

**THE CONTRIBUTION OF COMPASSION ASSISTED PROJECTS TOWARDS  
PSYCHO-SOCIAL WELBEING OF OVC IN  
MBALE DISTRICT**

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## DECLARATION

I, **Zalika Abby Yunus** hereby declare that all the work contained in this research Report is my own original work and that I have not previously in its entirety or in part submitted it to any University for a degree or a diploma.

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**APPROVAL**

I certify that this research study has been done under my supervision and that it's ready for submission.

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## **LIST OF ACRONYMNS**

CDC	Child Development Centre
CIU	Compassion International Uganda
CRC	Convention of Rights of Children
ICP	Implementing Church Partner
LSI	Life skills Improvement
MDG	Millennium Development Goals
NCCT	Needy children caretakers
NGO	Non-Governmental Organization
OVC	Orphans and Vulnerable Children
UNDP	United Nations Development Programme
UNICEF	United Nations Children's Fund

## ABSTRACT

Compassion is being a Christian child development ministry that is motivated by faith to assist children and their families who are living in poverty regardless of their beliefs, gender or background. Holistic child development that takes a child through a process of growth and fulfilment in all dimensions of their life: spiritually, economically, socio-emotionally and physically. This study was carried out in Mbale District and was guided by the following objectives, finding out the role of Compassion assisted Projects towards Psychosocial Wellbeing of OVC, investigating into the relevance of Compassion assisted Projects towards Psychosocial Wellbeing of OVC and assessing on the impact of Compassion assisted Projects towards Psychosocial Wellbeing of OVC in Mbale District. A descriptive survey design was used since the sample size was quite large. This survey design was used to gather information from across sector of respondents at a single point in time as the design therefore put into consideration at all steps involved concerning the assessment of compassion assisted projects towards health, education and skills improvement of children and caretakers in Mbale District. Quantitatively, the researcher employed the questionnaires in the data collection from across sections of respondents and qualitatively, she also equally employ documentation and interview schedules to get both primary and secondary data. The sample size was derived from the population of 120 beneficiaries, using a confidence interval of 95% and margin of error of 0.5% as described and a sample of 93 respondents were obtained.

The findings of this study were that, In Uganda, International child sponsorship is offered in various ways by a large number of NGOs as a means to alleviate child poverty. While the sponsoring of individual children has been criticized for its divisive effects, furthermore, Children have gained skills in vocational related courses through which are able to support their families especially their siblings, for example, courses in brick laying and making these Children have been also able to reach their dream goal as they have attained many professions at different levels of education including certificates, diplomas, degrees among others and they have become self-sustaining. However, the research also recommends that, it is important for compassion project management team to strengthen its monitoring and evaluation systems through internal controls, internal audits particularly on the areas of health, to make sure that the children and caregivers receive health services from qualified personnel

# CHAPTER ONE

## GENERAL INTRODUCTION

### 1.0 Introduction

This chapter will present the background to the study, statement of the problem, general objective of the study, specific objectives of the study, research questions, research hypotheses, significance and justification of the study, conceptual framework and operational definition of key terms and concepts that will be used in the study.

### 1.1 Background of the study

This study is to examine an assessment of compassion assisted projects towards psychosocial wellbeing of OVC in Mbale district in the areas of health, education and skills to children and caregivers. Compassion International started in 2018 when American evangelist Everett Swanson's heart was broken seeing children orphaned by the Korean War dying in the streets. Although he was ministering to troops at the time, he left South Korea promising to help 35 children. By 2021, Compassion International had expanded to 17 other developing countries with more than 25,000 sponsored children.

Today, Compassion is transforming the lives of more than 1.7 million children, babies and students in 26 developing countries, through 12 international partner countries. As of June 2018, more than 105,476 children are supported by more than 78,100 Australian sponsors through Compassion Australia which has spread to other countries like Uganda and other African Countries in Africa, Dalen et 'al (2022).

Compassion is one of Australia's biggest international child development organizations and one of the top fundraising charities in the world. As part of Compassion International, a global network of more than 12 funding countries and 26 developing countries. Compassion Australia is a Christian holistic child development and child advocacy ministry. Compassion is committed to working in partnership with local churches in Africa and in Uganda in particular to foster the spiritual, economic, socio-emotional and physical development of children living in extreme poverty. Reported by Pareto Fundraising Annual Report (2023). Riana Mullins 2021).

Shared corporate services, including the oversight of all child development programs, are managed by Compassion International at Global Ministry Centre in Colorado Springs, Colorado, USA. All these aim at implementing Compassion's child development model in partnership with local churches in the developing world. This ensures that local congregations in developing countries are the catalyst for their own community's change. Child development centres become part of the local church's ministry and are overseen by the pastor, centre director and a church project committee. They receive curriculum support from Compassion but contextualize the interventions they provide as needed. The local church is also accountable for the funds that Compassion provides and is responsible for providing information that is used for reporting to supporters/Funders.

Compassion is being a Christian child development ministry that is motivated by faith to assist children and their families who are living in poverty regardless of their beliefs, gender or background. Holistic child development takes a child through a process of growth and fulfilment in all dimensions of their life: spiritually, economically, socio-emotionally and physically. Compassion believes holistic child development is a long-term approach that starts even before a child is born and continues through school age and beyond. Compassion's four programs-Child Survival Program, Child Sponsorship Program, Leadership Development Program, and Critical Interventions work together to ensure each child's holistic needs are met. Bernard Nathan (2020).

This ensures and draws its concern on Physically healthy, Confident and interacting well with others, Eager to experience their world and communicate their experiences and they also aim for a caregiver to be: Sufficiently healthy to provide for the child's wellbeing, Self-confident, able to care for the child's basic needs, and in healthy relationships, According to Geoyesta Helna (2019).

The Child Survival Program is delivered primarily through home-based activities and home visits, and supplemented by church-based group activities, such as training mothers in skills like income generation and literacy. In financial year 2018, caregivers and babies received: Pre-and post-natal care, including check-ups and vaccinations, Nutritious food and supplements, Education on essential topics like signs and symptoms of complications in pregnancy, and caring for children. Personal hygiene, health, and nutrition education, Opportunities for both mothers

and children to build relationships and social skills, Income generation opportunities, the opportunity to experience the love of Jesus.

## **1.2 Statement of the problem**

Compassion as an International Christian Holistic Child Development Ministry is motivated by faith to assist children and their families who are living in poverty regardless of their beliefs, gender or background to attain the child development outcomes. Compassion has a child development model in which Compassion international and the sponsor's partner with local churches in the developing countries together with the affected families to deliver services to the needy children in their respective communities and households. Within this model there's hierarchy of division of roles.

However, the projects in Mbale district were not attaining the desired goals due to the following challenges. Firstly the needy children are losing sponsorship because they do not participate fully as required, this makes them to be departed according to the Partnership Field Manual standards (PFM 2.02 page 90 section 4.21, standard 1.3).

Participation is one of four guiding principles of the UN Convention on the Rights of the Child (CRC). The Convention upholds the right of children (defined as individuals under the age of eighteen) to participate in decisions that affect their lives. According to the 2017 UNICEF state of the World's Children report, a child whose active engagement with the world has been encouraged from the outset, will be a child with the competencies to develop through early childhood, respond to educational opportunities and move into adolescence with confidence, assertiveness and the capacities to contribute to democratic dialogue and practices within the home, school, community and country.

The beneficiaries developed a dependency syndrome; parents want the sponsors and the project staff members to do everything for the children. Parents were neither motivated to attend meetings nor care for their children. Basically, the parents do not own the projects by complementing/ contributing to the project in the way they are supposed to do that is to give remedial contribution and work hand in hand with the project staff for the betterment of children's lives. Another challenge is that the implementers do not release funds in time to facilitate the provision of basic needs to the children especially top up money for school fees and

health care, thus sabotaging the projects' progress. And the community primitive cultural practice of girl child marriage as a source of income to parents contributes to failure to achieve the set objectives. The motivation for this study is to make an assessment of the contributions of compassion assisted projects towards psychosocial wellbeing of OVC in Mbale District

### **1.3 The purpose of the study**

The main aim of this study is to make an Assessment of the contribution of Compassion assisted Projects towards Psychosocial Wellbeing of OVC in Mbale District

### **1.4 Specific Objectives**

The specific research objectives of the study included:-

- (i) To find out the role of Compassion assisted Projects towards Psychosocial Wellbeing of OVC in Mbale District
- (ii) To investigate into the relevance of Compassion assisted Projects towards Psychosocial Wellbeing of OVC in Mbale District
- (iii) To assess impact of Compassion assisted Projects towards Psychosocial Wellbeing of OVC in Mbale District

### **1.5 Research Questions**

The research questions which are derived from the research objectives included the following:-

- (i) What is the role of Compassion assisted Projects towards Psychosocial Wellbeing of OVC in Mbale District
- (ii) What is the relevance of Compassion assisted Projects towards Psychosocial Wellbeing of OVC in Mbale District?
- (iii) What is the impact of Compassion assisted Projects towards Psychosocial Wellbeing of OVC in Mbale District?

