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## Assessment of the Role of Humanitarian Association in Addressing Social Security Issues in Ethiopia: The Case of Mekidonina Humanitarian Association

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# Assessment of the Role of Humanitarian Association in Addressing Social Security Issues in Ethiopia: The Case of Mekidonina Humanitarian Association

## Cover Page Footnote

Many people have been generously cooperated and contributed for the success and completion of this Research. My special thanks, first and foremost, goes to Almighty God. I am deeply grateful for the encouragement and help offered by: 1. Wanna Leka (PhD) Lecture at Addis Ababa University, 2. Mr. Girma Legesse Gemedda, Lecturer at Dilla University and

## 1. Introduction/Background

According to International Labor organization, social security is "the protection which society provides for its members, through a series of public measures, against the economy and social distress that otherwise would be caused by the stoppage or substantial reduction of earnings resulting from sickness, maternity, employment injury, unemployment, invalidity, old age and death"<sup>1</sup>

In developed countries the social security issue is not compromised and shares significant amount of their GDP. There are many countries in the world which are providing social security coverage for their citizens, "Social Security is one of the largest government programs in the world, paying out hundreds of billions of money per year. Relatives and spouses of needy people in many developed countries are also eligible to receive Social Security benefits, even if they have limited or non-existent work histories"<sup>2</sup>. In many developing countries, social security schemes are rare.

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<sup>1</sup>Andre Leliveld, *Social Security in Developing Countries Some Theoretical Considerations* Research Memorandum 1991-64 October 1991 vrije Universiteit amsterdam, Amesterdam, 1993

<sup>2</sup> Happiness Maduhu, *Analysis of Social Security Schemes in Tanzania with Response to the ILO Social Security (minimum standards) convention 1952*, (A Dissertation in partial fulfillment of the Requirement for the degree of masters of Business administration in the Open University of Tanzania, 2014)

"Europe is the region with the highest level of social security expenditure at nearly 25% of GDP, followed by North America at 16.6%. Africa has the lowest level at 4.3% of GDP and in most industrialized countries; coverage is close to 100"<sup>3</sup> According to Feldstein and Liebman 2002, as it quoted by Happiness Maduhu, "The history of social security system of the world shows that in earlier cultures there was no need of involving government to establish social security schemes for their societies because of the existence of strong family ties which provided mutual assistance necessary for the protection of the family members"

In reality, social security coverage in developing countries did not transform from the phase of interdependent social ties to the provision of at least basic needs either by government or other humanitarian organizations. In a country like Ethiopia, facing social security problem is quite obvious, especially during cultural, economic and social transformation. Social security provision is the headache of majority of many developing countries in the world. Policies and laws that can support or

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<sup>3</sup> ILO, *Facts on social security*, (the International Labour Conference adopted the Resolution and Conclusions concerning Social Security, (Switzerland Geneva, 2001) [www.ilo.org/communication](http://www.ilo.org/communication)

encourage social security coverage are not the major concern of the developing countries. This may be due to lack of resources or lack of awareness of the states, and in some cases ignorance of the elderly and mentally disabled people. Ethiopia is among one of the developing countries that faced the problem of social security coverage for its needy citizens.

In Ethiopia, although the provision of pension during old age retirement has been one of social security schemes, the fate of citizens working in the informal sector and peoples deprived of the basic needs has not been addressed so far in the country's social security scheme. As in any developing country the social security status of Ethiopia is very poor, there are only three governmental elderly centers in the country, which provide social security for older persons. "These are *Beteselehoma*, *Abrha Bahata* home for the aged and *Kaliti* Institutional Care Center for Elderly (KICCE). They provide shelter, food, clothing, and medical service and recreational facilities for older persons"<sup>4</sup> *Beteselehoma* is located at *Debre Libanos* which is far away 110 km from Addis Ababa while *Abrha Bahata* is located in the city of Harar. KICCE is the third governmental institution care

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<sup>4</sup> Ministry of labor and social affairs of Ethiopia, *Collective educational materials regarding older persons*, (MOLSA, 2006)

center which is found in Addis Ababa at a special place called *kaliti*.

