

Addis Ababa University
School of Graduate Studies

**The Self-Esteem of the Elderly Engaged in
Different Roles and Activities: The case of
residents of Yeka and Addis Ketema Sub
cities in Addis Ababa.**



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April 27, 2007

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A thesis submitted to the department of Psychology in partial fulfillment of the requirements for the Degree of Master of Arts in Developmental Psychology.

April 27, 2007

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Abstract

Activity theory is the most prominent psychological theory of aging. This theory states that aging is a gradual shrinking away of the elderly from the previously assumed roles and hence replacement of the relinquished roles by the new ones is likely to help the elderly to have meaning in life, increases their life satisfaction and boosts their Self-esteem. Thus roles that are lost at the time of old age should be substituted by new roles and activities.

In light of this, it was hypothesized that the elderly having currently involved in different type of roles have better self-esteem, and more importantly that this is especially possible if role induction is a matter of choice than necessity.

A total of 227 elderly of age 55 years and above were considered from Yeka and Addis Ketema sub-cities to fill a questionnaire constructed to identify the type of roles assumed, level of engagements, reason of engagement and also assess their Self-esteem. The finding indicated that the elderly with multiple roles have the highest self-esteem and engagement in work role has no significant difference on Self-esteem. Those engaged in work roles by choice have the better self-esteem than those who are engaged by necessity and those engaged in family and social cultural roles have the highest Self-esteem than those engaged in work roles and those who are not involved. Accordingly it is recommended that the elderly should be encouraged to participate in multiple roles and by their choice.

CHAPTER ONE

1. Background

Old age is defined in different ways in different groups and societies. This is mainly because different criteria are used in defining aging. It can be defined biologically, functionally or chronologically depending on the society. Chronological age has little or no significance in defining old age in developing countries. According to (Gorman 1999, p.35) other socially constructed meanings of age such as the roles assigned to older people and also the loss of roles accompanying physical decline are very important in defining old age. Unlike the developed countries, old age in many developing countries is considered to begin at times when an individual becomes unable to have active participation.

Wainwright (2000) also stated that older people in Africa are identified by the roles or activities in which they are engaged. The inability to work is also regarded as an indicator of aging as opposing to a particular retirement age. Furthermore, life events such as becoming a grandparent and the inability to reproduce are used as markers of old age.

Internationally, old age is defined based on a chronological age. HAI stated that UN defines old persons as those aged 60 years and above. In Africa as well as in Ethiopia formal retirement age ranges between 55 to 60 years (HAI, 2001).

It is believed that the world's population of the aged is rising. A cross-national research conducted in the United States indicated that during the year 2000 it was estimated that the number of persons aged 65 and above was 419 million persons which constituted 6.9 percent of the earth's total population. Currently, the aging population is increasing by more than 750,000 people each month. During 2001, Italy was demographically the oldest of the world's major 4 nations, with more than 18 percent of its population aged 65 and over. Other remarkably high levels of the aging population were seen in Sweden, Greece, Belgium, and Japan (Jester, 2001, pp. 31-32).

There is also an assumption that the increase in the population of aging is also becoming observable in developing countries. For instance, Help Age International pointed out that previously regarded as a fact of developed world; current figures show that 61% of the global population of people over 60 lives in developing countries. Today, 375 million people over the age of 60 live in the developing countries. By 2050, the figure will be 1500 million (HAI, 2004: P. 16). Similarly, it was noted on the Regional Intergovernmental Meeting on Aging for Africa held in Addis Ababa in 1983, that in African regions, most countries were on a substantial increase in those aged 60 and above (OAU, 1982).

According to the 1994 Population Census of Ethiopia, the proportion of the aged 55 years and above was 5.3% out of the total 53.84 million people and the number of people aged

65 and above was 1,696,980 which is 3.19% of the total population. On the other hand, those aged 80-89 and 90⁺ were 289,942 and 78,322 respectively. Out of the total elderly population aged 55 and above, 124,738 (61,660 male, 63,078 female) were living in Addis Ababa city. The total population of Addis Ababa was 2,112,737 of which 87,516 or 4.1% were old persons 60 and above. From the total numbers of old people in the regions, 85,674, and 97.9% were living in urban areas and 1842 or 2% live in rural areas (CSA, 1994). HAI using the government census data stated that the actual numbers of older people in Ethiopia is expected to double in less than 25 years (HAI, 2004).

The increase in the population of the aged is considered as the result of different factors. Among others, the increase in the life expectancy is the major one. It is noted that today, due to the modernization and advancement of medical technology, people are living longer and mortality rate is declining. This makes the life expectancy to increase among all age groups and increase in the average age of the entire population (Moody, 1998).

Help Age International (1999) indicated that the increase in life expectancy is not the phenomena of the developed countries, but rather it is also of the developing world and pointed out that the demographic phenomenon of the rapidly increasing elderly population is also becoming prominent in rural Ethiopia. This can be proved by the improvement in the average life expectancy in rural areas of Ethiopia which increased from 49 in 1970 to 52 years in 1984.

Due to the increase in the average life expectancy, the period of later life becomes extended and includes people of widely different generations. Hence, in developmental psychology, old age is divided into three stages. These are the young old, the middle old and the old old stages. Having this into consideration, regarding the problems of old age such as health and general being of the elderly and measures to be taken to solve the problems have been given due emphasis in different fields.

In psychology for instance, it is stated by activity theorists that activity at the time of old age is important for successful aging because it allows the elders remain active throughout the life span. Role losses like retirement and widowhood in old age deprives a person of social participation, social identity and a sense of self-esteem. Hence, the theory stated that engagement in activities at the time of old age helps old people regain their sense of identity and self-concept. Thus the loss of roles like retirement and widowhood during old age should be substituted by other new roles including responsibilities (Roadrurg, 1985).

The situation seems a blessing in disguise for Africa. It is stated that in Africa, the majority of older people continue to work until they are physically unable to work. WHO as cited in Wainwright (2000) pointed out that in the year 1993, between 74-91 percent of people over the age of 65 were found to work in 20 African countries (P, 22).

The fact that the elderly in Ethiopia are engaged in different work activities is also shown in the 1994 Housing and Population Census. It was indicated that out of the total population of the elderly aged 65⁺ (451,035), about 26.57% were pensioners and 1,078,440 (23.55%) were registered as economically active and about 841,618 (49.5%) self-employed (Population and housing census, 1994).

Some research investigations conducted on the elderly in Ethiopia still indicated that old people are engaged in various activities. For instance, HAI stated that the previous roles of the elderly are changing and given up by most old people and substituted by new roles. These roles are such as care taker of the children and grandchildren, financial supporters of their family, laborers, beggars etc (HAI, 2001).

Wainwright (2000) stated that the elderly in Ethiopia are traditionally given different roles to play in the society and thus are involved in different activities. In addition to this, he also mentioned that most of the elderly also take different roles and responsibilities by necessity rather than their choice. This is mainly because of the poor policy implementation, and the destruction of extended family support system due to poverty, HIV, and modernization (PP. 11-16).

In light of the above arguments, this research attempts to examine the extent to which engagements of the elderly in Addis Ababa, generally contributes to their self-esteem.

1.1 Statement of the problem

Researchers and theorists indicated the importance of activity on the psychological well being of the Elderly, but issues regarding the type, number of activities and the willingness of the individual have not been mentioned. They stated that activity in old age helps the elderly to maintain their sense of identity. This, however, depends on the type of activity being taken. Presently, the elderly in Ethiopia are engaged in different activities and that some studies already mentioned earlier, indicated that the previous cultural roles of the elderly are changing. This would then means that among others the elderly are possibly engaged in ways that are not in their expectations and will. Such forcibly engagements in activities may not contribute to self-esteem.

Accordingly, this paper tries to answer the following question.

1. How does the self-esteem of the elderly look like?
2. What are the activities in which the elderly are engaged?
3. What is the level of engagement of the elderly engaged in work activities?
4. Are the elderly engaging in work by choice or by necessity?
5. Is there a difference in the Self-esteem of the elderly who are engaged in work activities by their choice and those elderly who are engaged in work activities by necessity?

6. Is there a difference in the Self-esteem of the elderly who are engaged in different type of roles and those who are not?
7. Which type of role contributes more to the Self-esteem?

1.2 Objective

- To asses the Self-esteem of the elderly engaged in different activities.
- To see if there is a difference in the Self-esteem of the elderly engaged in the different roles and those who are not engaged.
- To asses the Self-esteem of the elderly who are engaged in work activities by necessity and by their choice.
- To see the type of role that is important for the Self-esteem.

1.3 Operational Definition

Role: The activities or duties (such as work, family and social cultural roles) in which the elderly are involved.

Elderly: In this study, Elderly refers to those people aged 55 and above

Self-esteem: The elderly evaluations about themselves with regards to different dimensions such as their social relationships, capabilities, worthiness and acceptance and respect from others.

Non role: Those people who have reported that they are not engaged in any of the roles or are not engaged in any type of responsibilities.

- In the study, having no role means being dependent. The majority of those participants who have reported that they are not engaged in any of the roles are found to be dependent.

Engagement by choice: Those people who reported that they engage in work role for the sake of being active and spending their leisure time.

Engagement by Necessity: Those people, who reported that they are involved in work roles because they have no other sources of income, have small income that they work on order to increase their income.

Social cultural roles: Roles or activities that are culturally and traditionally given to the elderly in the society such as Iddir leader, Arbitrator etc

Work roles: Any type of job in which the elderly is engaged to generate income.

In this study, participants who have reported that they are involved in only work roles and have no involvement in family and social cultural roles are those involved in begging, petty trade and Daily labor and other degraded type of roles in the community.

Familial roles: Duties or responsibilities of the elderly in the family.

1.4 Significance

Different researchers have investigated issues regarding childhood and adolescence in Ethiopia. When it comes to old age, little studies are found. The available researches conducted on late adult hood in Ethiopia emphasize on the poverty and health problems. It seems that attention has not been given to the psychological aspects of the elderly. Hence this paper is significant that it tries to assess the Self-esteem of the elderly with regards to their engagement in different activities.

1.5 Limitations

During data collection process, the respondents were resistant in reporting issues about their monthly income. Even if they were informed about the objective of the study, some respondents were not willing to provide information regarding income. The information they provide was invalid information. Another limitation of the study is that due to lack of enough samples, people who are involved only on the social-cultural roles and only on family roles are not found and hence not included in the study

1.6 Acronyms

ESAW: European Study on Adult Well Being

CSA: Central Statistical Agency

HAI: Help Age International

CHAPTER TWO

2. Review of the Related Literature

In this part of the paper, some of the works of other researchers that are related to the study will be reviewed in three different parts. In the first part of the chapter, different theories regarding engagement and old age are reviewed. In the second part, some concepts are reviewed and finally different researches that are conducted in other countries and in Ethiopia are reviewed.

