



**COLLEGE OF ARTS AND SOCIAL SCIENCES**

**SCHOOL OF SOCIAL, POLITICAL AND ADMINISTRATIVE SCIENCES**

**FAMILY CONFLICTS, TRAUMA AND IGNORANCE: THE  
BARRIER OF SOCIAL PROTECTION IN MUHANGA  
DISTRICT: CASE STUDY OF BUREAU SOCIAL DE  
DEVELOPPEMENT DE MUHANGA**

**Thesis Submitted to the School of Social, Political and Administrative Sciences in  
Partial Fulfilment for the Award of Master's Degree in Good Governance Studies**

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## DECLARATION

This dissertation entitled “**Family Conflicts, Trauma and Ignorance: The Barrier of Social Protection in Muhanga District: Case Study of Bureau Social de Développement de Muhanga**” is my original work and has not been presented to any other institution. No part of this dissertation should be reproduced without the author’s consent or that of University of Rwanda.

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## **DEDICATION**

To my beloved husband Rutayisire Joseph, my late parents, children, brothers and sisters for their all kinds of support.

## **ACKNOWLEDGEMENTS**

The completion of this thesis is the result of efforts from different participants to whom I owe recognition. Without your moral, material and financial support or otherwise, this work would have been impossible. The following individuals are acknowledged for their special contribution throughout the study:

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Sincere gratitude to you all and may God bless you!

**MUTAKWASUKU Yvonne**

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## **LIST OF ACRONYMS AND ABBREVIATIONS**

<b>AEE</b>	: African Evangelistic Enterprise
<b>BSD</b>	: Bureau Social de Développement
<b>ECD</b>	: Early Childhood Development
<b>EDPRS</b>	: Economic Development and Poverty Reduction Strategy
<b>EICV</b>	: Enquête Intégrale sur les Conditions de Vie des ménages
<b>FGD</b>	: Focussed Group Discussion
<b>HIV</b>	: Human Immunodeficiency Virus
<b>MHI</b>	: Mutual Health Insurance
<b>NGOs</b>	: Non-Governmental Organisations
<b>REG</b>	: Rwanda Energy Group Ltd
<b>SACCOs</b>	: Savings and Credits Cooperatives
<b>SDGs</b>	: Sustainable Development Goals
<b>SPSS</b>	: Statistical Package for the Social Sciences
<b>UR</b>	: University of Rwanda
<b>WASAC</b>	: Water and Sanitation Corporation
<b>YWCA</b>	: Young Women's Christian Association

## **ABSTRACT**

This study was entitled “Family Conflicts, Trauma and Ignorance: The Barrier of Social Protection in Muhanga District: Case Study of Bureau Social de Développement de Muhanga”. The main objective was to assess the impact of Family Conflicts, Trauma and Ignorance that lead to the failure of social protection programmes among beneficiaries of BSD Muhanga. Its specific objectives were to identify different aspects of Family Conflicts, Trauma and Ignorance among beneficiaries of BSD Muhanga; to explore various difficulties within households in Muhanga district that lead to the non-graduation of beneficiaries and to assess the relationship between Family Conflicts, Trauma and Ignorance and non-graduation of beneficiaries of BSD Muhanga. The sample size was 20 respondents. Questionnaire and interview were used as data collection tools. The finding of this research showed that the dominant causes of non-graduation were mainly the conflicts and ignorance and slightly trauma. From interview held among many participants, beneficiaries of BSD Muhanga who did not graduate faced many difficulties related to ignorance and conflicts. The non-graduation is strongly related to the conflicts and ignorance of beneficiaries.

**Key concepts:** Family conflicts, trauma, ignorance and social protection

# **CHAPTER ONE: GENERAL INTRODUCTION**

## **1.0. Introduction**

This chapter treats the general introduction of the study. It is an introductory part of this research that aims to assess whether the Family Conflicts, Trauma and Ignorance are the root causes of the failure of the social protection programmes by considering the case study of BSD Muhanga. It focuses on the background of the study.

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

Social protection is composed by policies and programs designed to reduce poverty and vulnerability by promoting efficient labour markets, diminishing people's exposure to risks, and enhancing their capacity to manage economic and social risks, such as unemployment, exclusion, sickness, disability and old age.

According to the World Bank (2001), social protection systems help the needy people to cope with difficulties and shocks, find jobs, invest in the health and education of their children, and protect the aging population.

Social protection in the United States was established through the Social Security Act of 1935. It provides old age, survivors, and disability insurance benefits to workers and their families. Since 1965 it has also included health insurance benefits under the Medicare program. Social protection in the United States, as outlined in the Social Security Act, consists of three overarching services: benefits to workers and their families; health insurance programs (Medicare, Medicaid, and the Children's Health Insurance Program); and other safety net programs that provide aid to individuals and families facing hardship. In FY 2012 the federal government spent \$1.9 trillion on these programs, which was close to 55 percent of the total federal budget (ILO, 2013).

The last decade has seen social protection gaining centrality in the development agenda of East African countries. Several factors explain this heightened interest. First, despite evidence of considerable economic growth in the sub-region, poverty and vulnerability persist, prompting resurgence in awareness and debate about the effectiveness of growth alone in delivering the continent's ambitious development goals. It is also evident that

the safety net programmes that were introduced in the 1990s have not adequately addressed issues of poverty, risk and vulnerability. This policy response failure is in part a reflection of the complexity of poverty and its dynamics. However, social protection uptake in the sub-region has been much slower than in other developing countries (Charles Lwanga, N., 2013).

In Rwanda, the social protection sector and interventions have received more attention over the last five years. They are seen as a means by which to contribute to economic growth, to integrate people into the labour market, to slow down population growth, to improve human development through better access to health and education, and to reduce poverty. The mission of social protection sector of Rwanda aims at insuring all poor population to be guaranteed a minimum living standards and access to important public services, people who are able to work get opportunities for escaping poverty, and that increasing numbers of people are able to access risk sharing mechanisms that protect them from difficulties and shocks.

Moreover, the aim of social protection sector is to contribute to poverty reduction and other types of vulnerabilities and to encourage reasonable growth, which corresponds to the EDPRS II which aims at guaranteeing a better quality of living standards for the population of Rwanda by ensuring the social economic development and liberate people from extreme poverty. According to Rwandan Government, the definition of social protection includes four principles: protection, prevention, promotion and transformation. Yet, social protection is securing - it provides essential support to those living in poverty, it is preventive as it puts in place a safety net that can be activated to catch people in danger of falling into poverty. It is contributive. It supports poor people's investment so that they can pull themselves out of poverty. It is transformative. It aims to improve the social status and rights of the marginalized.

The combination of these four factors of social protection are critically in supporting sustainably many households to get out of extreme poverty and providing support to vulnerable who cannot graduate (including the elderly and chronically ill). This strategy aims at guiding the work of the social protection stakeholders during the EDPRS2 period, supporting coordination of efforts towards a common set of objectives, in order to get the most out of impact.

After the 1994 genocide against Tutsi, NGOs and civil society organizations came from all over the world to rebuild Rwanda. This could be seen especially in the following areas of intervention but not limited to: provision of free medical care to thousands of Rwandans, rehabilitation of infrastructures, provision of seeds, tools, animals, etc.

In this framework, the Civil Society Organization landscape in Rwanda is currently evolving and exists but in various forms and capacity levels with the utmost goal of working alongside the Government of Rwanda to foster the livelihoods of the communities.

In Muhanga District specifically, there are many civil society organizations that helped in the improvement of socio economic welfare of Muhanga inhabitants like Bureau Social de Développement, FH, FXB Rwanda and so many others. BSD has been engaged in many sectors of social life, such as food security, rehabilitation, health care, education, development programs, peace building, human rights, and environmental issues.

It is from this framework, that the researcher sought to undertake this research with the utmost goal of assessing the real causes of this failure of BSD social protection programs whether family conflicts, trauma and ignorance are among the leading causes or not.

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

Some people of Rwanda have different problems related to the social protection, mainly the extreme poverty which is persistent normally in countryside. Their poverty is due to insufficient land to cultivate while they have to live by agriculture. This bring them to incapacity to satisfy their basic needs such as access to healthcare, lack of sufficient food and incapacity to pay the school fees for their children.

Another cause of social protection related problems is the ignorance where it accentuates extreme poverty. From this ignorance, they are many negative results such as non-payment of Mutual Health Insurance, fear of using bank loans, etc.

