Exploring Socio Economic Problems of Orphans and Vulnerable Children

In Jimma zone Limu Kossa Wereda Limu Genet Gudetu Town.

By

Kumneger Geremew Bekele

Main advisor:

Tadesse Gobosho (PhD)

Co - advisor:

Asayeberhan Kastro (MSW)

Jimma University College of Social Sciences and Humanities

School of Social Work

A Thesis Submitted to School of Social Work in Partial Fulfillment of the Requirements of

Masters in Social Work (MSW)

July 1 2021

Declaration

  I, the undersigned, declare that this thesis entitled **"**Socio Economic Problems of Orphans and Vulnerable Children in Jimma zone Limu Kossa Wereda Limu Genet Gudetu Town" is my original work and has not been presented for a degree in any other University, and that all sources of materials used for the study have been duly acknowledged.

Declared By:

Name: _____Signature:_____Date_____

Approved By:

Examiner:

Name: _____Signature:_____Date_____

Advisor:

Name: _____Signature:_____Date_____

Co-Advisor:

Name: _____Signature:_____Date_____

Abstract

The general objective of the research is to investigate the Socio-Economic Problems of OVCs. The participants of the study were OVCs, Caregivers or families of the OVCs, NGOs, GOs, CBOs and the community members. Qualitative research approach is applied and purposive sampling technique is applied to the study. Exploratory case study is the design to explore the socio-economic problems of the children. The collected data was analyzed using thematic analysis and results and discussions have been made broadly. The study found out that the OVCs are highly vulnerable to social, economic, legal, psychological, physical, and other types of vulnerability than other children. Bullying, stigmatization and neglect are some examples of social problems while inability to meet their basic needs is the economic problem leading them to vulnerability. The study found that there are organizations working on the lives of the OVCs (GOs, NGOs, CBOs FBO) but the service is highly scarce comparing to the actual need. Finally, a recommendation to Government organizations need to implement child policy NGOs Particular attention needs to be paid to the OVCs, CBOs should take an active part in programs that are changing the lives of OVCs and the community should continuously help and empower OVCs.

Key words: Children, Orphans, Socio - Economic Problems Vulnerability.

Acronyms

ACRWC   African Charter on Rights and Welfare of Child

AIDS   Acquired Immune Deficiency Disease

CBO   Community-Based Organizations

CRC   Charter on the Rights of the Child

EECMY   Ethiopian Evangelical Church Mekane Yesus

EU   Europeans Union

FBO   Faith-Based Organizations

FDRE   Federal Democratic Republic of Ethiopia

FGD   Focus Group Discussions

HIV   Human Immune Virus

INGO   International Non-Governmental Organization

MDG   Millennium Development Goal

MOH   Ministry Of Health

MOWCYA Ministry of Women Children's and Youth Affairs

NGO   Non-Governmental Organizations

OVC   Orphan and Vulnerable Children

PSSSA   Public Servants' Social Security Agency

RAAAP   Rapid Country Assessment, Analysis, and Action Planning

SDG   Sustainable Development Goals

UN   United Nations

UNCHR   United Nations High Commissioner for Refugees

UNAIDS   Joint United Nation Program on HIV/AIDS

USAID   United States Agency for International Development

UNICEF   United Nations International Children's Emergency Fund

TABLE OF CONTENTS

Contents   **Page**

CHAPTER ONE

1. INTRODUCTION

1.1. Backgrounds of the Study

Orphaned children are one of the most disadvantaged groups, living in the community with various problems. Orphan problems are universal in nature and the magnitude of problem varies from one geographical location to another. The common problems faced by orphans worldwide are at higher risk of severe malnutrition, high mortality rates, lower levels of school attendance, and increased likelihood of child labor (both paid and unpaid). These children are also more likely to be subjected to abuse, neglect, and exploitation, not to mention the grief of losing their parents (Bimal, 2014).

Orphans are classified as 'famine orphans,' 'war orphans,' 'malaria orphans,' and 'social orphans,' i.e. children who have been abandoned mainly due to poverty. Ethiopia household is caring for an orphan outside the family. Though traditional Ethiopian kinship systems provide support for orphans, the third- world conditions have devastated this cultural safety network increasing the need for orphanage care. (Bimal, 2014).

Maternal orphans are children under age 18 whose mothers, and perhaps fathers, have died (includes double orphans). Paternal orphans are children under age 18 whose fathers, and perhaps mothers, have died (includes double orphans). Double orphans are children under age 18 whose mothers and fathers have both died. (UNICEF, 2020).

As defined in Article 1 of the Convention on the Rights of the Child (CRC), child means, *"Every human being below the age of 18 years unless, under the law applicable to the child, majority is attained earlier".* In terms of actions by UNHCR, the word "child" refers to all children falling under the competence of the Office, including asylum-seeking children, refugee

children, stateless children, internally displaced children and returnee children assisted and protected (UNHCR, 2018).

The number of children experiencing orphan hood is increasing at an alarming rate. Although specific data on the number of orphans are highly inconsistent, most of this increase is explained by HIV/AIDS-induced adult mortality. The impact of the HIV/AIDS epidemic in creating a burden of care of orphans for the family is well documented in a handful of culture-specific studies. However, large-scale orphan hood is not a new phenomenon (Abebe & Aase, 2018).

In Ethiopia, there are 5 million orphans defined as children under 18 years of age who have lost one or both parents of which 1.5 million (30%) are due to the HIV/AIDS epidemic (UNICEF, 2019). The remaining 70% of orphans are non-AIDS orphans, often classified as 'famine orphans,' 'war orphans,' 'malaria orphans,' and 'social orphans,' i.e. children who have been abandoned mainly due to poverty (Abebe & Aase, 2018).

Given the context of Ethiopia, all OVC, directly or indirectly are vulnerable to HIV and AIDS and other health, socioeconomic, psychological and legal problems. This vulnerability may be linked to extreme poverty, hunger, and armed conflict and child labor practices, among other threats. All of these issues fuel and are fuelled by HIV and AIDS (Standard Service Delivery Guidline, 2010)

Eradication of poverty in all forms and everywhere is at the forefront of the 2030 Sustainable Development Agenda, recognizing that poverty is not restricted only to financial means but includes multiple dimensions. The Sustainable Development Goals (SDGs) explicitly recognize that needs of children, women and men vary, hence the approach for alleviating poverty should be conducive with their needs (UNCHR, 2018).

Ethiopia made the first step towards this commitment by ratifying the 1989 United Nations Convention on the Rights of the Child (CRC), which stipulates that each child have the right to survival, development, participation, and protection (UN, 1989). The 1995 Constitution of the Federal Democratic Republic of Ethiopia (FDRE) contains several provisions granting children rights to survival and development, including in Article 36. In addition, in 2015 the Government of Ethiopia approved the 2030 Sustainable Development Agenda and incorporated it into the second Growth and Transformation Plan II (UNCHR, 2018).

1.2 Statement of the Problem

A study of orphanages in Ethiopia found that the most commonly noted reasons for children being placed in orphanages were parental HIV and AIDS status or other chronic illness and poverty. Chronic diseases such as AIDS and lack of adequate medical treatment are frequently correlated with poverty. The most frequent causes of separation of children from parental care include poverty, lack of access to basic services, abuse, neglect, disease, disabilities, and emergencies (Faith to action, 2014). Ethiopia is estimated to have 5,459,139 orphans of whom 855,720 are orphans due to HIV and AIDS (MoH 2007), one of the largest populations of OVC in Africa.

In response to the aforementioned situation, the government of Ethiopia has taken various measures to positively address the complex issues. The Federal Constitution has clearly articulated the rights of children in Article 36. Ethiopia has ratified both the UN Child Rights Convention (CRC) and the African Charter on Rights and Welfare of Child (ACRWC). The country has harmonized domestic laws and policies with the provisions of both conventions and which creates an enabling environment for improving the wellbeing of OVC. MOWCYA is the government ministry mandated to coordinate the issue of children including OVC. FHAPCO is

charged with leading and coordinating the overall multi-sectorial response to HIV and AIDS, including the issue of care and support for OVC (Standard Service Delivery Guidline, 2010)

A recent annotated bibliography reveals both the paucity and the little attention that research has paid to children who grow up in rural Ethiopia. The limited research that has been carried out, focused on children who are believed to have been suffering from particular social and economic disadvantages, has a clear urban bias. For example, there are relatively more studies on vulnerable young people who have fallen out of the traditional social safety nets as being poor, commercial sex workers and on those who are conspicuous in urban street environments. Those who have proved less accessible by being *within* families and in rural villages are, on the contrary, accordingly less visible in research (Abebe & Aase, 2018).

Abebe & Aase (2018) studied on the capacity and sustainability of the extended family system in Gedeo, which culturally performs the role of care for children in need, suggests two competing theories. The first is grounded in the social rupture thesis and assumes that the traditional system of orphan care is stretched by the impact of the epidemic, and is actually collapsing. By contrast, the second theory counter-suggests that the flexibility and strength of the informal childcare practice, if supported by appropriate interventions, can still support a large number of orphans. Methodologically, their approach is intended to map the contrasting and common features of orphan care within the extended family system. Their focus was the orphan care within extended family.

Tesfaye (2017) studied about Services for Vulnerable Children as a Means of Child Protection in Addis Ababa, Yeka Sub City, and Wereda-03. These studies focused on the type, cause, consequences of child vulnerability and preventive and protective programs in addressing child vulnerability i.e. child protection. Other research by Chernet (2001) searched the orphans

and vulnerable in Ethiopia as an Overview of Services for Orphans and Vulnerable Children in Ethiopia. The study focuses about the service provided and it is institutional. The recommendations were Efforts should be made to provide skill training and startup capital for the poor parents/guardians so that they will be economically capable to fulfill the basic and others needs of their children. Provision of technical and vocational training is also important for children who have become working age. Intervention programs should also give attention to the social and emotional needs of the children. It is important to promote local adoption for abandoned and orphan children with no relatives.

Further intervention program should also take into account the needs of the physically and mentally disabled children. It is important to create coordination among the government and non-government organization in order to avoid the duplication of resources and increase the coverage of the services for the OVC. Moreover, zonal wide representative survey has to be conducted to understand the situation of OVC in the zone to come up with findings that can be generalized.

Getachew (2014) studied thesis with the title of assessment of socioeconomic problems of orphan and vulnerable children: the case of Bocho bore kebele in Jimma town. The General objective is studying orphans and a vulnerable child is caused by HIV/AIDS. The method used is quantitative. The finding of the study indicated that HIV/AIDS is not a health problem alone rather it is a complex Social, economic, medical, political, and human rights problem. Considering this, the study takes a closer look at the challenges faced by AIDS orphans and what they need to compressive support. As a result, the study identified that AIDS orphans lack not even proper but the least basic needs, which are crucial for survival.

Points mentioned in the above paragraphs as the statements of the problems, the problem is existed in Ethiopia and in the specified place of my study. This research had investigated that the

socio-economic background and problems of orphans and vulnerable children's in Limu Genet Gudetu Town. The gap of the research from the other researchers is geographical gap and time gap from those researches that have been reviewed in the similar topics.

1.3 Objective of the Study

1.3.1. General Objective

The general objective of the research is, to investigate the Socio-Economic Problems of OVCs in Jimma zone Limmu Kosa wereda Limu Genet Gudetu Town.

1.3.2. Specific Objectives

The specific objective of the research is:

- To explore the social problems of OVC's are facing in the study area.

- To find out the economic problems of OVC's are encountered in the study area.

- To know the measures that has been taken by GOs, NGOs, CBOs and the community in the study area.

1.3.3 Research Questions

1. What are the social problems of OVC's in the study area?

2. What are the economic problems of OVC's in the study area?

3. How GOs, NGOs, CBOs and the community are dealing with the problems of OVC's in the study area?

1.4 Purpose and Significance of the Study

Limu Genet Gudetu Town is purposely selected as the intended study site due to a high prevalence of HIV infections and significant numbers of OVCs and other problems related to the life of the children. This study is intended to identify major social and economic problems faced by OVCs that have worsened their living conditions.

Insights gained from the study can contribute to suggestions for appropriate interventions using available local resources and other possible mechanisms to change the life of the orphans and vulnerable children.

The overall objective is to gain knowledge that can be used to improve the living conditions of OVCs; to support households and families to cope with the increasing burden of care for OVCs; to strengthen community-based support systems; and to build community-based systems for sustained care and support for OVCs.

The other significance of the study is the research lay ground for the future studies and researches. It will be also input for policy formulation and advocacy. Government will use the findings that have been obtained from this study to help formulate policies of orphans and vulnerable children.

1.5 Scope of the Study

The scope of this study was delimited to socio economic problems of OVCs the study was delimited to Limu Genet Gudetu Town. The town has two kebeles and the study focus on OVCs in those two kebele of the town.

1.6 Organization of the Study

The research had six chapters. In chapter one, the general introduction and background of the study, statement of the problem, the objectives, significance, scope of the research were presented chapter two is about the review of related literatures, meanings of terms and theoretical frameworks reviewed literatures to the research. Chapter three provides the methodology that had been apply to achieve the research objectives. This chapter contains research methods, study area and the people, research design, sampling techniques, methods of data collection, methods of data analysis. These are trustworthiness, unit of analysis, eligibility, data collection

Instrument, data collection procedure and ethical considerations. Chapter four is about presentation of research findings, analysis and interpretation. Chapter five contains results and discussions of the findings. Chapter six is about major research findings, conclusion and recommendations.

