

PERCEPTIONS AND EXPERIENCES OF ELDERLY BENEFICIARIES REGARDING THE IMPACT OF THE SAGE PROGRAM ON THEIR NUTRITIONAL WELL-BEING IN NAZIGO SUBCOUNTY KAYUNGA DISTRICT. A CROSS-SECTIONAL STUDY.

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ABSTRACT

Background

The causes of food insecurity in Uganda are multifaceted, including climate vulnerability, political instability, gender inequality, rising conflict, increasing food prices, and livestock diseases among others. The study aims to assess the perceptions and experiences of elderly beneficiaries regarding the impact of the SAGE program on their nutritional well-being.

Methodology

A cross-sectional descriptive study design was employed, involving 120 elderly participants who were beneficiaries of the SAGE program. Data were collected using structured interviews and a pre-tested questionnaire covering socio-demographic characteristics, food security status (assessed via HFIAS), and perceptions of the SAGE program. Descriptive and inferential statistics, including logistic regression analysis, were utilized to identify factors associated with food insecurity.

Results

The majority, 58.3% (n=70), had no formal education, 33.3% (n=40) had completed primary education, and only 8.3% (n=10) had attained secondary education, 62.5% (n=75) indicated that the grant had no effect, 23.3% (n=28) of respondents reported that the grant had either negatively or very negatively impacted their ability to purchase food. 14.2% (n=17) felt that the grant had positively or very positively affected their ability to buy food. Over 20.0% (n=24) of respondents noted a slight improvement, while only 5.8% (n=7) reported significant improvement in their nutritional status. Conversely, 54.2% (n=65) of respondents indicated no change in their nutritional well-being, and 20.0% (n=24) experienced a slight decline.

Conclusion

The SAGE program, while providing some financial assistance, has a limited impact on food security and nutritional well-being.

Recommendations

Providing educational and awareness programs for the elderly on nutrition, health, and financial management could empower them to make better decisions and improve their food security.

Keywords: SAGE program, Perceptions and experiences, Elderly beneficiaries, Nutritional well-being

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BACKGROUND

The causes of food insecurity in Uganda are multifaceted, including climate vulnerability, political instability, gender inequality, rising conflict, increasing food prices, livestock diseases, poverty, landlessness, lack of education, and high fertility rates. To combat chronic poverty among the elderly, the Ugandan government implemented the Expanding

Social Protection Programme (ESCP) through the Ministry of Gender, Labour, and Social Development. Since 2010, the Senior Citizen Grant (SCG) has provided elderly persons with 25,000 Ugandan shillings per month to support basic consumption and alleviate poverty (Policy et al., 2013). Elderly persons are particularly susceptible to malnutrition due to practical issues in providing adequate nutrition. As people age, lean body mass and basal metabolic rate decline,

reducing energy requirements while increasing the need for other vital nutrients. Ensuring appropriate nutrition is crucial for maintaining immunity and functional ability in the elderly, highlighting the importance of comprehensive dietary care (Krishnamoorthy et al., 2018). The FAO defines food security as having timely access to safe and nutritious food obtained through socially acceptable means, without resorting to emergency supplies, scavenging, or theft. Food insecurity, therefore, occurs when individuals or households lack access to safe, nutrient-dense, acceptable foods. This condition can arise from various factors, including financial constraints, functional disabilities, and social isolation (Osei-Owusu et al., 2024). A survey conducted by the Office of the Prime Minister (OPM) in 2015 to gather a midline report found that households had received 2.7 payments on average from the start of the program, worth a total of UGX 132,000. The SCG beneficiary households received an average total value of UGX 128,500 for SCG beneficiaries (OPM, 2017). Beyond the various costs associated with collecting the transfer, and the minority issue of illicit fees being charged at the pay point, overall, the program was perceived very well. Almost no households reported any stigma attached to participation in the program. Similarly, positive findings that virtually everyone felt safe when collecting their transfer and that SAGE was largely seen to have had a positive effect on relationships both between different and within the same households (Merttens, Sindou, Attah, & Hearle, 2016). The study aims to assess the perceptions and experiences of elderly beneficiaries regarding the impact of the SAGE program on their nutritional well-being.

