

**ADDIS ABABA UNIVERSITY**

**SCHOOL OF SOCIAL WORK**

**The Contribution of Religion Based Organization to Family's  
Psychosocial and Spiritual Care for Children and youth: The Case  
of Children and Youth Supported by *Genete Eyesus* Child and  
Family Development Program.**

**By: Teshome Abera**

**A Thesis Submitted to the School of Social Work**

**In Partial Fulfillment of the Requirement for the Degree of Master of Social  
Work, Addis Ababa University**

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**June, 2019**

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Advisor: Mesele Mengisteab (PhD)

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Addis Ababa University

Addis Ababa, Ethiopia

June 2019

## **Letter of Declaration**

I, the under signed, declare that, this is my original work and has not been presented for a degree at another University and all the source of materials used for the research project have been duly acknowledged.

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This is to certify that the thesis prepared by Teshome Abera, entitled: The Contribution of Religion Based Organization to Family's Psychosocial and Spiritual Care For Children: The Case of Children Supported by *Genete Eyesus* Child and Family Development Program and submitted to Addis Ababa University School of Social Work in partial fulfillment for the requirements of Master of Social Work complied with the regulations of the Addis Ababa University and meet the accepted standards with respect to originality and quality.

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## Abstract

The purpose of this study was to understand the contribution of religion based organization to family's psychosocial and spiritual care for children and youth in *Genete Eyesus* Child and Family Development Program. The study was conducted to explore the contribution of religion to the family's psychosocial and spiritual care for their children and youth with a particular reference to the Ethiopian Orthodox *Tewahedo* Churches-Child and Family Affairs Organizations in Addis Ababa. The research employed mixed, descriptive phenomenological approach to describe the Contribution of religion to family's psychosocial and spiritual care for children. Questionnaires were used to collect data from children while the interview schedule was used to collect data from the organization Officials, children's family and the children and youth. Data were gathered using in-depth interviews and questionnaire. For in-depth interview a total of 15 respondents and for questioner a total 172 children in the age of 14 up to 24 years old who have been helped by the Organization. The data collected quantifications were encoded categorized and organized ready for analyses which were processed by the Statistical Package for Social Sciences (SPSS) version 22 for descriptive statistics, and the transcription of in-depth interviews and open ended questionnaire responses for the qualitative part including triangulation and observation.

The findings of the study indicate that children are affected by lack of psychosocial and spiritual care from parents, religion based organization and society. Lack of psychosocial and spiritual care a major risk factor for their well-being. Children from their own parents and caregivers in the households appear to be abused emotionally and physically. Children who lack psychosocial and spiritual care tried to commit suicide, the desire to commit matricide and patricide, feel lonely, depressed due to the influence they face in their household and society. In order to improve children and youth's psychosocial and spiritual care, the study recommends that the organization, should give counseling service and different training (life skill, peer education, skill of stress management... etc.). The family also should give psychosocial and spiritual care for their children, which require proper intervention in the area to improve the psychosocial and spiritual well-being of the affected children and youth. The Conclusion was made and the major finding was discussed in relation to other research findings. This study has its own implication for social work practice, research and Policy.

**Key words:** Religion, Psychosocial and Spiritual Care

## **Acronyms**

<b>AACA Addis</b>	Ababa City Administration
<b>A.D</b>	Anno- domino
<b>AIDS</b>	Acquired Immune Deficiency Syndrome
<b>CBOs</b>	Community Based Organization
<b>CCCS</b>	Child Care Centers
<b>CSA</b>	Central Statistics Agency
<b>CFAO</b>	Children and Family Affairs Organization
<b>DDP</b>	Diocese Based Development Program
<b>DICAC</b>	Development & Inter- Church Aid Commission
<b>EOTC</b>	Ethiopian Orthodox <i>Tewahido</i> Church
<b>FBO</b>	Faith Based Organization
<b>GECFDCO</b>	Genete Eyesus Child & Family Development, Program Coordination Office
<b>HVC</b>	Highly Vulnerable Children
<b>IRDPS</b>	Integrated Rural Development Program
<b>MDGS</b>	Millennium Development Goals
<b>NGO</b>	Non - Government Organizations
<b>OVC</b>	Over Vulnerable Children
<b>PSS</b>	Psychosocial Support

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## **CHAPTER ONE: INTRODUCTION**

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

According to the research by (Mwoma, (2015) the term psychosocial emphasizes on the close connection between psychological aspects of our subjective experiences like (personal thoughts, emotions and behavior) and broader inter-subjective social experiences (involving relationships, tradition and culture). Grandparents and extended family members in many communities who provide the social support are usually overburdened with caring for children whose parents has died, which is a hindrance to the provision of the intended social support for these children. Psychosocial support in this context, therefore, could refer to the care and support provided to influence both the child and his/her social environment.

Spiritual care and support enhances and integrates all other dimensions of health, including the physical, mental, emotional and social. Spiritual care and support denote a sense of connection to something larger than oneself, providing a sense of awe, wonder, meaning, purpose and personal value. Spiritual care brings a sense of ‘good feeling about oneself’ as a human being and as a unique individual (NHS Scotland, 2009).

The importance of religion in society, People get mental peace from religion. Religion explains the causes and remedies of individual sufferings and as such it console people in their junctures. The important function that religion performs is that it inculcates social virtues in people like truth, honesty, love, discipline. Religion works as an instrument in converting animal qualities to human quality. Religious education teaches people for promoting social welfare. Religious rites and festivals are means of recreations. Religion creates values amongst people and as such it is the source of social cohesion (Nath.S& Phil.M, 2015).

Religion is an important instrument for promoting social solidarity. Religious institutions help in controlling the behavior of the individual. Religion works as an instrument of influencing in

economic field and works as an effective means in strengthening self-confidence of people (Nath. S & Phil. M, 2015).

As per the explanation of Nath & Phil, (2015) people can get sense of mental peace from religion. Religion explains the causes and remedies of individual sufferings and teaches people about social welfare. The important function of religion is that it inculcates social virtues like truth, honesty, love, discipline... into people's behavior. It creates values amongst people and it is the source of social cohesion. It is an important instrument for promotion of social solidarity. Religious institutions help in controlling the behavior of individuals.

According to Ross, E. (2014) good psychosocial care and support for children and youth have many positive impacts on their cognitive development and behavior. It fosters the individuals' self-esteem, self-worth and confidence. Moreover, it increases social connectedness, the ability to share, sense of empathy and respect for others. Particular care and support given to children promote age appropriate cognitive development, behavior and different skills.

Children who are aware of their latent spiritual capacities and who have developed moral capability have more resilience in the face of hardship and greater ability to act in partnership with others to remedy problems and to achieve social justice. Ethiopia is undergoing into Social and Economic changes. So children have to be trained to respond to and adjust with these social changes satisfactorily by equipping them with desirable skills and values (Atieq U. & Showkeen B. 2013).

In Modern Educational System there are some hindrances which do not lead children to become fully intelligent in all spheres of developments (emotionally, socially, morally, and intellectually) which lead the children sometime towards anxiety, frustration, and depression. If children are spiritually intelligent enough, they can overcome all these difficulties in a successful way (Atieq U. & Showkeen B. 2013).

It is common for most religions to provide support for those who are helpless and poor. Like other religious institutions, the Ethiopia Orthodox Tewahido Church (EOTC) has been engaged in the provision of social support following the teaching of the Holy Bible; the EOTC provides various forms of social support to the society (Siferaw, 2015).

The Ethiopia Orthodox church has been a major source of spiritual and moral values, education, culture, history and tradition of the country for almost 1,700 years. Throughout its long history, the Ethiopian Orthodox church has been playing a significant role in the cultural development of the people and the preservation of the country's independence from foreign aggression. It used to mobilize the people to defend their country against the threat of external powers. The various churches and monasteries situated across the country are living testimony to the dynamic role the church has been playing for the advancement of the material and spiritual life of the society (EOC-CFAO, 2017). This study aims to address the contributions of the Ethiopian Orthodox *Tewhido* Church to the family's psychosocial and spiritual care for children and youth.

## **1.2. Statement of the problem**

Poor psychosocial and spiritual cares have many immediate and long-term consequences for children, their families and communities. Children who lack psychosocial and spiritual care support are at higher risk of violence, separation from family members and friends, and lack of essential services. Moreover, in those above mentioned consequences results in loss of home, economic difficulties or poverty, inadequate living conditions and much more might be the result (Mattingly, 2017).

In today's competitive world of Globalization people are suffering from different types of personality disorders, whether they are behavioral, mental, social, and emotional. The other aspects of personality like spirituality are not properly developed for the growth of attitudes, habits and values among people (Atieq U. & Showkeen B. 2013).

Research indicated that children who are exposed to poor family management practices are at a greater risk of disorders. In this regard, De Pan filis, (2006), described that a major component of emotional and psychosocial development is attachment. Children who have not experienced by psychosocial care neglect have been found to demonstrate higher frequencies of insecure, anxious, and avoidant attachments with their primary caregivers than non-maltreated children. Children those have not psychosocial and spiritual care may suffer from particular behavioral problems throughout their life.

In Ethiopia, different studies were conducted in relation to the role of religious institutions. For example Kumilachew (2015), has studied the social, economic role religion plays, with a particular reference to Ethiopian Orthodox Churches in Addis Ababa. In his study, the role of churches in the provision of social support is: emotional support, provision of food and provision of cloths. In addition, he also reported that the church's role in affecting the nature of social and interpersonal

relationships of its followers is high. Moreover, the study has finally sorted out that religion is an inherently a social phenomenon and it has many effects on the socioeconomic life of the community.

According to Habibatbar, (2012) the function of religion in human being's life is a lot and is present in all aspects of human being life. Some of the functions of religion in social and personal life are mentioned. Religion functions in personal life are mental comfort, meaningful life, spiritual enjoyments, reduction of pains, and physical health. In social life aspect are social unity, wellbeing in life, freedom and social justice, helping others, less crime and the growth of culture and civilization.

Serkalem (2015) works on the use, application and integration of religion, spirituality in clinical social service in Addis Ababa In her study; she attempted to explore the contribution of religion in the process of helping patients in clinical social service. Furthermore, she tried to explore the actual need for the religious/ spiritual integrated practice in Addis Ababa and the effective use of evidence-based spirituality integrated interventions as alternative ways of coping with health. Psychosocial and spiritual care and support create a safe environment for the child through creating family connectedness and respect to each other.

In addition good psychosocial and spiritual care promotes positive values and disciplined children. It promotes self-worth, confidence; provide emotional support and model positive stress management skills (Ross, 2014).

The Ethiopia Orthodox church has been playing a significant role in the development of the people. Since its establishment, EOTC–CFAO has been promoting various relief and development programs. About 500,000 poor and vulnerable households have obtained direct and indirect supports from EOTC-CFAO in various parts of the country. Particularly, more than 45,000 orphaned and vulnerable children received holistic institutional care, including psychosocial support (EOTC-CFAO, 2013, 2017)

Despite its role of material support as above mentioned, EOTC's participation in psycho-social and spiritual support has not been well explored and documented yet. The research works conducted so far dealt with mainly the engagement of the church in the provision of material support, not in the role of the church in provision of psycho-social support for the needy population. Therefore, the objective of this study was to examine the contribution of religious based institutions in the psychosocial and spiritual care for children and youth from the experience of EOTC-CFAO. The contribution of religion based organization in the psychosocial and spiritual care, which hasn't been studied yet, had been examined in this study. The study was conducted in *Woreda* one and two of *Yeka* sub-city in Addis Ababa.

### **1.3. Objective of the Study**

#### **1.3.1. General Objective**

The overall objective of this study is to explore the contribution of Religion based organization to the family's psychosocial and spiritual care for children and youth with a particular reference to the Ethiopian Orthodox *Tewahedo* Churches-Child and Family Affairs Organizations in Addis Ababa.

#### **1.3.2. Specific Objectives of the Study**

In order to achieve the above general objective, the following specific objectives have been addressed.

- To assess the various care and support services (psychological, social and spiritual) families get out from their religion for their children and youth.
- To explore impacts that families witness from their children and youth as a result of the psychosocial and spiritual support they make out of their religion.
- To identify challenges faced by the organization in the process of service provision for children and youth.

## **1.4. Research Questions**

### **1.4.1. Main Questions**

The main question of this study tried to answer how religion supports children through spiritual, social, and psychological care and support services.

### **1.4.2. Specific questions**

- What are the social cares and supports families get out from the organization for their children and youth?
- What are the psychological cares and supports families get out of the organization their religion for their children and youth?
- What are the spiritual cares and supports families get out from the Organization for their children and youth?
- What changes do families witness from their children as a result of the psychosocial and spiritual support by the Origination?
- What are the challenges faced by the organization in the process of delivering theses services to its clients?

## **1.5. Scope of the Study**

Even though CFAO has project areas with in Addis Ababa and outside the city, this research has been mainly be focused on the contribution of CFAO to caring and supporting children in Addis Ababa *Genete Eyesus* Child and Family Development Program Organization. This has been done deliberately to make the study manageable. Moreover, as per the pre- information the researcher has got from CFAO officials, these areas have an exemplifying experience on community based multi-stakeholders activities on caring and supporting children issues and their experience can shade light for other areas as stakeholders activities with in Addis Ababa project areas . The contributions have

been described in terms of the role given, the intervention techniques that have followed the community participation to child empowerment in these area and challenges that have faced.

### **1.6. Significance of the Study**

Religion may affect the social and economic aspects of a certain community. Understanding multi-functions of religion helps someone to easily understand the socioeconomic life of the community. This study will play a great role in providing vital information for administrators of the city to use religious organizations as a partner in implementing their social and economic policies. The findings of this research are expected to; Document lessons learnt from the caring and supporting in the EOTC-CFAO and be a stepping stone for researchers, NGOS, policy makers, donors and concerned parties to have information on the challenges of the caring and supporting process.

In addition to recommend on the possible options to come up with positive effects and inform, motivate and promote the researcher and others for further studies in the EOTC-CFAO and this study had add knowledge by bringing to light the caring and supporting roles of EOTCs in Addis Ababa. Generally, this study has played a great role in providing vital information for administrators of the city to use religious organizations as a working partner in implementing their social and economic policies.

### **1.7. Limitation of the Study**

Limitation is concerning on the obstacles and shortcomings of the research while conducting and after the results stated out. On this study there were some limitations which are affecting the completeness of the research findings. It is possible to say that all researches are not free from any kind of limitations. The difference is on the methods that researchers used to minimize those limitations. I have faced some challenges while I conduct this research. The other constraint was the difficulty to access informants. To solve this problem, I decided to extend the time in which I first

planned to finish the research. Despite the above limitations, the researcher believe that the research findings are descriptive and provide valuable insights into the experiences of community based multi-stakeholders approach to family's psychosocial and spiritual care for the children in *Genete Eyesus* Child and Family Development Program.

### **1.8. Operational Definition**

**Psychosocial support:** - Describes a continuum of care and support and aims at ensuring the social, emotional and psychological wellbeing of children as they face life's challenges.

**Social support:** -Defined as an emotional, informational or practical assistance from significant others, such as family members, friends, or coworkers.

**Spiritual support:** - Spiritual care can be described as that which gives meaning to life. It refers to the universal human need for love, hope, relatedness, value, and dignity.

**Religion:** According to Ethiopian orthodox *Tewahedo* church it is the set of beliefs, feelings, dogmas and practices that define the relations between human beings and sacred or divinity.

### **1.9. Organization of the Paper**

This paper is structured in six Chapters. The First Chapter includes the introduction, statement of the problem, research objective, and research questions. Additionally, it discussed the scope, significance, and provides the definition of important terms used in the study. It provides preliminary information about Contribution of Religion to Family's Psychosocial and Spiritual Care Support for Children in general. The second Chapter is dedicated to literature review that shows the experience of different countries and findings of different authors and gives a general overview of the Contribution of Religion to Family's Psychosocial and Spiritual Care and Support for Children. The third Chapter describes the methods that were employed in the study; how data were collected and analyzed, data quality assurance and ethical considerations.

The fourth Chapter provides the data presentation and major parts that were emerging from the mixed data gatherings. The major parts of this chapter are lack of Psychosocial and spiritual that Affect Children and Youth, Children and Youth Psychological, spiritual, Adverse Situation of Psychosocial Challenges of Children and Youth, Contribution of the church for psychosocial and spiritual care support, Activity of the organization in the psychosocial and spiritual care support for children and Youth. The fifth Chapter discusses the above mentioned major parts by comparing and contrasting them with the findings of prior studies. The final Chapter is dedicated to conclusion and social work implications.

## **2. CHAPTER TWO: REVIEW OF RELATED LITERATURE**

Psychosocial Support is the on-going care and support of children and youth to meet their age-appropriate and relevant emotional, spiritual, cognitive, social and physical needs, through interactions with their surroundings and the people who care for them. And also psychosocial support is an intervention that helps the child live and copes with life and its stresses. It helps build resilience. It is an on-going process with in the family circle and the community, and the care and support offered by caregivers, family members, friends, neighbors, teachers, and community members, as well as the support offered by specialized psychological and social services. PSS is about day-to-day consistent care and support through family and community interaction(Mahery et al.,2010).

Additionally, Psychosocial refers to the child's inner world and relationship with his or her environment. Psychosocial support helps maintain a continuum of family and community-based care and support during and after an emergency and prevents immediate or long-term mental health disorders. Psychosocial support involves a range of care and support interventions(Save the Children, 2011).

Psychosocial support is a continuum of love, care and protection that enhances the cognitive, physical, emotional, social and spiritual well-being of a person and strengthens their social cultural connectedness and resilience. Effective PSS is age and gender sensitive, within specific cultural contexts and draws on the strengths of the child, family, and community. The holistic nature of psychosocial wellbeing requires that PSS is appropriate, adequately and consistently provided. It positively influences both the individual and their social environment(Ministry of Labour Social Security and Services Departement of children Services , 2015).

The aims of psychosocial supports are, describing a continuum of care and support and ensure the social, emotional and psychological well-being of individuals, their families and communities. The

provision of psychosocial support services is aimed at enhancing the social, spiritual and emotional well-being of orphaned and vulnerable children and youth and may be prevented or curative in nature. Psychosocial support may include a range of actions along the continuum; Love and affirmation; Ensuring that the child's basic rights are realized (for example protection, nutrition, development, health care, and participation); Listening and responding to the child in order to assist him or her to cope in times of difficulties such as coping with loss or exposure to frightening experiences; Ensuring that the child is well connected socially to others and Strengthening the life skills of the child (Ross, 2014).