CHAPTER TWO

2. REVIEW OF RELATED LITERATURE

2.1 Vulnerability

Vulnerability is viewed as *"a high probability of a negative outcome"* (World Bank OVC Toolkit; 2018 p3-4), or an expected welfare loss above a socially accepted norm, which results from risky or uncertain events, and the lack of appropriate means to deal with them. Vulnerability leaves one at risk of exposure to stressful situations. The degree and type of vulnerability however, varies in each context and overtime. Vulnerability has been defined as the degree to which a system, or part of it, may react adversely during the occurrence of a hazardous event. This concept of vulnerability implies a measure of risk associated with the physical, social and economic aspects and implications resulting from the system's ability to cope with the resulting event (Virendra,2014).

Rayhan (2004) generaly the term vulnerability refers to "exposure contigencies and stress, and difficult in coping with them". "Vulnerability thus has two sides; an external side of risks , shocks , and stress to which an individual subject to; and an external side which is deffenceless , meaning a lack of means to cope without damaging loss. Loss can take many forms - becoming or being physical weaker , economically impoverished , socially dependant , humulated or psychologicallyharmed"

Rayhan (2004) Moser utileze a two - steps model of vulnerability but uses the concepts of sensetivity and resilience to significantly change the focus and emphasis of Chambers internal/external distiction. "Analyzing vulnerability involves identifying not only the threat but also the resilience or responciveness inexploiting opportunities , the means of resistance are the assests and entitlements that individuals , households , or communities can mobilize and manage

in the face of hardship. Vulnerability is therefore closely linked to asset ownership. The more asset people have the less vulnerability they are , and the greater the esrosion of peoples assets , the greater their insecurity".(p18-19)

Rayhan (2004) The watts and Bohles definition of the 'space of vulnerability' shows exposure (risk of exposure to hazards) as the extrnal side of vulnerability , whilist capacity (risk of inadequete capacity to mobilize resource to daily with hazards) and potentiality (the risk of severe consequence) form a more comlex understanding of the internal side of vulnerability.

Sinha and Lipton describe exposure to Damaging Fluctuations (FD) (this is increased with size , frequncy , earliness and bunching and coorelates) , the vulnerability to exposure (this increases with unpredictability , co – variance with other DFs and exposure portifolio of assets and activities , this correlates roughly to capacity. And aversion (this increases with exposure , vulnerability and expereince , and correlates to potentiality) Rayhan (2004).

2.2 Cuase of Vulnerability

Chronic exposure to risk is a crucial important source of vulnerability. Many factors contribute to vulnerability. *Social Vulnerability*; they incluede rapid population growth, poverty and hunger, poor health, low levels of education, gender inequality, frigile and hazardious location, and lack of access to resources servises , incluiding knowledge and technological means , disintegration of social patterns. *Political vulnerability*; lack of access to information and knowledge , lack of public awareness , limited access to political power and representation. *Economic vulnerability* and *Environmental vulnerability* the rest causes of Vulnerability (Rayhan, 2004 p8-9).

2.6 Vulnerable Child

A vulnerable child is defined as being under the age of 18 years and currently at high risk of lacking adequate care and protection. Accordingly, all children are vulnerable by nature compared to adults, but some are more critically vulnerable than others. "Child vulnerability is a downward spiral where each shock leads to a new level of vulnerability and each new level opens up for a host of new risks. In other words, the probability of a child experiencing a negative outcome rises with each shock." (World Bank OVC Toolkit, 2018 p8).

Characteristics of Children Defined as Vulnerable include those: Orphaned by the death of one or both parents; Abandoned by parents; Living in extreme poverty; Living with a disability; Affected by armed conflicts; Abused by parents or their carers; Malnourished due to extreme poverty; HIV-positive; and finally, those marginalized, stigmatized, or even discriminated against (Standard Service Standard Delivery, 2010, p 9-10).

Child vulnerability is the outcome of the interaction of a range of individual and environmental factors that compound dynamically over time. Types and degrees of child vulnerability vary as these factors change and evolve. Age, for example, shapes children's needs while also exposing them to potential new risks. Infants, who are completely dependent and require responsive and predictable caregiving, are particularly sensitive to parents' health and material deprivation. Young children under three years old are especially affected by family stress and material deprivation because of the rapid pace of early brain development. Young children can benefit from early childcare and education (ECEC) interventions and time away from the home environment. The independence of older adolescents makes them more susceptible to opportunities and risks in the community, making the presence of supportive adults, school quality, and local economic opportunities important for well-being (EOCD, 2020).

The special vulnerability of children is recognised by the United Nations Convention of the Rights of the Child (UNCRC), which underlines the need to extend special care and protection to children on grounds of physical and mental immaturity. The UNCRC stipulates governments' responsibility to take protective and preventative measures against all forms of child maltreatment, and to support parents in meeting child-rearing responsibilities through the development of institutions, facilities and services. OECD and non-OECD countries provide for the special vulnerability of children through specific legalization and policies across education, health, labour regulations, juvenile justice and child protection, though specific approaches vary according to countries' traditions and definitions of the issue (EOCD, 2020).

2.3 Children's

As defined in Article 1 of the Convention on the Rights of the Child (CRC), child means, *"Every human being below the age of 18 years unless, under the law applicable to the child, majority is attained earlier"*. In terms of actions by UNHCR (2018) the word "child" refers to all children falling under the competence of the Office, including asylum-seeking children, refugee children, stateless children, internally displaced children and returnee children assisted and protected. This definition is compatible with that provided in the Convention on the Rights of the Child. Though the age of attaining majority is 18 years, for specific purposes a child may be emancipated at an earlier age. Emancipation takes places either by marriage or upon authorization of the family council.

2.4 Orphan

UNICEF (2018) and global partners define an orphan as a child under18 years of age that has lost one or both parents to any cause of death. In Ethiopia, it is commonly understood and legally defined that an orphan is defined as a child who is less than 18 years old and who has lost one or

both parents, regardless of the cause of the loss. A vulnerable child is a child who is less than 18 years of age and whose survival, care, protection or development might have been jeopardized due to a particular condition, and who is found in a situation that precludes the fulfillment of his or her rights.

However, for these standards a more inclusive definition is used which includes all of the following: A child who lost one or both parents; A child whose parent(s) is/are terminally ill and can no longer support the child; Children living on or in the streets; A child exposed to different forms of abuse, violence and/or exploitation; A child in conflict with the law; A child who is sexually exploited; A child with disabilities; Unaccompanied children due to displacement made the definition meaningful (UNICEF, 2018).

A vulnerable child is a child whose survival, care, protection or development might have been jeopardized due to a particular condition, and who is found in a situation that precludes the fulfillment of his or her rights. Vulnerable children include children whose rights to care and protection are being violated or who are at risk of those rights being violated. Orphans and vulnerable children have been suffering from many problems associated with these vulnerability factors. Some of the problems they face include hunger, lack of access to health and education, physical and psychological abuse, lack of love and affection and negative communities' attitude towards them (UNICEF 2018).

The concept generally refers to orphans and other groups of children who are more exposed to risks than their peers are. In an operational context, we can say that they are the children who are most likely to fall through the cracks of regular programs. Using social protection terminology: OVC are groups of children that experience negative outcomes, such as the loss of their education, morbidity, and malnutrition, at higher rates than do their peers. To be protected from

negative outcomes and/or allowed participation, OVC need to be given special attention to remove the barriers that stand in the way of their equal participation in projects designed to benefit all children, or through special project components and targeting strategies tailored to their needs (World Bank OVC toolkit, 2018 p 7)

2.5 Theoretical Approaches to Vulnerability Analysis

The concept of Vulnerability has been amended and adapted in various approaches. For example: *The Biophysical approach* mainly focuses on the vulnerability or degradation of biophysical conditions. The approach extrapolates the biophysical estimates to the impact on the human occupants of the landscape. This approach is widely used in the study of vulnerability to natural hazards and climate change (Rayhan, 2004). *The human ecology approach* essentially embeds human systems within ecological process. The *political economic approach* is based on the theory of marginalization and food entitlements. It emphasizes the central role that differential economic and political power play in determining in differential vulnerability of individuals and groups. The approach has been criticized for neglecting historical diversity of response underemphasizing the role of human agency and diminishing the role of environmental as an independent factor that affects social relations (Rayhan, 2004). *Political ecological Approach to vulnerability* uses a political ecological view in vulnerability analysis.

2.6 Children and the Sustainable Development Goals

For 15 years, the Millennium Development Goals (MDGs) were a guiding force on many issues affecting the lives of children, young people and their families. Over this time, tremendous progress was made in reducing preventable child deaths, getting more children into schools, reducing extreme poverty and ensuring more people have access to safe water and nutritious food. However, progress has been uneven and many of the most pressing issues for the world

including addressing inequalities, promoting inclusive economic growth, protecting children from violence and combating climate change were not adequately covered in the MDGs (Ministry of Finance, 2017).

With the adoption of the new Sustainable Development Goals (SDGs) in September of 2015, world leaders have committed to ending poverty by 2030. However, unless accelerated efforts are made: Almost 52 million children may die before reaching their fifth birthday between 2019 and 2030.Children in sub-Saharan Africa will be 16 times more likely to die before their fifth birthday than children in high-income countries. Nine out of 10 children living in extreme poverty will live in sub-Saharan Africa. More than 60 million primary school-aged children will be out of school – roughly the same number as are out of school today. More than half will be from sub-Saharan Africa. More than 150 million additional girls will marry before their 18th birthday by 2030.These vast inequities and dangers do more than violate the rights and imperil the futures of individual children. They perpetuate intergenerational cycles of disadvantage and inequality that undermine the stability of societies and even the security of nations everywhere (Ministry of Finance, 2017).

2.7 The Global Spotlight on Orphans

Every year 2,102,400 more children become orphans (in Africa alone) 143, 000, 0002 Orphans in the world today spend an average of 10 years in an orphanage or foster home Approximately 250,000 children are adopted annually, but every year 14,050,000 children still grow up as orphans and age out of the system. Every day 38,493 children age out *(to age out means to grow to the age where a child is forced to leave the orphanage or foster home with no place to call home*). Every 2.2 seconds, another orphan child ages out with no family to belong to

and no place to call home. Millions of girls are sex slaves today, simply because they were unfortunate enough to grow up as orphans (Bimal, 2014).

Those orphans have emerged as a significant international child protection concern is illustrated by the results of a search of UNICEF's publications database covering the period 1996-2010. A search for publications tagged with 'orphan' resulted in 49 'hits' for the first five year period (2 publications in 1996), rising to 610 results in the year 2010. During this period, the orphan problem remained rooted in concerns about the impacts of HIV/AIDS (Crivello, 2018)

At the height of the AIDS crisis, 'AIDS orphans' became a new category of 'vulnerable children' requiring special protection and attention, but the term eventually fell out of favor because it was potentially stigmatizing and failed to acknowledge that children could be negatively affected by AIDS regardless of orphan status. A joint report produced by UNICEF, UNAIDS and USAID explained, 'While not all orphaning is due to HIV/AIDS, orphaning remains the most visible, extensive, and measureable impact of AIDS on children.' New terms like 'orphans and other children made vulnerable by HIV/AIDS' reflected these concerns, broadened beyond orphans, but remained AIDS-focused (Bimal, 2014).

The alternative 'orphans and vulnerable children' (OVC) dropped reference to AIDS, and as an international framework gained in popularity and use in the early 2000s. 'Orphans' are conspicuously the only named category of children, and despite disentangling itself in name from the AIDS epidemic, it remains strongly rooted in the global AIDS agenda. For example, in the most recent report on *The State of the World's Children*, the subject of orphans appeared in sections on the risks of HIV, national AIDS strategies, and reproductive health (UNICEF, 2011).

On the websites of USAID and Save the Children USA, information on 'OVC' was accessed via sections on HIV/AIDS (Crivello, 2018).

The visibility of orphans in agency and donor agendas has been influential in shaping national plans of action for targeting child vulnerability throughout sub-Saharan Africa. For example, Ethiopia's first National Plan of Action on OVC (2004-2006) was developed as part of a Rapid Country Assessment, Analysis, and Action Planning (RAAAP) across 17 countries. However, the research base supporting such plans is flawed, lacking analytical clarity and consistency, including in basic definitions, such as who is defined and counted as an 'orphan'. This has led to contradictory findings regarding orphan hood as a source of child vulnerability (Crivello, 2018).

The research and policy literature has also raised concerns about the ways in which orphans are conceptualized and how conceptualizations affect family and social cohesion, and the way young people see themselves (that is, through potentially exacerbating stigma or privilege). In some cases, the orphan label has become a privileged identity and a way to access aid from donors. Despite confused messages and unintended consequences, there is a substantial amount of international aid available for OVC support via HIV/AIDS funding; maintaining a focus on orphans may be an effective strategy for eliciting emotive responses and for mobilizing donor attention and funds (Crivello, 2018).

