

Psycho-social outcomes and mechanisms of self-help groups in Ethiopia

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EXECUTIVE SUMMARY

Tearfund has implemented a programme of establishing and facilitating a network self-help groups (SHG) comprising the poorest people in Ethiopian Society since 2002. The SHGs follow a carefully defined philosophy based initially on the self-help group movement run by MYRADA India and adapted to the Ethiopian Context with the assistance of Tearfund Ireland, Tearfund Netherlands, The Dutch Ministry of Foreign Affairs (BuZa) and Irish Aid.

Previous research has examined the cost-benefit of Ethiopian self-help groups and found a very positive cost benefit ratio (Venton, et. al., 2013). However, this research has not documented, other than anecdotally, the social and psychological benefits experienced by the individuals participating in SHGs or the mechanisms involved in bringing about these benefits

This research aims to:

- Evaluate the impact of SHGs on the psycho-social wellbeing of their members
- Elucidate the features of SHGs which promote, and those that may hamper, achieving this impact

Ten SHGs from Wolaita (SNNPR) and Adama (Oromiya) were selected for this study – five young (less than two years) and five more mature (more than five years). The SHGs were chosen to include high- (5), low- (1) and average- (4) functioning groups. A survey of individual members, a focus group with the SHG as a whole and interviews with key informants served to gather qualitative and quantitative data about both the individual and the SHG. Quantitative analysis was complemented by a thematic analysis of the open-ended questions in the survey and focus groups.

We found that, as well as having a clear impact on the financial circumstances, SHGs are also impacting members' lives in a variety of ways. Older SHGs assessed the impact of the SHG as being greater and they scored more highly on measures of psychological and social wellbeing, indicating that the impact of the SHG increases over time. Themes that emerged from the members' discussion of the impact of the SHG were increased finances, moving from poverty to provider, moving from dependence to independence, education gained through the SHG, moving from social isolation to participation, social development, personal development and spiritual development.

We identified several key elements of SHGs that seem to be critical in achieving these positive outcomes. The defined rules and bylaws of each SHG provide a strong structure for members to interact with clear expectations and boundaries. For of members who, in their own words, have come from lives with no structure, no role, no one to meet, no process to follow, the "hard" fixed aspects of the SHG are very empowering. These are complemented by a set of values and principles – of equality, sharing, mutual support and forgiveness. The evidence is strong that the SHGs manage to develop an environment in which all members are valued and get to participate, where dominance by one or two individuals is rare and where conflicts are, generally, effectively dealt with within the group. These "soft" aspects of the SHGs are to some extent built into the structure, but there is a strong indication that facilitators are a critical part of promoting this culture by providing strong models of the values and attitudes that are reported as being characteristic of the SHGs – acceptance, love, forgiveness. A strong theme in both the impact and mechanism sections above is education or training. It is clear that this is an aspect of the SHG that participants find very empowering. Given the low education level that most of the participants are coming from, the opportunity to gain knowledge and skills in areas as diverse as financial management and hygiene is very empowering.

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ACRONYMS & ABBREVIATIONS

BuZa	Dutch Ministry of Foreign Affairs, Ministerie van Buitenlandse Zaken
CLA	Cluster Level Association
FG	Focus Group
FLA	Federation Level Association
S	Survey
SHG	Self-Help Group
SNNPR	Southern Nations Nationalities and Peoples Region
WHO	World Health Organisation
MYRADA	Mysore Resettlement and Development Agency

1 INTRODUCTION

1.1 TEARFUND SELF-HELP GROUPS

Tearfund has, since 2002, implemented a programme of establishing and facilitating a network of self-help groups (SHG) comprising the poorest people in Ethiopian Society (Abiche, 2012). The SHGs follow a carefully defined philosophy based initially on the self-help group movement run by the Mysore Resettlement and Development Agency – MYRADA- in India (Asha, et. al., 2009) and adapted to the Ethiopian context with the assistance of Tearfund Ireland, Tearfund Netherlands, The Dutch Ministry of Foreign Affairs (BuZa) and Irish Aid. The number of SHGs now established with Tearfund support in East and Southern Africa is over 6000 (including savings groups) and in Ethiopia exceeds 20,000.

The fundamental principle of the SHGs is that of alleviating poverty through restoration of relationships in line with Tearfund's Theory of Change (Venton, et. al., 2012).

Key principles of these SHGs are:

- No money given to the poor from the promoting organisation – the SHG is financed entirely by member savings
- Resources are put into facilitating the SHG set-up and management and into training members
- The SHG is self-governing, writing its own rules and managing its own business

Further principles of Tearfund SHGs are elaborated below.

1.1.1 The Self Help Group approach

SHGs are set up by local partners with the support of Tearfund. Trained facilitators seeking to set up SHGs in a specific region, town or village start by working with the local community and/or local churches to identify the poorest people in the area. These people are then invited to join one or more SHGs. Each SHG is comprised of 15-20 people.

SHGs are self-governing. The first actions taken by a newly formed SHG is to agree their own set of by-laws – the rules that will govern operation of the SHG. Trained facilitators will guide them in developing them along the lines of established best practice but each SHG will adapt the rules as they see fit.

SHGs have a number of typical characteristics.

- They have a fixed membership – occasionally members leave, e.g. when they move to a new area. Rarely do new members join an existing group; if they do it is normally to replace a family member that has moved or passed away. New potential members are organised into new groups.
- They hold a weekly meeting which every member is expected to attend. Typically members are fined if they do not attend without sufficient reason.
- Members agree to save a small amount each week, starting with about \$0.02.
- After a fixed period of savings members can take out a small loan with agreed repayment terms. When the loan is repaid a further loan can be taken out.
- Initial loans are normally used to pay for specific expenses, e.g. School books, but later loans are expected to be used to for income generating activities.

- Many SHGs also have a social fund to which members contribute each week. The social fund is used to help out with funeral expenses if a member has a bereavement, wedding celebrations, etc.
- Trained facilitators attend the meetings
- A range of training courses is provided to the members by their own and other facilitators, e.g. business skills, literacy, composting, terracing, water source management, hygiene, sanitation.
- There are a number of leadership roles in each SHG which are typically rotated annually, although secretary and treasurer roles are sometimes allocated according to literacy.
- Normally a different member is asked to lead the meeting each week to develop the confidence of each member and build the sense of equality and share ownership of the group.
- As they develop SHGs are encouraged to set up group income generating activities (IGAs) – shared business ventures. Examples would be buying a ewe and a ram and giving the offspring to each member in turn, or buying a commodity such as butter in bulk when it is cheap and selling it on when the price is higher.
- Sometimes the SHG gets involved in the local community acting as a lobby group to get improved facilities, etc.

Once 8-12 SHGs are established in an area and have reached a certain level of maturity they elect two members each to join a Cluster Level Association (CLA). The CLA is financially supported by contributions from the SHGs and plays a role in further developing existing SHGs and starting new ones. When 10 or more CLAs have been formed and become mature, a higher Federal Level Association (FLA) is formed from elected SHG members, which is then registered with the government and provides a significant voice for SHGs.

1.1.2 Previous studies on SHGs

As well as Tearfund internal monitoring and a range of project evaluations, there have been a number of previous studies of SHGs in Ethiopia. One of the key studies reported strong cost benefits of SHGs in Ethiopia – (Venton, et. al., 2013). Individual SHGs showed benefit to cost ratios of between 58 and 173 to one, some of the highest reported when using cost benefit analysis to assess impact. Other research has explored the impact of SHGs on food security (Mooiweer, 2016) and food resilience (Meehan & Mengistu (2016). Venton, et. al.'s (2013) study only quantified economic benefits, such as increases in income, increased school attendance, access to low interest loans, and decreased stress sales. It reported but did not quantify health, social and psychological benefits, including increasing the confidence and voice of women, reducing religious and ethnic tensions. The report recommends “further qualitative evaluation to complement the quantitative analysis and to identify the key success factors associated with this model” and that more systematic monitoring and evaluation of health and other impacts be carried out.

There has also been some research documenting the social and psychological benefits of similar SHGs in India. 63% of SHG members reported greater participation in social activities, 59% greater self-confidence and 58% better social relations Lokhande (2008). Puhazhendi and Badatya (2002) found an increase self-confidence, improved family relations and better communication.

There have also been a number of qualitative studies of SHGs. Moorthy (2014) reported on four case studies of SHG members in Ethiopia who participated in interviews and discussed the impact the SHGs had on their lives. The stories are very positive but the research is open to selection bias – it is unclear how these four women were selected and whether they are representative of SHG members. The study also does not attempt to tease out the mechanisms that may be working in

SHGs to bring about the impacts described. Teshome et. al. (2012, 2014) used surveys, interviews and focus groups to study "iddirs". An Iddir is "an indigenously-formed, traditional community-based informal social and financial institution that is concerned with the socio-economic affairs of the members" (Abiche, 2012). Iddirs, differ from SHGs in a number of ways – they do not have a fixed membership, there are no penalties for not attending, there is no requirement to save regularly and there are no cluster- or federation-level associations. Teshome et. al. found that the iddirs were valued more for, and were perceived as delivering better on, social than financial needs. The majority of participants reported greater confidence in participating in society and greater willingness to help each other.

Abiche (2012) directly compared SHGs and Iddirs. While members of both groups reported modest improvements in their livelihood, SHG members were more likely to be engaged in entrepreneurship activities, they were involved in decision making and reported higher levels of trust in each other. While Abiche's study provides positive indications of the impact of SHGs on the participation and trust, his study did not measure psycho-social wellbeing per se and did not take the age of the SHGs into account. Presumably SHGs have an impact on their members over time and this is a key element introduced in the current study – an explicit examination of differences between young and older SHGs.

1.2 THIS RESEARCH

1.2.1 The logic

The economic benefits of SHGs have been well established – they are effective in lifting people out of poverty in a sustainable and cost-effective way (Venton, et. al., 2013). Previous research by Tearfund and Ireland has examined the cost-benefit of Ethiopian self-help groups and found a very positive cost benefit ratio (Venton, et. al., 2013). However, this research has not documented, other than anecdotally, the social and psychological benefits experienced by the individuals participating in SHGs or the mechanisms involved in bringing about these benefits.

As long ago as 1996, Larson argued that the WHO definition of health should include spirituality, not just as a cause of wellbeing but as a dimension of wellbeing. Since Seligman's (2000) landmark paper on positive psychology, academic psychology has increasingly incorporated spirituality into its measuring and conceptualisation of wellbeing. Spiritual wellbeing is not conceived of as being specific to a particular, or any, religion but is comprised of elements such as gratitude, meaning of life, forgiveness, peace and hope. Two scales of spiritual wellbeing – specifically of meaning of life and gratitude - were included in this study. Whatever their religious background or affiliation, involvement in a SHG could have a positive impact on the gratitude members feel and on the meaning they see in their lives.

Ethiopia is one the most religious countries in the world, with 99% of the population saying they are religious³. In this context we would expect changes in their spiritual lives, whatever their religious affiliation, to be important to them. For this reason we also explored, qualitatively, what impact SHG membership had on their spiritual lives.

Tearfund, Ireland and Netherlands have signed up to the Red Cross Code of conduct which commits it to giving equal treatment to SHG members regardless of race, creed or nationality of the recipients and that the SHG is not used to further a particular political or religious standpoint. Incidental to the main objectives of this study was an opportunity to validate that this is happening in practice –

³ WIN/Gallup as reported in the Telegraph 16 April 2017 - <http://www.telegraph.co.uk/travel/maps-and-graphics/most-religious-countries-in-the-world/>

specifically that there is no differential treatment on the basis of religious background or reported pressure to convert.

The first part of this paper examines the potential psycho-social and spiritual benefits of SHG membership, evaluates the research evidence and proposes further research strategies.

Knowing the extent to which SHGs are effective in delivering on social and psychological, as well as economic, benefits is one thing, understanding how and why they do so is another. The question breaks down into a number of subsidiary questions:

- What are the effective “ingredients” of SHGs?
- What contextual factors – social, political, religious - may influence effectiveness of SHGs?
- What individual factors determine effective engagement with SHGs or, conversely, disengagement?
- What intra-group factors may influence the effectiveness of a SHG?
- What theoretical perspectives can help us understand how they work?
- What research strategies could help us tease out these influences?

The key applied questions that arise out of these questions are those of transferability. If the substantial benefits of SHGs are to be effectively replicated in different countries and cultures, what process is required to ensure that they function effectively in the new context? And if they can be effectively used to address poverty what can be gleaned for the use of SHGs to address other problems, such as addiction or mental illness?

A theory of change for SHGs has been developed but this has not been empirically tested. The importance of having an empirically validated theory of change for SHGs is that it can inform principled decisions about implementation and adjustment of SHGs in new and changing contexts.