Conflicts mainly those which occur in the nuclear family are those which keep families in poverty. The family that experiences conflicts loses the time to work as well as the harmony. They also lack of the coordination towards the common interest of the family.

Trauma also plays a role in the failure of social protection programmes. A person that suffers from trauma feels distress and is frequently ill. This is the barrier of fulfilling the social protection programmes.

During the period of support by BSD Muhanga, there were many beneficiaries who graduate and testified that the support of BSD has helped them to improve their livelihood tremendously. There are other beneficiaries who are small in number, who did not graduate and their situation worsened instead of improving. Thus, this research sought to see whether family conflicts, trauma and ignorance are the causes of no graduation which underpin the failure of socio economic development of some beneficiaries of social protection programmes of BSD Muhanga.

### **1.3. Research objectives**

The objectives of this research are two types: The general and the specific objectives.

#### **1.3.1. General objective**

The general objective of this research was to assess the impact of family conflicts, trauma and ignorance that lead to the failure of social protection programmes among beneficiaries of BSD Muhanga.

#### **1.3.2. Specific objectives**

The specific objectives are 3 and set as follows:

1. To identify different aspects of family conflicts, trauma and ignorance among beneficiaries of BSD Muhanga;
2. To explore various difficulties within households in Muhanga district that lead to the non-graduation of beneficiaries;
3. To assess the relationship between family conflicts, trauma and ignorance and non-graduation of beneficiaries of BSD Muhanga.

#### **1.4. Research questions**

The following are questions of this research:

1. What are different aspects of family conflicts, trauma and ignorance among beneficiaries of BSD Muhanga?
2. What are various difficulties within households in Muhanga district that lead to the non-graduation of beneficiaries?
3. What is the relationship between family conflicts, trauma and ignorance and non-graduation of beneficiaries of BSD Muhanga?

#### **1.5. Significance of the study**

The choice of this topic covering “Conflict, trauma and ignorance: the barrier of social protection in Muhanga District: Case study of Bureau Social de Development Muhanga” is of un-measurable importance, because Rwanda is one of developing countries with the majority of the population who are still under poverty line, where those population are facing many problems such as ignorance, jobless, homelessness, increase of population density, small number of children who access school, lack of health care, malnutrition, disability and dependence, lack of potable water, lack of income generating activities, lack of labour opportunity, prevalence of disease, etc. and all these problems are caused by the poverty which is at its higher level and different civil society organisations have come in order to help Rwandese to alleviate that poverty and improving their living standards.

So, the researcher wanted to examine why some families and local communities being assisted by local NGOs like BSD get their socioeconomic conditions boosted but others do not while they all benefit the same support.

Apart from the above stated reasons this research also was conducted for the following interests:

Personally, this study helps the researcher to gain knowledge and skills for providing possible advices through the research findings and being able to solve critical challenges

facing different Rwandese and Civil Society organisations. Furthermore, this work provides a good opportunity to link what the researcher has studied during academic training as theory with practice in daily life in Rwanda. And as a future local governance member; it helps the researcher will upgrade the understanding on how civil society can be one of the tools of poverty reduction strategies and rural economic development.

Academically, this study is very important not only for the researcher, but also for the UR community, because once the research reports is given to the library at the end of the study then it is the property therefore students of UR and other researchers who have interest in the field of civil society organisations contribution to socio-economic development should use it as reference.

Politically, Rwanda is a country that is struggling with many problems after the Genocide against Tutsi of 1994, among those problems poverty is generally the main challenge that Rwandese community is facing. Hence this research would help the development partners' especially civil society organisations in Rwanda to know the constraints faced by civil society in our country especially in Muhanga District, in order to achieve their objectives. It would help them to focus on critical challenges to overcome those challenges. The local government and civil society organisations will know the priorities to focus on, for getting the best means of poverty reduction for its population through Entrepreneurship promotion.

Socially, because of the provision of possible and necessary recommendations, this study helps the Rwandese to solve the major problems identified during the study. Thereafter there will be an increasing efficiency and boost of economic development in rural areas. It also provides necessary recommendations on how people can develop themselves by reducing poverty among them. This motivates them to increase their living conditions.

Scientifically, the researcher assumes that the findings of the current study will help UR students, lectures, and other scholars in general to understand the impact of entrepreneurship as a new economic policy aimed to handle poverty and its negative effects on Rwanda. Furthermore, this research will be used by upcoming researchers as reference.

## **1.6. Scope of the study**

This study is limited in space, time and in field. In space, this study was conducted in Muhanga District located in Southern Province.

In time, this study is based on the period of 5 years, between 2013 and 2018, the period was judged to be deemed relevant due to the fact that Bureau Social de Development has implemented a number of projects that aimed to boost the socioeconomic development of the local communities in its operational area. In terms of content, the groups and the participants in the study were chosen from those who were directly and indirectly affected by the projects of the case study organization.

In field, the study fits in the domain of good governance due to the fact that the Government sets policies among which there are social policies that are meant to foster the socio- economic development of the population. In addition, the study matches with the domain of good governance basing on the fact that it is characterised by Consensus orientation where Good governance mediates differing interests to reach a broad consensus on what is in the best interests of the group without any discrimination and, where possible, on policies and procedures and also by equity where all people, men and women have opportunities to improve or maintain their well-being.

## **1.7. Definition of the key terms**

### **1.7.1. Conflicts**

Kramer et al., (2006, p.794) defined conflicts as “interpersonal tension or struggle among two or more persons whose opinions, values, needs or expectations are opposing or incompatible”

They are also “Any conflicts that occur within a family between husbands and wives, parents and children, between siblings, or with extended families (grandparents, aunts, uncles, etc.)”. (Heidi, 2013, p. 34)

In this research, family conflicts are quarrels, fights, misunderstanding that occur within family members supported by BSD Muhanga.

### **1.7.2. Trauma**

According to Collins Dictionary (2004, p. 279) trauma is “a very severe shock or very upsetting experience, which may cause psychological damage. It is also emotional shock following a stressful event or a physical injury, which may lead to long-term neurosis”.

In the context of this research, trauma is a very intense violation of mental integrity brought about by intrinsic and extrinsic causes.

### **1.7.3. Ignorance**

Cambridge Dictionary (2005, p. 688) defined ignorance as “a lack of knowledge, understanding or information about something”.

In the case of this study, ignorance is the low level of understanding of different domains of life which could lead to the failure to the graduation in the programmes undertaken by BSD Muhanga.

### **1.7.4. Social protection**

ADB (2015, p. 23) defined social protection as “the set of policies and programs designed to reduce poverty and vulnerability by promoting efficient labour markets, diminishing people's exposure to risks, and enhancing their capacity to protect themselves against hazards and interruption/loss of income”. Social protection concerned with protecting and helping those who are poor and vulnerable, such as children, women, older people, and people living with disabilities, the displaced, the unemployed and the sick.

According to Socialprotection.org (2018) “Social Protection refers to a broad set of arrangements and instruments designed to protect members of society from shocks and stresses over the lifecycle”. It includes social assistance for the poor, social insurance for the vulnerable, labour market regulations and social justice for the marginalized. At a minimum, social protection systems include safety nets, labour market policies, and insurance options.

## **1.8. Conclusion of the chapter**

This chapter is about the introductory part of the study. It helps to give the reader the generality about the study and it is necessary to attract the attention of the reader. It comprises the background to the study, statement of the problem, research objectives, and research questions, significance of the study, scope of the study and the definition of key terms used in this study. The following chapter is going to deal with the review of literature.

## **CHAPTER TWO: REVIEW OF THE LITERATURE**

### **2.0. Introduction**

This chapter aims at presenting the key concepts related to the study and literature review on social protection and the causes of the failure of social protection programmes. There are also theories and literature about the social protection programmes in Rwanda.

### **2.1. Trauma and social protection**

#### **2.1.1. Trauma and social protection programmes**

Trauma is the one of the causes of the failure of social protection programmes because it is a deeply distressing or disturbing experience. Trauma influences negatively the level of attainment of social protection programmes. Trauma affects social protection programmes negatively because it affects human productivity which hampers socio economic development of the population.

Traumatic people fear to undertake income generating activities. They feel hopeless and they do not have motivation to work for their future. Traumatic people always feel ill. They are weak and lack of energy to work. They present loneliness, distrust and lack of cooperation with their neighbourhood.