2.1 Theoretical Framework

There are different theories that emphasize on the psychological aspect of aging. Among these, activity theory is the one. The major premise of this theory is that activities in old age have important benefits and contribute for increased life satisfaction for everyone. The theory holds that people construct ideas about themselves from the things that they do and the roles that they fill in life. According to this theory people give up many roles as they age. These changes in roles challenges the idea people hold about themselves and may create a reduced sense of identity and drain the strength on one's inner self. Hence people need to engage in activities that can be substitute roles for those that have been given up. Thus activities in late life are essential to restore one's sense of self and boost one's self-esteem (Cox, 1988).

Activity theorists argue that role losses in old age can deprive a person of social participation, social identity and a sense of self-esteem. Thus the roles that are given up should be substituted by new roles including responsibilities and obligations that would bring to old people a feeling of productive existence (Roadrurg, 1985).

The theory suggests that a person's self concept is related to the roles held by that person and retiring may not be so harmful if the person actively maintains roles such as familial roles, recreational roles, volunteer and community roles. To maintain positive sense of self, the person must substitute new roles for those that are lost because of age (Beington and Kossuth, online).

Robert Havighurst formalized activity theory and stated that "it is neither normal nor natural for older people to become isolated and withdrawn. When they do it, it is often due to events beyond their control such as poor health and loss of close relatives." The person who aged successfully is the one who stays active and resists losses of old age. He stated that to age successfully is to remain active through out old age. In general to age optimally means maintaining the activities of middle age for as long as possible and then finding substitutes for those that has to be given up (Quadagno, 1999: page 27).

On the other hand cognitive theory of aging stated that role loss or the very life events of old age such as retirement can bring different impact on the elderly. The cognitive

theorist Hans Thomaes argues that it is perception of change rather than the actual change that has the most impact on behavior. For instance the same life event like retirement might be perceived by one person as loss and by another as a freedom from an oppressive work situation, hence they don't need to find substitute role. How we perceive any event and thus our adjustment to the event depends on the cognitive, emotional and motivational factors.

On the other hand Robert Peck identified three adjustments of late adult hood. He expanded on Erickson's discussion of psychological development in late life *Integrity versus despair* and emphasized three major adjustments that people make (Papalia and olds, 1994: 501).

Among the three adjustments mentioned two of them emphasized on the centrality of work in adjusting to the problems of old age. These are:

- 1. Broader self definition Vs preoccupation with work roles.** Refers to the extent to which people define themselves in terms of their work. Peck stated that old people need to redefine their worth as a human. Retirees especially need to redefine and explore themselves and find other interests to take the place of work. Every one has to ask "*am I a worthwhile person, only in so far as I can do a full*

time job or can I be worthwhile in other different ways as a performer of several other roles and because of the kind of person I am.”

- 2. Transcendence of the body Vs preoccupation with the body.** Refers to the degree to which physical decline creates the need for a second adjustment. Those who do not emphasize on perfect health and focuses on relationship and activities adjust better.

2.2 Conceptual Framework

As pointed out by activity theorists, roles change when one moves from one life course to another. For instance Cavanaugh (1990) stated that when we move from one stage of development to the next, new aspects will be added, some of the things in life remain the same and some will be changed. Due to these changes people are viewed differently by the society and hence behave differently. Role is one of the elements which help to define one's place in a society and it contributes for the development of self concept. Rosow as cited by Cavanaugh stated that the concept of role is useful to define one's position in a society as well as the behavioral expectations associated with these positions. He defines role as the activities which indicate one's privileges and functions in the society (P. 330).

2.2.1 Roles of the elderly

It is stated that the role one takes depends on one's age. Cavananaugh stated that age grades limit the roles one takes (ibid).

Role Loss: In rosow's view old age is a time of loss of social identity arise from role loss and it is considered as a major issue in psychosocial development of the elderly. Role loss is used to understand depression and changes in relationships of the elderly. Moreover, it also indicates the difficulties experienced by the elderly in adjusting to the loss of meaningful roles such as work and spouse roles that arise from retirement and widowhood (ibid).

Roadrurg (1985) stated that the major role loss in old age come with retirement and widowhood and it deprives a person of social participation, social identity and a sense of Self-esteem. Most activity theorists argue that role losses that are accompany old age should be substituted by new roles (P. 123)

Likewise Eitzen and Zinn (1989) stated that most old people leave their meaningful roles for one that is essentially devalued in a society. In old age role transition from a worker to retirement, from married to widowhood, etc takes place. Retirement whether forced or not involves the loss of a valued role. Moreover the transition from wife to widow or husband to widower is an especially difficult change for an individual.

Older people in traditional societies have important roles such as educators of social values and cultural practices, as arbitrators within the family and community etc. As noted by OAU (1982), in Africa the aged has useful and meaningful roles to play with in the family. They serve as “spiritual and moral leaders of the family: as custodians of the family values and economic assets in land, livestock or forestry, as peacemakers in the society at large: as repositories of the collective wisdom of the society, and as the bond that held the community together”

There is an indication that these days, other than retirement, widowhood and social cultural roles, the roles of the elderly are changing for reasons. As stated by HAI, in countries where there is poverty, HIV, displacement, unemployment etc, the role of the extended family in caring and supporting the elderly is hampered and the previous role of the elderly is changing and given up by the elderly. Consequently, the elderly acquire different roles by necessity rather than by their choice (HAI, 2001).

On the other hand Wainwright, Abera, HAI stated that though the impact of modernization, HIV, poverty is diminishing the elderly traditional roles and extended family support system in urban area, still old people play their traditional roles of conflict resolution, midwives and socializing children. They are also involved in activities like care takers of children including looking after people living with AIDS and other

disabilities. Elderly women particularly play such roles as taking care of the sick, disabled children and husbands.

2.2.2 Self-esteem

Some of the definitions and explanations given by psychologists are the following. Rosenberg as cited by Gecas stated that the distinction between Self-esteem and self concept as self concept is the meaning which consists of the self as an object and gives structure and content like identity to the self-esteem. It is an individual's representation of all of his or her self knowledge that is what an individual believes he is. It consists of beliefs, hypothesis and assumptions that the individual has about him. On the other hand self-esteem deals with the evaluative and emotional dimensions of self concept and self evaluations which are typically based on the broader aspects of self concept (Gecas, 1992, p. 4).

In general the difference between Self-esteem and self concept is shown by ESAW that self concept is the totality of self knowledge that one possesses about oneself where as Self-esteem is the evaluative component of self concept and it is the personal judgment of worthiness that is expressed in the attitudes the individual holds towards himself. (ESAW, 2006, p. 6)

Self-esteem by itself has its own components. Rosenberg as cited by Cast and Burke stated that Self-esteem is composed of two different dimensions, “competence and worth”. The competence dimension refers to the efficacy based Self-esteem which emphasizes on the degree to which people see themselves as capable. On the other hand the worth dimension refers to the worth based Self-esteem that emphasizes on the degree to which individuals feel they are person of value (Cast and Burke, 2002, pp. 1042).

2.2.3 Factors in Self-esteem

Different variables are considered as correlates of Self-esteem. For instance ESAW indicated that high Self-esteem is associated with good personal adjustment across the life span, personal autonomy, internal locus of control, setting appropriate goals coping well with criticism, having the skills to influence others and being accepted and approved by others etc. Moreover, it was also stated that Self-esteem is influenced by broader social factors as socioeconomic status (ESAW, 2006, p. 13).

It is also indicated that the provision of pension has positive impact on the well being of the elderly; when older people bring resources into the household, they are viewed as valuable family members rather than as a burden. Old people commented that having pension has given them a sense of self worth and increased their status and social recognition (HAI, 2004, p. 20).

Bandura on the other hand stated that the belief that people have about their capabilities are critical element. According to him how people behave can be predicted by the belief they hold about their capabilities which he called self efficacy beliefs or what they are actually capable of accomplishing. In addition to this, Rosenberg as cited by Demo pointed out that performance in work setting, occupational conditions and socioeconomic attainment are tied to personal efficacy and Self-esteem (Demo, 1992, p. 317).

2.2.4 Self-esteem of the Elderly

There is an assumption that Self-esteem declines at late adulthood and others stated that it is stable. There are few longitudinal studies that are conducted on the Self-esteem development. Demo stated that due to the absence of researches conducted on the Self-esteem of middle adult hood and old age, in most literatures, it is indicated that Self-esteem is consistent throughout adulthood and old age (Demo, 1992).

Some researchers who have conducted longitudinal research pointed out that self-esteem change throughout the life span. For instance moody stated that self-esteem varies throughout the lifespan with a person's success of occupational, intellectual and interpersonal dimensions. From the different dimensions of the self concept, one aspect of self concept that changes with age includes the activities an individual involve in. Hence, as we grow up and get older, we leave behind the earlier roles such as child,

student, employee, parent, spouse which are part of one aspect of Self-esteem (Moody, 1998, page 89).

Likewise Demo stated that self concept is a process that fluctuates, that is stable but is also dynamic. Self attitudes change, fluctuate, stabilize revert to an earlier level and change again. Hence there are various life events that facilitate a stable self concept and also that disrupt self concept (Demo, 1992, p. 320).

Moreover Robin and Trzensniewski stated that through out the life span Self-esteem inevitably increases and declines. The fluctuation in self-esteem results from changes in our social environments as well as maturational changes such as puberty and cognitive decline in old age. They pointed out that during childhood self-esteem is high among young children and gradually declines during late childhood and continue to decline during adolescence (Robin and Trzensniewski online).

During adulthood Self-esteem gradually increases due to the transitional point in adult life such as graduation from university, marriage job etc (ESAW, 2006, p.16). Similarly Robin and Trzensniewski stated that Self-esteem increases in adult hood and peaks around the age of 60 because during adulthood, individuals increasingly get the opportunity to occupy positions of power which might promote their feelings of self worth. (Robin and Trzensniewski) Demo also stated that in addition to the new roles that

are acquired in adult hood, many self doubts a person has will be erased, questions about oneself are answered and new goals and directions established which brings in a secure self concept and boosts a feeling of self worth (Demo, 1992, p 320).

Many agree that during old age self-esteem declines. ESAW, Robin and Trzensniewski, Demo and Moody state that the decline in Self-esteem occurs in old age due to the dramatic changes that occur including changes in roles like retirement and widowhood. But a research finding also indicated that given a stable environment and the ability of the individual to maintain the earlier self-esteem, despite the losses occurring in old age, Self-esteem can become stable (ESAW, 2006, pp :16-17).

This shift in self-esteem is also noted by Erik Erickson. He pointed out that as individuals grow older they begin to review their life long accomplishments and experiences leading in some cases to a more critical self appraisal which he calls ego despair and in other cases to increased self acceptance that is ego integrity. Hence, the developmental tendency of people to reflect back to their previous life increases in Self-esteem for some individuals but decreases for others (Cavananaugh, 1990, p. 249).

2.2.5 Religiosity and old age

It is indicated that during old age, people orient towards religion and religion has different purpose in the lives of the Elderly. Dave and Vincent stated that older people

tend to have always been more religious than the young. Older people always take God more seriously than their children (Dave and Vincent, 1998, p. 101).

Researchers use various characteristics and ways of expression of people in order to categorize them as religious or non religious. Quadagno stated that there are various ways in which people express their religious involvement such as attending church, personal prayers, watching and listening religious programs etc. It is also indicated that an individual's beliefs and attitudes towards religion are also a part of his or her religiosity (Quadagno, 1999, p. 209).