Psychosocial support if someone is in great pain or distress, their capacity to deal with other matters is severely limited. The importance of services that alleviate or minimize these physical symptoms cannot be overstated. Effective relief of physical distress is vital, but meeting a person's psychosocial needs is also an important factor in ensuring that people achieve the best possible quality of life in the time that remains to them. This should, therefore, be a major consideration for those who commission and provide services for people who are dying(Shipman et al., 2010).

The term psychosocial emphasizes the close connection between psychological aspects of our subjective experiences (involving personal thoughts, emotions and behavior) and broader inter subjective social experiences (involving relationships, tradition and culture). Grandparents and extended family members in many communities who provide the social support are usually overburdened with caring for children whose parents have died, which are hindrances to the provision of the intended social support for these children. Psychosocial support in this context therefore, could refer to the care and support provided to influence both the child and his/her social environment, with a view to enhancing his/her psychological and social well-being(Mwoma & Pillay, 2015).

## **2.2. Psychosocial Support for Children**

Psychosocial support is a term that is widely used, but frequently not understood. According to (A.A. & F.W. 2000) ‘Psycho’ refers to the inner world of a person – their thoughts, feelings, and emotions – while ‘social’ relates to the external world and environment of the person, and the relationships they have with this. Psychosocial support work therefore focuses on the aspects of an environment or situation which impact on both the social and psychological well-being of affected populations. While psychosocial support can be achieved via specific targeted activities and programmes, it is important to understand that all interactions with children have the potential to be psychosocially supportive. This message needs to be spread to all humanitarian workers involved in the relief effort, even if they do not have a primary responsibility for child welfare.

All humanitarian actors have a responsibility to ensure beneficiaries’ emotional well-being is respected in humanitarian operations. For example, respecting children, showing a positive attitude towards them and valuing their presence are all ways of helping to improve children’s self-confidence and self-esteem and hence their well-being. Psychosocial support means working not only with children but also their families, the community, and other organizations to advocate for improved access to community support and basic services(A.A. & F.W., 2000).

## **2.3. Principles guiding psychosocial support**

### **2.3.1. A child rights perspective**

The PSS support framework is based on a rights-based approach which recognizes that all vulnerable children and youth have a basic right to identity, food, safety, shelter, nutrition, health care, education and psychosocial support services based on best practice and which foster local input.

### **2.3.2. Legal Protection from harm**

Protection of children and youth from all forms of violence and abuse in their families and communities, including political violence, violence at school, domestic violence, violence and bullying among peers and gender-based violence, is central to the provision of PSS. As psychosocial support has the potential to cause harm because it deals with highly sensitive issues the principles of informed consent, confidentiality, honesty and objectivity, and responsibility of practitioners are crucial (Ross, 2014).

**The best interests of the child:** -When any changes need to be made in the life of a child, the primary consideration should be the best interests of the child and his / her rights should be taken into account.

**Child participation:**-Children's participation in discussions that affect them, in a way that is appropriate to their age, maturity and stage of development with due consideration being given to their opinions, is both a fundamental right and a valuable strategy to uphold their dignity and sense of agency i.e. control and sense of direction for their lives.

**Family-based care:** -The best form of care for children is within their families and communities. Where possible, children should remain in a stable environment with a familiar daily pattern and known cultural context (Ross, 2014).

**Social and community integration:**-The indigenous concept of a village raising a child, or community support from caregivers, school staff, and friends, is crucial for reconstructing relationships for children who have lost these when their parents died. Being connected, attached and belonging to a community is important in countering feelings of isolation, alienation and associated anxiety. The developmental approach, which links social and economic policies in a comprehensive, developmental process, emphasizes people's needs, aspirations and capabilities (Ross, 2014).

**Inter-sectoral collaboration and mainstreaming Psychosocial support [PSS] into all services:**

-Children's psychosocial wellbeing does not develop in isolation, but depends on a synergistic satisfactory of needs and holistic access to rights. For example, food satisfies hunger, but family meal times can kindle a sense of belonging and emotional, spiritual connection. The child and family should be part of a continuum of care, forming a protective environment from the home to specialized care sites. Interventions should focus on creating integrated programming for psychosocial support, mainstreamed into all services and all levels of a child's life. This requires principles, practice, in which children are positively regarded with respect, collaborative and intersectional, networking and partnerships with other organizations, programs and service providers(Ross, 2014).

**Sustainability of services:**-Services should provide lasting and long-term benefits for children, youth, their families, caregivers and community, including the empowerment of children and youth with livelihood and self-reliance skills and opportunities that will increase their potential to earn a living and generate income(Ross, 2014).

**Prevention as opposed to reaction:**-Preventing children from being exposed to risk is preferable to focusing only on the alleviation of suffering. Prevention requires a focus on building stable, non-violent, healthy and productive communities that have the resources to care for their children. It also requires strong connections between people so that they are able to support one another and live with a sense of community solidarity with one another(Ross, 2014).

**Culturally appropriate psychosocial support:**-Psychosocial support services should be locally appropriate in terms of cultural and spiritual practices. Indigenous practices which strengthen psychosocial support should be encouraged(Ross, 2014).

**Gender sensitivity:**-The needs of boys and girls may be different, and consideration should be given to orphans and other vulnerable children in terms of gender. Girls and boys are at risk of neglect,

abuse and sexual exploitation, and care should be taken not to fall into gender stereotyping in a way that discriminates against either gender, or places children at risk of harm. The different needs of male and female caregivers should also be considered(Ross, 2014).

Age and developmentally appropriate support: -Psychosocial interventions need to acknowledge that children and young people require diverse responses at different stages of their life cycles. Such services need to be chronologically and developmentally appropriate to the unique needs of individual children and youth(Ross, 2014).

## **2.4. Difference between psychosocial «Approach» and «Intervention»**

### **2.4.1. Psychosocial approach**

The psychosocial approach emphasizes the close connection between psychological aspects of an individual's experience (namely, thoughts, feelings and beliefs) and the wider social experience (namely, relationships with family, community and friends) as well as the broader social environment (i.e. Culture, traditions, religion, socio-political environment). African culture emphasizes a communal psychosocial model, premised on a definition of the stages of development, according to ability and readiness to perform societal tasks and expectations. African ethics emphasize the point values of inter-relatedness of people, collective decision-making, mutual aid, respect, compassion, hospitality, generosity and service to humanity. This approach takes into account spiritual aspects (value systems and beliefs) which may include traditional healing, traditional beliefs in ancestors, the existence of a Supreme Being or God, and cultural rituals and traditions associated with various rites of passage(Ross, 2014).

The psychosocial approach is a way to engage with and analyze a situation, build an intervention, and provide responsive, taking into account psychological and social elements and their interrelation. Every human being, from birth until death, has need sand skills, which change depending on the

person's state of development, age, culture, social environment and experiences (Spray & Jowett, 2014).

#### **2.4.2. Psychosocial intervention**

A psychosocial intervention is composed of one or several activities that aim to increase the coping capacity of children, families and communities, and to reinforce their integration within society. The impact of a particular crisis may be substantial on a child. Such impact may be linked to an emergency situation (conflict or natural disaster), but equally to social, economic or family crisis. The psychosocial intervention is a targeted response designed to improve the wellbeing of the child. It is not the «treatment» of victim, but rather an accompaniment to the work of all those persons who play a role in the well-being of the child(Spray & Jowett, 2014).

Psychosocial interventions can be found in both health and protection projects. In a health project, such an intervention might be to allow distressed mothers to discuss their children's health conditions; in an anti-exploitation project, the psychosocial intervention could take the form of counseling for children victims' of trafficking. Psychosocial intervention can represent the main activities in some projects (i.e. emergency protection projects) where the aim is to ensure the wellbeing of children and their coping capacities(Spray & Jowett, 2014).

#### **2.5. The impact of Psycho-social interventions**

The impact of psycho-social interventions, due to a scarcity of rigorous studies, the diversity of researched interventions, and the prevailing conditions in which interventions are conducted, it is difficult to make firm conclusions on the impact of psycho-social interventions. They find that although some evaluations are promising, the effect sizes of controlled studies are, at best, moderate, whilst several evaluations were deemed to have methodological flaws. They highlight an apparent gap between research, policy and practice with a serious lack in the literature of evidence-supported

interventions and the presentation of application of approaches. But considers it important to create an evidence base from which psycho-social and mental health interventions can be scaled up(Mattingly, 2017).

## **2.6. The receivers of psychosocial services**

Psychosocial support should be available to all individuals affected by a crisis. Different groups— children, youth, adults, men, women, older people, and people with disabilities— react differently to crises, and some individuals within these groups will have stronger or different reactions than others. A key to organizing mental health and psychosocial support is to develop a layered system of complementary supports that meets the needs of different groups(Mwoma, 2015).

## **2.7. Approaches to psychosocial support for children and youth**

An understanding of the culture within the affected country is of fundamental importance in planning psychosocial support programs. There is increasing recognition by several studies that the application of western, individualized approaches to counseling, therapy and the use of clinical labels does not readily apply in many cultures, and that in many countries these specialists may not be available. Psychosocial approaches have been found to be more suited to strengthening resilience, using local capacities, and promoting coping and positive development. The IASC (2007) guidelines recommend psychosocial interventions ensure as safe an environment as possible and provide a return to routines, since predictability and engagement is important for promoting mental health during complex humanitarian emergencies. In addition to helping a child develop self-esteem and confidence, a focus on resilience gives the advantage of directing attention to their strengths rather than their weaknesses(Mattingly, 2017).

Psychosocial interventions can be an important first step in promoting mental health. This should include stabilizing routines as far as possible whilst providing opportunities to maintain or

reinvigorate social connections and engagement in activities such as education, paid work. Psychosocial well-being focuses programs on the following objectives: Reducing risks to children's safety and emotional well-being while promoting an environment conducive to positive development, effective coping, and resilience. Promoting children's, holistic development and age-appropriate physical, cognitive, and emotional competencies .Fostering a secure and stable environment for children .Strengthening family and community care-giving structures for children. Supporting children's and youth's voice and full participation in all phases of programming .Strengthening local networks that enable child protection, care, and well-being, such as women's groups or religious networks (Mattingly, 2017).

## **2.8. The importance of Psychosocial Support**

The importance of Psychological is that, it mobilizes the power of humanity, Relieves emotional as well as physical suffering, Improves a person's immediate ability to function under stress, Reduces long-term negative psychological effects(Michels, 2010).

## **2.9. Spiritual care**

Spiritual care is usually given in a one-to-one relationship, is completely person-centered and makes no assumptions about personal conviction or life orientation. Spirituality provides the higher level intelligence and wisdom which integrates the emotional with the moral. It acts as a guide in integrating different aspects of personality and ways of being and living. It is found in the integration of several deep connections: the connection with one's true and the higher self; the connection with society and especially with the poor, the deprived and underprivileged; the connection with the world of nature and other life forms; and for some, a connectedness with the transcendent (NHS Scotland, 2009).

Wholeness and relationships A person's spirituality is not separate from the body, the mind or material reality, for it is their inner life. It is the practice of loving kindness, empathy and tolerance in daily life. It is a feeling of solidarity with our fellow humans while helping to alleviate their suffering. It brings a sense of peace, harmony and conviviality with all. It is the essence and significance behind all moral values and virtues such as benevolence, compassion, honesty, sympathy, respect, forgiveness, integrity, loving kindness towards strangers, and respect for nature. Spirituality creates and connects these virtues (NHS Scotland, 2009).

The importance of spirituality for human health and wellbeing is, becoming better understood. They acquire a sense of direction, a sense of equality with others and they relate positively to them, as they do with the world around them. Spiritual care and its relationship to religious care, many have found the following descriptions to be helpful, although they do not claim to be a full explanation. An important part of spiritual care is listening to the narratives of others and facilitating the discovery of meaning and purpose within these narratives. Narrative identity is key to a person's understanding of self and so one of the most effective ways to show respect for another is to listen to their story (NHS Scotland, 2009).

## **2.10. Religion**

Religion is a social institution that instills patterns of beliefs and behavior in people so as to help society meet its basic needs. Religion actually strengthens social stability. Religion works with other social structures to strengthen social coherence by improving personal and social conditions through such things as building inner peace, strengthening physical health, and ensuring unity(Massaquoi, 2017).

Religion is a collection of cultural systems belief systems and world views that establish symbols and relate humanity to some supernatural who are worshipped through ritual practices. In

addition, religion is found in all known human societies and even records in the earliest societies show clear traces of religious symbols and ceremonies. Throughout history, religion has continued to be a central part of societies and human experiences, shaping how individuals react to the environments in which they live .Since religion is such an important part of societies around the world; scholars show great interest to know everything behind it. Religion can be seen as both a belief system and a social institution. As a belief system, religion shapes what people think and how they see the world. As a social institution, religion is a pattern of social action organized around the beliefs and practices that people develop to answer questions about the meaning of existence(Mekonnen, 2017).

Religion occupies an important place in human society. It is believed by many thinkers that religion is instinctive in men. Almost all the aspects of society including economic and political regions are guided and controlled by it. It formulates human conduct, behavior, social sense morality (Nath & Phil, 2015).

The functionalist contends that what is essential in religion is the role it plays in society, the way in which religion serves to bind together the members of a community into one coherent whole. This makes a functionalist definition true to the etymology of religion. In religion, there are commandments and ethical elements, which are to be observed through which the salvation is completed. It is a powerful factor in elevating the object of worship, the religious relation and the religious life. Through the commandments and ethics within the religion, the sphere of the sacred is enlarged and committing life to these rules is an aspect of the religious vocation, ethical duty and a religious obligation(Wassie, 2002).

### **2.10.1. The Role of religious institutions in society**

As religion so its institutions also play an important role in social life. None can deny the fact that the different kinds of social institutions such as, domestic, economic and political influence on religious institutions. But it is also true that these institutions are sometimes influenced by religious institutions. An important aspect of religion is prayer and different classes of people belonging to different castes of society assemble religious institutions for performing prayer and worship. By these activities there forms common feelings which thereby further generate a common sentiments and fellowship amongst the worshipers of a particular religion. Sometimes it is found that the members of a particular religion unite together, and for the greater interest of the society they perform different humanitarian activities(Nath & Phil, 2015).

Religious institutions perform not only their religious activities , they also discharge different types of activities related to social welfare such as, charitable hospitals, schools, homes for the homeless. These institutions also run orphanages and collect money for the poor people. It cannot be denied that religion has an external form of social control. The different activities of the people and their different spheres of social life are still influenced by religious rites and ceremonies. People generally express their religious feelings through rituals and ceremonies. It is also true that almost all the aspects of lives of primitive people were covered by religious practices, although these were crude in nature and did not have any precise organization. Not only in primitive societies but also in modern societies religious activities occupy an important place(Nath & Phil, 2015).

The different occasions of social life, such as birth, death, marriage etc. religious rites are performed. Similar activities are found in the events related with economic life also. Moreover, it is found that, in almost all communities' religious rites are common practices during various occasions in social life such as, inauguration of a new building, oath taking etc. From the above description of

the role of religion in social life, it is evident that a regular order of procedure is developed by religion in society and thus it helps to control the society(Nath & Phil, 2015).

Religion helps to shape the character of an individual and thereby it molds social life. It brings forth the sense of social value in the mind of people. In obeying the social laws or to respect the elders and to show sympathy towards the feelings of others, or to discharge the social obligations faithfully, the role of religion is immense. In those cases it acts as a teacher. Not only this, a sense of fellow feeling amongst the people belonging to different communities is also taught by religion. Moreover, religion teaches that the man's love and services to God will be real only if he loves and serves humanity(Nath & Phil, 2015).

In developing moral consciousness amongst people, religion acts as an inspiring factor. Religion enforces uniformity of behavior and it strengthens social solidarity and thereby acts as an instrument in stabilizing social order. In primitive age the influence of religion was very great in controlling society and this feature is not totally lost even today. Social life of primitive people were controlled by inspiring God-fear in their minds but in modern age people are inspired not by fear but by the hope for the attainment of virtuous and noble life. Thus, by fostering patriotic sentiments in men, religion helps to maintain social integration. Religion not only guarantees values, but it also gives meaning to life. Moreover, the confidence to go on adventures is also inculcated in our mind by religion. Thus narrating the role of religion he says, "Religion is the discipline which touches the conscience and helps us to struggle with evil and sordidness, saves us from greed, lust and hatred, releases moral power and imparts courage in the enterprise of saving the world(Nath& Phil, 2015).

### **2.10.2. Religious Mandates**

The Christian principle and Gospel of the church commanded to provide love, spiritual, mental, and physical nourishment to children and feed the hungry, heal (assist and treat) the sick; care the orphans, elderly and the poor without discrimination (EOC-CFAO, 2017)

Based on this thought CFAO was established in 1972 to give responses to the catastrophe, which left so many children without parental care. It is obvious that the efforts made so far could not be concluded as effective as planned or brings about the desired results compared to the magnitude of the problem of children and families. Therefore, EOTC-CFAO has decided to make ready and improve its operation in line with the fast changing external environment (where resources are becoming scares, fast changing political and economic environment) and the need of expanding the services provided so far in qualities, quantity and diversity of the programs is also becoming mandatory(EOC-CFAO, 2017).

Most importantly, Strategic planning has been taken as an indispensable opportunity to EOC (CFAO), to unify its management, employees, stakeholders and customers through a common understanding of where it is going, how everyone involved can work to the common purpose of improving and expanding services to destitute families and children on a broad based donors' assistance. Strategic Plan (SP) is an indispensable tool for the comprehensive and sustainable achievements, and the fact that it is an essential instrument which will enable the organization, institution not only in indicating direction as to how to attain its objectives and goals, and properly utilizing the resources and motivating employees, EOTC-CFAO has embarked upon it. The major objectives of undertaking the strategic planning, comprised of assessing the relevance of existing programs and the need for new interventions, revising the Vision, Mission, Values and Goals, Improving the lives of OVCs in the institutional care, reunification and properly administer Youth

reintegration program, designing and expanding an effective and participatory livelihood intervention program components to vulnerable family to fight poverty and social exclusions(EOC-CFAO, 2017).