1.2.2 The opportunity

This research arose out discussions between Ephraim Tsegay, Tearfund country representative in Ethiopia, Sam Cromie of Trinity College, the lead researcher on this project, and Markus Köker, International programmes manager of Tearfund Ireland. These led to the elaboration, in 2015, of an outline research plan which would be ready for implementation when suitable funding became available, and scalable to the size of that funding. The plan was written with the expectation that funding to complete the full research programme may not be forthcoming in one tranche, so it is designed to be implementable in phases.

In June 2016 the Tearfund office in Ethiopia identified some funding from BuZa through Tearfund Netherlands which could be used to commence implementation of the research plan. The terms of reference were finalised between Tearfund, Tearfund Ireland and Trinity College Dublin in November 2016 and data collection started later that month.

1.2.3 The rationale for the research approach

This research entails an intensive study of a small number of self-help groups using a mixed methods approach. Quantitative data from the survey of SHG members and interview with key informants can be interpreted in the context of the rich qualitative accounts of each SHG that emerge from the focus groups, observations and personal stories in the surveys and interviews.

This approach is appropriate because it is unlikely that the relationship between mechanisms and outcomes will be a simple formula – put together the following ingredients and one will achieve a positive outcome for the participants. Rather it will be a nuanced account of how different elements of SHGs interact with the context to effect change.

As a cross-sectional study with data gathered at one point in time, the study is limited in its ability to draw strong causal implications – it is a snapshot. However a number of elements in the study are designed to strengthen the causal interpretation:

- The sample of SHGs is designed to include both young (<2 years) and older (>5 years) SHGs with the rationale that both the mechanisms and outcomes will be more mature in the older SHGs.
- Self-assessment of the impact of the SHGs is included in the survey as well as established scales of well-being. Thus, even if change due to SHG involvement cannot be demonstrated from the scales, it may be indicated in the self-assessments.
- The study is designed to function as a time 1 study to be followed up in several years' time. Plotting changes over time in both the younger and older SHGs should provide a much stronger basis for causal analysis.

Even still the study will not function as an experiment. The strongest causal analysis would be possible if features of SHGs could be manipulated and their effect studied. However, this is not currently feasible, nor perhaps ethical.

1.2.4 Objectives and research questions

This research aims to:

- Evaluate the impact of SHGs on the psycho-social and spiritual wellbeing of their members
- Elucidate the features SHGs which promote, and those that may hamper, achieving this impact

2 METHOD

2.1 DESIGN

The study comprised a mixed methods (qualitative and quantitative) study of ten SHGs. This mixed methods approach was chosen to enable an exploratory understanding of the underlying processes that contribute to the functioning of the SHG (qualitative) as well as to gather numerical information, quantifying the functioning of the SHG (quantitative). The SHGs were chosen deliberately to include:

- Five young (less than 2 years) and five older (more than 5 years) SHGs
- High (5), Average (4) and Low (1) functioning SHGs; this was defined by Tearfund's local partners depending on the outcome of the periodic SHG assessment carried out by the CLA
- SHGs from two regions – Oromiya (Adama Zone), and SNNPR (Wolaita Zone)
- All-female SHGs; given the size of the sample and the number of variables exploration of gender differences was not considered feasible

Four data collection methods were used:

1. Surveys of the SHG members, including:
 - a. Demographic data
 - b. Self-evaluations of current status and changes since joining the SHG in finances, health, education, and wellbeing
 - c. Standardised scales of key psycho-social and spiritual dimensions
 - d. Team evaluation items
2. In-depth focus groups with the SHGs focussed on elaborating their understanding of how the SHGs work, how they influence change in their members' lives and what the key mechanisms are
3. Profiling of SHGs using a structured interview with key informants and reference to data gathered by Tearfund or its partners:
 - a. Date of formation, location, ethnic and religious composition, etc.
 - b. Local socio-political and economic context
 - c. Any significant events in the history of the SHG – internal conflicts, members leaving, drought challenges
4. Semi-structured observations of the focus groups to gather data on non-verbal behaviours and team interactions

2.1.1 Impact

The study examined the impact of the SHG on wellbeing in three ways:

1. We directly asked participants to assess the impact of the SHG on different dimensions of their life – self-assessed impact
2. We measured some of those dimensions using standard scales – scale-assessed impact
3. We asked members – in the surveys and focus groups – to describe how the SHG has impacted different aspects of their lives

We predicted that older SHGs would show a greater impact. We also anticipated that there might be some difference between these measures – i.e. that participants might perceive a change that is not borne out in the scales, or that the scales may exhibit a change that is not perceived. The qualitative accounts should give insight into the nature of the changes

2.1.2 Mechanisms

The study examined the mechanisms influencing the wellbeing of SHG group members in two ways:

1. Quantitative measures of the group functioning:
 - a. Team evaluation items in the survey
 - b. Level of functioning as assessed by the CLAs – low, average, high
 - c. Group profiling questions in key informant interviews
2. Qualitative information on the group and its functioning
 - a. Focus group questions probing how the group works, how they resolve conflict and what the key mechanisms are
 - b. Observations of the focus groups
 - c. Open questions in the key informant interview

We predicted that SHGs that scored higher on team evaluations and level of functioning would show greater self-assessed and scale-assessed wellbeing.

2.2 PARTICIPANTS

137 SHG members participated in the surveys; only one was male. They derived from 10 SHGs, five in Adama Zone (69 members) and five in Wolaita Zone (68 members). Members ranged in age from 19 to 63 with a mean age of 36. Table 1 shows the breakdown of participants by religion – almost all were either Orthodox or Protestant.

Religion	Frequency	Percentage
Orthodox	82	60%
Protestant/Evangelical/Pentecostal ⁴	52	38%
Catholic	1	1%
Muslim	2	1%
Total	137	

Table 1. The religious affiliation of the study participants

Most of these also participated in the focus groups; there were a small number who only took part in the survey. Interviews were conducted with 8 different facilitators – two facilitators were interviewed about two different SHGs each.

2.3 INSTRUMENTS

The following standardised scales were used in the survey:

- The Ryff (2014) Scale of Psychological Wellbeing, 54-item version. It is comprised of six dimensions - autonomy, environmental mastery, personal growth, positive relations, purpose in life, self-acceptance
- The Keyes (1998) Social Well-being scale; 33-item version comprising five dimensions - social actualisation, social acceptance, social integration, social contribution and social coherence
- The Meaning in Life Questionnaire (Steger et. al. 2006); 10 items comprising two dimensions – presence and search
- The Gratitude Questionnaire (McCullough et. al. 2002), 6 items comprising a single dimensions

⁴ The term “protestant” is used throughout this report to refer to members from a range of churches from the Evangelical/Pentecostal protestant tradition, including the Ethiopian Kale Heywet Church, Mekene Yesus and Apostolic churches.

- Psychological Safety Scale (Edmundson, 2004), 7 items comprising a single dimension

Additional items specific to this survey were included to gather data on:

- Demographic variables
- Perceived changes and the contribution of the SHG to those changes
- Team variables indicated as important in the literature but not covered in the Psychological Safety Scale

The focus group, interview and observation protocols were developed specifically for this study.

The survey, interview and focus group schedules were developed in English and translated into Amharic, the Ethiopian national language.

2.4 PROCEDURE

The data-gathering took place over a two week period in November-December 2016 taking one day for each SHG. The research was carried out at locations accessible to the SHG members, typically a local church or school. Members of each selected SHGs were invited to attend the research location together on a particular morning. They were briefed as a group about study and the ethical procedures - consent, confidentiality. Consent was gathered verbally and the surveys administered orally since many of the participants were not literate.

Surveys were carried out by a team of SHG facilitators (used for convenience) who had been briefed on the survey instrument. For many participants, particularly in Wolaita, the survey needed to be translated from Amharic to their local language by the survey administrators. SHG facilitators were used because they were available, familiar to, and likely to be trusted by, the participants. Using external researchers would have added substantially to the time and cost and may not have been able to establish the level of trust needed. This was judged more important than the risk of responses being either positively or negatively biased by the presence of the facilitator.

In the afternoon the SHG members returned to the research location for the focus group. Depending on the weather and facilities, the focus groups were conducted in the church/school building or outside. The focus group was facilitated by an independent consultant or researcher in Amharic. In Wolaita, a local facilitator acted as interpreter for those not familiar with Amharic.

When an additional researcher was available, they would conduct observations during the focus group. The key informant interviews were conducted in the afternoon after the focus group.

2.5 QUALITATIVE ANALYSIS

The qualitative data from the survey and focus groups were integrated for qualitative analysis. A thematic analysis was carried out to tease out the themes that emerged from the participants' answers.

3 WELLBEING OF SHG MEMBERS

To evaluate the wellbeing of SHG members we present the outcomes using the full original scales, since this will facilitate comparison with published data. For further analysis below, we refined the scales for this sample. The SHG members surveyed scored positively on all measures of wellbeing, with the spiritual wellbeing scales showing a higher level than psychological or social wellbeing. They displayed a mean Psychological wellbeing score of 3.55 (on a scale of 1-6 indicating a marginally positive psychological wellbeing). On the social wellbeing scale they scored a slightly positive mean of 4.0 on a scale of 1-7. Meaning of Life had a mean of 5.0 and Gratitude a mean of 4.8 (both on a scale of 1-7). Participants scored a mean of 3.25 on Psychological Safety (scale of 1-5) just above the middle point.

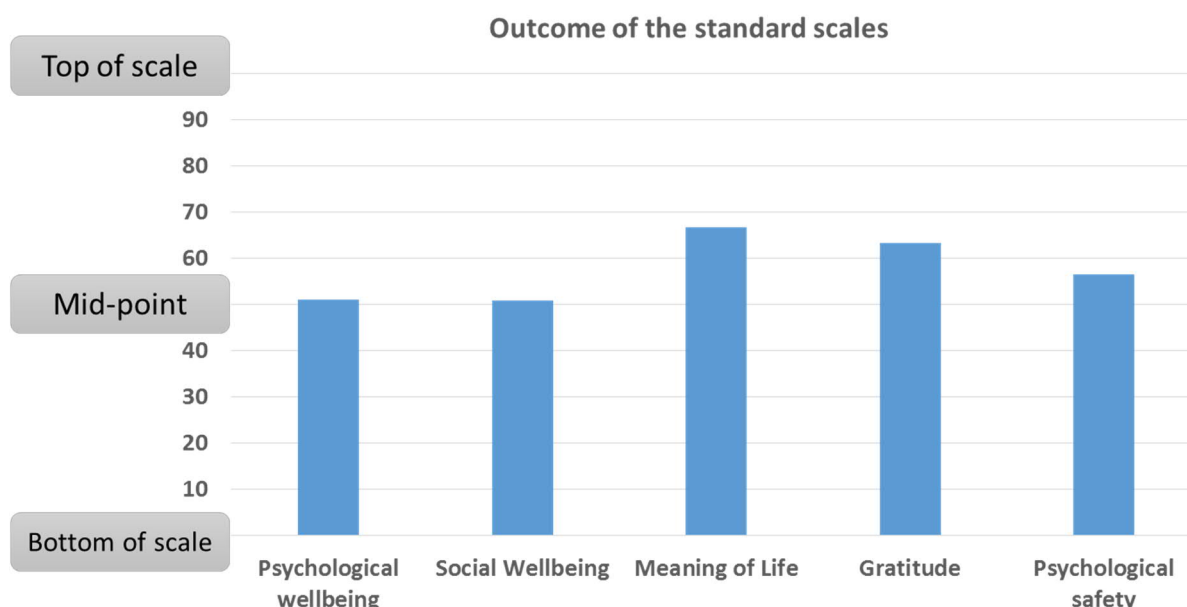


Figure 1. Wellbeing outcomes expressed in proportion to the scale.

Reliability analysis was conducted on the scales used in this study. It was found that all the scales, in their original form, fell short of the acceptable reliability reported in the literature. This is likely because some items did not translate well into the local culture or language. The scales were revised by removing problematic items until the reliability reached acceptable levels. These revised scales were used for further analysis. The gratitude scale did not reach acceptable levels of reliability so we did not use it as a scale for further analysis, focusing instead on individual items.

4 IMPACT

The study examined the impact of the SHG on wellbeing in three ways:

1. We directly asked participants to assess the impact of the SHG on different dimensions of their life – self-assessed impact
2. We measured some of those dimensions using standard scales – scale-assessed impact
3. We asked members – in the surveys and focus groups – to describe how the SHG has impacted different aspects of their lives

We predicted that older SHGs would show a greater impact. We also anticipated that there might be some difference between these measures – i.e. that participants might perceive a change that is not borne out in the scales, or that the scales may exhibit a change that is not perceived. The qualitative accounts should give insight into the nature of the changes.