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

The scope of the study is in three aspects of content, time and geographical scope and this is explained as below;

### **1.6.1 Content scope**

The study was undertaken to investigate the assessment of the contributions of Compassion assisted Projects impact of Compassion assisted Projects towards Psychosocial Wellbeing of OVC in Mbale District.

### **1.6.2 Time scope**

The study ran from 2014-2023. This is because the respondents towards assessment of Compassion assisted Projects impact of Compassion assisted Projects towards Psychosocial Wellbeing of OVC in Mbale District is readily accessible to give responses towards this study with the aim of improving the life of children to restore hope through project provision of basic needs of life.

### **1.6.3 Geographical scope**

The study was carried out in Mbale District which is found in Bugisu Sub-Region, in Eastern Region of Uganda. It is approximately 231 KMs, by road, east of Kampala, the capital and largest city of Uganda. It's also bordered by Sironko in the North, Tororo in the south west and Kumi in the North West, Pallisa in the west and the republic of Kenya in the East It lies at the western foot of the extinct Mount Elgon Volcano, which is 4321 meters above the sea level. The coordinates of the district are: 01 21N, 34 03E.

## **1.7 Significance of the study**

The study findings will enable the donors to prioritise the areas of support and to make their contribution financially in time.

It will also help the sponsors to appreciate their relationship with children through the contribution they make financially, emotionally, spiritually as a contributing factor to the success completion of their individual supported children.

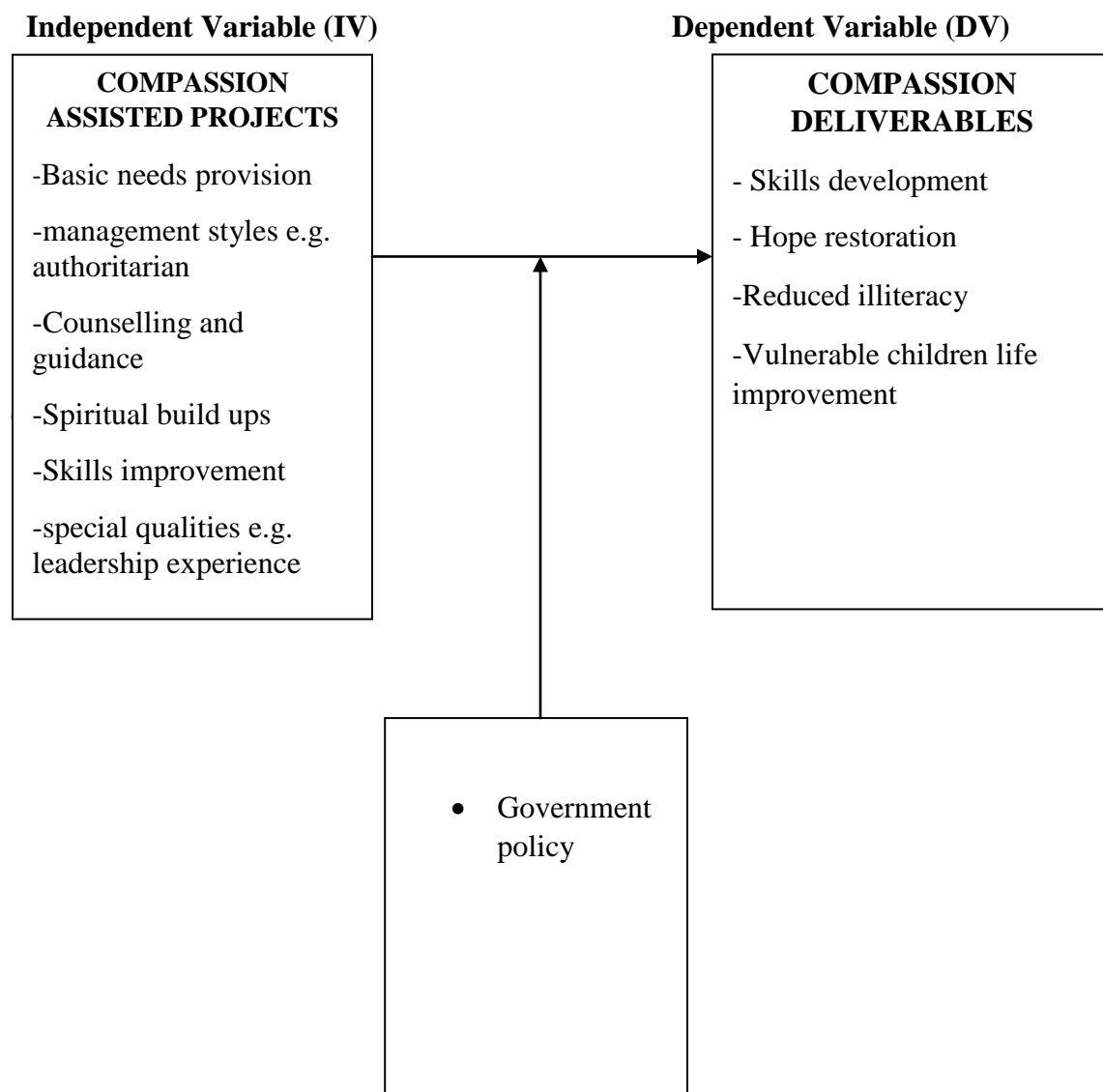
The study is also significant to the caregivers to embrace their role of supporting registered children to make proper utilization of the gifts children receive, participate in caregiver's meetings, make their local contribution to the project, to be responsible for their children for the

sustainability of the project and registered children at the project to take on their role of participation at the project activities for their successful completion.

This study will be helpful to the employees to identify priority areas to make the implementations in, for the benefit of children and proper utilisation of donor funds.

The research student shall get an award of bachelor's Degree in social work and social administration of Uganda Christian University. The significance of this study is to inform

### 1.8 Conceptual Framework.



Source: Researcher, (2024)

**Fig 1. Conceptual Framework:** Conceptual frame work provides a structural representation of the independent variable (IV) and the dependent variable (DV) it also shows moderating factors. An independent variable is a stand-alone factor and is not changed by other variables. A dependent variable on the other hand is a factor that depends or can be changed by other factors.

Compassion assisted projects play the function of providing the basic needs provision, management styles by project directors, counselling and guidance, spiritual build ups to the children and special qualities in leadership like the leaders' experience in turn produced deliverables such as skills development, hope restoration, reduced illiteracy and Orphan life improvement. However despite these important deliverables in the life of a needy child, it's hindered by factors such as funds delay, remedial pay challenges, inability to monitor the proper execution of programs, insufficiency of skilled instructors and conflict of interest and commitment among the stakeholders among other hindering factors that need attention for improvement for better needy child education, health and skills improvement.

### **1.9 Definition of key terms**

Education is the acquisition of knowledge from a knowledgeable and informed person who is well informed through learning process. It is a gradual process that needs patience, Commitment and determination.

**Child sponsorship program,** the act of giving material support by a donor or a sponsor to a child in need by a donor agency to the implementing agency

**Donors/sponsors,** Individuals or organizations that give financial or material aid for the purpose of improving social and economic development of the sponsorship beneficiaries in a particular society

**Health,** Is the state of wellbeing free from disease syndrome and the ability of living with a piece of mind free from stress.

**Skills improvement,** this is the process to attain skills through development and acquisition of skills to perform to the best of their ability.

**Church Partner**, The specific Churches who have entered into partnership with Compassion International to conduct the Child Sponsorship Program

**Compassion International**, An organization that works in partnership with local churches and assists projects with funds so that they are able to give school fees, educational resources, spiritual, social and physical support to the sponsored children.

## **CHAPTER TWO**

### **LITERATURE REVIEW**

#### **2.0 Introduction**

This chapter reviewed the existing literature on the assessment of Compassion assisted Projects on Health, Education and Skills Improvement to Children and Caregivers in the community of Mbale District. The literature was equally reviewed in line with the objectives of the study. This will involve the use of text books, journals, internet and general articles in newspapers among others.

#### **2.1 The role of Compassion assisted Projects on Health to Children and Caregivers.**

According to James Turner (2022), he advanced that Compassion assisted projects like any other international projects to mention them, Action aid international, United States aids international development among others has played a tremendous role in the life of a needy child, Compassion meets the medical bills of the registered children, their siblings and caretakers living with HIV/Aids. Medication being one of the major basics of life of a child defines the wellbeing of children and above all have ample time to settle and study as it is said that a good health with a good mind helps one to attain success. Therefore compassion in the life of a needy child in Mbale District has been of great relevance for a healthy mind and life growth and development.