Religious care is given in the context of the shared religious beliefs, values, liturgies and lifestyle of a faith community. Religious create its best, should always be spiritual(NHS Scotland, 2009).

### **2.10.3. Religion and Social Support**

Social support may be broadly defined as an emotional, informational or practical assistance from significant others, such as family members, friends, or coworkers etc., and that support actually maybe received from others or simply perceived to be available when needed(Massaquoi, 2017). Therefore, when we say the role of religion in social support, it is to mean that the emotional, informational and material support that individual's gain from religion. The role of religion on social support cannot be understood by relying on a single research because researchers may emphasize on one aspect of social support while ignoring the other(Massaquoi, 2017).

### **2.10.4. Social Functions of Religion**

Where religion improves individuals' lives so as to prevent social disintegration, it also performs certain functions to help maintain society's capacity to survive. Among these are ensuring social unity, promoting freedom, justice and social welfare, and reducing crime rates. Social unity: Religion as an agent of socialization that binds people together with a common set of beliefs. The communal practices of these beliefs bring together members of religions physically in houses of worship, thereby strengthening their social bond, as it facilitates communication and interaction among them. Practices like religious rituals show social cohesion among members of a religion from different races and languages. Hence, religions as melting pots play a role in promoting just behavior or treatment in society(Massaquoi, 2017).

### **2.10.5. Children, Religion and Spirituality**

Children's well-being and their hope for the future is bound up with their understanding of themselves, their purpose and their relationship to others and with that which is variously referred to as God, the Creator, the Divine, or the transcendent.. Most people acknowledge that spirituality is not solely the prerogative of people of faith and that every child has innate spirituality. This spirituality leads them to connect with and derive meaning from the world around them, including the natural environment. As children develop, these innate sensibilities begin to be shaped more formally, primarily by the family – itself shaped by spirituality and religious belief (Alejandra & Vinueza, 2016).

For children, being a member of a particular family means acquiring its values, beliefs, and traditions, which occurs in no small part through exposure to religion. As children grow and their relationships with their broader communities develop, religion further influences them through the social and cultural institutions in which they participate. The mosque, church or temple often provides children's first point of contact with the community beyond their immediate neighbors and with wider social institutions (Alejandra & Vinueza, 2016).

There, children learn not only religion, but also important lessons about morals, social behavior and their own value as human beings. They also learn subtle messages about whether the world is a safe place, how to be a good person, and what their responsibilities are as members of a religious group. Their developing religious identity becomes part of the wider, collective identity that binds children and adults together into a person having a sense of collective meaning and place in the world (Alejandra & Vinueza, 2016).

Given the profound impact that spirituality and religion have on children's development and socialization, there is the potential to provide strong protective influences and promote resilience. The

beliefs, practices, social networks and resources of religion can strengthen children by instilling hope, by giving meaning to difficult experiences, and by providing emotional, physical and spiritual support. Unfortunately, the same elements of religious experience can also promote or condone violence, including violence against or involving children; thus increasing the vulnerability of children faced with adversity. Violence can lead to a loss of connectedness to one another, our environment, and the sense of a higher purpose (Alejandra & Vinueza, 2016).

Ultimately, violence against children not only violates a child's physical and emotional integrity, it violates a child's spiritual integrity too – especially when violence is perpetrated in the name of religion or tradition. Experiencing violence fractures children's sense of trust in others and wonder for creation and the world around them. Nurturing a child's spirituality and promoting the protective aspects of religious belief, practice and community provide valuable resources for children whose lives have been blighted by violence(Alejandra & Vinueza, 2016).

#### **2.10.6. Religion and spirituality**

Religion and spirituality have been a source of inspiration and motivation for organizing individuals, communities and institutions in many areas such as solidarity, cooperation and humanitarian aid, in psycho-social, cultural and economic spheres. In today's world, the contributions and services to the civil society that come from religious, spiritual and moral beliefs and values, as well as the related practices, at individual and societal level, have largely been ignored and not been brought to light, and they have not been duly covered in the media. Positivist and secularist policies and educational programs certainly play a role in this situation(Press, 2016).

#### **2.10.7. Religious Belief and Its Relation to Psychological Well-being**

Psychological well-being resides within the experience of the individual. It may be defined as the state of feeling healthy and happy, having satisfaction, relaxation, pleasure and peace of mind. It

deals with people's feelings about everyday experiences in life activities. Such feelings may range from negative mental states or psychological strains, such as anxiety, depression, distress, frustration, emotional exhaustion, unhappiness and dissatisfaction, to a state which has been identified as positive mental health. Psychological well-being is deeply related to the individual's religious beliefs, which offer a rich source of material to consider the relationship between various dimensions of religious involvement and other facets of psychological well-being. The persons with stronger religious faith have also reported higher levels of life satisfaction, greater personal happiness and fewer negative psychosocial consequences of traumatic life events (Joshi et al., 2008).

Religiosity is positively related to a number of measures of psychological well-being. Thus, there is little doubt that religion plays an important role in many people's lives, but the evidence has not been conclusive. Psychologists have long been interested in studying the role of religious beliefs in psychological well-being. Within the psychology of health, an important contribution made by researchers is the significant relationship between religiosity and psychological well-being. The practice of religion has a significant effect on happiness and an overall sense of personal well-being. It had been well-accepted that religious beliefs can shape a person's psychological perception of pain or disability as it creates a mindset that enables the person to relax and allows healing on its own (Joshi et al., 2008).

### **2.11. The Potential role of the Ethiopia Orthodox *Tewahido* Church on the social activity.**

The EOTC has very ancient origins and from its commencement the church combined many roles. At its heart is the spiritual role of bringing the faith to the people and providing care. However, the Church has also remained to be a major teaching institution for over a thousand years. In fact the main focus was for the cultural, artistic and scientific development of Ethiopia for much of its history. EOTC has, for much of Ethiopia's existence, been the main teacher of arithmetic, literature,

astronomy, crafts and skills, literacy and all forms of art. This role continues today. Not only do EOTC support schools and higher education institutions, but also its traditional teaching role continues through the monasteries and the courtyards of local Churches. This ancient tradition is confirmed by the Church's ability to embrace, absorb and transmit secular and scientific knowledge alongside its faith based teaching(Mekonnen, 2017).

The communities have always accepted the multi-faceted role of the EOTC no less in the past than today. Not only has the Church been able to combine its spiritual and secular roles, but also it has always stood firmly for social justice and fought against poverty, so it is perceived as a champion of poor communities. In addition to its understanding of community needs and its commitment to its followers, the Church has also proven its competence in delivering the community care and support needed, both spiritual and material. It is up on these foundations that community trust in the church is built(Mekonnen, 2017).

EOTC played a vital role in the struggle against the recurrent droughts and famines that ravaged the country. In the past four decades, the EOTC has significantly expanded its role as a major supporter of the implementation of the national multi- sector strategy and plan to combat AIDS. The EOTC started development activities in a formal way since the established of EOC- DICAC (Ethiopian Orthodox Church development and Inter Church Aid) in 1972 at its establishment, DICAC was involved in emergency food relief assistance to combat drought that affected to the country and remained very much relief assistance to combat drought that affected the country and remained very much relief oriented till the establishment of the Diocese based development program (DDP) and integrated rural development programs (IRDPs) in 1994. It has also been implementing parish centered mini- income generating projects until 1993 in wide spread geographical locations with little

participation of the community. Some of the projects were flourmills, dairy farm, fattening, oil mill, carpet making etc. (Mekonnen, 2017).

### **2.11.1. The History of CFAO from Establishment to Present (1973 – 2016)**

The Ethiopian Orthodox *Tewahido* Church - Child and Family Affairs Organization (EOTC – CFAO) is an indigenous not for profit, nongovernmental organization established in 1973 by the unreserved effort of the great apostle His Grace Abune Yohannes, the former Archbishop of the Tigray Region. It was established in response to the increase in the number of orphaned and famine stricken children in Wollo, Tigray and Gondar areas due to the 1972/73 drought. The organization commenced its lifesaving mission by converting church schools or seminary into Child Care Canters (CCCs) with the help of “Bread for the World” which is a humanitarian organization in Germany and its historic partner Kindernothilfe (German Christian organization) which means “Help for Children in need”(Ethiopian Orthodox Tewahido Church – Child and Family Affairs, 2016).

First the organization was completely childcare centered. Later on, it broadened its scope to include families together with children. In its three decades of services and performance as a nongovernmental humanitarian organization, EOTC - CFAO has gone through important phases and experiences marked by a mixture of encouraging successes and tough constraints. In its efforts to consolidate the achievements and alleviate the constraints in the pursuit of its noble humanitarian objectives EOTC - CFAO, in collaboration with Kindernothilfe and other organizations, have adopted and implemented various approaches to Child Care(Ethiopian Orthodox Tewahido Church – Child and Family Affairs, 2016).

This explains to what extent EOC-CFAO owns huge productive assets. Currently, these assets are poorly managed and demands huge refurbishing cost. On the other hand, it indicates to what extent it

has opportunity to make use of these productive assets(Ethiopian Orthodox Tewahido Church – Child and Family Affairs, 2016).

## **2.12. The Conceptual Framework**

Psychosocial support describes a continuum of support of children and youth. The provision of psychosocial support services is aimed at enhancing the social, spiritual and emotional wellbeing of children and youth. The psychosocial outcomes for youth and children should therefore include: - Feeling secure, loved and trusting others, a sense of self-worth and confidence, Ability to participate and socially connected to others, has a sense of empathy for others and respect for others.

The psychosocial approach emphasizes the close connection between psychological aspects of an individual's experience and the wider social experience as well as the broader social environment. Youth and children's psychosocial wellbeing affects every aspect of their lives, from their ability to learn, to be healthy, to play, to be productive and to relate well to other people as they grow.

The spiritual care and support can be defined as a feeling of communicating with the others, having meaning and goal in life and having belief and relation with an exalted power .It includes a psychosocial and also religious element. Spirituality, involves a search for meaning and purpose in life, harmony, peace, wholeness and transcendence.

Religion is an important source of values. It helps to shape the character of an individual and it brings forth the sense of social value in the mind of people. In developing moral consciousness amongst people, religion acts as an inspiring factor. Religion enforces uniformity of behaviour and it strengthens social solidarity. It influences people's way of thinking and their actions. Children are the potential hope of a country. They are entitled to special care and support and must grow in a family or community environment for proper socialization and responsibility.

## **CHAPTER THREE: RESEARCH METHODS**

### **3.1. Mixed Methods Approach**

In order to address the objectives of the study, a mixed methods approach was employed. In this case both qualitative and quantitative techniques of data collection and analysis were used at the same time in line with the intention of the study as indicated in the objectives of the study. Data needed to address the objectives of the study was mainly qualitative supplemented by some quantitative information to be generated using a quantitative technique which is survey. The overall intension of the study was to assess the role of religious based organizations in the psycho-social and spiritual support for children which is to be explored qualitatively. However, descriptive data was also required to come up with demographic characteristics, attitudes and varieties of services by the organization. The context and application of the specific techniques is described below.

#### **Qualitative Method**

Qualitative research is characterized by adherence to diverse array of orientations and strategies for maximizing the validity of trustworthiness of study procedures and results. In this study, therefore, there was an effort to maximize the validity of the information by contextual understanding of reality from the perspective of the study participants.

In order to assess assumptions, attitudes and perceptions related to the social, psychological and spiritual contribution of religion to its adherents, children in particular, it is mandatory to use techniques which enable to make sense of the insights of the study participants. Accordingly, in-depth interviews were conducted with key informants from the religious organization and parents of children who were receiving various services from the organization.

## **Quantitative Method**

Though the study was highly dominated by qualitative approach, quantitative methods of data collection and analysis were also used to supplement the quantitative findings. Therefore, a survey was conducted in order to collect relevant quantitative data which was organized and analyzed quantitatively. Descriptive statistics were computed in order to explore frequencies, averages and relations between some variables through cross tabulation.

### **3.2. Study population**

The targets of this study were children and youth who were receiving various supports from *Genete Eyesus* Child and Family Development Organization which is faith based organization located in *Yeka* sub-city in Addis Ababa. This organization, affiliated to Ethiopian Orthodox Church, gives various supports for children and youth under the age of 24. However, the study population for this study was restricted to children and youth in the age of 14 up to 24 years old who have been helped by the Organization. Though there were children below 14 years old being supported by the organization, this study was limited to only those older than 14 years.

This was due to the fact that the majority of service receivers from the organization were 14 years and older as compared to those younger than 14. Therefore, to give more focus on the variety of services delivered to the majority, the selected sample was limited to those children and youth with the age of 14 to 24 years.

### **3.3. Sampling and Sample Size Determination**

In order to select appropriate and relevant study participants, both probability and non-probability sampling techniques were employed.

## **Non-probability sampling**

In order to get rich and full information in relation to religious (monastic) institutions with their respective contribution to psychosocial and spiritual care and support of children, qualitative data was required from different sources mainly from service suppliers and receivers.

According to Ridenour and Newman (2008) purposive sampling helps to find those interviewees (informants) who have required knowledge and experience. According to Creswell (2005) the aim of purposive sampling is to select respondents that will best answer the research question.

Non-probability sampling techniques are those which enable to identify and select research participants mainly for qualitative research approaches. As indicated above, this study has adopted an in-depth interview for the collection of qualitative information from key informants. Therefore, in order to locate and select relevant key informants for this approach, a non- probability sampling which is purposive sampling was applied. In this case, two sets of informants were identified and selected purposefully based on criteria such as relevance and membership in the organization.

The first set of such informants are those from the organization, EOTC – CFAO, itself. These include staff members assuming different positions and roles in the organization. These were director of the organization; program manager; eerily childhood development officer; program officer; monitoring and evolution officer; and youth officer.

The second set of the informants are those from the beneficiary side which include children who got care and support services from the organization and some parents of such children. The children are identified and selected due to their volunteer role and participation in the organization. They participate in various clubs such as HIV/AIDS and girls' club. These children and youth actively participating in such clubs with in the role of coordinating were purposefully selected. Accordingly, from the list of such active children and youth, six were purposefully selected.

Moreover, some parents who had very close relationship with the organization were also identified and selected as key informants for the in-depth interview. There are some parents who are engaged in various volunteer services for the organization. Such parents support the organization in such activities as mobilizing the community to send their children to the organization and creating awareness about the services by the organization, home base care and support services for younger children, facilitating training for the children arranged by the organization. It was assumed that such active parents would furnish relevant data about the types of services and procedures of service delivery by the organization. To this end, three such parents were selected purposefully.

### **Probability Sampling**

In order to collect data through the survey questionnaire a number of respondents were selected through a probability sampling which is simple random sampling. It was possible to get a sampling frame from the organization which was list of 400 children who were beneficiaries of various care and support services from the organization. To avoid any possible source of bias during selection, a lottery method was employed and a total of 172 children were selected out of the given list 400.

## **3.4. Sources of Data and Data Collection Instruments**

### **3.4.1. Sources of data**

In order to triangulate the information, different techniques of data collections and sources were considered. Therefore, the study employed both primary and secondary data collected from different sources. The primary data was mainly collected from the field work while conducting interviews with the key informants and distributing the survey questionnaire which was filled by the children themselves with a close assistant by the researcher. In addition to the primary data, secondary data was collected from different sources such as organizational reports, journals and other relevant documents.

### **3.4.2. Data Collection Instruments**

#### **In-depth interview**

A semi structured interview checklist was prepared in order to collect the qualitative data from the key informants. Using this tool as a guide, in-depth interviews were conducted looking in to the perceptions and attitudes of the respondents regarding the contribution of the religious based organization to the social, spiritual and psychological wellbeing of children. These interview guides were developed from a number of open ended questions tailored to supply data towards the objectives of the study. Such in-depth interviews with some children and parents have helped to explore deeply to the experience of such participants and understand reality with the possible maximum level of validity.

#### **Survey Questionnaire**

Questionnaire is a research instrument consisting of a set of questions (items) intended to capture responses from respondents in a standardized manner. For this particular study, a questionnaire consisting of both open-ended and close-ended questions was developed and employed for collection of the relevant information from the sample of children who were receiving various care and support services from *Genete Eyesus* Child and Family Development Organization. This survey generated data pertaining to the social, demographic, spiritual and psychological characteristics of the sampled children in line with their participation in the various benefits provided by the organization.

In general, the questionnaire was designed to have a total of five parts. The first two parts of the questionnaire dealt with assessing the socio-demographic characteristics of the sampled children. Part three focused mainly on the nature of with-in family relationship between the children who are beneficiary of the services by the organization and their parents.

The last two parts were all about the psychological and spiritual care and support services, respectively, that the children were getting from the organization.

Technically, the questionnaire was translated in to Amharic language for the sake of clear and uniform understanding of the questions by all sampled children. A self-administered approach was employed where this translated questionnaire was distributed among the children to be filled by themselves. However, there was still a close supervision and assistant by the researcher in order to avoid possibility of confusion in understanding some questions.

### **3.5. Data Management and Analysis**

Data analysis is making sense of massive amount of collected data, reducing the volume of information, identifying significant patterns and constructing a framework for communicating the essence of what the data reveal and, hence, producing findings (Creswell 2009).

#### **Qualitative Analysis:**

After qualitative data was collected through interviews with the different relevant sources, it was transcribed and translated in its English version making it amenable for organization and analysis. Data had been analyzed using thematic analysis and facilitated by ATLAS version 7 software packages. Transcribed interviews, generated reported and discussion notes have been summarized, and coded according to the relevance of the issues of the study. For immersion in the data (familiarization with data), the interview transcriptions and generated reports had been reviewed several times.

Then coding, searching the themes, reviewing the themes, defining and naming of themes and, identifying good and poor practices of service delivery, as per the aims of the organization, were subsequently undertaken.

The data collected by the different data collection instruments were recorded, categorized and analyzed based on their themes concurrently with the data collection on a daily basis. The collected data were reviewed through reading and listening of the note taken by the researcher and tape recorder respectively which will be employed as data collection equipment. The tape recorded material/data was directly transcribed into translated into English. Direct quoting was also used to make a comprehensive understanding.

Then different data that has been arranged in their respective sub themes and/or objectives have been synthesized to give meaningful finding and, after that, the synthesized information has given a pattern to be able to make it coherent and understandable enough.