In the sections below we look first at the self-assessed impact and scale-assessed impact on the wellbeing variables. Then we take a closer look at the different areas of impact through the lens of the qualitative accounts.

4.1 SELF-ASSESSED IMPACT

We asked participants two questions about different aspects of their lives – how much has that aspect changed since you joined the SHG, and how much of that change was due to the SHG. Figure 2 presents the results of these questions, with change on the vertical axis and the SHG contribution on the horizontal axis. All aspects were perceived to have changed positively and been impacted by the SHG. This is a very positive evaluation of the SHGs – the participants have experienced a lot of positive change in their lives and attribute a large amount of it to the SHGs. Education changed least and was assessed as being least affected by the SHG.

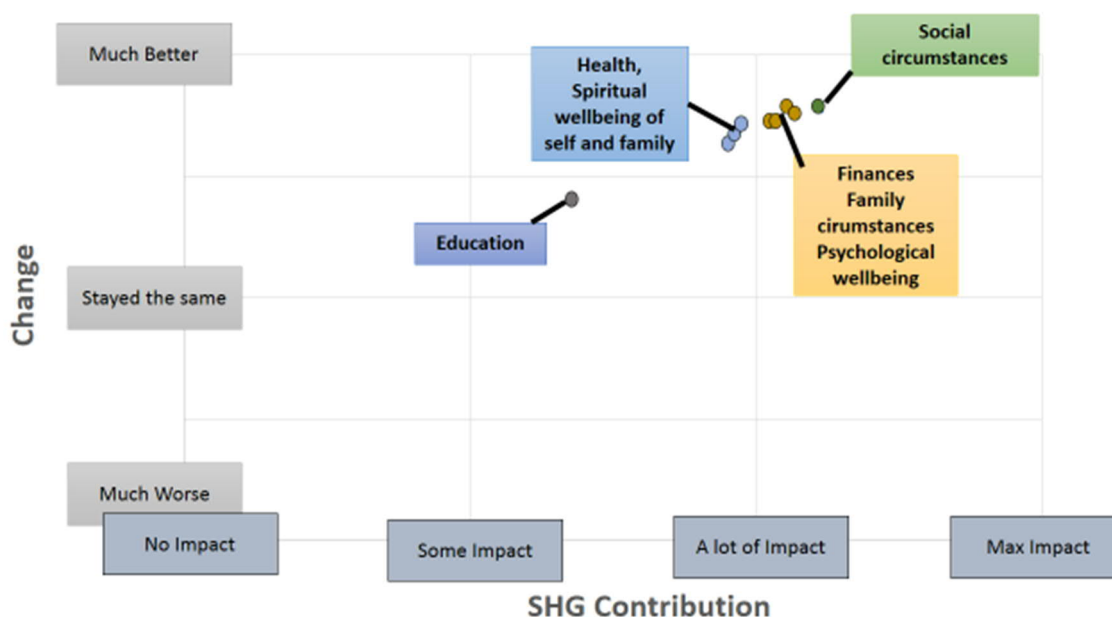


Figure 2. Self-assessed change and SHG impact

We wanted to create a single figure to represent the perceived impact of SHGs on each of the different dimensions of wellbeing. So we combined the amount of change they reported in that

dimension with the contribution of the SHG to that dimension, and called it SHG impact. Figure 3 below shows the perceived impact of the SHG on each of dimension for the young and older SHGs.

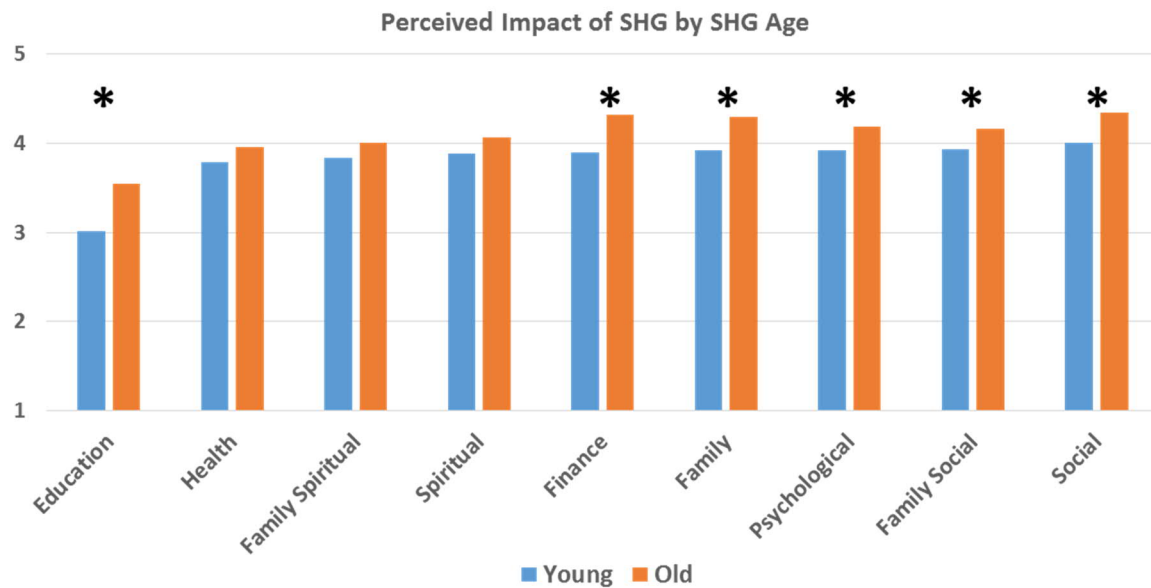


Figure 3. Perceived impact of the SHG in young vs older SHGs. * statistically significant differences.

Figure 3 shows that, as predicted, older SHGs assess the SHG as having a greater impact on different dimensions of their lives. We looked at other variables that may explain the differences in perceived impact. Member age is related to perceived impact for most variables, but it overlaps with SHG age considerably as a predictor, since older SHG groups, naturally, have older members. When member age is controlled for, all but perceived psychological impact still hold up.

Self-assessed impact is also related to location, with Adama members consistently rating the impact of the SHG more highly, even when age and SHG age are taken into account. See figure 4.

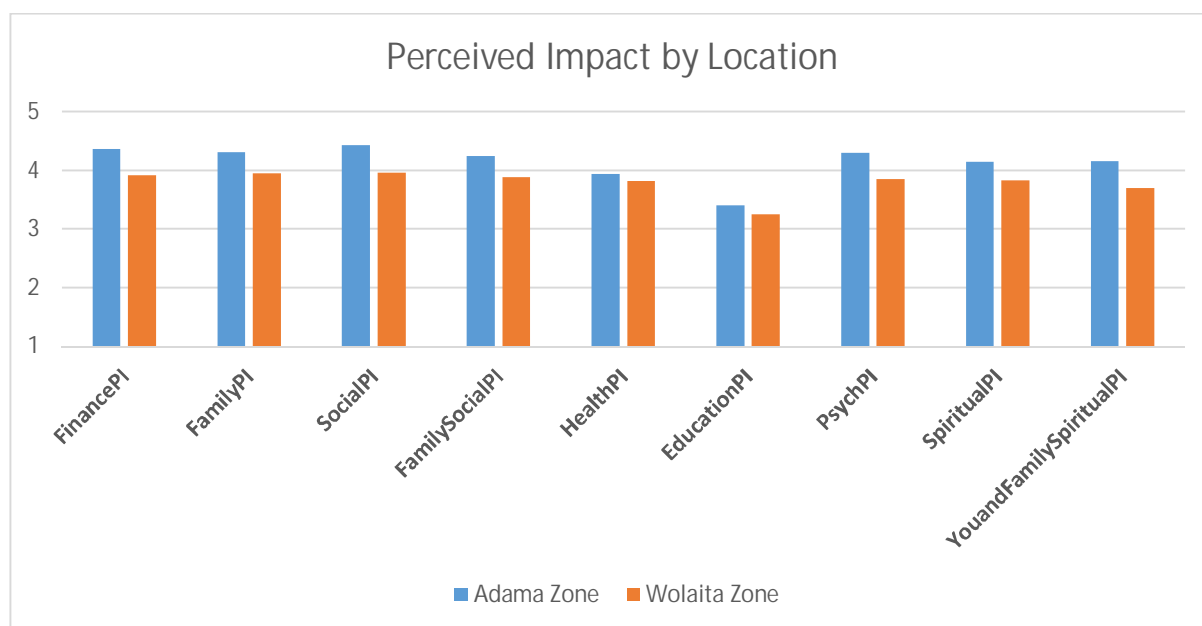


Figure 4. Perceived impact of SHG group by Location. All except health and education are statistically significant.

Religion (protestant vs orthodox) is a predictor of perceived impact but this disappears when SHG age, location and member age are accounted for.

4.2 SCALE-ASSESSED IMPACT

4.2.1 Age of group

Older SHGs had significantly higher psychological and social wellbeing scores (figure 5). This is the case even when the age of the individuals is taken into account. On the other hand, their scores on the meaning of life scale were not significantly better.

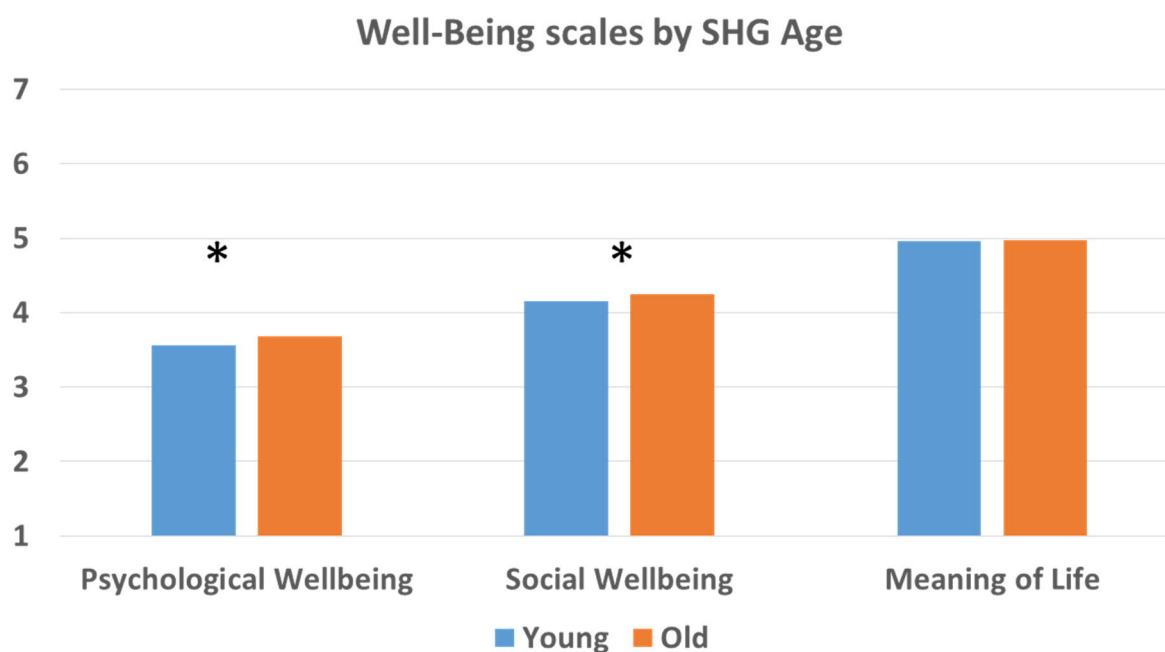


Figure 5. Wellbeing scale by SHG Age. * Statistically significant differences.

It is clear that involvement in an SHG has a positive impact on social and psychological wellbeing that increased over time.

The impact has not been demonstrated for spiritual wellbeing as measured by the meaning of life scale. Four out of the six gratitude items show a significant positive difference in the older SHGs, Table 2.

- | |
|---|
| <ol style="list-style-type: none"> 1. I have so much in life to be thankful for 2. If I had to list everything that I felt grateful for, it would be a very long list 3. I am grateful to a wide variety of people 4. Long amounts of time can go by before I feel grateful to something or someone |
|---|

Table 2. Items on which older SHGs are more positive than younger ones.

Both location and religion predict some of the wellbeing variables. The difference between religious groups disappears when age is accounted for. The differences between locations persist even when age, SHG age and religion are taken into account. The difference is in the opposite direction to the self-assessed impact, with Wolaita members scoring more highly on wellbeing scales, See figure 6.