2.8 Orphans and Vulnerable Children in Ethiopia

The Ethiopian Ministry of Health recorded approximately 20 per cent of orphans are believed to have lost parents because of HIV/AIDS (UNAIDS 2008 and EMOH 2007). HIV/AIDS is a leading cause of orphan hood in Ethiopia, although the disease does not presently account for the majority of parents' deaths. In addition, there have been important episodic causes of orphan hood or separation of children from their parents, including famine, conflict and displacement

(Cooper, 2010, p10). Orphan hood and parental absence are structural features of Ethiopian society (Abebe and Aase, 2007).

High rates of adult mortality in Ethiopia coincide with widespread poverty. Ethiopia is one of the world's poorest nations and in 2010 was ranked 157 out of 169 countries on the Human Development Index (UNDP). Ethiopia's Household Income and Consumption Expenditure survey (2004/5) identified 38.7 per cent of the country's population as poor with higher rates of poverty in rural areas where approximately 84 per cent of the population lives (Woldehanna, 2017).

As in other countries across the region, Ethiopia adopted an OVC framework to guide action for vulnerable children, and there are currently plans to carry out a new 'situation analysis' of OVC across the country in order to inform a new National Plan of Action for OVC. A new National Plan of Action for Children is being developed simultaneously, these raising concerns amongst critics who question the need for separate plans and who point out those policy makers do not use existing research on OVC, and so generating more data is unnecessary (Standard Service Standard Delivery 2010,p1-3).

2.8.1 National Social Protection Policy of Ethiopia

The Government of the Federal Democratic Republic of Ethiopia has been developing and implementing policies and strategies to alleviate the economic and social problems accumulated over years to reduce poverty through popular participation and equitable benefit to ensure pro-poor, accelerated and sustainable development. This enabled over the past two decades to register an increased economic growth that helped to reduce poverty (National Social Protection Policy of Ethiopia, 2012).

According to annual economic performance evaluation of the Ministry of Finance and Economic Development, due to the series of poverty reduction programs, the poverty rate of the country fall from 45% in 1995/96 to 26% in 2013/14 In addition, vulnerability to food poverty reduced from 49.5% in 1995/96 to 33.6% in 2010/2011 according to Central Statistics Agency Household Income, Consumption, and Expenditure Survey. The expansion of different economic and social development programs help mainly to reduce the shortage of supply side and increase the benefit to the entire population. On the other hand, several constrains impede the poor and vulnerable segments of the society to access services expanded. Therefore, to reduce the demand side constraints and to benefit segments of the society that require special attention, it is necessary to take social protection measures (National Social Protection Policy of Ethiopia, 2012).

Social Protection is part of social policy framework that focuses at reducing poverty, social and economic risk of citizens, vulnerability and exclusion by taking measures through formal and informal mechanisms to ascertain accessible and equitable growth to all (National Social Protection Policy of Ethiopia, 2012).

Above all, the policy includes coordinated protective measures for people who are at serious risk due to natural and man-made risks, diverse social security mechanisms to avoid risk, to improve the income and livelihood of citizens, to improve employment opportunities and living conditions, as well as to provide legal protection and support for victims of abuse and violence. Without being limited to the provision of basic services and temporary support, the implementation of social protection includes measures to strengthen participation and mobilization of the public, based on the economic, social, cultural and human rights enshrined in

the constitution, which are transformative in nature Creating a system to reduce economic and social disparities and imbalances in society (National Social Protection Policy of Ethiopia, 2012).

In this policy, segments of the society vulnerable to different social and economic problems, especially, children, women, persons with disabilities, elderly, labor constrained unable to make earnings, and the unemployed who are living under difficult circumstances are given special attention (National Social Protection Policy of Ethiopia, 2012).

The policy serves as a framework for collaboration and coordination system of social protection in order to provide different services, and it clearly indicates the organizational structures at federal, regional and the respective lower levels of organizational structures with duties and responsibilities (National Social Protection Policy of Ethiopia, 2012).

The Policy was crafted by the coordination and leadership of the National Social Protection Platform through the involvement and adequate consultations with federal, regional and other different stakeholders where in the preparation process the actual situation of the country mainly poverty and vulnerability, legal and policy issues, social protection related national programs, continental and international situations were properly assessed (National Social Protection Policy of Ethiopia, 2012).

The policy document consists of five focus areas. These are:- Promoting productive safety net, promoting and improving employment and livelihood, promoting social insurance, increasing equitable access to basic social services, and providing legal protection and support to those vulnerable to abuse and violence (National Social Protection Policy of Ethiopia, 2012)

In this regard, the policy document consist of introduction, the need for the policy, vision, mission, general objectives, principles, scope and focus of the policy from section one to five, and the remains sections comprise of measures and strategies, focus areas, financial source,

institutional arrangement and coordination, as well and monitoring and evaluation system respectively (National Social Protection Policy of Ethiopia, 2012).

2.8.2 The need for the policy

To ensure fair and sustainable utilization of resources from the economic growth of the country and to reduce poverty significantly, it is required to design a social protection policy and establish a system to implement programs. Keeping that government programs being implemented are pro-poor, it is also essential to take social protection measures to ensure access and equitable benefit for the poorest of the poor and vulnerable segments of the society from the social and economic development (Standard Service Delivery Guidelines, 2010)

In Ethiopia, expanding social protection landscape is part of the progressive implementation of the main economic and social rights enshrined in different articles of the constitution. In addition to the fundamental articles enshrined in the constitution, especially Article 41 that serves as a base for the establishment of a social protection system in the country, Article 90 which states as "To the extent that the country's resources permit, policies shall aim to provide all Ethiopians access to public health and education, clean water, housing, food and social security" is a constitutional foundation to design this policy (Standard Service Delivery Guidelines, 2010).

African Union member countries, including Ethiopia, have endorsed the African Union Social Policy Framework (AUSPF), have integrated in to their development agendas and strategies are pursuing measures to reduce chronic poverty and vulnerability, which shows the paramount importance of social protection at regional level to bring about equitable and stable growth. Poverty reduction program under implementation in the country, especially the Growth and Transformation Plan (2010/11-2014/15), resulting in poverty reduction and contributing to

safeguard the welfare of citizens directly or indirectly, has laid the foundation for the establishment of sustainable social protection system (Standard Service Delivery Guidelines, 2010).

Social protection initiatives are multidimensional that have been executed by different government, non-government, community and faith based institutions; that however, studies indicated services had gaps in: standards, coverage and accessibility, the complementarities of programs, institutional arrangement, data management and exchange of information, vertical and horizontal relationship among different implementing bodies (Standard Service Delivery Guidelines, 2010).

Although, the Developmental Social Welfare Policy (DSWP) implemented since 1996 served as a guide for the strengthening of social welfare, through policy gap analysis, it was found to be incompatible with the existing situations. The main gaps identified in the DSWP have indicated that: - the roles of executing bodies and communities in the coordination, collaboration and design process of social welfare program was not clearly articulated; it was incompatible with the demographic change, economic and social development, structural adjustments, policy and legal amendments; it also had no detail strategy and action plans for policy implementation (Standard Service Delivery Guidelines, 2010).

Ensuring social protection helps to reduce poverty and vulnerability with a meaningful impact, to protect the poorest segments of society from falling further deep in to destitution, to increase human development and productivity in order to break intergenerational cycle of poverty, to enhance equitable use of resources, to bring social justice and stable peace, to reduce discrimination and exclusion, to strengthen national feeling, and to enhance economic and social development. In general, to sustain social and economic development, to boost social justice, to

ensure the respect of dignity and rights of citizens, it was found out necessary to develop a social protection framework (Tsegaye, 2001)

2.9 Child Development Theories

The following are just a few of the many child development theories that have been proposed by theorists and researches. More recent theories outline the developmental stages of children and identify the typical ages at which these growth milestones occur (Cherry, 2020).

2.9.1 Bowlby's Attachment Theory

Social development of children believed that early relationships with caregivers play a major role in child development and continue to influence social relationships throughout life. Attachment theory suggested that children are born with an innate need to form attachments. Such attachments aid in survival by ensuring that the child receives care and protection. Not only that, but these attachments are characterized by clear behavioral and motivational patterns. In other words, both children and caregivers engage in behaviors designed to ensure proximity. Children strive to stay close and connected to their caregivers who in turn provide a safe haven and a secure base for exploration. Children who receive consistent support and care are more likely to develop a secure attachment style, while those who receive less reliable care may develop an ambivalent, avoidant, or disorganized style (Brethertone, 1992).

2.9.2 Vygotsky's Socio-Cultural Theory

Socio cultural theory also suggested that parents, caregivers, peers and the culture at large were responsible for developing higher-order functions. Learning is an inherently social process. Through interacting with others, learning becomes integrated into an individual's understanding of the world. This child development theory also introduced the concept of the zone of proximal development, which is the gap between what a person can do with help and what they can do on

their own. It is with the help of more knowledgeable others that people are able to progressively learn and increase their skills and scope of understanding (Habibullah P, 2018).

Bowlby's Attachment Theory and Vygotsky's Socio-Cultural Theory are relevant for this study. Those theories shows that the attachments of the children's have with their parent, peers and the wide surrounding cultures are influential in their development. Since the objective of the study is to understand the socioeconomic problems of the OVCs this theory supports in illustrating how family, the society and the culture are influence their life. The other thing is the study populations of this study are OVCs and one can understand what is the theories about and it also helps the reader to understand the gap that the children's had missed in their life.

2.10 Implications of reviewed literatures to the study

The literatures reviewed in the above are helpful to the research in understanding the meanings starting from who are children, orphans, insight of their lives, theoretical approaches to vulnerability analysis, policies and laws towards the OVCs, this helps to have clear understanding of the study. The reviewed literatures are inputs to the study to strengthen the general objective of the study provide foundation of knowledge on topic and they helped the researcher to find out gaps to this study. The literature review also plays a big role in justifying the study. The reviewed literatures provide a crucial point of reference.

CHAPTER THREE

3.   RESEARCH METHODS

3.1 Philosophical framework of the study

The researchers use four worldviews. Post positivists, the Social Constructivist Worldview, the Advocacy and Participatory worldview, the Pragmatic Worldview (Creswell, 2007). Constructivism is a philosophical view that says all knowledge is constructed from human experience as opposed to discovered self-evident knowledge. The constructivism philosophical paradigm as an approach that asserts that people construct their own understanding and knowledge of the world through experiencing things and reflecting on those experiences (Dickson. 2016).

Social constructivists hold assumptions that individuals seek understanding of the world in which they live and work. Individuals develop subjective meanings of their experiences- meanings directed toward certain objects or things. These meanings are varied and multiple, leading the researcher to look for the complexity of views rather than narrowing meanings into a few categories or ideas. The goal of the research is to rely as much as possible on the participants' views of the situation being studied. The questions become broad and general so that the participants can construct the meaning of a situation, typically forged in discussions or interactions with other persons (Creswell, 2007).

As the researcher listens carefully to what people say or do in their life settings. Constructivist researchers often address the processes of interaction among individuals. They also focus on the specific contexts in which people live and work, in order to understand the historical and cultural settings of the participants. Researchers recognize that their own backgrounds shape their

interpretation, and they position themselves in the research to acknowledge how their interpretation flows from their personal, cultural, and historical experiences (Creswell, 2007).

To investigate the socio-economic problems and lived experience of the OVCs the study has applied the constructivism philosophy. It helped to find the answers directly through their life their family/care givers and other concerned bodies. It is about to understand to involve multiple people's understandings, identifying social and historical construct. The goal of the research is to rely as much as possible on the participants' views of the situation being studied (Creswell, 2007).

3.2 Research Design

In this research, the research used Qualitative research method. Qualitative approach is a research approach for exploring and understanding the meaning individuals or groups ascribe to social problems. The process of research involves emerging questions and procedures , data typically collected in the participants setting, data analysis inductively building from particulars to general themes, and the researcher making interpretations of the meaning of the data (Dickson .2016). In order to determine the lived experiences of the OVCs in the named areas and to gain an insight into their socio-economic problems, a qualitative research approach is used in this study.

I used the qualitative approach; it is a scientific investigation method that is applied to collect non-numeric data. Qualitative research focuses on human behavior from a participant's point of view. Qualitative research is a process of real-life inquiry that aims to understand social phenomena. It focuses on and attempts to 'why' and 'how' rather what kind of phenomena and rests on the direct experiences of human beings as meaning-making agents in their everyday lives. Those who engage in this form of inquiry support a way of looking at the research that

honors an inclusive style, a focus on individual meaning, and the importance of reporting the complexity of a situation (Creswell, 2016).

I have used the exploratory case study research design to investigate the socio-economic issues that orphans and children at risk have as typical cases from the community. It is appropriate because it allows the researcher to obtain detailed data on the orphans' situation from the family or caregivers, community CBOs, GOs, and other details that have occurred in the OVCs' lives. It helps the researcher focus on a particular case within the confines of space and time. It also provides the ability to collect various types of data such as interviews, documents, observations, and others about the case and take a detailed look at a person.

3.3 Study Area

Limu Kossa Wereda is one of Jimma Zone biggest wereda. In the wereda there are 44 kebele. Four of them are towns and the left others are rural kebele. It is located in Jimma administrative zone in Oromia region (Limu Kosa Wereda administration). It is situated at 70 57'N latitudes and 360 53'E longitudes. The administrative center of the district, Limu Genet (formerly Suntu) is found 75 kilometers west of Jimma town, and 426 kilometers southwest of Addis Ababa. The district is bounded by Chora Botor district in the northeast, Mana district in the east, Tiro Afeta district in the south, Gommaon the northwest by the Didessa River, which separates it from the Illubabor Zone, and Limu Seka district in the north (Limmu Kosa Wereda Aministration, 2012).