Compassion assisted projects do advance nutritional Support, Implementing Church Partners provide six months of nutritional supplements to malnourished children and caregivers and to those who could be vulnerable to malnutrition. After a period of six months, it is expected that the beneficiaries will improve, and most of them do. As they receive support, the Implementing Church Partners also help caregivers develop a sustainability plan, such as developing land to grow food or learning an income-generating skill like rearing of chicken, growing mushrooms, so that if they continue to need nutritional supplements at the end of the six months, they will be able to afford them. All caregivers are trained on infant feeding practices, food preparation, balanced diets, fruit and vegetable gardening, kitchen gardening, modern farming methods, animal rearing and income-generating skills. The caregivers use these skills to earn money and buy nutritious food for their family. Doeinra Pdara (2022).

Compassion in conjunction with the church Implementing Church Partner staff conduct an assessment of the quality of health services at the health centres, clinics and hospitals in the community where children are to receive medical services. Based on the results of that assessment, they select one or two medical service providers that have the best maternal and child health services and sign a contract with them to offer these services to registered beneficiaries. Some Implementing Church Partners are able to negotiate reduced rates for health services, and some are able to negotiate payment plans or delayed payment for services. The Implementing Church Partner covers the costs of medical services and then requests reimbursement from the country office. Compassion pays for all medical expenses incurred by the caregivers and children in the Child Sponsorship Program. There are a few services that are provided free of charge at the government health centres, such as immunizations, de-worming and vitamin-A supplements which has drastically improved on the health of the needy sponsored children in compassion assisted projects in Mbale, Calibala Taita et 'al (2016).

Children living in poverty are especially vulnerable to disease and sickness and compassion's intervention in their lives can make a big difference in their lives. When a child in poverty faces medical issues, he is even more vulnerable to the devastating effects of poverty, and this kind of intervention can literally save his life. Donors make medical donations through Compassion's medical assistance fund which will allow a child in poverty access to the best medical treatment available, regardless of cost. HIV treatment and malaria prevention, medical assistance, is given to families in poverty simply cannot afford to get treatment for their sick or hurting child. The Medical fund is used to provide for the medical expenses of children, including:

Life-saving surgeries such as transplants and trauma surgery, casts to help heal broken bones, wheelchairs and walking canes to assist with mobility, treatments for children diagnosed with cancer, counseling for children who've been injured in a traumatic accident, eye surgeries – or even a pair of desperately needed eye glasses, hearing tests and hearing aids, special dental needs, funeral expenses in the worst-case scenarios. (Compassion International, 2018, p. 90-103).

## **2.2 Relevance of Compassion assisted Projects on Education to Children and Caregivers.**

When children grow up lacking education and suffering from the effects of poor nutrition, there are adverse physical, cognitive and psychosocial consequences on their development. This is how poverty in one generation is transmitted to the next (UNICEF, 2019).

Galen Peter et al (2023), related that Compassion projects in the life of the needy children is very relevant in the sense that it has given these children hope for a bright future through meeting their education necessities such as school dues, scholastic materials including books, uniforms, food, shoes among others. To this effect therefore compassion assisted projects in the life of the needy children and the caretakers are very relevant in the community of Mbale District. Compassion plays the role of Educating and training servant leaders, Graduates from Compassion's Child Sponsorship Program who show exceptional leadership skills are recruited to participate in the Leadership Development Program (LDP). In the Leadership Development Program, unfortunately which has phased out. Children at different levels of education do receive a primary, secondary, tertiary and university education as well as intensive Christian leadership training through programs like youth camps to help them become responsible Christian Adults. Complementary interventions, Compassion's core programs, while comprehensive, do not address all the obstacles to healthy development in the lives of Compassion-Assisted children. That's why Compassion's other programs, known as Complementary Interventions, play a significant role in a holistic child development model. Therefore compassion is relevant and icon stand and remarkable in the life of the needy children who have attained education at different levels that has enabled them to have a bright future

Halladay Hallogadie (2023), shared that compassion has proved its worthy relevance in the education life of a needy child as it has provided formal Education School fees are paid for children pre-primary level, primary school level, secondary school level, pre-university and post-secondary education. This is necessary because education is not free in Uganda, and sponsorship funds are not sufficient to pay for school fees. This adds to the explanation that compassion caters sufficiency of funds through empowering the caretakers of these children with skills managerial income generating activities to earn an extra income for sustainability and support. This has indeed proved worthy its relevance due to improved education status of the children of the children going to school at 65% being sponsored by compassion

Garden Markedy (2022), said that Child developing, discipline and equipping children for life through extension of health and education services, Compassion's Child Sponsorship Program is comprehensive, holistic and unique. The program connects one child with one sponsor to help that child develop into the extraordinary individual that God ordained the child to be. Through this program children have the opportunity to flourish and grow into their God-given potential. The Child Sponsorship Program provides educational opportunities that extend beyond the classroom. Children in the program learn important life skills and are provided with health care and supplemental nutrition, as needed.

They are afforded opportunities for safe, healthful recreation. Most important, the Child Sponsorship Program gives children the chance to hear the gospel of Jesus Christ. For decades Compassion's commitment to the holistic student-centered model has not wavered. But over the years Compassion leadership decided that in order to better serve children, there was a need to expand the program so in the last decade Compassion added two essential programs that further fulfil our ministry's commitment to develop children into fulfilled Christian adults who are responsible and healthy citizens

In addition to the provision of education necessities, compassion has built up the life of the needy children spiritually which has encouraged the children to be humble and obedient retaining them at school, This indeed has enabled many children to attain their living through education as it has produced children of many professions like teachers, Accountants, social workers and hands on skills like carpenters, caterers among others which has however supported their families in the long run for a better and meaningful life to both the children and caregivers

Educational assistance, non-formal education including vocational training, money management/household budgeting, and job searching skills), parental education, disaster relief activities, micro-enterprise/income generating activities, infrastructure improvements, and water projects (Compassion International, 2018, p. 90-103)

### **2.3 Impact of Compassion assisted Projects on Skills improvement to Children and Caregivers.**

Alba Jordan 2021), advanced that Compassion's program places a strong emphasis not only on providing for the basic needs, such as school tuition and healthcare, but also on nurturing

children's life aspirations and self-esteem over what is typically a decade of participation in sponsorship programs. "Too often it has focused on development efforts on provision for human beings rather than the development of human beings," and this skills development, enhancement, empowerment and improvement and "Although child sponsorship does indeed provide help with school fees, access to health care, and other tangible benefits, Compassion's particular approach focuses on the more holistic development of the child, such as development of self-esteem, aspirations, spiritual and ethical values. In follow-up studies involving currently sponsored children, measures very large impacts in these areas, which is believed to play a significant role in what which is observed in the difference in child life outcomes through skills for sustainability

Economic support of parents/caregivers with skills of development through Income Generating Activities for self-reliance and support to their households is a development strategy that is done to the caregivers mostly to be in position to sustainably care for their households being empowered with skills of developmental activities such as poultry, weaving, knitting, baking, mushroom growing, soap making, among others with the aim of supporting the family in times of lack and or insufficiency in the line of basic needs for the children. This however has proven its stand of supplementary support to caregivers and or especially in moments of lack which has caused changed among needy households. Shauda George (2018).

Dezimedol Pleura (2022), put that Compassion acknowledges Capacity building of caregivers to support their household through being aided by the compassion staffs as a means, process and ends. Compassion sees capacity building on skills for development and empowerment through enabling the church partners to fulfil the child development model facilitated by Compassion (means) in the partnership; it brings coherence between mission, structure and activities (process); and it strengthens partners to survive and empowers them to fulfil their mission (ends). This requires a long-term perspective which happens through multiple channels, including vision-casting, reflection, training, etc. Building capacity with individuals or whole organizations involves being supportive of them in their own learning and development. Doing so requires that Compassion staff serve as facilitators, process, guides and resource persons; thus supporting people in doing things themselves. Enabling people/ caregivers to work through this process is the heart of capacity building.

Joel painters and Rose Tails (2020), added that compassion plays the role of training caregivers in key aspects that will bring development holistically to provide support for sustainability of the project and capacity building to church members and communities to become service providers in areas of skills training, nutrition, domestic violence, environmental care and protection, clean water, Malaria control, sexual education of the vulnerable children. Compassion's vision and mission is to help children grow into fulfilled as adults who are physically, spiritually, cognitively and socially sound and upright and use sports and related activities to offer psychosocial support, restore Hope and Love to the vulnerable children: involving local communities to build and tap the children's talents building, developing and restoring relations and character in children and adults as well. Building a Sports Academy, providing coaching skills, education on sports and HIV/AIDS, Football, Crusades for both boys and girls

## CHAPTER THREE

### RESEARCH METHODOLOGY

#### 3.0. Introduction

In this chapter, the researcher laid out the methodologies that were used in undertaking the study and compiling the research report. It was focused upon the research design, study population, sample size, sampling techniques, and data collection techniques and data analysis.

#### 3.1. Research design

A descriptive survey design was used since the sample size was quite large. This survey design was used to gather information from across sector of respondents at a single point in time as the design therefore put into consideration at all steps involved concerning the assessment of compassion assisted projects towards health, education and skills improvement of children and caretakers in Mbale District. Quantitatively, the researcher employed the questionnaires in the data collection from across sections of respondents and qualitatively, she also equally employ documentation and interview schedules to get both primary and secondary data.