#### **2.1.2. Causes of trauma**

A traumatic situation causes physical, emotional, spiritual, or psychological harm. People suffering from the distressing situation feel exposed, anxious, or scared as a result. In some cases, they don't know to handle them and they may deny the effect such situation has caused. Affected people need support and time to get out from the traumatic event and recover emotional and mental stability. Examples of traumatic events include loss of family member, friend, divorce and separation, physical pain or injury like severe car accident, serious illness, war and armed conflicts, natural calamities, terrorism, moving to a new location, parental rejection, sexual abuse and harassment, domestic violence and imprisonment.

## **2.2. Ignorance and social protection programmes**

According to Maddox (2013, p. 45) “Everyone is born ignorant into the world. The term ignorance came from Latin *ignorantia*. The prefix *in-* means “not”; Old Latin *gnarus* means “aware, acquainted with” Mere ignorance is nothing to be ashamed of. Ignorant is not a synonym for “stupid.”

### **2.2.1. Types of ignorance and their impact in the failure of social protection**

According to Maddox (2013), there are three types of ignorance:

**Invincible ignorance:** lack of knowledge that a person has no way to obtain.

**Vincible ignorance:** lack of knowledge that a rational person is capable of acquiring by making an effort.

**Nescience:** lack of knowledge that doesn't matter in the circumstances (from Latin *ne-*, “not” plus *scire*, “to know.”).

In the case of this study, there were people who are not aware of what they are doing what have caused their failure of social protection programmes as rendered by BSD Muhanga.

## **2.3. Conflicts and social protection programmes**

To apply the term of social protection to conflict situations requires some adaptation of normal use. In taking consideration of the issue of individual and household security in these situations, a range of vulnerabilities and risks must be taken into accounts which go beyond the economic. Social protection methodologies have to consider with the often serious harm done to the social fabric in such situations; and with sometimes extreme appearances of social exclusion that characterise them. The more immediate consequences of violent conflict may include loss of household income and assets; disruption of markets; and exposure to danger from violence or forced displacement. The extended conflict may cause several problems like the economic wasting, deviant behaviour: prostitution, drug abuse.

### **2.3.1. Types of conflicts**

According to Evans (2013, p. 49) conflict is classified into four types as discussed below. The first type is interpersonal conflict. It is a conflict between two persons. This happens naturally from our personal differences as we are created differently with different perceptions and appreciations determining our choices. In our normal life, people are different from one another and there is nothing wrong in this. Actually, this type of conflict occurs naturally and if it is well managed it can even help for personal growth leading to developing fruitful relationships among people. In addition, coming up with adjustments is necessary for managing this type of conflict. None of us is perfect, there is always need for adjustment and self-control, and to obey to some rules in order to live in peace with others. However since conflict is part and parcel of human existence, when interpersonal conflict becomes destructive, there is need to look for a mediator who can help to get a solution.

The second type is intrapersonal conflict. This means a conflict with oneself. The person is conflicting with him/herself without any other person coming in. The experience takes place in the person's mind. Hence, it is a type of conflict that is psychological, involving the individual's worldviews, beliefs, values, thoughts, emotions, and behaviours. Since this type of conflict is centred within the person touching his/her mind, it appears to be somehow difficult to handle. It leads to anxieties and nervousness, and can even lead to depression. In such circumstance, it is better to seek a way out by communicating with other people or to look for professional counsellors.

The third type is intragroup conflict. This type is a conflict that happens among individuals within a team. The fact that within a group people, different individuals have different interests, it is quite obvious to understand that there will be very many differences within a group what leads to intragroup conflict. It happens simply from interpersonal disagreements since people different ways of judging, understanding and appreciating things. Inside the team, conflict can be helpful as it may compel the group to sit down and discuss over an issue and to come up with common understanding which will eventually allow them to reach their objectives as a team. However, if conflict becomes grave and destructive, then there is need to find adequate strategies to address it peacefully and to re-create harmony among different groups.

The last type of conflict is intergroup conflict happens in case a misunderstanding occurs among different teams within an organization. There are many other factors which may aggravate this type of conflicts. Some of these factors include competition over scarce resources or the boundaries set by a group to others as a way to define and protect its identity.

Conflict can be perceived as a problem to some, but this is not how conflict should be considered. On the other hand, it is an occasion for growth and can be the best means of opening up among groups or individuals. However much a conflict can be beneficial it is always wise to prevent it before it occurs.

## **2.4. Social protection**

### **2.4.1. The rationale for social protection policy**

According to GDRC (2018, p. 38), Social protection has various role such as to develop social support for reform programmes, to promote social justice and equity and make growth more efficient and equitable, to provide policy-led support to those outside the labour market/with insufficient assets to achieve a secure livelihood, to provide protection for all citizens against risk (including financial crises), to ensure basic acceptable livelihood standards for all, to facilitate investment in human capital for poor households and communities, to enable people to take economic risks to pursue livelihoods, to promote social cohesion and social solidarity (social stability), to compensate for declining effectiveness of traditional and informal systems for enhancing livelihood security and to ensure continuity of access for all to the basic services necessary for developing human capital and meeting basic needs.

### **2.4.2. Social protection programs implemented in Rwanda**

Basing on Social Protection Policy from MINALOC (2012, p. 23), defined social protection, a set of public and private initiatives that provide income or consumption transfers to the poor, protect the vulnerable against livelihood risks and enhance the social status and rights of the marginalized; with the overall objective of reducing the overall social and economic vulnerability of the poor, vulnerable and marginalized groups. Examples in the strategy include the Social Security Fund of Rwanda, Public

Works programs, and regular cash payments to extremely poor households, genocide survivors and disabled ex-combatants.

Ensuring access to other public services: social protection can be understood more broadly as cross-cutting all sectors with the aim of ensuring that poor people can access public services, such as health and education, in particular by enabling them to overcome the financial barriers they face. Examples include free basic education, education scholarships for genocide survivors and Mutuelle de Santé (Mutual Health Insurance).

## **2.5. Theoretical and conceptual frameworks**

### **2.5.1. Related theories**

#### **2.5.1.1. A livelihood portfolio theory of social protection**

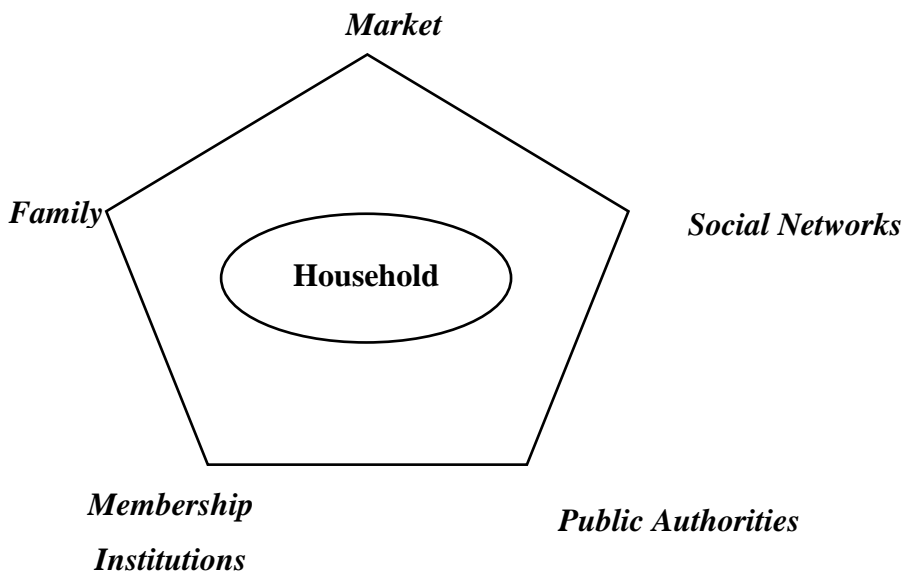
According to Chris de Neubourg (2009, p. 12), this theory refers to the basic economic supposition which claims that people both at individual and family levels seek and actually strive to maximize their revenues when they are under certain constraints. On the other hand, this theory holds the view that people and households are under the risk of becoming poor at a certain point in the future. Moreover, households are aware of the fact that sometimes in life they may go through troubled situations in which they will not be able to provide the needs of their members in a sustainable way. In order to prevent this situation to happen and to be fully equipped to handle them when they happen, households prefer moderate their consumptions over time in to do some savings which will help them to face financial crisis which may rise in the future. Furthermore, when it becomes obvious that the expected income will not be sufficient to cover all basic needs, households can seek other sources of income in order to cover their expenditures.

