

**EXPERIENCES OF CAREGIVERS WORKING WITH VULNERABLE CHILDREN:  
A CASE STUDY OF NOAH'S ARK CHILDREN'S MINISTRY UGANDA**

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**UGANDA CHRISTIAN  
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## DECLARATION

I declare that this report is my original work and has not been submitted for any academic award in any institution of higher learning.

Sign: ..........

Date: ..25<sup>th</sup>/5/26..

Mark Seeti

## APPROVAL

This research dissertation titled “Experiences of Caregivers working with vulnerable children . A case study of Noah’s Ark children’s Ministry Uganda.” has been successfully carried out by Mark Seeti reg no M23B15/108 BSWASA student and ready to be submitted for examination with my approval as the University Supervisor.

Signature:



DR. PETER NAREEBA  
(SUPERVISOR)

18/5/2026 Date:

## **DEDICATION**

I dedicate this research study to my dear mother Margaret Tibulya for her financial support, love and constant encouragement through out my academic journey. Your sacrifices and belief in me have been my greatest source of strength.

## **ACKNOWLEDGEMENT**

I thank God for the gift of life, strength, protection and wisdom through out my academic journey and during the completion of this research study.

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## TABLE OF CONTENTS

|                                                                                      |     |
|--------------------------------------------------------------------------------------|-----|
| DECLARATION .....                                                                    | 2   |
| APPROVAL .....                                                                       | ii  |
| DEDICATION .....                                                                     | iii |
| ACKNOWLEDGEMENT .....                                                                | iv  |
| ABBREVIATIONS .....                                                                  | v   |
| ABSTRACT.....                                                                        | vi  |
| CHAPTER ONE.....                                                                     | 1   |
| 1.0 Introduction .....                                                               | 1   |
| 1.1 Background of the study .....                                                    | 1   |
| Theoretical background .....                                                         | 1   |
| 1.2 Problem statement .....                                                          | 3   |
| 1.3 Purpose of the study .....                                                       | 4   |
| 1.4 Specific objectives .....                                                        | 4   |
| 1.5 Research question .....                                                          | 4   |
| 1.6 Scope of the study.....                                                          | 4   |
| 1.6.1 Content scope .....                                                            | 4   |
| 1.6.2 Time scope.....                                                                | 5   |
| 1.6.3 Geographical scope.....                                                        | 5   |
| 1.7 Justification of the study .....                                                 | 5   |
| 1.8 Significance of the study .....                                                  | 5   |
| 1.9 Conceptual framework .....                                                       | 6   |
| 1.9 Operational definitions .....                                                    | 6   |
| CHAPTER TWO LITERATURE REVIEW .....                                                  | 8   |
| 2.0 Introduction .....                                                               | 8   |
| 2.1 Theoretical framework .....                                                      | 8   |
| 2.2 Motivational factors influencing caregivers to work with vulnerable.....         | 8   |
| 2.3 Challenges faced by caregivers working with vulnerable children .....            | 10  |
| 2.4 Coping mechanisms used by caregivers to manage stress and emotional strain ..... | 12  |
| 2.5 Literature gap.....                                                              | 13  |
| CHAPTER THREE .....                                                                  | 14  |
| METHODOLOGY .....                                                                    | 14  |
| 3.0 Introduction .....                                                               | 14  |
| 3.1 Research design .....                                                            | 14  |
| 3.2 Area of study .....                                                              | 14  |
| 3.3 Sources of information .....                                                     | 14  |
| 3.4 Study population.....                                                            | 15  |
| 3.5 Sample size and sample determination.....                                        | 15  |

|                                                                                          |    |
|------------------------------------------------------------------------------------------|----|
| 3.6 Sampling techniques.....                                                             | 15 |
| 3.6 Variables and measurement.....                                                       | 15 |
| 3.7 procedure for data collection .....                                                  | 16 |
| 3.8 Data collection instruments .....                                                    | 16 |
| 3.9 Quality and error control .....                                                      | 16 |
| 3.10 Data processing and analysis.....                                                   | 17 |
| 3.11 Ethical considerations.....                                                         | 17 |
| 3.12 Methodological constraints.....                                                     | 17 |
| CHAPTER FOUR .....                                                                       | 18 |
| PRESENTATION, INTERPRETATION AND DISCUSSION OF FINDINGS ....                             | 18 |
| 4.0 Introduction .....                                                                   | 18 |
| 4.1 Analysis and interpretation of findings .....                                        | 18 |
| 4.1.1 Motivational factors influencing caregivers to work with vulnerable children ..... | 18 |
| 4.1.2 Challenges faced by caregivers working with vulnerable children.....               | 21 |
| 4.1.3 Copying mechanisms used by caregivers working with vulnerable children .           | 23 |
| 4.2 Discussion of findings .....                                                         | 25 |
| 4.2.1 Motivational factors influencing caregivers to work with vulnerable children ..... | 25 |
| 4.2.2 Challenges faced by caregivers working with vulnerable children.....               | 26 |
| 4.2.3 Copying mechanisms used by caregivers to manage stress and emotional strain .....  | 27 |
| CHAPTER FIVE .....                                                                       | 28 |
| SUMMARY, CONCLUSIONS AND RECCOMENDATIONS .....                                           | 28 |
| 5.0 Introduction .....                                                                   | 28 |
| 5.1 Summary of the findings .....                                                        | 28 |
| 5.1.1 Motivational factors influencing caregivers to work with vulnerable children ..... | 28 |
| 5.1.2 Challenges faced by caregivers working with vulnerable children.....               | 29 |
| 5.1.3 Copying mechanisms used by caregivers to manage emotional strain and stress .....  | 29 |
| 5.2 Conclusion.....                                                                      | 30 |
| 5.3 Recommendations .....                                                                | 30 |
| Reference .....                                                                          | 31 |
| APPENDIX I. INTERVIEW GUIDE .....                                                        | 36 |
| APPENDIX II: INTRODUCTORY LETTER .....                                                   | 38 |

## **ABBREVIATIONS**

|        |                                                                  |
|--------|------------------------------------------------------------------|
| MGLSD  | Ministry of Gender, Labour and Social Development                |
| NGO    | Non Governmental Organization                                    |
| UNESCO | United Nations Educational, Scientific and Cultural Organization |
| UNICEF | United Nations Children's Fund                                   |
| WHO    | World Health Organization                                        |

## **ABSTRACT**

The research study examined the experiences of care givers working with vulnerable children at Noah's Ark Children's Ministry Uganda, it focused on their motivations, challenges and coping mechanisms. Guided by Jean Watson's Human Caring Theory, the study employed a qualitative descriptive design. Data was collected through in depth interviews with 22 caregivers, social workers and teachers. Findings showed that caregivers are primarily motivated by compassion, love for children, faith as a calling from God, personal life experiences and emotional satisfaction from witnessing positive changes in children. Major challenges included heavy workload, emotional strain from the children's traumatic stories, limited resources and gaps in organizational support. Coping mechanisms identified were prayer and faith, peer support, personal self care strategies and satisfaction from children's success. The study concludes that despite significant challenges, caregivers remain committed through intrinsic motivation and spiritual resilience. Recommendations include recruiting additional caregivers, increasing government support and strengthening community based partnerships for vulnerable children.