The 2007 national census reported a total population for this wereda of 161,338, of whom 81,462 were men and 79,876 were women; 14,842 or 9.2% of its population were urban dwellers. With an estimated area of 2,880.00 square kilometers, Limu Kosa has an estimated population density of 88.5 people per square kilometer, which is less than the Zone average of 150.6.

Natural forests and manmade forests are predominant in the district. The climatic condition is weyna-dega and dega. 39.7 percent of the land is under forest coverage, 24.6 percent is under annual crops, 20.3 percent is pastureland and 15.4 percent is degraded land. Coffee is the dominant crop and covers over 50 square kilometers of the district's land Limu Kossa Wereda (Agricultural and Rural Development Office Report, 2015)

The wereda is surrounded by Horizon coffee plantation P.L.C (formerly governmental coffee farm). For which people come to the area, (immigrate) from the neighboring weredas for laborer work. According to the wereda administration and town municipality report in 2014 the population of the town is about 19,751 from which 9,801 (49.7%) of the total population are females. The economic background of Limu Genet town is trading. The people of neighboring weredas come to the area for trading which is the main source and case of HIV prevalence in Limu Genet town. (EECMY, 2014)

3.4 Participants of the study

Study participants of the research in the specified area are orphans and vulnerable children's, families / care givers of the OVCs, Women child and youth affair office of Limu Kosa wereda, Public service social security service agency, Limu child development project, Kebeles, Community based organizations and community members are eligible to the study and are participants of the research. These organizations and concerned bodies are the ones who work on the life of the OVCs in the area. The detail of the participants have mentioned in the table 4.1.1 – 4.1.3

3.5 Data Collection techniques

I have used in depth interview and FGD to collect data. Those methods go along with my research philosophy, approach and research design mentioned in the above paragraphs. An

interview in qualitative research is a conversation where questions are asked to elicit information. When choosing to interview as a method for conducting qualitative research, it is important to be tactful and sensitive in its approach. Interview or the researcher, some of the fundamentals of his/her technique are Listening, Ask questions (to follow up and to clarify), be respectful of boundaries, be wary of leading questions, don't interrupt, and Make the participant feel comfortable (Harvey, 2020).

I have used in-depth interviews format, which as the name suggests, are based on an outline structure or a few key questions, but with some leeway for the interviewer to examine the topic in further detail depending on how the conversation goes. The intention is to get the respondents to speak in their own terms; therefore, the questions are usually not too specific. It is significantly less rigid than a structured interview and allows the interviewer to provide and receive information (Nik, 2018) the interview was conducted with 11 OVC, in this study children who participated in this study were ages 10th to 18th.

An in-depth interview (or depth interview) is one in which the research tries to go deeply into some aspect of the participant's feelings, motives, attitudes, life history, etc. The intention here is to get participants talking in detail about a particular aspect of their experience and their reflections on it. The participant directs the direction and nature of the responses, at least initially. The structure of the interview may be one in which a very general topic is gradually narrowed down. For example, participants may be asked to talk about their life in general and gradually focus down onto their work experiences.

Focus group discussions with institutional workers kebele leaders and community members and I had applied In-depth interviews to collect data from family or caregivers of the OVCs. I

had used thematic analysis, it is a technique for identifying, analyzing, organizing, describing, and reporting themes found within a data set.

Alternatively, the topic may be more specific to start with and then broadened out to. The structure of the interview may be one in which a very general topic is gradually narrowed down. For example, participants may be asked to talk about their life in general and gradually focus down onto their work experiences. On the other hand, the topic may be more specific to start with and then broadened out to (Harvey, 2020).

From specific interview question, the result goes to general explanation of care giver/families. This helped care givers/families give their lived experience. The other method used is FGD. Focus group discussion is frequently used as a qualitative approach to gain an in depth understanding of social issues. The method aims to obtain data from a purposely-selected group of individuals rather than from a statistically representative sample of a broader population, Single focus group the key feature of a single focus group is the interactive discussion of a topic by a collection of all participants and a team of facilitators as one group in one place. This is the most common and classical type of focus group discussion (Nyumba, 2018).

In the study data collection procedures include one to one interview with the children has and with their care-givers/families have been take place. Children's have asked the semi structured interviews and have explained their own lived experience additionally to the structured interviews. Filing the semi-structured interview, note taking and audio recording was the procedure here. The in-depth interview was prepared for the care givers/families. During this periods one to one interview sessions with the care givers/family have taken place. Not taking, filing the interview paper and audio recording applied to collect the data.

The other data collection technique was FGD. The checklists were prepared, made available to all of the participants, and have been translated to the members in the local languages. Every individual have given equal chance of time of discussions. Note taking and audio recordings are collection procedures during FGD.

3.6 Sampling techniques

Non-probability purposive sampling technique is applied. This is because it helps deliberate choice of an informant due to the qualities the informant possesses by the researcher. Purposeful sampling is a technique widely used in qualitative research for the identification and selection of information-rich cases for the most effective use of limited resources. This involves identifying and selecting individuals or groups of individuals that are especially knowledgeable about or experienced with a phenomenon of interest. In addition to knowledge and experience, and note the importance of availability and willingness to participate, and the ability to communicate experiences and opinions in an articulate, expressive, and reflective manner (Creswell, 2016).

I used Non-probability sampling approach it is more suited to in-depth qualitative research, which is often about understanding complex social phenomena. The study populations are orphans and vulnerable children and their parents was interviewed, governmental and non-governmental organizations, community members with FGD. The sample sizes in qualitative research should not be too small to reach saturation. At the same time, the sample should not be too large to make a deep, case-oriented analysis difficult (Omona, 2013).

Non-probability sampling technique particularly purposive sampling technique is employed because it helps deliberate choice of an informant due to the qualities the informant possesses by the researcher. Purposeful sampling is a technique widely used in qualitative research for the

identification and selection of information-rich cases for the most effective use of limited resources.

Omona (2013) stated that 15-30 peoples could be included during interviews and 6-12 peoples can be able to participate in FGD in case studies. Therefore, numbers of participants in my case study were limited to 11 OVCs and 11 Families. Families are in-depth interview participants. It means totally interviewee were 22 in the interview. I had interviewed one caregiver from one family. The other is 8 peoples for FGDs were participated in two groups. Four participants were in one group. All the participants are presented in table below in chapter four 4.1.1 - 4.1.3

During the period of data, collection there was an emergency state in our country due to Covid – 19. Because of that, the numbers of participants in one group were limited to four according to the proclamation of the state of emergency so I had made two groups. The FGD were held two times. The time for one interview was minimum 30 minutes and the maximum were to 60 minutes. This means 240 minutes were provided for one FGD and the same were applied to the other groups. Totally, the participants used 2:23 (one hour and twenty-three minutes)

A total of 30 participants took part in the study during the interviews and FGDs. The individual level analysis unit is used for research into socio-economic problems of orphans and vulnerable children's.

3.7 Data Collection Instruments

Interview guideline and FGDs guideline had been prepared and used to the study. All the data have collected face to face with orphan and vulnerable children, their family and relatives. Interviews are translated to the local language (Affan Oromo and Amharic) during the interview

sessions. Note taking, audio recording and, checklists, semi structured - interviews, in-depth, interviews were applied.

3.8 Data Analysis procedure

The analysis of qualitative research notes begins in the field, at the time of observation, interviewing, focus group discussions and key informants of concerned bodies or other as the research identifies problems and concepts that appear likely to help in understanding the situation. Qualitative studies produce a wealth of data, but identifying and focusing on what is meaningful is necessary. Here the research had applied data reduction mechanisms. The analysis includes preparing the data in the transcriptions form from verbatim to written, translations from source to target language, coding, looking for meaning and relationship, interpreting and assessing trustworthiness of the results. (Nowell, 2017).

The research had used thematic analysis, it is a procedure for collecting data, Familiarizing with data, Generating initial Codes, searching for themes, Reviewing themes, Defining and naming themes, and generating the reporting found within a data set. (Trochim, 2006 p7) defines that "the unit of analysis is the major entity that is being analyzed in a study. The 'what' or 'who' is being studied. In the social science research, typical unit of analysis includes individuals (most common), groups, social organizations and social artifacts"

3.9 Eligibility

In this research, the study populations are orphans and vulnerable children in the town. The selection criterion to be included in the research is being orphan and vulnerable. There are three types of orphans in the definition of orphan. They are children orphaned due to losing father, children orphaned due to lose of mother and double orphaned due to losing both. The other Eligible bodies in the study was Families / care givers, professional from WCYA office PSSSA

office, kebele leaders, NGOs working towards children, CBOs and the community members participated in the study. It is made after sampling techniques.

3.10 Strategies for validating findings

3.10.1 Trustworthiness

Trustworthiness is one way researchers can persuade themselves and readers that their research findings are worthy of attention. It is criteria of credibility, transferability, dependability, and conformability to parallel the conventional qualitative assessment criteria of validity and reliability (Lorelli, 2017).

The study uses trustworthiness mechanisms such as triangulation using different methods such focus group discussions as well as one-to-one and family interviews were used to obtain trustworthy and reliable data on the life of the OVCs in relation to their socio-economic problems.

The other mechanism used in the study is member review. The correctness of the data can be checked on site during and at the end of the data collection dialogues. Informants were asked to confirm that their responses to interviews and FGDs were correct, as they wanted to say in the last section of all data collections. The other mechanism used in the study is the debriefing, which is a debriefing between the researcher and the advisors and readers appointed by the School of Social Work. The other method used in the study is to review previous research, it is used to assess the degree of agreement of the study results with those of previous studies (Shenton, 2004).

3.10.2 Authenticity

Authenticity criteria are criteria for determining the goodness, reliability, validity, and rigor of qualitative research. Authenticity in research implies that the conduct and evaluation of research

are genuine and credible and that the research is worthwhile and contributes to the field. Authenticity refers to the trustworthiness of a record as a record. An authentic record is one that is what it purports to be and has not been tampered with or otherwise corrupted. Authenticity is established by assessing the identity and the integrity of the record. It must be possible to ascertain at all times what a record is, when whom, what action or matter it participated in, created it, and what it is juridical/administrative, cultural, and documentary contexts were (Nowell, 2017).

I used direct participant interviews through audio recording, notes during the interview, and FGDs reported by the participants in the study. The reaction of the members in different ways was reported without any kind of corruption.

3.10.3 Credibility

Credibility addresses the "fit" between respondents' views and the researcher's representation of them number of techniques to address credibility including activities such as prolonged engagement, persistent observation, data collection triangulation, and researcher triangulation. Peer debriefing to provide an external check on the research process, which may therefore increase credibility, as well as examining referential adequacy as a means to check preliminary findings and interpretations against the raw data. Credibility can also be operationalized through the process of member checking to test the findings and interpretations with the participants

3.11 Ethical consideration

The principle of voluntary participation requires that people not be forced to participate in research. Closely related to the concept of voluntary participation is the requirement of informed consent. This essentially means that prospective research participants are fully

informed about the processes and risks involved in research and must give their consent to participate.

Ethical standards also require that researchers not put participants in a situation where they might be at risk of harm because of their participation. Harm can be defined as both physical and psychological. Two standards are applied in order to help protect the privacy of research participants. Almost all research guarantees the participant's confidentiality – they are assured that identifying information not be made available to anyone who is not directly involved in the study. The stricter standard is the principle of anonymity which essentially means that the participant remain anonymous throughout the study – even to the researchers themselves (William, 2020).

Families are the respondents of the in-depth-interviews. Children above age 10 are participated under the control of their families in semi-structured interviews. During the data collection period, participants were asked about their willingness to participate in the study with full consent. In addition, they were informed that they could be withdrawn from the proceedings at any time. Guarantees have given the participant's for the confidentiality – they are assured that identifying information not be made available to anyone. Audio recording recorded during the interview and FGDs voluntarily. The later declaration of consent is attached on the last page of the paper and has been applied accordingly.

CHAPTER FOUR

4.1 DATA PRESENTATION, ANALYSIS, INTERPRETATION

This chapter is about data presentation, analysis and interpretation. The finding is from the children's, their families or caregivers, GOs and NGOs and the community members regarding the socio-economic background of the OVCs in the specified area. Here the findings of the semi – structured interview, in - depth interview and the FGD are presented, analyzed and interpreted as the following.