The welfare pentagon is built upon five key institutions which are central for households use to meet existing needs in a given society. Those institutions include: the family, markets, social networks, membership institutions and public authorities. These institutions do exist in every society across time and space despite some historical and geographical differences. The importance of each institution and its relationship with households may differ from time to time and from one society to another. It is believed that households can make choice on how to generate their income and how to use it by choosing a specific “production point” in the 5-dimensional space defined by the welfare pentagon.

Households have the possibility to decide how to interact and use the welfare pentagon's institutions as a way to develop their livelihood strategy in order to create a balance between production and consumption. In this regards, labour markets, product markets and capital markets will be use profitably so that households can trade and exchange in order to generate necessary resources to satisfy the needs. On the labour market households sell their time and energy to do work in order to get wage. Concerning product markets households invest time, energy and money for producing marketable goods and services which will be sold or exchanged to have money or other things in kind or service. For the capital market, households invest their current resources in order to make profits out of them in the future. This can be done through, savings, insurances, lending etc... Families, social networks and membership institutions help to mitigate the livelihood risks by means of various mechanisms of solidarity (and exchange). By membership institutions we mean those institutions to which people can freely adhere and resign anytime in life. Examples of such institutions are unions, cooperatives, credit and saving groups, mutual insurance companies, religious organizations, neighbourhood associations, sport clubs, cultural performance groups.

The final corner of the welfare pentagon which is public authorities do contribute to the promotion of households' welfare in a direct way through public social protection systems such as pension schemes, child benefits, unemployment insurance and other forms of social insurance. In non-direct way, public authorities do enhance household welfare by establishing and enforcing laws which help individuals and households to trade in way which is fair and right. In this way, people are able to make contracts and to respect their engagements; judicial and legislative systems are well established and are implemented in way which guarantees the rights and benefits of every individual. They aim at correcting market failures such as minimum reserve requirements for banks so that the savings of the households are guaranteed...

**Figure 1.1: The Welfare Pentagon**



**Source:** Chris de Neubourg (2009, p. 29)

Chris de Neubourg believes that it is possible for a household to go on its own without relying on the institutions of welfare pentagon, but he recognizes that this is something unusual and hard. Normally in African societies especially in Rwanda, there is a spirit of interdependency and mutual help among households. Actually is almost impossible to achieve social security benefit without collaborating public authorities that control the social benefit. For any person, to obtain fair wage one must have access to legal labour market. To enjoy any family membership benefits access and collaboration with family members is a requirement. Furthermore, accessing a specific institution, particular income generating and consumption smoothing strategies normally also involve certain degree of asset or capital possession. Talking about capital and assets this means financial means such as cash at hand or in banks, savings done with different saving schemes, goods in stocks, and credit line. Physical resources include things such as land, house, life stock, machines, precious stones and objects... human resources imply skilled people who have various knowledge and who have time to apply what they know. Useful Social resources comprise family ties and friendships, links, trust...

In the case of this study, a livelihood portfolio theory relates with this study because once the basic needs are well satisfied, the social protection programmes are well fulfilled too.

### **2.5.1.2. Theory of Social Welfare**

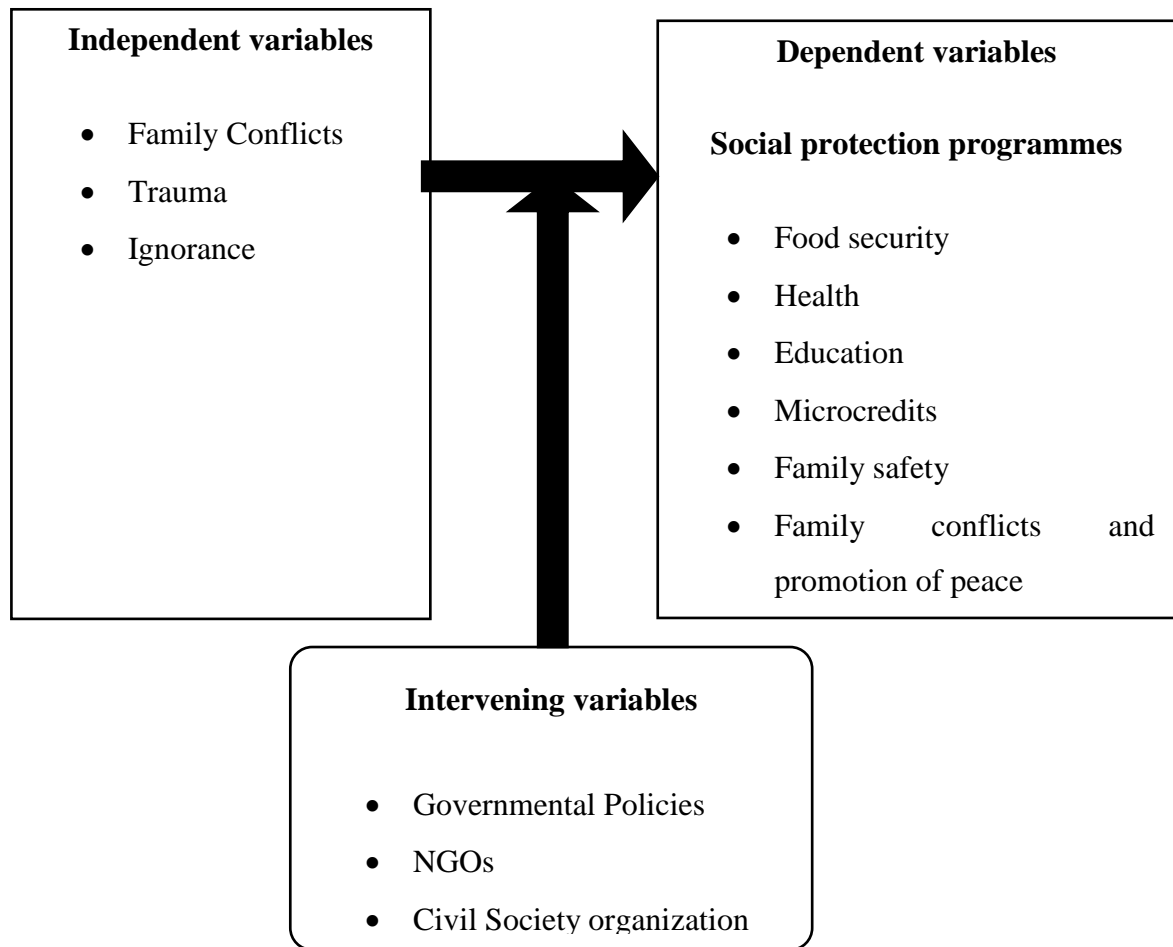
A theory of social welfare is discussed here as a way to demonstrate the strong influence that political and economic forces have shaping the structural institutions of social welfare. The theory highlights the role of interest groups in determining social welfare and gives an clear understanding of why some groups continue to be marginal to the welfare enterprise. In the application of this theory, the interest groups of the social welfare industry are categorized, and the viability of each group is thoroughly examined in relation to the underlying forces of bureaucratization and privatization. This analysis also allows social workers and development agents to predict the future of certain interest groups (Stoesz, 1989, p. 7).

This theory is related to this study because if the social protection programmes are well achieved, there will be the improved social welfare of the population. Government policies on economic and social matters do affect strongly the program of social protection in Rwanda and can influence to work of NGOs such BSD Muhanga.

### **2.5.2. Conceptual Framework**

The topic is composed with two variables: Independent and dependents variables. The independent variable is composed with three components: family conflicts, trauma and ignorance. These components are well observed in some beneficiaries of BSD Muhanga who have difficulties in the process of graduation. The graduation, here, is a period when beneficiaries who were poor attain the level of self-reliance after different supports and trainings of BSD Muhanga. Normally, the period is 60 months which is equal to 5 years. These components lead to the failure of social protection which is dependent variable. There are other intervening variables which are governmental policies, NGOs and Civil Society organisations. These organs help to reduce the effect of trauma, conflict and ignorance so as to attain the objectives of social protection programmes.