# **CHAPTER ONE**

## **INTRODUCTION**

### **1.0 Introduction**

This chapter included the background of the study, problem statement, purpose of the study, specific objectives of the study, the research questions, scope of the study. justification of the study, significance of the study, conceptual frame work and operational definitions.

### **1.1 Background of the study**

#### **Theoretical background**

This study was guided by Jean Watson's Human Caring Theory which emphasized the importance of care, compassion, empathy and human connection in helping relationships. Watson explained that caring was not only about performing tasks but also about forming meaningful relationships that promoted healing, dignity and emotional well being.

According to Watson, caregivers were expected to practice kindness, respect, active listening and emotional presence when supporting others. Theory emphasized the importance of love, trust, faith and holistic care in human service professions.

The theory helped to understand how caregivers formed caring relationships with children who had experienced trauma, neglect and abandonment. It also helped explain how caregivers' emotional experiences influenced the quality of care they provided.

Therefore, this theory guided the study in understanding caregivers' lived experiences, emotional challenges and caring relationships with vulnerable children.

Globally, caregivers working with vulnerable children played a critical role in promoting children's welfare and protection. According to UNICEF (2023), millions of children worldwide faced neglect, abuse and poverty which increased the demand for professional caregivers, social workers and child welfare officers. However, these caregivers mostly experienced occupational stress, compassion fatigue and limited support systems (Maslach & Leiter, 2016). Studies conducted in Europe and North America showed that staff working in children's homes and care institutions faced burnout due to emotional demands of their work and lack of institutional support.

In Africa, childcare institutions faced challenges such as limited funding, staff shortages and inadequate psychosocial support for workers (Amoako, 2018). Many caregivers worked under stressful conditions with limited training in child psychology and trauma care. Research conducted in Kenya and South Africa indicated that despite these challenges, workers remained committed to improving the lives of children mainly driven by compassion, faith and community service values (Mwangi & Naidoo, 2020).

In Uganda, most organizations such as SOS Children's Villages, Watoto and Noah's Ark Children's Ministry Uganda played important roles in caring for orphans, abandoned and vulnerable children. These institutions provided holistic support including education, medical care, shelter and counseling. However, staff in such organizations often faced emotional strain, heavy workloads and limited recognition (UNICEF Uganda, 2022).

Noah's Ark Children's Ministry Uganda, located in Mukono District was founded to provide a home and education for abandoned and vulnerable children. Over the years,

it expanded to accommodate many children and employed caregivers, teachers, social workers and medical staff. While the organization's services are widely recognized, there was limited research on the experiences, challenges and coping mechanisms of the caregivers working there. This study therefore sought to explore and understand these experiences in depth.

## **1.2 Problem statement**

Ideally, child welfare institutions were expected to create a supportive work environment that ensured the well being of both the children and the caregivers. Caregivers were expected to receive adequate training, counseling, fair remuneration and emotional support to enable them to provide quality care.

However, in reality, many caregivers working with vulnerable children in Uganda face multiple challenges. Caregivers worked long hours under emotionally demanding conditions with limited psycho social support, low pay and high expectations (UNICEF, 2020). These factors often led to stress, burnout and job dissatisfaction which affected the quality of child care.

Existing studies in Uganda had mainly focused on children's welfare rather than caregivers' personal and professional experiences. There was limited research on the lived experiences, coping mechanisms and motivations of workers in faith based child welfare organizations such as Noah's Ark Children's Ministry Uganda.

This research gap limited understanding of how staff welfare could be improved, burnout reduced and effective care promoted for children. Therefore, the study examined the experiences of caregivers working with vulnerable children at Noah's Ark Children's Ministry Uganda.

### **1.3 Purpose of the study**

The purpose of this study was to examine the experiences of caregivers working with vulnerable children at Noah's Ark Children's Ministry Uganda.

### **1.4 Specific objectives**

To analyze the motivational factors that influenced caregivers to work with vulnerable children.

To examine the challenges faced by caregivers in providing care and support to vulnerable children.

To explore the coping mechanisms used by caregivers to manage stress and emotional strain.

### **1.5 Research question**

1. What motivated caregivers to work with vulnerable children at Noah's Ark Children's Ministry Uganda?
2. What challenges did caregivers face while caring for vulnerable children in the organization?
3. What coping strategies did caregivers use to manage work related stress?

### **1.6 Scope of the study**

#### **1.6.1 Content scope**

The study focused on examining the experiences of caregivers working with vulnerable children, specifically their motivations, challenges and coping mechanisms.

### **1.6.2 Time scope**

The study will reviewed literature and collected data covering the period between 2020 and 2025 a time when Noah's Ark Children's Ministry Uganda experienced growth in programs and staff allowing for examination of relevant experiences.

### **1.6.3 Geographical scope**

The study was conducted at Noah's Ark Children's Ministry, Mukono District, Uganda. The organization provided care for orphans, abandoned and neglected children. The organization was suitable for this study because it hosted many vulnerable children and employed many staff and volunteers which provided a good place for understanding their experiences.

## **1.7 Justification of the study**

This study was necessary because caregivers working with vulnerable children faced increasing demands that affected their well being and performance. With rising cases of child neglect and abuse, Uganda depended heavily on child welfare organizations to fill gaps in social protection. However, limited attention had been given to the welfare and psychological needs of caregivers.

This study contributed valuable knowledge to social work practice, helped improve management strategies in child care institutions and promoted sustainable care services. The findings also informed policies aimed at strengthening staff support systems and improving the quality of care for vulnerable children.

## **1.8 Significance of the study**

### **Vulnerable children**

The study helped improve the care given to vulnerable children by showing the challenges caregivers face and areas that need improvement.