In reality these centers are very insignificant if we compare with the number of those elderly and mentally disabled peoples that need support. Off course, as many poor countries, the burden of those peoples is relied up on their families or their relatives. But the problem is when the relatives or families are not in the position of taking care of their families or relatives due to financial or any other problem.

The role of this local humanitarian association in our case '*Mekidonia*' is here, through taking all responsibilities of those elderly and mentally disabled persons in to their center, instead of their families in order to provide all necessary social security. Since the demand of social security coverage is by far exceeding its provision the role of such organizations should get due attention both in the country or worldwide. *Isaka* (2011) noticed that in order to have adequate social security provision universality is needed. Formal sectors and informal sectors should be provided with an equal opportunity to participate in social security. This means that, the coverage of social security should be extended to peoples in need.

MHA envisions Ethiopia should be a country where all the elderly

people and those with disabilities have access and equal opportunities to basics in life. The ultimate goal of MHA is to enable the elderly people and those with disabilities to lead a better life by tackling exclusion problems in collaboration with governmental and non-governmental organizations. Fundraising and other activities are organized and carried out with the help of volunteers. Members and non-members can be engaged at different stages by contacting the lead staff of the organization. Membership is open to all Ethiopians and non-Ethiopians who share the vision of MHA.

MHA is located around *Kotebe* at a special place called '*bireta bire*' and it has five campuses. Of these five campuses one is used as a store. The other four are used as a dormitory for older persons and mentally disabled people and other supporting purposes. There is a medium clinic inside the center in which medical services are rendered. The health services are carried out by professional volunteers. If there are critical cases, patients are referred to some governmental hospitals in line with established agreement with the care center. Care recipients are gathered from streets of Addis Ababa and other parts of the country who are elderly and mentally disabled people. The elderly and mentally disabled

people reside in separate rooms. Most services are provided by professional volunteers.

The Motto of the institution is 'it is enough to be human to help human being'. The main financial sources for the institution are donors, income from ceremony of wedding, birthdays, money collected from the general public. In addition, some capable care receivers are engaged in income generating activities like handicrafts and Ethiopian Telecom has facilitated short message service (SMS) through which donation of money is transferred to the institution.

The most important donation is that donation donated by Addis Ababa city administration to MHA is 30,000m<sup>2</sup> of land which can highly contribute to enhance the sustainability of the organization. The organization plans to accommodate 3000 care recipients in the near future in its new building around Hayat Caffee compound. Currently, the organization is giving support for 1500 service seekers; among these 431 are elders, 556 mentally disabled, 318 bed-ridden and 195 physically disabled peoples.

This study was designed to explore the causes of social security problem that elderly, physically and mentally disabled people face and to assess the contribution of Local Humanitarian Association /MHA/



in alleviating basic social security problem of needy peoples. Furthermore, the study looked in to the challenges and prospects of the organization in addressing the needs of the vulnerable elderly people and to suggest feasible solutions in addressing the basic social security problems of the elderly and mentally disabled people.

## **2. Statement of the Problem/Reason for the study**

According to the ILO, majority of the developed countries have addressed the standardized social security coverage for their citizens. According to Akshataeva et al., “The level of development of social security institutes in one or another society largely depends on the state of economy, state’s financial possibilities, and available recourses to cover all who are in need of social support”<sup>5</sup> Social security provision is the headache of majority of developing countries in the world, although policies and laws that can support or encourage social security coverage are not the major concern of those developing countries.

Older persons in Ethiopia are traditionally supported by the extended family system. However, due to rapid growth of cities and

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<sup>5</sup> Akshataeva Zhanna, Kyzgaldak Baizhanova, Saltanat Beisebaeva et al, *The Framework of Social Security System Public Management in Kazakhstan*, International Journal of Environmental and Science Education, 2016, VOL. 11, NO. 18, 11645-11657, Kazakhstan, Look Academic Publisher