#### 3.2. Sample size

The sample size was derived from the population of 120 beneficiaries, using a confidence interval of 95% and margin of error of 0.5% as described below.

Sample size and sampling technique: The sample size was derived from the target population of 1389 using the Morgan's formula as illustrated below.

$$n = \frac{N}{1 + N(e)^2}$$

$$n = \frac{120}{1 + 120 (0.1)^2}$$

$$n=92$$

Where n = is the minimum size

N = Total population

e = Determinant figure, n is the minimum sample size N is the population from which the sample is drawn estimated at 120 registered children, 20 caregivers and 10 project staff, giving a total of

120 people,  $e$  is the margin of error estimated at 10%. Substituting in the above formula, the sample size is determined as;

### 3.3. Sample selection

A probability sampling was used to obtain 92 respondents from a total target of 120 members. In probability sampling, the researcher will use a simple random sampling and was applied especially to Children and care givers in order to give an equal chance to each respondent to participate in the exercise. Purposive sampling technique was used onto staff of Mbale District. This is because they are quite knowledgeable about the research topic especially the challenging upheavals given their scope of knowledge on needy children and for registered children the researcher used random sampling since they are relatively many and equally knowledgeable too as they are equally involved in the programme and since they are targeted beneficiaries.

**Table 1. Showing sample sizes taken of respondents: registered children, caretakers and compassion staff.**

S/N	CATEGORY	TARGET POPULATION	SAMPLING SIZE	SAMPLING TECHNIQUE
1	Children	90	69	Simple Random sampling
2	Caregivers	20	15	Simple Random sampling
3	Staff	10	8	Purposive Sampling
	Total	120	92	

## **Source: Primary Data (2024)**

### **3.4. Sampling techniques**

The study used two sampling techniques, that is, purposive, stratified sampling and simple random sampling. Purposive sampling was used to select 8 staffs to be interviewed. The researcher chose this technique because the respondents are expected to be knowledgeable with the District policies and performance standards and also due to the fact that they have many staff they supervise. Simple random sampling was used to select (15) care givers and (69) Children who are expected to participate in the research. The researcher preferred this sampling technique because each respondent shall have an equal opportunity of being selected independent of any other and it is useful in avoiding bias (Babbie, 2020; Mugenda and Mugenda, 2022).

### **3.5. Data collection Methods**

#### **3.5.1. Interview method**

For qualitative data, the researcher used an interview guide targeting key informants for discussions. These were employed to get opinions from the targeted population of which the generalization was applicable to the entire District. Interviews were employed targeting key informants because they have the technical information regarding the matter in question and these included;

#### **3.5.2. Questionnaire**

This was the main research method. The close ended questionnaire had been preferred as an instrument of research because it was self- administered, has identical set of items for all respondents, produced fewer errors, ensure confidentiality as respondents were free from the influence of the researcher and respondents had the freedom to answer at their convenient time or place (Burns, 2020). The items were shorted requiring direct answers based on the Likert

scales of 1 – 5 from strongly disagree – strongly agree in order to provide consistent responses. Questionnaires are less costly to administer, eliminate potential interviewer bias, and enable respondents to air out their ideas freely. Questionnaires help the researcher to standardize responses and time was saved and is expected to make it easy to present data by way of categorizing and tabulating. They are also considered as the most appropriate instruments in collecting data because of the big number of respondents. The questionnaire utilizes open-ended questions about demographic information and respondents' views and attitudes concerning the objectives of study. Structured questionnaires were used in order to compare among different groups of respondents and besides the response rates which are high (Amin, 2015). The questionnaires comprised of six sections systematically organized to include demographic characteristics of the respondents and the components of independent variables. The interviewer administered questionnaires utilizing both closed and open ended questions which are expected to cover demographic information and respondents' views and concerns about the contributions of Compassion assisted Projects on the psycho-social wellbeing of children. It was administered by the researcher in person with the help of research assistants.

### **3.6. Data collection instruments**

The researcher used three data collection techniques and these included Questionnaires, interview schedules, and documentation were all employed to collect data.

#### **3.6.1 Questionnaires guide**

Kothari (2018), defines a questionnaire as that consisting of a number of questions printed or typed in a definite order on a form or set of forms. A questionnaire is commonly used to obtain data about population, since each item is developed to address a specific objective, research questions or hypothesis of the study.

A questionnaire is a device consisting of a sense of questions dealing with some psychological, social, educational topic, sent or given to an individual or group of individuals with the objective of obtaining data with regard to some problems under investigation. The questionnaire was used and contained both closed ended and open ended questions. Open ended questions allowed the respondent to answer in their own words and closed ended questions required the respondents to tick or circle on the right answer since it had a number of optional answers. This technique was advantageous in a way that it ensured enough time to give accurate responses and it is free from bias of the respondents since the answers were in the respondents' own words. Umar (2022).

The aim of the questionnaire is to save the researcher's time that would have been wasted interviewing each respondent, besides the method were easily administered and the tendencies of bias were reduced.

### **3.6.2. Interview guide**

Direct interview was employed to equally collect primary qualitative data. Kakenzo (2020), asserted that an interview is a face to face conversation between and interviewer and the interviewee conducted for the purpose of achieving required information. Indeed, interviews are more adaptable and can be developed and clarified by the researcher whenever need arises and above all they were enhanced the collection of the actual data on spot. This instrument was meant to be found adequate enough in aiding the researcher to elicit responses from the respondents.

### **3.6.3. Documentation.**

The researcher visited compassion selected projects on request to be given documents related on health, education and where she picked out information in compilation of the research work. This enabled the researcher to avail herself with the relevant or necessary literature to make the study a success.

### **3.7. Data processing and analysis**

Collected data was thoroughly checked for completeness of responses given by respondents. Editing was done to check for consistency and comprehensibility. Coding for both open and close ended questions were done, frequency tables and cross tabulations were done, graphical

and histograms were generated from the data that was analysed using an excel computer package.

### **3.8. Research procedure**

After the approval of the research topic by the University supervisor, the researcher wrote a proposal that were approved by the University supervisor, the researcher obtained a letter of introduction from the University authority for submission to the administration of implementing church partners of Mbale sub- cluster before field work was conducted. Upon reaching Mbale, the researcher held preliminary meetings and discussions with the relevant authorities before the actual data is collected, then the exercise commenced.

### **3.9. Ethical considerations.**

The researcher requested the university to give her the introductory letter that was presented to the concerned authorities allowing her to conduct the research freely. The researcher therefore observed the professional ethics of code of conduct, privacy, confidentiality, proper and good language was used, descent dressing, and non-judgmental aspect were used when collecting data from the respondents. It's therefore believed that as the researcher at most strictness and observation of this professional ethics of the community enabled her get the desired data to compile her research work without any difficulty. While collecting the data the respondents were handled carefully and the information they offer were treated confidentially protecting the identity of the respondents. Any data collected from respondents must be handled carefully and the respondents must be handled confidentially safeguarding the identity of the respondent is a requirement by the UN Declaration of Human Rights (2018). When collecting the data the respondents were not forced to give information in favour of the researcher, the respondents are expected to give information freely and willingly. More so, the researcher never bribed the respondents so that they provide data as this introduces bias in the research.

### **3.10. Data quality control tools**

#### **3.10.1 Data reliability**

The research instruments were examined for validity and reliability using Cronbach's Alpha value. Data was collected, first pre tested and analysed using Cronbach's coefficient Alpha to

establish clarity and dependability of the instruments. The principle of reliability were as far as research instruments were concerned, as clearly put forward by Amin (2015), an instrument is reliable if it produces the same results whenever it is used repeatedly used to measure a trait or a concept from the same population.

### **3.10.2 Data validity.**

Validity seeks to establish whether the researcher has developed an instrument which tests the right issues. In words of (Amin 2015), validity tests whether an instrument used in research is accurate, correct and meaning full therefore, validity was established using content validity test. Validity was measured by calculating the content to which the instruments correlates with concepts it is set out to measure.

## CHAPTER FOUR

### DATA PRESENTATION, ANALYSIS AND INTERPRETATION

#### 4.0 Introduction

This chapter was premised upon the presentation, interpretation, analysis and discussion of findings of the study. These findings were in alignment with the study objectives which included the role of Compassion assisted Projects on health, the relevance of Compassion assisted Projects on education and impact of Compassion assisted Projects on Skills improvement to Children and caregivers.

#### 4.1 Bio data

This shows the demographic characteristics of respondents in Mbale District.

Out of a target population of 1389 that included 700 children, 680 caregivers, and 03 staff that was selected, through Simple Random Sampling methods, 93 respondents were interviewed.

**Table 2. Showing the distribution of respondents by sex**

<b>category</b>	<b>frequency</b>	<b>percentage</b>
Male	34	36.6%
female	59	63.4%
<b>total</b>	<b>93</b>	<b>100%</b>

**Source: Field survey: (2024)**

In the table 2 above, the male respondents were 36.6% and females were 63.4%. This indicated that the female respondents were many because they were cooperative.