## Caregivers

the study gave caregivers a chance to share their experiences, challenges and needs.

Social workers in Uganda. The study added knowledge about the experiences of caregivers in child welfare institutions and helped social workers to understand the emotional challenges of caregivers.

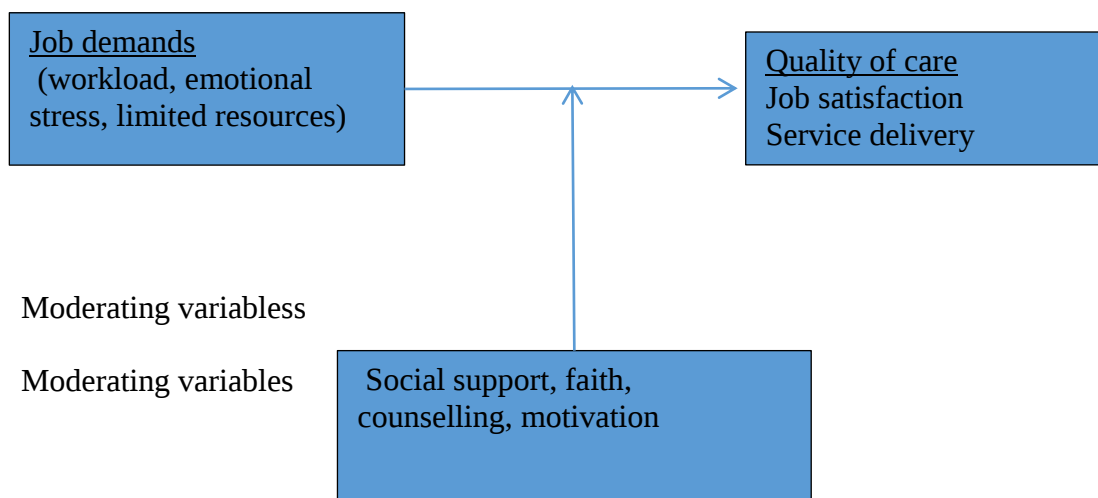
## Scholars and future researchers

The study added to academic knowledge about caregivers working with vulnerable children in Uganda. Future students and researchers could use this study as reference material when conducting research in child welfare and social work.

### 1.9 Conceptual framework

Independent variables

Dependent variable



( Source: Researcher 2025)

### 1.9 Operational definitions

**Experience.** The knowledge, feelings and perceptions individuals developed through working with vulnerable children.

**Caregiver.** Any person whether staff or volunteer directly involved in caring for or supporting vulnerable children.

**Child welfare organization.** An institution that provided care, protection and support services for vulnerable and disadvantaged children.

**Coping mechanism.** A method or strategy used by individuals to handle emotional, psychological and physical stress.

**Motivation.** The internal and external factors that drove individuals to remain committed to their duties.

## **CHAPTER TWO**

### **LITERATURE REVIEW**

#### **2.0 Introduction**

This chapter reviewed existing literature according to the study objectives which included motivational factors influencing caregivers to work with vulnerable children, challenges faced by caregivers in child care settings and coping mechanisms used by caregivers to manage stress and emotional strain.

#### **2.1 Theoretical framework**

##### **Jean Watson's human caring theory**

The study was guided by Watson's human caring theory. According to Watson, caregivers were expected to practice kindness, respect, active listening and emotional presence when supporting others. The theory emphasized the importance of love, trust, faith and holistic care in human service professions.

The theory also emphasized care, compassion, empathy and human connection in helping relationships. The theory explained that caring is not just about doing task but also about building good relationships that help children feel safe, respected and emotionally supported. The theory was used because caregivers who work with vulnerable children need to go beyond physical care and provide emotional and psychological support. It also showed how caregivers create caring relationship with children who have experienced trauma, neglect and abandonment.

#### **2.2 Motivational factors influencing caregivers to work with vulnerable**

Globally, research showed that working with children is not mainly about money instead caregivers are motivated by personal, social and moral reasons. According to Deci and Ryan (2017), people in care related jobs are often motivated more by

intrinsic motivation, personal satisfaction and inner values than external rewards like salary. Many caregivers choose this work because they find meaning and fulfillment in helping children grow and heal.

Compassion and empathy. Research in Europe and North America showed that caregivers developed strong bonds with children especially the children that had experienced trauma, these bonds encouraged caregivers to give steady care, guidance and protection even in tough situations (Wilberforce et al, 2019).

Caregivers were also motivated by a sense of moral duty and social responsibility. Many caregivers saw their work as protecting children's right and promoting social justice. The United Nations Convention on the Rights of a Child emphasized that adults and institutions must make sure that children are safe and cared for. Caregivers who strongly believed in child rights were more committed despite the challenges such as low pay and heavy workloads (UNICEF, 2021).

Professional identity and career growth also motivated caregivers. Some caregivers were trained in social work, psychology, education, nursing and saw working with vulnerable children as an opportunity to use their skills meaningfully. In developed countries, recognition, promotions and ongoing training boosted job satisfaction (Maslach & Leiter, 2016).

In Africa, cultural values, society expectations and religion played a big role. Research in Kenya, Ghana and South Africa showed that communal responsibility encouraged people to care for vulnerable as part of their social duty (Amoako, 2018).

Faith and spirituality also motivated caregivers. Mwangi and Naidoo (2020) found that christian caregivers often saw their work as a calling from God. The spiritual belief helped them cope with stress and emotional challenges. In Uganda, faith based

organizations like Noah's Ark Children's Ministry attracted caregivers who valued spiritual fulfillment over money (MGLSD, 2021).

Personal life experiences also motivated caregivers. According to Kyomuhendo (2020), people who experienced poverty, neglect or loss as children often choose this work because they want to protect other children from similar suffering.

### **2.3 Challenges faced by caregivers working with vulnerable children**

The common challenge was emotional exhaustion. Caregivers listened to children's painful stories, manage behavior issues and handled emotional issues everyday. With time, this caused compassion fatigue which left caregivers drained and less able to empathize (WHO, 2022).

Heavy workload was another challenge. Many organizations had few staff members which forced caregivers to care for many children at once. Research in US and UK showed that too much work reduced the ability to give individual attention and increased stress (Smith & Wilson, 2020)

In Africa, limited resources was also a challenge. Many child care institutions struggle with poor funding, weak infrastructure and lack of supplies. Caregivers did not have enough food, clothing, medicine and learning materials for children. This was frustrating and morally upsetting because caregivers could not fully meet children's needs (Amoako, 2018).