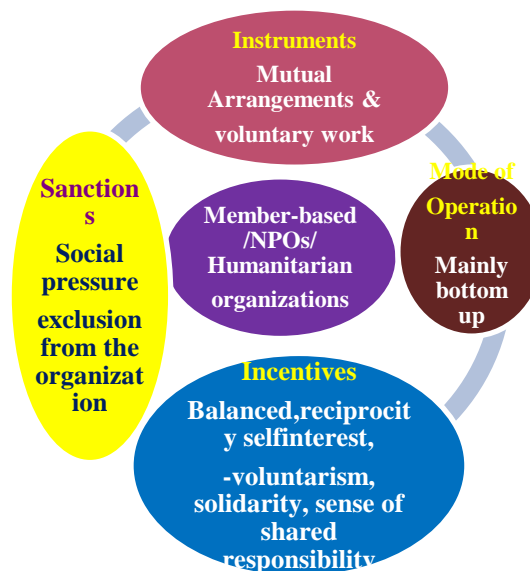
the emergence of complexities associated with social, economic and cultural changes, the family in Ethiopia has been changing. As a result, lack of basic social security coverage for needy people has become a critical problem. Although there are some attempts from government and NGOs to provide some basic needs for the elderly and mentally disabled people, these attempts did not fit with the extent of the prevalent problem. It is a common sight to see the elderly and the mentally disturbed and to see begging in the street of major towns.

In general, Social security provision is the headache of majority of developing countries in the world. Policies and laws that can support or encourage social security coverage are not the major concern of those developing countries. This may be due to lack of resources and lack of awareness of the states, and in some cases ignorance of that elderly people is among the major causes. Due to these and other reasons, the contribution of this study would be significant through assessing and describing the practical situation of social security coverage for elderly and mentally disabled people. Governmental and Non-governmental organization may use the result of this study as a reference for their studies. Individuals and any concerned

body can get more information to support such institution. Researchers can also use as initial data in order to conduct further research, since there is no sufficient studies has been conducted so far in the country. And thus, the significance of this study could not be undermined.

### 3. Operational definition of social security

**Figure1. The conceptual principles that Humanitarian association established up on<sup>6</sup>**



<sup>6</sup> Johannes Jutting, *Social security systems in low income countries: Concepts, constraints and the need for cooperation* (Center for Development Research, Walter-Flex-Strasse, 1999), 5  
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#### **4. The Underlying Concept and Purposes of Social Security**

According to ILO, "Social security was established as a basic human right in the ILO's Declaration of Philadelphia (1944) and its Income Security Recommendation, 1944 (No. 67). This right is upheld in the Universal Declaration of Human Rights, 1948, and the International Covenant on Economic, Social and Cultural Rights, 1966." As it mentioned in the same ILO document, the main purpose of social security coverage is to protect the most vulnerable groups outside the labor force like people with disabilities and old people who cannot count on family support, and who have not been able to make provisions for their own pensions.

As it noticed by Matthew Weinzierl, it is a core purpose—and achievement—of Social Security is to prevent the elderly from falling into poverty as they age. In general, social security is the system through which the neediest peoples provided with basic needs like food, shelter, cloths and health care typically in developing countries either by government or other concerned bodies.

"Generally speaking, 'Social Security' means safety and freedom from fear of want and

hunger, and it is applied to society as a group of inter-related and inter dependent people. As we can observe from the above conceptual definitions and purposes of social security, it is simply providing basic needs like food, shelter, cloth and health care services for those needy persons who cannot afford by themselves either by government or local humanitarian associations. Based on these basic concepts and underlying purposes, the following conceptual frame work of basic social security has been developed by the researcher.

Figure 2<sup>7</sup>



<sup>7</sup> Basic social security conceptual frame working in Developing Country; (Developed by a researcher)

## **5. Research methodology**

The overall research methodology is **exploratory**, because the aim is to explore the role of local humanitarian associations in my case, 'Mekidonian Humanitarian Association' /MHA/ in addressing social security of elders, mentally and physically disabled people. The extent and type or system of social security coverage in the country is not yet clearly identified either by government or nongovernmental organization. But, we see always the problem of social security coverage where ever we go on the main road of our capital city in Addis and elsewhere. So that, exploring the rationale behind this critical problem through qualitative data would be the main purpose of the research.

### **5.1. The research design**

The research design that best suit my topic is case study. The extent of the problem couldn't capture through this single study. Although, the social security provided both by government and NGOs did not fit with the needy people, still there are some governmental and NGOs organization that provided social security for peoples in need either partially or fully. Therefore, due to financial,

researchers and time limitations assessing all those organizations in the Addis were impossible, so that taking a sample and exploring the issue through case study research design is the only solution or relevant research methodology to answer the research questions.

