct disorders among children of unknown parentage residing in child protection centers in the Province of Setif, including both male and female participants. The objectives are to identify characteristics of these children and to determine the types of conduct disorders that may be present. Additionally, the study compares its findings with previous international and local research on children in specialized care institutions. The analysis also considers the gender variable by comparing cases from the Setif Highlands Child Protection Center for Boys and the Bilar Setif Child Protection Center for Girls.

The study is guided by two main questions: what conduct disorders are most common among children of unknown parentage; and do the types of conduct disorders differ by gender in this group?

1- Study Objectives:

The present study aims to shed light on the reality of conduct disorders among children in child protection institutions in general, and specifically among children of unknown parentage, as a general objective. In addition, the study seeks to achieve the following specific objectives:

- To identify the forms of conduct disorders likely to appear among children of unknown parentage.
- To reveal the behavioral characteristics of children residing in child protection centers.
- To compare the types of conduct disorders in children of unknown parentage based on gender.
- To compare the types of conduct disorders in children of unknown parentage and their peers from regular family settings.

2- Significance of the Study:

This study holds considerable significance as it draws attention to a vulnerable population of children who are placed in care institutions, isolated from familial support. These individuals frequently encounter stigma and may be perceived with caution, further reinforcing their marginalization. The persistent stigma underscores the need for early intervention at the point of admission to child protection facilities. Such intervention should be informed by comprehensive research examining the characteristics and traits of children of unknown parentage, which may serve as predisposing factors for psychological and behavioral disorders, particularly conduct disorders. Additionally, the relevance of this study is reinforced by its focus on conduct disorders in children—an essential clinical indicator that may foreshadow the development of psychological disturbances in later life. Moreover, this research

presents opportunities for future inquiries within the same domain by providing recommendations aimed at enhancing the quality of care delivered to this group in child protection centers throughout Algeria.

2- Previous Studies:

It is worth noting that the topic of children in care institutions has received considerable research attention at both local and international levels- whether in terms of institutional aspects or the psychological experiences of children in protection centers. The same applies to the subject of conduct disorders, for which a number of international studies are available. However, there appears to be a lack of local studies addressing conduct disorder, and to our knowledge, no study has specifically examined conduct disorders among children of unknown parentage in child protection institutions in Algeria.

Below is a presentation of the most relevant studies that have addressed the same research context.

2.1-Studies on Child Protection Institutions:

The study by Djebala Mohamed (2010) focused on the reality of child protection in Algeria; it assessed the care provided to assisted children in the country and presented the reality of services offered to them. It also shed light on the true state of social integration of assisted children into Algerian society. The study concluded that while the Algerian state makes tremendous efforts to provide care for these children in the form of material assistance and service-based support, the social integration process remains incomplete. Likewise, professional integration in adulthood poses challenges for many assisted children who face obstacles in obtaining stable employment, as the efforts of official institutions do not extend to ensuring meaningful integration. Rather, they often offer only temporary solutions that fail to guarantee long-term social stability (Djebala, 2010, p. 215).

A 2017 study by Bekhti Zahia and Tahiri Nassira, titled *The Role of the Child Protection Institution in the Care and Support of Children of Unknown Parentage: A*

Case Study of the Child Protection Institution in Djelfa Province, reached similar conclusions. Among the most notable were the insufficiency of specialized institutions for child protection, the absence of official statistics regarding the number of these children, and the finding that institutions can never truly replace a child's natural family. Additionally, the study noted that the care conditions for children of unknown parentage were inadequate, especially given the limited budget allocated to these institutions. It also recorded a shortage of foster families willing to care for these children, mainly due to strict administrative procedures and particularly the fear among families that the child may repeat the mistakes of their biological parents, especially in the case of girls. The study further highlighted significant societal stigma, contempt, and rejection directed at children of unknown parentage, which complicates their social integration and often pushes them toward delinquency and criminal behavior (Bekhti, 2017, p. 102).

Another 2017 study by Sarah Taleb, titled *The Reality of Psychological and Social Care for Children of Unknown Parentage in Algeria: The Child Protection Center in Laghouat as a Model*, found that the center in Laghouat Province achieved a 50% rate of social integration and emotional satisfaction among assisted children. It also emphasized that foster families are more efficient than centers in achieving the child's psychological and social integration. The study concluded that the biggest challenge facing the child is finding a foster family to integrate them (Taleb, 2017, p. 81).

