

# An Analysis of the Contributions of Compassion International on Poverty Reduction in Uganda: A Case of Ntungamo District

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## ABSTRACT

This study analyzed the contributions of Compassion International (CI) in the fight against poverty in Uganda with a case study of the CDCs in Ntungamo as a district. Specifically, the study explored the Compassion development aspects employed in reducing poverty, form of child plus family participation, the benefits obtained by poor children and their families from the services offered by Compassion, and the working relationship between CI and Local Government. The study employed both cross-sectional and descriptive research designs. The study explored a great collection and analysis of both quantitative and qualitative data. The study population constituted 1558 households that were beneficiaries of six CDCs in Ntungamo district. Simple random sampling was used to select 300 participants while purposive sampling was used to select 18 key informants. A Close and open-ended structured Questionnaire, face-to-face interview, Focused Group Discussion and observation were used to collect primary data. The study adopted descriptive statistics, content and narrative analysis to examine the development aspects, and the form of child and family participation in compassion activities, benefits obtained by poor children and their families from services offered by compassion and the working relationship between CDCs and Local Government in reducing poverty. The results showed that social-emotional development is the most effective approach used. There was a significant child and family participation nonetheless, child and family -sponsor relationship and communication were controlled which denied them more opportunities. Providing education to children was the most benefit received poor children but ineffective to poverty reduction. Income generations which is one of the major benefits was not realized in beneficiary's households thus the sustainability of dependency syndrome. The study concluded that the working relation Compassion International and stakeholders was poor. It was therefore, recommended that compassion international should provide full education sponsorship and greatly empower beneficiaries through income generation initiatives and encourage the government to actively participate in her programs for successful outcomes.

**Key words;** Poverty Reduction, Child sponsorship, Working Relations

## INTRODUCTION

The overall aim of the study was to explore the Compassion development aspects employed in reducing poverty, form of child plus family participation, the benefits obtained by poor children and their families from the services offered by Compassion, and the working relationship between CI and Local Government. The study made a critical analysis of the performance of compassion international and suggests the strategies to walk away from forthcoming performance challenges in poverty reduction among the vulnerable people in the households.

Globally, in trying to find out how the Child Sponsorship program employed by compassion was effective on reducing poverty, Wydick (2013) discovered significant statistical implications on school years, completion rates, as well as the likelihood and fineness of finding work and choosing a profession. Moreover, a follow up study in Uganda disclosed that sponsored children, when compared with their non-sponsored siblings, scored higher on an adapted Rosenberg Self-Esteem Scale-a widely used self- report instrument for evaluating individual self-esteem (Ross and Wydick, 2011). These empirical results seem to align with teachings found in Proverbs 22:6 "Train up a child in the way he should go; even when he is old he will not depart from it" (New

International Version). Child development centers give impoverished children a pathway out of poverty through educational opportunities (Taylor, 2016).

The studies conducted by Rutabaga and Mulyungi (2017) and Mwangi (2010) showed a positive contribution of compassion towards poverty. However, the nutritional support the beneficiaries were very less and men had less participation in IGA activities. In other words, Compassion International does not cover the requirements of beneficiaries 100%. In the researcher's points of view, less nutrition support lead to children malnutrition and stunted growth among the children that perturbs a child's physical, mental growth and poor performances in schools. Leaving behind men's full participation in the Income Generating Activities as women still stagnate poverty reduction in the households. Not all the above researches found out the impacts on the spiritual development aspect of children, therefore, this research found out how compassion International dealt with the Spiritual development aspect in poverty reduction.

Poverty Reduction is a set of measures both economic and humanitarian that intend to permanently lift people out of poverty (Mulyungi, 2017). Accordingly, Poverty reduction majorly occurs because of general economic growth. Aid and government support in health, education, and infrastructure helps growth by increasing human and physical capital (Akatwijuka, 2024). In 2013, the World Bank reported that an estimated

10.7 percent of the world's population lives in extreme poverty. This percentage represents a staggering 767 million people living on less than US\$1.90 a day (World Bank, 2017). Currently, the report shows more than half of the extreme poor live in Sub-Saharan Africa. In fact, the number of poor populations in the region increased by 9 million, with 413 million people living on less than US\$1.90 a day in 2015 (World Bank, 2019). One of the many aspects of concern is the effect of poverty on children's development in the region. Poverty has severe consequences on children's psychosocial and physical wellbeing (UNICEF, 2016).

In Uganda's context, national poverty level is at 21.4% (UBOS, 2019) and currently stands at 27% (New Vision, June 5 2020). Poverty reduction strategies have development plan designed and implemented through the participation of all involved in one way or the other in poverty reduction and in other related issues. One of these stakeholders is the Non-Governmental Organization (Cordeiro and Nyaruwata, 2016). Therefore, this study investigated what Compassion International was doing to reduce poverty in Uganda thus a topic "Compassion International and poverty reduction in Uganda: A case study of Child Development Centers in Ntungamo district".