4.1.1 The socio demography of the OVCs

S.N	Sex	Age	Education	Type of orphan	Religion	Currently living with him/her	With whom living before	Place of birth
1.	M	12	6th	Double orphan	Muslim	Grand mother	Both mother and father	Limu Genet
2.	F	14	8th	Double orphan	Orthodox	Care giver (no blood relationship)	Not known	Limu Genet
3.	F	12	6th	Double orphan	Orthodox	Care giver (no blood relationship)	Not known	Limu Genet
4.	M	13	7th	Double orphan	Muslim	Care giver (no blood relationship)	Not known	Limu Genet
5.	F	11	5th	Double orphan	Muslim	Care giver (no blood relationship)	Mother	Agelo Menta
6.	F	13	8th	Father less	Protestant	Mother	Both mother and father	Limu Genet
7.	M	18	10th	Father less	Muslim	Mother	Both mother and father	Limu Genet
8.	M	18	8th	Mother less	Orthodox	Friend	In different peoples house	Limu Genet

9.	M	17	6th	Father less	Muslim	Mother	Mother	Jimma
10.	F	10	3rd	Father less	Protestant	Mother	Both mother and father	Limu Genet
11.	M	12	-	Double orphan	-	Lives on the street	Both mom and dad	Limu Genet

4.1.2 Socio Demographic background of the family/care givers

S.N	Sex	Age	Religion	Education	Living with his/her	Place of birth	Job	Income/ month
1.	F	60	Muslim	No	Grand and grand children's	Dedo	Local alcohol selling	>500
2.	F	60	Orthodox	Basic writing and reading skills	Daughter	Limu Genet	Home made	>500
3.	F	48	Orthodox	10th	3 male and 2 female child together with mom and dad 7	Limu Genet	Government employed	5,000
4.	F	60	Muslim	Basic writing and reading skills	Alone	Jimma	Local alcohol selling	400 -500
5.	F	55	Orthodox	8th	With her husband and 7 children	Bench Maji	Local alcohol drinks selling	>500
6.	F	55	Protestant	8th	With her house band	Limu Genet	No job dependant to her teacher husband	>800
7.	F	36	Muslim	10th	With her children's	Limu Genet	No job to her children's	>1500

							income	
8.	M	55	Orthodox	12th	Alone	Atnago	Guard	>400
9.	F	50	Muslim	No	One child	Limu	Homemade and selling Injera	500 – 800
10.	F	28	Protestant	Public health level IV	With her child	Limu Genet	Government employed	4000
11.	No	No	Muslim	No	No	Limu Genet	No	No

4.1.3 FGD participants

S.N	Participant	Number	Responsibility
1.	Woman and Child Affair Office worker	One	Vice leader
2.	Public Servants' Social Security Agency worker	One	Disabled children's case worker
3.	Limu Child Development Project workers	Two	Manager
			Social worker
4.	Limu Kosa Wereda Attorney's office worker	One	Family and Child case worker
5.	Community members	Two	Elder
			Elder
6.	Kebele Leaders	Two	Kebele 01
			Kebele 02

These participants are suitable for the study because they are organizations and institutions that are active in the town in the life of the OVCs. They participated to study the socio-economic problems of the children as they are aware and responsible for the life of the OVCs in the town. The topics of the interviews are to gain a deep understanding of the problem and to find answers

to the aim of the study from the participants. FGD is useful for gathering subjective perspectives from key stakeholders. This helped the research in finding the lived experince of the OVCs in the town.

They are made up of the following participants: One Public Servants' Social Security Agency worker (Disabled children's case workertwo employees from the Limu Child Development Project workers (manager and Social worker) one employee from Limu Kosa Wereda Attorney's office worker (Family and Child case worker) two Community members (Elders) two Kebele leaders (01 and 02)

4.2 Theme One: Relationship of the OVCs with their families/care givers.

The result in-depth-interviews show that the children have strong relationships with their caregivers/ families. They witnessed that the family they are living in is striving their best to sustain their life and this is a good chance for them. They like the protective environment of the family. Some children's are Biological a blood relationship to the family and some have no Biological blood ties. One 11 years old Female Double orphan child expresses her filling saying.

"I thank God for giving me this family Gods plan to me is to be in this family, I have a dream to do all the best for them as they do all in my life. I am lucky and I wish all children's like me usually have a good family".

In contrast, some children stated that they were not having a good relationship with the family. They reported their relationship is moderate and the other said it is weak. Because of the economic challenges the family, everybody runs for his life and there is no attention for the children. One of the participants lives on the street and completely does not know what family is in his life. There is neglect, abuse, and other issues within the family towards the orphans. One of the 13-year-old double orphan children due to abandonment says in his interviews.

"I am working with my caregiver and sometimes I find the work so difficult to me. I fetch water from the river, I collect wood for fuel. My caregiver is old and it is only her that is living in the house so the responsibility of the house is up to me. We sell local alcohol (areke) in the house and I sell it in the house. It is hard to sell at nighttime when customers want to stay longer. Sometimes there is insult and bullying to me."

4.3 Theme Two: Housing conditions

The right to shelter or housing is important as protection against threatening elements, like violence, abuse, disturbances and noise. Shelter is also important as an arena for privacy, personal space, dignity and peace. The finding shows that most houses are roofed using iron sheet major problems in the family during rainy seasons because the Iron sheets are very old and broken. The majority of houses have mud floor. The findings of this study indicate that mud is the most commonly used walling material by communities living in the study area. Their toilets are old, broken and dirt. There are pets like hen, ship, goats, cows, dogs and cats in their house. Their personal and environmental hygiene is almost low. The study shows that most OVCs were living in deplorable condition. One of 17 years old paternal orphan said that during his interview. *"I wish we had our own house. The house we are living in is rented and I ask if there is a helping organization to help us have our own home".*

One of Female 70 years old, In-depth interview participant expressed their thought *"The house is to be broken on me. I do not know when it will be broken; it is my own house, almost 50 years long. Now I don't have the ability to build new and I call for help".*

4.4 Theme Three: Results regarding food supplies

Food suppliers are their family; though there is organization helping the OVCs, major food support is from their family/caregivers. Children are forced to engage in different small

businesses to find their daily food. Due to economic inability and food market inflation the OVCs and their families are going through hard times regarding food supply. They use very low quality food and even they may not find any food at all in some days. 13 years old paternal orphan participant child says. *"it is difficult for me to wait to my old mother to give m food always, so I am working as a shoe shine boy and earning money even to my family"*

The other finding reveals that, as there are some families able to find food support to the family even if it is not sufficient to the household. They provide two to three times per day. The common thing that all shares are the income they are receiving and the market condition is not equal. One in depth interview answered that a 28 years old participant stated that.

"The inflation of the market is creating problems in their day to day food supply. The money they earn for their life is not sufficient to afford all that the family requires. Since food supplies are the basic, the income is not covering even our food need".

4.5 Theme Four: Health care

The finding from interviews and FGDs shows that the children's use the General Hospital, Government Health center of the town and Private Clinics in the Town. Most of the children's use the General Hospital of the Government and the Town Health Center. Some use cultural medicines sometimes due to inability to visit health centers. Sometimes they may stay at home while they are seeking. No access to medical care can cause problems and sometimes death to OVCs in the town. The finding shows their family / caregivers, their mother only and NGO cover their health expense. 28 years old in depth interview participant replays that. *"My son is asthmatic he goes to the hospital three or more times in a month. His father died of asthma. We all use the general hospital of the town"*

The report from the participants found that I have never been sick in my life. He is a 17 years old double orphan participant and he says. *"I have never been sick in my life and my mother is a witness to this. I hope God protect me even in the future"*

4.6 Theme Five: About cloth and shoes need

Regarding cloth and shoes, the finding shows that some receive from NGOs. The organization purchases good quality cloth for the child as per the response of the participant children. They receive it two times per year. *"I am lucky now since 2016 twice in a year I am receiving cloth and shoes from NGO and I wish this chance to other Orphans like me"*

The other finding shows as they buy for themselves by doing small businesses like shoe shining, doing day labor activities and collecting and selling coffee beans due to family inability; the others received from their mother and used clothes of peoples. The finding also shows that other people's relative and care givers are other source of cloth and shoes. They may buy clothes from boutique, ordinary market and used clothe market and used clothes of peoples. They may buy or find clothes one time to two times in a year. 17 years paternal orphan participant mentioned.*"I am responsible for my clothes and shoes starting from I was 12 years old"*

4.7 Theme Five: OVCs and their friends

As the result shows, the relationship of the OVCs with their friends is good. They love and care each other. They play, learn and some children works together. Most they do not even understand, as they are orphans between their friends. 12 years female double orphan participant answered. *"I play; go to school, with my sister and brother in our house and other children's in the village"*

As the result shows, the relationship of the OVCs with their friends is good. They love and care for each other. They play, learn and some children work together. Most of them do not even

understand, as they are orphans between their friends. A 12 years female double orphan participant answered.

"Neighboring peoples are disturbing his mind now. I tried to hide as he is an abandoned child until now, but people are telling him and confusing him. Even if I told him the truth after the community his child minded is hurting and repetitive insults and bullying is confusing him"

4.8 Theme Six: OVCs and community relationship

The result found that the children reported that the community is treating the orphans unequally related to the children's living with both mother and father. They show their unequal treatment in many ways of

Neglect

The Orphans answered that as they face neglect from the community members. They neglected playing with children, stigmatizing HIV/AIDS orphans and abandoned children are major one. A 12 years old double orphan participant said. *"They said me your parents died of HIV and you may have it too because of this I am facing neglecting"*

Abuse

Labor abuse and physical abuses are the most common abuses that most of the children's facing in the area. Beating is typical example of physical abuse. Women's Child and Youth Affair Office worker witnessed, *"They send them here and there to do many works for them. They are letting them to do things that their children's are not working when we refuse to do that they beat me"*

4.9 Theme Seven: Mechanisms to cope with negative treatment and moods of the OVCs

As the report of the participant shows, all of the OVCs face psychologically negative moods in thinking of their lost parents. All the children's wishes to be with their mother, father and their other biological families. Due to this, they go psychologically or emotionally bad sometimes. The study found that the children's coping mechanisms are. Most of them did not feel comfortable to share their feelings, sadness, stress and grief they are feeling.

They cry alone

The children explained that they did not have anybody to understand them and shared their problems. As the result shows, they bury their problem internally for themselves and prefer crying alone where no one can see them. 17 years old paternal orphan participant said.

"I always cry in the school's clothing ceremonies of school remembering my father. I see students coming with their father and mother. I see some fathers receiving awards with their fathers and I missed him a lot. This things was starting from my childhood days I wish he was with me"

Keeping silent and to be alone

Some children answered that when they understand that as there is no way of bringing their families back they think for a long time alone in their mind recoiling if their families are with them now. This led them to be stressed for long days. 13 years old, double orphans answer shows.

"During this time I prefer not to talk and play with others. Sometimes I cry alone. My entire mood will change not to be with my families and with the community. It took a long time, even days of silence unknowingly."

Playing games

Playing is one method of grief therapy to children and some of the participant answered that, as they prefer to go to play out of the house with their colleagues. In addition, they spent a long time playing. 13 years paternal orphan participant answers, *"Playing a game with children's makes me forget everything"*

Focusing to work

Some children have reported they prefer focusing on their education and their jobs. The past is already past even the feeling is hard; they decided to work hard and change the future to better is the motive driving them inside. 18 years old participant said that:

"My father is not with us my sisters and brother are striving to bring change to them and the family, so I will do the same and want to make our future batter"

Telling friends or other people.

Some children's discus about their families' past history together with their families. They also like to tell the history tolled by caregivers or families to their friends. This makes them feel as if their families are near to them. They tell their friends, as if they were good families. Female 13 years old paternal orphan said. *"I like when my mother tells me about my father. And I will tell every new thing she told me about my father to my friend"*

4.10 Theme Eight: Legality of the Children

The result from the interviews and FGDs shows that all the children are not adopted to the family in the procedural legal system. They have been taken to the family in the best will of the family except orphans who are living with their mother or father. Most of the children do not have birth certificates nor are they registered as OVCs in the town. 50 years old in depth interview participant answered that. *"My grandchildren who is double orphan has no birth certificate nor registered as orphan in the kebele or anywhere at all"*

Only some children's that has birth certificate and have registered as an orphan in kebele and other governmental organizations. 28 years old in depth interview participant answered that. *"My child has birth certificate from hospital and has registered as orphan in governmental organizations"*

4.11 Theme Nine: Educational performance of the children

Education Opportunity

The result shows that there is poor educational opportunity for the OVCs in the area. Due to the inability of families, children are not going to school. There are children's works half day after school to sustain their life and their family. Some families are dependent on their children. Due to being left behind in the house there are also children's staying at home while they deserve and have a wish to go to school. *"I use to be out of school due to economic inability of my families until I joined NGO in the town now I found the opportunity because of the NGO"*

The other result shows that there is neglect and leaving the orphan behind from school in some families. They have forgotten in the house from education and there are children's that have not registered to school at all as the report of WCAO and PSSSA office shows. The other result is low educational material to the children. Due to shortage educational material, the children's may absent from the school and this have a problem in their performance.

Educational performance

The educational performance shows weak performance for most of them. The main reasons are not having enough time to study, not having enough educational materials, less attention to personal weakness, heavy work in the family, hunger and other reasons. Almost all of them have no program to play, help family, study and other activities, but wish to have a plan. Even some children who had plans sometimes break their plan to do different things in the family and their

life. 11 years old double orphan participant said. "My performance is low I don't have program

to study because of work load I wish if I had a program and study hard"

CHAPTER FIVE

5. DATA PRESENTATION AND DISCUTIONS

5.1 Results from the OVCs

This result comes from semi-structured interviews. It is organized so that the result of the study shows, point by point, different subjects. The study shows that the children in the town of Limu Genet Gudetu face socio-economic challenges in different ways. The World Bank's OVC Toolkit (2018) shows that one type of vulnerability is related to another and can lead to another type of vulnerability. According to the participant study, socio-economic problems can lead to different problems in the lives of children and their families. The aim of the study is to examine the social and economic problems faced by OVCs in the specified area.