**Quantitative analysis:** The data from quantitative method was clean and organize in the table and then analyzed using descriptive statistics like percentages, frequencies and presentation followed by illustrative explanation. To come up with such descriptive out puts, software called Statistical Package for Social Sciences (SPSS) version 22 was used. Throughout the analysis of data, there was an effort to integrate the quantitative information with qualitatively analyzed themes where appropriate.

### **3.6. Data Quality control**

**Qualitative Data:** The data was collected using interview guide. This guide has contained basic questions and probing questions which had been developed from literature reviews and in line with objectives of the study. And its content validity had been confirmed by adviser. An in-depth interview guide was developed that contained a list of open-ended questions that was supposed to be explored for the purpose of the study.

In order to confirm the appropriateness of the interview tools and assure the quality of the data to be collected, the instrument was tested before the actual data collection. This has helped to identify problems in the draft tool and amended accordingly. The in-depth interviews were conducted by the

researcher himself to make sure whether all questions were approached by the informants and to avoid any sort of confusion in understanding some questions. So, this way possible source of bias was significantly minimized.

**Quantitative data:** To assure the data quality, high emphasis was given in designing data collection tool. Questionnaires were first developed in English and then translated to Amharic language to facilitate the understanding by the respondents. Structured data collection tool was utilized. The questionnaire distributed among the children to fill them by themselves so that they could feel free in responding to questions without the influence of the presence of interviewer. However, the researcher was also open for children to be approached for any explanation or clarification regarding some questions, in case they came across with confusion.

### **3.7. Ethical consideration**

The safety and consideration of the ethical issues of the participants have a special emphasis in any Social Work research. Accordingly, all attempts were made to ensure the rights, privacy and welfare of participant of the study. The objective of the study had been clearly communicated in a language to participants understand. Moreover, supporting letter has been taken from school of social work. Researcher gets the desired data and to remove any doubts the respondents may have in the study. Data was collected after obtaining informed consent from the participants. Each participant has been asked to give verbal or written informed consent before starting the interview session. The prepared informed consent was read to respondents. It has been clearly explained that any participant can withdraw from the study at any time during the interview process. Moreover, participants had been informed that they may decline to answer any or all of the research questions. At the same time the potential benefits and lack of risks from participating in the study was clarified for the children. To protect the identity of participants, the names of young children in the report was not mentioned and the participants are represented by code.

### 3.8 Description of the Study Area

The study was conducted in *Genete Eyesus* Child & Family Development Program Coordination office [GECFDCO], which is one of the Child Care Centers under the Ethiopian Orthodox Church – Child & Family Affairs Organization. The organization was established in 1973 by religious fathers in response to the unprecedented famine that claimed many human lives in the northern parts of the country and left a large number of children without parents. *Genete Eyesus* Child & Family Development Program is operating in Addis Ababa, *Yeka sub-city, Woredas 1 & 2* with the Child Fund Financed Project. The *Yeka* sub - city is located in the North East Part of Addis Ababa city. The total area of the sub-city is 85.98 km square. There are 13 words under it. According to *Woredas 1* and 2 sub city administrations the *woreda* comprise 2427 vulnerable children among these children 967 are between 14-18 years.

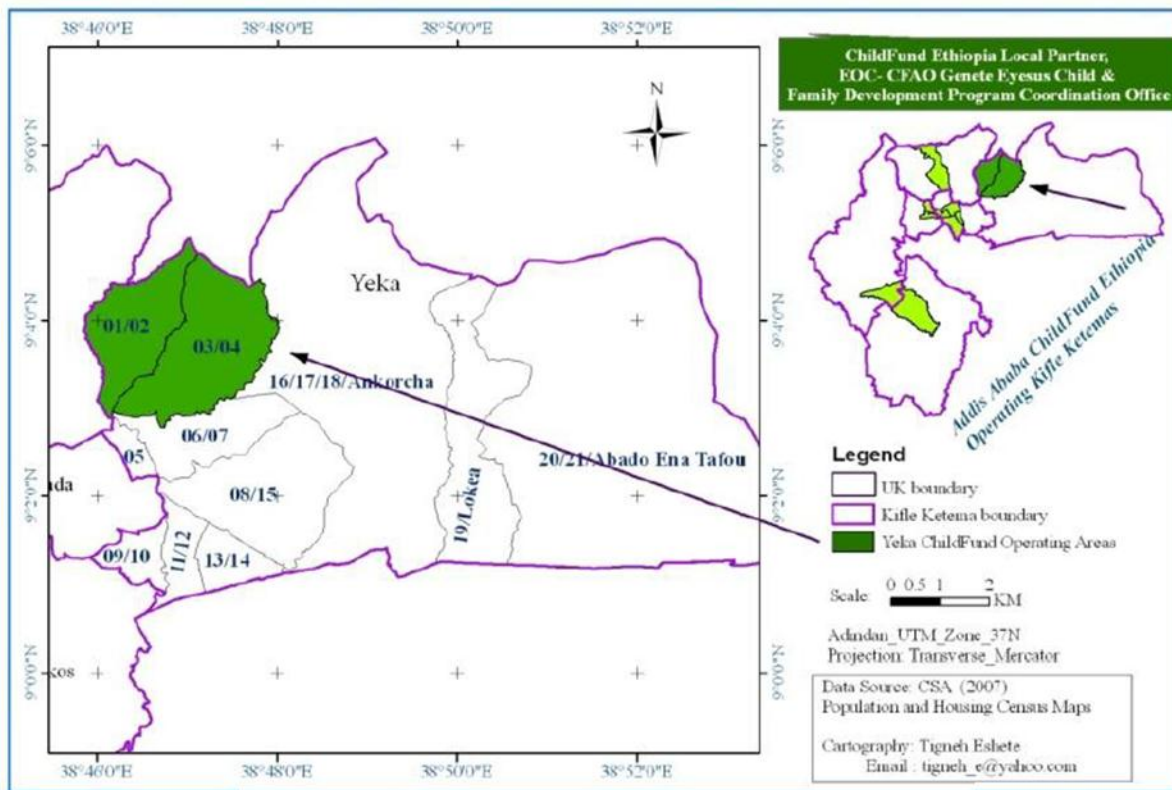


Figure3.1. Map of the study center

Source: extrapolated from CSA (2007) data

## **CHAPTER FOUR: DATA PRESENTATION, ANALYSIS AND INTERPRETATION**

This chapter presents analyses and interprets data gathered in the study from the sources such as in-depth interviews and Questionnaire. It discusses the main psychosocial and spiritual needs and priorities of vulnerable children among the psychosocial, spiritual challenges and material poverty that highly impacts the lives of the development of the children. Finally the chapter provides insight on the Contribution of the church for general psychosocial and spiritual development of children.

The Contribution of Religion to Family's Psychosocial and Spiritual Care for Child assessment has been done focusing on *Yeka* Sub-city woredas one and two. It encompasses the psychosocial and spiritual care support of vulnerable children and challenges of religious institutions in the process of caring and supporting the children and their implementation procedures by the implementer body and the gap of implementation. In this chapter, the data collected were encoded, categorized and organized ready for analyses which were processed by the Statistical Package for Social Sciences (SPSS) version 22 for descriptive statistics, and the transcription of in-depth interviews, open ended questionnaire responses for the qualitative part including triangulation and observation.

### **4.1. Distribution of Questionnaire and Response Rate**

It is important to explain a question that could be raised on how many respondents were involved in answering all questions that permit drawing an effective conclusion on the research results. A large-scale collection of valid instruments could help gather enough information about the issue raised in the research. Hence, the response rates of the questionnaire distributed to the Respondents in the study area.

**Table 1: Distribution of Questionnaires**

<b>S/ N</b>	<b>Respondent s</b>	<b>Distributed Questionnaire s</b>	<b>Valid Questionnaire s Returned</b>	<b>Questionnaire s Returned with errors</b>	<b>Response rate in Percentag e</b>
1	Beneficiary	172	150	22	87.2093%
2	Total	172	150	22	87.2093%

On the table (1) illustrates the response rate, which is 87.2093%. It is a reasonable amount of questionnaires which enable make enough analysis of the subject matter. In addition, in-depth interviews have been done with key informants to enrich the analysis and interpretations that balance the Beneficiaries and the official.

**Table 2: Response rate of Qualitative Questionnaires**

<b>Offices</b>	<b>Key informants</b>	<b>Number of respondents interviewed</b>	<b>Approached used for Data collection</b>
<i>Genete Eyesus</i> Child and Family Development Program	Officials EOTC-CFA	6	Interview Open ended questionnaire
Beneficiaries and Volunteers	-	3	
Beneficiaries children		6	

The demographic characteristics in this study are summarized in table (3). The gender comparison of respondents from the total 150 respondents 68 (45.3%) are females and the remaining 82 (54.7 %) are males. The result of these findings shows that number of male participated in the study greater than the females. The Age category among the total respondents, 124 (81.6%) are between 14-17 years and around 23 (15.1%) of them are between 18-24 years old. The result shows that majority respondents are between 14-17 years old.

The response educational background of the children shows that 24 (16%) 1-4 grades,

and 80 (53.3%) from 5-8 grades, About 26 (17.3%) from grade 9-10 high schools and 15 (10%) preparatory. finally, Diploma and above are 4 (2.7%). The finding indicates that majority of respondents' they are from grade 5 up to grade 8.

The largest proportion among the respondents response, which is 138 (90.8%) are those who have children more than 4 children. And the second, group which is from 5-6 is 11 (7.2%) and parents those have more than 7 children is 1 (.7%). This implies that life of majority children pass without fulfillment of basic needs. The family size, which is 67 (44.1%) four (4) family, from 5-6 around 65 (42.8%) and parents those were more than 7 family sizes 18 (11.8%). These findings indicate that, the high family size impacted on the psychosocial care for children.

*Table 3: Socio-demographic characteristics of respondents*

		<b>Frequency</b>	<b>Percent</b>
<b>Sex</b>	Male	82	54.7
	Female	68	45.3
	Total	150	100.0
<b>Age</b>	14 - 17	124	82.7
	18 - 24	23	15.3
	Total	150	100
<b>Number of children</b>	<=4	138	92.0
	5 - 6	11	7.3
	>=7	1	.7
	Total	150	100.0
<b>Family size</b>	<=4	67	44.7
	5 - 6	65	43.3
	>=7	18	12.0
	Total	150	100.0
<b>Child education</b>	First cycle	24	16.0
	Second cycle	80	53.3
	High school	26	17.3
	Preparatory school	15	10.0
	Diploma	4	2.7
	Total	150	100

According to table 4, the children’s parents of the relocates are the largest percentage 113 (75.3%) of respondents replied for the question “who is alive? “. Both parents alive and 27(18%) children lived with their mother. The 7 (4.7%) only father and 3 (2%) both father and mother dead. This indicates that the largest part of respondent’s parents alive. According to the table (4), 133 (88.7%) of respondents said that “yes” and the rest 16 (10.7%) said “no”. This indicates that the largest part of respondent’s live with their parents.

*Table 4: Families who are alive and living with their children*

		Frequency	Percent
Who is alive?	Both parents alive	113	75.3
	Only mother alive	27	18.0
	Only father alive	7	4.7
	Both dead	3	2.0
	Total	150	100.0
Do you live together	Yes	133	88.7
	No	16	10.7
	Total	149	99.3
<b>Total</b>		<b>150</b>	<b>100.0</b>

The table (5) relocates educational background of Mother 31(20.7%) is illiterate. About 27 (18%) were first cycle (grade1-4). Around 51 (34%) is a second cycle (grade1-4) about 16 (10.7%) is a high school (grade9-10).The 8 (5.3%) is preparatory school and 12 (8%) is above diploma. The response educational background of Father 20 (13.3%) is illiterate. About 31 (20.7%) am first cycle (grade1-4). Around 31 (20.7%) is a second cycle (grade1-4) about 26 (17.3%) am a high school (grade9-10).The 7 (4.7%) is preparatory school and 19 (12.8%) is above diploma. However, with respect to sex, fathers had better educational level than mothers.

*Table 5: Families, educational background*

		<b>Frequency</b>	<b>Percent</b>
<b>Mother education</b>	Illiterate parents	31	20.7
	First cycle (grade1-4)	27	18.0
	Second cycle (grade5-8)	51	34.0
	High school (grade9-10)	16	10.7
	Preparatory school	8	5.3
	Above diploma	12	8.0
	<b>Total</b>	<b>150</b>	<b>100</b>
<b>Father education</b>	Illiterate parents	20	13.3
	First cycle (grade1-4)	31	20.7
	Second cycle (grade5-8)	31	20.7
	High school (9-10)	26	17.3
	Preparatory school	7	4.7
	Above diploma	19	12.7
<b>Total</b>		<b>150</b>	<b>100.0</b>

The relocates employment status of Father on the table (6) 52 (34.7%) has daily laborer. About 25(16.7%) have private employee 21(14%) government employee. 19(12.7%) merchant and the last -12(8%) are unemployed. The relocates employment statuses of Mother 57 (38.7%) are a housewife. About 32(21.3%) are unemployed. 20(13.3%) private employee. 19 (12.7%) merchant and merchant and the last 16 (10.7%) government employee. The finding indicated that the majority children's family life is, hard to fulfill basic needs and psychosocial care for their children.

*Table 6: Families Employment condition*

		<b>Frequency</b>	<b>Percent</b>
<b>Father employment</b>	Unemployed	12	8.0
	Day laborer	52	34.7
	Private employee	25	16.7
	Merchant	19	12.7
	Government employee	21	14.0
	Total	150	100
	Unemployed	28	18.7
<b>Mother employment</b>	House wife	47	31.3
	Private employee	20	13.3
	Merchant	19	12.7
	Government employee	15	10
	Total	150	100

In the table (7) relocates parents' incomes in Ethiopian Birr 51(34 %) family have got 1696-1800. About 28(18.7%) family is from 1801-1905.about 17 (11.3%) 2011-2115 and the last 6 (4%) family have got above 2116.The finding indicated that parents income negatively impacted the children life. Additionally, the family housing condition 68 (45.3 %) is associated. About 43 (28.7%) is government housing. About 34 (22.7%) house rent from private and the last is 5 (3.3%) private house. The result indicates that majority parent's low income and their housing condition is association. This indicates that parent's income and housing is directly negative impacted on the psychosocial and spiritual well-being of the children.

*Table 7: Families living condition*

		<b>Frequency</b>	<b>Percent</b>
<b>Parents' income</b>	1696-1800	51	34.0
	1801-1905	28	18.7
	1906-2010	9	6.0
	2011-2115	17	11.3
	Above 2116	6	4.0
	Total	150	100
<b>Family housing condition</b>	Government	43	28.7
	Rent from private	34	22.7
	Private	5	3.3
	Association	68	45.3
	Total	150	100.0

#### **4.1.1 Psychosocial Challenges that Affect Children**

Children considered in this study shared their life experience as a life lacking psychosocial and spiritual care support. The children blame their families, the organization because of lacking psychosocial and spiritual care; they face problems in their life.

Data from the in-depth interview revealed that shouldering household responsibilities and burdens, the absence of parental psychosocial and spiritual support, and lack/ denial of acceptance for their ideas within the family are experiences of the children that had left a negative print in their minds. The relocates problem exists within family 48 (32. %) is no problem. About 44 (29.3%) there is disagreement in relation to economic issues. 19 (12.7%) of respondents have problem of physical illness. Around 14 (9.3%) have problem of alcoholism. Around 13 (8.7%) have problem of mental illness and 12 (8%) disagreement in relation to psychosocial issues. Among the 150 respondents, 135 (90. %) have a positive relationship with their parents. The second one is 15 (10%) of children has not positive relationship with their

parents. The result indicated that there are some problem (psychosocial, economical and health issues) within the families.

*Table 8 the relationship children with their parents*

		<b>Frequency</b>	<b>Percent</b>
<b>A problem exists in families</b>	Alcoholism	14	9.3
	Mental illness	13	8.7
	Disagreement in relation to economic issues	44	29.3
	Disagreement in relation to psychosocial issues	12	8.0
	No problem	48	32.0
	Total	150	100.0
<b>Relationship with parents</b>	Yes	135	90.0
	No	15	10.0
	Total	150	100.0

Study participants said that their parents did not listen to their ideas. They do not advise them, they did not show anything better. The experience of children revealed that parents have a problem of understanding the need for good relationship with the children. This makes children to be uncomfortable, un-confidence, on their relationship with the parents or caregivers, and create a feeling of be unexpected in the family, which would play a role in not having a genuine feeling to each other. When children explaining the characteristics of their family as follows, a strong family must be transparent with the children and believe in the children and discuss each and every issue freely.

Most of the children are not lucky to have this kind of family. So the goodness and badness of children depend upon the family. Children revealed that separation of parents had impacted their lives. Divorce whether by agreement or disagreement makes children feel anxious. Children get reserved to join with friends in fear of the experience of separation with

their beloved friends, which restrain them from making relationship with peers. Parental guidance and support are needed for children. Parents should be closely watching their children. If the organization offers psychological counseling, it is best that the family monitor the children properly. Free discussion and trust within the household has been indicated to have a vital importance to build a sense of belongingness, self-confidence, self-esteem, feeling secure and getting attention.

According to the table (9), 148 (98.7%) of respondents said that psychosocial care support much worthy for the general (Physical, social, economic, spiritual, Psychological) development of the children. The second group 2 (1.3%) of respondents said that no.

Interviewed children expressed that psychosocial care support children make them strong and attractive in their minds. It effectively exchanges, communication with their family, friends Teachers and people. It helps them to become more productive in their social, economic and spiritual skills. It helps not only grows in one dimension, and live with others so they can develop their decision-making skills. It helps children to have self-respect for themselves and Self-reliance can help them to make decisions and solve problems through coping with conflicts and problems in personal and social life.

The children learn how to manage their emotions better when they are psychologically and socially supported. They know how to manage their own problems during social interactions. In social relationships, it helps them to socialize. Good social networking, social and emotional well-being. It helps them to become better with the mind and morality. Additionally, children will make the knowledge, the attitudes and skills necessary to succeed in their lives. Children will have a positive attitude in their learning. It helps them make decisions based on knowledge and skill.

They gain knowledge of the various challenges of living and the harmful effects of life and knowledge that can be used to solve problems. If children do not have psychosocial and spiritual support, their growth will not be comparable. If they are supported, they will be adjusted to help their children to see themselves and their community properly and to enjoy a healthy lifestyle.