Child Sponsorship and the Marketization of Human Development theories offered fundamental insights to this study, each addressing each addressing distinct facets while complimenting one another. Child Sponsor one of the methods used to combat poverty among the underprivileged and disadvantaged in society is child sponsorship. Child sponsorship programs originated as a tool to motivate individuals in wealthy countries to mobilize resources to help reduce poverty in developing countries (Wydick et al, 2013). Moreover, a follow up study in Uganda disclosed that sponsored children, when compared with their non-sponsored siblings, scored higher on an adapted Rosenberg Self-Esteem Scale-a widely used self-report instrument for evaluating individual self-esteem (Ross and Wydick, 2011). Therefore, this study will also seek to understand the CI uses the model/theory in poverty reduction in Uganda.

Critics have argued that child sponsorship could alienate the relatively privileged sponsored children from their peers and may perpetuate harmful stereotypes about third-world citizens being helpless. They also claim that child sponsorship causes cultural confusion and unrealistic aspirations on the part of the recipient, and that child sponsorship is expensive to administer. In some cases, charities have been caught sending forged updates from deceased children. More generally, Roodman (2008) says that child sponsorship creates "a tension between creating the psychological experience of connection that raised money and the realities of fighting poverty". International's activities in the Ntungamo district and evaluated the organization's effectiveness in reducing poverty.

## MATERIALS AND METHODS

The study employed both descriptive and Cross-section study designs. In the study, the researcher used both

quantitative and qualitative research (Mouton, 2006; Mason, 2002). The core study was carried out in South Western Uganda's Ntungamo district. The area was deliberately chosen because of being heterogeneous and concentrated with Compassion CDCs. Due to political unrest in Rwanda, it serves as a resting place for a large numbers of refugees (UBOS, 2024). Six sub-counties of Ntungamo Central, Rwashameire, Ruhaama, Murambi, Rubaare and Rubaare TC were employed as the study's focus. The population was 1558 beneficiaries in six Child Development Centers (CDCs) in Ntungamo district provided a sample size of respondents to enable the researcher answer the research question due to the fact that the district had only six CDCs. The study was carried out amongst the CDC beneficiaries and stakeholders. To determine the ideal sample from the population, the study used the modified sample determination formula by Yamane' formula:

$$N = 1558$$

$$sn = \frac{1 + Ne^2}{1 + 1558 \times 0.05 \times 0.05} \approx 318$$

The study employed simple random sampling to select the beneficiaries who were recruited at least for the last 15 years after Compassion had started her ministry in the district. Key informant stakeholders were chosen via deliberate/purposive sampling (Creswell).The study was conducted among the beneficiaries as well as Compassion International stakeholders. A total of 318 respondents from various categories were intended to be included in the study using various sampling methods. Using simple random sampling, 50 beneficiaries that were 20 males and 30 females were chosen from each Child Development Center to make a total of 300 beneficiaries. By using purposive sampling, 30 participants from six CDCs were chosen to take part in Focused Group Discussions whereas the 18 key informants were interviewed. These included; 6 Project Directors and the 6 Overseers of the CDCs, 6 area LC1 chairpersons where the CDC is located.

## RESULTS AND DISCUSSION

The researcher observed a difference in the nature of participation, based on the CDCs, where participants came from was between 14% and 18% of the service beneficiaries. Least participation appears to have come from Kafunjo (14.2%). Possibly, there were fewer beneficiaries in Kafunjo compared to the other CDCs. According to the statistics, all the targeted CDCs were fully represented and the beneficiaries thereof took part in the study. This was because the beneficiaries were accessible and willing to take part in the study.