Another challenge was low pay and job insecurity. Caregivers in NGOs and faith based organization earned very little which caused financial stress, low morale and high staff turn over (UNICEF, 2020). some givers took extra jobs to support their families which increased fatigue and stress.

Limited training and professional development was another problem. Many caregivers started work without enough preparation in child psychology, trauma care or stress

management. Without training, they felt unprepared and overwhelmed when dealing with complex child behavior (Kyomuhendo, 2020).

Organizational and management and management issues also affected caregivers. Poor supervision, unclear job roles and weak communication created tension and confusion. Some caregivers felt unappreciated or left out of decisions which lowered motivation (MGLSD). in faith based organizations, caregivers felt pressure to sacrifice their own needs which added emotional strain.

Social stigma and lack of recognition from the community were another challenges. Child care work is often undervalued and caregivers did not always receive the respect given to other professions. This lack of societal recognition affected caregivers' self esteem and sense of professional identity (UNICEF Uganda, 2022).

Exposure to traumatic events and stories was another challenge. Children in residential care often shared experiences of abuse, neglect, abandonment and violence. Continuous exposure to trauma placed workers at risk of secondary traumatic stress. According to WHO (2022), secondary trauma could manifest through anxiety, sleep disturbances, irritability and emotional numbness. Without structured counseling and mental health support, these symptoms could over time worsen and affect workers' personal lives and job performance.

Gender challenges had also been identified in literature. In many child care institutions, female caregivers formed the majority of caregivers and were expected to display constant emotional strength, patience and nurturing behavior. This expectation placed extra pressure on women especially those who were managing family responsibilities at home . Kyomuhendo (2020) showed that female caregivers

experienced higher emotional strain because they had to balance care work at the institution and responsibilities at home.

#### **2.4 Coping mechanisms used by caregivers to manage stress and emotional strain**

Social support was one of the most effective coping strategies. Caregivers who shared their experiences, challenges and feelings with colleagues felt less isolated and more understood. Wilberforce et al (2019) showed that team work and peer support reduced stress and helped caregivers become more resilient. The informal discussions, group reflections and sharing problems helped caregivers caregivers to cope with difficult experiences.

Regular supervision was another coping mechanism. Supervisors who provided guidance, feedback and emotional support helped caregivers to handle their work demands better. According to WHO (2022), regular supervision and debriefing sessions reduced emotional exhaustion and secondary trauma.

Faith and spirituality were another coping mechanisms. According to Mwangi and Naidoo (2020), prayer, worship and belief in divine purpose helped caregivers to manage emotional pain and stress. In Uganda, many caregivers relied on faith as a source of hope and strength (Kyomuhendo, 2020).

Personal coping strategies was also another copying mechanism. Some caregivers found relief through journaling, music, exercise and spending time with family and friends. These activities helped to restore emotional balance and prevented burnout. Research also showed that heavy workloads and limited time made it hard for caregivers to practice self care (UNICEF, 2022).

Another coping mechanism was seeing positive change in children's lives.

Witnessing children heal or succeed in school gave caregivers a sense of reward and strengthened their motivation (Maslach & Leiter, 2016).

Organizational support like training, counselling services and recognition programs also helped caregivers to cope with stress and emotional strain. Institutions that invested in staff welfare created supportive work environments. Research showed that many Ugandan child care organizations lacked formal support systems (MGLSD, 2021).

## **2.5 Literature gap**

Although many studies examined child welfare institutions and well being of vulnerable children, few focused on the experiences of caregivers working with vulnerable children in faith based organizations in Uganda. Most research emphasized child outcomes, service delivery and institutional challenges with little attention given to the motivation, lived experiences and coping mechanisms of caregivers.

There was also limited research on how job demands and job resources interacted in shaping caregivers' experiences within specific organization like Noah's Ark Children's Ministry Uganda.

Therefore, this study sought to contribute to knowledge by exploring the experiences, motivations, challenges and coping mechanisms of caregivers working with vulnerable children at Noah's Ark Children's Ministry Uganda.

## **CHAPTER THREE**

### **METHODOLOGY**

#### **3.0 Introduction**

This chapter contained the methodology that was used to investigate the experiences of caregivers working with vulnerable children at Noah's Ark Children's Ministry Uganda.

#### **3.1 Research design**

The study used a qualitative descriptive research design. The qualitative approach was appropriate because the study aimed at exploring and understanding the lived experiences, feelings and perceptions of caregivers working with vulnerable children. This design allowed respondents to share their personal stories, emotions, challenges and coping strategies in their own words. It will helped the researcher gain deep understanding of caregivers' experiences rather than collecting numerical data.

#### **3.2 Area of study**

The study was conducted at Noah's Ark Children's Ministry Uganda in Mukono District. The organization provided shelter, education, health care and psycho social support to vulnerable children.

Noah's Ark was chosen as the study area because it had a large staff population of caregivers, teachers, social workers, medical staff and volunteers.

#### **3.3 Sources of information**

The study used primary data only. Data were collected directly from caregivers working at Noah's Ark Children's Ministry Uganda through in depth interviews.

Respondents included caregivers, social workers, teachers, counselors and other staff directly involved in caring for vulnerable children.

### **3.4 Study population**

The study population will consisted of all staff directly involved in the care and support of vulnerable children at Noahs Ark Childrens Ministry Uganda in Mukono District. These included caregivers, social workers, teachers, counselors, medical staff, administrators and volunteers.

### **3.5 Sample size and sample determination**

The study will used a sample size of 20 to 25 participants. This number was appropriate for qualitative research because it allowed the researcher to collect detailed information from each participant. The final number depended on data saturation which means interviews continued until no new information emerged.

Participants were selected purposively based on their experience and involvement in caring for vulnerable children.

### **3.6 Sampling techniques**

The study will used purposive sampling. It allowed the researcher to select respondents who had direct experience in caring for vulnerable children and were knowledgeable about the topic. This ensured that the information collected was relevant and meaningful to the study objectives.

### **3.6 Variables and measurement**

The main variables in the study were experiences of caregivers, challenges they faced and coping mechanisms they used to manage stress and emotional strain. Experiences of givers were measured by asking respondents to explain their daily tasks, emotional experiences and how they perceived their work environment, challenges they faced

were measured by asking about difficulties related to workload, emotional stress, lack of resources and organizational support and coping mechanisms were measured by asking participants about the strategies they used to manage stress, emotional strain and work demand.