A study conducted by Aïssou Akila and Kherbache Naila published in 2018, titled *Burnout Among Substitute Mothers in Child Protection Centers: A Field Study in the Al-Biar Center*, selected a purposive sample of forty substitute mothers and applied the Maslach Burnout Inventory. The findings revealed that substitute mothers experienced moderate burnout levels in the dimensions of emotional exhaustion and depersonalization, and high levels in the dimension of reduced personal accomplishment. Statistically significant differences were observed among the groups based on age, educational level, and professional experience in the dimension of

depersonalization, both in terms of frequency and severity. Likewise, statistically significant differences appeared in the dimensions of emotional exhaustion and reduced personal accomplishment according to the same variables (Aïssou, 2018, p. 490).

2.2-Studies on Children of Unknown Parentage:

The study by Samir Abich, 2017, titled *The Psychological and Social Problems of the Child of Unknown Parentage and Their Impact on School Life*, concluded that children of unknown parentage face a set of psychological and social problems stemming from social stigma. These include social rejection, especially from peers, and difficulty in accepting their reality and lack of family connections. In addition, a number of disturbed behaviors were observed, such as causing problems within the foster home, threats of running away, acts of aggression, and other violent behaviors. These problems negatively impacted their academic performance. (Abich, 2017, p. 16)

The study by Boufedj Wissam and Nouri El-Wad, entitled *The Psychological Profile of the Adolescent of Unknown Parentage and Double Orphan: Between Abandonment and Deprivation*, aimed to identify the psychological profile of adolescents who are both of unknown parentage and orphaned. A set of psychological tests were applied to a sample of four (4) cases. The study concluded that children of unknown parentage exhibit a profile marked by psychological fragility and woundedness, manifested through neurotic symptoms and various nervous experiences such as feelings of loneliness, social withdrawal, low self-esteem, and moderate psychological and social adjustment. Additionally, the study observed disturbed attitudes toward biological parents and toward the self, as well as very limited social relationships due to others' views, marginalization, and social neglect. A form of dependency and inability to act independently or make decisions was also noted (Boufedj, 2017, p. 106).

The study by Ibtissam Bezoukh and Loubna Ahmane, 2020, involved a field investigation titled Aggressive Behavior and Its Relationship with Self-Assertion Among a Sample of Adolescents of Unknown Parentage. The researchers sought to determine whether there is a relationship between self-assertion and aggressive behavior in a sample of adolescents of unknown parentage, taking the gender variable into account. They also tried to identify the dominant type of aggressive behavior in a randomly selected sample of 45 adolescents. The study found a moderate level of both aggressive behavior and self-assertion among adolescents of unknown parentage. No statistically significant differences were found based on gender. The study concluded that anger was the most common behavioral pattern among these children (Bezoukh, 2020, p. 240).

2.3-Commentary on Previous Studies:

Upon analyzing the previous local studies that addressed the topic of institutions specialized in the care of assisted children, or those focusing on children of unknown parentage, several key points emerge:

- **Limited scope on post-institutional outcomes:** these studies primarily examined institutional care and its role in improving the quality of life for children of unknown parentage, without exploring the fate of these children after leaving the institution.
- **Neglect of psychological barriers to integration:** Most research assessed the impact of child protection centers on the children and foster families, but overlooked the role of the child's own disturbed psychological profile in hindering their familial and social integration.
- **Generalized approach to pathology:** The pathological dimension of the assisted child was addressed in a general and inclusive manner, without specifying whether the research was theory-driven or based in a specific clinical model. Various psychological, behavioral, and emotional disorders were mentioned, often derived from different pathological frameworks, sometimes extreme and other times falling under conduct disorders, but without the use of clear clinical symptom tables or

differential diagnostic tools that would accurately define the pathological category beyond dispute.

- **Contribution to current research direction:** These studies provided a foundation for shaping the current research, by highlighting gaps, especially the lack of focus on conduct disorder as a distinct clinical category classified in international diagnostic manuals. The current study focuses on two institutions: one for male children of unknown parentage and another, the female child protection center, enabling a comparative analysis between male and female cases.

3. Definition of Study Terms:

- **Assisted Child:** An assisted child is an individual who has been deprived of their family since birth, either through abandonment or relinquishment, and placed in a care institution for the purpose of receiving support and protection. This deprivation may be due to force majeure, such as poverty, parental separation, or criminal activity, in which case the placement is made by a judicial decision to ensure the child's material and emotional care (Ben Fadhel, 2013, p. 50).