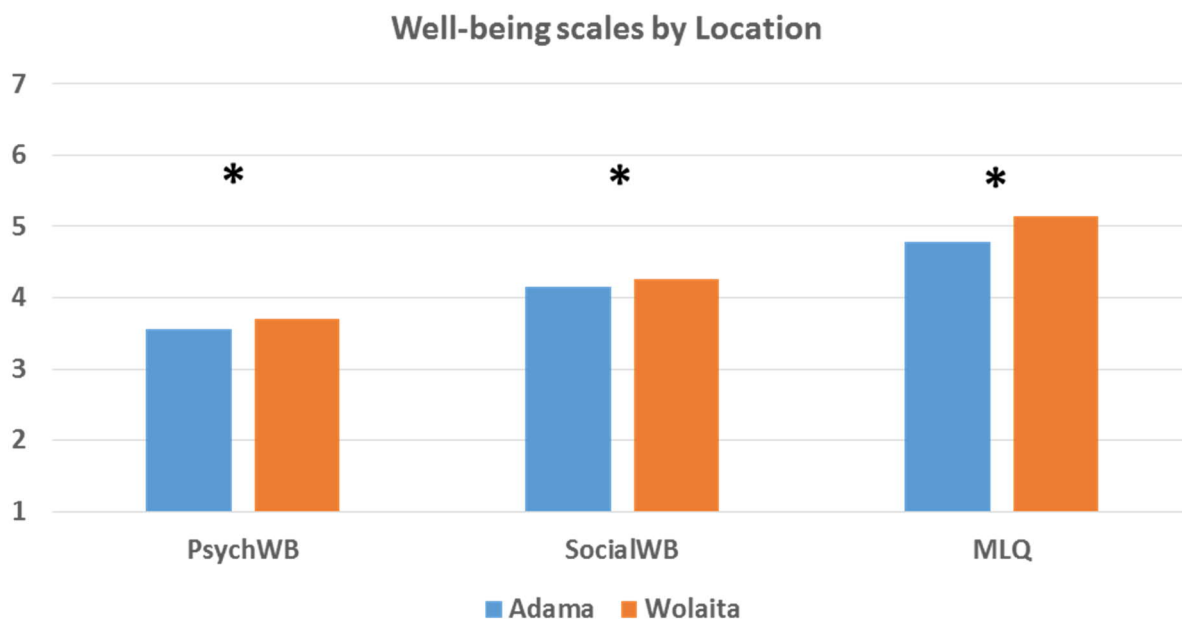


Figure 6. Levels of wellbeing by location. *Statistically significant differences.

4.3 FINANCIAL IMPACT

SHGs are primarily targeted at alleviating poverty so a financial self-assessment was included in the survey to confirm that the groups are, at least, meeting this core objective. Figure 7 demonstrates that members assess, on average a 143% increase in their financial assets from the equivalent of \$US2,339 to \$US5,694. Figure 8 confirms that the financial benefits are greater for older SHGs; this difference holds up even when individual age is taken into account.

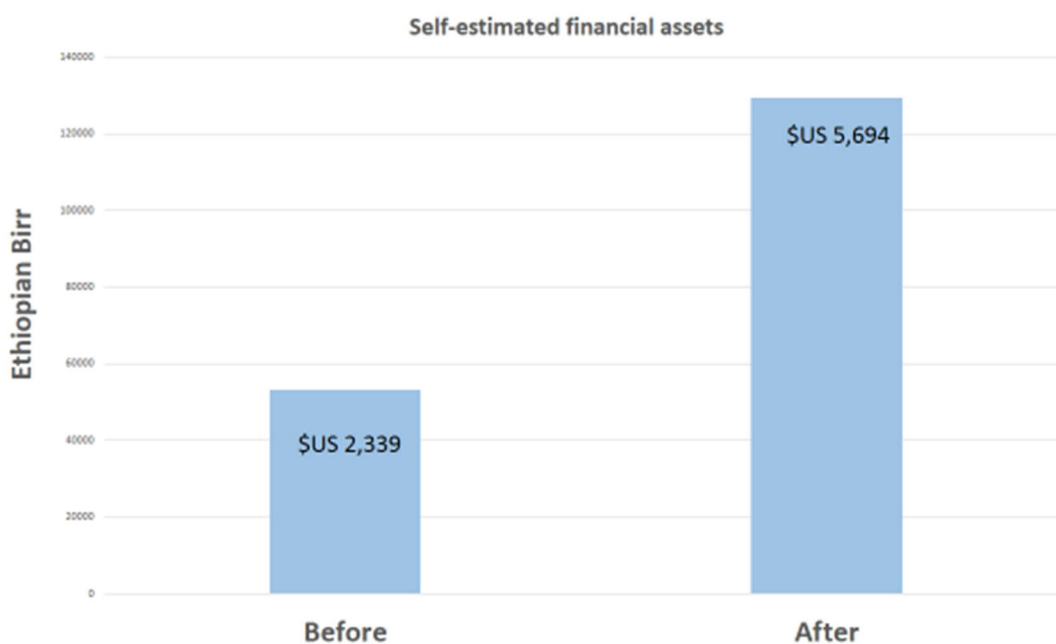


Figure 7. Self-estimated financial assets before and after joining the SHG

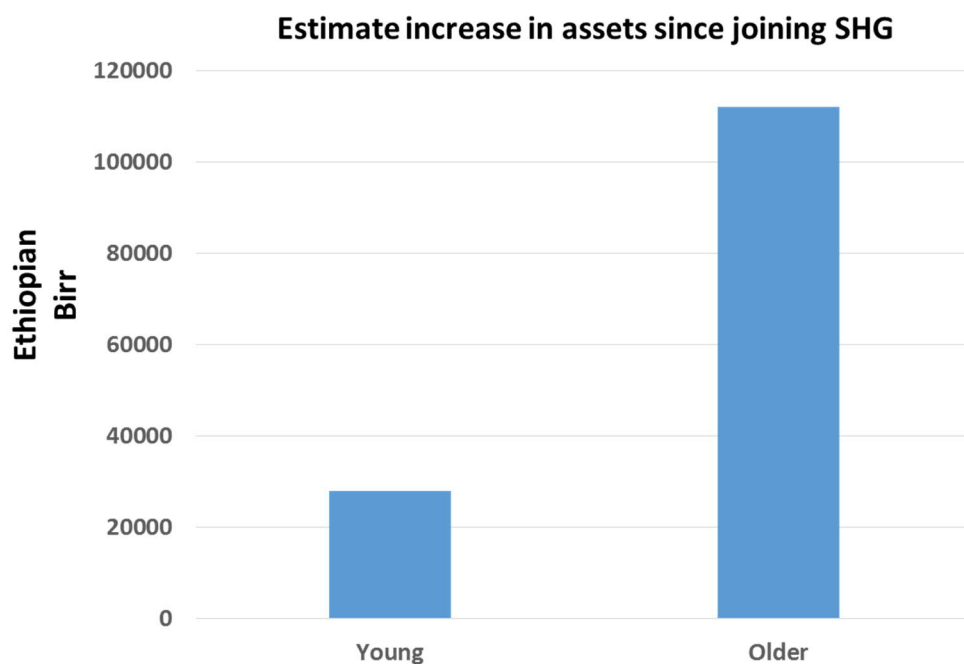


Figure 8. Self-estimated increase in financial asset since joining SHG for young and older SHGs.

4.4 IMPACT THEMES FROM QUALITATIVE FINDINGS

The responses from the focus groups and the qualitative answers from the surveys were analysed for themes related to SHG impact. These themes were ascertained through a rigorous and systematic process of coding, categorisation, validation and review within the data. As a grounded theory approach was used all themes emerged directly from the data gathered within this research. The main themes are presented below along with tables identifying the sub-themes, the source of the theme, the frequency of its occurrence and a representative quote.

4.4.1 Increased finances

Arguably, the primary goal of the SHG is to improve the financial situations and alleviate the poverty of the people joining. Members discussed how they are now able to afford basic necessities as well as offering new vocational opportunities. Access to capital allows members to feel secure and capable of handling any issue that requires funds or to pursue entrepreneurial aspirations; engaging with the economy through participation in IGAs, contributing financial investments in infrastructure as well as setting up a kindergarten school. A marked improvement in the quality of life was also expressed as members often spoke of the ability to feed their families more substantially and provide medical treatments. Resulting from an increase in finances members don't feel the burden of poverty; reflecting how the SHG model is proving effective from a financial perspective.

QUESTION	THEME	FREQUENCY	QUOTE
S – Things SHG changed	Increased finances	83	"I got financial capacity. This was no more my problem. Shortage of food is not my problem now. We can get basic necessities now. I can also send my child to school"
S – Things SHG changed	Quality of life	23	"now, we can get what we want to eat, can participate in IGA's (poultry), my saving culture has been improved, my ability to solve problems in discussion and group has been also improved" – "I was able to get supply of clean or tap water to my family at home level"

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S – Financial circumstances changed	Access to capital	81	"now, I can get money without problems and then solve my problems"
S – Financial circumstances changed	Commerce	51	"by taking a loan from the SHG, I am fattening sheep and selling them in better price"
S – Family circumstances changed	Standard of living	44	"We start to own household materials. Basic need materials ... we are able to eat three time a day which we could not do in the previous time"
S – Health changes	Accessing treatment	32	"When family members get sick, we took loans from the group and get adequate and appropriate medications"
FG – SHG worked well	Community development	5 groups	"in the name of our group we launched or opened a kindergarten level of school in our community" – " we had contributed about 200.00 birr to the Great Ethiopian Renaissance Hydropower Dam"

4.4.2 Poverty – Provider

SHG members discussed in both the survey and focus groups how they experienced extreme poverty before joining the group. An inability to provide basic needs for the themselves or their families, including 'medication costs', educational opportunities and in some instances access to electricity or water. Without capital or loan resources members expressed how they were forced to seek loans from 'individuals or local money lenders' which would exacerbate their own poverty due to higher interest demands. Due to the nature of the SHG this situation is drastically improved as the group has become the member's 'livelihood' creating financial capital which acts as a stepping stone leading to other financial opportunities through IGA's, further increasing the member's income. These IGA's include providing a local food supply and house renting.

QUESTION	THEME	FREQUENCY	QUOTE
S – life before involvement	Poverty	42	'no accessibility to electric power or water supply'.
S – SHG changed life	Provider	107	"Trading skills. Able to run a business by my own capital, feeding my family better, able to send children to school, able to improve house quality and utensils"
FG – Life before involvement	Poverty	10 groups	"living from hand to mouth" – "we did not have any amount of money"
FG – SHG means to them	Provider	8 groups	"it is our livelihood" – "it increases our financial accumulation/amount"

4.4.3 Dependence – Independence (access to capital)

Before joining the SHG members expressed how they were ‘dependent on others for survival’. A dependence on their husband’s income as well as private money lenders was commonly illustrated by the members; SHG members are predominantly women. However, the group provides a safety net for its members acting as their ‘insurance’ and ‘refuge’ as well as problem solver when they are in need of ‘urgent help’. The largest contribution to the members’ increased independence is due to being able to access capital much more readily. This access to capital allows members to feel secure and capable of handling any issue that requires funds or to pursue entrepreneurial aspirations.

QUESTION	THEME	FREQUENCY	QUOTE
S – Life before involvement	Dependence	19	“I was totally dependent on others form my basic needs”
S – Financial circumstances changed	Access to capital	81	“now, I can get money without problems and then solve my problems”
FG – Life before involvement	Lack of independence	5 groups	“some of us were totally dependent on our husbands” – “we were forced to pay higher rate of interest to individuals or local money lenders”
FG – SHG means to them	Safety	9 groups	“it is our mother, rock or shield” – “dependable social group”
FG – SHG means to them	Problem solver		“it is our problem solver” – “our advisor”

Relevant individual Social & Psychological wellbeing items that are more positive in older SHGs

- My decisions are not usually influenced by what everyone else is doing.
- I tend to worry about what other people think of me.
- I tend to be influenced by people with strong opinions.
- In general, I feel I am in charge of the situation in which I live.

4.4.4 Educational Training

SHG members discussed, in both the survey and focus groups, how a lack of knowledge regarding finances was a distinct gap in their understanding previous to joining the group. specifically, a lack of knowledge about saving or how to manage finances was typically expressed as ‘living from hand to mouth’ or lacking in a ‘saving culture’, keeping members in a state of poverty restricting access to loans or capital; thus hindering potential business endeavours.

After joining the group, members discussed how this aspect of their education has greatly improved. By providing the teachings and skills needed to run a successful business, including the principles of saving, accounting and finance, members have become more confident in their financial capacity allowing them to generate income through IGA’s. Due to this financial improvement members have enabled themselves to provide a formal education for their children; which, in turn, has increased their children’s employability.