### **5.2. Sampling Technique**

Non probability sampling technique was employed. Since needy peoples who are accessing basic social security coverage in the MHAs are mainly elders, physically and mentally disabled persons, identifying the appropriate or representative amount of sample through probability sampling and having or taking active respondents were difficult. Therefore, in order to access active and capable key informants from support receivers, staffs and volunteers in the organization, purposefully identifying those persons having sufficient information and physically and mentally strong respondents by non-probability sampling, specifically through purposive sampling is appropriate sampling technique.

Accordingly, from 1500 total population who are receiving support in the organization, 431 are elders, 556 are mentally disabled, 318 bed-ridden and 195 physically disabled peoples. Therefore, the target populations



are 431 and from these 10 active and capable support seekers were purposively selected for interview. In addition, 5 volunteers and 5 staff members in the MHA were participated in the research through intensive interview.

### **5.3. Data collection tools**

Primary and secondary data have been be utilized. As to primary data, since majority of target groups are elderly as well as mentally and physically disabled people they can hardly fill questionnaires. So that semi structured interview and observation were appropriate data collection tools that employed by the researcher. Document review, video archives, photographs, etc. are the source of Secondary data.

### **5.4. Method of data analysis**

In analyzing data, the researcher employed content analysis through three procedures that are organizing, summarizing and interpreting the data. After collecting the data, through different data collection instruments, they were categorized into major ideas for their specific cases to shape the basic research questions. As a result, this helps the researchers to summarize the data successfully to the case. Then, the organized and summarized

data was discussed or interpreted carefully.

## **6. Result and Discussions**

In order to answer the research questions and to meet research objectives, which is pertinent to the role of humanitarian association in addressing basic social needs, ten support receiver or needy persons, five staff members and five volunteers in the MHA were participated in research. Based on the generated data, a number of relevant ideas or concepts identified through content analysis and organized as a major topic up on which the result and findings of the research thoroughly presented.

### **Table 1<sup>8</sup>**

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<sup>8</sup> Demographic characteristics of research participants; (from a surveyed data)

### **6.1. Cause and consequences of social security problem**

The major or the serious social security problems faced elderly, mental and physical disabled people are shelter, food, clothes and health problem. These problems are the typical feature of majority of developing countries who are impeded in vicious circle of poverty or countries living in abject poverty.

The severity of the problem is unquestionable, since it is easy to observe while moving elsewhere in Addis. In addition the research participants express their feeling as follows:

Off course, there is a thought that 'seeing is believing', rather which would be living is believing as it fully addresses the pain. I don't want to say live there and test it, but go on the street of Addis, under the bridge of train and around the compound and/or in the compound of the church you can get a lot of elderly and physically disabled people dwelling there (SSRRP1 & StRP2, HMHA).

The researcher also recognized the seriousness of the problem during observation. As it identified during interview, among those social security problems that mentioned, the problem of the shelter is the first and critical almost majority of research participants agreed up

on it, which is coercing them to dwell on the street and around churches. According to interview, the second serious social security problem that exposed them to street life is the problem of health or suffering from disease or physical and mental disability. They believe that, the residents of Addis are not hesitate to provide food and clothes but regarding shelter and health care they fear to take needy people to their home.

The causes of these social security problems are various, complex and interlinked to each other. The underlying causes that contribute for prevailing social security problem in Addis can be depicted to economic, social, cultural, behavioral and political factors. Among economic factors that contribute to social security problems includes, poverty, inflation or the expensiveness of basic commodities and unaffordable house rent are the major one.

Migration from regions to Addis Ababa in order to seek better life or job, firing from the job, shortage of money to save while they were working, lack of livelihood to support their life like, agricultural land, lack of job which would be performed by the level of elderly people, displacement by government for the purpose of development or for the rehabilitations of the city

and closed opportunity and place to make small business which can be carried out by the level of elderly people are significant contributory factors for the unaddressed social security coverage. According to the one of the research participant from the management of the organization, as he tried to identify the reason why they exposed to mental or/and psychological problem that leads them for mental ill due to lack of job opportunity after graduation especially for those youngsters is among the major cause of economic factors ( StRP2, HMHA).