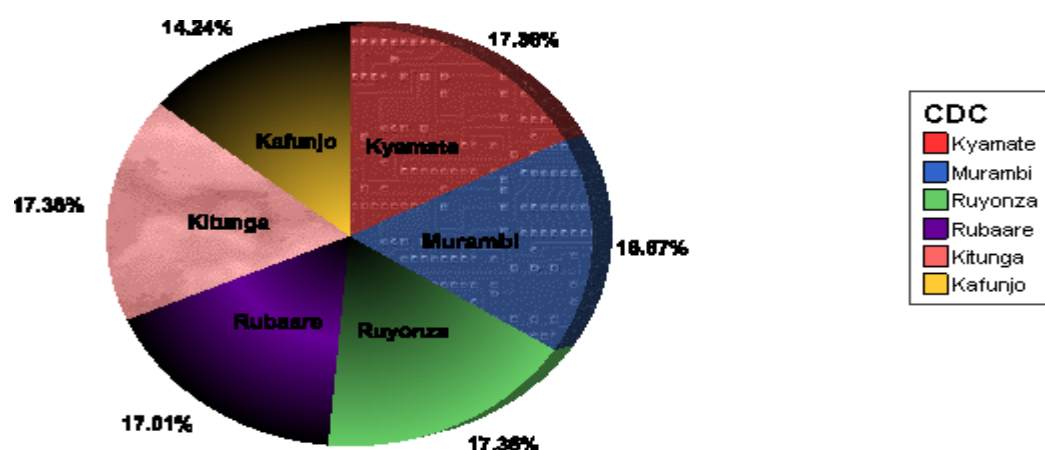


Figure 1: CDC of Participants

Source: Field data, 2024

### Development Aspects used by Compassion International in the poverty reduction

The study found that social-emotional development is the most effective development aspect that Compassion International used in the fight against These results are in line with (Frankel & Hobart, 2004) who declared that social-emotional advancement begins from close attaching to full and rich associations with a perplexing organization of youngsters and grown-ups. According to respondents sponsored children had a high self-

esteem. These findings are in line with (Ross & Wydick, 2011) who contended that supported youngsters have a high self - regard contrasted with non-supported kin. This was summed up that compassion beneficiaries received good parenting, guidance and counseling got involved in community work and socialization.

“During general meetings and seminars, we are always guided, counseled and sensitized to always get involved in community work and socialize with our communities and families ... our children receive the same sensitization during their center days...we are also trained on positive parenting dangers of domestic violence

...” A participant wrote in the questionnaire.

Be that as it may, respondent said that sponsoring of only one child by compassion challenges does no lead to social emotional development of all children in a household. These findings are in line with (Ahimbisibwe, 2018) who found out that one child sponsorship in a family unit leave an enormous number of penniless kin not supported accordingly many lacking confidences and this sabotaged poverty reduction in the entire household.

Table 1: Showing Emerging Themes on Development Aspects used by Compassion International in poverty reduction

Sn	Development Aspect	Categories	Emerging Theme
1	Spiritual Development	Educating youth and caregivers on how to pray Drowning families to God via spiritual trainings Bible reading Spreading the gospel	Knowing God, unity, love togetherness and sharing
2	Physical Development	Promotion of hygiene Environmental protection Health support Health education Distribution of soap and Vaseline Given water tanks	Good Health and environmental protection
3	Cognitive Development	Formal education Informal Education Vocational training skills	Acquisition of knowledge and skills
4	Socio- Emotional Development	Protection of children against abuse Encouraging children in socialization, group work, community work and helping the elderly	Positive parenting, child protection and socialization
		Positive parenting trainings Guidance and counseling Education of adolescents	

Source: Field data, 2024

## Forms of Child and family participation in Compassion International Development activities

The study found a significant child and family participation in Compassion International Development activities. From the above findings, in social work practice, the full participation of children and their families in project meetings programs and activities would give them the automatic ownership of the project, take part in planning, implementation and evaluation programs thus making them part of the decision making and engagement in project initiation and project execution were significantly correlated. “As caregivers, through sending messages to via our children, announcements in the church and radio stations, we are sometimes invited by the Project staff to attend meetings and seminars where we are trained and discuss matters affecting us our children and family...” One of the respondents attached to FGD-B revealed.

However, Thomas (2015) realized that project activities for the beneficiaries were decided by both the CDC staff and CPC without the input of the stakeholders themselves who are the primary beneficiaries. This come to disagree with this study that realized that the beneficiaries are first consulted and represented in the CPC.

**Table 2: Showing the Recurrence of Gatherings**

Recurrence	Response rate	Percentage (%)
Once a month	10	03
Quarterly	201	70
Twice a year	60	21
Once a year	17	06
<b>Total</b>	<b>288</b>	<b>100</b>

Source: Field Data, 2024

**Table 3: Showing the Sort of Gathering Recipient Go to with the CDC**

Sort of Gathering	Response Rate	Percentage
Planning gathering	40	14
General gathering/conferences	220	76
Consultative gathering	23	08
Both	05	02
<b>Total</b>	<b>288</b>	<b>100</b>

Source: Field Data, 2024

## Benefits obtained from the services offered by Compassion International Child Development Centers

The study found that providing education to children was the biggest benefit obtained by poor children (beneficiaries) in fighting poverty but not efficient. Respondents indicated that their children can read, speak, and write effective education. However, it was heavily hampered by one child sponsorship per household, failure of full fees payments and ineffective communication between beneficiaries and the sponsor and project children attending poor schools. It was also found out in the study that most CDC beneficiaries can complete



primary schools, most drop out from secondary school because of failure to have full fees, very few in are in tertiary institutions of learning. „My father abandoned me and my two little siblings... Compassion paid my school fees from primary up to now in the university doing a diploma in nursing at Kampala International University though she pays half of tuition now...it has always been is a very big burden for me to raise this half tuition... I am unsure if I will succeed in finishing this level...“”. A family child headed beneficiary attached to FGD-A confessed.