Different variables are considered to affect religious involvement. Roberts and Davidson pointed out that age and gender are related to religious involvement. Women and Older adults may be more religiously involved than men and younger adults. Moreover social relationship and religious beliefs are also associated with religious involvement. It is stated that the more interaction one has with other people in a religious group, the more involved one will become. Likewise, one's religious beliefs concerning the supernatural and church affects the importance one attaches to religion and the extent of one's participation in religious activities (Roberts and Davidson, 1984, p. 336).

Some researchers indicate that religiosity increases with age. On the contrary others indicated that religiosity is stable over time. For instance, Cox stated that though the majority of people indicate belief in God, a higher percentage of the elderly believe that

religion is important in one's life and a higher percentage of them believe in immortality (Cox, 1988, p. 298).

On the other hand Moody stated that religiosity like other behavior tends to remain stable as people reach old age. Often one's desire to search for meaning at the time of old age leads him or her to involve in religious activities. It is showed in most studies that there is a declining in frequency of church attendance after the age of 75 and although older people seem to disengage from some organized religious roles, they make up for this loss by strengthening their non organized religious activities such as personal; prayer, meditation and other forms of spirituality (Moody, 1998, p. 441).

Benefits of Religion

Different scholars mentioned the various use of religion for older people. Roberts and Davidson indicated that religion provides psychological support. It helps older people face and accept the inevitable death, find and maintain a sense of meaningfulness and significance in life. In addition to these, religious beliefs also help the aged to overcome many of the common problems of old age such as loneliness, grief and unhappiness (Roberts and Davidson, 1984, P. 335).

On the other hand Cox have stated that people's commitment to religious beliefs tends to shape their attitudes, beliefs, opinions and values, gives greater life satisfactions. One of

the explanations for the importance of religious involvement in the lives of the elderly is that the church becomes a focal point of social integration and activity, providing them with a sense of integrity and well being (Cox, 1988, p. 298).

A positive correlation has been found between measures of well being and religious beliefs among the old. Those people with high levels of religious involvement also have higher levels of life satisfaction. In addition to this, religion helps older adults by reducing the impact of stress in late life illness, by providing a sense of order and meaning in life, offering social networks tied to religious groups, strengthening inner psychological resources such as Self-esteem (Moody, 1998, p. 442).

Similarly Quadagno also stated that “involvement in religion have positive impact on the adaptation of aging. It improves health, reduces disability, increases Self-esteem, reduces symptoms of depression and enhances life satisfaction, gives meaning to life, provides spiritual resources that help the frail elderly cope with loss and the coming death” (Quadagno, 1999, pp. 209-213).

2.3 Empirical Studies

There are only few researches conducted on the Self-esteem of the elderly. Some of the available researches conducted on the Self-esteem of the elderly are presented as follows. Among others one of the researches conducted on this issue is a research made by ESAW

(European Study on Adult Well Being). The research was conducted on 2000 people aged 50-90 from six west European countries. The result indicated that there is a linear decline in Self-esteem with age. It was also found out that work has a positive correlation with Self-esteem that working individuals reported higher Self-esteem than non working individuals. Moreover the study also found that living condition has a significant relationship with Self-esteem that is respondents who live alone report lower levels of Self-esteem than individuals living with others. On the other hand there was no significant difference between individuals living in rural and urban areas and participants from different ethnic groups (ESAW, 2006, P. 26).

On the contrary, a cross sectional study which was conducted by Morganti and others in 1998 on 450 people aged 14-80⁺ people indicated a general developmental pattern of increasing self evaluation. It indicated that the oldest groups have significantly higher self evaluations than the youngest groups. Another study conducted by Jaquish and Ripple on 218 white highly educated primary middle class people aged (18-84) found that there is a linear progression in self-esteem until late adulthood and adults aged 26-60 had higher self-esteem than the elderly. A further study conducted by Gov, Ortega, and Style on 2186 adults who are aged 18 and older found out that there is no significant relationship between self-esteem and age, but after adjusting for income, education sex and race, Self-esteem becomes higher among persons aged 75⁺, lower among those aged 55-74 followed by those 26-54 and lowest among those 18-25(ibid).

indicate that self evaluation scores increased with age with the oldest groups reporting significantly more favorable self evaluations than the youngest group (Demo, 1992: PP, 314-315.). Age or life stage alone doesn't account for much variation in self concept but significant variation does occur among women aged 29-55 who have assumed different life roles. (Ibid)

A study conducted in Australia on 1087 elderly aged 70-103 found that Self-esteem declines with age. Those participants who scored high Self-esteem were younger, have higher income, are more educated and have less depression than those who scored lower Self-esteem. The analysis showed that people aged 85 years or more had lower mean self-esteem than those aged 70-74 and 75-79 age groups but the difference was very small. Moreover the study also found out that the view that feeling useful and competent may be related in important ways to the Self-esteem of older adults. There is a strong association between competence, engagement, and involvement with others, volunteering, performing chores for friends and Self-esteem (Ranzin, et al on line).

Local Studies

There are few local studies that are conducted on old age. Most of the local studies that are available are conducted on the issues related to poverty and health problems of the

elderly. In this research some of the studies that are seen as relevant to the topic are reviewed.

Traditionally, Wainwright (2000) stated that older people play a significant role in Ethiopia. They are involved in running Iddirs and being members of the elder's council and this elder's council is the most important external service giving organization within the community. It is also an elected body and a major organization in settling disputes of Land and marriage and investigating local crimes. The judgment of the elderly in this council is widely respected. In general older men are responsible for teaching morality and religion. Moreover, they also perform marriage ceremony blessing children before the marriage ceremony. On the other hand older women are traditional healers, oral historians traditional birth attendants etc (P. 23)

Other than these traditional roles that are given to the elderly, today old people are involved in different work activities mostly by obligation rather than choice. HAI, Wainwright and Abera stated that the previous roles of the elderly are given up by most old people in Ethiopia and new roles are taken by the old people. HAI stated that the majority of the elderly have no secure income and various old people are leading their life in extreme poverty being involved in different type of works (HAI, 2001).

Abera also stated that the pension coverage in Ethiopia is limited only to employees under the public sector. This coverage compared to the total population is insignificant.

Hence the majority of the elderly lead their life being engaged in various work roles (Abera, 1985).

Wainwright on the other hand indicated that government pension in Ethiopia is extremely limited with only former employee of government and large scale private and public enterprises and even these provision is not satisfactory which starts at 50 birr per month hence very few people are benefiting from the pension in their old age (Wainwright, 2000, P.13). Thus, due to these and other factors many old people are engaged in different work activities.

HAI stated that many old people in Addis Ababa earn a living being engaged in different source of income such as labor services for others, begging, trading consumer items on the streets, caring fuel wood and preparing local beer. (HAI, 2001) On another study conducted by Wainwright, it is indicated that both sexes of the elderly are engaged in begging around the streets, church and mosque yards. Out of the total homeless population, 11% are people aged 50 and above. These old homeless people rely on begging and as a result 72% of them receive less than 2 birr per day and 21% receive 2-3 birr per day (Wainwright, 2000, P.7)

Research finding from sub Saharan Africa indicate the increasing role of grand parent as care taker of children orphaned by HIV/AIDS. About 30% of households in sub-Saharan

Africa are headed by an older person and over 65% of older headed households have at least one child under the age of 15 (HAI, 2004, pp17-18). National AIDS report of June 2001 as cited by HAI indicates that in Ethiopia there are over 750,000 AIDS orphans which is the world's second highest number. The impact of HIV/AIDS on older people hampered the extended family and family support system. It is also creating new burdens for older people. Hence they are forced to provide economic, social and Psychological support to their sick children, grand children and family in general (HAI, 2001).

The elderly are also engaged in traditional medicine practice. It is believed that traditional healers are the most widely consulted health experts throughout Africa and are given high status in their communities because they have knowledge of cultural practice, are easily accessible and can also easily communicate with the local community (HAI, 2001).

In Ethiopia also, the elderly are involved in traditional medicine practice. HAI stated that traditional healers play great roles in providing psychological relief and care in time of illness. In both rural and urban Ethiopia, many people from different socio economic background rely on traditional medicine. This is also true in Addis Ababa. Tigist as cited by HAI stated that traditional healers are most often within the broad age category of 30-70⁺ and most belonged to the age category of 50-59. On the other hand Daniel as cited by HAI indicated that during 2000, out of the famous twelve traditional healers in Addis Ababa, eleven were aged 55 and above (ibid).

In Ethiopia, the elderly participate in diverse roles that they financial and moral supporters for the young family members; they play decisive roles in managing the family, play an arbitration role in every societal conflict, they care for their grand children, children and for the sick family member (Abera, 1985).

CHAPTER THREE

3. Method

The research is a survey which assesses the Self-esteem of the elderly above the age of 55 and who is engaged in different activities, roles and responsibilities.

3.1 Data Source

3.1.1 Study Area

The study is conducted in Addis Ababa. Addis Ketema and Yeka Sub Cities were selected as study areas. The former was selected because the researcher found the kebele administrators who gave their permission to cooperate and Yeka was chosen for practical reasons in the sense that it is the researcher's living place and is easy to access the respondents.

3.1.3. Sample

A total of 255 people above the age of 55 (142male, 96 female) have participated in the study. The study population constitutes those elderly who are living in Yeka and Addis Ketema Sub cities. The participants were chosen based on some of the addresses given

from the Kebele administrative and from the pension hall at Addis Ketema Sub city. The participants were also taken from different housed, church and mosque yards in Yeka sub cities. Those available, who are above the age of 55 and willing to participate, were taken.

3.2 Tools

3.2.1 Measures

A questionnaire was set up in Amharic language to obtain data on six measures such as demographic characteristics, the respondent's engagement level in work, social cultural, familial and religious activities and the level of their Self-esteem.

To test the religious involvement, six questions of the Davidson and Kudson religious involvement test from Roberts and Davidson (1984) with three point scale were taken and modified based on the context and level of understanding of the participants. The test includes six items in which three items measure the behavioral component and the rest three items measure the subjective components of the religious involvement. To measure the self-esteem, twenty questions that are applicable and meaningful in the cultural context of the respondents are constructed. Rosenberg's and Kupersmith's Self-esteem scales from Robinson and Shaver (1973) were referred as a guide to construct the items.

After the questionnaire was developed, it was shown to the expert. Then the items were again modified based on the feedbacks given by the expert on the content, language and applicability of the question.

3.2.2 Pre-testing

A pretest was conducted on 22 participants in order to check the clarity of items, and the reliability of the tests in the questionnaire.

During the pretest three types of Self-esteem tests (an open ended, a nominal scale and rating scale) were tested in order to decide and choose the type of test to which the elderly can reveal their feelings freely. Accordingly, after the pilot test was completed with the three types of Self-esteem tests, the one which showed variability among the respondents and which seemed easier for the respondents to disclose their feelings freely was the one with four point rating scale from never to very often. The problems that were observed with the other two types of items were for instance that when the respondents were given an open-ended item, they were resistant and hesitate to express their feelings and their answer was more of irrelevant. Likewise, the problem of the item with nominal scale (yes or no) was that the participants avoided selecting the scale that indicates negative self-evaluation and hence the score of the participants became more or less the same.