METHODOLOGY

Research design

This study employed a cross-sectional descriptive study design using quantitative approaches. The quantitative approach involved a cross-sectional survey to collect numerical data. The study design was strong in describing phenomena, identifying emerging conditions, and associated factors in gerontology, and cheap in economic terms.

Study Population

The study population comprised elderly individuals aged 60 years and above who are beneficiaries of the SAGE program by the Ministry of Gender, Labour, and Social Development (MGLSD) of the Government of Uganda in Nazigo Sub-county, Kayunga District. This group was selected because they receive social grants intended to improve their livelihood and well-being.

Sampling size determination

Simple random sampling and systematic probability sampling techniques were used in the study. The study population was drawn using the Cochran formula (Kunzmann et al., 2021).

$$n = \frac{Z^2 * p(1 - p)}{d^2}$$

z is the statistical confidence, 1.96 at 95% C.I

p = Expected prevalence, 18.9%. 150,000 in 798,525 older persons in Uganda receive SAGE

d = Intended precision, 5%

n = 120 older persons (60 years and above) receiving SAGE will be selected to participate in the study.

Sampling Procedure

A multistage sampling procedure was used. Firstly, a list of elderly beneficiaries of the SAGE program was obtained from the office of MGLSD at the Kayunga district office. From this list, participants were selected using systematic random sampling for the survey. For qualitative interviews, purposive sampling was employed to select individuals who provided detailed information about their experiences.

Data collection methods

Data for this study was collected using the following methods.

In-depth Interviews

This method involved conducting face-to-face interviews with a subset of elderly beneficiaries using a semi-structured interview guide. The guide was structured to gather qualitative data on the Food Consumption Score (FCS) and Household Hunger Scale (HHC) indicators of food security and explore their perceptions and experiences in detail.

Questionnaires

The method involved the use of a predefined set of questions presented similarly to all respondents. The questionnaires included both closed and open-ended questions designed to gather quantitative data on socio-demographic characteristics, food security status, factors influencing food insecurity, and other relevant variables.

Data collection tools

The following tools were used during data collection.

Interview guides

Interview guides were developed and used to guide in-depth face-to-face interviews, focusing on the impact of the SAGE program on the food security and nutritional well-being of the elderly.

Questionnaires

A predefined structured questionnaire was designed to capture data on socio-demographic information, household food security status (using the Household Food Insecurity Access Scale - HFIAS), and other factors related to food insecurity.

Quality Control of data

Reliability

Pre-testing the questionnaires and interview guides was done to ensure reliability. Questions adapted from the HFAIS guide and SAGE assessment guide of the MGLSD. Cronbach's alpha was used to assess the internal consistency of the questionnaire items.

Validity

Content validity was ensured by having experts review the instruments. Construct validity was checked through factor analysis to identify factors that explain patterns of correlation, cross-validation, and selecting factors of best represent the underlying construct.

Data Analysis Procedure

Analysis of quantitative data

Data from questionnaires were analyzed using descriptive statistics (frequencies, percentages) and inferential statistics (chi-square tests, logistic regression) to identify factors associated with food insecurity.

Analysis of qualitative data

Data from interviews were transcribed, coded, and analyzed thematically. Using the Statistical Package for Social Sciences (SPSS), cross-tabulations and multivariate regression analysis were conducted to identify key themes and patterns regarding the impact of the SAGE program on food security and nutritional well-being.

Ethical Considerations

Informed Consent: Participants were fully informed about the study's purpose, procedures, potential risks, and benefits. Written and signed consent was obtained before participation.

Confidentiality: Participants' privacy was protected by ensuring that all data collected was anonymized and securely stored.

Voluntary Participation: Participation in the study was entirely voluntary, and participants could withdraw at any time without any consequences.