Social factors that aggravating the social security problem in the city may embody health problem, mental and physical disability, lack of any relatives or citizen that can help them, lack of energy or power due to disease and old age and as a result dwelling on the street. In addition, conflict between families especially at the old age leads at least one of the family member either wife or husband to street life. Lack of old age pension is the other problem that exposed to lack of basic needs, especially when they affected by disease and at the old age. This is critical problem for those persons who were working in military or private sectors, since they are

forced to experience the worst outdoor life.

The cultural problem is among the tangible contributory factors that deserved due attention by the research participants or interviewee, as it noticed by them, deteriorations or declining trends of our culture regarding helping each other, the increasing trends of selfishness in these generation, the refusal of relative to provide basic support for their needy relatives critically deteriorate their hope and exposed them to street.

The behavioral problem is among the serious causes that leads needy people to the life on the dust. Corruption is the major causal factor that repeatedly raised and identified through interview conducted with the research participants. For example, according to them, accessing or getting low cost *Kebele* house is hardly possible for poorest people like them. This is due to corruption and bad governance that dominate the system of the government which is the typical characteristics of behavioral problem.

Although, the low cost *Kebele* house is basically had the purpose of supporting the poorest, in reality, *Kebele* Officials never give priority for them, rather they give these houses for the economically capable people and for the

government officials through negotiation or give and take which is explicitly called corruption. In the same manner low cost and/ or affordable condominiums house, *Kuteba* or *Mengist betoch* did not provided for needy people for the same reason corruption. Commodities like oil, wheat, floor and the like are not centering the destitute of the city, as a result their fate limited to dwell in the slums and plastic shelters.

According to the research participants, there is immoral practice that performed by some families, which is the practice of displacing or pushing away mentally disabled people from their home rather than providing treatment for them. Regarding political factor, lack of sufficient social security converge from the government side for the needy citizens and the ignorance or the exclusion nature of government system for elderly and mentally disabled people are the most important causes for the a given life on the street.

## **6.2. Life of elderly and mental disabled people in the MHA**

Under this sub topic the whole life of elderly and mental disabled people living in the MHA has analyzed and discussed. An issue related with their previous life, when and how joins MHA, confidence or their

feeling and in general the overall adequacy of service provision in the organization is the major discussion area of the research that will be discussed and presented.

Majority of research participant were joined MHA before 2 to 4 years. They join the organization in different ways. According to some interviewee, they came here through communications of persons who were visited *Mekdonia* and having information have told them and also for *Mekidonian* workers and then, the workers of the organization came and took them to the MHA (SRRP7, HMHA)

There are also support receivers who join *Mekidonia* through communications of their doctors with organization's social workers and management (SRRP1, HMHA). The other heard about *Mekdonia* and someone brought to *Mekdonia* and begging the administrator of the organization to join, but the applications was accepted after two month and then joined and start life there (SRRP10, HMHA). As they said, the delay of two month is due to the criteria of the organization, since they assess the back ground of needy people with the line of their criteria which is also approved during interview with the management of the organization.



As to one of the interviewee, "although the workers of MHA were asked to join the organization, I was refused 3 times to join, because I consider this place as religious institution, but lately, due to car accident I lost my power to work and I get here asking by myself." (SRRP8, HMHA). Others known about *mekidonia* before but when the life becomes unaffordable to them, they apply and join *mekdonia* after the organization has clarifying or assessing their situation according to the criteria of MHA.

Almost all participants of the research and as to observation of the researcher including reviewed documentary, majority of support receiver in the organization have been brought to the organization from the street or/and plastic shelter at the situation they were bedridden. One of the respondents was says that, "I was waiting for the death by sleeping on the road and then the social workers of the MHA have been brought me here." (SRRP9, HMHA)

The researcher tried to assess where they were before coming to the MHA. According to research participants StRP2 and VoRP3, Elderly, mentally and physically disabled persons were dwelling under the bridge, begging and living on the street, from the hospital, in the and/or

around the compound of churches even for more than ten years and in the plastic house here and there. As to one of the respondent, she was working as homemade in the private house but after time, due to disease and lack of energy to work there, the owner or her masters fired her and thus dwell under the bridge of the train (SRRP4). She sorrowed about those elderly and mentally disabled peoples who are dwelling in the small slums without food and health care. She noticed that, the problem is so wide; there are a lot of elderly and mentally disabled people who couldn't get a chance to come here.