The training provided by the SHG has not been limited to financial understanding but included the promotion of health conscious behaviours through the implementation of proper hygiene and other preventative behaviours such as promptly seeking medical treatment when health issues arise. Interestingly, when members were asked about how their educational opportunities have changed since joining the group ‘no change’ was a high frequency response; coming second to the SHG group allowing access to formal education, predominantly for their children. This may be because members have made a semantic distinction between formal schooling education and the training provided (quantitative analysis). Education was also mentioned with regard to what members considered important aspects of the SHG that make it work. Knowledge accrual concerning financial management and the principles of saving was specifically discussed as well as giving prospective members full awareness of how the group can improve their lives and what the expected commitments of membership would be.

QUESTION	THEME	FREQUENCY	QUOTE
S – Life before involvement	Lack of financial educational training	48	“I was participating in mini business but it was not such effective because I did not know how to manage the money”
S – Ways SHG changed life	Educational training	27	“the knowledge that I have obtained in the training helped me to start working in IGA’s and I am getting benefits” – “being able to cover tuition fee and educational needs for my children”
S – Things SHG changed	Educational training	24	“acquired different knowledge and skills from the training” – “I sent my children to a better school”
S – Family circumstances changed	Education (children)	41	“my children were out of school because of money constraint but now they’re at school, and they are running some small scale business, own some properties”
S – Health changes	Educational training	43	“We got various training on health-related issues so that our health condition and environmental hygiene has got improved”
S – Educational changes	Access to education: Children Self	77 34	“My children are at school and they are performing well. They have a better school life as a result of my initiative in the SHG” – “for me the different training are education opportunities”
FG – life before involvement	Educational training	8 groups	“I did not know it was possible to save a large amount with a small amount [of money]’
FG – SHG means to them	Educational training	6 groups	“our school” – “a school of accounting and finance”
FG – Most important aspects of SHG	Educational training	10 groups	“provide various training on different issues” – “planning skills, time management skills and money management skills”

4.4.5 Social Isolation – Social Participation

Before joining the SHG members commented on how socially isolated they were; many expressing how they were ‘confined to the home’ and that they had little opportunity to engage in social interaction or establish meaningful social bonds. Due to this isolation, some members did not understand the benefits of operating, or existing, within a social group. Necessarily, the SHG

provides a social space where members cooperate to achieve a common or mutually beneficial goal. This social interaction is not limited to the SHG but broadened to include community social events and affairs. By extension, the social aspect of the SHG is transported onto the family units of its members as they commented on how their families had also begun to participate in social events also.

The SHG promotes a level of social networking and support providing a social model of interaction and relationship development which is brought home by its members, promoting activity in the community. Participation in social activity is intuitively the instigator and enabler of developing solid social support systems as the SHG models the collective solving of one another's problems. When discussing how the members' and their families' social circumstances have changed many expressed a general improvement in how they interact with their community; this ranged from feeling that their family is better situated to a feeling of contentment with their social life.

QUESTION	THEME	FREQUENCY	QUOTE
S – Life before involvement	Social isolation	40	"I did not appreciate the value of working in a team and advantage of social networking"
S – Family social circumstances	Social participation	36	"by observing from my social participations, my families are also participating in various social affairs" – "I taught my family to develop their social life and become active in ... our community and society at larger"
S – Family social circumstances changed	Positive social improvement	28	"We are leading a healthy social life at home as well as outside home"
S – Social circumstances	Group participation	60	"We can meet each other at least once a week. We did not have this culture before" – "my family member have participated in different social occasions"
FG – Life before involvement	Social isolation	9 groups	"we were confined at home" – "we were not able to see each other under any circumstance"

Relevant individual Social & Psychological wellbeing items that are more positive in older SHGs	
Positively phrased items	Negatively phrased items
<ul style="list-style-type: none"> • I feel like I'm an important part of my community • If I had something to say, I believe people in my community would listen to me • I feel close to other people in my community • I believe other people in society value me as a person • I know that I can trust my friends, and they know they can trust me. 	<ul style="list-style-type: none"> • If I had something to say, I don't think my community would take me seriously • I do not fit very well with the people and the community around me. • I often feel lonely because I have few close friends with whom to share my concerns. • I enjoy personal and mutual conversations with family members or friends.

4.4.6 Social Development – Social Skills

Due to the nature of the SHG, the biggest change to the members' lives has been the involvement in a social group and the establishment of social relationships generally: thus participation in a social group can be viewed as social development in itself. The SHG allows members to develop socially providing the opportunity to work within a social group improving their social skills as well as instilling mutual compassion and 'love'; both of which were identified by members as being essential to the development of trust and the success of the group. The development of these new social relationships has led to systems of mutual social support fostering 'communication', 'cooperation' and bi-directional 'support'.

The teamwork principles of the SHG extend beyond the group providing a working model that its members can use to improve the functioning of any social group. Members discussed how there have been increases in the level of cooperation, harmony and social support experienced within the family unit as well as their wider community. Perhaps the group has allowed a more harmonious social existence due to the opportunity it gives members to get to know each other, rather than the seemingly disjointed social structure they were experiencing previously. In addition, the SHG seems to act as an essential aspect of community support allowing members not only to build self-efficacy but also to establish a support network for their wider locale, which is hugely empowering. The implication here is that without the SHG these support systems would not exist.

QUESTION	THEME	FREQUENCY	QUOTE
S – SHG changed life	Social development	65	"I dropped many misconceptions"
S – Things SHG changed	Social development	43	"social skills and relationship, tolerance, working, solving common problems and living together"
S – Family circumstances changed	Cooperation	47	"We do things in discussion, we solve problems in team, we exercise love among us. We appreciate one's ideas at home. We are happy by our saving, we do things in transparency"

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S – Family circumstances changed	Harmony	30	“there is peace among my family members” – “we respect and appreciate each other” – “we are leading happier and better life”
S – Social circumstances changed	Social support	76	“We help visit and support others. As a group we helped those who have been displaced by flood at Dire Dawa” – “we visit and support each other in different social festivals such as wedding”
S – Social circumstances changed	Social skills	26	“I started to communicate and understand others. In my social life I am experiencing forgiveness”
S – Social circumstances changed	Social harmony	23	“love in peace with neighbours” – “love and cooperation among us has increased”
S – Family social circumstances changed	Family teamwork	41	“We discuss and solve problems together. We became convinced that working together is more advantageous than individually doing things”
S – Family social circumstances changed	Family support	36	“We are meeting each other regularly, we care, understand, share problems together” – “my husband is encouraging me to keep continuing saving and helped me to do so in many ways”
FG – SHG means to them	Social development	8 groups	“a life changing social group”
FG – SHG Distinctive features	Effective cooperation	3 groups	“when we face problems we see and support each other”
FG – SHG Distinctive features	Emotional bonds	4 groups	“there is caring, support and love among our members” – “in our group we only love and cooperation, no hatred”
FG – SHG worked well	Community support	2 groups	“we did condolences to those who faced deaths of family members. We also visit those members who get child birth”
FG – developing trust	Mutual compassion and love	5 groups	“we share love among us and this helps us to develop trust” – “we give to and receive love from each other so that love and care are corner stones of our group”

Relevant individual Social & Psychological wellbeing items that are more positive in older SHGs	
Positively phrased items	Negatively phrased items
<ul style="list-style-type: none"> I think the world is becoming a better place for everyone 	<ul style="list-style-type: none"> I believe that people are self-centred I think that people live only for themselves I believe that people are more and more dishonest these days I believe that society has stopped making progress I find it hard to predict what will happen next in society

4.4.7 Personal Development – psychological well-being

Personal development was a common theme throughout the data as both the personal skills and psychological well-being of SHG members has been greatly improved. Members experienced changes in attitudes, self-confidence and the ability to articulate themselves. Confidence building is part of the SHG process and is discussed to be a vital element in the maintenance of the group’s success. With confidence and financial security comes autonomy as members can now, “do what [they] want to do”. A decrease in the amount of stress and anxiety was also expressed adding to the feeling of environmental mastery where members are now able to change their situation or impact their environment due to the support gained. In this way, the group facilitates a sense of empowerment and competence to deal with different life circumstances and issues. Likewise, a sentiment of optimism and purpose in life was illustrated by members who now envision a brighter future as they are given an opportunity to plan, create and tailor their future, rather than being confined by their circumstances.

QUESTION	THEME	FREQUENCY	QUOTE
S – Things SHG changed	Personal development	37	“my speaking ability, asset creation, psychological functioning, developed confidence” – “attitudinal perspective changes are evident at my home”
S – Changes in psychological well-being	Confidence – Autonomy	60	“I do what I want to do. I developed self-confidence. I can go here and there for work purposes”
S – Changes in psychological well-being	Anxiety alleviation	41	“I do not have any worry as to where I can get food for my daily needs to me and my family”
S – Changes in psychological well-being	Self-efficacy – Environmental mastery	37	“I can speak and express my ideas boldly, courageously work, confident, I believe can I can change my situations”
S – Changes in psychological well-being	Purposeful life – Optimism	22	“I do have hope and vision for the future” – “I am able to have positive ideas and perspectives”
FG – SHG means to them	Personal development	8 groups	“we get recognised as human beings and satisfied our human needs” – “it is a means of getting respect, advantage and self-improvement”
FG – ensuring member participation	Confidence building	5 groups	“if members get shy or quiet we initiate them to forward their position, view and help them participate in the discussion”

Relevant individual Social & Psychological wellbeing items that are more positive in older SHGs	
Positively phrased items	Negatively phrased items
<ul style="list-style-type: none"> • I think I have something valuable to give to the world • I think that my work provides an important product for society 	<ul style="list-style-type: none"> • I feel I have nothing important to contribute to society • My attitude about myself is probably not as positive as most people feel about themselves.

<ul style="list-style-type: none"> I made some mistakes in the past, but I feel that all in all everything has worked out for the best. 	<ul style="list-style-type: none"> In many ways, I feel disappointed about my achievements in life.
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4.4.8 Spiritual aspects

Spiritually, the SHG triggers members to engage in religious behaviours that may not have been part of their routine before joining the group. Members expressed how they have increased prayer and praising God amongst themselves and their families; this practice has, in some cases, become part of the family routine. This increase in religious behaviour in the home can be a result of the spiritual practices experienced within the group as many groups make it a point to open and close meetings with prayer. These behaviours may add to the communal and uniting nature of the group as well as a way of giving back for all the benefits members have accrued. These spiritual changes were reported by both main religious groups in the study – orthodox and protestant.

Resulting from this, there has been an increase in pro-social behaviours as a mutual respect for each member’s individual religious beliefs, tolerance, forgiveness and praying for the sick was expressed, among others. Cultivation of spirituality within the group has the effect of increasing adherence to the social principles and teachings that encourage peace and harmony among people which leads to effective social cooperation and contentment. Members described how a sentiment of internal peace has been fostered since joining the group. It appears that the SHG provides members with an improvement in life circumstances which gives them something to give thanks for as well as an opportunity to give back some of what they received. The benefits of the SHG decrease the worries and woes of its members which, in turn, creates the mental space needed to connect with sentiments such as internal hope and peace.

QUESTION	THEME	FREQUENCY	QUOTE
S – Spiritual well-being changes	Religious behaviour	75	“We start the meeting with prayer, so I believe God is helping us”- “I have all the provisions, so thanking God. For anything what happened I praise God”
S – Spiritual well-being changes	Positive social behaviours	48	“Everyone’s religious outlook is respected and recognised. We live in peace. We love and forgive others” – “I developed positive mind to others ... I attend church regularly so that my spiritual life developed”
S – Spiritual well-being changes	Positive religious sentiment	38	“At the beginning I did not experience internal peace, but now I have a lot of peace. Praise the Lord” – “I am getting spiritual rest by helping others, giving, visiting”
S – Family’s spiritual well-being changes	Religious behaviour	84	“Together with my family we start praying in the morning and evening” – “We as a group, we start every meeting with prayer. This helped me to get awareness about spiritual importance and using it at home”
S– Family’s spiritual well-being changes	Positive social behaviour	27	“I am teaching my children spiritual affairs such as forgiveness” – “we as a family have love, cooperation and are able to make forgiveness. We are worshipping our lord”

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FG – Spiritual dimensions	Religious behaviour	6 groups	“Before we join the SHG some of us did not have a habit of going to church, but after joining the SHG we developed a habit of going to church”
FG – Spiritual dimensions	Positive social behaviours	5 groups	“We taught our children about tolerance and how to live harmoniously with others.”
FG – Spiritual dimensions	Positive character change	5 groups	“We developed positive attitude towards others and helping others. We also acquired the qualities of genuine, patience heart”

5 MECHANISMS

The study examined the mechanisms influencing the wellbeing of SHG group members in two ways:

3. Quantitative measures of the group functioning:
 - a. Team evaluation items in the survey
 - b. Level of functioning as assessed by the CLAs – low, average, high
 - c. Group profiling questions in key informant interviews
4. Qualitative information on the group and its functioning
 - a. Focus group questions probing how the group works, how they resolve conflict and what the key mechanisms are
 - b. Observations of the focus groups
 - c. Open questions in the key informant interview

We predicted that SHGs that scored higher on team evaluations and level of functioning would show greater self-assessed and scale-assessed wellbeing.