Moreover, after the pilot test, five questions with different type of problems were found and hence modified. Two items with ambiguity, one item for having repetitive idea and two other items for being sensitive issue for the respondents to reveal their feelings freely were the items found with problems. The four questions which were ambiguous and sensitive for the participants to answer were modified and the one which has repetitive idea was discarded. Items that were sensitive are those questions about the age and monthly income of the respondents. Hence to simplify this problem, the age and amount of income were put in ranges so that the participants choose the range which includes their age and income. Among the items that were ambiguous was the item that was asking about the retirement condition. For instance an item "Do you have pension?" was ambiguous that those who receives their husband's or other relatives pension replied for having pension. Hence to overcome this problem, the item was modified to "Are you a retiree?"

The item "In what types of religious activities are you participating other than church or mosque worship activities?" was discarded for having repetitive idea.

The Chrombach α was calculated to check the reliability for the tests used to measure religious involvement and self-esteem and found that the indices were .7186 and .8654 respectively.

3.3 Procedures

Before administering the questionnaire, three data collectors were selected and informed about the criteria for choosing appropriate respondents. They were also briefed about the objectives of the study and some ethical considerations that need to be taken.

3.3.1 Administration

The Addis Ketema sub city Kebele 14 administrators were asked to support and provide information in order to get the appropriate respondents above the age of 55 in the area. The kebele administration gave the permission and some information about house addresses, Iddirs where respondents can be found and they also informed the date when pension would be paid for those elderly having pension in the Sub city. After duplicating the final version of the instrument and taking the house address and location of the pension hall and Iddirs, where the potential respondents were expected to be found, the data was collected. In addition from the addresses and pension hall, the researcher also took sample respondents from Yeka sub city at the church and mosque yards, different houses and also local beer selling house (“tej bet”) where the elderly spend their time.

The sample was not selected randomly, and the researcher took respondents only from those who were available at the places mentioned earlier and willing to participate. While administering the questionnaire, the researcher collected data from the participants

explaining the purpose of the study and telling them that if they are not willing to provide information, they have the right not to participate.

In general the questionnaire was administered to a total of 255 elderly and those who are 55 years and above have participated in the data collection process. However 18 questionnaires were discarded after being filled out. Five people dropped out in the middle of the interview, 7 questionnaires were incomplete and six respondents had communication difficulty. Hence only the rest of 227 cases were considered.

3.3. 2 Data analysis

Data gathered from the questionnaire is presented in detail and analyzed quantitatively Chi-square goodness of fit test was conducted to see the characteristics of the self-esteem score of the Elderly. One way analysis of variance is also employed to identify the significant difference among each variable. Pearson correlation and Partial Correlation was employed to identify the independent contribution of each type of roles on the self-esteem.

Demographic Characteristics

Table 1

		Frequency	Percent
Age	55-60	77	33.9
	61-65	66	29.1
	66-70	45	19.8
	71-75	15	6.6
	76-80	13	5.7
	80+	10	4.4
Income	None	17	7.5
	Above 1000	15	6.6
	500-1000	7	3.1
	50-499	122	53.7
	Below 50	58	25.6
Religion	Muslim	30	13.2
	Christian	175	85.9
	Others	2	.2
Educational Level	Not Educated	73	31.7
	Read and Write	52	22.6
	Primary Level	64	27.8
	Secondary Level	17	7.4
	Above Secondary	21	9.1
Living Arrangement	Alone	39	17
	Spouse	22	9.6
	Children	68	29.6
	Spouse and children	97	42.2
	Others/relatives	4	1.7
Sex	Male	139	60.4
	Female	91	39.6

Age: A total of 227 elderly above the age of 55 are interviewed and as demonstrated on the above table, the mean age for the study is 63.33. The youngest participant in the study is 55 years old and the oldest is 88. Out of the total respondents, 33.9% (77) are between the age 55-60 which is the highest frequency followed by 61-55 29.1% (66). On the other

hand those respondents who are between the ages of 66-70 are 19.8% (45) and those between the age of 71-75 and 76-80 constitute 6.6% (15) and 5.7% (13) respectively.

Finally the least reported age group was those people who are above 80 years which is 4.4% (10) of the total sample.

Sex: The majority of the participants are male which constitute 60.4% (139) and the rest 39.6% (91) are female.

Religion: On the other hand, the 85.9% (175) participants are Christians while 13.2% (30) are Muslims.

Living Arrangement: The majority of the respondents 42.2% (97) reported that they live with their children and spouse, 17% (39) live alone, 29.6% (68) live with their children, and 9.6% (22) and 1.7% (4) live with their spouse and other relatives respectively.

Education: Out of the total participants 31.7% (73) are not educated where as 22.6% (52) read and write. The rest 27.8% (64), 7.4% (17) and 9.1% (21) have reported primary level, secondary and above secondary level education respectively

CHAPTER FOUR

4. Finding

Data was processed from a total of 227 participants. The descriptive summary of the data is presented in table one and two.

4.1 Descriptive summary of the data

Table 2: Descriptive summary of religious involvement and Self-esteem scores

	Actual				Expected			
	Minimum	maximum	mean	Std	Minimum	Maximum	mean	Std
Religious involvement	8	81	42.95	20.86	9	81	36	-
Self-esteem score	8	52	33.77	10.082	0	60	30	-

As stated in the previous chapter, the religious involvement was measured by a test with six items which have three rating scales from 1 to 3 and the expected mean is calculated adding and multiplying the mid point of the items measuring both the behavioral and subjective components of religious involvement. Hence it is found to be 36. On the other hand, self-esteem was measured by 20 items with four rating scales from 0-3 and the expected mean of self-esteem score is 30 which is computed by multiplying the number of items with the mid point of the scale 1.5.

In this study the mean self-esteem score of the sample is 33.77 and Std 10.82, where as the mean score of religious involvement is 42.95 and its Standard deviation is 20.86.

Table 3 Summary of the descriptive values of the actual self-esteem score in relation to the variables

Variables		Actual Self-esteem score				
		Mean	N	Std. Deviation	Minimum	Maximum
Work	not working	33.5714	112	8.3985	8.00	50.00
	working	33.9652	115	11.5310	9.00	52.00
Participation in Social cultural roles	Have participation	26.3564	101	8.2336	8.00	47.00
	Have no participation	39.7143	126	7.0505	18.00	52.00
Family role	Have family role	26.3182	88	8.0723	8.00	49.00
	Have no family role	38.4892	139	8.2289	9.00	52.00
Working by Necessity vs. Choice	Necessity	33.0204	98	11.55	9	52.00
	Choice	40.0000	17	9.39	14	51.00
Level of engagement at work	Low engagement	34.4348	23	11.1674	13.00	48.00
	Highly engaged	39.2105	57	8.7866	12.00	52.00
	Extremely engaged	25.7353	34	10.6410	9.00	52.00
Type of roles assumed	non role	27.3208	53	5.2285	8.00	39.00
	work	23.2286	35	8.7316	9.00	43.00
	family, culture	39.9455	55	5.2083	27.00	50.00
	work and other	31.0526	19	12.4252	9.00	49.00
	family, social cultural and work	40.2769	65	7.5571	18.00	52.00
Number of roles	none	27.2692	52	5.2659	8.00	39.00
	one	23.2286	35	8.7316	9.00	43.00
	two	37.5600	75	8.5570	9.00	50.00
	three	40.2769	65	7.5571	18.00	52.00

As indicated in table three, out of the total participants, about half of them 50.2 % (114) reported that they are working and the analysis indicates that there is no difference in the self-esteem score of the participants who are working and not working. The maximum score observed among working participants is 52 while 50 is for the participants who are not working. However, there is a difference in the mean score of the participants who have reported that they work by necessity and by choice. Those who work by choice have the highest mean score which is 40 where as for those working by necessity, it is 33.02.

There is also difference in the mean score of the participants with regards to their level of engagement at work. The highest mean score 39.20 is observed among participant engaged moderately and 34.43 and 25. 43 observed among those whose engagement is low and those who are extremely engaged respectively.

There is also mean difference with regards to the type of roles the participants have. However, there is small difference observed among those who are involved in work, family and social cultural roles, and those involved in family and social-cultural roles, and both groups have the highest mean score from the rest of the groups.

Regarding the number of roles, the highest mean score, which is 40, is observed among those who have three roles, followed by 37 for those who have two roles.

4. 2 Self-esteem of the elderly.

As indicated in table one, the ideal mean of the population is expected to be 30 and the obtained mean of the total sample in the study is 33.77. Accordingly, this indicates that the Self-esteem of the elderly is positive in that it is better than the entire population. To test this and whether the observed difference among the participants differs significantly than what might be expected by chance, the chi-square goodness of fit test was employed and accordingly the following was obtained.

Table 4 Test Statistics

	total self esteem score
Chi-Square	90.304
df	43
Asymp. Sig.	.000

The result indicated that the chi-square value 90.34 with 43 degrees of freedom is significant at .000. This indicates, the observed difference is significant and represents difference in the population.

4.3 Type of roles and Self-esteem.

4.3.1 Engagement in Working Roles

Table5 Work role and Self-esteem

		Frequency	Percent
Reason of Work	Necessity	98	86
	Choice	16	14
Type of Job	Begging	12	10.4
	Petty Trade, Labor	64	55.6
	Small Business	17	14.8
	Private organization Employee	13	11.3
	Running Private Company	8	7.0
(Level of engagement)	Low engagement	23	10.1
	Medium Engagement	57	25.1
	High Engagement	34	15

Table 6: ANOVA Self-esteem and Work

Necessity Vs Choice					
	Sum of Squares	df	Mean Square	F	Sig.
Between Groups	724.165	2	362.082	3.642	.028
Within Groups	22271.923	224	99.428		
Total	22996.088	226			
Type of Job					
	Sum of Squares	df	Mean Square	F	Sig.
Between Groups	7604.300	7	1086.329	15.457	.000
Within Groups	15391.788	219	70.282		
Total	22996.088	226			
Level of Engagement					
	Sum of Squares	df	Mean Square	F	Sig.
Between Groups	3916.185	3	1305.395	15.257	.000
Within Groups	19079.903	223	85.560		
Total	22996.088	226			

From the table 5 it is observed that out of the total participants, 50.2% (114) are working where as 49.8% (113) do not have work. With regards to the type of work the participants are engaged, the highly reported type of job is petty trade 68.2% (64) followed by small business 7.5%. (17) The rest 10.4% (12), 5.7% (13) and 3.5% (8) are beggars, private organization employees and owner of private company respectively. Statistically significant difference is observed in the Self-esteem of the participants who are involved in work roles in terms of the types of job they are working.