According to research participants from the support receivers, the organization or MHA provided them with the essentials of basic needs like, food three times a day (breakfast, lunch and dinner), bed with two counterpanes and blankets, shower and health care. Regarding health care they give service both in their clinic and outside through reference. Two of the interviewee witnessed the service provided to them by medical section, "By attending medical treatment for my eye, now I am enabling to see and go independently after ten years."(SRRP8, HMHA). I was mentally disturbed or had mental problem but now I am free from

mental problem because of treatment given to me here"(SRRP2, HMHA)

They also raise the relative freedom, training regarding different skill like weaving, handcraft etc. given to them. On the other hand, one of the participants explained the challenges related with the treatment outside of their clinic. Provision of dipper for those disabled persons who could not control themselves to use toilet and keeping their sanitation as well as burying them when they die is among the service provided for the elderly, mentally and physical disabled peoples in the MHA. "Generally speaking, 'Social Security' means "safety and freedom from fear of want and hunger, and it is applied to society as a group of inter-related and inter- dependent people<sup>9</sup>

Majority of the research participants from the support receiver living in the MHA are satisfied by the service provided to them by organization when they compare with their previous life. To quote some of their words, "for me everything provided by organization is sufficient, even sometimes I wish if I can share for those peoples in critical problem as I previously was"(SRRP8, HMHA). And the other respondent says, "For me

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<sup>9</sup> The Encyclopedia of America: Vol.26, 1960

*Mekidonia* is the paradise on the earth" (SRRP4, HMHA).

Although as it mentioned previously, majority of the needy people in the MHA are satisfied, they still have some suggestions or complains that should be solved or addressed. We will present or discuss at the end of this sub topic issues related with some of the suggestions and/or complains raised by both those satisfied majority and unsatisfied minority. As it is identified through research, especially through documentary analysis that focuses on the situation before and after the life of *Mokidenia*, it is not impossible to conclude the observable change or difference on the support receiver in the organization.

It is plausible to present some of participant's statement as it is. "We were dust before joining here but we are now bridal, it is difficult to compare (SRRP4, HMHA). I don't have photograph to show you in order to understand the clear difference (SRRP5, HMHA). My health is now good, previously I couldn't move but now I am healthy, I was blind but now I can see, even when I wear good clothes my previous friends did not identify me due to radical change on me (SRRP10, HMHA). Now we are mentally and psychologically stabilized or settled. On the street may we can get money, but we

spent it in meaningless things and whatever so, our life on the street were terrible (SRRP6, HMHA). In our previous street life, dust, rain and sun ray was attacked us and even we were living by fear and stress by thinking about who buried us when we die. These all is now passed and we are now confident by this organization.

Except few interviewees from support receivers, around 80 percent of the needy people living in the organization have a confidence on the organization, in other word they don't have fear to back to the previous life. They talk confidently, They are happy and confident, because as to them, the government provide them 30,000 meter square of land and the organization attempts to run different projects that costs around 300 million Birr to be self-reliant, so that we are confident. But the problems related with management issues should have to be solved in order to secure the sustainability of organization and their selves as well.

As it indicated in previous page, there are some suggestions and/or complains from support receivers regarding service provided to them. The suggestions and complains are almost depicted to all workers in MHA, except the founder of the organization and his wife, who

are they called 'The Angels'. According to some interviewee, food and care that given for the patient on the bed is not sufficient, medical service is still not sufficient in our compound but sometimes they get treatment through reference to other hospital and in addition some workers in the MHA did not take the patient to the clinic until they are severely suffered or affected. Getting live sustain food that prescribed by physician for those patients like diabetes and others is difficult and lack of medical care and health checkup for workers in the kitchen are among the suggestions raised in the organization.

As to majority of research participants, there is no as such shortage of resources in the organizations, but the problems emanate from lack of efficient and effective utilization of resources and service provider or workers of the MHA. Lack of coffee to drink is the other critical problem to them, the organization make coffee only three times a year which did not fit with their demand. Partiality based on religion and ethnic group from the workers of MHA to the service receivers and conflict between elderly people are among complains or suggestions that raised by majority of the service receivers.