According to the table (9), 122 (81.3%) of respondents said that there are shortages of institution that providing psychosocial care support for children and 28 (18.7%) of the respondents said that there are some youth center for children. According to the table(9), 149 (99.3%) of respondents believe that psychosocial care support creates a safe environment for the children. The second group 1 (. 7%) believes that psychosocial care support creates a safe environment for children. However the finding indicted that majority of the respondents' response indicated that, majority children have-not got psychosocial and spiritual care from their living environment.

*Table 9: Advantage of psychosocial support*

		<b>Frequency</b>	<b>Percent</b>
<b>Importance of psychosocial support</b>	Yes	148	98.7
	No	2	1.3
	Total	150	100.0
<b>Institutions providing psychosocial support</b>	Yes	28	18.7
	No	122	81.3
	Total	150	100.0
<b>Psychosocially creates safe environment</b>	Yes	149	99.3
	No	1	.7
	Total	150	100.0

According to the table (10) the majority of respondents 106 (70.7%) strongly agree that children those lacks of psychosocial care support are higher risk violence. The 36(24%) of the respondents agree the lack of psychosocial care support are higher risk violence on the children,

about 6(4%) disagree and 2(1.3%) strongly disagree the lack of psychosocial care support are higher risk violence on the children.

Respondent participants said that Children lack of psychosocial face higher risk of violence abusive behavior and multiple addictions. The emptiness shall take refuge in, are excluded from the social life, separation from family members, friend's loss of home and economic difficulties. They have no capacity to cope with problems.

Female Domestic Violence, Child theft is subject to child labor and other problems. Children those lacking of psychosocial care support morally consider themselves dead. They have-not good cognitive development and behavior and they have a lack of self-esteem, self-worth and self-confidence.

Moreover, Interviewed participants said that, if the children have a lack of psychosocial care support it decreases social connectedness, the ability to share sense of empathy and respect for others. They may become a thief; May drop out of school, being unconscious. They are frustrated because they do not know how to manage their health, social benefits, and cultural advantages, learning to use the educational benefits and failing to solve their problems.

If the children are morally disciplined, it will be able to help him / she avoids problems in how to pass the test. If the children have psychosocial skill, they have Self-esteem, life skill, self-evaluation, self-awareness, self-esteem and self-confidence. It will help them to understand the environment.

According to table (10) among 150 of the respondents 80 (53.3%) strongly disagree children get enough psychosocial care support from the organization. About 36 (24%) little bit agree that children get enough psychosocial care support from the organization. The other part 25 (16.7%) agrees that children get enough psychosocial care support from the organization and the last 9

(6%) strongly agree that children get enough psychosocial care support from the organization. The Result indicted that majority children believe that they have not got psychosocial care.

Additionally on this table(10) shows that children get enough psychosocial care support around their home of the relocates as the largest percentage 58 (38.7%) of respondents little bit agree for the question among 150 of the respondents 42 (28%) strongly disagree children get enough psychosocial care support in their home 37(24.7%) agree that children get enough psychosocial care support from their home and the last 13(8.7%) strongly agree that children get enough psychosocial care support from their home.

The other parts of the table(10) show that children get enough psychosocial care support from the school of the relocates as the largest percentage 77 (51.3%) of respondents agree for the this question Among 150 of the respondents 30 (20%) strongly disagree children get enough psychosocial care support in their school. 26 (17.3%) little bit agree that children get enough psychosocial care support from their school and the last 17 (11.3%) strongly agree that children get enough psychosocial care support from their school.

The finding indicted that majority respondents agree on the psychosocial care support services giving on the school greater than from their home.

*Table 10: Services of psychosocial support*

		Frequency	Percent
Lack of psychosocial support	Strongly agree	106	70.7
	Agree	36	24.0
	Disagree	6	4.0
	Strongly disagree	2	1.3
	Total	150	100.0
Children get enough psychosocial support	Strongly agree	9	6.0
	Agree	25	16.7
	Little bit agree	36	24.0
	Str. Disagree	80	53.3
	Total	150	100.0
Children get enough psychosocial support around the home	Strongly agree	13	8.7
	Agree	37	24.7
	Little bit agree	58	38.7
	Disagree	42	28.0
	Total	150	100.0
Children get enough psychosocial care around the school	Strongly agree	17	11.3
	Agree	77	51.3
	Little bit agree	26	17.3
	Disagree	30	20.0
	Total	150	100.0

## **4.2. Children and Youth Psychosocial, spiritual and Material Need**

Children expressed that they are challenged by not being satisfied different services like psychosocial, spiritual and material needs. Among these needs, family loves, lack share good experiences of family, psychosocial, spiritual care support is the major one. Moreover, children expressed that the need for having love, psychosocial and spiritual care support from the neighborhood where they reside. Children and their families have faced discrimination from the neighbors. Basic material necessities are also expressed as needs requiring fulfillment. Material deprivation has impacted children's wellbeing by making children ashamed of their living condition. Generally, three categories of needs, i.e., psychosocial, spiritual and material needs have been identified in this study, and the former have been prioritized as more important since it causes more damage to the well-being of the children.

### **4.2.1 Psychosocial Need**

#### **4.2.1.1 Psychosocial Need in the family**

In this category respondents raised different needs for a child to grow well. The first is family love, share good experiences with family and psychosocial care and the other falls under social support. It has been indicated that for children to lead a good life, provision of love and psychosocial care from their parents and caregivers is key. However, children account indicated that such a vital issue is not handled properly by parents organize and caregivers, and children are not keen to share such experiences as it makes them sad to openly talk about it and feel that they get nothing out of speaking out. Relate to this Eskdar said that:

“The family must show love and respect for a child, and everybody knows that [pause]... I am not good my father if they were me I hope they also hate him. When I see my friends respect and love to their fathers, I really feel sorry. But what can I do. It is painful to me. I have no other even a friend to share my ideas and problems. Of course I have a friend, but I do not want to share my secrets for him. I keep my entire secret because I hope no one care and solve my problem. That is why I keep in my heart everything that I faced during my life. But now I feel something good when I share this with you. So love, care, psychosocial care, support and protection of the family are a vital need for a child.”

Respondent noted that children need someone that approach them and share their ideas. It is also mentioned that women are more exposed to various problems due to lack of family or caregiver psychosocial care support. Parents and caregivers appear to be caring for the well-being of their children. Participants indicated that parents do not give attention to the experiences and views of children.

#### **4.2.1.2. Psychosocial Need in the community**

The second category of psychosocial need of children is social support from the community. Participants highlighted that community support is a basic need for children. Therefore, in addition to family support, environmental factors also play a key role in the well-being of children. The environmental factors refer to access to psychosocial support.

Similarly Feven Described that:

“This hurting experience as: the value of psychosocial and spiritual support in the lives of children is demonstrated by those children who have family love; share good experiences with family and psychosocial care but don't have psychosocial care support. Lack of psychosocial support influences children social interaction in schools and in their vicinity. Those children who do not have psychosocial contact are prone to loneliness and depression.”

The study participants explained that they are more sensitive to the lack of psychosocial and spiritual care from parents, caregivers, peers, society and from organization (church) than the lack of material needs. Psychosocial aspect of a child's life, such as domestic violence and social discrimination has a long lasting effect on their wellbeing. Good life is not entirely measured by the materials one is unable to acquire, rather by the treatment they get from family. Church and society, Similarly, Helen captured this notion thoughtfully as:

“Family can be economically weak, but if listen to children internal feelings, that is more important than fulfilling material needs. I have been psychologically injured since my caregiver does not want to share my feelings. I decide anything by myself for anything I face in life. But if I have someone willing to discuss my problems with me the problems could have been solved easily. On the contrary, my caregiver works hard to fulfill necessary materials for me. But this is nothing for me if she does not want to know what I feel inside. Children have found out that social discrimination has an impact on their life. They feel lonely, discriminated and unwanted. Thus, children give priority for social love and psychosocial care more than poverty.”

The data collected from observation of the organizational setting revealed that the beneficiaries are getting different services. The focus of the organization is to satisfy the material aspect of children. The trainings are organized by the organization without the involvement of the

beneficiary's real interest. Moreover, there is no psychological, social and spiritual service for the beneficiaries. The organization is mainly rendering services related with meeting the felt need of children. These are distributing shoes, uniforms, and exercise books. There is also training for children focused on life skill and drug addiction issues. But the training is only arranged for an hour in one day. Different children come on daily bases to the organization, social worker's office to write letters to their sponsors. But they immediately leave office after they write the letters. Nobody asks them what their day looks like or about their life difficulties.

This indicates that children are not only lacking family support, but also they lack proper organizational support. This thus requires the organization to place effort to organize counseling and spiritual support sessions for children to help minimize and solve different psychosocial and spiritual problems that the children are currently facing. Respondent noted that children need someone that approach them and share their ideas. Every family must discuss every issue frankly. The family must have a trust on the views of the children. On other way another respondent, Tsehay

“Many children live with a mother only and the organization does not harm their children's wellbeing when they get sick, the organization pays for college and for health care for students. For parents and children who live with HIV infected children, the organization provides milk and eggs. The Organization assists, for children with food, shelter, clothing, health, education, but shelter for orphans. The service is not enough, but the children have a chance to learn. I have child and he is a graduate student. I recommend that parents take control of their children when I meet them. In the home, children who are not sure of their parents are likely to grow up and not be in trouble. Many children, however, undergo a number of problems. I have 3 children and among them one is a 6-year-old girl the organization helps me with her educational material. I believe that the organization has somehow influenced the environment. For example, I think it has a great impact on me. “

Similarly, another respondent W/ro Berehan indicated that:

“The service is not enough, but it is good in comparison with what is best for those who do not have the help they can get from other people. My first child is being helped with this organization, and he is now attending Addis Ababa University. He was sponsored by his sponsor who sponsored his family every month, and now my son will be able to get his uniform and training. For parents, we can train family management so we can care for our children to grow properly. I personally could not cover all the children's uniforms, and other tools, so this has almost filled my weakness. The injured children are encouraged to get rid of this problem, and they will be trained in training and then a driver's license will be provided at the organization's expense. We encourage each other to know that our children are trained and supervised.”

In the past they were psychosocial and spiritual services for the better-off students. Psychosocial and spiritual are not strong yet, but the services are provided in different ways. When caregivers talk negatively about the parents of the children or show a kind of rejecting directly or indirectly, children are abused emotionally. Such emotional abuse is experienced when caregivers come into disagreement with the child or feel discomfort about the child. Moreover, insults have an impact on the life of children as insults are demoralizing. However Tigest indicated that her experiences of psychosocial care support as:

“There are some Children those have no parents, and there are some parents who cannot afford to go to school. There are also families that cannot teach their children. I was the one who was struggling to find what I needed. The family is peaceful and the children can live in peace. Children cannot live healthy lives if they have family problems. If a family conflict breaks, cigarette cages are scattered around the local area, and the organization makes the service available to other orphan.”

### **4.2.1. 3. Spiritual needs and Spiritual Well-Being**

Respondents describe that spirituality increasing the children's hope, faith, trust, courage, love, and peace. Spirituality may have a more powerful impact on increased social capital and social support, and promotion of healthy behavior. Spirituality influences the behaviors and beliefs that they model for their children. Spirituality can be an important source of strength, comfort, and hope for children and families.

Furthermore respondents indicate that when children spiritual, it may reduce feelings of negative emotions, such as anger, fear and revenge, reducing tension levels. Those children have got spiritual care support feelings of peace, Universal human characteristic. Spirituality provides growth in several relationships, in the interpersonal field, in the interpersonal (with others) brings tolerance, unit, and the sense of belonging to a group brings hope, purpose for life and for suffering.

#### **4.2.1.4. Material Need**

Children mentioned that food, shelter, clothes, educational materials, bicycle, sanitary pad, television, cell phone, computer; chair is a basic material for a child to grow well. Lacks of access, such materials, due to low income of the household make life difficult. With regard to this Selamawit described that:

“For a child to grow well, it needs enough food, cloth, and good shelter. But for me these things are out of reach. My mother works day and night as a laborer. We have no other means of income. All household burdens are laid on my mother. She works hard to satisfy our needs, but she cannot.”

Respondents explained that the organizations make a monthly support for the children. It seems the money is very small, and is the only means of making a living for the children. The money serves to fulfill the various demands of the children for the materials covered by the parents. Another Respondents Elias stated her experience in this regard as follows:

“My father does not support me in anything. I am making a living by 300.00 Birr that I got monthly from GECFDP and my aunt support some money in three months. I divided my income for transport fee, sanitary pad and for education materials and I save the rest in order to buy one cloth at least in six months. Thus, I have two sides of poverty from lack of family care and material impoverishment.”

Material lack of children is a cause of emotional distress at school. This is aggravated by parent’s negligence to fulfill even small fees for children. This makes children to prefer to be absent from class. This is in fear of their names being called in front of other students that they do not pay the charge. Mahider described her experience in this regard as:

“When I asked my family to pay 50.00 Birr for school monthly tutorial fee, they did not want to pay the charge. Due to this I am absent from attending tutor class. This is because if I did not pay the fee, they mention my name in front of my friends. This makes me ashamed. Thus, I feel inferiority complex because of unmet needs. I know my family has the money, but they do not want to pay. It appears that lack of family love and care affected these children’s sense of well-being. They represented it as a cause of emotional distress. They described that parents love and care are more damaging than poverty.”

#### **4.3. Hostile Situation of Psychosocial Challenges of Children and youth**

Parents are expected to support children psychological, social, spiritual and physically for the well-being of the Child. However, contrary result has been obtained in this study. Children appeared to be abused emotionally and physically by their own parents and caregivers. Such mistreatment makes the children feel lonely and be depressed, and lead the children to commit suicide, engaged in robbery, and to commit patricide and matricide

Difficult financial situation of the family places the children under emotional pressure, and has a somber impact on the psychosocial wellbeing of the child. This impact has also manifested in a child's education as well as psychologically and spiritually. Children from poor families very often drop out classes and tutorials because of lack of school stationeries, school fees, other basic need, and due to lack of psychosocial and spiritual treatment from parents and the organization.

#### **4.4 The main factors affecting the Psychosocial care support**

Respondents describe four main factors of affecting psychosocial care support (including food security, quality of shelter, quality of psychosocial care support giving, and access to health care services) predicted of psychosocial well-being of vulnerable children.

##### **4.4.1 Food Security**

According to respondent's explanation, Food Security was the ability of the household to obtain and provides enough food for the child. This food should be obtained through socially acceptable ways, without resorting to emergency food supplies, scavenging, begging, stealing, or other coping strategies. Compared with those with no hunger, school-aged children with severe hunger were more likely to have stressful life events when compared with those with no hunger. Improving the nutritional status of children is also associated with improved motor development, mental development, and cognitive ability.

#### **4.4.2. Quality of Shelter**

Respondents described that, Shelter the physical place of the home where the child lives and the extent to which the structure provides security, comfort and protection from weather. Many vulnerable children, especially vulnerable children, face unique obstacles in this regard and tend to live in less adequate condition.

#### **4.4.3. Quality of psychosocial care support**

Respondents explained that, Quality of psychosocial care support was good when there is an identified adult (parent or guardian) who provides the child with a stable, nurturing, and emotionally secure environment. The relationship between the child and the parents should provide physical and psychological security for the child. Certainly, it is widely acknowledged that one of the most important aspects of childhood is the physical safety and psychological security provided by the adult(s) involved in a child's life. Some children in these situations are well loved, while others are without the consistent and loving care they need to thrive.

#### **4.4.4. Access to Health Care Services**

Adequate health care services are a child's access to basic health care services that are age-appropriate bed nets, health education (e.g., HIV prevention for youth), other preventive measures, and appropriate medical care and medicines when sick. There is inadequate access to health care services may be related to poorer psychosocial well-being of children.

On the table (11) indicate that the largest percentage 85 (56.7%) agrees the degree of giving psychosocial care support in the organization is low. The second largest group of the respondents 40 (26.7%) believes that the degree of giving psychosocial care support in the organization is medium. The other group of respondents 12 (8%) believes that very high and the rest respondents 8 (5.3%) very low and the last is 5 (3.3%) higher the degree of giving psychosocial care support in the organization. The

finding shows that according to the social responsibility of the church there is no services of psychosocial and spiritual care for the children.

The advantage of psychosocial care support in the table (11) shows that the largest percentage 147 (98%) believes that psychosocial care support have great advantages for the child's life. The second group2 (1.3%) believes that average and the last group1 (. 7%) believe that psychosocial care support have highly advantage for the child's life. This result indicated that the psychosocial care is very important for their life.

According to the table (11) me, the largest group 84 (56%) of respondents believe that children little bit get spiritual care support from EOTC. The second largest group 28 (18.7%) agrees on the children get enough spiritual support from EOTC. The other group 27(18%) disagree on the children get enough spiritual support from EOTC and the last group11 (7.3%) strongly agree on the children get enough spiritual care support from EOTC.

According to table(11), the largest group 120 (80%) of respondents believes that there is challenge for giving good psychosocial care support for children in the organization.17(11.3%) respondents strongly agree that there is a challenge to give good psychosocial care support for children in the organization. The 11(7.3%) respondents disagree that there is challenge for giving good psychosocial care support for children in the organization and the last group, 2(1.3%) strongly disagree that there is a challenge to give good psychosocial care support for children in the organization. According to the above table, 150 (100%) of respondents believe that spiritual care support much worthy for the general (Physical, social, economic, spiritual, Psychological) development of the children. The finding indicted that there is challenge on the giving psychosocial and spiritual care.

**Table 11: Services of psychosocial care support**

		Frequency	Percent
Degree of giving psychosocial support in EOTC	Very high	12	8.0
	High	5	3.3
	Medium	40	26.7
	Low	85	56.7
	Very low	8	5.3
	Total	150	100.0
Advantage of psychosocial support	Very high	147	98.0
	High	1	.7
	Average	2	1.3
	Total	150	100.0
Challenge for gives good psychosocial support	Strongly agree	17	11.3
	Agree	120	80.0
	Disagree	11	7.3
	Strongly disagree	2	1.3
	Total	150	100.0
Children get enough spiritual support from EOTC	Strongly agree	11	7.3
	Agree	28	18.7
	Little bit agree	84	56.0
	Disagree	27	18.0
	Total	150	100.0

Children mentioned that spiritual cares promotes positive values and disciplined children. It promotes self-worth, confidence; provide emotional support and model positive stress management skills. There will be a change in life. They increase their desire to learn, they have a good attitude, and they are useful to the country. It will become a self-reliant and righteous person. Some of the children would never go to bars to sell their bodies if they grew up in the spiritual care support.