The study also found that Compassion International was not successful in helping households scale their income generating activities and projects. „... I have never received anything from Compassion that brings for my household either daily, weekly, or monthly income...“” one respondent attached to FGD-C. “We were called in the meeting at the project and given tree seedlings for planting. Some of us have nowhere to plant them because I and my children have no land and we are renting in Ntungamo town...” One of the beneficiaries attached FGD-A concluded.

Table 4: Showing Benefits Obtained by Poor Children and their Families

Variable list	No (%)	Yes (%)
<b>Child protection</b>		
Church partners have preached me on the importance of child protection.	1	95.2
My child is protected from harm.	0.3	96.9
My child knows what it means to live in a safe environment.	11.8	78.2
My child is sensitive to the act of domestic violence.	14.2	80.9
<b>Average</b>	<b>6.83</b>	<b>87.8</b>
<b>Education</b>		
My child is able to speak.	0.3	95.9
My child is able to interact with other children.	2.1	94.1
My child is able to write	12.2	83.7
My child is able to read.	13.5	82.3
<b>Average</b>	<b>7.03</b>	<b>89</b>
<b>Income generation</b>		
My household has an income generating activity.	59.8	34
My household has a monthly income.	71.5	23.6
My household has a weekly income.	82.3	13.5
My household has a daily income.	83.3	12.9

<b>Average</b>	<b>74.23</b>	<b>21</b>
<b>Health and nutrition</b>		
My child has access to health education.	2.1	92
I have been receiving training on preparing a balanced diet.	3.8	91.7
My child has access to balanced diet.	11.1	82
My child can meet my child's medical bills.	16	78.1
<b>Average</b>	<b>8.25</b>	<b>85.95</b>
<b>Water and sanitation</b>		
My child ensures good personal hygiene.	2.4	91.3
There is a drying rack in my household.	6.6	88.2
My household has a clean toilet.	10.1	83.3
My child has access to safe water.	19.1	75.7
<b>Average</b>	<b>9.55</b>	<b>84.63</b>

Source: Field data, 2024

### The working relationship between CDCs and Local Government Authorities

The study found that there was a poor working ship between CDCs and the Local government authorities in Ntungamo district. A key informant attached CDC-E had this to say; „As CDC employees, I doubt we interact with local government officials on a regular basis. We only see the local government officials checking on us once a year, or even after two years, which gives the impression that we are functioning independently. Nothing he instructs us to do—or not to do—even when the district authentic arrives. We no longer share our work plans with them, and they no longer share theirs with us. Without contacting the local government officials, we only plan and carry out our tasks. Rarely, we are invited to Local Government meetings...”.This poor working relationship between Child development Centers was found to sabotage poverty reduction among the poor households in Ntungamo district.

## CONCLUSION AND POLICY RECOMMENDATIONS

### Conclusion

The study conducted and analyzed the role of Compassion International and poverty reduction in Ntungamo district in Uganda, rendering reference to CDCs. The findings were based on a response rate of 96%. Social emotional development was the most effective development aspect that helped children under the care of Compassion International. However, the child and family-sponsor relationship and communication were controlled which denied them more opportunities.

While Compassion International mad an attempt to reduce poverty among households, providing education to children was the most benefit received. However, it was ineffective because very few children under Compassion International made it to economic independence. The control of child and family -sponsor relationship and communication was found to deny beneficiaries more opportunities. The fact that some households were unable to establish income generating projects confirms this handicap. They had neither daily income, weekly income, monthly income nor annual

Income. This sustained dependency syndrome of the beneficiaries on Compassion thus poverty remained. The study recommended the Compassion to strongly ensure that the household beneficiaries are supported with an Income generating activities to make them economically independent with a weekly and monthly income. This will stop dependency syndrome.

The working relations between the CDCs and local Government authorities was poor. In the event that working relations was ignored, Compassion International might have no visible role in her fight against poverty. Compassion International's success in her struggle towards empowering children would continuously depend on how local government authorities appreciate their role in this cause. Otherwise, like other non-government organizations countrywide, some of which have fallen short of the vision, the need for promoting working relations with local government authorities' participation remains core in the fight against poverty in Ntungamo district and Uganda at large. Therefore, the study recommends full participations of Local government in NGOs activities

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