The critical problem almost raised by majority of the research participants from the service receiver is, majority of the workers either recruited staff members or volunteers working in the MHA are protecting or keeping elderly people to not communicate with visitors, local people and with the founder of organization and his wife. During observation and interview with research participants the researcher recognized that, the organization did not organized and install modern organizational system which fit with size and budget of the organization.

The interviewees argued that, due to lack of educated personnel, there is no modern working system and thus, the management system in the organization is too weak to manage the Organization. Everything is performed in a traditional way or in a backward manner and there is no responsibility and accountability that govern the workers in the organization. The workers have no idea about the objectives of the organization and the founder; they did not have any training or awareness related to their job, as a result, they did not have commitment and work only superficially.

As to one of the research participant, there is a critical problem regarding control

system or crosschecking of the workers, and hence, the store is not using formal entrance and exit vouchers, which leads some resources like clothes, shoes and foods to be sold or afford for their relatives or friends by some of the organization workers. Some of the suggestions or complains that raised by support receivers are seems to be true or fact as they coincide with the researcher observations.

### **6.3. Efforts and future prospects of MHA**

Currently the organization has been supporting 1500 elderly, mentally and physically disabled people in the organization by providing basic needs. The organization accepts needy people or the destitute based on the criteria set by the organization through the assessment of the committee. According to research participant from the staff and volunteers, the main criteria is a person who have no any relatives and does not support himself due to disease, physical and mental disability, and old age. According to ILO, the main purpose of social security coverage is to protect the most vulnerable groups outside the labor force like people with disabilities and old people who cannot count on family support, and who have not been able to



make provisions for their own pensions.

The other criterion is when Ministry of Labor and Social Affairs send the needy people with letter and the organization accept without any further evaluation. In addition to these, the basic criteria that the organization accept the needy people is by further assessing, when somebody call and inform the organization about the critical situation of needy people. And then the MHA send their social workers and take a picture of them, after that the committee evaluate according to the criteria of the organization and approve whether they accepted or not.

According to the administrator of the organization, the basic social security coverage should necessarily provide by organization are food, clothes, shelter, bed with its full package, provision of special food for patients according to physician prescription, medical treatment both in organization's clinic and outside hospital if it referred. Keeping their sanitation including their body, providing dipper and change for them for those people using it, accompany to their worship place and burying them when they die according to their religion and places are the mandatory of the organization. In addition MHA try to provide them different skill

trainings for those capable needy persons. Regarding provision of prescribed food there is a contradiction between care receivers and staff members, since one of the complain of support receivers is depicted to lack prescribed food by physician.

The main sources of the resource that used to fulfill the needs of the needy persons in the organization are primarily the donation from the Ethiopian people both in kind and cash. the custom authority provide clothes when they catch on the border or get it, 8050 lottery and sometimes they ask for support any government or non-government institution either materials or anything that can help the organization, when wedding ceremony held there the bridals donate them, visitors and any generous peoples help t anything important for the organization. The MHA also appreciate and recognize the support provided to them from the government, especially, regarding land, telephone and other services.

Based on the observation and responses from the research participants, the human, physical and material resources are not sufficient. Especially, regarding health professionals the problem of the organization is critical and they need additional volunteer.

Although there are limitations, the effort made by organization could not be undermined. To solve the problem of health professionals or workers, the organization has been discussing with Ministry of health and one health professional has been recruited for MHA. In addition, Emanuel Hospital is also on the process to recruit professional for them.

Regarding the sustainability of the organization, they try to put strong foundations. For example, the MHA have strategic plan that enables them to generate income and help them to be self-reliant, for instance there are projects that under constructions and on the services like, business center, flour mill, wood work, making or producing different hand craft works, poultry, leather work, bamboo work and etc. Currently they have built more than ten buildings on their new place called *Hayat Chaffe*, which are serves for different purposes.