- **Child of Unknown Parentage:** Children of unknown parentage are those found without any traceable lineage to either parent. Certain conditions apply: it must not be proven that the child, while still a minor, is affiliated with a foreign nationality through either parent, and the presumption is that both parents are Algerian nationals if the newborn is found on Algerian territory—unless evidence to the contrary is established (e.g., a foreign-born child placed within Algeria). A second category includes children born to a named mother and an unknown father. These children are affiliated with their single mother, and their births are officially registered in civil status records upon declaration at the hospital, which enables them to obtain a birth certificate (Ben Aissa, 2020, p. 98).

- **Conduct Disorder:** According to the Diagnostic and Statistical Manual of Mental Disorders, Fourth Edition (DSM-IV), a conduct disorder is defined as a set of repetitive and persistent behaviors that violate the basic rights of others or transgress social

norms and rules. Diagnosis requires the presence of at least three or more behaviors over a period of twelve months, or at least one behavior over six months, with these behaviors negatively impacting social, academic, or occupational functioning.

4. Study Methodology:

To conduct this study, a descriptive-analytical methodology was adopted, as it allows for the observation and analysis of the characteristics of children of unknown parentage. This approach also facilitated the administration of the conduct disorder assessment, with the aim of identifying the clinical responses to the test items and comparing them with the clinical tables related to conduct disorder as outlined in the DSM-IV.

5. Study Sample:

The current study sample consisted of a group of children of unknown parentage residing in the Child Welfare Institution of Sétif. A purposive sampling method was used to select eight cases, evenly divided by gender: four males and four females.

6-Study Procedures:

The study was implemented through several stages, which can be summarized as follow:

- Visit to the Female Child Welfare Institution: During this visit, the research topic was presented and the possibility of identifying a sample of female children exhibiting conduct disorders was discussed.
- Visit to the Male Child Welfare Institution: Similarly, the research topic was presented and the availability of a sample of male children exhibiting conduct disorders was examined.
- Administration of the Conduct Disorder Scale for Late Childhood, developed by Hanan Osman Mohamed Abu Al-Einen, on the identified children.
- Derivation of the final results and formulation of appropriate recommendations relevant to the research topic.

7. Research Tools: A set of methodological tools was used to structure this study in its final form:

several semi-structured interviews were conducted with the selected children to determine the frequency of problematic behaviors, assess their willingness to enroll in the study, and confirm their acceptance to undertake the diagnostic conduct disorder test.

7.1- Conduct Disorder Scale: The Conduct Disorder Scale for children in late childhood, developed by Hanan Osman Mohamed Abu Al-Einen in 2011, was adopted for this study. The scale was designed based on the DSM-IV diagnostic criteria. It consists of 37 statements divided into four clinical domains:

- Aggression toward people and animals: 10 items
- Property destruction: 10 items
- Deceitfulness or theft: 9 items
- Serious rule violations: 8 items

To ensure balanced weighting, a three-point Likert scale was used with the values (1 = Rarely, 2 = Sometimes, 3 = Often). The score ranges were as follows:

- Domain 1 (Aggression): 10–30 points
- Domain 2 (Destruction of property): 10–30 points
- Domain 3 (Deceit/theft): 9–27 points
- Domain 4 (Rule violation): 8–24 points
- Total score range: 37–111 points

The weighted average was used to interpret the results:

- High level of disorder: 2.34 to 3
- Moderate level of disorder: 1.67 to 2.33
- Low level of disorder: below 1.66

8. Study Results:

8.1- The most common conduct disorders among children of unknown parentage: To answer this first research question of our study, means and standard

deviations were calculated for the most common conduct disorders among the children enrolled in the study. The results are presented in the table below:

Table 1. Means and Standard Deviations of Conduct Disorder Categories among Children of Unknown Parentage

Category	Mean	Standard Deviation	Level
Aggression toward others and animals	2.33	0.888	Moderate
Property destruction	2.33	0.888	Moderate
Deceitfulness or theft	2.75	0.622	High
Serious rule violations	2.83	0.577	High

8.1.1-Interpretation:

Table 1 presents the sample's responses to the Conduct Disorder Scale for children in late childhood. The highest mean score was observed in the category of serious rule violations ($M = 2.83$), followed by deceitfulness or theft ($M = 2.75$). The categories of property destruction and aggression toward others and animals shared the same mean score ($M = 2.33$), indicating a moderate level.