Level of functioning is based on the periodic SHG assessments carried out by the CLAs on their members. This assessment differs between locations – 10 elements are assessed in Adama Zone; 15 in Wolaita . Figure 9 below shows the items assessed in Wolaita , showing that this is a relatively objective assessment of the SHG structural and procedural elements – meetings, application of rules, etc.

SHG Grading Criteria

Name of SHG Years of Establishment

Sr. #	Criteria	Very Good	Average	Poor
1	Have their own Goals , Vision, and Mission			
2	Size of members in SHG			
3	Attendance of members, meetings moderation, punctuality			
4	Participation of members in decision making and responsibility sharing			
5	Functional Rules & Regulations (by-laws)			
6	Continual improvement of savings			
7	Sanction of Loans and repayments			
8	Engagement in individual and or group IGAs			
9	Rotation of leadership			
10	Idle capital/Cold money			
11	Book keeping and documentation			
12	Cash handling and Audits			
13	Attending training and put it in practice			
14	Social & Community actions programme			
15	Opening bank account			

Sr. #	Particulars	Marks	Marks from 15 points	Total Marks
1	Very Good	4	12	57 48
2	Average	3	3	
3	Poor	2		
Total Marks				52

Above 70 % - Very Good
 51% - 70% - Average
 Below 50% -Poor

Name of the Grading Person:
 Signature of the Grading Person: Date: _____

Comments of the Evaluators: _____

Figure 9. SHG Grading criteria used in SNNPR, used to identify high, medium and low functioning groups.

Team evaluation, on the other hand is derived from the survey. The scale comprises items from the Scale of Psychological Safety and additional team evaluation items that were included in the survey on the basis that they had been identified from the literature as affecting SHG outcomes. The team evaluation items form a more subjective assessment of the “softer” aspects of the team from the member’s perspective – see items in table 3 below.

Reliability analysis of the SHG data found both the overall team evaluation scale and the psychological safety element of it to be unreliable. Low reliability items were removed until the reliability became acceptable. A table indicating the retained and removed items is in Appendix XX.

5.1 SHG FUNCTIONING

SHG functioning is clearly related to the self-assessed financial impact of the self-help group, see figure 10. The low functioning groups, in particular, report a much smaller increase in assets than the high functioning ones.

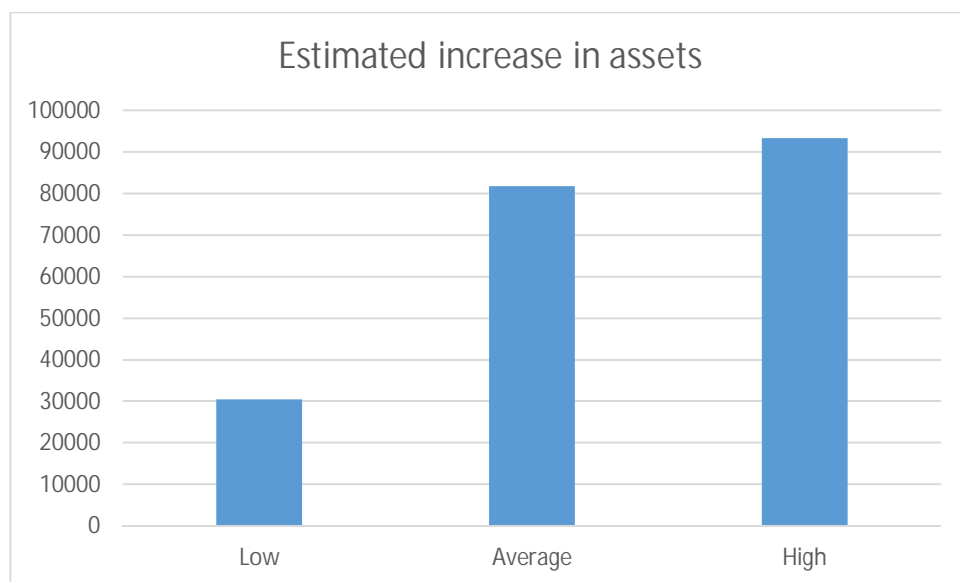


Figure 10. Estimated increase in assets by SHG functioning.

Figure 11 shows that, as predicted, the higher the level of functioning of the SHGs, the higher their assessment of the impact of the SHG. While the direction of the difference is as predicted, the differences are not significant when SHG age and location are taken into account.

Psycho-social outcomes and mechanisms of self-help groups in Ethiopia

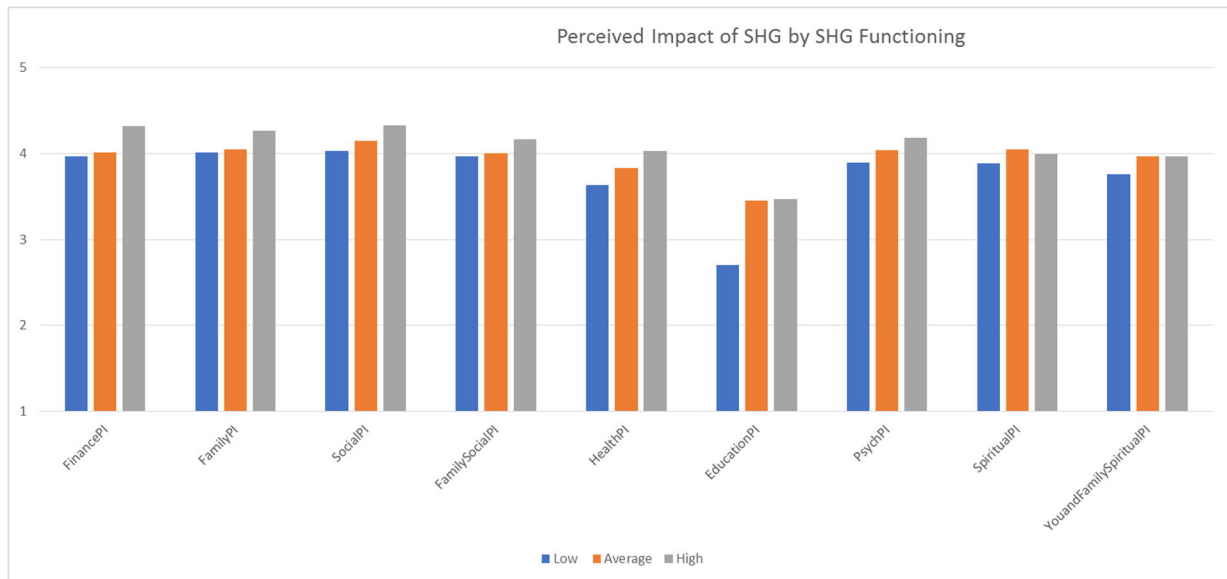


Figure 11. Self-assessed impact of SHGs by SHG functioning.

Psychological wellbeing is significantly related to how well the SHG is functioning (see figure 12), even when SHG age and location are taken into account. However SHG functioning is not clearly related to social wellbeing or meaning of life. See figure 12. SHG functioning also does not significantly predict any of the gratitude items.

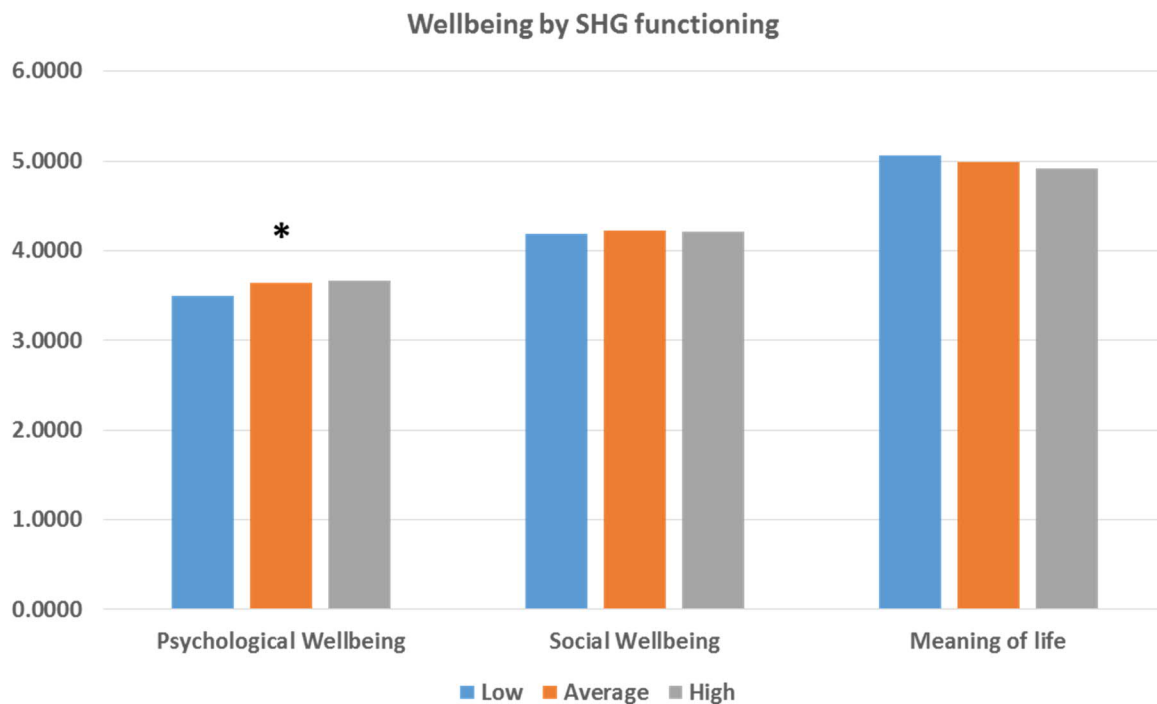


Figure 12 SHG functioning as a predictor of wellbeing.

* Statistically significant

5.2 GROUP QUALITY

The team evaluation scale is positively related to psychological wellbeing and meaning of life but not to social wellbeing.

To make this relationship more meaningful we investigated the individual team evaluation items which predicted wellbeing variables, see Table 3. Social wellbeing is only predicted by one item – “The SHG is a comfortable place to be”; clearly feeling comfortable in the SHG is important for an overall sense of social wellbeing.

Psychological wellbeing and meaning of life are both related to range of individual items.

Team Evaluation Item	Psych Wellbeing	Social Wellbeing	Meaning of Life
1. If you make a mistake in the SHG, it is often held against you.			
2. Members of this SHG are able to bring up problems and tough issues.			
3. People in this SHG sometimes reject others for being different.			
4. It is safe to take a risk on this in this SHG.			
5. It is difficult to ask other members of this SHG for help.			
6. No one in this SHG would deliberately act in a way that undermines my efforts.			
7. Working with members of this SHG, my unique skills and talents are valued and utilized			
8. The SHG is a comfortable place to be			
9. The SHG challenges me to be a better person			
10. I feel less alone in the SHG			
11. SHG leaders help us achieve our goal			
12. SHG facilitators have a positive impact on the SHG			
13. The success of the SHG is important to me			
14. My opinion is valued in the SHG			
15. I feel responsible for the success of the SHG			
16. The SHG has given me an opportunity to play a leadership role			
17. The SHG has provided good training opportunities for me			

Table 3. Significant correlations between team evaluation and wellbeing measures

5.3 SELF-REPORTED MECHANISMS

Several themes related to SHG mechanisms arose from the focus groups and the qualitative elements of the survey. These are summarised below.

5.3.1 Structure

Before joining the group members discussed how their lives were quite unstructured whereby a lack of future, family, time and financial planning resulted in high disorganisation. When discussing how the group develops trust amongst its members, the SHG model itself was identified as a contributing factor. Structurally, the 'process' of the group, the 'transparency' provided through the rotation of roles and responsibilities and working in line with the 'rules and regulations' furthers the development of trust as members are aware of the inner workings of the organisation as well as where they are positioned within it. Furthermore, the rotation of rules and responsibilities encourages members to fully participate in the group. Built into the structure and procedures of the SHG is the involvement of each member; as such, members are required to attend meetings, participate in discussions and is part of the decision-making process. This, somewhat peer-enforced, participation has the added benefit of leading to the development of member self-confidence, self-efficacy and social skills; all of which, were identified as factors enriching the lives of SHG members.