**Figure 1.2: Conceptual framework**



**Source:** Researcher's own construction, 2018

## **2.6. Conclusion of the chapter**

In sum, the second chapter deals with the review of literature about family conflicts, trauma and ignorance and the social protection background in Rwanda. It developed also the related theories and the conceptual framework. The third chapter is going to present the research methodology in which study area, tools of data collection, study design, study population, sampling techniques, sample size, data analysis were presented.

## **CHAPTER THREE: METHODOLOGY**

### **3.1. Study area**

The study area of this research is BSD located in Gahogo Cell, Nyamabuye sector in Muhanga District. BSD carries its activities in the following Sectors: Nyamabuye, Shyogwe, Nyarusange, Muhanga, Mushishiro and Rugendabari.

#### **3.1.1. Historical background of BSD Muhanga**

The BSD began its interventions in Rwanda since 1992. Until recently, the needs of the population during the post-genocide period were mainly of an emergency nature. As a result, BSD was involved in relief and assistance interventions.

Given the growing capacity of people to live with the limited means of daily living, the future role of BSD is becoming increasingly significant and more strategic, especially since government assistance interventions are mobilizing in favour of a planned long-term development intervention instead of relief activities only.

The clear condition for a successful change, from a response to short-term needs to long-term development work, would be to ensure that the means of assistance that remains available to the BSD would be progressively used in development activities. Fortunately, BSD has always striven to apply principles of participation and self-help in activities.

Undeniably, so far the work that has been undertaken by the BSD has been widely appreciated at the local level. In addition, amongst the people who were consulted during the field visits, they affirmed and reiterated that the BSD should support the delicate process of social and economic development by extending its intervention in development. The current political environment allows for long-term activities to promote stability, reconciliation and economic growth.

#### **3.1.2. Domains of intervention of BSD Muhanga**

BSD Muhanga identified a number of priority needs in the Muhanga District community. All these needs are considered very important for the positive development

of the District. There are family safety, food security, family conflicts, microeconomics at the community level and social infrastructure and community development.

### **3.2. Population of the study**

This study was carried out in Muhanga District, Southern Province. The population of the study is composed by 460 families benefiting the social protection programmes as carried out by BSD Muhanga.

### **3.3. Sample size**

In the case of this study, the sample is composed by 20 families' beneficiary of BSD Muhanga. Among them, there are 10 families who graduated and 10 families which did not graduate from social protection programmes of BSD Muhanga.

### **3.4. Sampling techniques**

The sampling technique to be used in this research is a purposive sampling where the researcher chooses families according to the criteria of graduation or non-graduation.

### **3.5. Instruments**

#### **3.5.1. Data collection instruments**

To collect data of this research, the researcher used the questionnaire and interview. The questionnaire will be distributed to 20 respondents who were beneficiaries of BSD Muhanga. There were 10 respondents who graduated and 10 respondents who did not graduate. Interview was held between the 6 Executive Secretaries where BSD Muhanga operates. The researcher made interview with Muhanga District leaders in order to get their views on the contribution of activities of BSD Muhanga. The available leader was Vice Mayor in Charge of Social Affairs.

### **3.5.2. Data processing instruments**

The researcher used editing, coding and tabulation.

#### **3.5.2.1. Coding**

The main reason of why coding was used in this research, is to summarize the data by classifying the different responses into different levels for easy interpretation, manipulation and presentation.

#### **3.5.2.2. Editing**

The process of editing the data involved correcting errors that has been cropped up during the course of field research and in data collection. This is to ensure the accuracy, completeness, consistency and uniformity of gathered information.

#### **3.5.2.3. Tabulation**

Tables and charts help the researcher to present a huge mass of data in a detailed orderly manner within minimum of space. This makes the tabular presentation the cornerstone of statistical reporting.

### **3.6. Procedure for the Data Collection**

To collect the necessary data for this research, the researcher did a pilot research on 4 respondents to test the accuracy of the data collection instruments. Then after two weeks, the researcher distributed copies of the questionnaire and made interview for all respondents.

### **3.7. Analysis technique**

The analysis was done by using SPSS 17.0. The collected data was coded and entered in the computer in order to facilitate the analysis.

### **3.8. Ethical consideration**

Dealing with human beings in research requires that research ethics are adhered to. According to Mikkelsen (2005, p.11) research ethics are important in social sciences. On

the basis of Mikkelsen's assertions this study adhered to ethical principles. Since data was collected in Rwanda, the researcher was given clearance from the ethics committee of the Board of BSD.

Further adherence to issues of ethics would include getting written consent from the respondents. The researcher is to be honest and respectful and upholding confidentiality. The respondents were also assured that the data to be collected are solely used for the purpose of this study.

### **3.9. Conclusion of the chapter**

The chapter provided the brief explanation of the required methodology for the research objective which aims at assessing family conflicts, trauma and ignorance that lead to the failure of social protection programmes among beneficiaries of BSD Muhanga. This chapter has proposed that qualitative and quantitative research methodology is the appropriate analytical tool for this research. The research population of this study was restricted to the beneficiaries of BSD Muhanga. Questionnaire and interview were used to collect data from the field.

The secondary data were cumulated by the help of journals, articles, books, newspapers etc. Similarly, the primary data were gathered by collecting distributed copies of the questionnaire. The sample size of this research consists of 20 subjects which were purposively drawn from the population. Furthermore, data analysis took place as soon as the data were collected from the participants and the obtained data were analysed according to the best format available. The results are analysed and presented in charts and figures in the next chapter.

## CHAPTER FOUR: DATA PRESENTATION, ANALYSIS AND DISCUSSION

### 4.1. Introduction

This chapter is about the data presentation from the field where Bureau Social de Développement de Muhanga carries its activities. It is composed by the presentation of socio demographic of the participants and the presentation of results according to the specific objectives.

### 4.1. Presentation of the socio-demographic characteristics of the participants

The socio demographic characteristics of the participants are composed by gender, age, level of education and marital status of the participants.

#### 4.1.1. Gender

Table 4.1 shows that female were 65% of the participants while the male were 35% of the respondents. Female dominated the number of participants because they were considered by the weakest in the family and if the family has problems, the wives are those who suffer more than others according to their played roles in the families. Many respondents were female because males went out for work as the main bread winners.

**Table 4.1: Gender of the participants**

Gender	Number of participants	Percentage
Female	13	65
Male	7	35
<b>Total</b>	<b>20</b>	<b>100</b>

**Source:** Field Data 2018.

#### 4.1.2. Age

Table 4.2 showed that 10% of the participants were in the age brackets of 21 to 30 years old. 30% of the respondents were in the age brackets of 31 to 40 years old. Participants who were in the age bracket of 41-50 years old and above 50 years were 55% and 5% of the participants respectively. According to the table 4.2, many respondents were grouped in the age bracket of 31-40 years old and 41-50 years old at a rate of 85% of the respondents. The researcher met a young girl orphan who got pregnant at the age of 20. She failed to the graduation of BSD because of her low age and she lacked experience of life.

**Table 4.2: Age of participants**

Age	Number of participants	Percentages
21-30 years	2	10
31-40 years	6	30
41-50 years	11	55
50 years and above	1	5
<b>Total</b>	<b>20</b>	<b>100</b>

**Source:** Field Data 2018.

#### 4.1.3. Level of education

Table 4.3. Shows that illiterate participants were 35%, the participants who had primary level were 55% while those who had secondary level were 10% of the participants. The researcher did not see the participants with university level.

Two respondents who had secondary level found in this sample of his research studied the secondary school and they did not finish their studies. They met hardship in their life which led to the non-graduation of BSD Muhanga.

**Table 4.3: Level of education of participants**

<b>Level of education</b>	<b>Number of participants</b>	<b>Percentages</b>
Illiterate	7	35
Primary	11	55
Secondary	2	10
University	0	0
<b>Total</b>	<b>20</b>	<b>100</b>

**Source:** Field Data 2018.

#### **4.1.4. Marital status**

Table 4.4 showed that 45% of the participants were married, 20% were widowed, 5% were divorced while separated were 30%. The most dominated participants at the first place were married followed by the separated at a rate of 30%. Partners separate when there are mainly the domestic violence and many other misunderstanding.

**Table 4.4: Marital status of the participants**

<b>Marital status</b>	<b>Number of participants</b>	<b>Percentage</b>
Married	9	45
Widowed	4	20
Divorced	1	5
Separated	6	30
<b>Total</b>	<b>20</b>	<b>100</b>

**Source:** Field Data 2018

## 4.2. Presentation of results

Results from the field have been presented according to the specific objectives of this research.