The level of engagement of the participants was measured by their working days and hour. Their level of engagement is grouped in to three categories as low high and extreme engagements. Those working at both day and night were given high score followed by those working at working hours and half a day and at night. Those participants who have reported that they work at night reported that they are guards. Compared to the guards who work at day time, those working at night have small level of engagement. Hence they are given the least score. Those who are working at night and twice a week were given the least score. Accordingly, the majority of the working elderly (52) 45.6% work in working days, (35) 30.7% of the participants have reported that they work daily. The rest (16)14% and (11) 9.8% have reported they work three days a week and once or twice a week. In addition to these, about (81)71.1% and (21)18.4% of the participants reported they work full day and half a day, (9)7% and (4)3.5% of the participants have reported that they work during the night time and both day and night time respectively. Results

from the one way analysis of Variance indicated that a statistically significant difference in the Self-esteem with regards to the level of engagement that is $F=15.257$, $P=.000$. The result from ANOVA indicated that reason of work or working by choice and necessity and type of job has significant difference on the Self-esteem and have $F=3.642$, $P=.028$ and $F=15.457$, $P=.000$ respectively. There is also a significant difference on the self esteem with regards to the level of engagement at work.

Table 7 Multiple Comparisons Scheffe test

Level of Engagement at work				
		Mean Difference (I-J)	Std. Error	Sig.
(I) level of engagement at work	(J) level of engagement at work			
low engagement	highly engaged	-4.7757	2.2850	.227
	Extremely engaged	8.6995	2.4973	.008
highly engaged	Extremely engaged	13.4752	2.0044	.000
Type of Job				
		Mean Difference (I-J)	Std. Error	Sig.
(I) type of job	(J) type of job			
begging	petty trade	-8.8007	2.7641	.125
	labor/guard	-19.0307	3.1442	.000
	small business	-20.9657	3.2150	.000
	employee of private organization	-24.3910	3.4136	.000
	running private company	-23.2083	3.8921	.000
petty trade	labor/guard	-10.2300	2.3254	.005
	small business	-12.1650	2.4203	.000
	employee of private organization	-15.5903	2.6784	.000
	running private company	-14.4076	3.2664	.004
labor/guard	small business	-1.9350	2.8468	.998
	employee of private organization	-5.3603	3.0692	.802
	running private company	-4.1776	3.5939	.968
small business	employee of private organization	-3.4253	3.1417	.977
	running private company	-2.2426	3.6560	.999
employee of private organization	running private company	1.1827	3.8317	1.000

After employing the ANOVA, post hoc Shefee multiple comparisons was employed to check the difference observed between different groups. Accordingly, the result showed that the mean difference between low engagement and extreme engagement and between high engagement and extreme engagement is significant.

Likewise, the post hoc comparison of means for the type of job indicated that begging and petty trade have a significant mean difference with all type of the jobs and there is no significant difference between begging and petty trade.

4.4 Social cultural roles and self-esteem.

Table 8

		Frequency	Percent
Social cultural roles	No participation	103	45.4
	Participating	124	54.6
Type of social cultural role	Arbitrator	28	23.2
	Family association	11	8.8
	Traditional healer	6	4.8
	Iddir (Leader, Finance)	9	7.2
	Iddir, Iqub, other	6	4.8
	Iddir, other	21	16.8
	Iddir arbitrator other	19	15.2
	Arbitrator and other	25	20.0

As shown in the above table, (124)54.6% of the participants have participation in a social cultural roles and the rest (103) 45.45% of the participants do not. About (28) 23.2% of the participants have reported that they have the arbitrator role, (11) 8.8% reported they have role in family associations, others (6)4.8% stated that they have role as a traditional healer and (9)7.2%, (6)4.8% of the participants reported that they have roles of Iddir and Iddir, Iqub and other socio-cultural role. The rest (21) 16.8%, (19)15.2% and (25)20%of the participants reported that they have participations in Iddir and other role, Iddir, arbitration and other socio cultural role and arbitrator and other socio cultural roles respectively. Involvement in Iqub and Iddir roles was measured in terms of participation in these associations having different roles and responsibilities such as secretary, auditor and fee collector, meeting coordinator etc

social cultural role are significantly different from engagement in work and family or social cultural roles

4.7. Number of role

In this study, the participants are engaged in one or more type of roles. See the table below.

Table 15 Number of Roles

		Frequency	Percent
Valid	have no roles	52	22.9
	have one role	35	15.4
	two roles	75	33.0
	three roles	65	28.6
	Total	227	100.0

As indicated in table 14, the majority of the participants (75)33.0% are involved in two roles and (65) 28.6% are involved in three types of roles. The rest (35) 15.4% and (52) 22.9% are involved in one type role and not involved in any other type of role respectively.

ANOVA

total self esteem score

	Sum of Squares	df	Mean Square	F	Sig.
Between Groups	9916.191	3	3305.397	56.354	.000
Within Groups	13079.898	223	58.654		
Total	22996.088	226			

Statistically significant difference is observed in the Self-esteem of the elderly with regards to the number of roles they are involved

Table 17 Scheffe Test for number of roles

Multiple Comparisons

Dependent Variable: total self esteem score
Scheffe

(I) number of roles	(J) number of roles	Mean Difference (I-J)	Std. Error	Sig.
have no roles	have one role	4.0407	1.6745	.124
	two roles	-10.2908	1.3820	.000
	three roles	-13.0077	1.4249	.000
have one role	two roles	-14.3314	1.5678	.000
	three roles	-17.0484	1.6057	.000
two roles	three roles	-2.7169	1.2979	.226

None role is significantly different from having two and three roles and one role is significantly different from two roles and three roles. There is no significant difference between having one role and non role.

4. 8 The type of roles that have better contribution for the Self-esteem

One of the objectives of the study is to identify the type of role which has better contribution to the Self-esteem of the elderly. To illustrate this, partial correlation was computed. Accordingly, the following is obtained.

Table 18 Partial Correlation

	working role	type of job	reason of work	level of engage ment at work	social cultural role	Family role	total self esteem score	Type of roles	number of roles	Type of family role	Type of sociocultu ral role
Age of the individual	.049	.036	.101	.031	.096	.051	.081	.039	.014	.002	.062
educational level	-.031	.100	.009	.042	.136	.005	.208	.106	.1.94	.103	.020
Income	.203	.316	.081	.174	.006	.098	.018	.046	-.032	.030	.023
gender	-.086	.033	.010	.069	.084	.003	.063	.007	.030	.006	.016
total religiosity score	.037	.017	.015	.034	.002	.115	.226	.102	.070	.095	.032
retirement	.055	.009	.234	.123	.073	.031	.145	.053	.085	.014	.123
working role		.279	.143	.430	.125	.049	.103	.002	.106	.005	.026
type of job	.279		.334	.227	.123	.162	.101	.113	.174	-.168	.022
reason of work	.143	.334		.426	.112	.019	.118	.032	.075	.007	.036
level of engagement at	.430	.227	.426		.035	.071	.075	.120	.020	.026	.019
social cultural role	.125	.123	.112	.035		.051	.198	.085	.594	.193	-.460
Having children?	.084	.055	.006	.054	.017		.009	.121	.052	.060	.020
Family role	.049	.162	.019	.071	.051	.152	.059	.274	.118	.774	.025
Status of children	.043	.001	.057	.070	.054	.152	.054	.003	.021	.102	.062
total self esteem score	.103	.101	.118	-.075	.198	.059		.028	.039	.139	.116
Type of roles	.002	.113	.032	.120	-.085	.274	.069		.740	.257	-.028
number of roles	.106	.174	.075	.020	.594	.118	-.039	.740		.321	.037
With whom do you live	.081	.130	.050	.064	.087	.138	.096	.066	.020	.113	.062
Type of family role	.005	.168	.007	.026	.193	.774	.139	.257	.321		.018
Type of sociocultural role	.026	.022	.036	.019	-.460	.025	.116	.028	.037	.018	

The result of the partial correlation indicated that Social-cultural role has a strong correlation with the self-esteem of the elderly followed by family role. This indicates that social cultural role and family role contribute better to the self esteem than work role.

Other than the roles, religious involvement and educational level has a significant correlation with self esteem

CHAPTER FIVE

5. Discussion

This part of the paper discusses the findings of the study in light of other researches and theories. Each of the questions that was planned to be covered in the paper will be answered. First, the type of activities and roles of the elderly and then its relationship with the Self-esteem shall be seen.

5.1 The Self-esteem of the elderly

As was mentioned in table three, there is a significant difference in the Self-esteem among the elderly. The chi-square goodness of fit test result shows that this difference is also observed in the entire population. Moreover the mean score of the elderly is 33.77 where as the expected mean of the entire population is 30. Hence this implies that the Self-esteem of the elderly is positive or better than the entire population. This finding is similar with a research conducted by Morganti which states that the Self-esteem increases with age and old people have significantly the highest self-esteem than the other groups. (ESAW, 2006, p. 26)

5.2 Roles and Activities of the elderly

The finding of the study indicated that the elderly are engaged in different types of roles and activities. The major activities in which the elderly are engaged are found to be work roles, social cultural roles and family roles. Some respondents reported that they are involved in a single role and some reported they are engaged in two or all of the three roles. The study revealed that the elderly are engaged in social cultural roles and other roles such as work and family. This is also indicated by HAI that these days the roles of the elderly are changing and other than the traditional roles that are given to the elderly, the elderly acquire different roles such as work, or generating income , raising children and looking after sick family members etc. (HAI, 2001)

5.2.1 Work roles and Self-esteem

The majority of respondents (114) reported that they are involved in different income generating work activities such as petty trade, daily labor, being employed in private enterprises(doing professional, clerical, labor and security jobs), running private organizations, small scale business and also begging. In addition, the majority are not retired. This phenomenon is also stated by Wainwright that in Africa old people continue to work until they become unable and the majorities have no pension. (Wainwright, 2000) Out of the participants who are working, about 86% are engaged in work activities

by necessity. Even those participants who are retired reported that they work by necessity. They have reported that they work during their later life because they have no other source of income; their pension is small and not enough to support their family that they work in order to add on that. Only 14% of the participants have reported that they work by their choice. Those who are working by choice have stated that they are working in order to spend their leisure time without being bored, to gain strength, to be active and because they love their career etc.

As illustrated in the previous chapter, being engaged in work activity has no significant difference on the Self-esteem $F=.306$ $P=.581$. But a significant difference is observed with regards to the type of job the participant is involved and whether they are involved by their choice or necessity. The results are $F=15.457$, $p=0.000$ and $F=3.624$, 0.08 respectively. Highest mean score 44.31 is observed among private organization employees, followed by those people who are running their private organizations which is 43.12. The lowest mean score 19 is observed among beggars, followed by those working petty trade which is 29. The highest mean score 41.6250 is also observed among those who work by choice than by necessity which is 33.02.

This finding regarding work roles is opposite from what is mentioned in other researches. For instance a research conducted by ESAW stated that work role has a positive correlation with self-esteem and old people who work have the highest Self-esteem than

those who are not working (ESAW, 2006). The finding of the study contradicts with other studies may be because in our society the majority of old people do not work for the sake of being active or to have a substitute roles for the lost roles, rather it is a necessity to work for old adults since many do not have pension or any other social security funds or sources of income. The result also shows that those who work by choice have greater mean score which is 41.6250 than those who are working by necessity which is 33.02. Moreover, the highest mean score 40.12 is observed among those who are retired.