RESULTS

Social Demographic Characteristics of Respondents

A total of 120 elderly individuals participated in the study. Among these, 55.8% (n=67) were female, while 44.2% (n=53) were male. The age distribution revealed that the majority of respondents, 54.2% (n=65), were aged between 60-69 years, followed by 33.3% (n=40) who were between 70-79 years. Only 12.5% (n=15) of the respondents were aged 80 years and above. 37.5% (n=45), were widowed, 35.8% (n=43) were married, and 26.7% (n=32) were either divorced or separated. A significant proportion of the elderly, 58.3% (n=70), had no formal education. Meanwhile, 33.3% (n=40) had completed primary education, and only 8.3% (n=10) had attained secondary education or higher. The majority of the participants, 60.8% (n=73), were engaged in subsistence farming. 20.8% (n=25) of remittances and about 18.3% (n=22) depended on Pensions and the SAGE program.

Table 1: Sociodemographic Characteristics of Respondents

Variables	Category	Frequency (n=120)	Percentage (%)
Age	60 - 69 years	65	54.2
	70 - 79 years	40	33.3
	80 years and above	15	12.5
Gender	Male	53	44.2
	Female	67	55.8
Marital Status	Married	40	33.3
	Widowed	60	50
	Single	10	8.3
	Divorced/Separated	10	8.3
Number of Household Members	None	14	10.2
	2 - 5 members	68	57.6
	Above 5 members	38	32.2
Education Level	No formal education	70	58.3
	Primary education	40	33.3
	Secondary education and above	10	8.3
Main Source of Income	Subsistence farming	73	60.8
	Remittances	25	20.8
	Pension/SAGE	22	18.3

Food Security Status

The results from the analysis of HFIAS data indicated that 54.2% (n=65) of the respondents were either moderately or

severely food insecure with over 37.5% (n=45) classified as moderately food insecure, while 16.7% (n=20) classified as severely food insecure. Only 16.7% (n=20) of the respondents were found to be food secure, with about 29.2% (n=35) experiencing mild food insecurity.

Table 1: Food Security Status of Respondents

Food Security Status	Frequency (n=120)	Percentage (%)
Food Secure	20	16.7
Mildly Food Insecure	35	29.2
Moderately Food Insecure	45	37.5
Severely Food insecure	20	16.7

The data indicated that female respondents were more likely to experience food insecurity compared to their male counterparts. Specifically, 62.5% of females (n=40) were either moderately or severely food insecure, compared to 45.5% of males (n=25) as shown in figure 1. Households with more than five members were more likely to be food

insecure, with 65.2% (n=30) of these households experiencing moderate or severe food insecurity. Likewise, widowed or divorced respondents were more likely to experience food insecurity, with 63.6% (n=35) being moderately or severely food insecure, compared to 47.1% (n=30) of those who were married or living with a partner.

Table 2: Food security status per the social demographic variables of the participants

Socio-Demographic Factor	Food Secure (%)	Mildly Food Insecure (%)	Moderately Food Insecure (%)	Severely Food Insecure (%)
Gender				
Male (n=55)	11 (20.0)	19 (34.5)	17 (30.9)	8 (14.5)
Female (n=65)	9 (13.8)	16 (24.6)	28 (43.1)	12 (18.5)
Number of Household Members				
1-5 Members (n=70)	18 (25.7)	20 (28.6)	20 (28.6)	12 (17.1)
>5 Members (n=50)	2 (4.0)	15 (30.0)	25 (50.0)	8 (16.0)
Marital Status				
Married/Living with Partner (n=65)	15 (23.1)	19 (29.2)	20 (30.8)	11 (16.9)
Widowed/Divorced (n=55)	5 (9.1)	16 (29.1)	25 (45.5)	9 (16.4)

Perceptions and Experiences of the SAGE Program

The perceptions and experiences of the elderly beneficiaries regarding the SAGE program were explored through in-depth interviews. Key themes identified include the impact on food security, nutrition, and health well-being.