Food is one and the most important thing for life and the basic need of all people (Survival Reports, 2020) Even if the type and type of culture differ from culture, a balanced diet is the most important thing in life. A balanced diet is very important for children as it benefits their health, development and growth, as the effects are known if they do not respond to it. The result, which shows how often they eat per day, shows three to once in a day. The food they eat during the day is Injera and Shiro wot, bread, vegetables and fruits, the quality they use is the lowest.

The result shows that their health care costs are borne by their family / caregiver, their mother, an NGO and there is one finding that shows that they have never been sick. There are the General Hospital, the Town Health Center, and private clinics in the town. Most of the children use the Government General Hospital and the Town Health Center. Some use cultural drugs, sometimes because they cannot visit health centers. Sometimes they can stay home while they search. Lack of access to medical care can lead to problems and sometimes death for OVCs in the town. One of in-depth interview participant replied that. A 60 years old caregiver answered

that. *"My child is on 100% health insurance coverage from NG, but there are many others in different homes who do not have access to health services and I am a witness to this"*

Some of the children were found to be getting clothes and shoes from NGOs, others said they were buying their own shoes through small shops like shoeshine due to the family's inability; the others received from their mother and used clothes from peoples. The finding also shows that relatives and carers from other peoples are other sources of clothing and shoes. They can buy clothes from boutiques, ordinary markets and used clothes markets and used peoples clothes. They can buy or find clothes once or twice a year.

Most of the children's feel both good and bad feelings. Because there are good and bad friends. Their friendship is not clear and strong like those who had biological families. From their problem with their friends are bullying. *Bullying* is unwanted, aggressive behavior among school-aged children that involves a real or perceived power imbalance. The behavior is repeated, or has the potential to be repeated, over time. Both kids who are bullied and who bully others may have serious, lasting problems (Stopbullying.org, 2020). Bullying includes actions such as making threats, spreading rumors, attacking someone physically or verbally, and excluding someone from a group on purpose.

Verbal bullying is saying or writing means things. Verbal bullying includes teasing, Name-calling, Inappropriate sexual comments, Taunting and threatening to cause harm

Social bullying, sometimes referred to as relational bullying, involves hurting someone's reputation or relationships. Social bullying includes leaving someone out on purpose, Telling other children not to be friends with someone, Spreading rumors about someone and Embarrassing someone in public

Physical bullying involves hurting a person's body or possessions. Physical bullying includes Hitting/kicking/pinching, Spitting, Tripping/pushing, Taking or breaking someone's things and Making mean or rude hand gestures

Bullying can occur during or after school hours. While most reported bullying happens in the school building, a significant percentage also happens in places like on the playground or the bus. It can also happen travelling to or from school, in the youth's neighborhood, or on the Internet.

The child's responses to the community show that half of them answered harmoniously and well, did not neglect them and the others respond that they neglected and are negative towards the community. They are stigmatized based on their families die of HIV AIDS and due to abandonment.

Sometimes the children get into a negative mood because they are orphans, when they are neglected, abused, when they feel alone, when they miss their lost biological families and the mechanisms by which the children try to cope with the problem varies from child to child child. Some of them replied that while they were crying, be silent alone, anger, sadness, stressed out for long days and the others replied that they were playing; going to work, telling friends or other peoples, and various other mechanisms are practiced by the OVCs.

The legality of the children's showed that children who are double orphans , single orphans and children's who have been abandoned by their biological families are not legally adopted in the current family that they are living now and don't have a birth certificate. Their adoptions are not cultural, religiously or legally process. Those who are abandoned are taken in to the family voluntarily, except for OVCs who live with their biological parent.

5.2 Results from Families / care givers

The result of the interview showed that the children's were living with their mother and father, with woman headed family , woman headed care givers that had no blood relationship, in different peoples house, rent house , government house and own house. While some abandoned children's family history were not known and some are known. 50 years old in-depth interview participant said that. "*The source of the OVCs is that abandonment, HIV/AIDS and other disease, Divorce, and other accidents and illnesses*"

EU definition of child abandonment shows open abandonment and secret abandonment. Open abandonment is defined as a child being knowingly left behind by his or her parent, who can be identified, and whose intention is not to return but to willingly relinquish parental responsibility. Further, no other family members are able or willing to take on the responsibility to parent and care for the child. Secret abandonment is defined as a child being secretly left behind by his or her parent, who cannot be identified, and whose intention is not to return but to willingly relinquish parental responsibility anonymously (Institute of Work, 2016).

The vulnerability of AIDS orphans starts well before the death of a parent. Children living with caregivers who have HIV/AIDS will often experience several negative changes in their lives and can start to suffer neglect, including emotional neglect, long before the death of the parent or caregiver. HIV/AIDS is one reason to be orphaned and other disease is also contributors to the cause in the town. The other participant answered that

The number of the current family size shows that there are at least two and a maximum of nine. It is disproportionate to household income and family size. They only use their income to consume for life. In families with many children who are forced to do various jobs beyond their capacity in and outside the family in order to earn additional income.

The result of the family income showed that> 500 Birr / month to 5,000 Birr / month. It turned out that, compared to the current market situation in our country; most families have a high lack of money to satisfy other basic needs and other needs. Therefore, this shows that they are prone to different types of economic vulnerability. The source of income for the families are mothers in the maternal family, children in the child-led family, both father and mother, but poor families, grandmothers, caregivers without consanguinity, NGOs, GOs and CBOs. The income is through; Local Alcohol selling, Small-scale business, Day laborer, House made, Government employed, NGO support, GOs and CBOs

The socio-economic problem of children begins in their family and there in the community. A child who lives with a family that sells local alcohol is prone to various types of problems, vulnerability, and abuse. Children with unsustainable family incomes are prone to various types of socio-economic problems that can lead to other problems. A child who is responsible to the family faces various problems. Those who are government-employed families are not enough even compared to the size of the family compared to our country's current market conditions.28 years old participant of the study mentioned that. "*I am employed I lives with my child I earn some amount of money per month, but is becoming difficult to live*"

The families help the OVCs in various things in their life but in short and sometimes they fail to help them, due to the economic problems of some families, children are forced to do more than their ability and age to support the family welfare. The children go in search of their own possibilities to master life themselves. They are looking for food, clothing, money, and other things to support their lives. Here in the study shows that the family does not donate due to their socio-economic problems; - Education, Health service, Clothes and shoes, Enough Food supply, Shelter and Other basic needs to the child

There are NGOs in the town that work for children. However, it is only one NGO that deals with children's lives; the project has 110 children. It provides support for all educational materials, health care, life skills training, food grants, sanitary materials, and advice for children and families. However, the main goal and the main objectives are not OVCs directly. GOs and CBOs work as much as they can, but it is not well organized, continuous and sufficient for the OVCs. In addition, owing to a lack of awareness, budget, and other resources, their goal and objectives are not aimed directly at all types of OVCs.

The community's perception of the orphans is both positive and negative. Some are negligent towards the OVCs and their families, while others are caring and kind to them. For example, OVCs are stigmatized and neglected by HIV/ AIDS. Children are abandoned and their families are stigmatized. The children are sometimes treated negatively by their friends and offended by the community. This creates negative emotions in them, anger, low trust in the community; Hatred of the surrounding community and other psychosocial behaviors they may develop. There are different types of abuse against the children in the community. The members of the community sometimes just seek their labor and treat it unequally as they are undesirable and unequal and this affects the OVCs.

The other result of community perception towards families and the children in the family is that families are sometimes criticized by society for adding additional children to the family. As the result of the study, while the mother found abandoned orphans, the father may not like the orphan when he goes into the house, and while the father brought the orphan to the family members, the mother shows negative feelings. This may be due to their economic ineptitude and fear of social criticism of the community in different ways. This shows that there is a negative perception in the community that individuals or families are not receiving OVCs due to socio-

economic issues. Sometimes the community feels that they are struggling in vain to raise children who are biologically inferior to them. 50 years old in-depth interview participant said that. *"My husband left me with four children when I brought abandoned children into our home. I asked him to understand, but he didn't understand, so he left us and I'm living with another newlywed man"*

5.3 Results from FGD participants

The Women Child and Youth Affair Office reported that special attention and care is being given to the plan to help OVCs and other children living with their families and caregivers. There are different children in and with different cases, but special attention is also given to children who are orphans, those who had parents and poor and other children in various local problems in the WCYAO of Werda and the town.

There are identified child problems as the WCYAO office of Werda and this will help to manage different mechanisms of dealing with child and family problems through the cooperation of different organizations, associations and individuals. The office works on their social, economic and political aspects in children's lives to create productive members of society for the future.

OVCs and children are at high risk if we don't take care of them. They are prone to various psychological, economic, social, political, and other abuses. They don't have the access to easily find what they need and deserve. The office works with Kebeles and follows the progress. The worker of the office replayed that.

"The greatest protection and care comes from the family to the children, so their loss can lead to various kinds of vulnerability and abuse, the organization witnesses these problems through

others. The vulnerability of children is from parent death, divorce and abandonment. And the orphans are increasing in the town"

The office (WCYAO) said that OVCs are special, but also we care about other children's who are in different problems. The government and the COBs are helping the children's in providing. All sectorial office working in the wereda gives 2% from their annual budget plan from each organization to WCYAO of the wereda. It is by using this income and with collaboration of stakeholders that the office is trying to help the OVCs and others trough Food, Clothes, Educational materials, Basic household materials, Counseling and follow up services, Referral services of some cases to different organizations have been taken place and it is continuous.

However, the service the government and the CBOs providing is sometimes small un-sufficient comparing with the actual need of the child in the town. The wereda worker's women's child and youth welfare office answered. *"A child may be absent from school because they are unable to purchase essential teaching materials. This leads to school dropouts and ultimately led to a poor grade result"*

Public Servants' Social Security Agency worker said on FGD time.

"Due to economic problems, OVCs can stay sick while they deserve to go to the health centers, so general economic problems can lead to a myriad of challenges in the life of OVCs and the problem is worst among disabled children in the area"

Public Servants' Social Security Agency is the other organization gives special attention for children's, children's with different disabilities and other social problems since they are one part of the public. There are disabled orphan children's also in the town. Orphan and disability worsens their problem together. Some of them are receiving help from our organization little support, but they need high support than the others. The office comes together with other

sectorial offices, associations and individuals that may assist the life of those disabled children's so as they may go to special need school to Sebeta or other place in Oromia. Only some are receiving this chance due to economic problem of families and the office, because families are poor and our budget is limited. The office is trying to refer different special case orphans to different organizations so as they receive helps. The worker of the office said that.

"OVCs are increasing as the office is receiving reports from different bodies. Economically they are highly vulnerable. The problems on disabled orphan children's are higher than the others. Psychologically, socially economically they are in problems. CBOs and NGO are helping some, but it is not enough as the office understood"

By using their time, labor force to use from them. Thus, society is exploiting them in different angle as the project observes. The children's are facing Insults, neglecting, seeking their force only in their day-to-day life. Divorce and death are some cases and the number of OVCs is increasing. LCDP witness during FGD is that.

"In the case of LCDP, workers say that many families are coming to register their family beyond their capacity these days because the children are orphans, so this shows how it is increasing. Economically, socially and psychologically they are vulnerable. We are all responsible for sharing all the good things in life, for the children's lives together"

OVCs need special care in their lives. People took the child to profit from abuse of work. Article 15 of the EPRDF Constitution provides the following on child labor 1. Every child must be protected from all forms of economic exploitation and from doing work that is dangerous or that may impair the child's physical, mental, spiritual, moral or social development. They are left behind and treated unequally while they send their own children to school, they leave the

orphans in the house while they buy their own child new clothes, they give old clothes from another place or nothing only once a year.

FGD participants agree that the children are neglected and abused in many ways. Neglect is a broad term that describes one of the primary types of abuse that relates to deprivation, or the lack of adequate attention, responsiveness, and protection appropriate to a child's age and needs, Samanta Parkison, (2017). Child abuse and neglect (including all forms of abuse) includes any act or series of acts or omissions by a parent or other caregiver that causes harm, potential harm, or threat of harm to a child.

In general, child abuse is a word or overt act that can harm a child. Child neglect, on the other hand, is an omission that does not take into account a child's development, including their basic physical, emotional, or educational needs, and does not protect them from harm or potential harm.

In order to recognize and justify neglect, practitioners must pay attention to what children are missing or lacking. It is much more difficult to observe and identify the absence of parental acts or behaviors and to demonstrate that these failures of caring have caused, or are likely to cause, significant harm to the child. This is especially the case if the damage gradually accumulates due to neglect of care and attention, e.g. there is consensus on five widely recognized areas or subspecies of child neglect; physical neglect, medical neglect, educational neglect, and emotional neglect Samanta Parkison (2017).

Basic physical needs are not met, as the child is not provided with necessary food (resulting in hunger, malnutrition, failure to thrive), adequate clothing or adequate shelter. Parents provide inadequate hygiene (e.g. child may be extremely dirty or unbathed, have severe nappy rash or other persistent skin disorders or rashes from improper care or lack of hygiene) or show reckless

disregard for child's safety and welfare (e.g. driving while intoxicated, leaving a young child in a car unattended). Child experiences abandonment, expulsion, or shuttling (child is repeatedly left in the custody of others for days or weeks at a time) Samanta Parkison (2017).