These findings are a reverse from the finding of other research conducted by Kossuth and Bengston who indicated that retirement is one source of role loss which makes the elderly give up meaningful roles and challenges the idea they have about themselves and reduce their Self-esteem. (Kossuth and Bengston, 1998)

Though there was no statistically significant difference on the self-esteem with regards to being engaged in the work roles, it was found statistically significant difference in terms of the level of engagement on the work roles. Level of engagement was measured in light of working hours and days. Regarding working hours, those who work full days and half a day has the highest mean scores of 38.42 and 34.31 respectively and those who work day and night have the lowest which is 13. Furthermore with regard to working days those participants who have reported that they work on working days have the mean score of 38.42 and those working three days a week have 38.31 and those working daily or all days have the lowest mean score of 26. This significant difference in terms of level

of engagement in work while engagement in work role doesn't have significant difference is brought by may be because the type of job which has a significant difference determines the level of engagement. Those who are private employees and owner of private organization reported that they work full days in a working days where as those who reported that they work daily and day and night are those who work petty trade and begging who have the least mean self-esteem scores.

5.2.2 Social cultural roles

Participation in social cultural roles is examined in terms of the involvement of the participants in roles that are traditionally and culturally given to the elderly in a society. About 54.6 %(124) of the participants have reported that they have participation in social cultural roles. Out of these respondents 70 have reported that they have participation in two or more of the social cultural roles. Among those who have participation in social cultural roles, 28 reported that they are involved in arbitration and conflict resolution, 6 reported that they participate only as Iddir leader, 6 iddir and Iqub leader, 6 as traditional healer 25 as arbitrator and other social cultural roles and 21 Iddir and other social cultural roles. Statistically significant difference is observed on the Self-esteem with regards to participation in social cultural roles.

There is significant difference at .05 level of significance among the participants who have reported that they are involved in different types of social cultural role. The mean score of the participants engaged in social cultural role is 54.6 which is higher than those who are not engaged which is 45. Greater mean score 56 is observed among the participants who have multiple social cultural roles (iddir, arbitration, and others) followed by those who have reported that they are engaged in Iddir, Iqub, and others which is 49. The lowest mean score is 32 and 34 which is observed among those participants who have reported that they are engaged in single roles such as Iqub leader and traditional healer respectively.

The partial correlation also indicates that, among the type of roles, social cultural roles have the strongest positive correlation with self-esteem.

It is stated by other researchers that in Africa and other traditional societies, the elderly are given traditionally different roles as arbitrators, conflict resolution, traditional medicine practitioners, custodians of the family, children socializers and these roles give the elderly high status, prestige, and opportunities(HAI, 2001). Modernization theory also indicates that in traditional society different roles and responsibilities are given to old people which intern increases their status and prestige. The theory also stated that because of these roles they are given, the elderly are respected and their words and verdicts are listened by the young generation (Quadagno, 1999).

Hence, participation in social cultural roles helps to build Self-esteem of the elderly since it brings respect and prestige from the society. This is also stated by ESAW that having

the skills to influence others, being respected and approved by others are associated with high Self-esteem (ESAW, 2006).

5.2.3 Family roles and Self-esteem.

In the study, 85% of the respondents have reported that they are involved in different activities in the family. Out of the total participants who have reported that they are involved in familial roles, 61 reported two or more of family roles, 55 reported that they are involved in household management, 14 in only household duties, 14 reported that they are involved in raising children and grand children and 16 involved in caring for sick family members and others etc. The same is also mentioned by HAI that presently, the elderly are involved in various roles in their family ranging from raising children and grandchildren to treating sick family members (HAI, 2001).

Statistically significant difference is also observed in the self esteem with regards to participation in family roles and type of family roles that is ($F=6.51$, $P=.000$) and ($F=3.06$, $P=.005$) respectively. Hence this implies that what matters is whether one is involved in family roles or not rather than the type of family roles. On the other hand a study conducted by ESAW pointed out that having children has a strong correlation with the Self-esteem. It is also mentioned that adults living with their spouse, children or others have the highest Self-esteem than those who live alone (ESAW, 2006).

Religious involvement

In the study, religious involvement was studied as one of the activities in which the elderly are involved and which can affect their self-esteem other than the different roles mentioned. Accordingly the religious score was found to correlate significantly with the self-esteem. This was also mentioned, by Quadagno (1999) that religious involvement increases during old age and it helps the elderly have life satisfaction, provides meaning in life and strengthens psychological well being such as Self-esteem.

5.3 Type of roles and self-esteem

From the total number of cases, (183)78.3% have reported that they are involved in one or more type of roles and (44)19.7% do not have any involvement in the roles. As illustrated above, in the study, three types of roles are found which are reported by the participants. Four groups are found with regards to the involvement in the type of role. Some respondents have reported that they are involved in a single type of role like work role and others reported that they are involved in family and social cultural roles, work and family and others the rest reported that they have involvement in all the three types of roles. Statistically significant difference is observed with regards to the type of roles the participants are involved.

The highest mean score (40.27) is observed among those participants who are engaged in all the three types of roles followed by 39.94 who are involved in both family and social

cultural roles and those who are involved in family roles^{34.27}. On the other hand the lowest mean scores 23.226 and 26.59 are observed among those participants who have reported that they are involved in work role only and those who have no roles respectively.

Those who are involved in work role only have the lowest mean score because the majority of the respondents who have reported that they are involved in only work role are those who work the type of jobs such as daily labor, petty trade and begging which are degraded in a society. Hence engagement in a degraded job is not different from having no roles.

This finding is also hypothesized by the activity theory. Activity theorists also mentioned that people construct ideas about themselves from the activities they do and roles they fill in life. Hence being involved in one or more roles during old age or remaining active helps for positive sense of self. In addition to these role losses or disengagement during later life deprives a person of social participation, identity and a sense of Self-esteem (Roadrurg, 1985).

5.4. Number of roles and Self-esteem

According to the analysis conducted in chapter four, numbers of roles have a significant difference on the Self-esteem of the elderly. Those participants who have three roles have the highest Self-esteem score followed by those having two roles. Another research conducted by Reitzes and Murta in 1994 stated that having multiple roles doesn't

directly affect the self-esteem if other variables are controlled. In this study, statistically significant difference is observed on the Self-esteem with regards to the number of roles and respondents who are involved in two and three types of roles have high Self-esteem score. However, the result of partial correlation indicates that, the number of roles doesn't have a significant correlation with the self-esteem.

The significant difference on the self-esteem with regards to number of roles is brought about by the significant differences in the highest mean scores reported by those engaged in all the three roles and those who are engaged in both family and social cultural roles and the lowest mean scores reported by those engaged only in work roles and those who have no roles. Furthermore, a significant difference is also showed between those participants who are engaged in work roles only and those engaged in work and family or social cultural roles.

Conclusion

According to the findings of the study, following conclusions are forwarded.

- In Ethiopia, other than the previous social cultural roles of the elderly, old people are involved in work and family roles such as taking care of the sick, household management, raising and providing economic support for their children and grandchildren.
- Whether one is participating in a work role or not participating, hardly affects the Self-esteem. What matters is the type of work and whether the individual is working by choice or by necessity and level of engagement.
- Participation in a family role has direct effect on the self-esteem. Furthermore, family role is the second role which has a direct relation to the Self-esteem.
- Those who are participating in social cultural roles have the highest Self-esteem score than those who are not participating. There is also significant difference in the self-esteem score with regards to the type of social cultural roles. Moreover, it is also found out that social-cultural roles contribute more to the Self-esteem as compared with other types of roles.

- There is also a difference in the Self-esteem with regards to the type of roles an individual is engaged in. Having multiple type of roles (being engaged in work-social cultural- family roles) and in both family and social cultural roles helps to have good Self-esteem.

Recommendation

Based on the above conclusion, the following are recommended.

- Elderly should engage in work activities that are appropriate to their age and health. They should also be encouraged to work by their choice.
- Being engaged in family roles helps old people. Thus they should be encouraged to participate in different activities such as household management, socializing grand children, etc.
- The social cultural roles that are traditionally given to the elderly are very important to the Self-esteem. Hence the elderly should be given the opportunity to participate in these roles. These roles should be recognized and continued to be given to the elderly in the communities.
- In general old people should be encouraged to have multiple roles as much as possible.
- A further research should be conducted on the roles and activities of the elderly and their psychological well beings in Ethiopia. Issues regarding the factors that determine the engagement of the elderly should also be studied.

Reference

- Abera G/Sellase. (1985). Family and the Elderly in Ethiopia. Unpublished manuscripts.
- Cast. A. D. and Burke. P. J (2002). A Theory of Self-esteem. Social Forces. 80, No3. pp. 1041-1068
- Cavanaugh. J. C. (1990). Adult Development and Aging. USA, Wadsworth Inc.
- Central Statistics Agency (1995). The 1994 Population and Housing Census of Ethiopia. Statistical Report, Vol 1.
- Cox. H. G. (1988). Later Life: The Realities of Aging. 2nd Edition. New Jersey, Prentice Hall Inc.
- Demo. D. H. 1992. The self Concept Overtime: Research issues and Directions. Annual review of Sociology, 18, 303-326
- Gecas. V. (1982). The Self-Concept. Annual Review of Sociology. Annual Review of Sociology, 8, 1-33
- European Studies on Adult Well Being. 2006. Self Resources Report. [On line] <http://www.radford.edu>

Gecas. V. (1982). The self concept overtime. Annual review of Social Psychology 8, 1-33

Gorman M. (1999). The Age and Security: How social pensions can deliver Effective Aid to the Poor. Help Age International. UK, Earth Scan Publication.

Help Age International. (2004, February 17). The Aging and Development. Help age International London, UK.

Help Age International. (2001). Socioeconomic Impact of HIV/AIDS on Knowledge, Attitude and Practice of HIV/AIDS/STDs among Older Persons in Addis Ababa. Unpublished Manuscript.

Jester. T (2001). Preparing for an Aging World: The case of Cross National Research. [On line] Available at <http://www.nap.edu>. National Academy Press.

Kossuth, P M and Bengtson, V. (1988). Sociological Theories of Aging: Current Perspectives and Future Directions. [On line] Available at <http://www.nap.edu>

Moody. H. R. (1998). Aging: Concepts and Controversies. 2nd Edition. California, Pine Forge Press.