### **3.7 procedure for data collection**

Approval was first sought from the research supervisor and introductory letter was obtained from the faculty of social sciences, Uganda Christian University. The letter was presented to the management of Noah's Ark Children's Ministry Uganda to request permission to collect data. After then the researcher identified participants and sought permission from each one and data were collected using written notes with permission of the participants.

### **3.8 Data collection instruments**

The research used an interview guide as the main tool for collecting data. The guide contained open ended questions which allowed participants to freely share their experiences.

### **3.9 Quality and error control**

To ensure the reliability and validity of the data, the researcher pretested the interview guides with a few participants outside the study area to identify unclear questions and make necessary corrections.

The research supervisor reviewed the tools to ensure clarity and relevance to the study objectives. Data were cross checked daily and interview transcriptions were reviewed multiple times to ensure accuracy and completeness.

### **3.10 Data processing and analysis**

The data was analyzed using thematic analysis. According to Sevilla (2023), thematic analysis involves identifying patterns and themes in the data to understand people's experiences.

The researcher transcribed the written notes, read through the transcripts several times to gain familiarity with the data. Important statements and recurring ideas were identified and coded. Similar ideas were grouped into themes such as motivation, emotional experiences, challenges and coping mechanisms and presented the findings in a narrative form supported form and supported with direct quotations from participants.

### **3.11 Ethical considerations**

The researcher observed ethical principles throughout the study. Participants will be informed about the purpose of the study and will voluntarily agree to participate. Names and identifying details were not included in the final report to maintain confidentiality. Participants were informed that they could withdraw from the study at any time without any consequences. The researcher ensured that no physical, psychological and social harm came to participants during the study.

### **3.12 Methodological constraints**

The study may faced challenges like limited financial resources which affected transport and communication during data collection, busy work schedules made it difficult for some staff to find time for interviews.

Emotional sensitivity was another challenges as some participants found it difficult to discuss stressful and traumatic experiences. There was also possible reluctance from caregivers who feared being judged.

## **CHAPTER FOUR**

### **PRESENTATION, INTERPRETATION AND DISCUSSION OF FINDINGS**

#### **4.0 Introduction**

This chapter include the presentation, interpretation and discussion of findings from research on *the experiences of caregivers working with vulnerable children a case study of Noah s Ark Children's Ministry Uganda*. The researcher transformed the raw data into findings and interpretation by grouping the data into codes and themes and the findings are presented according to the objectives of the study.

#### **4.1 Analysis and interpretation of findings**

Using the data that was collected through the interviews, the researcher was able to analyze the data and came out with the following findings which helped the research to understand the experiences of caregivers working with vulnerable children.

##### **4.1.1 Motivational factors influencing caregivers to work with vulnerable children**

Based on the interview conducted with 22 respondents, the findings show that caregivers are motivated by compassion and love for children, a senses of calling from God, personal life experiences, emotional satisfaction from seeing positive changes in children and the development of close relationship with children to help them them remain committed to their work despite the challenges they face.

##### **Compassion and love for the children**

The findings showed that the most most common motivation among caregivers is compassion and love for children. Out of the 22 respondents, 10 mentioned that they were driven by their deep concern for the well being of children.

Many participants explained that they feel emotionally touched when they see children suffering, neglected, lacking basic needs hence this responses pushed them to start working with vulnerable children.

For example, respondent 3 explained that they joined the organization because they love children and feel the need to help whenever they see a child in pain. **Quotation from respondent 3** *“I joined this organization because I love children, when I see a child suffering I feel touched and want to help.”* respondent 15 added that caring for children gives them happiness especially when they know that some of these children have no one else to depend on. **Quotation from respondent 15** *“I feel happy when I care for these children because some of them have no one else.”* This shows that love and compassion motivate caregivers and keep them dedicated to their work.

### **Calling from God**

The study also found out that faith and religious beliefs motivate caregivers. 6 respondents said that they see their work as a calling from God and they believe that they were chosen to serve vulnerable children.

Participants explained that even when the work becomes difficult, they remind themselves that they are serving God which gives them strengths to continue.

**Quotation from respondent 1** *“even when the work is hard, I remind myself that I am serving God by helping these children.”* This shows that faith gives emotional and spiritual support to caregivers which helps them to stay strong especially during difficult circumstances.

### **Personal life experiences**

Some participants mentioned that their personal life experiences influenced their decision to work with vulnerable children. These caregivers had gone through difficult situations in their own childhood and because of this, they are able to

understand what vulnerable children are going through. For example, one respondent said that they grew up in a challenging environment and this made them to develop a strong desire to help children who are facing similar problems. **Quotation from respondent 19** *“I also grew up in a difficult situation, I understand what these children go through so I want to support them.”*

### **Emotional satisfaction from seeing positive changes in children**

The findings also showed that caregivers are motivated by positive changes they see in children. Participants explained that they feel encouraged when they see children improving in behavior, education and their well being. One participant said that watching children grow into responsible people gives them the strength to continue working. **Quotation from 4** *“watching them grow into responsible people gives me strength to continue.”* This shows that caregivers feel proud and satisfied when their efforts produce good results.

### **Close relationship with children**

The findings also showed close relationships with children also motivated caregivers. participants said that the children see them as their parent and feel free to share their problems. **Quotation from respondent 14** *“the children see me as their mother and they share their problems with me.”* This shows that strong bonds with children make caregivers feel valued and important in the lives of the children.

Therefore, the findings showed that compassion and love for children, faith, personal experiences and emotional satisfaction influenced caregivers to work with vulnerable children.

#### **4.1.2 Challenges faced by caregivers working with vulnerable children**

Findings from the interviews showed that caregivers face many difficulties in their work which affect how well they are able to support the children. The main challenges identified from the interview responses include heavy workload, emotional strain from children's experiences, lack of enough materials, limited support from the organization and emotional exhaustion and stress.

##### **Heavy workload**

The research found that heavy workload is one of the biggest challenges faced by caregivers. Out of 22 respondents, 9 mentioned that they are responsible for taking care of many children with very few staff members which makes their work tiring and stressful. Caregivers explained that because of the large number of children, it becomes difficult to give each child enough attention and care. One respondent said that sometimes there are very few staff members available yet there are many children to look after which lead to exhaustion and another respondent added that because of many responsibilities, they are not able to focus on each child individually. **Quotation from respondent 1** *“sometimes we are few staff with many children. It becomes tiring.”* **Quotation from respondent 21** *“you may not give attention to each child because of many responsibilities.”* This shows that the workload is too much for the available caregivers and this can affect the quality of care given to children.