**Table 3. Showing the distribution of respondents by age**

<b>Age bracket</b>	<b>frequency</b>	<b>percentage</b>
5-10 years	03	3.2
11-15 years	40	43.0
16-20 years	05	5.4
21-30 years	14	15.0
31-40 years	30	32.3
45+	01	1.1
<b>total</b>	<b>93</b>	<b>100</b>

**Source: Field survey: (2024)**

The findings revealed that a total of 3.2% respondents were of the age bracket of 5 – 10 years, 43.0% were of the age bracket of 11-15 years, 5.4% were of the age bracket of 16-20 years, 15.0% were of the age bracket of 21-30 years, 32.3% were of the age bracket of 31-40 years and 1.1% was of the age bracket of 45 years and above. The majority of the respondents were of 11-15 years, because the topic of the study targeted.

**Table 4. Showing the distribution of respondents by education level**

<b>Level of Education</b>	<b>Frequency</b>	<b>Percentage</b>
None	<b>03</b>	<b>3.2</b>
Primary	<b>61</b>	<b>65.6</b>
Secondary	<b>25</b>	<b>26.9</b>
Tertiary	<b>04</b>	<b>4.3</b>
Total	<b>93</b>	<b>100</b>

**Source: Field survey: (2024)**

A total of 65.6% respondents had completed primary level education. 26.9% had completed secondary and only 4.3% had achieved tertiary level of education. 3.2% of the respondents had never attended any formal education. The findings revealed that the main target group of the study were in primary level.

**Table 5. Showing the distribution of respondents by religion**

<b>Religious affiliation</b>	<b>frequency</b>	<b>Percentage</b>
Anglican	34	36.5%
Roman Catholic	31	33.3%
Islam	15	16.2%
Others	13	14%
<b>Total</b>	<b>93</b>	<b>100%</b>

**Source: Field survey: (2024)**

The above findings revealed that the respondents who were Anglicans were 36.5%. The Roman Catholic constituted 33.3%. The Islamic respondents, 16.2% and other religions constituted 14.0%. Therefore the majority of the respondents were Anglicans this showed that the community was predominantly Christian because the total percentage of Anglicans and Roman Catholic was 69.8%.

#### **4.2 The role of Compassion assisted Projects on Health to Children and caregivers.**

This research objective was based on the sub objectives that incorporated about what the respondents knew about compassion project, they were beneficiaries in compassion projects and were required to give reasons to justify their responses, the major role of compassion in the provision of health services to the needy children. How the caretakers benefited from compassion project, how the respondents perceived compassion projects in the social life and health status of the needy children, some of the challenges that compassion faced in the due

course of extending health services to the children and suggesting of some practical measures that could be employed to address these challenges.

#### **4.2.1 Respondent’s knowledge about compassion project.**

The respondents in a close and face to face interaction and elicited responses from the questionnaires, were asked to tell the knowledge they had about compassion project and in their response they said that it was a project that supported the vulnerable children in the area of providing them with basic needs of life including education, medication, clothing, food and making sure that they have good accommodation and above it being religious affiliated projects equip the children with spiritual growth and development. The respondents equally stated that this was not only with the children but also the caretakers of these children.

In a bid of interviewing the children on their knowledge about compassion project, they revealed that compassion projects are their home of hope where they get financial assistance for school fees, get medication of various illnesses through referring them to health units hospitals within and outside Uganda, food and above all they said that the project makes sure that they are living a descent life and further to this query-the children said that their parents were also given the assistance of medication especially to those parents who are suffering from HIV Aids scourge and they also get food for them.

**Table 6. Showing the distribution of respondent’s knowledge about compassion projects in Mbale District**

<b>Category of respondents</b>	<b>Frequency</b>	<b>percentage</b>
Knowledgeable	87	93.5
Not knowledgeable	06	6.5
<b>Total</b>	<b>93</b>	<b>100</b>

**Source: Field survey: (2024)**

According to the table above, 93.5% of the respondents were knowledgeable about the activities of Compassion in the community and 6.5% had no knowledge about the activities of

compassion. This therefore reveals that the majority of the respondents were knowledgeable about the compassion projects in the community.

#### 4.2.2 Are you a beneficiary in compassion project?

The respondents were sought by the researcher to advance whether they were beneficiaries in compassion project and in their response they revealed as presented in the table 4.1 underneath:-

**Table 7. Showing whether the respondents were beneficiaries in compassion project**

Responses	Frequencies	Percentage
Yes	90	97
No	03	03
<b>Total</b>	<b>93</b>	<b>100</b>

**Source: Field survey: (2024)**

In reference to the table and figure above, the findings show that 97% were beneficiaries, 3% were not beneficiaries. The majority of the respondents backed their responses with the reason that they had benefited from the project in form of spiritual, social and economic support which had raised and improved their standards of living and above all restored their dream of realizing their future.

#### 4.2.3 How the caregivers benefit from compassion project.

**Table 8. Showing what caregivers benefitted from the project in 2023.**

Items	Frequency	Percentage
Trainings	32	76.1
Food supplements	17	40.5
Seeds and seedlings	42	100
Treatment and facilitation to hospitals.	17	40.5
Total no. of caretakers	42	100

**Source: End of financial year 2022/23 Health report.**

Based on the internalization of the responses in the questionnaires, it was realized that the beneficiaries largely have benefited from compassion project in the following ways:-

Respondents mentioned that the project of compassion gives nutritional support especially to the parents of the children living with HIV/AIDS scourge to improve on their diet and of their children. They received food staffs like eggs, small fish (omena), milk, millet, sugar among other food items.

They also advanced that they have received transport refund whenever they take their children for treatment when sick, this is not an exception of themselves and in case the situation is complicated they are referred for further case management and attention in main hospitals.

Medical bills have been paid for both registered children and their caregivers. The caregivers of registered children have been relieved of the burden of health bills, they only contribute 10% according to the policy.

Clothing expenses have been reduced as the project tries to address the physical aspect in the children's lives by budgeting for the purchase of clothes, shoes, pants whenever children received birthday, general, special or family gifts from their sponsors and when all children receive Christmas gifts, this enabled caregivers to save to meet other future uncertainties.

To effect good hygiene, the caregivers have benefited from compassion project in the sense that they have been home visited and sensitized on how to maintain hygiene in their respective homes. In the process, they are told to have drying racks on which they are to place utensils after washing, clean compound, a latrine thirty meters away from the living houses, wash hands whenever they visit the latrine, and bathe at least twice a day, this is also effected by training all caregivers on hygiene and sanitation where they learn how to make tippy taps for washing hands after visiting the latrine.

The participants mentioned that compassion had assisted them with seeds to plant for example maize seeds, also with hoes for digging so that they themselves produce food. Lastly, Compassion also distributed both fruit trees and trees that produce wood to each child and caregivers for example mango trees, gravellier trees, this therefore has helped them to have growing trees that will soon provide fruits and wood. The assumption is that the caregivers shall be able to have healthy families and a source of fuel thus improving on their health status.

The findings revealed that caregivers benefitted from trainings 76.1%, food supplements for people living with HIV/AIDS 40.5%, seeds like maize seeds, beans, and seedlings like gravellier seedlings, mango tree seedlings to plant, 100%, treatment for caregivers living with HIV/AIDS 40.5%. Food supplements and treatment were received by only people living with HIV/AIDS, (PLWHA). This revealed that the projects were investing in giving their beneficiaries trainings more than hand outs for sustainability of their program.

#### **4.2.4 Some of the challenges that compassion has faced in the due course of extending health services to the children and education.**

**Table 9. Showing the challenges met by Compassion while extending health services to the beneficiaries.**

<b>Challenges in extending health services</b>	<b>Frequency</b>	<b>Percentage</b>
Delay of funds	28	30.1
Demand for local contribution	34	36.6
Distant children	14	15
Cost sharing	17	18.3
<b>total</b>	<b>93</b>	<b>100</b>

**Source: Field survey: (2024)**

Table 9, shows that the delay of funds was 30.1%, demand for local contribution was 36.6%, offering services to distant children who are in boarding schools was 15%, and cost sharing during treatment was 18.3%. The findings revealed that among the challenges, the biggest challenge was getting local contribution from the caregivers because the beneficiaries were selected from the needy of the neediest families.

The researcher inquired from the respondents to mention some of the challenges that compassion project has faced in the due course of extending health services to the children, These challenges were mentioned in reflection to the aspects of basic needs including health, education, Food, and clothing and accommodation as here below:-

They said that the health, food, clothing and accommodation aspects are largely affected by the challenge of finances being delayed to be released to facilitate transportation to better hospitals to acquire treatment in time, this has been coupled with deaths of care takers especially those who are living with HIV/Aids, and also children.

The demand for local contribution from the parents of the registered children by compassion amidst challenges of biting poverty has seriously affected the targeted beneficiaries which have made them fear to visit the centre for assistance.