- Organization of African Unity. (1982) Aging persons in Africa. Proceeding of the Regional and Intergovernmental Meeting on Aging in Africa. Addis Ababa.
- Papalia. E and Olds. S W. (1992). Human Development. 5TH Editions. New Delhi, Tata McGraw Hill Publishing Company.
- Quadagno. J. (1999). Aging and the Life Course. USA, McGraw Hill Companies Inc.
- Ranzin.R; Keeves. J, Luszcz. M, Feather. N.T. The Role of the Self Perceived Usefulness and Competence in the Self-esteem of Elderly Adults. [Electronic Version].
- Reitzes. D. C and Mutran E .J. (1994.) Multiple roles and Identities: Factors influencing Self-esteem among Middle-Aged Working Men and Women. Social Psychology Quarterly, 57, No.4. 313-325.
- Robins. R. W. and Trzesniewski, K. H. (2006) Self-esteem Development across the Life Span. Current Directions in Psychology. [On line serial] rwrobins@ucdavis.edu
- Roberts, Michael K and Davidson, James D. (1984). The Nature and Sources of Religious Involvement. Review of Religious research, 25, No. 4, pp. 334-350
- Robinson, John P and Shaver, Phillip R. (1973). Measures of Social Psychological Attitudes. Institute of Social research. The University of Michigan, Ann Arbor, Michigan.

Roadburg Alan. (1985). Aging; Retirement, Leisure and Work in Canada. Toronto, Morhuen Publication.

Rosenberg. M; Schooler. C; Schoenbach C; Rosenberg F. (1995). Global Self-esteem and Specific Self-esteem; Different Concepts, Different Outcomes. Social Forces, 68. No.1, 34-44

Schwartz. C. L. and Johnson. L C. (1997). Social Welfare: A Response to Human Needs. 4TH Edition. Boston, Allyn and Bacon.

Wainwright, Colleen. (2000). Old Persons and Poverty in Ethiopia. Unpublished Manuscripts

Zinn. M. B and Eitzen. S. D. (1989). Social Problems. 4th Edition. Boston, Allyn and Bacon Inc.

APPENDIX

መጠይቅ

ይህ መጠይቅ የተዘጋጀው አረጋውያን በባህላዊና ማህበራዊ፣ በስራ፣ በቤተሰብ እና በሃይማኖት ውስጥ ያላቸው ተሳትፎ በስነልቦና ደህንነት ላይ ያለውን አስተዋፅኦ በተመለከተ ጥናት ለማድረግ የተዘጋጀ ነው። ስለዚህም የእርስዎ ትክክለኛ ምላሽ ከፍተኛ አስተዋፅኦ ስለሚያደርግ ትክክለኛውን ምላሽ በመስጠት እንዲተባበሩ በትህትና እጠይቃለሁ። መጠይቁን በትክክል በመሙላት ለሚያደርጉልኝ ትብብር በቅድሚያ አመሰግናለሁ።

አጠቃላይ መረጃ

1. እድሜ

55-60----- 65-70-----
 60-65----- 70-75-----
 75-80----- 80 አና በላይ-----

2. ፆታ

ወንድ----- ሴት-----

3. አድራሻ

ቀበሌ----- የቤት ቁጥር-----
 ክፍለ ከተማ-----

4. መደበኛ ትምህርት ምን ያህል ተከታትለዋል?

- አልተከታተልኩም
- መሰረተ ትምህርት
- አንደኛ ደረጃ ትምህርት
- ሁለተኛ ደረጃ ትምህርት
- ኮሌጅ
- ዩኒቨርሲቲ

5. የተማሩት/ የሰለጠኑት ሙያ ምንድን ነው?

6. ከጠረታ በፊት የሚሰሩት ስራ ምን ነበር?

7. የወር ገቢዎ ምን ህል ነው?(በብር ያስቀምጡ)

ከ50 በታች ከ300-500
 ከ50-150 ከ500-750 ከ1000-2000
 ከ150-300 ከ750-1000 ከ2000 በላይ

የስራ ተሳትፎን በተመለከተ

1. ጠረጠር ነዎት?

ሀ. አዎ----- ለ. አይደለም-----

1.1 ጠረጠር ከሆኑ በጠረጠር ከተገለጹ ምን ያህል ጊዜ ሆነዎት?

2. በአሁኑ ጊዜ ገቢ የሚያገኙበት ስራ ላይ ተሰማርተዋል?

ሀ. አዎ----- ለ. አልሰራም-----

2.1 የሚሰሩ ከሆነ የሚሰሩት ምንድን ነው?

2.1.1 ከዚህ በታች ከተገለጹት ውስጥ እርስዎ የሚሰሩት ስራ የቱ ነው?

1. የግል ድርጅት ውስጥ ተቀጣሪ
2. የራሱን ድርጅት ማካሄድ
3. አነስተኛ ንግድ
4. ሽቀጣሽቀጦችን መንገድ ላይ መሸጥ/ሱቅ በደረተ/ጉልት ንግድ

2.2 የሚሰሩት ለምንድን ነው?

2.2.1 ከዚህ በታች ከተዘረዘሩት ውስጥ እርስዎ ከላይ ከገለጹት ውጪ የሚሰሩበትን /ምክንያት የሚገልፅ ሀሳብ አለ? (ከአንድ በላይ መምረጥ ይችላሉ)

1. ጠረጠሩ አነስተኛ ስለሆነ ገቢዬን ለመደጎም
2. ከመቀመጥ መስራት ደስታን ስለሚሰጥ
3. ጊዜዬን ለማሳለፍ
4. መተዳደሪያዬ ስለሆነ

3 በሳምንት ምን ያህል ጊዜ ይሰራሉ?

- | | |
|---------------------|-----------------|
| 1. በሳምንት አንድ/ሁለት ቀን | 2. በሳምንት ሶስት ቀን |
| 3. በስራ ቀናት | 4. ሁልጊዜ |

4. የሚሰሩት በምን ሰአት ነው?

- | | |
|------------------|-------|
| 1. ግማሽ ቀን | 2. ማታ |
| 3. ሙሉ-ቀን/በስራ ሰአት | |

የማህበራዊና ባህላዊ ሚናን ላይ ያለ ተሳትፎን በተመለከተ::

1. በማህበረሰቡ ውስጥ ምን አይነት ተሳትፎ ያደርጋሉ?

1.1 ከዚህ በታች ከተዘረዘሩት ተግባራት ውስጥ እርስዎ በየትኞቹ ላይ ማህበራዊ ተሳትፎ ያደርጋሉ? (ከአንድ በላይ መምረጥ ይችላሉ)

1. የእድር ሰብሳቢ/ዳኛ/ፀሀፊ/ገንዘብ ያዥ/ሃላፊነት ገለግላለሁ
2. በእቁብ ውስጥ ሰብሳቢ/ዳኛ/ገንዘብ ያዥ ሀላፊነቶች አገለግላለሁ
3. በአዋጅነት/ወጪነት/ሌላ የባህል ህክምና በመስጠት አገለግላለሁ
4. ግጭቶች ሲፈጠሩ (በትዳር/በጉርብትና/በግለሰቦች መካከል ማስታረቅ/መዳኘት

5. የቤተዘመድ ጉባኤ በሚያስፈልግበት ሁኔታ አባል በመሆን ተሳትፎ አደርጋለሁ
6. ለጋብቻ አማላጅነት መላክ
7. ምንም ተሳትፎ የለኝም
8. ሌላ ካለ ይግለፁ

ሀይማኖታዊ ተሳትፎን በተመለከተ

1. ሀይማኖትዎ ምንድን ነው?
 1. ሙስሊም
 2. ክርስቲያን
 3. ሌላ-----
2. የእምነት ቦታ ምን ያህል ይሄዳሉ?
 1. አልፎ አልፎ/በበአላት
 2. አንዳንዴ
 3. በሳምንት አንድ ጊዜ
 4. አልሄድም
3. ምን ያህል የሰንበት/የጁማ አምልኮ ስርአቶችን ባለፈው ወር ተከታትለዋል?
 1. ምንም/አንዴ
 2. ሁለት ጊዜ
 3. ሶስት/ከዛባላይ
4. ቁራን/መፅሀፍ ቅዱስ በግልጽ/በቤት ይቀራሉ/ያነባሉ?
 1. አልፎ አልፎ/በበአላት
 2. አንዳንዴ
 3. በየጊዜው/በየቀኑ
5. የእምነት ቦታ መሔድ ወይም ሀይማኖትዎ በሰራዎም ሆነ በቤተሰብ ጉዳዮች ላይ ለሚደርጉት ማንኛውም አይነት ውሳኔ ምን ያህል ረድቶታል?
 - ሀ. ትንሽ ረድቶኛል
 - ለ. ረድቶኛል
 - ሐ. በጣም ረድቶኛል
6. የእምነት ቦታ መሄድ ወይም ሀይማኖትዎ የህይወትን ትርጉምና አላማ ለማወቅ ምን ያህል ረድቶኛል ይላሉ?
 - ሀ. በጭራሽ ጠቃሚ አይደለም
 - ለ. የተወሰነ ያህል ረድቶኛል
 - ሐ. በጣም ረድቶኛል/ጠቅሞኛል
7. የአንድ እምነት ተከታይ መሆን ለእርስዎ ምን ያህል አስፈላጊ ነው?
 1. በጣም ያስፈልጋል
 - ለ. ያስፈልጋል
 - ሐ. አያስፈልግም
8. በእምነት ቦታዎች ከሚደሩ የሀይማኖታዊ አምልኮ ስርአቶች ውጪ ምን አይነት ሀይማኖታዊ እንቅስቃሴዎች ላይ ይሳተፋሉ?

ቤተሰባዊ ተሳትፎን በተመለከተ

1. በአሁኑ ጊዜ የሚኖሩት ከማን ጋር ነው?
 1. ከባለቤተ ጋር
 2. ከልጆቼ እና ከባለቤተ
 3. ከልጆቼ ጋር
 4. ሌላ-----
2. ልጆች አለዎት?
 - ሀ. አዎ
 - ለ. የለኝም
3. በቤት ውስጥ በምን ስራ ላይ ይሳተፋሉ?

3.1 በቤተሰብዎ ውስጥ ከታች ከተዘረዘሩት ተግባራት ውስጥ በየትኞቹ ላይ ይሳተፋሉ?