**7.2. Recommendations** As it observed from documentary, archives and responded by research participants, there are some elderly, physically and mentally disabled people who were sick and incapable when they join the MHA, but after the treatment and provision of care provided in the organization they became capable and productive. For example some of them

working in the workshop of the organization and produce some hand craft materials like carpet, sanitation tools etc. In addition some of them are now working as recruit staff members in the admin staff and as a guard of organization as well as working as volunteer in the MHA.

#### **6.4. Major challenges and mechanisms in addressing social security**

As to respondents, the main challenge of the organization is lack of license to proceed some of the projects of the organization due to complicated system in the government organization. In addition the ongoing construction by unknown owner on the area that given to MHA is the main challenge of the organization that can affect the future vision of *Mekidonia* and thus the life of those elderly and mentally disabled people in the organization.

Lack of cooperation between Government, non-government and community is the other challenge of MHA and the general bottleneck in addressing social security problem in Addis. According to the research participants, there are similar local humanitarian associations, that are established before 30 and 40 years but still supporting only 40 or 50 needy people which are

serving under their potential when we compare with the wide area of land they occupied. This happened due to lack of close supervision from the government side. As to the respondents of the research, they are mostly working out of the purpose of they were established for. In most cases they run private business which is not utilized by needy people.

According to respondents, those humanitarian organizations, who were established with the aim of supporting needy people, should deliver with the level of their resources or they have to stop personal or private business in the name of needy people. In this regard the government should identify those institutions working properly and wrongly, and facilitate experience sharing between these institutions. By basing these, the government should encourage and recognize those institutions working effectively and punish those works out of the purpose they were established for.

Lack of applicable policies and projects from the government that can minimize the social security problem of elderly and mentally disabled people is the major problem that deserve due attention from the government. The coordination between regional states and federal government is too weak in order

to minimize the social security problem of the country as the significant number of the respondents migrates from regions to Addis and hence exposed to the shocking life of the street. In general the challenges related with addressing social security problem in MHA and in Addis are critical and needs urgent solutions.

## **7. Conclusion and recommendations**

### **7.1. Conclusion**

The causes and consequences of social security problem are complicated and mostly interlinked with each other. Through this study, different cause and consequences have identified which are intertwined to one another. Economic, social, cultural, behavioral and political factors are the determinant or the underlying causes that leads people to the abject poverty what we call it the problem of lack of basic social security coverage, which includes lack of food, shelter, clothes and health care. As it identified through this investigation, tackling or overcoming this problem by intern needs the collaborated attempts which extend from District government to federal by including government bodies, NGOs, religious organizations, community and individuals.

Based on the research result, the researcher recommend some points that which are urgent and needs due attention from the concerned body.

- Lack of house is the major social security problem that exposes or leads or forced the destitute to live on the street. So that the government should prepare low cost or affordable houses for the poorest elderly and physically disabled people either for free or in a low rate for rent.
- Government, NGo, religious organizations and community should work cooperatively to minimize the problem of basic needs that faced elderly and disabled person.
- The government should design different projects and policies and also apply to minimize the social security problem of the city and country as well.
- Since, addressing social security problem is the duty of the government; it has to do towards fulfilling the interest of the citizens through supporting and accommodating needy people.
- Awareness creation is important in order to get those people like Biniyam and thus to have at least such kind of fifty organization in the country,
- Regional states should work regarding migration from rural area to Addis, since the problem in Addis is by far more

complicated when we compare to rural areas, therefore, regional state should facilitate production factors to the needy people that enables them work in their area and thus minimize migration and social security problem.

- Government should have to work as closely as possible with local humanitarian associations like MHA, consider them as its own duty, work together regularly to solve their problem and to capacitate them in order to minimize administration and other prevailing problems
- The problem needs more discussions and solution bearing ideas in different governmental and NGO organization, school and etc, to transform the current trends regarding social security problem.
- Every person should work to tackle this problem as its own main concern, he/she have to consider elderly and mentally disabled people as him/ her sisters and brothers.
- Creating job opportunity for elderly people that can performed at their level is mandatory, since it is psychologically and economically helpful both for them and their country
- Government organizations and community should go and visit them in order to have understanding the extent of the problem.



There are Humanitarian association that were established before 30 and 40 years but still supporting only 40 or 50 needy people while having wide area of land and resources, therefore the government should identify those institution which are working properly and wrongly and then support them in order to serve with level of their potential.

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