##### **Emotional strain from children's stories**

Another challenge identified is the emotional pain caregivers feel when listening to children's stories. 6 respondents said that listening to children's stories can be heartbreaking. One respondent said that some stories are so painful that they continue

thinking about them even after work. **Quotation from respondent 4** “*some children tell very painful stories about abuse which can break your heart. At times I go home thinking about their problems*” This shows that care giving is emotionally challenging and constant exposure to such situations can affect caregivers mental health and make them feel stressed. It also shows the need for emotional support for caregivers so that they can cope with difficult experiences.

### **Shortages of materials**

participants explained that shortages of basic items such as food, clothing and learning materials make their work more difficult. One respondent said that sometimes the resources available can not support all the children well. **Quotation from respondent 17** “*sometimes resources are not enough to meet the needs of all the children.*” This can lead to frustration among caregivers because they are not able to fully help the children as they expect.

### **Limited organizational support**

Although few respondent 3 out of 22 felt that they receive enough support, most caregivers explained that they do not always receive enough help in their daily work. This lack of support increases the pressure on caregivers and makes their work more stressful.

### **Emotional exhaustion and stress**

The research also showed that many caregivers experience emotional exhaustion and stress. 5 respondents said that they often feel tired emotionally especially after dealing with difficult situations involving children. Participants explained that handling cases,

their personal and family responsibilities makes their lives ore stressful. **Quotation from respondent 17** *“balancing work and family responsibilities is not easy.”*

Another respondent mentioned feeling emotionally drained after dealing with challenging cases and others explained that balancing work and family life is not easy.

**Quotation from respondent 1** *“sometimes I feel emotionally drained especially after handling difficult cases.”* This shows that emotional exhaustion affect caregivers health and reduce their ability to give quality care.

#### **4.1.3 Coping mechanisms used by caregivers working with vulnerable children**

The main coping mechanisms identified from the interview responses include prayer and faith, sharing experiences with colleagues and supervisors, personal self care and satisfaction from children's success.

##### **Prayer and faith**

The research found that prayer and faith are the most common coping mechanisms used by caregivers. Out of 22 respondents, 11 said that they rely on prayer to manage stress. caregivers explained that prayer gives them strength, comfort and hope when they are going through difficult situations.

participants said that whenever they feel stressed, they pray and get relieved after.

**Quotation from respond 3** *“prayer gives me strength. When I feel stressed, I pray and feel comforted.”* Another also explain that prayer helps them believe that things will get better. **Quotation from respondent 6** *“prayer helps me believe that everything will be okay.”* This shows that faith helps caregivers to remain calm and positive even when the work becomes difficult.

### **Sharing experiences with colleagues and supervisors**

Participants explained that discussing their problems helps them to feel supported and understood. Participants said that they talk to other workers when they are stressed and sometimes supervisors guide them on how to handle difficult situations.

**Quotation from respondent 2** “*we talked to each other when we are stressed, supervisors sometimes guide us when we face challenges.*” This shows that sharing experiences helps caregivers to find solutions to problems and reduces feelings of being alone.

### **Personal strategies for self care**

Participants also explained that they engage in activities such as resting, listening to music, spending time with family and taking breaks and quiet time alone. They also explained that spending time with family after work helps them relax and feel better.

**Quotation from respondent 8** “*after work, I spend time with my family to relax.*”

Another mentioned that listening to music and being alone for some time helps them to calm down. **Quotation from respondent 12** “*I sometimes listen to music or take quite time alone.*” These activities help caregivers to refreshen their minds and bodies after a long and stressful day.

### **Emotional satisfaction from seeing children succeed**

The findings also showed that caregivers feel motivated and less stressed when they see positive changes in the children. Participants explained that seeing children improves gives them joy and encouragement. One caregiver said that when a child who was once shy becomes confident, it makes them feel proud and happy.

**Quotation from respondent 15** *"when a child who was once withdrawn becomes confident, it encourages me."* This shows that the success of the children gives caregivers a sense of achievement.

## **4.2 Discussion of findings**

### **4.2.1 Motivational factors influencing caregivers to work with vulnerable children**

Research objective one sought to analyze the motivational factors that influence caregivers to work with vulnerable children at Noahs Ark Children's Ministry Uganda. The findings showed that 10 out of 22 respondents were motivated by compassion and love for vulnerable children, 6 respondents were motivated by faith and calling from God, 3 were motivated by personal life experiences and 2 respondents were motivated by satisfactions from seeing vulnerable children grow and succeed.

The findings from the study are in line with UNICEF (2021) which emphasizes that caregivers working in welfare institutions are largely driven by intrinsic motivation such as empathy, altruism and commitment to service. According to WHO (2022), individuals engaged in child protection services are often motivated by humanitarian values and a desire to promote child well being rather than financial incentives.

The findings are also in line with Watsons human caring theory (2008) which emphasizes love, compassion and authentic presence in caring relationships.

The findings also showed that personal calling and faith motivated caregivers to work with vulnerable children. Many respondents believed they are serving God by caring for vulnerable children, this is in line with WHO (2022) which shows that spirituality enhances resilience and job satisfaction in faith based child care institutions.

The findings also showed that some caregivers were influenced by their own childhood experiences. Respondents who had experienced hardship said that this personal

experiences increased empathy toward vulnerable children. This aligned with social learning theory by Bandura (1977) which explains that personal experiences shape attitudes, behaviors and motivations.

Respondents also emphasized feeling proud when children succeed. This is in line with UNICEF (2021) which emphasize that positive child outcomes reinforce professional commitment and reduce burnout in helping professions.

#### **4.2.2 Challenges faced by caregivers working with vulnerable children**

Objective two of the study sought to the challenges faced by caregivers working with vulnerable children. The findings showed that 9 out of 22 respondents reported heavy workload as a major challenge. Caregivers explained that being responsible for many children makes the work demanding and limits the attention given to each child.

The study also found that 6 out of 22 respondents experienced emotional stress when listening to children's painful stories. This is in line with UNICEF (2021) which shows that professionals working with traumatized populations often experience emotional exhaustion and compassion fatigue. The findings also relate to Ecological systems theory which emphasizes that children's well being depends on supportive relationship within their immediate environment.