According to table (12), about 150 (100%) of respondents believe that spiritual care support for children is suffering from different types of personality disorders. Another part of the table the largest group 149 (99.3%) of respondents believe that spiritual care support brings a positive behavioral

change in the child's life. The second group 1(.7%) believes that, it is not bringing behavioral change in the child's life.

This table (12) shows that the largest group 148 (98.7%) of the respondents believe that spiritual care support create disciplined children and the second group 2 (1.3%) have not believe spiritual care support create disciplined children.

The other parts of the table (12) show that the largest group 131 (87.3%) of the respondents believe that service of psychosocial and spiritual care supports is not satisfied the children and the second group 19 (12.7%) of the respondents believe that service of psychosocial and spiritual care supports in the organization is not satisfied the children. Often, training is not given proper and also it is not satisfying enough.

**Table 12: Services of spiritual care support**

		Frequency	Percent
Spiritual support for general development	Yes	150	100.0
Developed in spirituality important for attitudes	Yes	150	100.0
Spiritual care supports suffering children from disorders	Yes	146	97.3
	No	2	1.3
	Total	150	100
Spiritual support bring positive behavioral change	Yes	149	99.3
	No	1	.7
	Total	150	100.0
Spiritual support care of disciplining children	Yes	148	98.7
	No	2	1.3
	Total	150	100.0
Service of psychosocial and spiritual supports satisfied the children	yes	19	12.7
	No	131	87.3
	Total	150	100.0

**4.5 Contribution of the church for psychosocial and spiritual care support**

EOTC started its task to serve the society not long after its introduction in the middle of the fourth century. In its old age the Church’s structure has enabled it to serve the community not only as a spiritual center, but also used as a co-coordinator of all other institutions which were necessary for both material and spiritual well-being of the society but now the contribution of the church is poor.

Additionally Tsehay said that

“The church service is not enough. The church should be able to help with orphaned children in many troubles with their own resources. Many of these children who are affected by this problem may be out of shape. They are bundled with different addictions.”

Similarly Fetsum said that

“The church does not work very well. Some jobs have been done on the church for the benefit of the individual not for society. There is not much to do with

the capacity of the Church to support the vulnerable children. There is not much to see such kind of work in the church administration. In the church it is the opposite of what I expected from. It is hard to say that the church has been properly involved in social responsibility.”

On other part respondents believe that they have not positive stress management skills .Respondent children described that, the characteristics of a good family suggested by the children include proper family treatment such as listening to children’s voices and challenges, having confidence in the children, being a role model for children and creating the environment for free discussion in the family. Nonetheless, families do not fulfill such characteristics, which make children discontented on their family’s behavior. Children found that maltreatment, physical or mental violence, and the use of abusive and humiliating language by their parents and caregivers to be disturbing. Life skills are designed to enable children to be socially, physically, mentally competent. The church is not done from its social obligation. There are orphans and unemployed parents and mothers who need some help. The Church should work hard to raise her children morally, spiritually, socially and economically.

#### **4.6. Activity of the organization in the psychosocial and spiritual care support for children**

Interviewed staff of EOTC-CFAO had explained about the activity of the organization. They said that the services given by the organization are included. According to Mr. Yohanes, the Ethiopian Orthodox *Tewahido* Church - Child and Family Affairs Organization (EOTC – CFAO) is an indigenous not for profit, non-governmental organization established in 1973 by the unreserved effort of the great apostle His Grace Abune Yohannes, the former Archbishop of the Tigray Region. It was established in response to the increase in the number of orphaned and famine stricken children in Wollo, Tigray and Gondar areas due to the 1972 drought.

Many children have been orphaned. The church was set up to address this issue. They provide with a rigorous tool for school, give health services and also training for children's family to ensure that the children's social relationships are healthy. The organization works Physical, psychological and economic development of the children and their families. We work not only teach academic arts, but also teach the children ethics and discipline in social relations.

In addition, respondents explained that vision of the organization was based on the child's needs. The vision is, to see poverty free, economically, socially, psychologically, morality and spiritually empowered society, in which children's rights respected. And also the mission is, to create an economic, social and physical environment conducive to balanced mental, emotional and in the general personality development of children through family experiment and increased interventions by involving various stakeholders the children and the community at large. Additionally W/ro Tsehay explained her understanding of the activity of the organization.

“My first child supported by this organization. He has been educated at university with the help of this organization. The community of this worda is very poor. The organization has lost the basic needs of orphans by the school uniform and teaches the children with the help of the family. It works on income generating on parents. The organization treats the users to solve their problems. But I believe that it is better to educate parents to reach out to other people.”

But another Respondents Hareguaw

“The service provided is not enough. I think somehow is affecting me. There is a limited amount of service. Initially assisted children will receive the necessary services, including health. Additionally, if the children's families are too weak, they will provide health coverage and other services if they are sick.”

#### **4.6.1. Children Enrollment Eligibility criteria**

About Children Enrollment eligibility criteria Mr. Yohanes the Organization operates in *woreda* one and two sub-cities of *Yeka*. GECFDP consists of 1600 highly vulnerable children and consists of

about 0-5 years, 6-14 years, and 15-24 years of age beneficiaries. He explained that this standard is given to for two *woredas*, women and children's offices to select the children. Parents and children are given priority. Second, children those have only fathers or mothers will be recruited. They are selected for high-achieving and low-income families. Poor families will get the opportunity if they have children of disadvantaged children. Children whose age range are between 0-10 are eligible to be enrolled in the project. Additionally, the children and families must be dwellers of project/community specified geographic area of operation.

#### **4.6.2. Ethics of children**

The mission of the church is, to provide love, spiritual, mental, social and physical nourishment to children because they are the future of the country. Additionally the church assists and treats to develop the physical, mental, emotional, and spiritual growth and development of the children. However, According to Solomon explanation,

“This area is a pre-existing neighborhood. It is a vibrant community in the local economy. There are bars in residential areas that can easily ruin youths. It is good that the government works hard. The organization implements the children well, and in the local context, it has a negative impact on the children's situation. It's hard to control what happens outside the organization. The government alone cannot bring change. There is also a capacity problem in the various government organizations. The aim of the organization is to create disciplined children because they are the future of the country.”

#### **4.6.3 Challenges faced by the organization in the process of service provision for children**

The finding shows that there are problem on the psychosocial and spiritual care. Respondents explained that there is no training which is related to psychosocial care support for children. According to Ato kebede explanation:

“The organization has a budget problem to address the needs of all the beneficiaries. Our budget is sponsored by the Child fund International. This organization has had 34 centers in the past, but it has now been reduced to 17. I think it's because we have just stuck it with foreign aid. I believe the church can use its resources to make better the life of the children. “

#### **4.6.4. Training on the Organization for the children**

Officer response indicated that, trainings cannot reach all the beneficiaries in one year. Different training was given to children and their family like Parenting skill, community, conversation, Life skills, peer education, psychosocial psychology, leadership, counseling. But result from client’s indicated that there is no formal training.

Ato Tegene said that:

“Children Peer-to-peer training was being trained on their own. There was a problem with the children receiving the training. We will also engage more people in different Trainings. Trainings were being provided for parents and caregivers for training their children.”

However, Children mentioned that trainings are not provided equally for all children. Many times they called the children for trainings but they do not give us training. The organization does not hard work for the children benefit so the organization must improve their work culture.

## **CHAPTER FIVE: DISCUSSION**

In this section of the study, the research findings are discussed in relation to relevant findings of previous researches in the area, specifically related to the Contribution of Religion based organization to Family's Psychosocial and Spiritual Care for Children. Here, the findings are analyzed and discussed in the literature in accordance with the topics cascaded in the literature and finding part of the study.

### **5.1 Major Findings**

This study attempted to describe the Contribution of Religion based organization to Family's Psychosocial and Spiritual Care and Support for Children and youth. Using a mixed research method, four themes presented in the previous chapter were identified. The current chapter presents the discussion of these major themes by comparing the current research findings with results found in prior related studies. A total of 172 children have participated in this study. During the sampling, it was possible to manage exactly as the planned sample size stratum. The gender summers of respondents from the total of 68 (45.3%) are females and the remaining 82 (54.7 %) are males.

The result of these findings shows that from the respondents, the number of male participated in the study greater than females. The variable, which was used, is the grade level of the children. It was assumed that grade is positively related with age, but the study revealed that there are children who join high school above and below the average age range. Coming to the perceived income of the family, it ranged from below1000 to above 2116 Birr. This implies that family income is negatively affected basic needs of the children. The relocates family housing condition 68 (45.3 %) is associated. About 43 (28.7%) is government housing. About 34 (22.7%) house rent from private. The last is 5 (3.3%) private house. This indicates that the living environment is not suitable for children.

### **5.1.1 Psychosocial and spiritual care families get out their religion for their children.**

The results of this study clearly indicated that the lack contribution of religion based organization to the family's psychosocial and spiritual care support is damaging to the well-being of children. Children and youth are confronted with economical, psychosocial and spiritual constraints. Lack of proper family treatment, including: - mistrust, negligence. The result from this study shows that children and youth those lacking of psychosocial care are at higher risk of violence, abusive behavior and multiple addictions. The emptiness shall take refuge in, are excluded from the social life, separation from family members, friend's loss of home and economic difficulties. They have no capacity to cope with problems. Children and youth those lacking of psychosocial care support morally them dead. They have-not good cognitive development and behavior and they have a lack of self-esteem, self-worth and self-confidence. The finding indicates that they have not got enough psychosocial care support from the organization, family and from the society.

The study participants expressed that they are more sensitive to the lack of psychosocial care from parents, caregivers, peers and society than the lack of material needs. Psychosocial aspect of a youth and child's life, such as domestic violence and social discrimination has a long lasting effect on their wellbeing. Good life is not entirely measured by the materials one is unable to acquire, rather by the treatment they get from family and society. The other result indicates that the children have not got spiritual support from EOTC and there is challenge for giving psychosocial and spiritual care for children and youth in the organization. Respondents describe that spirituality increasing the youth and children's hope, faith, trust, courage, love, and peace. Spirituality may have a more powerful impact on increased social capital and social support, and promotion of healthy behavior.

Spirituality influences the behaviors and beliefs that they model for their children. Spirituality can be an important source of strength, comfort, and hope for children and families. Likely, Andrews (2011) described that Religion satisfies the social, psychological, spiritual, and material needs that bring social welfare and cohesion, acts as an agency of social control and socialization, establishes solidarity, provides peace of mind and influences economic life.

Social expectation in that from a very young age, children should develop a strong sense of responsibility and obligation to their families and for society. The specific responsibilities assumed by children are as becomes someone in a particular social role, status and a set of relations. Through the fulfillment of their duties, the children develop into adults and are accepted as members of their community. In these kinds of settings, emphasis is given to competencies such as respect for others, responsibility, sharing and reciprocity. Mistreatment in the household, such as verbal abuse, physical abuse, and lack of confidence on the ideas of children, proper discussion and the like are all sources of miserable life for children revealed in the study. Separation of parent's has been found to be negatively impacting the psychosocial and spiritual wellbeing vulnerable children. Psychological and physical abuse of children has been the cause of trying to commit suicide, commit matricide and patricides, feel lonely, and depressed.

In this study, children main needs are classified into psychosocial, Spiritual and material needs. With regard to material need children mentioned basic necessities (shelter, food, clothes) Material deprivation affects good lifestyle, and their living condition was mentioned to embarrass children. A.A. & F.W (2000) Assistance provided for children in an emergency usually includes looking after the wounded and distributing food and other non-food items. Often toys, books and other recreational and educational material are provided.

This kind of assistance is very important as children's physical and practical needs have to be met during the emergency period. However, children do not only have physical and practical needs that must be met to enable them to develop to their full potential.

Children's psychological and spiritual needs, such as the need for love and affection, to have values, to be able to hope, to be confident and have a sense of self-worth, are highly dependent upon the relationships that children have with their family, friends and other adults. Sometimes the intertwined psychological and social needs of children are referred to as emotional needs.

#### **5.1.2 Challenge faced by the organization in the process of delivering the services for clients.**

The organization has a budget problem to address the needs of all the beneficiaries. The budget is sponsored by the Child fund International. The organization has had 34 centers in the past, but it has now been reduced to 17. The church cannot use its resources to make better life of the children. Therefore, proper intervention to address the priority needs of poor children is needed to bring a sustainable change in the lives of poor children.

The study revealed that *Genete Eyesus* Child and Family Development Program (GECFDP) organization is rendering different services to satisfy children's material needs. The real concern of children and youth appears to be neglected in the organization, as there is lack of counseling; psychosocial, spiritual program and Children and youth are exposed to psychosocial problem which might lead them to commit negative decisions such as suicide, crime, and drugs which might be aggravated if the situation continues unchecked. Therefore, the researcher notes that families, the church, the organization and society shall play their role to abort children psychological and spiritual damage.

## **CHAPTER SIX: CONCLUSION AND SOCIAL WORK IMPLICATION**

### **6.1. Conclusion**

This study describes The Contribution of Religion based organization to Family's Psychosocial and Spiritual Care for Children and youth in *Genete Eyesus* Child and Family Organization (GECFDP) by using a mixed research method. It has provided detailed information on the major contribution of psychosocial and spiritual care support for children and youth. The result of this study indicated that there is no psychosocial and spiritual care support for children and youth. The result revealed that children and youth confront different psychosocial induced challenges. It is also found out that those children and youth who were given to relatives. The study revealed that children and youth need is concerned more about fulfilling their psycho social and spiritual wellbeing. Parents and social support are more important in affecting the well-being of children and youth than material poverty. However, children and youth indicated that such a vital issue is not handled properly by religion organization, parents and caregivers. This parents and caregivers negligence aggravates the problem of children. The study indicated that children and youth are not passive victims of various psychosocial induced challenges.

### **6.2. Social Work Implication**

These study participants are children and youth who are faced psychosocial and spiritual challenges, the finding of the study have implications for social work. These implications are implications for practice or intervention, implication for policy, implication for education and implications for future research and knowledge.

### **6.2.1. Recommendation for Practice**

Children and youth lead a miserable life due to lack of physical, mental, emotional social and spiritual care support. Children and youth are not treated in the household, such as negligence, physical and emotional abuse, unfair treatment, and the hostile kind of relationship with parents and caregivers, and others. Thus, to change such kind of situation, there is a need to alter the attitude of parents or caregivers by the church. This can be achieved through the provision of training and awareness creation by social work practitioners. Moreover, provision of frequent counseling services is needed to affected children in decreasing the negative effects induced by different ways of abuse.

The psychosocial and spiritual costs of poor housing and lack of materials by children and young people, creates anxieties, lack of confidence, lack of self-esteem, lack of self-respect and stigma. Therefore, this study provides social work practitioners with an understanding that could help them to tap the available local resources and utilize them in priority areas that need immediate response. In addition, the organization could establish and strengthen voluntary saving association groups to empower vulnerable child's family's income.

Children and youth are also damaged by not having psychosocial and spiritual care support. Thus, public awareness campaigns focused on the negative effects of social discrimination and other practices deemed abusive to children should be promoted. Key players involved in this process could include church, other faith based organization, CBO's school, local Government and international and national non-government organization.

Children and youth spend a large proportion of their daily lives in the school environment and it is one of the key intervention areas that have the potential to improve the psychosocial and spiritual well-being of children experiencing a psychological injury. Therefore, school guidance and

counseling need to be strengthened and provide intervention in order to solve children and youth psychosocial and spiritual challenges.

The outcome of the study can also be used to promote children and youth main concern that affects their lives. Social work practitioners could bring a positive impact on youth and children's lives by giving attention to promote children psychosocial and spiritual need through education and training for children's families and other concerned bodies. The study also revealed areas of concern that *Genet Eyesus* Child and Family development program (GECFDP) need focus on to improve the psychosocial and spiritual wellbeing of children and youth. Therefore, the organizations need to intervene on psychosocial, spiritual and material dimensions of psychosocial and spiritual care support to alleviate youth and child's problems. Moreover, the active involvement of different churches, NGOs, civil societies and the community at large towards giving due attention to children and youth priorities is also essential.

The organization does not have any recreational area and other mental relaxation activities prepared for its beneficiaries. Consequently, the organization and other concerned bodies need to consider a child friendly approach and putting children's perspectives and experiences at the center of their program and strategy to enhance vulnerable children.

### **6.2.2. Recommendation for Research**

The issue of the Contribution of Religion based origination to Family's Psychosocial and Spiritual Care for Children and youth more than material poverty appears to be largely unexamined. Identifying the main priority and concern of children and youth, that could greatly benefit in addressing issues of priority concern. To promote priority issues that vitally affect the psychosocial and spiritual wellbeing of the children and to develop best practice standards and guidelines to ensure the protection and well-being of children and youth. This study also attempted to pave a way to fill

the gap in the existing knowledge base. Therefore, in the future research, focused on child maltreatment, social discrimination, child abuse and domestic violence and related children challenges should be given due attention.

### **6.2.3. Recommendation for policy**

The government of Ethiopia has implemented policies and, signed major declarations, and conventions like United Nations child right convention to protect children and youth from any unfriendly family environment or any other situation. The result of this study revealed a lack of Psychosocial and Spiritual Care Support for youth and Child's miserable life of children due to mistreatment in the household, lack of psychosocial and spiritual care. Therefore, it is important to follow the proper implementation of policies and strategies and safeguard the wellbeing of children and youth. Full awareness and implementation need to be reached on the policies and laws available in the area of children's rights.

The currently available policy options do not provide specific and comprehensive responses for children and youth main priority and concern and there is lack of enforcing mechanism for implementation. The findings imply that there is a need for a well-developed policy alternative and enforcing mechanisms to address the issues with child's priorities and concerns more than material deprivation. Thus, concerned bodies such as NGOs, the church, GOs and CBOs should include priorities of children and youth in the policy framework. Apart from the existing policies, policy makers need to give due consideration to identify new areas that need to be addressed, and design conducive legal and policy environment towards solving venerable children psychosocial and spiritual problems.