5.3.2 Training

Part of joining a SHG involves the provision of a range of training to its members. Before joining the group, a common issue was expressed as members found it very difficult to improve their financial circumstances due to a lack of financial understanding; some commented not knowing it was 'possible to save a large amount from a small amount' of money. Introducing the concepts of saving and financial management has enabled members to take control of their financial situations, thereby enhancing them. Not limited to financial training specifically, members are also given modules regarding health which was illustrated when discussing how their health has improved since joining the group. Members displayed improvements in hygiene and health behaviours as a result of 'various training courses on health-related issues'; this included recognising the benefits of early medical intervention when one becomes ill. These training courses have imparted invaluable knowledge regarding business and financial management, health promotion behaviours and other organisational skills to members which has contributed to both individual and group success.

5.3.3 Group Participation/Social Interaction

Nominally, the SHG is an organisation of people into a mutually beneficial system of collaboration. Throughout the process, members must work together in order to improve their financial situation by way of increasing their capital and providing a self-managed loan service; much in the way of a credit union. In addition, each member is required to fulfil each role, for a period of time, allowing them to experience running the group from various key managerial positions. To ensure the groups success, training is provided to members; however, more than training the success of the SHG depends on the effective teamwork of its members. Being a member of the group gives an opportunity to develop social skills and meaningful relationships, both of which were discussed as missing in their lives previously. Upon joining the group a marked difference was observed by members who expressed improvements in how they interact with people and experience much higher levels of community solidarity and support. More than a financial support network, the SHG

enables social growth enriching the lives of not only its members but their families' and the wider community as members apply the SHG model of effective cooperation across various social contexts.

5.3.4 Conflict Resolution

Organisationally, when groups of people come together in order to achieve similar goals conflict can easily arise as differing opinions and approaches clash causing friction. SHG members reported that as a group they have been able to successfully resolve the conflicts which have occurred amongst them. Apart from a few exceptions all groups habitually resolve conflicts internally without the need for outside intervention. On occasions where outside intervention has been needed legal action was successfully sought as in one instance a member could, or would, not repay a loan. Overall, the majority of conflicts are resolved through effective communication and discussion; decisions are then based on the rules and regulations of the group. Resulting from quite a stringent SHG structure a clear code of conduct allows for well-defined behavioural boundaries. Moving beyond those boundaries subsequently incurs consequences. Outside the rules and regulations of the group, another strategy used by members to resolve arising conflicts is effective communication which is presumably developed through increased socialisation. In this way, the SHG provides a space where each member can be heard and spoken to with clear communication and compassion. The ability to deal with and manage conflict efficiently seems to be a by-product, stemming from the themes of structure, training and social interaction; allowing members to skilfully navigate through the SHG process.

6 DISCUSSION

6.1 WELLBEING

On the whole, SHG members had psychological and social wellbeing scores only slightly above the middle point of the scale. While this may not be very positive as an absolute measure, when compared with the description they give of their lives before their involvement in the SHG they are very positive. We do not, of course, have quantitative data from before their involvement to document this, but the responses to both survey and focus group questions are strong on this point. This is also backed up by the members' assessment of how much their lives are better due to the SHG.

6.2 IMPACT

SHGs are primarily set up to address poverty. That they do this effectively has been established in previous research (Venton, et. al., 2013) but has been confirmed in this study in a number of ways. Most directly we asked about the members' financial assets before and after joining the SHG, and they confirmed an average increase in asset value of 143% or 78,211 Birr (\$US 3417). That this increase is greater for older SHG further confirms the role of the SHG in facilitating these improved financial circumstances.

Poverty, however, is not only, or arguably even primarily, a problem of money. Economic difficulties are often the most tangible and measurable element of poverty. Behind these are frequently social and psychological difficulties that are caused by and contribute to financial difficulties. The WHO study "Voices of the Poor" (Brock, 1999) found lack of money to have been mentioned by only 40% of poor people when asked to describe their poverty. They were more likely to mention tangible consequences of poverty such as lack of food or inadequate housing or family problems, specifically difficult household relations. Other psycho-social dimensions of poverty frequently mentioned were dependency, isolation and low participation.

The implication of taking a multi-dimensional approach to poverty is that solutions need to be multi-dimensional, addressing capability and social exclusion as well as economic disadvantage (Wagle, 2002). Rihani (2002) depicts the twin challenges of development as addressing the freedom to interact and the capability to interact; poor people need to be afforded access to social networks and the tools to effectively interact in them. Tearfund's own theory of poverty (Tearfund, 2012) focusses on restoring relationships as the key to overcoming poverty. Equally impact evaluation needs to be multi-dimensional – tapping into a range of interrelated aspects of wellbeing. This study has sought to do this.

The perceived impact data in this study affirms the view that SHGs are not simply addressing economic wellbeing. In fact the greatest self-assessed impact of the SHGs is on social circumstances. This accords with the inherent nature of the SHG as a social unit. This perception is well supported by the qualitative analysis which identified three themes with a strong social dimension – "dependence-independence", "social isolation-social participation" and "social development-social skills". These themes accord with the perspectives on poverty taken by Wagle (2002), Rihani (2002) and Tearfund (2012) itself described above.

One of the strongest themes to emerge from both the survey and the focus groups is the end to social isolation. Many of the women spent their lives at home, isolated and without a social network. The SHG has been a vehicle to end this isolation, providing a cohesive social network in and of itself

and providing a platform for wider engagement with the community. Ending social isolation addressed the frequent concern of the poor with isolation reported by Brock. It accords with Wagle's social exclusion, at least with regard to the SHG itself and the members' reports confirm that it has been a platform for engaging with other aspects of society such as the education and health systems. In Rihani's terms the SHG affords its members the freedom to interact in ways they did not before.

"Dependence-independence" as a theme represents a shift from "total dependence" on others for basic needs to independence through being able to access capital and earn their own money and a positive form of dependence – interdependence within the SHG, "it is our mother, rock or shield". This is a strongly collectivist picture of empowerment – rather than the individual becoming "autonomous", the captain of their own ship, they gain their independence through mutual support. They don't "graduate" from the SHG when they can make their own way, it becomes their way of living. This theme directly addresses a major concern of the poor reported to Brock – dependency.

Closely related to this is the theme of "poverty-provider". The vast majority of members identified the ability to provide as one of the key ways in which the SHG had changed their lives – "able to run a business by my own capital, feeding my family better, able to send children to school, able to improve house quality and utensils". This theme spans economic, social, psychological and spiritual dimensions – the individual has a different role (social) to provide for others (economic) which is a source of self-esteem (psychological), cause for gratitude and reason for hope (spiritual).

Since the SHG members had experienced such social isolation they cannot be assumed to have the necessary skills to effectively manage the nuances of a complex social group. This is the significance of the "Social development-social skills" theme. The members recognised that they had a lot to learn on joining the group, but also that the group has provided a very effective vehicle for that learning - "We do things in discussion, we solve problems in team, we exercise love among us. We appreciate one's ideas at home. We are happy by our saving, we do things in transparency". This includes both developing the social skills to communicate, collaborate, make decisions and manage conflict but also the attitudes – love, tolerance, trust that are needed for them to work. A key element, identified by a majority of the members, is the social support provided by the group - "we visit and support each other in different social festivals such as wedding". This theme dovetails neatly with Rihani's "capability to interact" and Wagle's "capability".

A related theme is that of "educational training". There are two elements of this – the training they receive in the SHG itself, and the education they are able to provide for themselves and their families from the additional money they have available. SHG financial training is particularly singled out for comment - "I was participating in mini business but it was not such effective because I did not know how to manage the money". It is clear that the members not only did not have much money but did not know how to manage well what they did have. The range of other training provided by the SHG is also highlighted – planning, time management, hygiene.

Curiously, when asked about the changes since joining the SHG, members identified formal education as the area least changed and least contributed to by the SHG. Yet education emerged as a major theme in the survey and focus groups. In fact it was mentioned as one of the most important aspects of the SHG in all ten focus groups. This anomaly could be because the participants perceived the survey question as asking about formal "educational opportunities" rather than the type of education they were receiving in the SHG. Also the many more participants reported the SHG as providing better opportunities for their children than for themselves (this was also found by the previous cost-benefit analysis, Venton, et. al., 2013). The quantitative questions in the survey only asked about their own opportunities. In any case it is clear that the SHG has provided much informal

capacity building and educational opportunities for its members and substantially enhanced the formal education opportunities of their children, and to some extent, themselves.

The members reported strong changes in their psychological wellbeing. The most commonly reported change is greater self-confidence – “I do what I want to do. I developed self-confidence. I can go here and there for work purposes”. Allied to this are gains in self-efficacy, purposefulness and optimism. Many also reported a reduction in anxiety. A major effect of poverty is powerlessness and the anxiety that comes from believing that there is nothing you can do to prevent or even predict when negative things will happen to you. So the change to a sense of control, of hope is a strong one – “I can speak and express my ideas boldly, courageously work, confident, I believe can I can change my situations”. This qualitative change is reinforced when the individual scale items that are different in younger versus older SHGs are examined – they mostly relate to the sense of significance they have in their society.

The quantitative data back up the reported social and psychological changes. Members assess the SHG as having a significant impact on these areas of their lives and the wellbeing scale comparisons between younger and older SHGs back this up.

Conversely, spiritual wellbeing differences did not emerge in the comparison between younger and older SHGs, either self-assessed SHG impact or on the meaning of life scale. Several individual gratitude items did show a difference between younger and older groups demonstrating a greater sense of gratitude for a wider range of things and to a wider range of people. When asked about spiritual changes in the survey and focus groups, the focus was less on personal meaning or gratitude and more on social dimensions of their faith – religious behaviour (prayer with the SHG and family, attending church) and positive social behaviours. But they also highlighted attitude and character changes such as tolerance and forgiveness. These spiritual benefits accord very much with the thrust of the rationale of the SHGs – to address poverty by restoring relationships. More than personal spiritual sentiments the participants emphasised how the SHG impacted the level and consistency of their engagement with their church community and the quality of their engagement with others.

By way of conclusion, this study provides extensive qualitative and quantitative evidence of the impact of SHG membership on social, psychological, and, spiritual wellbeing. The impact we have demonstrated comes across more strongly in the qualitative reports than in the quantitative. The young vs older group differences in the scales, while significant, are small.

6.2.1 Cautions and qualifications

Several cautions with this data are necessary. Social desirability may be playing a role in the data, particularly in the focus groups. The focus groups were conducted with one or more of the group’s facilitators present. This was often necessary for translation purposes, but also advised by Tearfund as the best way to create a familiar and trusting atmosphere in which members would be more likely to contribute. This may have led to more positive comments being made or suppression of negative comments through wanting the SHG, and the role of their facilitator to appear in a good light. To avoid this would have required investment in independent researchers to administer focus groups and surveys, in the local language if necessary, and could well have resulted in fewer and less rich contributions from the participants.

SHG member age is a potential confounding variable in this study. The assumption of the design of the study is that differences recorded between young and older SHGs would be due to the members of the latter having spent more time in the SHG. But they are also, of necessity older and age, in itself, is sometimes associated with increased wellbeing. It is impossible to completely disentangle

these variables without a control group who are not in a SHG. However, analyses controlling for age confirmed that most of differences remained; so chronological age, if it is a causal factor, is certainly not the only one.

While some of the measures showed a difference between the two primary religious groups – protestant and orthodox, these differences disappeared when age and location were accounted for. There was no evidence of differential benefits for one religious group over the other. Members of both religious groups also reported changes in their spiritual lives – an increased participation in and adherence to their religion. There were no reports of pressure to convert being experienced by members; conversely a number of groups, and individuals, discussed how the SHG had helped them learn to respect members of other religions.

Finally, it should be noted that location was a stronger predictor of quantitative measures than SHG age, and more robust when controlling for other factors. It has contrasting influence on self-assessed and scale-assessed variables. Adama Zone participants assess the impact of the SHG as being higher across the full range of areas, whereas the scales indicate Wolaita participants to have higher actual wellbeing scores. These differences could be an artefact of language – most surveys in Wolaita were conducted in Wolaitinya and translated back into Amharic, whereas Adama surveys were conducted in Amharic. There may also be some cultural differences between the locations at play. Or it may be that Adama participants started off in a worse situation so that, even though they assess the SHG impact as being higher, it still has not brought them to the same level as Wolaita members.

The fact that none of the scales were found to be reliable without further refinement, and that the subscales did not reach acceptable reliability, even with refinement, suggests that the western constructs of wellbeing embedded in the scales may not be fully congruous with the local cultures. Some work needs to be done to develop culturally appropriate ways of measuring wellbeing, whether it means merely adjusting existing scales or developing new ones.

6.3 MECHANISMS

It is one thing to know that, and in what ways, SHGs are impacting their members' lives. It is another thing to understand what it is about these groups that is having this impact, and how the psycho-social dynamic works. This will help guide the further development of SHGs in Ethiopia and their propagation in other countries.