The study also showed that 4 out of 22 respondents reported limited resources like materials and support services. This is in with WHO (2022) where child care institutions operate under financial constraints. Resource limitations may affects effective service delivery and increase frustration among caregivers.

The findings also showed mixed responses about organizational support. 3 out of 22 respondents showed the need for more counselling and training and others felt support was enough.

#### **4.2.3 Copying mechanisms used by caregivers to manage stress and emotional strain**

Objective three sought to explore copying mechanisms used by caregivers to manage stress and emotional strain. The findings showed that 11 out of 22 respondents relied on prayer and faith to manage stress. The finding is in line with WHO (2022) which shows that spirituality is a common coping strategy among caregivers in African faith based institutions.

The study also found that 5 out of 22 respondents relied on peer support from colleagues. Caregivers shared experiences and encouraged each other during difficult situations. This is in line with social support theory which emphasizes that emotional and practical support from colleagues reduces stress and improves psychological well being.

The study also found out that 4 out of 22 respondents used personal self care strategies like listening to music, resting and spending time with family were also reported by caregivers. Studies shows that self care is important in preventing burn out in helping professions.

Caregivers who balance work responsibilities with personal relaxation are better able to maintain emotional stability.

4 respondents out of 22 respondents was seeing change in children as a coping mechanism. Observing improvement in children's behaviors and confidence When caregivers observed improvement in children's behavior and confidence renewed caregivers motivation and strengthened their resilience.

## **CHAPTER FIVE**

### **SUMMARY, CONCLUSIONS AND RECCOMENDATIONS**

#### **5.0 Introduction**

This chapter include the summary of the findings, conclusions and recommendation

#### **5.1 Summary of the findings**

##### **5.1.1 Motivational factors influencing caregivers to work with vulnerable children**

The findings showed that caregivers at Noah s Ark Children's Ministry Uganda are largely motivated by intrinsic factors. Respondents showed compassion and love for vulnerable children as a major motivational factor. Many caregivers expressed deep emotional attachment to the children and described their work as meaningful and fulfilling.

Calling from God and faith were also major sources of motivation. Many respondents see care giving as a spiritual meaning and believed they are serving God through their work.

Personal life experiences especially experiences of hardship during childhood influenced some caregivers to develop empathy toward vulnerable children. These experiences changed their attitudes and strengthened their desire to support children facing similar challenges.

Another motivational factor included seeing children grow and succeed. Caregivers emphasized feeling proud and encouraged when children improved and succeeded.

### **5.1.2 Challenges faced by caregivers working with vulnerable children**

Heavy workload was the most frequent reported challenges. Many caregivers are responsible for a large number of children which limits their ability to provide individualized attention.

Another major challenge was emotional stress. Caregivers are exposed to children's experiences like abuse, neglect and abandonment. Listening to these stories and managing children's behaviors and emotional needs caused emotional strain and in some cases burnout and compassion fatigue.

Limited resources and organizational support also affect the quality of service delivery. Respondents reported that shortages of essential materials and financial constraints sometimes affected service and delivery and caused frustration among the caregivers.

### **5.1.3 Copying mechanisms used by caregivers to manage emotional strain and stress**

Prayer and faith were the most common copying mechanisms. Many caregivers relied on spirituality for strength, comfort and hope during difficult situations.

Peer support was another important coping mechanism. Caregivers shared experiences with colleagues, encouraged one another and give emotional support during stressful moments. The teamwork reduced feelings of isolation and boosted morale.

Personal self care strategies like resting, listening to music and spending time with family were also reported as ways of managing emotional strain and stress.

Witnessing positive transformation in children also served as copying mechanism. Seeing children improve and succeed encouraged caregivers to strengthen their resilience.

## **5.2 Conclusion**

Caregivers at Noah's Ark Children's ministry Uganda are primarily motivated by intrinsic factors like compassion, love, faith and emotional fulfillment.

Caregivers face challenges such as heavy workload, stress and limited resources.

Exposure to children's painful stories increase the risk of burnout and emotional strain.

Caregivers rely mostly on prayer, peer support and personal self care strategies to cope with stress.

## **5.3 Recommendations**

### **To management of Noah's Ark Children's Ministry**

The management should recruit additional caregivers in order to reduce workload to enhance individualized attention and reduce exhaustion

### **To government and policy makers**

Government should increase financial and technical support to child care institutions caring for vulnerable children.

### **To social workers and community leaders**

Social workers and community leaders should strengthen community based partnerships to reduce over reliance on institutional support and promote family and community support system for vulnerable children.

## Reference

- Amoako, R. (2018). Challenges facing childcare institutions in Africa: A review of staffing, funding and psychosocial support. *African Journal of Social Work*, 8(2), 45-57.
- Demerouti, E, Bakker, A. B, Nachreiner, F, & Schaufeli, W. B. (2001). The Job Demands Resources model of burnout. *Journal of Applied Psychology*, 86(3), 499-512.
- Maslach, C, & Leiter, M. P. (2016). Burnout in the workplace: A psychological perspective. *Annual Review of Organizational Psychology and Organizational Behavior*, 3, 397-422.
- Mwangi, P, & Naidoo, P. (2020). Motivation and challenges of caregivers in children's homes in East and Southern Africa. *Journal of Child and Adolescent Social Work*, 37(4), 325-338.
- UNICEF. (2020). Caring for caregivers: Stress, burnout and support needs among childcare providers. UNICEF Regional Office for Eastern and Southern Africa.
- UNICEF. (2023). The state of the world's children: For every child, care. UNICEF.
- UNICEF Uganda. (2022). Child protection and welfare report: Status of orphans and vulnerable children in Uganda. UNICEF Uganda Country Office.
- Achen, C. (2020). Workplace support and employee well being in child care institutions in Uganda. Makerere University Press.
- Alemu, B. (2019). Professional development and burnout among caregivers in residential child care. *Journal of Social Welfare Studies*, 14(2), 45-59.
- Amoako, R. (2018). Motivational factors influencing social service workers in Ghana's child welfare institutions. *African Journal of Social Work*, 8(1), 30-41.