These findings suggest that conduct disorder among children of unknown parentage is most pronounced in behaviors related to serious rule violations, followed by deceit and theft, while property destruction and aggression appear less severe. This pattern may be explained by the children's difficulty in adhering to institutional rules—whether due to lack of understanding or a tendency to challenge authority. Their inclination toward theft or deceit could reflect an attempt to obtain desired items or avoid punishment. The moderate level of property destruction may be attributed to strict disciplinary measures within the institution, which deter such behaviors.

Our results align with Al-Nuwaisa's (2018) study on conduct disorders among students referred to counseling and their relationship to locus of control, where serious rule violations ranked first at a moderate severity level. However, the current study indicates a higher severity level, highlighting a notable difference in intensity between the two samples.

8.2- Gender-based differences in the types of conduct disorders among children of unknown parentage: The means and standard deviations of the conduct disorders among children of unknown parentage were compared to assess whether differences existed in the children's responses based on their gender. The results are presented in table 2 below:

Table 2. Means and Standard Deviations of Conduct Disorders among Children of Unknown Parentage by Gender

Category	Arithmetic Mean		Standard Deviation	Level
Aggression toward others and animals	Male	2.33	0.888	Moderate
	Female	2.25	0.866	Moderate
Property destruction	Male	2.33	0.888	Moderate
	Female	2.17	0.835	Moderate
Deceitfulness or theft	Male	2.75	0.622	High
	Female	2.33	0.888	Moderate
Serious rule violations	Male	2.83	0.577	High
	Female	2.75	0.622	High

8.2.1-Interpretation:

Table 2 reveals the presence of differences between males and females across several categories:

- Aggression toward others and animals: Males exhibited higher levels of aggression compared to females, which may be explained by the tendency of boys to express physical aggression more frequently than girls.
- Property destruction: Males also demonstrated more destructive behaviors than females.
- Deceitfulness and theft: Responses were relatively similar between genders, though slightly higher among males.
- Serious rule violations: Both genders showed nearly identical levels of conduct disorder, with a marginally higher mean for males.

These findings are consistent with previous research by Al-Nuwaisa (2018), Touman (2016), and Salama, all of which reported variations in the severity and type of conduct disorders attributable to gender as a significant variable.

9. General Discussion:

Based on the aforementioned findings and the results obtained from the responses of children of unknown parentage to the Conduct Disorder Scale- when compared to the clinical criteria for conduct disorder outlined in the DSM-5- it becomes clear that these children exhibited elevated levels of deceitfulness and theft, unlike aggressive behaviors and property destruction, which they tend to avoid due to fear of disciplinary actions that could reach the level of expulsion from the institution.

The responses also showed clear gender differences: females demonstrated lower levels of aggression toward others compared to boys, who were more inclined to express their frustration physically. Similarly, property destruction was more frequent among male than females. However, both genders demonstrated tendencies toward stealing- often driven by a desire for possession- and challenging institutional norms. This resistance typically manifested as rejection of structured behavioral expectations, reflecting a broader opposition to authority and imposed values.

10. Recommendations:

In light of the study's findings, the following recommendations are proposed:

1. **Conduct further research** on other psychological and behavioral disorders- such as substance misuse, sexual deviance, and personality disorders- among children of unknown parentage in institutional care, as key clinical indicators suggest these disorders may be present.
2. **Develop targeted therapeutic protocols** specifically tailored to the unique psychological and behavioral needs of this vulnerable group, as currently available programs are largely generic.

3. **Promote foster care and alternative families** for children of unknown parentage, as such environments provide greater protection and nurture, reducing the likelihood of psychological and behavioral disorders.
4. **Broaden research on conduct disorders by** exploring the relationship between conduct disorder and other variables among different child populations- not limited to institutionalized children or those of unknown parentage.
5. **Implement preventive societal policies** to raise awareness campaigns addressing the phenomenon of children of unknown parentage, involving all community institutions, especially **schools and mosques**, to reduce stigma and promote inclusion.
6. **Enable NGOs and child-focused civil society organizations** to play a more active role in the integration of institutionalized children, particularly those of unknown parentage, into the broader social fabric.

Establish monitoring and support mechanisms to oversee the social, professional, and academic integration of youths of unknown parentage after they leave institutional care upon reaching the legal age of adulthood

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