The respondents revealed that Compassion assisted project children who study in far schools without sick bays cannot easily access treatment in time when they fall sick because in places where they are, there may be no reliable health centres to provide treatment since most health units always are faced with the challenge of drug stock outs.

Cost sharing for treatment of children is another challenge most caregivers face. Most caregivers resort to traditional methods of treatment instead because they fail to raise the finances required for cost sharing during the treatment process.

#### **4.2.5 Results of the interview on the role of Compassion assisted Projects on Health to Children and caregivers.**

The respondents during face to face interviews revealed that Compassion International has engaged the beneficiaries in serious trainings to equip them with skills of sustainability. They also noted that the beneficiaries benefitted so much from medical treatment that compassion pays for the bills. They said that they had some challenges like payment of local contribution as beneficiaries even when they are trying to come out of poverty. Generally they reported the same issues that the people who filled questionnaires reported.

#### **4.3 Relevance of Compassion assisted Projects on Education to Children and caregivers.**

Under this research objective, the researcher depended on the respondent's answers based on whether compassion offered education services to its needy children, expected reasons to defend their responses, inquired on what kind of Education services that the respondents received from compassion project.

Whether compassion assisted projects experienced some challenges in the line of education service assistance to the children and reasons to elaborate on their responses and these were in details analysed as here under:-

#### 4.3.1 Education services respondents receive from compassion project.

**Table 10. Showing various educational services received by children that responded.**

<b>Educational services</b>	<b>frequency</b>	<b>percentage</b>
School fees	35	72.9
School uniforms	01	2.1
Scholastic materials	08	16.7
Remedial teaching	04	8.3
<b>Total</b>	<b>48</b>	<b>100</b>

**Source: Field survey: (2024)**

The respondents revealed that the highest educational service they had ever got from compassion assistance was school fees 72.9%, scholastic materials, 16.7%, remedial teaching 8.3%, and school uniforms 2.1% in their order. This indicated that the school fees formed the highest educational service they had at the projects.

The investigator sought from the respondents to tell the education services they receive from compassion project, the following responses were given:

Respondents said that their school fees have been met at all levels that is to say: pre- primary, Primary, secondary, and Tertiary levels.

They said that they have been given basic scholastic materials like Books, pens, pencils, sets, colours and school uniforms.

The respondents still mentioned that they have received shoes, soap, Vaseline and in addition to this, compassion project has sponsored children to study in holidays (remedial teaching), this has

been done by inviting teachers to come to coach them at compassion premises. This equally has helped them to improve on academic performance.

**4.3.2 The extent to which compassion has attained its objective of offering education services to its targeted beneficiary children.**

Respondents were asked to tell the extent to which compassion has attained its objective of offering education services to its targeted beneficiary children.

**Table 11. Table illustrating the extent to which compassion has attained its objective of offering education services to its sponsored children**

<b>Responses</b>	<b>Frequencies</b>	<b>Percentage</b>
Greater extent	89	96
Smaller extent	04	04
<b>Total</b>	<b>93</b>	<b>100</b>

**Source: Field survey: (2024)**

From the table above, a majority of the respondents with the percentage 96% accepted that it was to a greater extent that compassion had attained its objective of offering education services to its sponsored children. The minority of the respondents with the proportion of 4% revealed that it was to a smaller extent that compassion has attained its objective of offering education services to its sponsored children.

Respondents revealed that compassion project has aided their children to excel in education hence to reach their dream and have it come to pass; it's to this stake therefore to reckon with that the children have been graduated in many professions and are earning a living and also supporting their families.

**4.3.3 Whether compassion as a project has ever experienced some challenges in the line of education service assistance to the children.**

**Table 12. Showing challenges met by compassion in extending educational services to children**

<b>Challenges in extending educational services</b>	<b>frequency</b>	<b>percentage</b>
Absentism	36	75
Poor attitudes	03	6.25
Early marriages and pregnancies	03	6.25
Change of location	01	2.0
School drop outs	05	10.5
<b>Total</b>	<b>48</b>	<b>100</b>

**Source: Field survey: (2024)**

The table above revealed that the biggest challenge of compassion in giving services of education to the beneficiaries is absenteeism with the percentage of 75%

The investigator sought to find out whether compassion as a project has ever experienced some challenges in the line of education service assistance to the children.

The respondents said that most of the caregivers and the children have not fully embraced the programs as this has been indicated with high school drop outs with lack of interest in education opportunities.

Absenteeism is one of the challenges the respondents said in extending educational services to the children. Some of the children stay at home to take care of their young ones while their caregivers get to work in the gardens

Poor attitudes towards education by the community as girls are thought be a source of income through receiving dowry; the children also are thought to be a source of labour to help the parents in the food production.

Early marriages, parents give out their children for marriage early, as it is the culture to have children settle in marriage to make their families, it is prestige.

Some of the children move to stay with their relatives in distant places for example their grandparents, aunties, this therefore makes them to be far from being monitored and visited by the project staff.

#### **4.3.4 Results of the interview on the relevance of Compassion assisted Projects on Education to Children and caregivers.**

The respondents said that the main educational service that the beneficiaries receive is the payment of school fees, but they also noted that the children are a source of labour to their caregivers especially during rainy season and harvesting season this makes the children to absent from school in such season making it difficult for compassion assisted projects to achieve their objectives.

#### **4.4 Impact of Compassion assisted Projects on Skills improvement to Children and caregivers.**

**Table 13. Showing the impact of Skills to beneficiaries**

<b>Impact to beneficiaries</b>	<b>frequency</b>	<b>percentage</b>
Children	52	55.9%
Caregivers	38	40.9%
Staff	03	3.2%
<b>Total</b>	<b>93</b>	<b>100%</b>

**Source: Field survey: (2024)**

The table above shows that the children had the highest impact of the skills, 55.9% because they are the target group to be empowered.

This objective revealed the responses based on the formulated aspects, the key skills of improvement are being extended to the children and the caregivers by compassion whether there was any impact created by compassion project through extension of skills of improvement, more elaborations to defend their response.

Some key achievements that the children and caregivers have achieved as a result of skills of improvement offered by compassion project.

They stated that they benefited in form of being equipped with skills of self-sustainability to come up with income generating activities to gain some income in order not to be only dependant of the project for survival and so they have been empowered with skills of management, to enable them invest in projects such as piggery, poultry, Dairy farming, Agriculture, they have also started savings associations among other projects to realize an income.

#### **4.4.1 Some key skills of improvement being extended to the children and the caregivers by compassion project.**

Since the inception of compassion project, the respondents were asked to mention some of the key skills of improvement that have been extended to the children and the caregivers by compassion project.

In the critical analysis of the responses in the questionnaires, the respondents said that Compassion project in Mbale has extensively enhanced and empowered children and caretakers with skills of life sustenance, they have been equipped with skills in various income generation activities that have enabled them to gain an income to be supportive to their families, to respond to issues that are beyond their management and the aim was to reduce on the dependency syndrome.

Compassion project in Mbale District has therefore established and introduced many skills of income generating activities which include the following:-

Trees have been planted in form of nursery beds of different species to help beneficiaries learn skills of grafting, taking care of plants.

Other skills have been extended to both the caregivers and children such as Cake making, key board playing, Tailoring, Sweater making, necklace, candle making, Vaseline making, bag making, craft shoe, tie and dye, liquid soap making and bar soap making.

The respondents have also been trained on how to manage poultry, cattle rearing, Agriculture and mushroom growing projects have equally been undertaken and have indeed earned the beneficiaries with income that has helped them through their life living

The respondents have benefited from these skills that were extended to them by coming up with their own projects, these have enabled the beneficiaries hence the ability to afford the basics of life for improved standards of living.

**Table 14. Showing skills gained by the beneficiaries through compassion related trainings from 2015 to 2016.**

<b>Skills</b>	<b>Frequency</b>	<b>percentage</b>
Mushroom growing	01	1
Cake making	02	2.6
Key board playing	03	3.2
Necklace making	13	13.9
Vaseline making	03	3.2
craft shoe making	01	1
bag making	16	17.2
Soap making.	13	13.9
tie and dye	02	2.1
candle making	10	10.8
Tailoring	27	29
Sweater making	02	2.1
<b>Total</b>	<b>93</b>	<b>100</b>

From the table above, the respondents had a number of skills but what they liked doing most was tailoring with 29%, because there is high demand for clothes as it is a basic need.

#### **4.4.2 Respondents' perception on the impact created by compassion project through extension of skills of improvement.**

Respondents were sought to reveal how they perceived with the impact created by compassion project through extension of skills of improvement, the majority respondents surpassed the responses of the minority as showed in the table 4.4 below:-

**Table 15. Showing the respondents' perception on the impact created by compassion project through extension of skills of improvement**

<b>Responses</b>	<b>Frequencies</b>	<b>Percentage</b>
Yes	<b>88</b>	<b>95</b>
No	<b>05</b>	<b>05</b>
<b>Total</b>	<b>93</b>	<b>100</b>

**Source: Field survey: (2024)**

The table showed that the majority response rate of 95% accepted that the respondents have positively perceived the impact created by compassion project through extension of skills of improvement because some beneficiaries already were earning some income out the activities they are doing after the training.