- Armstrong, M. (2014). *Armstrong's handbook of human resource management practice* (13th ed.). Kogan Page.
- Armstrong, M, & Taylor, S. (2020). *Armstrong's handbook of human resource management practice* (15th ed.). Kogan Page.
- Cohen, S, & Wills, T. A. (1985). Stress, social support, and the buffering hypothesis. *Psychological Bulletin*, 98(2), 310-357.
- Deci, E. L, & Ryan, R. M. (2000). The “what” and “why” of goal pursuits: Human needs and the self determination of behavior. *Psychological Inquiry*, 11(4), 227-268.
- Figley, C. R. (2017). *Compassion fatigue: Coping with secondary traumatic stress disorder in those who treat the traumatized*. Routledge.
- Gibson, A. (2019). Intrinsic motivation among social workers in child welfare institutions. *Child & Youth Services Review*, 102, 50-59.
- Gross, J. J. (2015). Emotion regulation: Current status and future prospects. *Psychological Inquiry*, 26(1), 1-26.
- Herzberg, F. (1959). *The motivation to work*. John Wiley & Sons.
- International Labour Organization. (2022). *Improving working conditions for social service workers in low-income countries*. ILO Publications.
- James, R, & Gilliland, B. (2017). *Crisis intervention strategies* (8th ed.). Cengage Learning.
- Kadushin, A, & Harkness, D. (2014). *Supervision in social work* (5th ed.). Columbia University Press.
- Kabayego, S. (2020). Faith-based motivation among child care workers in Uganda. *Journal of African Social Development*, 5(1), 66-79.
- Kabasomi, E. (2020). Faith and resilience among caregivers in children's ministries in East Africa. *African Journal of Pastoral Care*, 12(2), 89-103.

- Kearney, J, Childs, G, & Sullivan, R. (2014). Secondary trauma and burnout among residential child care workers. *Journal of Child Welfare Practice*, 18(3), 45-59.
- Koenig, H. G. (2018). *Religion and mental health: Research and clinical applications*. Academic Press.
- Kumari, S. (2018). Institutional challenges in orphanages of developing countries. *International Review of Social Work*, 6(2), 112-128.
- Kumar, P. (2020). Time management strategies and stress reduction in human service professions. *Journal of Workplace Health*, 7(1), 40-52.
- Kyomugisha, J. (2021). Spiritual motivation and emotional resilience among caregivers in Ugandan children's homes. *Uganda Journal of Social Sciences*, 12(1), 23-38.
- Lazarus, R. S, & Folkman, S. (1984). *Stress, appraisal, and coping*. Springer.
- Lwanga, S. (2019). Emotional fatigue among caregivers in Kampala's children's homes. *East African Journal of Psychology*, 4(1), 55-70.
- Maslach, C, & Leiter, M. P. (2016). *Burnout: A multidimensional perspective*. Psychology Press.
- Ministry of Gender, Labour and Social Development. (2021). *Report on the status of child care institutions in Uganda*. Government of Uganda.
- Mugisha, A. (2018). Volunteerism and child welfare service delivery in Uganda. *Makerere Journal of Social Sciences*, 10(3), 14-27.
- Mugisha, E, & Nyanzi, S. (2021). Employee recognition and retention in Uganda's social service sector. *Journal of Human Resource Development in Africa*, 18(2), 77-92.

- Mwangi, P, & Naidoo, L. (2020). Faith based motivation and job satisfaction among caregivers in Kenya and South Africa. *Journal of Social Development in Africa*, 35(1), 101-119.
- Nair, R. (2020). Multi role stress among social service workers in low-resource child care centers. *International Journal of Human Services*, 11(2), 65-80.
- Nezu, A. M, Nezu, C. M, & D’Zurilla, T. J. (2013). *Problem solving therapy: A treatment manual*. Springer.
- Odongo, J. (2019). Leadership styles and caregiver motivation in Kenyan children's homes. *East African Journal of Social Work*, 7(2), 88-102.
- Pargament, K. I. (2011). *Spiritually integrated psychotherapy: Understanding and addressing the sacred*. Guilford Press.
- Ryan, R. M, & Deci, E. L. (2017). *Self-determination theory: Basic psychological needs in motivation, development, and wellness*. Guilford Press.
- Schaufeli, W. B, & Bakker, A. B. (2004). Job demands, job resources, and their relationship with burnout and engagement. *Journal of Organizational Behavior*, 25(3), 293-315.
- Tomalin, E. (2018). *Religious motivations in development work*. Routledge.
- UNICEF. (2021). *Child protection and caregiving practices around the world*. UNICEF Publications.
- UNICEF. (2022). *Status of child care institutions in East Africa*. UNICEF Regional Office.
- World Health Organization. (2020). *Mental health and psychosocial support for caregivers in institutional settings*. WHO Press.
- Parker, C. (2019). Sampling methods in qualitative research: Enhancing rigor and credibility. *Qualitative Social Research Journal*, 20(3), 45-58.

Spector, P. (2019). Research methods for the behavioral sciences (2nd ed.). Sage Publications.

Sevilla, C. G. (2023). Research methods: Thematic analysis explained (4th ed.). Rex Bookstore.

Setia, M. S. (2016). Methodology series: Cross sectional studies. Indian Journal of Dermatology, 61(3), 261-264.

## **APPENDIX I. INTERVIEW GUIDE**

### Introduction to respondents

Good morning/afternoon. My name is Mark Seeti, a student from Uganda Christian University. I am conducting a study on the *experiences of caregivers working with vulnerable children at Noah's Ark Children's Ministry Uganda*.

The purpose of this interview is to understand your experiences, motivations and challenges as a caregiver. Your responses will be kept confidential and used only for academic purposes. Your participation is voluntary and you may stop at any time.

### SECTION A

#### Demographic information

1. Can you tell me about your role in this organization?
2. How long have you worked here?

### SECTION B

To analyze the motivational factors that influence caregivers to work with children.

1. What motivated you to start working with vulnerable children?
2. What makes you continue working here even when the work is difficult?
3. How did you feel about caring for vulnerable children?
4. can you describe your relationship with the vulnerable children you look after?

### SECTION C

To examine the challenges faced by caregivers in providing care and support to children.

1. What challenges do you face in your work as a caregiver?

2. How does workload affect your ability to care for children?
3. Do you receive enough support from the organization? Please explain.
4. What challenges affect your emotional well being?

#### SECTION D

To explore the coping mechanisms used by caregivers to manage stress and emotional strain.

1. How do you cope with stress in your work?
2. Do you receive emotional or professional support from colleagues or supervisors?
3. How does prayer or faith help you cope with stress?
4. What helps you stay motivated in your work?

## APPENDIX II: INTRODUCTORY LETTER