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## Annexes

### Appendix - I

**Table 1- Background Characteristics of Children and staff Respondent**

No.	(Name)	Sex	Age	Educational level	occupation
1	Ato Kebed	M			program manager
2	Ato Tegene	M			Youth Officer
3	Helen	F			Eerily childhood development officer
4	Fetsum	M			
5	Tsehay	F			volunteers and benficiary
6	Solomon	F			Director of the EOTC-CFA
7	Haile	F			Program officer
8	Hareguaw	F	17	10	-
9	Eskdar	F	14	7	
10	Selamawit	F	17		
11	Feven	F	19		
12	Mahider	F	20		
13	Tigest	F	21		
14	Berehan	F	47		Volunteers and Beneficiary
15	Elias	M	17	10	

**\*All the names Mentioned are Pseudonyms Source:** Data generated from the field work (2019)

## **Appendix - II**

**Addis Ababa University**

**School of Social Work**

**Study Title: The Contribution of Religion to Family’s Psychosocial and Spiritual Care and Support for Children: The Case of *Genete Eyesus* Child and Family Development Program.**

Part 1: Consent Form

**To whom it may concern,**

Dear Informant/s, my name is Teshome Abera. I am a full time employee at Government organization; and currently I am a Social work Post Graduate student of Addis Ababa University. Accordingly, I am supposed to undertake a research entitled “The Contribution of Religion to Family’s Psychosocial and Spiritual Care and Support for Children:-The Case of *Genete Eyesus* Child and Family Development Program.” which will be used as a partial fulfillment of Master of Arts degree. The overall objective of the research is just to examine the psychosocial and spiritual care support of vulnerable children process and challenges of religious institutions in the process of caring and supporting the children. Accordingly, this objective can only be attained when you, as a key stakeholder or interested party regarding the issue being studied, are willing to provide your genuine information. Taking part in the research is entirely voluntary.

Dear informant/s! Please bear in mind that the interview will be audio taped based on your informed consent and, still, you are free to withdraw at any time and without giving reason. And I assure you that your information will never be used for any other purposes other than the research. You can be confident that participating in the study will never cause any physical,



3. What are the major contributions of EOTC-CFAO in the family's psychosocial and spiritual care for the children? Please describe the activity?
4. What are the vision, mission, goal, objective and values of EOTC-CFAO on the family's psychosocial and spiritual care support for the children?
5. How do you explain your beneficiary psychosocial and spiritual condition?
6. Do you believe that your beneficiary have adult support and guidance?
7. What is main problem on the process of psychosocial and spiritual caring and supporting for the children in the organization?
8. What kind of intervention techniques used and service provided by the multi-stakeholders committee in the care support services by EOTC-CFAO to Vulnerable children in the organization?
9. How do you explain the strength of this institution on the giving psychosocial and spiritual care support for the children? Please list the strength of the organization.
10. Do you give the training for children's family and for the children about psychosocial and spiritual care support for children? If you do, how many times within a year?
11. How do you describe the contribution of this institution with children's Families and communities members to provide psychosocial and spiritual support for children?
12. Do you think that activities (psychosocial and spiritual care support) being carried out in this institution influence positively the overall development of surrounding community? Specifically the beneficiary? How?
13. How do you describe the gaps of psychosocial and spiritual care support noted in mobilizing community as it is done by EOTC-CFAO?
14. How do you describe strengths of EOTC-CFAO in relation to direct support?

15. Do you believe that psychosocial and spiritual care support shape children? If you agree please explain.

16. Who is the sources the fund for this institution?

17. What kind of activity was taken by the organization to strengthen the children's family abilities to meet a range of children's needs?

18. How do describe contributions of Religion to psychosocial and spiritual care and support for the children?

19. How do you describe the relationship between psychosocial care support and problems like (poverty, illness, conflict, neglect, abuse, death of parents, violence, exploitation, discrimination, isolation, and loneliness)?

20. Is there anything that you would like to add or recommend?

**Part 2: Guiding Questions for In-depth Interview**

**For beneficiary family and the children**

Basic Information

Name \_\_\_\_\_ Date of Interview \_\_\_\_\_

Sex \_\_\_\_\_ Job title \_\_\_\_\_

Educational status \_\_\_\_\_

Age \_\_\_\_\_

1. How do you view overall activities done by this organization?

2. List kind of support that you get from this institution.

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

3. How do describe contributions of Religion to psychosocial and spiritual care and support for the children?
4. Do you think that the service psychosocial and spiritual care support given by the organization for the children is enough? Yes, NO. Give reason for your answer.....
5. How do you see the positive effect of psychosocial and spiritual care support on your livelihood status services given by EOTC-CFAO?
6. How do you describe the (positive or negative) influences of this institution to your family?
7. How do you see different services of this organization standing from service/s you are getting?
8. Do you think that EOTC-CFAO committed in asking your participation in solving your problems? How?
9. How do you describe EOTC-CFAO' provision of psychosocial and spiritual care support (counseling, spiritual service, affection,)?
10. How do you describe the influence of this organization by giving psychosocial and spiritual care and support?
11. What problems (if any) you encounter in getting the needed services?
12. How often do you or member of your family get deferent kind (food, shelter, clothing and health, educational, psychosocial and spiritual care support) direct support?
13. How do you describe EOTC-CFAO periodic supervision about your situation and your children?



A. Illiterate parents

B. first cycle (grade 1-4)

C. Second cycle (grade 5-8)

D. High school (9-10)

E. preparatory school

F. above Diploma

8. Educational status of Father

A. Illiterate parents

B. first cycle (grade 1-4)

C. Second cycle (grade 5-8)

D. High school (9-10)

E. preparatory school

F. above Diploma

9. If your father is alive what his employment status?

A. unemployed

B. Daily laborer

C. Private Employee

D. Merchant

E. Government Employee

10. If your mother is alive what her employment status?

A. unemployed

B. House wife

C. Private Employee

D. Merchant

E. Government Employee

11. What is the monthly income of your parents in Ethiopian Birr?

A. 1695 -1800

B. 1801-1905

C. 1906-2010

D. 2011-2115

E. > 2116

12. What is your family housing condition?

A. Government

B. rent from private

C. Private

D. Association

13. Number of children \_\_\_\_\_

14. Number of family size (including house maid) \_\_\_\_\_

**Part Three. Family problem and crucial issues of concern among family members income of parents and housing condition**

15. Among the following which problem does exist in your family?

- A. Alcoholism  B. Mental Illness  C. physical Illness  D. disagreement in relation to economic issues  E. Disagreement in psychosocial issues

16. Do you have positive relationship with you parents?

- A. Yes  B. No

17. If your answer is “No” for question 17? Way?

**Part four General information requiring the study**

**Part of Psychosocial care and support**

18. Do you think that the psychosocial care support is much worthy for the general development of the children? A. Yes  B. No

19. if your answer is” yes” for question number 19, please describe your reason.

20. Are there some institutions providing psychosocial care support for children in your locality?

- A. yes  B. No

21. Do you believe that psychosocial care and support create a safe environment for the child?

- A. Yes  B. No

22. What would you say, if you are asked that the Children who lack psychosocial care support are at higher risk of violence?

- A. Strongly agree  B. Agree  C. Disagree  D. Strongly disagree

23. If your answer is ‘strongly agree or agree’ for question number 23, Please list the kind of Violence.

24. Do you agree that children get enough psychosocial care support from the EOT-CFAO?

A. Strongly agree  B. Agree  C. little bit agree

D. disagree  E. strongly disagree

25. Do you agree that there is enough psychosocial care support around your home?

A. Strongly agree  B. Agree  C. little bit agree  D. Disagree

E. Strongly disagree

26. Do you agree that there is enough psychosocial care support around your school?

A. Strongly agree  B. Agree  C. little bit agree  D. Disagree

E. Strongly disagree

27. What is degree giving service of psychosocial care support in the EOTC-CFAO?

A. Very high  B. high  C. medium  D. low  E. very low  F.

very low

28. How much do you understand the advantage of psychosocial care support for your life?

A. Very high  B. High  C. Average  D. Low  E. Very low

### **Part of spiritual care and support**

29. Do you think that the spiritual care support is much worthy for the general development of the children? Yes  B. No

30. if your answer is "yes" for question number 30, please describe your reason

31. Do you believe that developed in spirituality is important for the growth of attitudes, habits and values of the children?

A. Yes

B. No

32. Do you believe that spiritual care support for children is suffering children from different types of personality disorders?

A. Yes

B. No

33. Does spiritual care support bring some positive behavioral change on the development of children personality?

A. Yes

B. No

C. others

34. If your answer is “yes” for question number 34, please explain your reason

35. Do you have positive stress management skills?

A. Yes

B. No

36. Do you agree that children get enough spiritual care support from the EOT-CFAO?

A. Strongly agree

B. Agree

C. little bit agree

D. disagree

E. strongly disagree

37. Do you believe that spiritual care support careat disciplined children?

A. Yes

B. No

C. others

38. If your answer is “yes” for question number 38, please explain your reason.

39. Do you agree that there is challenge for give good psychosocial care support for children on the EOTC-CFAO?

A. Strongly agree

B. Agree

C. Disagree

D. Strongly disagree

40. If your answer is “strongly agree or agree” for question number 40, Please list the challenges.

41. Do you agree that service of Psychosocial and spiritual care support on the Ethiopian Orthodox Tewahedo Church-Child and Family Affairs Organization satisfied the children’s need?

A. yes

B. No

42. If your answer is 'No' for question number 41, please explain the reason

43. What kind of activity should be taken to develop service of psychosocial and spiritual care support for the children?

### Appendix III

አዲስ አበባ ዩኒቨርሲቲ

የማኅበራዊ ሳይንስ ትምህርት ቤት

የጥናቱ ርዕስ: ለቤተሰብ የስነ-ልቦና ማህበራዊ እና መንፈሳዊ ድጋፍና እንክብካቤ በማድረግ ልጆችን መርዳት:-የጥናት ቦታ በገነተ ኢየሱስ የልጅና ቤተሰብ ልማት ፕሮግራም::

ክፍል 1: አጠቃላይ መመሪያ እና የፍቀደኝነት መጠይቅ ቅፅ/ፎርም

ለሚመለከተው ሁሉ,

እኔ የዚህ ጥናት አጥኝ በአዲስ አበባ ዩኒቨርሲቲ ሶሻል ወርክ ትምህርት ክፍል የሁለተኛ ዲግሪ (MA) ተማሪ የሆንኩ ተሾመ አበራ እባላለሁኝ:: የዚህ ጥናታዊ ፅሁፍ ዋና አላማ በተለያዩ መልኩ የተጎዱ ህፃናትን ሥነ ልቦናዊ ማህበራዊ እና መንፈሳዊ እንክብካቤ ድጋፍ ምን እንደሚመስል እና ልጆችን መንከባከብ እና ድጋፍ በማድረግ ሂደት ላይ ያሉ የሃይማኖት ተቋማት አስተዋጽኦ ለመመርመር እና ለማትናት ነው:: በተለይም ደግሞ ቤተክርስቲያኒቷ ካላት ተልዕኮ አንጻር ልጆች በሁለንተናዊ መልኩ ጉዳት እንዳይደርስባቸው በመንከባከብ ረገድ የተሰራውን እና የሚሰራውን ተግባር ለመፈተሽ ችምር ነው:: በዚህ ጥናት የምሰበስበው መረጃ ከ14-24 እድሜ ክልል ውስጥ ካለ ልጆች ካሳዳጊዎቻቸው እና ለልጆች ስነ ልቦናዊ ማህበራዊ እና መንፈሳዊነት ጋር ተያያዥነት ያለው ስራ ከሚሰሩ ሰዎች ነው::

ይህ ጥናት ለልጆች ሥነ-ልቦና : ማህበራዊና መንፈሳዊ አገልግሎት ለሚሰጡ ተቋማት:-ድንበ መመሪያ ለሚያወጡ ባለድርሻ አካላት እና በዚህ ዙሪያ ለረጅም ጊዜ በተደጋጋሚ ለሚሰሩ ሰዎች ጥሩ መረጃ የሚሰጥ ጥናት ነው ተብሎ ይታሰባል:: በተለይም ልጆች የስነ ልቦና እና ማህበራዊ ጉዳት እንዳይደርስባቸው ያግዛል:: ልጆች መንፈስ ጠንካራ እንዲሆኑ በማህበራዊ እና ባህላዊ ገፅታዎች ጉዳት እንዳይደርስባቸውና እንዲቋቋሙ መንገድ ለማሳየት የሚረዳ ጥናት ነው:: በአቃላይ በዚህ ጥናት የሚገኘው መረጃ የተለያዩ ደንብና መመሪያዎችን ለማውጣት እንዲሁም የወጡትን መመሪያዎች ውጤታማ በሆነ መንገድ ለመተግበር ይረዳል::

- ይህ መጠይቅ ከ1-1.30 ደቂቃ ይወስዳል::
- የምትሰጡት መረጃ ፍፁም ምስጢራዊነቱ የተጠበቀ ነው::

- ድምፃችሁን ለመቅረፅ የመቅረፅ ድምፅ መሳሪያ እንድጠቀም ፍቃደኝነታችሁን እጠይቃሁ።
- የድምፅ መቅረጫው መሳሪያ እንዲዘጋገቡ በፈለጋችሁ ጊዜ ከጠየቃችሁኝ ይህንን ለማድረግ ሙሉ በሙሉ ዝግጁ ነኝ።
- በቃለ መጠይቁ ጊዜ በየመሀሉ የምይዘቸው የፅሁፍ መረጃዎች እና የቃለ መጠይቁ የተቀረፀበት ካሴት ለጥናታዊ ፅሁፍ ግብአትነት ብቻ ነው ጥቅም ላይ የሚውለው።
- የዚህ ጥናታዊ ፅሁፍ መሳሪያ በናንተ ትክክለኛ መልስ ላይ የተመሰረተ ይሆናል።
- በዚህ ጥናታዊ ፅሁፍ ላይ በፍቀደኝነት እንድትሳተፉ በትህትና እጠይቃለሁ።
- በዚህ ጥናት ላይ የመሳተፍ ሆነ ያለመሳተፍ መብታችሁ የተጠበቀ ይሆናል።
- በማንኛውም ሰዓት በጥያቄው ሂደት ላይ ጥሩ ስሜት ካልተሰማችሁ ማስቆም ይቻላል።

በዚህ ጥናታዊ ፅሁፍ ለመሳተፍ ፍቃደኛ በመሆን/ሽ አመሰግናለሁኝ።

\_\_\_\_\_

መረጃ ሰጪ ፊርማ      ጥናቱን የሚያደርገው አካል ፊርማ      ቀን

የቃለ-መጠይቅ መምሪያ ክፍል 2

በኢትዮጵያ ኦርቶዶክስ ተዋህዶ ቤተክርስቲያን የሕጻናትና ቤተሰብ ጉዳይ ድርጅት ለሚሠሩ ባለሙያዎች የተዘጋጀ መጠይቅ።

መሠረታዊ መረጃ

ጾታ ----- የቃለ-መጠይቅ ዕለት -----

ዕድሜ ----- የሰራ ድርሻ \_\_\_\_\_

የትምህርት ደረጃ -----

1. የኢትዮጵያ ኦርቶዶክስ ተዋህዶ ቤተክርስቲያን የገነተ ኢየሱስ ህፃናት እና ቤተሰብ ልማት ፕሮግራም የሚከናወኑ አጠቃላይ እንቅስቃሴዎችን እንዴት ይገልጹታል?

2. በድርጅቱ የሚታገዙትን ልጆች የስነ-ልቦና ማህበራዊ እና የመንፈሳዊ ድጋፍና እንክብካቤ እንቅስቃሴውን እንዴት ይገልጹታል ?
3. ድርጅቱ ለህፃናት ቤተሰብ እና ለህጻናቱ በስነ-ልቦና፣ በማህበራዊ እና በመንፈሳዊ ድጋፍና እንክብካቤ የሚያከናውናቸውን ዋና ዋና ተግባሮች እንዴት ያብራሩታል?
4. ድርጅቱ ሕጻናትን በስነልቦና በማህበራዊና በመንፈሳዊ ለመደገፍና ለመንከባከብ ያለው ራዕይ, ተልዕኮ, አላማ, ግብ እና እሴቶቹ ምን ምን ናቸው?
5. የድርጅቱን ተጠቃሚዎች ስነ-ልቦና ፣ ማህበራዊ እና መንፈሳዊ ሁኔታ እንዴት ይብራራሉ?
6. ተጠቃሚዎ የአዋቂ ሰው ድጋፍ እና እንክብካቤ አላቸው ብለው ያምናሉን?
7. ለህጻናት በስነ-አእምሮ በማህበራዊ እና በመንፈሳዊ ድጋፍና እንክብካቤ በሚደረግበት ሂደት ውስጥ ዋና ችግር የሚሉት ምንድነው?
8. ድርጅቱ ውስጥ ለተገጂ ህፃናት የተያዩ ድጋፍ ሰጪ ድርጅቶችን በማሳተፍ የሚሰጡ አገልግሎት በምን አይነት ዘዴ ነው ? አገልግሎቱስ ምን አይነት ነው?
9. የዚህን ተቋም ጥንካሬን ለልጆቹ በስነ ልቦና ፣ ማህበራዊ እና መንፈሳዊ ድጋፍና እንክብካቤ በሚያደርገው ሂደት ውስጥ እንዴት ያብራራሉ? እባኩት የድርጅቱን ጥንካሬ ይዘረዝሩ.
10. በስነ ልቦና፣ በማህበራዊ እና በመንፈሳዊ ድጋፍ እና እንክብካቤ ዙርያ ለልጆች ቤተሰብ እና ለልጆች ስልጠና ይሰጣል? ከሆነ, በዓመት ውስጥ ስንት ጊዜ?
11. የልጆችን ቤተሰቦች እና የማህበረሰቡን አባላት በማስተባበር ለልጆች ስነ አዕምሮ ፣ ማህበራዊ እና መንፈሳዊ ድጋፍና እንክብካቤ በመስጠት ረገድ የዚህን ተቋም እንቅስቃሴ እንዴት ይገልጹታል?
12. በዚህ ተቋም ውስጥ የሚካሄዱ እንቅስቃሴዎች (ሥነ ልቦናዊ ማህበራዊ እና መንፈሳዊ ድጋፍና እንክብካቤ) በአከባቢው ማህበረሰብ ውስጥ በአጠቃላይ አዎንታዊ ተጽእኖ አሳድሯል ብለው ያስባሉ? በተለይም ተጠቃሚው? እንዴት?