5% of the respondents did not consent with the statement that compassion project has positively impacted on the project through extension of skills of improvement, instead their perception was negative because most of the beneficiaries had not put in to practice what they had been trained in.

#### **4.4.3 Forwarded reasons to justify responses in 4.4.2 above**

In reference to the above responses captured in table 4.4, the following were the elicited reasons to justify their answers:-

- ❖ Through the enhanced skills, the targeted beneficiaries have been able to gain income from the initiated income generating activities.
- ❖ The skills have enabled the caretakers and children to address the aspect of dependency on both the project and on each other. For instance the children have supported their

guardians by buying for themselves like inner wares, food, transport themselves to school and clothes, kitchen gardens provide families with vegetables, children make their own soap to use both at home and at school.

- ❖ The compassion project has trained the caretakers on the need and the importance of saving and they have come up with savings and loans association schemes which have enabled them to be able to address the life challenges they face that are complicated and beyond compassion project response.

#### **4.4.4 Some key achievements that the children and caregivers have achieved as a result of skills of improvement offered by compassion project.**

The respondents were further sought to mention some key achievements that the children and caregivers have achieved as a result of skills of improvement offered by compassion project and in responses they revealed as showed below;-

##### **Achievements registered by Children**

Children have gained skills in vocational related courses through which are able to support their families especially their siblings, for example, courses in brick laying and making.

Children have been able to reach their dream goal as they have attained many professions at different levels of education including certificates, diplomas, degrees among others and they have become self-sustaining

Children have spiritually been developed, grown and moral improvement which has shaped social life as they are kept in church and learnt how to play the key board which has earned them an income in churches they offer a service and as they are hired out to play the key board in other functions in the community.

##### **Achievements registered by Caretakers**

The caretakers have equally been equipped with some skills in income generating activities and been empowered with inputs of poultry, Dairy, Beekeeping, piggery, Agriculture among others projects which have improved on their family standards of living.

Parents are able to take their children to good and better schools through the aspect of cost sharing on the big amounts of schools dues and this has enabled their parents to perform to the best of their abilities.

#### **4.4.5 Challenges that compassion project faces in the course of extending skills improvement to the caretakers and children.**

Lastly to the analysis of the responses elicited in questionnaires and close face to face interactions with the respondents, they were asked to advance challenges that compassion project faced in the course of extending skills improvement to the caretakers and children and these mentioned challenges included the following:-

The project faces the challenge of convincing the guardians to part of the trainees, many guardians have negative attitudes towards skills and vocational courses.

The sponsors who have volunteered to extend help to the children do not have enough money to sponsor the children and guardians in a sufficient way which has affected the smooth-effective and efficient performance of the project hence hindering the object achievement of the project.

Some staffs in compassion projects in Mbale District in sensitive positions have embezzled and or have diverted funds meant for the children's education, health, food and others basic needs

There is no intensive monitoring and evaluation of the initiated beneficiary income generating activity projects to track their progress with an implied objective of socio-economic development

Supervision of the initiated income generating activities to ensure sustainability effect among the targeted beneficiaries

#### **4.4.6 Results of the interview on Impact of Compassion assisted Projects on Skills improvement to Children and caregivers.**

The respondents named major skills that they have learnt as bag making, necklace making, and soap making and baking among many others. They reported that the skills have been a source of income as some children do baking and sell their bread within the projects; this provides them with school pocket money.

## **CHAPTER FIVE SUMMARY OF THE FINDINGS**

### **5.0 Introduction**

This chapter will provide with the summary and discussions of the study findings, in relation to the study objectives

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

Below is the summary of findings on the effect of market orientation and performance small manufacturing firms as presented in line with the following research objectives:

#### **5.1.1 The role of compassion project on health to children and caregivers**

According to James Turner (2022), he advanced that Compassion assisted projects like any other international projects to mention them, Action aid international, United States aids international development among others had played a tremendous role in the life of a needy child, Compassion meets the medical bills of the registered children, their siblings and caretakers living with HIV/Aids.

Compassion assisted projects are credited for the tremendous role they have played in the lives of the sponsored children and caregivers in the area of health for they have been taken care of by offering them with physical medication and good hygiene skills which have improved their social wellbeing. Medical bills of the sponsored children and their caretakers have been met which has made them live a healthy life with a healthy minds hence its worthy appreciating for the health services offered to the targeted beneficiaries.

The respondents revealed that compassion projects are their hope where they get financial assistance for transport to hospitals to get medication of various illnesses through referring them to health units hospitals within and outside Uganda, food and above all they said that the project makes sure that they are living a descent life and further to this query-the children said that their parents were also given the assistance of medication especially to those parents who are suffering from HIV Aids scourge and they also get food for them.

### **5.1.2 Relevance of Compassion Project on Education to Children and caregivers**

Compassion assisted projects in Mbale District has proved its significance towards the education of the children in that it has provided them with all the necessities including school dues, uniforms, shoes, food, provision of text books and all other items that have retained them at school and this has enabled them to reach their dreams, and skills of sustenance. The caregivers have been relived from the burden of school fees and other scholastic materials.

72.9% of the respondents said that their school fees had been met at all levels that is to say: pre-primary, Primary, secondary, and Tertiary levels.

They said that they have been given basic scholastic materials like Books, pens, pencils, sets, colours and school uniforms.

The respondents still mentioned that they have received shoes, soap, Vaseline and in addition to this, compassion project has sponsored children to study in holidays (remedial teaching), this has been done by inviting teachers to come to coach them at compassion premises. This helped the children who were weak to improve on their reading and writing skills. This equally has helped them to improve on academic performance of the registered children in the projects in spite of a few challenges that were noted:

Absenteeism is one of the challenges the respondents said in extending educational services to the children. Some of the children stay at home to take care of their young ones while their caregivers get to work in the gardens

Poor attitudes towards education by the community as girls are thought be a source of income through receiving dowry; the children also are thought to be a source of labour to help the parents in the food production.

Early marriages, parents give out their children for marriage early, as it is the cultures to have children settle in marriage to make their families, it is prestige.

Some of the children move to stay with their relatives in distant places for example their grandparents, aunties, this therefore makes them to be far from being monitored and visited by the project staff.

### **5.1.3 Impact of Compassion Project on Skills improvement to Children and caregivers.**

From the analysis of the responses, it was found out that compassion assisted projects in Mbale District has created a positive impact on the children and their caretakers through several enhanced and empowered skills which have enabled them to initiate several income generating activities which have earned them an income to reduce dependency syndrome hence household sustainability and stability.

A number of skills as mentioned by the respondents included the following:

Trees planting of different species to help beneficiaries learn skills of grafting, taking care of plants. Other skills were extended to both the caregivers and children such as Cake making, keyboard playing, Tailoring, Sweater making, necklace, candle making, Vaseline making, bag making, craft shoe, tie and dye, liquid soap making and bar soap making.

The respondents also were trained on how to manage poultry, cattle rearing, Agriculture and mushroom growing projects have equally been undertaken and have indeed earned the beneficiaries with income that has helped them through their life living

The respondents have benefited from these skills that were extended to them by coming up with their own projects, these have enabled the beneficiaries hence the ability to afford the basics of life for improved standards of living.

29% of the respondents were already involved in tailoring which was the skill they loved most as it helped them to repair they own torn clothe and also to make money for a living. 17.2 % were making bags out of beads, a sign that they had embraced this skill among many other skills.

## **CHAPTER SIX**

### **CONCLUSION AND RECOMENDATIONS**

#### **6.1 Conclusions: Health of children and caregivers.**

The respondents agreed that they had received trainings on health related issues this therefore informs that the health status of the beneficiaries has changed positively because they are informed through trainings like malaria sensitization, hygiene and Sanitation trainings.

Therefore there is also sustainability of Compassion assisted projects programs since people are trained then they get back to put in to practice what they have learnt. The treatment that the beneficiaries receive keeps them healthy.

#### **6.2 Education of registered Children**

Through education where children receive scholastic assistance according to the respondents, the school fees relive the caregivers a lot in terms of financial expenses. Compassion assisted projects have proved to be the heart of children's wellbeing for empowerment in terms of enabling them to access the basics of life in their socio-economic spheres of life and it's upon this conditions that life of children in Mbale.

Therefore the education levels of the project assisted children have improved and through remedial teaching and monitoring, the children are able to stay at school longer there reducing the rates of school dropouts.

#### **6.3 Skills improvement.**

Through a number of skills that have been extended to both the caregivers and children, the beneficiaries have come up with income generating activities that have helped them have daily income.

The skills have helped them to reduce on the expenditure for example the tailors repair their own clothes instead of taking to other tailors who will demand for payments. The ones who do baking say that they bake their bread for home use instead of spending money to buy bread from the shops.