### 4.2.1. Different aspects of family conflicts and trauma among beneficiaries of BSD Muhanga

The following subtitles presented different aspects of family conflicts and trauma as confirmed by beneficiaries of BSD Muhanga.

#### 4.2.1.1. Participants who experienced family conflicts and trauma

Table 4.5 showed that 90% of the participants experienced cases of family conflicts while 10% of the participants experienced trauma.

**Table 4.5: Participants who experienced family conflicts and trauma**

Types	Number of participants	Percentage
Family conflicts	18	90
Trauma	2	10
<b>Total</b>	<b>20</b>	<b>100</b>

**Source:** Field Data 2018.

#### 4.2.1.2. Types of family conflicts experienced by participants

There were many types of family conflicts. Many participants experienced land based conflicts at a rate of 78% of the participants, the economy based were experienced at a rate of 61% of the respondents and drug abuse related conflicts were faced at a rate of 50% of the participants. The siblings related conflicts were faced at a rate of 39% of participants. Sexual conflicts and beliefs related conflicts were faced at a rate of 11% while culture based conflicts were experienced by 6% of the respondents.

**Table 4.6: Types of family conflicts experienced by participants**

<b>Types of conflicts</b>	<b>Number of participants</b>	<b>Percentage</b>
Land based conflicts	14	78
Economy based conflicts	11	61
Drug abuse related conflicts	9	50
Siblings related conflicts	7	39
Sexual conflicts	2	11
Beliefs based conflicts	2	11
Culture based conflicts	1	6

**Source:** Field Data 2018.

#### **4.2.1.3. Types of trauma experienced by participants**

Table 4.7 showed that 3 types of trauma among other were faced by the participants. Emotional based trauma was faced by some respondents (10% of the participants) while trauma related to domestic based violence and trauma related to Genocide were faced by 5% of the participants each.

**Table 4.7: Types of trauma experienced by participants**

<b>Types</b>	<b>Number of participants</b>	<b>Percentage</b>
Emotional abuse	2	10
Trauma related to domestic based violence	1	5
Trauma related to Genocide	1	5
Trauma related to incurable diseases	0	0
Trauma related to infertility	0	0
Trauma related to stigma	0	0
Trauma related to extreme poverty	0	0
Trauma related to drug abuse	0	0

**Source:** Field Data 2018.

#### **4.2.2. Various difficulties within households in Muhanga District that lead to the non-graduation of beneficiaries of BSD Muhanga**

There were various difficulties within households in Muhanga District that led to the non-graduation of beneficiaries. The researcher grouped these difficulties in marriage union, economy, social life, child education and health.

##### **4.2.2.1. In marriage union**

Data presented in table 4.8 showed that 40% of the participants experienced divorce or separation, participants who experienced polygamy were 25% and 15% of the participants experienced the lack of communication in their households. There were other single cases faced by participants like polyandry, lack of education of children, lack of trust and sexual transmitted diseases.

**Table 4.8: Difficulties in marriage union**

<b>Difficulties</b>	<b>Number of participants</b>	<b>Percentage</b>
Divorce/Separation	8	40
Polygamy	5	25
Lack of communication	3	15
Polyandry	1	5
Lack of education of children	1	5
Lack of trust	1	5
Sexual Transmitted Diseases	1	5
<b>Total</b>	<b>20</b>	<b>100</b>

**Source:** Field Data 2018.

#### **4.2.2.2. In economy**

Table 4.9. Showed that 30% of the participants faced difficulties related to the decrease of income, 20% of the participants said that they faced the spoil of crop production while 15% of the participants faced the misuse of family income.

**Table 4.9: Difficulties in economy**

<b>Difficulties</b>	<b>Number of participants</b>	<b>Percentage</b>
Decrease of income	6	30
Spoil of crop production	4	20
Misuse of family income	3	15
Decrease of savings	1	5
Inability of paying back loan received	1	5

**Source:** Field Data 2018.

#### 4.2.2.3. In social life

Data presented in table 4.10 showed that 55% of the participants faced divorce and separation in their social life which led to the non-graduation. Social irresponsibility and malnutrition and stunting among children were faced by 10% and 5% of the participants respectively. Other forms of difficulties were not experienced.

**Table 4.10: Difficulties in Social Life**

<b>Difficulties</b>	<b>Number of participants</b>	<b>Percentage</b>
Divorce/separation	11	55
Social irresponsibility	2	10
Malnutrition and stunting among children	1	5

**Source:** Field Data 2018.

#### 4.2.2.4. In Child education

Table 4.11 depicted that 30% of the participants faced sexual misconducts of their children, while 10% of the faced street children. There were single cases of school dropout, low level of school performance, increase the number of school absence and unwanted pregnancies.

**Table 4.11: Difficulties in child education**

<b>Difficulties</b>	<b>Number of participants</b>	<b>Percentage</b>
Sexual misconduct	6	30
Street children	2	10
School dropout	1	5
Low level of school performance	1	5
Increase of number of school absence	1	5
Unwanted pregnancies in children	1	5

**Source:** Field Data 2018.

#### **4.2.2.5. In health**

Data presented in table 4.12 showed that Sexual transmitted diseases and HIV/AIDS and unwanted pregnancies were experienced at a rate of 10% each. There were other single cases of lack of Mutual Health Insurance, psychological disorders and no treated injuries and diseases.

**Table 4.12: Difficulties in health**

<b>Difficulties</b>	<b>Number of participants</b>	<b>Percentage</b>
Sexual transmitted diseases and HIV/AIDS	2	10
Unwanted pregnancies	2	10
Lack of Mutual Health Insurance	1	5
Psychological disorders	1	5
No treated injuries and diseases	1	5

**Source:** Field Data 2018.

#### 4.2.2.5. Participants who recognised their role played in difficulties

Data found in table 4.13 showed that 45% of the respondents agreed their role played in difficulties which led to the non-graduation while 55% of participants did not recognise it.

**Table 4.13: Participants who recognised their role played in difficulties**

Options	Number of participants	Percentage
Agree strongly	2	10
Agree	7	35
Disagree	5	25
Disagree strongly	6	30
<b>Total</b>	<b>20</b>	<b>100</b>

**Source:** Field Data 2018.

#### 4.2.3. Low level of understanding of respondents as a limiting factor

Even though there were other causes of non-graduation, ignorance (level of understanding) was also among the causes at a rate of 40% of the participants while 60% of the participants declined the role of ignorance in their difficulties.

**Table 4.14: Respondents who recognised their contribution of their level of understanding among their difficulties**

Options	Number of participants	Percentage
Agree strongly	6	30
Agree	2	10
Disagree	11	55
Disagree strongly	1	5
<b>Total</b>	<b>20</b>	<b>100</b>

**Source:** Field Data 2018.

#### **4.2.4. Participants whose level of understanding played a crucial role in difficulties**

Table 4.15 showed that 25% of the respondents affirmed that their level of ignorance played a crucial role in the non-graduation while 75% of the respondents denied it.

**Table 4.15: Participants whose level of understanding played a crucial role in difficulties**

<b>Options</b>	<b>Number of participants</b>	<b>Percentage</b>
Agree strongly	4	20
Agree	1	5
Disagree	3	15
Disagree strongly	12	60
<b>Total</b>	<b>20</b>	<b>100</b>

**Source:** Field Data 2018.

#### **4.2.5. Relationship between family conflicts, trauma and ignorance and non-graduation of beneficiaries of BSD Muhanga.**

All respondents affirmed that there was a strong relationship between family conflicts, trauma and ignorance and non-graduation even though there were other causes such as laziness and natural disasters.

#### **4.2.6. Results from interviews**

During this research, the researcher conducted different interviews. There were between the researcher and graduated beneficiaries and between Executive Secretaries of sectors where BSD Muhanga operates its activities. The researcher also conducted interview with Muhanga District leaders to get their perception on BSD activities.

##### **4.2.6.1. Results from interview of graduated beneficiaries**

The participants in the interview said affirmed that BSD Muhanga helped them to address their problems related to family conflicts, trauma and ignorance that is why there were on the improved level of their livelihood.

In the area of balanced diet, participants who graduated improved their diet remarkably. They left the low level of diet which was not enough to have enough diet while the participants who did not graduate they were still in the low level of diet.