13. ድርጅት ማህበረሰቡን በማንቀሳቀስ ለሕጻናቱ የስነ-አእምሮ ማህበራዊ እና መንፈሳዊ ድጋፍና እንክብካቤ ለማድረግ የተሰሩ ክንውኖችን እንዴት ይገለጹታል?

14. ለተጠቃሚዎች በሚያደርገው ቀጥተኛ ድጋፍ በተመለከተ የድርጅቱ ጥንካሬዎችን እንዴት ያብራራታል?

15. የስነ አእምሮ ማህበራዊ እና መንፈሳዊ ድጋፍና እንክብካቤ ልጆች በመልካም ስነ-ምግባር እንዲታነጹ ያደርጋል ብለው ያምናሉ? ከተሰማሙ እባክዎን ያብራሩ።

16. የዚህ ተቋም የግንዘብ ምንጭ ምንድነው ?

17. ድርጅቱ የተለያዩ የልጆችን ፍላጎቶች ለማሟላት የልጆቹን የቤተሰብን ችሎታ ለማጠናከር ምን አይነት ሥራ ያከናውናል?

18. በድርጅቱ ማህበራዊ ፡ ሥነ ልቦናዊ እና መንፈሳዊ እንክብካቤን በተመለከተ ለልጆች የሚያደርገውን ድጋፍ እንዴት ይገልጹታል?

19. በማሕበራዊ፡ ስነ ልቦናዊ፡በመንፈሳዊ ድጋፍና እንክብካቤ እና ከተለያዩ ችግሮች ለምሳሌ (ድህነት, በሽታ, ግጭት, ችላ ማለት, ጥቃት, የወላጆች መሞት, ሁከት, ብዝበዛ, መድልዎ, መነጠል እና ብቸኝነት) መካከል ያለውን ግንኙነት እንዴት ይገልጡታል?

20. ማክል ወይም ለመጨመር የሚፈልጓቸው ነገሮች ካሉዎት?

የቃለ-መጠይቅ መምሪያ ክፍል 3

በኢትዮጵያ ኦርቶዶክስ ተዋህዶ ቤተክርስቲያን የሕጻናትና ቤተሰብ ጉዳይ ድርጅት ለተጠቃሚ ቤተሰብ የተዘጋጀ መጠይቅ መሰረታዊ መረጃ

መሰረታዊ መረጃ

ስም -----

ቃለ መጠይቅ ቀን -----

ጾታ -----

የስራ ድርሻ -----

የትምህርት ሁኔታ -----

እድሜ -----

1. በዚህ ድርጅት የሚከናወኑ ድጋፍና እንክብካቤ እንዴት ይመለከቱታል?

2. ከዚህ ተቋም ያገኙትን የድጋፍ ዓይነት ይዘርዝሩ.

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3. ድርጅቱ በማህበራዊ፣ በሥነ-አእምሮአዊ ፣ በመንፈሳዊ ለልጆች የሚያደርገውን ድጋፍና እንክብካቤ እንዴት መግለፅ ይቻላል?

4. በድርጅቱ ለልጆች የሚሰጡት የስነ አእምሮ፣ ማህበራዊ እና መንፈሳዊ ድጋፍና እንክብካቤ በቂ ይመስልዎታል? አዎ ወይም አይደለም. ለመልሱ ምክንያት ይሰጡ .....

5. በኢትዮጵያ ኦርቶዶክስ ተዋህዶ ቤተክርስቲያን የገነተ ኢየሱስ ህፃናት እና ቤተሰብ ልማት ፕሮግራም ድርጅት የሚሰጠው የስነ-ልቦና ፣ ማህበራዊና መንፈሳዊ ድጋፍና እንክብካቤዎች በሕይወቶች ላይ ምን መልካም ተጽእኖ ፈጥሯል?

6. የዚህን ተቋም (አዎንታዊ ወይም አሉታዊ) በቤተሰብዎ ላይ ያሳደረውን ተጽዕኖ እንዴት ይገልጹታል?

7. የዚህን ድርጅት አገልግሎቶች እርስዎ ከሚገኙት አገልግሎት አኳያ እንዴት ያዩታል?

8. የኢትዮጵያ ኦርቶዶክስ ተዋህዶ ቤተክርስቲያን የገነተ ኢየሱስ ህፃናት እና ቤተሰብ ልማት ፕሮግራም ድርጅት ችግርዎን በመጠየቅ እርሶን በማሳተፍ ለችግር በጋራ መፍተሄ የመስጠት ልምድ በድርጅቱ አለ ብለው ያምናሉ? እንዴት?

9. በኢትዮጵያ ኦርቶዶክስ ተዋህዶ ቤተክርስቲያን የገነተ ኢየሱስ ህፃናት እና ቤተሰብ ልማት ፕሮግራም ድርጅት የማህበራዊ የስነ ልቦናዊ እና መንፈሳዊ ድጋፍ እና እንክብካቤ (ምክር, መንፈሳዊ አገልግሎት, ፍቅር,) እንዴት ይገልጹታል?

10. ይህ ድርጅት በልጆች ላይ የስነ-ልቦና ማህበራዊ እና መንፈሳዊ አገልግሎትን በመስጠት ተፅእኖ በመፍጠር ረገድ እንዴት ይገልጡታል?

11. ከድርጅቱ አስፈላጊዎቹን አገልግሎቶች ለማግኘት ምን አይነት ችግር ይኖራል ይላሉ?

12. እርስዎ ወይም የቤተሰብዎ አባል በአደጋ ጊዜ (እንደ ምግብ, መጠለያ, ልብስ እና ጤና, ትምህርት, ስነ አእምሮ ማህበራዊ እና መንፈሳዊ ድጋፍና እንክብካቤ) ቀጥተኛ ድጋፍ ያገኛሉ?

13. ልጆችን በመደገፍ በተለይም በስነ ልቦና በማህበራዊ ክህሎት እና መንፈስ ጠንካራ እንዲሆኑ እንዴት ነው የሚከታተሉት?

14. በማህበራዊ-ስነ-ልቦናዊ እና መንፈሳዊ ድጋፍና እንክብካቤ ለመሳሌ እንደ (ድህነት, በሽታ, ግጭት, ችላ ማለት, ጥቃት, የወላጆች መሞት, ሁከት, ብዝበዛ, መድልዎ, መነጠል እና ብቸኝነት) መካከል ያለውን ግንኙነት እንዴት ይገልጡታል?

15. ሊያክሉበት ወይም ሊጨምሩት የሚፈልጓቸው ነገሮች አሉ?

የሚሞላ ጥያቄ መምሪያ ክፍል 4

በኢትዮጵያ ኦርቶዶክስ ተዋህዶ ቤተክርስቲያን የሕጻናትና ቤተሰብ ጉዳይ ድርጅት ለተጠቃሚ የተዘጋጀ መጠይቅ መሰረታዊ መረጃ

አጠቃላይ መመሪያዎች:

- ስምዎን መጻፍ አያስፈልግዎትም
- በመልሱ ላይ √ ምልክት ያድርጉ

➤ ከአንድ በላይ መምረጥ ይችላሉ

ክፍል አንድ: ምላሽ ሰጪዎች ዳራ መረጃ

1. ዖታ      ሀ. ወንድ      ለ. ሴት

2. ዕድሜ \_\_\_\_\_ ዓመት

3. የልጆች የትምህርት ደረጃ

ሀ. አንደኛ ሳይክል (ከ 1-4)    ለ. ሁለተኛ ሳይክል (ከ5-8ኛ ክፍል)

ሐ. ሁለተኛ ደረጃ ትምህርት ቤት (9-10)    መ. ቅድመ ዝግጅት ትምህርት ቤት

ሠ. ድጥሎም      ረ ከድግሪ በላይ

ክፍል ሁለት ስለ ልጆች ወላጆቻቸው መረጃ እና የስራ ሁኔታቸው

4. አባት እና እናቶት በሕይወት አሉ ሀ. አዎ      ለ. አይደለም

5. በጥያቄ 4 ላይ መልሶ አዎን ከሆነ በህይወት ያለ ማን ነው ?

ሀ. ሁለቱም ወላጆች በሕይወት አሉ    ለ. እናት ብቻ ናት    ሐ. አባት ብቻ ነው    መ. ሁለቱም ሞተዋል

6. ወላጆችዎ በህይወት የሚኖሩ ከሆነ አብራችሁ ትኖራላችሁ?

ሀ. አዎ      ለ. አይደለም

7. የእናት የትምህርት ደረጃ

ሀ. ማንበብና መጻፍ አይችሉም      ለ. የመጀመሪያ ሳይክል (1-4)

ሐ. ሁለተኛ ሳይክል (ከ5-8ኛ ክፍል)    መ. ሁለተኛ ደረጃ ትምህርት ቤት (9-10)

ሠ.ፕሪፓፖራቶሪ

ረ.ዲፕሎማ ከዛ በላይ

8. የአባት የትምህርት ደረጃ

ሀ. ማንበብና መጻፍ አይችሉም      ለ. የመጀመሪያ ሳይክል (1-4)

ሐ. ሁለተኛ ሳይክል (ከ5-8ኛ ክፍል) መ. ሁለተኛ ደረጃ ትምህርት ቤት (9-10)

ሠ.ፕሪፓፖራቶሪ

ረ.ዲፕሎማ ከዛ በላይ

9. አባትዎ በሕይወት ካሉ ሥራው ምንድን ነው?

ሀ. ሥራ አጥ ለ. የቀን ሰራተኛ ሐ. በግል የሚሰራ መ. የንግድ ሥራ

ሠ. የመንግስት ተቀጣሪ

10. እናትዎ በሕይወት ካሉ ሥራዎ ምንድን ነው?

ሀ. ሥራ አጥ ለ. የቤት እመቤት ሐ የግል ሰራተኛ መ. የንግድ ሥራ

ሠ የመንግስት ተቀጣሪ

11. የወላጆችዎ ወርሃዊ ገቢ በኢትዮጵያ ብር ስንት ነው?

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12. የቤተሰብዎ መኖሪያ ቤት ሁኔታ?

ሀ.የመንግሥት ቤት ለ.የግል ቤት ሐ. የማህበር ቤት መ.ከግለሰብ የተከራዩት ነው

13. የልጆች ብዛት \_\_\_\_\_

14. የቤተሰብ ብዛት (የቤት ሰራተኛን ጨምሮ) \_\_\_\_\_

ክፍል ሶስት በቤተሰብ ውስጥ ያለ ችግር

15. ከሚከተሉት ችግሮች አንዱ ቤተሰባችሁ መካከል ያለው የቱ ነው?

ሀ. የአልኮል ሰብኛ ለ. የአእምሮ ሕመም ሐ. አካላዊ ህመም መ. በኢኮኖሚ ችግር አለመግባባት ሠ. በማሕበራዊና በስነልቦና ችግሮች አለመግባባት

16. እርስዎ ከወላጆቻችን ጋር አወንታዊ ግንኙነት አለዎት?

ሀ. አዎ ለ አይደለም

17. ለጥያቄ 16 "መልሱ" አይደለም ከሆነ ለምን ?

ክፍል አራት ጥናቱን የሚፈልግ አጠቃላይ መረጃ

የስነ-ልቦና ማህበራዊ ድጋፍና እንክብካቤ አካል

18. ለልጆች የስነ-ልቦና ማሕበራዊ ድጋፍና እንክብካቤ አጠቃላይ እድገትን የሚያመጣላቸው ይመስልዎታል? ሀ. አዎ ለ አይደለም

19. ለጥያቄ ቁጥር 18 ("አዎ") ከሆነ, እባክዎን ምክንያቶቻችን ያብራሩ.

20. በአካባቢዎ ለሚገኙ ህፃናት የስነ ልቦና እና ማህበራዊ ድጋፍና እንክብካቤ አገልግሎት የሚሰጡ ተቋማት አሉን?

ሀ. አዎ ለ አይደለም

21. የስነ-ልቦና ማሕበራዊ ድጋፍና እንክብካቤ ለህፃናት ደህንነቱ የተጠበቀ አካባቢን ይፈጥራሉ ብለው ያምናሉን?

ሀ. አዎ ለ አይደለም

22. የስነ-ልቦና እና ማህበራዊ ድጋፍና እንክብካቤ የማይደረግላቸው ልጆች የጥቃት ዲላማ የመሆናቸው መጠን ከፍተኛ ነው ብለው ከተጠየቁ ምን ይላሉ?

ሀ. በጣም እስማማለሁ ለ. እስማማለሁ ሐ. አልስማማም መ. በከፍተኛ ደረጃ አልስማማ

23. ለጥያቄ ቁጥር 22 መልስዎ 'በጥብቅ ከተስማሙ ወይም ከተስማማሙ እባክዎን ተጋላጭ የሚሆኑበትን ይዘርዘሩ.

24. ልጆች ከድርጅቱ በቂ የማሕበራዊና ስነ-ልቦናዊ ድጋፍ ያገኛሉ ቢባል መልሱት ?

ሀ. በጥሩ ሁኔታ እስማማለሁ ለ. እስማማለሁ ሐ. በትቂቱ እስማማለሁ

መ. አልስማማም ሠ. ሙሉ ለሙሉ አልስማም

25. በቤተሰብ ውስጥ ከወላጆች በቂ የሆነ የስነ-አእምሮ እና ማህበራዊ ክትትልና ድጋፍ አለ ብለው ይስማማሉ?

ሀ. በጥሩ ሁኔታ እስማማለሁ ለ. እስማማለሁ ሐ. በጥቂቱ እስማማለሁ መ. አልስማማም ሠ. በከፍተኛ ደረጃ አልስማማም

26. በትምህርት ቤትዎ ዙሪያ በቂ የስነ-ልቦና የስነ-ማህበራዊ ድጋፍና እንክብካቤ አለ ብለው ያምናሉ?

ሀ. በጥሩ ሁኔታ እስማማለሁ ለ. እስማማለሁ ሐ. በጥቂቱ እስማማለሁ

መ. አልስማማም ሠ. በከፍተኛ ደረጃ አልስማማም

27. በድርጅቱ ውስጥ የሥነ-አእምሮና ማሕበራዊ አገልግሎት የመስጠት ደረጃው ምን ይመስላል?

ሀ. በጣም ከፍተኛ ለ. ከፍተኛ ሐ. መካከለኛ መ ዝቅተኛ ሠ. በጣም በጣም ዝቅተኛ

28. ለህይወትዎ የስነ-አእምሮና የስነ-ማሕበራዊ ድጋፍና እንክብካቤ ጠቃሚ ነው ብለው ያምናሉ?

ሀ. በጣም በከፍተኛ ለ. ከፍተኛ ሐ. አማካይ መ ዝቅተኛ ሠ በጣም ዝቅተኛ

የመንፈሳዊ እንክብካቤ እና ድጋፍ አካል

29. ልጆች በመንፈሳዊ አስተዳደግ ተኮትኩተው ቢያድጉ ለአጠቃላይ እድገታቸው ጠቃሚ ነው ብል ያስባሉ? ሀ. አዎ ለ. አይደለም

30. ለጥያቄ ቁጥር 29 "አዎ" ከሆነ, እባክዎን ምክንያቱን ያብራሩ.

31. ልጆችን በመልካም አመለካከት, ጥሩ በሆነ ልምድ የዳበሩ እንዲሆኑ በመንፈሳዊነት መገንባቱ አስፈላጊ ነው ብለው ያምናሉን?

ሀ. አዎ ለ. አይደለም

32. ሕፃናት በመንፈሳዊነት መደገፍና መንከባከብ ልጆችን ከተለያዩ አይነት ጉዳት ይጠብቃቸዋል ብለው ያምናሉ?

ሀ. አዎ ለ. አይደለም

33. ሕፃናትን በመንፈሳዊ ድጋፍና እንክብካቤ ማሳደግ በልጆች ባሕሪ ላይ መልካም የሆነ ተጽኖ ያመጣል ብለው ያምናሉ?

ሀ. አዎ ለ. የለም

34. ለጥያቄ ቁጥር 33 "አዎ" ከሆነ 33 እባክዎን ምክንያቱን ያብራሩ.

35. ጥሩ የሆነ ጭንቀትን የመቆጣጠር አቅም አለዎት?

ሀ. አዎ ለ. አይደለም

36. ልጆች ከድርጅቱ በቂ የሆነ መንፈሳዊ ድጋፍና እንክብካቤ ያገኛሉ ቢባል ይስማማሉ?

ሀ. በጠም እስማማለሁ ለ. እስማማለሁ ሐ. እልስማማም መ.በጣም አልስማማም

37. መንፈሳዊ ድጋፍና እንክብካቤ ልጆችን በስርዓት እንዲያድጉ ያግዛል ብለው ያምናሉ?

ሀ. አዎ ለ. አይደለም

38. ለጥያቄ ቁጥር 37 "አዎ" ከሆነ እባክዎን ምክንያቱን ያብራሩ.

39. በድርጅቱ ላይ ለልጆች ጥሩ የሆኑ የስነ-አእምሮና ማህበራዊ አግልግሎት ለመስጠት ተግዳሮት አለ ብለው ይስማማሉ ?

ሀ. በጣም እስማማለሁ ለ. እስማማለሁ ሐ. አልስማማም መ. በጣም አልስማማም

40. ለጥያቄ ቁጥር 39 "መልሶዎት" በጣም እልስማማም ወይም እልስማማም ከሆነ, እባክዎ ችግሮችን ይጻፉ

41. በድርጅቱ የስነ-ልቦና እና መንፈሳዊ እንክብካቤ አገልግሎት የልጆችን ፍላጎት አርክቷል ብለው ያምናሉ?

ሀ. አዎ ለ. አይደለም

42. ለጥያቄ ቁጥር 41 'መልሱ' አይደለም ከሆነ, ምክንያቱን ያብራሩ

43. ለልጆቹ የሥነ-ልቦና ሥነ-ባህሪ እና መንፈሳዊ ድጋፍና እንክብካቤ አገልግሎት ለማዳበር ምን ዓይነት ሥራዎች መከናወን አለበት?

ለሰጡኝ ጠቃሚ መረጃ ከልብ አመሰግናሁ!!