## **6.4 Recommendations**

### **6.4.1 The role of Compassion assisted Projects on Health to Children and caregivers.**

It is important for compassion project management team to strengthen its monitoring and evaluation systems through internal controls, internal audits particularly on the areas of health, to make sure that the children and caregivers receive health services from qualified personnel.

### **6.4.2 Education of registered Children**

It is equally recommended that the central management of compassion projects needs to re-programme their schedules to do activities in time so that the beneficiaries school fees is paid up in time among other activities in the projects. The projects also need to plan and prioritise activities so that there shall be clear flow of activities that favour child development.

### **6.4.3 Skills improvement.**

There is need to do intensive mobilization and sensitization of caretakers of the children to embrace the aspect of savings part of their incomes gained from the initiated income generating activities to enable them meet future uncertainties of sickness, increased school fees and drought.

## **6.5 Areas for Future Research**

The researcher suggested the following research topics for further research:

1. An analysis of the role played by compassion project in the provision of basic needs to the targeted vulnerable sponsored children in Mbale District.
2. The impact of compassion international on the socio-economic empowerment of caretakers of the sponsored children in Mbale District.
3. The relationship between the compassion project skills enhancement and improved standards of living of the sponsored children and their caretakers in Mbale District.

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## QUESTIONNAIRE

Study: The assessment of compassion assisted projects in the community of Mbale towards health, Education and skills improvement of children and caregivers

I am Zalika Abby Yunus, a student of Uganda Christian University undertaking a Bachelor's Degree in social work and social Administration

Dear Respondent, you have been selected as one of the respondents to help in the filling of the questionnaire. As you are required to provide your technical knowledge responses through physical filling of the questionnaire, it is therefore meant to provide information to the study topic above and it leads to a Bachelor's Degree in social work and social administration of Uganda Christian University. The information provided in here shall be treated with utmost confidentiality as it is strictly for the academic purposes only.

### Section A

#### 1.0 Bio-data of the respondent

(i) Designation .....

(ii) Sex: Male  Female

(iii) Marital status: Married  Widowed  Single  Divorced

(iv) Age bracket 5-10 years  11-15 years  16-20 years  21-30 years   
31-40 years

(v) Level of education

Primary  Secondary  Tertiary

(vi) Place of residence .....

(vii) Religion

Catholic  Anglican  Islam  Others

SECTION B

**The role of Compassion assisted Projects on Health to Children and caregivers**

1. What do you know about compassion project in Mbale?

.....  
.....

2. Are you a beneficiary in the compassion project?

Yes  No

3. How do caretakers benefit from compassion project in Mbale?

.....  
.....  
.....

4. What are some of the challenges does compassion face in the due course of extending health services to the children?

.....  
.....  
.....

5. How do caretakers benefit from compassion project in Mbale in terms of health provision?.....

.....  
.....

SECTION C

**Relevance of Compassion assisted Projects on Education to Children and caregivers**

1. What kind of Education services do you receive from compassion project in Mbale?

.....  
.....  
.....

2. To what extent has compassion attained its objective of offering education services to its targeted beneficiary children in Mbale?

Greater extent             lesser extent           

3. Can you please elaborate more on your response in 12 above?

.....  
.....  
.....

4. Does compassion as a project experience some challenges in the line of education service assistance to the children in Mbale.

Yes                             No                           

5. You are requested to give reasons to elaborate your response in 14 above

.....  
.....

SECTION D

**Impact of Compassion assisted Projects on Skills improvement to Children and caregivers**

1. What are some of the key skills of improvement are being extended to the children and the caregivers by compassion project in Mbale

.....  
.....  
.....

2. From your sense of perception, is there any impact created by compassion project through extension of skills of improvement

Yes  No

3. Defend your response in 18 above

.....  
.....  
.....

4. Can you please mention some key achievements that the children and caregivers have achieved as a result of skills of improvement offered by compassion project in Mbale

.....  
.....  
.....

5. What challenges do you think compassion project faces in course of extending skills improvement to the caretakers and children?

.....  
.....  
.....

END

## **INTERVIEW GUIDE**

### **Dear Respondent**

The interview guide is intended to provide information to the study that leads to the degree of social work and social Administration. It is meant to assess compassion assisted projects in the community of Mbale towards health, Education and skills improvement of children and caregivers. The response you provide in here shall be treated with utmost confidentiality as it is for only academic purposes

### **Guiding Questions**

1. How does compassion international help in the intervention of health ailments to its beneficiaries?
2. How has the life status of children improved since the child begun befitting from compassion Uganda international in Mbale?
3. Is there any hope for sustainability in case this program stopped?
4. How is the educational assistance offered by compassion international beneficial to registered children?
5. What is the caregiver's in put in the children's education for sustainability purposes?
6. What challenges are faced with children in the institutions of education as a result` of compassion's intervention?
7. In terms of skills empowerment, how have the caregivers benefitted from the project of compassion?
8. What skills are children doing as a result of compassions intervention?
9. Are there some achievements as a result of skills learnt at the projects?

**APPENDICE V  
BUDGETARY ESTIMATES**

<b>S/No</b>	<b>ITEM ( S)</b>	<b>Quantity (qty)</b>	<b>Unit cost (Ugshs)</b>	<b>Total Coast (Ugshs)</b>
01	Printing/ photo copying papers	1 Ream	20,000	20,000
02	Ruled papers	1 Ream	16,000	16,000
03	Flash disk	1 (2GB)	40,000	40,000
04	Pens, pencil and note book	Assorted	10,000	10,000
05	Photocopying expenses	45 PAGES	@100	4500
06	Word typesetting expenses	45 PAGES	@1000	45,000
07	Spiral binding expenses	3 BOOKS	@5000	15,000
08	Airtime		10,000	10,000
09	Transport expenses		50,000	50,000
10	Contingency		50,000	50,000
<b>11</b>	<b>TOTAL</b>			<b>436,000</b>

**Appendix 1: Table for determining sample size from a given population by Krejcie & Morgan (1970)**

<b>Table for determining sample size from a given population</b>					
<b>N</b>	<b>S</b>	<b>N</b>	<b>S</b>	<b>N</b>	<b>S</b>
10	10	220	140	1200	291
15	14	230	144	1300	297
20	19	240	148	1400	302
25	24	250	152	1500	306
30	28	260	155	1600	310
35	32	270	159	1700	313
40	36	280	162	1800	317
45	40	290	165	1900	320
50	44	300	169	2000	322
55	48	320	175	2200	327
60	52	340	181	2400	331
65	56	360	186	2600	335
70	59	380	191	2800	338
75	63	400	196	3000	341
80	66	420	201	3500	346
85	70	440	205	4000	351
90	73	460	210	4500	354
95	76	480	214	5000	357
100	80	500	217	6000	361
110	86	550	226	7000	364
120	92	600	234	8000	367
130	97	650	242	9000	368
140	103	700	248	10000	370
150	108	750	254	15000	375
160	113	800	260	20000	377
170	118	850	265	30000	379
180	123	900	269	40000	380
190	127	950	274	50000	381
200	132	1000	278	75000	382
210	136	1100	285	1000000	384

**Note: N is population size, S is sample size**

Appendix 2: Acceptance Letter



UGANDA CHRISTIAN  
UNIVERSITY  
A Centre of Excellence in the Heart of Africa  
MBALE UNIVERSITY COLLEGE

Office of the Academic Registrar

To THE CAO  
MBALE DISTRICT

Dear Sir/Madam,

Re: Academic Research

Christian greetings!

Handwritten notes and stamps: 'Head of Dept', 'SAC', 'MCTM', 'Sub-Committee', 'Conduct Research', 'ZAIKA ABBY YUNUS CAO', '24 APR 2024', 'CHIEF ADMINISTRATIVE OFFICER', 'MBALE DISTRICT', 'P.O. BOX 931, MBALE (U)', '21/4/24', 'SOCIAL WORK AND SOCIAL ADMINISTRATION'.

We are honored to introduce to you Mr. Mrs./Miss ZAIKA ABBY YUNUS CAO  
Of Registration Number; S22/mvc/bsw/001 pursuing a Masters Degree/Postgraduate Diploma / Bachelor's Degree SOCIAL WORK AND SOCIAL ADMINISTRATION

He/ she is required to carry out an academic research on the topic  
THE CONTRIBUTION OF COMPASSION ASSISTED PROJECTS  
TOWARDS THE PSYCHO-SOCIAL WELLBEING OF (OVC) ORPHANS AND  
VULNERABLE CHILDREN IN MBALE DISTRICT  
and thereafter produce a well bound hard cover research report (MAROON) in color for undergraduate and three (BLACK) copies for Postgraduate students as a University requirement for the award of a degree/diploma in the academic discipline that he / she is pursuing.

We shall be grateful for the help you may offer to him or her accordingly.

Thank you.

Yours faithfully,

Handwritten signature of Mr. Akampurira Timothy

Stamp: '28 FEB 2024' and 'OFFICE OF THE ACADEMIC REGISTRAR'.

Mr. Akampurira Timothy  
Academic Registrar