Impact on Food Security

A significant portion of the respondents reported minimal positive impact. The majority, 62.5% (n=75) indicated that the grant had no effect, and 23.3% (n=28) of respondents reported that the grant had either negatively or very negatively impacted their ability to purchase food. Only 14.2% (n=17) of the respondents felt that the grant had positively or very positively affected their ability to buy food.

Impact on nutrition and health wellbeing

Over 20.0% (n=24) of respondents noted a slight improvement, while only 5.8% (n=7) reported significant improvement in their nutritional status. Conversely, 54.2% (n=65) of respondents indicated no change in their nutritional well-being, and 20.0% (n=24) experienced a slight decline. A smaller percentage, 0.8% (n=1), reported a significant decline in their nutritional well-being. Less than 1% of the respondents reported using the social grant package to cover basic health care expenses although the amount often fell short of covering all medical needs.

DISCUSSION

Perceptions and Experiences of the SAGE Program

Impact on Food Security

Only 14.2% felt that the grant had a positive impact. This low level of positive impact suggests that the SAGE grant is insufficient to significantly improve the food security status of the elderly. The limited purchasing power of the grant, coupled with rising food prices, may explain why many respondents did not perceive any improvement in their food security (MGLSD, 2018).

Impact on Nutritional and Health Well-being

Regarding nutritional and health well-being, the majority of respondents (54.2%) indicated no change, and 20% experienced a slight decline. Only 5.8% reported a significant improvement in their nutritional status. These findings suggest that the SAGE program's impact on the nutritional well-being of the elderly is minimal. This aligns with the literature, which shows that cash transfer programs, while beneficial, often need to be supplemented with other interventions to achieve meaningful improvements in health and nutrition (Help Age International, 2019).

CONCLUSION

The SAGE program, while providing some financial assistance, has a limited impact on food security and nutritional well-being.

RECOMMENDATIONS

Providing educational and awareness programs for the elderly on nutrition, health, and financial management could

empower them to make better decisions and improve their food security.

Encouraging and supporting small-scale farming and other income-generating activities could provide the elderly with additional sources of income, thereby enhancing their food security.

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LIST OF ABBREVIATIONS

FAO: Food Agricultural Organisation
FCS: Food Consumption Score
MGLSD: Ministry of Gender, Labour and Social Development
SAGE: Social Assistance Grants for Empowerment
SCG: Social Citizen Grant
ESCP: Expanded Social Citizen Protection

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CONFLICT OF INTEREST

The author did not declare any conflict of interest.

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REFERENCES

1. HelpAge International. (2019). Global Age Watch Index 2019: Insight report. <https://www.helpage.org/resources/globalagewatchindex2019/>
2. Merttens, F., Sindou, E., Attah, R., & Hearle, C. (2016). EVALUATION OF THE UGANDA SOCIAL ASSISTANCE GRANT FOR EMPOWERMENT(SAGE) PROGRAMME. Kampala: University of Makerere
3. Ministry of Gender, Labour, and Social Development. (2018). Assessment of the SAGE program in Uganda. <https://www.mglsd.go.ug/publications/assessmentofthesageprogramuganda>
4. Ojambo, W., D. I., Odunayo, J. A., Adedini, S. A., & Odimegwu, C. (2017). Living Alone among Older Persons in Uganda. *Aging int*, 429-446.
5. OPM. (2015). Evaluation of The Uganda Social Assistance Grants (SAGE). Kampala: Oxford Policy Management.
6. Osei-Owusu, C., Dhillon, S., & Luginaah, I. (2024). The impact of food insecurity on mental health among older adults residing in low- and middle-income countries: A systematic review. *PLOS ONE*, 19(3), e0301046. <https://doi.org/10.1371/journal.pone.0301046>
7. Policy, O., Barrett, S., & Wandera, A. (2013). Evaluation of the Uganda Social Assistance Grants for Empowerment (SAGE) Programme Baseline report These include the SAGE management team, for their support and cooperation throughout the life of the evaluation, in particular Executive Summary.

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