For eating frequencies, participants who did not graduate used to eat once a day. There were 2 of them who ate twice a day. Participants who graduated improved the food frequencies. Many of them ate twice because in their area they used to eat two times a day. There were others who took breakfast like milk and porridge. Respondents who graduated improved their quantity of food because they have increased their crop production, their domestic animal production and they acquired the best use of microloans guaranteed by BSD Muhanga.

Participants did not have any issue of MHI because BSD was paying for them. Participants who did not graduate had the problem of paying moderation ticket when they consult medical doctors. For the graduated ones, they did not have any problem related to moderation ticket.

Participants remarked the contribution of BSD Muhanga in providing trainings about the hygiene and sanitation. There were challenges of hygiene and sanitation in households of beneficiaries who did not graduate of lacking the basic tools of hygiene and sanitation. The accessibility of cosmetics also was remarked in graduated participants.

In all participants' house there were cases of malnutrition before the support of BSD, these cases are still found in some households of non-graduated participants.

Education, payment of school fees was done by BSD Muhanga. There was a tremendous development in the graduated families where they were able to give all requirements to their children to go to school. The challenging situations were found in the non-graduated households.

Apart from the improvement of housing done by BSD, the improvement of houses was still found in graduated families. There were participants who increased their assets such as the tap water and solar energy.

The graduated participants highlighted their improvement of saving because of the trainings given by BSD Muhanga. Investment was increased in the households of graduated participants such as increase of domestic animals and some plots of land.

Income of the participants were increased in the period of BSD help or in after graduation. The non-graduated participants remain in the low level of income. The graduated participants said that they left the low level of using microcredit to the improved ones. They said that they were able to use well micro credits and some of them were going in SACCOs to get other loans.

In agriculture, the graduated attained the best level. They have access to improved seeds so as to improve their crop yield. They increased also the number of livestock because they have improved their income and investments. Because of the vicious cycle of poverty, the non-graduated families were found at the low level of crop production and accessibility to the improved seeds.

#### **4.2.6.2. Results from Interview with Executive Secretaries**

The interview was held between the 6 Executive Secretaries of sectors of Nyamabuye, Shyogwe, Muhanga, Nyarusange, Mushishiro and Rugendabari where BSD Muhanga operates its activities. About the different aspects of family conflicts, trauma and ignorance among beneficiaries of BSD Muhanga, interviewees said that many cases that were presented among beneficiaries of BSD Muhanga were conflicts which are family based. There was land based conflicts, resources based conflicts, sexual conflicts like husbands that had a polygamous behaviour and other illegitimate relationship. Some beneficiaries presented ignorance because of the low level of education and their mind-sets sometimes caused by their beliefs and culture.

The interviewees said that there were families that had various difficulties in their families that led to the non-graduation within the programmes of BSD Muhanga. There were beneficiaries that presented family conflicts, separation and divorce, polygamy and illegal relationship out of their marriage, families who did not get married legally. The main causes of family conflicts are the alcohols abuse and drug abuse, the mismanagement of family resources and the sexual misconducts.

About the relationship between family conflicts, trauma and ignorance and non-graduation of beneficiaries of BSD Muhanga, the interviewees said that there is a little influence of trauma in non-graduation of beneficiaries of BSD Muhanga. Family conflicts and ignorance are the most related with the non-graduation of beneficiaries. The interviewees said that there is also laziness that causes the poverty in families.

#### **4.2.6.3. Perception of Muhanga District leaders**

Vice mayor in charge of Social Affairs said that the BSD Muhanga rendered a good contribution to the social protection but its contribution is still low according to the results of EICV 4 done by National Institute of Statistics in Rwanda that stipulated that there were 16% of vulnerable people in Muhanga District who lived under the extreme poverty in 2015 and they needed social protection programmes.

She emphasised that BSD Muhanga should increase the range of its intervention from children of 6 to 16 years old and to extend up to 2 to 16 years old because the children of 2 years old face many challenges such as stunting and other forms of malnutrition. This could help the encouragement in Early Childhood Education (ECD).

### **4.3. Discussion of results**

Results of this research are discussed according to the specific objectives. The first objective was “To identify different aspects of family conflicts, trauma and ignorance among beneficiaries of BSD Muhanga” and was verified by results presented in table 4.5. There were 90% of the participants who faced cases of family conflicts while 10% of the participants experienced trauma.

With information from the focused group discussion held with 16 beneficiaries who formed two groups of 8 people, participants affirmed that family conflicts influenced most the failure of social protection programmes in Muhanga District. The conflicts mostly occurred in nuclear family (parents and children). This also was confirmed by the interviewee who said that the non-solved family conflicts faced by many families led to non-graduation in the programmes led by BSD Muhanga. Results from the Focused Group discussion held in BSD Muhanga, the Volunteer Mothers said that families who graduated successfully have promoted unity and dialogue in their households. They

evoked that where there are no family conflicts , there is development and the best level of attainability of social protection.

For the different types of family conflicts experienced by participants, many have gone through land based conflicts at a rate of 78%, the economy based were experienced at a rate of 61% and drug abuse related conflicts were faced at a rate of 50% of the participants. The siblings related conflicts were faced at a rate of 39% of participants. Sexual and beliefs related conflicts were faced at a rate of 11% while culture based conflicts were experienced by 6%. Many participants experienced land based conflicts.

The following type of the family conflicts was the economic based conflicts. Results from the FGD affirmed that economic based conflicts were related with the drug abuse where people who got temporal and/or permanent jobs used the gotten money to buy mainly beer and cigarettes while their families stayed in the extreme poverty. She added that there was a family which was dissolved because wife saved money separately from her husband and the later was deprived by his wife the right of decision.

The participants of Focused Group Discussion said that there were widowed mother who are graduating successfully. This was supported by the mutual control found in cooperatives as well as the imitation. Another member of FGD said that these family conflicts were based on polygamy. This member of FGD added that there were some men who spent their income out of the main legal families by starting a second family.

There were many types of trauma experienced by participants. Emotional based trauma was faced by many respondents (10% of the participants) while trauma related to domestic based violence and trauma related to Genocide were faced by 5% of the participants each.

The second specific objective was “To explore various difficulties within households in Muhanga district that lead to the non-graduation of beneficiaries” and it was corroborated by results presented from table 4.8 to 4.12.

Table 4.8 stipulated that 40% of the participants experienced divorce or separation; participants who faced polygamy were 25% and 15% of the participants experienced the lack of communication in their households. There were other single cases faced by

participants like polyandry, lack of education of children, lack of confidence and sexual transmitted diseases.

Among participants, there were many people who experienced separation. This situation is destructive of the welfare of the household that leads to the non-graduation. In the FGD held in BSD Muhanga with volunteer mothers, they said that there was a mother in Muhanga sector who experienced problems of trauma where she could not be tidy because her husband had left her alone with five children. After BSD Muhanga, she improved her livelihoods. She is doing well and recently subscribed membership to WASAC and REG for potable water and electricity.

Table 4.9. showed that 30% of the participants faced difficulties related to the decrease of income, 20% of the participants said that they faced the spoil of crop production while 15% of the participants faced the bad use of money. In Nganzo cell of Muhanga Sector, there was a woman saying that her husband spoiled the crop production in drinking local beer and they still remain in extreme poverty even though there is a support of BSD Muhanga.

In social life, 55% of the participants faced divorce and separation in their social life which led to non-graduation. Social irresponsibility and malnutrition and stunting among children were faced by 10% and 5% of the participants respectively. Other forms of difficulties were not experienced. The separation mainly in women cause the non-graduation in the sense that the family left alone by the husband lack of nutritious food that combat stunting and malnutrition.

For difficulties in child education, table 4.11 stipulated that 30% of the participants faced sexual misconducts of their children, while 10% faced the phenomenon of street children. There were single cases of school dropout, low level of school performance, increased the number of school absence and unwanted pregnancies.

Data presented in table 4.12 showed difficulties in health, where Sexual transmitted diseases and HIV/AIDS and unwanted pregnancies were experienced at a rate of 10% each. There were other single cases of lack of Mutual Health Insurance, psychological disorders and no treated injuries and diseases.

The last specific objective was “To assess the relationship between family conflicts, trauma and ignorance and non-graduation of beneficiaries of BSD Muhanga” and it was affirmed by all respondents who affirmed that there was a strong relationship between family conflicts, trauma and ignorance and non-graduation even though there were other causes.