Denial or delay of health care: The child is not provided with medical care; parents fail to comply with health care recommendations, or fail to seek appropriate health care. Parent or caregiver fails to ensure their child's formal educational needs are being met. For example, a school-aged child is not regularly attending school and this may be a result of failure to enroll or permitted and chronic truancy. Also includes inattention to special education needs. Inadequate nurturing or affection: The lack of care experienced by children when their parents or caregivers fail to provide conditions, contexts or environments conducive to their feeling secure, wanted, loved and worthy Emotional neglect is characterized by an absence of parent-child interactions, such as not being hugged, validated or told they are loved. Children may be isolated, permitted to use drugs or alcohol, or permitted to engage in other maladaptive behavior.

Child abuse and neglect can result in physical and psychological developmental delays. A neglectful mother may not feed her baby properly, which can slow brain development, or an emotionally abusive father may damage his child's ability to form trusting relationships. Abused or neglected children can see the world as an unstable, frightening and dangerous place, which can undermine their sense of self-worth and their ability to cope with and adapt to their environments as they grow up. If unaddressed, maltreatment may contribute to later problems, such alcoholism/substance abuse, depression, domestic violence, multiple sexual partners and exposure to sexually transmitted diseases, suicidal thoughts and attempts. (APABooks)

Therefore, these things are leading the children's to different psychosocial problems on the life of the child. The option is to put the child in the other good family as WCAO. Labor abuse is criminal and those who are doing this need to be punished by the law. The office suggests that.

"The culture of raising a child requires special care in the community. They may need to be religious, cultural or in laws, but the community of the town is not using either of this so this is leading problematic child raising in the town. Religions says many things about the child and family code of ethics for example in Muslim treatment for Orphans (Yetim) is high care of the child but they are failing to do that , in Christianity and other religion there is also special care and attention to Orphans , culture also gives high attentions to the child"

Different cultures in Ethiopia have their own good ways of treating OVCs and their family, as Oromo culture of "Gudifechaa", while we are having all good culture it is neglected the law is not recognized. In Geda System is a cultural procedure called "Gudifachaa" is a system that receives a child culturally acceptable cultural manner. This procedure of making a child in cultural ceremony is to be full member of the family. In this family, the child will be never neglected, abused or other miss-treated outlook because he/ she are not biologically from the family. Even his/her history from other family is never been told to the child in his lifetime Dessalegn (2006).

Finding from all participants shows that their economic problem results in the child being out of school and taking care of or practicing very simple business such as collecting used plastics and metals, theft and street life. The family takes the child who does not ask for food and other basic needs are considered good things, but the children's life will be a miserable situation. Sometimes the family says the child is out of my control, which is unacceptable. So the fully responsible; Individuals, groups, associations, CBOs, government organizations and NGOs must

be at the forefront of solving the problem. Limu Kosa Wereda Womens Child and Youth Affair office said that.

"An orphan with HIV needs special care. It has witnessed many socio-economic problems among HIV orphans. Stepfathers, stepmothers, and caregivers abuse the OVCs, which is why collaboration is so important. There are OVCs on the street and high in a deeply rooted problem. With no food, no clothes, no shelter, no health care for their lives, and no community care. They consume drugs, play various games of chance, some work as day laborers, some beg on the street, and spend their time watching films and films in small cinemas in the villages. By the time they are in the family and in school, the OVCs are at full risk and this shows that there are problems in their lives that need to be seen and resolved"

5.2 Discussions

The study has provided important results in identifying socio economic conditions of the OVCs, community awareness of the situation of orphans and children at risk (OVC), the issues facing the OVC, and efforts by stakeholders to address the needs of these children. It also examined the strengths and weaknesses of the existing responses, on the basis of which future interventions will be designed to fill the existing gaps.

The children are found to have a good relationship with their parents, except that some children count in numbers. However, the children struggle with a lack of food in everyday life. Due to food shortages and other basic needs, the children are forced to do various day labor jobs in addition to their education. There are child-led families, as the study shows. Because of these and other problems, children cannot go to school every day. In addition, it leads to absenteeism from school, poor educational achievement, and other related educational issues.

Most of the children classified as OVC have little or no access to basic necessities such as food, shelter and clothing. The majority of these OVCs, especially the orphans, live in shabby houses with the poor and sick relatives / guardians unable to meet these needs. They cannot even eat three meals a day, regardless of the contents of the food. They have no regular or sustainable sources of income to secure their lives because they have no family or live with poor relatives / guardians. This result is in line with Survival Reports (2020)

Basic needs are needs that are necessary to life; the inability to meet these needs is the greatest challenge facing children. This study confirms from the findings that orphans have higher levels of socio-economic hardship than non-orphans have, and showed that vulnerability to various social and economic problems increases in OVCs. These social and economic problems can lead to others if not properly managed now this result goes in line with Raya (2004). The study identified that paternal orphans and double orphans are more than the other classification and types of orphans in the area. There is no single solution to the problem, it is the collaboration of all shareholders that can change the life of the OVCs.

This result is in line with Bimal (2014) and Standard Service Delivery Guidelines (2010). The result shows that the reasons for the orphans in the study are abandonment, divorce, natural death, illness, sudden death, and accidents. The finding of a high proportion of OVC carers in the older age group 40+ is worrying. This is because these caregivers are most likely the grandparents of these OVC who are most likely to need healthcare and other social services. Therefore, for them, taking care of OVC can probably be a double burden.

The fact that most caregivers were unable to pay for food expenses incurred whereas a high number of them could not pay for expenses incurred on education would suggest the priority of caregiver is food survival. All mentioned and identified problems will continue if they remain

untouched. Unveiling is not the last action it requires further process of solving the problem. Although there are works and commitments in different organization, it is not enough.

The living conditions of the children were characterized by insufficient light, without windows, dilapidated, overcrowded and without ventilation. In addition, there is a lack of a tap, kitchen, plumbing, sewer system and poor healthy living environment. The situation is worse for those who have rented from the private owners as they pay most of their income, let alone the quality of the home. In addition, the family size does not match the number of rooms and is characterized by overcrowding.

The community understands and is aware of the existence of a number of orphans and vulnerable children (OVC) around them. The result shows similarities, as can be seen from various literatures on OVCs in Ethiopia and various studies on the subject. The main challenges facing orphans and vulnerable children are lack of food, shelter, schooling, medical care, vulnerability, various forms of abuse and economic exploitation. Violence, exploitation, human trafficking, discrimination and various forms of abuse for orphans and vulnerable children are likely to be victims and negatively affect the physical, social and intellectual development of these children.

CHAPTER SIX:

6. MAJOR FINDINGS, CONCLUSION AND RECOMMENDATIONS

6.1Major findings

Major finding of the study shows that, the children suffer from the satisfaction of their basic needs due to the inability of the family. Most of the participating families are people over 40. The childrens are more prone to lack of medical care, educational opportunities, and are more prone to job abuse, physical abuse, and other challenges. The finding shows that except famine and war orphan classifications all mentioned types of orphans are present in the study area. Most of the orphans are double orphans and paternal orphans. Social orphan is the major classification of orphan in the area.

The social problems in the life of OVCs identified in the study are; neglecting by their friends and the community, being left behind, labor exploitation, inequality, violence, discrimination, poverty, substance abuse, bullying, poor health care, divorce, migration, are the major one. These issues make their life worse and it should be addressed. They are forced to use other gainful employment mechanisms that affect their educational performance. Although there are various aid organizations in the town, the service they offer is scarce, regularly short, inadequate and not well organized. The problems found are an alarm to work in the life of the OVCs to improve their future.

6.2 Conclusions

In different phases of their life cycle, individuals are exposed to different insecurities and different forms of vulnerability. Drew the conclusion from the result of the study; There are all kinds of orphans in the town this means Paternal maternal and double orphans. There are organizations that are involved in the life of the OVCs and their families, but it is rare. OVCs in

the town are facing different challenges; socioeconomic problems are existed in the lives of the OVCs. The social problems in the life of OVCs identified in the study are; neglecting by their friends and the community, being left behind, labor exploitation, inequality, violence, discrimination, poverty, substance abuse, bullying, poor health care, divorce, migration, are the major one. These issues make their life worse and it should be addressed.

The OVCs are going in different problems and challenges in their life, they require proper attention and sustainable support. As the study investigated, the socioeconomic problems the OVCs are confronting and who are working on their life is found that they are facing problems in different ways and should concerned parties have to help them.

6.3 Recommendations

A person's resilience (i.e. resilience) shows the personality's ability to deal with a stressful situation while maintaining inner balance and continuing to successfully carry out the activity. While some people are more resilient to life difficulties, others can fail due to many factors. The main point here is individual perseverance, the ability to withstand the trials of life, which ensures healthy choice, stability both now and in the future, and enables better coping and adaptation to difficulties. As recommendations for the results of the study, the government, NGOs working in the specified location, community-based organizations and goes to the community are included.

6.3.1   Government

The government is the first in town to work on the life of the OVCs. There are various sector offices in the town. WCYA Office and PSSSA are the organizations responsible for the lives of children, OVCs and children with various disabilities. GO facilitates all activities of all bodies and organizations. They must be active agents of change in every corner of the town collective

development activity. The study recommends the following recommendations; Government organizations need to implement child policy well and need pay special attentions to OVCs in the town. Co-operative and ongoing intervention in the bodies concerned has been required from government organizations to improve the lives of the OVCs. Empowering NGOs, CBOs and individuals who work on the life of the OVCs. Family reunification and marriage counseling before family breakdown. Legal Adoption. Should provide ongoing training and awareness to the community.

6.3.2 NGO

NGOs are other organizations that reach out to the community in many places where the government is unable or assist the community in various development activities alongside the government. They do not serve the profit, but the profit of society. Even though they are an independent organization of the government, they work within the framework and policies of the government to achieve the same goal of the country. The study recommends the following recommendations to NGOs; Particular attention needs to be paid to the OVCs and their families. Increase their support and help toward the OVCs and their family. Increase the number of OVCs in their service. Awareness rising for the community and other organizations on an ongoing basis. Family capacitation.

6.3.3 Community Based Organizations

The role of community-based organization in society is crucial. They participate in all aspect of the community in everyday activities. Understanding, giving more recognition and continued assistance to the CBOs is required. Idir, Iqub, Mahiber and other associations in the community that aim to improve the community are the most important. CBOs can be found in every religion, cultures, schools, clubs and communities in the town. They need to be capacitated well and here

are the study recommendations; should have an adequate plan, implementation and ongoing follow-up mechanism. Appreciate and help to maintain and protect one's own cultures

6.3.4   Community

The study recommends the following recommendations to the society; The community should continuously help and empower CBOs. Take an active part in programs that are changing the lives of OVCs. Avoiding harmful practices and looks at the OVCs and their families. Should legally or culturally adopt orphans

6.4 Implications of the research

6.4.1 The Implications for Policy

   The implication of the research can alert policy makers, implementers and advocators about the dire situation of vulnerable children in the study area. Policymakers respond to needs by creating legislation and programs to improve human conditions. In order to develop and revise social service policies and programs, legislators and implementers evaluate care and service models and different studies. Stemming from this, the government needs to develop a national policy on social and economic problems with specific focus on OVCs. As per the result of the study, most of the children's are double and paternal orphans, so the government can use the study to policies dealing with how strengthening families and ways forward to orphans for their best. Communities should be encouraged to use culturally appropriate and accepted strategies to facilitate positive behavior change. Therefore, those OVCs who are likely to be exposed to harmful traditional practices should be protected.

   Service providing organizations' and the government should work closely together to improve the socio-economic conditions of guardians who are taking care of OVCs in their households through micro-finance programs, insurance programs and opportunities to engage in income-

generating activities. Non-governmental organizations' (NGOs, CBOs and FBOs) are central partners in government initiatives. They need to be supported to give holistic, coordinated, adequate, quality and sustainable services to OVCs.

6.4.2 The Implications for Research

The current study provided baseline information for Limu Genet Gudetu Town and the area. The other implication suggest that as there are other problems and invite further study in the area.   This research has also has implications for further research. The main objective of this research was to identifying the socio economic problems faced by vulnerable children in the specified are. Using this research as a reference point researchers can identify the major obstacles and barriers to the service.

6.4.3 The Implications for Social work practice

The primary mission of social work profession is to enhance human well-being and help meet the basic human needs of all people, with particular attention to the needs and empowerment of people who are vulnerable, oppressed, and living in poverty (NASW, 2005). It is important to eliminate such barriers and enhance the children's wellbeing, empower the communities and families in general and the vulnerable children in particular.

As a method, the social work practitioner has to engage in facilitating interaction and empowering the vulnerable children, parents/guardian and the community to participate on matters that affect their lives. Moreover, the practitioner has to convey the duty bearers (the concerned bodies) to discharge their obligations to provide a more sustainable and meaningful service systems for the disadvantaged children, parents/guardians and communities. It contributes professional obligations from the researcher to the community.