1. የልጅ ልጅ በማሳደግ
2. የቤት ውስጥ ስራ
3. ቤተሰብ ማስተዳደር
4. ልጆች ማሳደግ
5. ወላጅ አልባ ህፃናት ማሳደግ

6. ታማሚ የቤተሰብ አባል ማስታዎም
7. ሌላ ካለዎት ይግለፁ

4. ከልጆችዎ መካከል በእርስዎ ስር የሚተዳደሩ/ራሳቸውን ያልቻሉ አሉ?
1. አሉ 2. የሉም
5. ቤተሰብዎ ውስጥ ተሳትፎ በማድረግዎ ምን ተጠቀሙ?
1. በቤተሰቡ ውስጥ በሚገባ ሀላፊነትን እንደወጣ አድርጎኛል
2. ፍቀርና ሰላም የተሞላበት ቤተሰብ አፍርቻለሁ
3. ልጆቼን በጥሩ ስነምግባር አሳድጌያለሁ
4. ልጆቼ ጥሩ ደረጃ ላይ ደርሰዎልኩ
5. በቤተሰቡ ውስጥ የእኔ አስተዋፅኦ ምንም የለም
6. ሌላ ካለዎት ይግለፁ-----

ስለራስዎት ያለዎትን ግምት በተመለከተ የተዘጋጁ ጥያቄዎች

1. ስኬታማ ነኝ ብለው ያስባሉ?
1. በፍፁም 2. አልፎ አልፎ 3. አንዳንዴ 4. ብዙ ጊዜ 5. በጣም ብዙ ጊዜ
2. ብዙ ጥሩ ጎኖች አሉኝ ብለው ያስባሉ?
1. በፍፁም 2. አልፎ አልፎ 3. አንዳንዴ 4. ብዙ ጊዜ 5. በጣም ብዙ ጊዜ
3. በሰዎች ዘንድ የእርስዎ ሃሳብ ምን ያህል ተቀባይነት ያገኛል?
1. በፍፁም 2. አልፎ አልፎ 3. አንዳንዴ 4. ብዙ ጊዜ 5. በጣም ብዙ ጊዜ
4. ሰዎች ምን ያህል በእርስዎ ላይ እምነት ይጥላሉ/ይተማመናሉ?
1. በፍፁም 2. አልፎ አልፎ 3. አንዳንዴ 4. ብዙ ጊዜ 5. በጣም ብዙ ጊዜ
5. ሌሎች ሰዎች የሚሰሩትን ነገር ሁሉ እኔም መስራት አያቅተኝም::
1. በፍፁም 2. አልፎ አልፎ 3. አንዳንዴ 4. ብዙ ጊዜ 5. በጣም ብዙ ጊዜ
6. ሌላ ሰው በሆንኩ ብዬ አስባለሁ::
1. በፍፁም 2. አልፎ አልፎ 3. አንዳንዴ 4. ብዙ ጊዜ 5. በጣም ብዙ ጊዜ
7. ብቸል ስለራሴ ብዙ ነገሮችን መለወጥ አፈልጋለሁ::
1. በፍፁም 2. አልፎ አልፎ 3. አንዳንዴ 4. ብዙ ጊዜ 5. በጣም ብዙ ጊዜ
8. ከአዳዲስ ነገሮች ጋር ለመላመድ ብዙ ጊዜ ይወስድብኛል::
1. በፍፁም 2. አልፎ አልፎ 3. አንዳንዴ 4. ብዙ ጊዜ 5. በጣም ብዙ ጊዜ
9. ዋጋ የለኝም የሚል ስሜት ይሰማኛል::
1. በፍፁም 2. አልፎ አልፎ 3. አንዳንዴ 4. ብዙ ጊዜ 5. በጣም ብዙ ጊዜ
10. ቶሎ እበሳጫለሁ::
1. በፍፁም 2. አልፎ አልፎ 3. አንዳንዴ 4. ብዙ ጊዜ 5. በጣም ብዙ ጊዜ
11. ለራሴ የበለጠ ክብር ቢኖረኝ ደስ ይለኛል::
1. በፍፁም 2. አልፎ አልፎ 3. አንዳንዴ 4. ብዙ ጊዜ 5. በጣም ብዙ ጊዜ
12. ቤተሰቦቼ እንደሚያገሉኝ/እንደማይፈልጉኝ ይሰማኛል::
1. በፍፁም 2. አልፎ አልፎ 3. አንዳንዴ 4. ብዙ ጊዜ 5. በጣም ብዙ ጊዜ
13. ለምሳሌው ስራ ተነሳሽነት የለኝም/እሳነፋለሁ::
1. በፍፁም 2. አልፎ አልፎ 3. አንዳንዴ 4. ብዙ ጊዜ 5. በጣም ብዙ ጊዜ
14. በሰዎች ፊት ንግግር ማድረግ ይከብደኛል::
1. በፍፁም 2. አልፎ አልፎ 3. አንዳንዴ 4. ብዙ ጊዜ 5. በጣም ብዙ ጊዜ
15. ከእኔ ልቅ ሌሎች ሰዎች ተወዳጆች ናቸው ብዬ አስባለሁ
1. በፍፁም 2. አልፎ አልፎ 3. አንዳንዴ 4. ብዙ ጊዜ 5. በጣም ብዙ ጊዜ
16. ካለሰው እርዳታ በራሴ ነገሮችን ማድረግ እችላለሁ::
1. በፍፁም 2. አልፎ አልፎ 3. አንዳንዴ 4. ብዙ ጊዜ 5. በጣም ብዙ ጊዜ

17. ምንም ሳላወላውል ውሳኔ መወሰን እችላለሁ።

1. በፍፁም 2. አልፎ አልፎ 3. አንዳንድ 4. ብዙ ጊዜ 5. በጣም ብዙ ጊዜ

18. ደስተኛ እንደሆንኩ ይሰማኛል።

1. በፍፁም 2. አልፎ አልፎ 3. አንዳንድ 4. ብዙ ጊዜ 5. በጣም ብዙ ጊዜ

19. የምናገረው ነገር ሲኖረኝ እናገራለሁ/ከመናገር ወደሁዋላ አልልም።

1. በፍፁም 2. አልፎ አልፎ 3. አንዳንድ 4. ብዙ ጊዜ 5. በጣም ብዙ ጊዜ

20. ከእኔ ጋር መሆን ሰዎችን ያዝናናል።

1. በፍፁም 2. አልፎ አልፎ 3. አንዳንድ 4. ብዙ ጊዜ 5. በጣም ብዙ ጊዜ

ስለትብብርዎ አመሰግናለሁ!

QUESTIONNAIRE

This questionnaire is prepared to assess the self-esteem of the elderly who are engaged in different type of roles and activities. Your participation and valid answers have great contribution to the study. Hence I would like to thank you for your cooperation in providing the information in advance.

Background information

1. Age

55-60 _____ 71-75 _____
61-65 _____ 76-80 _____
66-70 _____ 80+ _____

2. Sex

Male _____ Female _____

3. Living Address

Kebele _____ House No. _____
Subcity _____

4. What is your Educational level?

- Never been to school _____
- Read and write _____
- Primary level _____
- Secondary level _____
- College Diploma _____
- University degree _____

5. If you are willing, how much is your monthly income?

Below 50 birr _____ 300-500 _____ 1000-2000 _____
51-150 _____ 501-750 _____ 2001-3000 _____
151-300 _____ 751-1000 _____ 3000+ _____

Engagement in a work role

1. Are you a retiree?

Yes _____ No _____

1.1 If you are retired, how long has it been since you are retired?

2. Are you working?

Yes _____ No _____

2.1 If you are working, what is do you work?

2.1.1 Which one of the listed below are you working?

- Employee of private organization
- Running my own company
- Small scale business
- Petty trade
- Labor

Others _____

2.2 Why are you working?

2.2.1 Among those listed below, other than you have mentioned above, indicate why you are working?

- To add on my income because my pension not enough.
- Working gives me pleasure
- To spend my leisure
- It is my only source of income

2.3 For how many days do you work in a week?

- Once/twice a week
- Three days a week
- Week days
- Daily

2.4 At what time do you work?

- Half a day
- At night
- Full day

Participation in Social Cultural Role

1. What kind of participation do you have in your community?

1.1 In which of the listed tasks below are you participating?

- Iddir leader/cashier/secretary/etc responsibilities
- In Iqub as cashier/leader/etc responsibilities
- Traditional practionner/birth attendant
- Arbitrator/when conflict between neigh ours, marriage partners, individuals arise
- Participate in family association
- Sent as an Elder to ask the bride parents for marriage
- Other _____

Engagement in Family Roles

1. With whom do you live presently?

1. With spouse 3. With my spouse and children
2. With my children 4. Others _____

2. Do you have children?

Yes _____ No _____

3. How do you participate in your family?

Among those listed below, in which one of the tasks do you participate in your family?

- Raising grand children
- Household duties
- Household management
- Raising children
- Raising orphans
- Treating sick family members
- Others _____

4. Among your children, are there dependents who are under your guidance?

Yes _____ No _____

Religious Involvement

1. What is your religion?
Muslim _____ Christian _____ Others _____
2. How often do you go to a religious place?
 1. Seldom/on holydays
 2. Sometimes
 3. Once in a week
 4. Never
3. Do you read Bible/ QurAn at home in private?
 1. Seldom/on holydays
 2. Sometimes
 3. Once in a week
 4. Never
4. How many Sunday/Juma worship programs have you attended last month?
 1. None/ once
 2. Twice
 3. Three times or more
5. How much help has your religion or participation in religion been to you in making the right decisions in your work or family?
 1. It has no help
 2. Has some help
 3. Ha much help
6. How important would you say membership in a certain religion is to you?
 1. Not important
 2. Quite or fairly important
 3. Extremely important
7. To what extent has your religion helped you find the answers to the meaning and purpose of life?
 1. Not helpful
 2. Helpful somewhat
 3. Most helpful

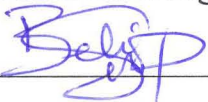
Self- Esteem

1. Do you think you are successful?
 1. Never
 2. Sometimes
 3. Often
 4. Very often
2. I think that I have many positive sides.
 1. Never
 2. Sometimes
 3. Often
 4. Very ofte
3. How often does your idea get acceptance from the people?
 1. Never
 2. Sometimes
 3. Often
 4. Very often
4. How much can people depend on you (trust you)?
 1. Never
 2. Sometimes
 3. Often
 4. Very often
5. I feel that I can do things that other people can do?
 1. Never
 2. Sometimes
 3. Often
 4. Very often
6. I wish I were someone else.
 1. Never
 2. Sometimes
 3. Often
 4. Very often
7. There are lots of things about myself I would chance if I could
 1. Never
 2. Sometimes
 3. Often
 4. Very often
8. It takes me long time to get used to anything new
 1. Never
 2. Sometimes
 3. Often
 4. Very often
- 9 I feel that I am worthless
 1. Never
 2. Sometimes
 3. Often
 4. Very often

10. I get upset easily
1. Never 2. Sometimes 3. Often 4. Very often
11. I wish I have more respect from others
1. Never 2. Sometimes 3. Often 4. Very often
12. I feel as if my families are pushing me
1. Never 2. Sometimes 3. Often 4. Very often
13. I get discouraged at what I am doing
1. Never 2. Sometimes 3. Often 4. Very often
14. It is very hard for me to talk in front of people
1. Never 2. Sometimes 3. Often 4. Very often
15. I think most people are better liked than me.
1. Never 2. Sometimes 3. Often 4. Very often
16. I can do things by myself without the help of others.
1. Never 2. Sometimes 3. Often 4. Very often
17. I can make decisions without consulting others
1. Never 2. Sometimes 3. Often 4. Very often
18. I feel that I am happy
1. Never 2. Sometimes 3. Often 4. Very often
19. If I have something to say, I usually say it
1. Never 2. Sometimes 3. Often 4. Very often
20. Being with me makes people happy
1. Never 2. Sometimes 3. Often 4. Very often

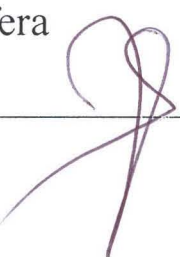
I hereby declare that this is my original work and it has not been presented for other degrees in any other universities. The source of materials that are used in the thesis are all acknowledged

Name Belaynesh Semunegus

Signature  _____

This thesis has been submitted with my approval as a university advisor

Name Dr. Belay Tefera

Signature  _____