## GENERAL CONCLUSION AND RECOMMENDATIONS

This research was entitled “Family conflicts, trauma and ignorance: the failure of social protection in Muhanga District: Case Study of Bureau Social de Development Muhanga”. It had the main objective of assessing family conflicts, trauma and ignorance that lead to the failure of social protection programmes among beneficiaries of BSD Muhanga.

From the findings of this study, the researcher realised that the dominated causes of non-graduation were mainly the family conflicts and ignorance and slightly trauma. From interview held among many participants, beneficiaries of BSD Muhanga who did not graduate faced many difficulties related to ignorance and family conflicts.

By the end of this study, the researcher suggests the following:

- **To BSD Muhanga:**

Volunteer Mothers (Mamans Volontaires) should be encouraged by providing them any motivation so as to help BSD to monitor day per day the beneficiaries in order to eradicate the non-graduation which leads to the failure of social protection. These volunteer Mothers helped BSD Muhanga in many areas of life;

It should work hand in hand with the grass roots structures so as to make a coalition to solve challenges that hinder the success of social protection programmes;

Volunteer Mothers should get much training so as to increase their knowledge in social protection programmes in order to help well beneficiaries and the population in general;

BSD Muhanga needs to increase trainings about financial literacy to stimulate people to afford the bank loans in order to increase their socioeconomic livelihood.

BSD Muhanga should have constructed the long term vision to forecast the sustainable strategies in social protection.

BSD Muhanga should increase the period of graduation from 3 years to 5 years so as to train them more about the social protection programmes.

- **To grassroots leaders**

They should increase their visits to families who presented different difficulties so as to handle the cases of family conflicts among the population;

They should intensify the programmes that aim to increase the level of understanding of social protection programmes;

The community policing should increase the solution of family conflicts so as to reduce their consequences to family members. This could increase the level of attainability of social protection programmes.

They should make more effort in increasing the prevention of family conflicts and combat the ignorance as well as the management of trauma so as to attain a good level of social protection programmes.

Central Government should provide trainings to the population so as to increase their level of understanding in order to live harmony and achieve their improved of social and economic wellbeing.

- **To church leaders**

They should intensify their activities that aim to solve family conflicts and help their adepts to manage trauma so as to attain the best level of social protection.

In conducting this study, the researcher did not exploit all faces related to the achievement of social protection in Muhanga. On that the researcher calls upon other interested people to do the following researches:

- BSD and the social economic development of the people in the first and second categories of Ubudehe in Muhanga;
- The role of Civil Society in the success of the social protection programmes of rural people in Rwanda.

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# APPENDICES

Appendix 1: Questionnaire to the respondents

My name is Mutakwasuku Yvonne, Master student in Local Governance. I am carrying out research on Family Conflicts, Trauma and Ignorance: The Barrier of Social Protection in Muhanga District: Case Study of Bureau Social de Développement de Muhanga. I will be thankful for your answers to the asked questions and I assure you that all information will be top secret and will be used only for the academic purpose.

The questionnaire is composed with closed and open ended questions. For closed questions that require a choice among the proposed responses, please tick off in the box that correspond to your choice

For open ended questions that require you to express your ideas, please use the space provided to write your answer.

**Thank you**

**Section A: General Information**

**1. Gender:**

- Male .....
- Female .....

**2. What is your age bracket?**

- a. 21-30 years.....
- b. 31-40 years.....
- c. 41-50 years.....
- d. 50 years and above.....

**3. What is your level of education?**

- Illiterate.....
- Primary.....
- Secondary.....
- University.....

4. What is your marital status?

- Married.....
- Widowed.....
- Divorced.....
- Separated.....

**Section B: Research questions**

1. Do you experience the following?

Family Conflicts.....

Trauma.....

2. If you have experienced family conflicts, what are types of family conflicts do you experience in your family?

Land based conflict.....

Sexual conflicts.....

Siblings related conflicts.....

Economy based conflicts.....

Drug abuse related conflicts.....

Culture based conflicts.....

Beliefs based conflicts.....

3. If you experienced any Trauma, what types among the following do you experience in your family?

Trauma related to domestic based violence.....

Trauma related to Genocide.....

Trauma related to incurable diseases.....

Trauma related to infertility.....

Emotional abuse.....

Trauma related to stigma.....

Trauma related to extreme poverty.....

Trauma related to drug abuse.....

Others (Please, specify).....

4. To explore various difficulties within BSD beneficiaries' households in Muhanga district that lead them to the non-graduation

**In marriage union**

Divorce/Separation.....

Polygamy.....

Polyandry.....

Lack of education of children

Lack of trust.....

Lack of communication.....

Sexual Transmitted Diseases

**In economy**

Decrease of savings.....

Loss of job.....

Misuse of family income.....

Decrease of income.....

Spoil of crop production.....

Perish of domestic animals.....

Inability of paying back received microcredits

**In social life**

Lack of friends

Malnutrition and stunting among children....

Social marginalisation.....

Divorce/separation.....

Social irresponsibility.....

**Child education**

School dropout.....

Low level of school performance.....

Increase of number of school absence.

Street children.....

Unwanted pregnancies in children.....

Child labour.....

Sexual misconduct.....

**Health**

Lack of Mutual Health Insurance.....

Vaccination Schedule.....

Sexual transmitted diseases and HIV/AIDS.....

Unwanted pregnancies.....

Psychological disorders.....

Death.....

No treated injuries and diseases.....

5. I recognise my role played in these difficulties

I agree strongly.....

I agree.....

I disagree.....

I disagree strongly .....

6. I recognise the contribution of my level of understanding among these difficulties.

I agree strongly .....

I agree.....

I disagree.....

I disagree strongly .....

7. My level of understanding played a crucial role among these difficulties

I agree strongly .....

I agree.....

I disagree.....

I disagree strongly .....

Appendix 2: Interview guide for respondents who graduated

**a) Food**

**1. Balanced diet**

Do you get balanced diet?

Levels	During the support period of BSD	√	After graduation	√
Enough				
Not enough				

**2. Eating times**

How often do you eat in a day?

Times	During the support period of BSD	√	After graduation	√
Once a day				
Twice a day				
Three times				
Many times a day				

**3. Enough quantity of food**

Do you get enough quantity of food?

Quantity	During the support period of BSD	√	After graduation	√
Enough				
Not enough				

**b) Health**

**1. Payment of Mutual Health Insurance**

Are you able to pay MHI to your family members?

Ability	During the support period of BSD	√	After graduation	√
Able				
Unable				

**2. Payment of moderation ticket**

Ability	During the support period of BSD	√	After graduation	√
Able				
Unable				

**3. Improved household hygiene and sanitation**

Levels	During the support period of BSD	√	After graduation	√
High				
Unable				

**4. Access to cosmetics**

Ability	During the support period of BSD	√	After graduation	√
Able				
Unable				

**5. Cases of malnutrition**

Occurrence	During the support period of BSD	√	After graduation	√
Notable cases				
No cases found				

**c) Education**

**1. Payment of school fees**

Ability	During the support period of BSD	√	After graduation	√
Able				
Not able				

**2. Access to school materials**

Capability	During the support period of BSD	√	After graduation	√
Able				
Not able				

**d) Housing**

Asset	Capability	During the support period of BSD	√	After graduation	√
Access to house	Able				
	Not able				
improved shelters	Able				
	Not able				
Access to household assets	Able				
	Not able				

**e) Economy**

Asset	Level	During the support period of BSD	√	After graduation	√
Increase of savings	Low				
	High				
Increase of investment	Low				
	High				
Increase of income	Low				
	Low				
Reduction of unpaid instalments of micro-credits	Yes				
	No				
Continuation of working with IMFs	High				
	Low				

**f) Agricultural yield**

Asset	Level	During the support period of BSD	√	After graduation	√
Improved crop production	Low				
	High				
Increase of number of livestock	Low				
	High				
Access to improved seeds	Low				
	High				

**Thank you for your collaboration!!**

### **Appendix 3: Interview for the Executive Secretaries**

1. What are different aspects of family conflicts, trauma and ignorance among beneficiaries of BSD Muhanga?
2. What are various difficulties within households in Muhanga district that lead to the non-graduation of beneficiaries?
3. What is the relationship between family conflicts, trauma and ignorance and non-graduation of beneficiaries of BSD Muhanga?

**Appendix 4: Administrative map of Muhanga District**



**Location of BSD Muhanga**