6.4.4 The Implications for Social work education

The social work profession is constantly looking for ways to improve its research capacity and helping to fill in gaps. The research put the theoretical knowledge of social work into practice. If the research is being used for educational purposes, or what it will teach someone interested in knowing about socioeconomic issues facing orphans and children at risk, it will be useful to use. The research can provide students, social workers, researchers, and policy-makers with a good teaching approach to solving socio-economic problems of children, families and communities in order to solve the situation of children in a sustainable manner.

REFERENCES

Abebe, T. (2016). *Ethiopian Childhoods*. Trondheim: Norwegian University of Science and

Technology.

African Charter of the Rights and Welfere of the Child (1990).

APA Books *Understanding and Preventing Child Abuse and Neglect Children*, published by

Youth and Families Office.

Beckett, S. W. (2018). *Social Work Assessment and Intervention*.

Benyamin G. and Mark C. (2018). *Principal Sample Analysis for Data Reduction*. Research

Gates.

Bimal K. N.. (2014). *Orphan Problems and Community Concern in Ethiopia*. International

Journal of Management and Social Sciences Research , 3, 8.

Brethertone, I. John B., Mary Ainsworth and Cherry, K (1992). T*he origins of attachment

Theory*.

Verywellmind.com. (2020, January 04). Retrieved January 04, 2020, from Verywellmind.com:

https://www.verywellmind.com/child-development-theories-2795068

Child, Development, Institute Qualities of a strong Parent - Child Relationship 2018

https://cdikids.org/autism/5-qualities-of-a-strong-parent-child-relationship/

Chris C, Azeb, Monica M and Chris R. (2018). *Child Notice Ethiopia*. UNICEF Eastern and

Southern Africa Regional Office. UNICEF Eastern and Southern Africa Regional Office.

Creswell, C. J. (2007). *Research design: Qualitative, quantitative, and mixed methods

Approaches*, 3rd ed. p. cm PP 26,

Creswell, C. J. (2016). *Research, Design* (6 ed.). published by, Pearson.

Crivello, G. a. (2018). *Rethinking Orphanhood and Vulnerability in Ethiopia*. Development in

Practice , 15.

CSA and UNICEF Ethiopia 2018 *Multi-Dimensional Child Deprivation in Ethiopia*

Dagim. T. (07, July 2017). *Historical Survey Of Limu Genet Town From Its Foundation Up To Present*. International Journal of Scientific & Technology Research , 6 (07), 19.

Danielle T, Dendy P, Julie S. (March 2011). *Social Work Assessment of Children in need*.

Danye, H. (2014). *Determinants of Customer Retention*. Addis Ababa, Ethiopia: St. Mary's University School of Graduate Studies School of Business.

Dessalegn, N (2006*). Guddifachaa Practice as Child Problem Intervention in Oromo Society: the case of Ada'a Liban District*

Dickson A., Akwasi Y and Attah K.A (9, October 2016) *Global Journal of Arts Humanities and Social Sciences* Published by European Centre for Research Training and Development UK Vol 4, No.10, pp.1-

Elliott, V. (2018). *Thinking about the Coding Process in Qualitative Data Analysis*. University of Oxford.

Eyasu, N. (2018). *Policy Briefing on Child Protection Policy of Ethiopia in Emergencies*. Global Journal of Human-Social Science: C , 18 (3), 7.

Faith to action, International. (2014). *Children,Orphanages and Families*.

Habibullah. P, Rafique A. Memon, Shumaila M, Ali R.Kh & Illahi B. (2018, April 24). *ACritical Review of Vygotsky's Socio-Cultural Theory in Second Language Acquisition*. International Journal of English Linguistics , 8, p. 5.

Hamza, E. H. (2011). *The Socio-Economic Situation of Orphans and Vulnerable Childrenin Dessie*. University of South Africa.

Harvey, L. (2020). *Social Research Glossary*. Retrieved from Social Research Glossary:

http://www.qualityresearchinternational.com/socialresearch/

HawkeS, S. (2018). *The Assessment of Need and the Assessment of Risk*: The Challenges.

Sheffield: Department of Sociological Studies.

https://www.oecdilibrary.org/sites/23101e74en/index.html?itemId=/content/component/23101e

4en

Institute of Work, Health & Organizations, the University of Nottingham, UK. *Child

Abandonment and its prevention* 2016

Kawulich,B.B.(2015).Collectingdatathroughobservation.https://www.researchgate.net/publicatin/

/257944783.

Krishna, K. (1989). Conducting Key Informant Iterviews in Developing Countries. Agency for

International Development.

Lebied, M. (2018). *A Guide To The Methods, Benefits & Problems of The Interpretation of

Data*.

Lorelli S. Nowell, Jill M. Norris, Deborah E. White, Nancy J. Moules. (2017). *Thematic

Analysis*: Striving to Meet the Trustworthiness Criteria. International Journal of Qualitative

Methods , 13.

Malgorzata, Ciesielska, Katarzyna W. Boström, Magnus, Öhlander. (2018). *Observation

Methods*. Northumbria University.

Maxwell, J. A. (05 June 2016.). *Qualitative Research Design* : An Interactive Approach / J.A.

Maxwell.

Ministry of Finance, a. U. (2017). *National Situation analysis of Children and Woman in

Ethioipia,* Publishd by: Ministry of Finance and, UNICEF.

The National Association of Social Workers Code of Ethics, 2005

Nabavi, R. T. (2012). *Bandura's Social Learning Theory & Social Cognitive Learning Theory*.

Nik, F. (2018). *Using Interviews in a Research Project*.

National Social Protection Policy of Ethiopia.

Omona, J. (2013). *Sampling in Qualitative Research*: Improving the Quality of Research

    Outcomes in Higher Education. Makerere Journal of Higher Education , 18.

Ona G. R. and Herbert S., *Approach to Reduction of Socioeconomic Inequality*: Decrease of

    Vulnerability and Strengthening Resilience, Economics and Sociology, 2016

Rayhan, Damas Philip and Md. Israt *Vulnerability and Poverty*: What are the Causes and how

    Are they related? Center for Development Research Bonn University 2004

Saldana, J. (2016). *The Coding Manual for Qualitative researchers* (3 ed.). (SAGE, Ed.)

    London, UK. Social Work Assessment and Intervention.

Samanta P., Leah B., Stewat McD., Mary S. *Child Neglect Key Concept and Risk Factors*

    Australian Center for Child Protection 2017

Shenton, A. K. (2004). *Strategies for Ensuring Trustworthiness in Qualitative Research Projects*.

    Article in Education for Information , 15.

Standard Service Delivery Guidelines. (2010). Addis Ababa: Ministry of Woman's Affairs and

    Federal HIV/AIDS Prevention control office.

Statistics, Solution. (2020, 2 5). Retrieved 2 5, 2020, from Statistics, Solution:

    https://www.statisticssolutions.com/qualitative-sample-size/

Steven Walker and Backett. (2018). *Social Work Assessment assessment and Intervention*.

    Second edition. Anglia University.

Stopbullying.org 21/07/2020 https://www.stopbullying.gov/bullying/what-is-bullying

Survival Reports 10/02/2020 https://survivalreport.org/basic-human-needs/

Tatek Abebe & Asbjorn A. (2018). *Children, AIDS and the politics of orphan care in Ethiopia*:

Social Science & Medicine , 13.

Lorelli S. Nowell, Jill M. Norris, Deborah E. White, and Nancy J. Moules, (2017) *Thematic*

Analysis: Striving to Meet the Trustworthiness Criteria, International Journal of

Qualitative Methods Volume 16: 1–13, Sage publication,

Tobias, O.Nyumba, Kerrie, Wilson, Christina J. Derrick, Nibedita, Mukherjee. (2018, January).

The use of focus group discussion methodology: Insights from two decades of. (D.

Geneletti, Ed.) qualitative methods fo reliciting, p. 14.

Tsegaye, C. (2001). *Overview of Services for Orphans and Vulnerable*. Addis Abeba.

UNCHR. (2018). *Guide line on Assessing and Determining the Best Interest of the Child*. New

York: UNCHR.

UNICEF. (2018). *Multidimensional Child*. Nairobi: UNON Publishing Services Section,

Nairobi.

UNICEF. (2004). *The framework for the protection, care and support of orphans and vulnerable*

children living in a world with HIV and AIDS. 23.

Virendra, P. (2014). *The concept of vulnerability and resilience*. Procedia Economics and

Finance, (p.376). Salford Quays, United kingdom.

William, M. (2020). *Knowledge Base*. Cornel University.

Woldehanna T, G. R. (2017). *Young Lives Report*, Ethiopia Round 3 Survey. Young Lives.

Annexes 1

Research Interview

Jimma University College of Social Sciences and Humanities School of Social Work

Interview prepared for a Thesis in fulfillment of MA in Social Work (MSW)

Semi-Structured Interview Questions for the orphans

Date of the interview_____

Place of interview_____

Basic Socio-Demographic Information

I.   Sex:_____

II.   Age: _____

III.   Religion: _____

IV.   Educational status: _____

V.   Double orphan _____Single orphan_____

VI.   Living with his/her _____

VII.   With whom he/she is living before_____

VIII. Place of birth_____

Interview questions

1. What is your relationship with your families or care givers now?

    1.1 Strong relationship

    1.2 Moderate relationship

    1.3 Weak relationship

    1.4 If other ……………..

2. Whose house is you are living now?

    2.1 Own house

    2.2 Rent house

    2.2 Government

    2.3 Room numbers? _____

    2.4 Toilet Type? _____

3. How many times do you eat in a day?

    3.1 Four times and more per a day

    3.2 Three time a day

    3.3 Two times a day

    3.4 One time a day

    3.5 Nothing in a day

    3.6 What type of food you eat regularly? _____

4. Who provides your health care?

    4.1 How often? _____

5. Who bought you clothes and shoes?

    5.1 How many times per year?

    5.2 From where they bought the clothes? _____ Ordinary markets____ or other_____

6. Psychological issues.

    6.1 Feels neglected

    6.2 Feels comfortable

    6.3 What do you feel about your family?

    6.4 What do you feel about your friends?

6.5 What do you think about the community?

6.6 What mechanism you try to come out of that mood?

7. How the families treat you in the house?

7.1 Harshly

7.2 Kindly

7.3 Moderate

8. Social and legal aspects.

8.1 Dou you have birth certificate?

8.2 Have registered as an orphan in your area?

9. Which organization is helping you because you are orphan?

9.1 How they are helping you? If there are

9.2 It is satisfactory

9.3 It is unsatisfactory help

9.4 It is moderate

What is its duration of the help?

9.5 Starting from ____time to today and it will be Continuous

9.6 For some periods

9.7 Only once

9.8 Or other if there_____

10. What is your Educational performance?

11. What is your major educational problem? Why_____

12. Do you have a time program to play, help the family, study and other activities?

13. What things you wish to be changed in your life now?

Why_____

What is your plan?   **Thank you for valuable information and cooperation!**

Annexes 2

In-depth Interviews to the Families / Caregivers of the OVC's

Date of the Interview _____

Place of interview_____

Basic Socio-Demographic Information of the Families or Care Fivers

I.   Sex: Male _____   Female _____

II.   Age: _____

III.   Religion: _____

IV.   Educational status: _____

V.   Living with his/her _____

VI.   Place of birth_____

Interview questions

1. With whom the children's were living before?

2. What were their living standards before?

3. The number of current family size.

4. The income of the current family.

5. Who is the source of the income to the family? And what is the amount in cash?

6. The reason of the orphaned child in the family.

7. How you are helping him/her?

8. What is the community's perception towards orphans living with you?

9. What is the educational status of the child?

10. His/her health condition.

11. His/her psychological strength.

12. His / her Social interactions

13. What is the feeling of the family members to the child?

14. If   there   is   another   thing,   you   want   to   add.

_____

_____

Thank you for valuable information and cooperation!

Annexes 3

FGD Checklist

Participant information

Date of the FGD: _____

Place of FGD _____

Number Male Participants _____

Number of Female Participants _____

Checklist

1. What is orphan means according to your organization?

2. What is vulnerability to you?

3. What is the main reason to be orphan hood and vulnerability in this area?

4. What is the living condition of the orphan and vulnerable in this area?

5. What types of economic problems are the OVC is phasing in the area?

6. What type of social problems the OVC's are phasing in the area?

7. How the government is working towards those children has to solve their problems?

8. What type of community based service is provided to the orphan and vulnerable in this area?

9. How NGO's are working on orphans and vulnerable children is in the area? If there is do it adequate service?

10. Do orphan hood is increasing or decreasing in the area? Why_____

11. What are the major problems that the children's and the caregivers are facing? (Economically , socially and psychologically)

12. Is there identified number of orphan in the area?

13. Do you think orphans need special care in their life?

14. What is your organization working towards OVC's in this area?

15. If there is any point to be, add.

Thank you for valuable information and cooperation!

Annexes 4

Informed Consent and Ethical considerations

Thank you for your cooperation for allowing to the interview, FGD in this study. I am Kumneger Geremew Bekele I am a student at Graduate school of Social Work in Jimma University. I am writing a Thesis Submitted to School of Social Work in Partial Fulfillment of the Requirements of Masters in Social Work (MSW) the title of the research is Socio Economic Problems of Orphans and Vulnerable Children's in Jimma zone, Limu Kossa Wereda Limu Genet Gudetu Town. You can skip or withdraw from the interview or FGD at any time you want. Your name and other associated information will be anonymous throughout the study and will be confidential.