In this section we will attempt to weave together the quantitative and qualitative analyses to throw some light on the elements at play in SHGs that are bringing about the changes we have just documented.

We have two measurements of the quality of the SHG – a hard one and a soft one. The hard one – SHG functioning is a predictor of psychological wellbeing but not social or spiritual wellbeing or even self-assessed impact of the SHG. The soft measurement – team evaluation - on the other hand, predicts psychological and spiritual wellbeing (meaning of life scale), but not social wellbeing.

The most curious aspect of these findings is that it would be expected that social wellbeing would be most impacted by the quality of the group itself. So why is it not being impacted? A likely explanation is that the social wellbeing scale items, many of which refer to “the community” or “society” or “the world”, led participants to respond in terms of an evaluation of their role in wider society rather than specifically in reference to the SHG. It therefore makes sense that the quality of that team impacts the more personal aspects of wellbeing – psychological and meaning of life.

The relationship of SHG functioning to psychological wellbeing can be understood in the light of the qualitative theme of structure. Members emphasised repeatedly how valuable to them the structure of the SHG is – the regular meetings, the rules and regulations, the transparency, the rotation of roles. From a distance it is easy to perceive these aspects negatively – confining, restricting freedom, rigid, etc. But from the perspective of members who, in their own words, have come from often having no structure, no role, no one to meet, no process to follow, the “hard” fixed aspects of the SHG are very empowering. They move from social isolation to having people to meet every week, they move from having no-one to work with to having a group of people starting from the same level with whom they can learn together how to turn their lives around. They have defined goals and a vision to work towards. They have a process to reach those goals. They have training in place to build their skills. This can be referred to as the “SHG structure”.

In this light it makes sense that a higher functioning group enhances psychological wellbeing. The effect is not a strong one – the age of the SHG and the location are both stronger influences. But given that the SHG functioning is a relatively crude measure – with three levels derived from two different grading systems, it is an important effect to observe.

The “Soft” measure – team evaluation – is not correlated with SHG functioning. They are not measuring the same thing. The fact that both of them are related to wellbeing is a very useful finding. It means that as well as working on ensuring the structures and processes of the SHG are in place, it is also important to foster the “team spirit”. These softer elements of the group can be referred to as “SHG culture”. The influential team evaluation items accord with the qualitative themes. See table 4 below

Qualitative theme	Team evaluation items
Dependence-Independence	<ul style="list-style-type: none"> • It is safe to take a risk on this in this SHG. • No one in this SHG would deliberately act in a way that undermines my efforts. • The SHG is a comfortable place to be
Education/Training	The SHG has provided good training opportunities for me
Social isolation – participation	I feel responsible for the success of the SHG The success of the SHG is important to me
Social development – social skills	Working with members of this SHG, my unique skills and talents are valued and utilized Members of this SHG are able to bring up problems and tough issues.
Personal development	SHG leaders help us achieve our goal The SHG challenges me to be a better person My opinion is valued in the SHG

Table 4. Relationship of qualitative themes to team evaluation items.

It is clear how the “hard” elements of SHGs are achieved – from the moment the SHGs are set up there is a focus on helping them organise themselves, agree their rules, arrange their meeting time, etc. And the groups are measured on their achievement of and adherence to these elements. But how are the “soft” elements achieved? How do a group of individuals who have mostly never worked in a group/ led a group before, many of whom will be lacking in confidence, maybe

suspicious and distrustful, come together to create an atmosphere of love, acceptance and forgiveness in the SHG, and achieve common results?

One answer is clearly the hard elements themselves – the structure provides the unambiguity, the focus, the framework which allows the group to develop trust and cooperation. But another element is clearly the facilitators. The focus groups did not directly ask about the role of the facilitator, but the discussion kept mentioning the facilitator as an advisor, trainer, and conflict resolver. 83% of the participants agreed or strongly agreed that “SHG facilitators have a positive impact on the SHG” – the joint highest rated team evaluation item. This study has not directly examined the role of the facilitator – what they do, how they interact with the SHGs – but there is a strong indication that they are a critical part of the success of the SHGs. More than the specific role in advising the SHG it is likely that they provide strong models of the values and attitudes that are reported as being characteristic of the SHGs – acceptance, love, forgiveness. Their tacit role is one that is worthy of further exploration.

Two other themes that emerged are worth exploration and they both also relate to the work of the facilitator – group participation/social interaction and conflict resolution. The evidence is strong that the SHGs manage to develop an environment in which all members are valued and get to participate, where dominance by one or two individuals is rare and where conflicts are, generally, effectively dealt with within the group. Both of these processes explicitly or implicitly involve facilitators. Further study of these processes and the role of the facilitator in them would be valuable.

A strong theme in both the impact and mechanism sections above is educational training. It is clear that this is an aspect of the SHG that participants find very empowering. Given the low education level that most of the participants are coming from, the opportunity to gain knowledge and skills in areas as diverse as financial management and hygiene is very empowering. Add to this that the training is provided in what is probably a much more supportive environment than their experiences of formal education, the attraction becomes clearer.

The SHG model appears to work by simultaneously addressing Wagle’s three dimensions of poverty – by directly addressing social isolation (setting up the SHG) capability (training) in order to foster a saving culture (economic wellbeing). The themes outlined above can be organised graphically as in figure 13 below.

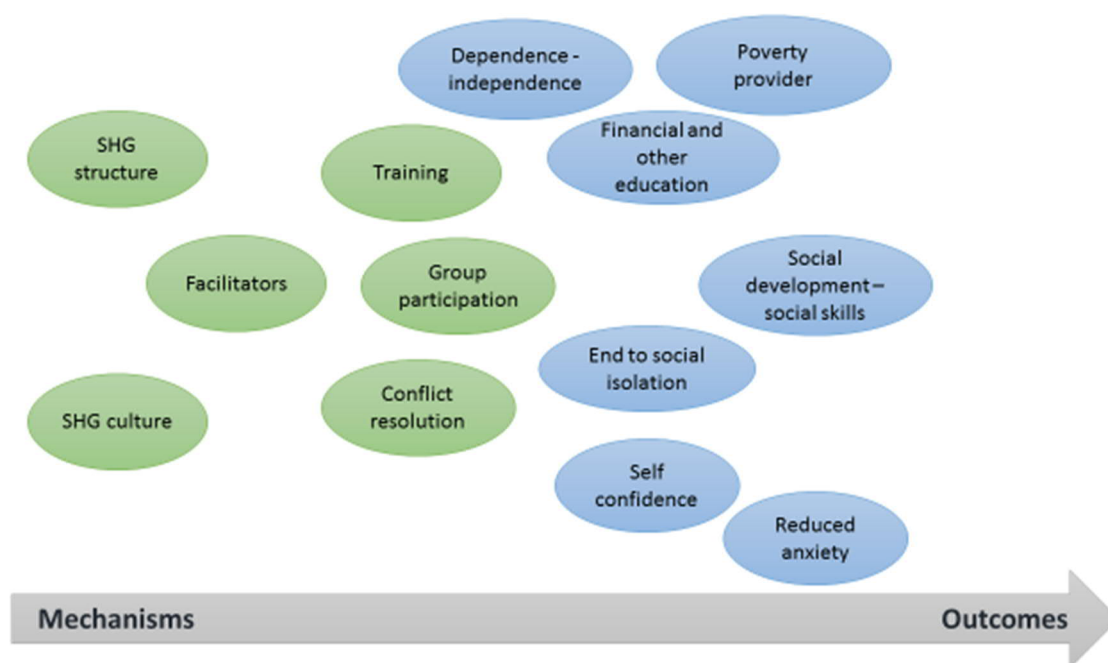


Figure 13. Graphical representation of the mechanism and outcome themes deriving from this research.

6.4 IMPLICATIONS FOR PRACTICE

6.4.1 The existing SHG movement in Ethiopia

The thrust of the findings of this research is that the SHG model is working well to address, holistically, the needs of the poor in Adama and Wolaita. The main recommendation is to retain the model as it is. There is the temptation to water down the model – soften the structure, skimp on facilitator resources, loosen the principles, let the culture of forgiveness, participation, and conflict resolution slide. The evidence of this research is that these are key elements of what makes the SHGs work.

Admittedly, the research focussed on what was effective in the SHGs and did not ask much about what did not work. This could be a valuable direction for future research – elements that could be improved. The current research found that the core elements are valued by the members and effective in what they achieve. Future research could address the question of whether, and how, they could be more effective.

6.4.2 SHG movements in other locations

What are the key elements of the SHG to translate to new contexts – when SHGs are established in new locations or countries, when they are introduced to new cultures or addressed to different types of poverty? Since this research only looked at two locations within Ethiopia and only did limited comparisons between them direct evidence to answer this question is not available.

It is clear that some adaptation to context is required. What can be recommended is that the adaptation does not compromise the core elements of the model:

- Structure. The precise structure of the SHG may change – lending rules, frequency of meeting, penalties for non-attendance etc. – SHGs need to retain a strong structure with

clear rules and accountability. Applying the SHG model in more individualistic societies, such as in the west, there may be considerable resistance to the rigidity of the rules and the level of commitment required to be a member. But these appear to be precisely some of the reasons the SHGs are so effective.

- Facilitators. They clearly play a very strong role. Translation of the model to new contexts needs to ensure the same quality and level of commitment of facilitators.
- Culture. The values of the SHG movement – participation, shared leadership, conflict resolution, equality across religions, and mutual support in crises – can only partly be built into the structure. They need to be embodied in the attitudes and values of the group. This is a more difficult thing to ensure than structure and facilitators, but also depends to a large extent on them. Translation to a new context requires thorough preparation of the facilitators and programme managers to transmit the values and principles of the movement rather than simply the “formula”.

6.5 FUTURE RESEARCH DIRECTIONS

1. This research was designed to be meaningful in itself, but also to provide time 1 data for a longitudinal study. The groups in this study should be followed up in several years' time. Applying the same measures at time 2 will provide much stronger evidence on the SHGs impact and mechanisms.
2. Develop more culturally appropriate ways of measuring wellbeing, & team functioning. This could mean merely adjusting existing scales or developing new ones.
3. Routinely gather psycho-social wellbeing data from new members using the new measures; this will enable stronger "before and after" longitudinal data on psycho-social impact to be gathered
4. Explore the role of facilitators' in SHG development – dimensions of the role, competence, selection criteria, training requirements.
5. Explore CLAs and FLAs using a similar methodology
6. A study of those "falling through the cracks" – for whom does the SHG not work? This study could start with an examination of the data from this project to identify and profile individuals for whom the SHG is not working – they are not benefitting financially and/or psycho-socially.

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8 APPENDICES

8.1 SURVEY SCHEDULE

Survey Schedule

Section 1. Demographic data

Name: _____

Age: _____

Gender: _____

Religion:

<u>Protestant</u>	<u>Orthodox</u>	<u>Muslim</u>	<u>Catholic</u>	<u>Other:</u>
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Affiliated SHG: _____

Length of time involved with SHG:

Since it started	Joined more recently Date:
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Member of the SHG (Male headed or Female headed?)

Household/Family Size: _____

Highest level of education completed:

Primary Grade:	Secondary Grade:	Third level
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Section 2. Changes since SHG involvement

General circumstances

Describe to me what your life was like before you got involved in the SHG

List the main ways it has it changed since you joined the SHG?

List the main things about the SHG that has brought about this change?

Financial circumstances

Estimated value of household assets:

Before you joined the SHG:	Now:
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How have your financial circumstances changed since you joined the SHG?

Much worse	worse	Stayed the same	Better	Much better
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How much of this change was due to the SHG?

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SHG had no impact	SHG had some impact	SHG had a lot of impact	It was only because of the SHG
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Give me an example of how your financial circumstances have changed?

Family circumstances

How much have your family circumstances changed since you joined the SHG?

Much worse	Worse	Stayed the same	Better	Much better
------------	-------	-----------------	--------	-------------

How much of this change was due to the SHG?

SHG had no impact	SHG had some impact	SHG had a lot of impact	It was only because of the SHG
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Give me an example of how your family circumstances have changed?

Social circumstances

How have your social circumstances changed since you joined the SHG?

Much worse	Worse	Stayed the same	Better	Much better
------------	-------	-----------------	--------	-------------

How much of this change was due to the SHG?

SHG had no impact	SHG had some impact	SHG had a lot of impact	It was only because of the SHG
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Give me an example of how your social circumstances have changed?

How have your family's social circumstances changed since you joined the SHG?

Much worse	Worse	Stayed the same	Better	Much better
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How much of this change was due to the SHG?

SHG had no impact	SHG had some impact	SHG had a lot of impact	It was only because of the SHG
-------------------	---------------------	-------------------------	--------------------------------

Give me an example of how your family's social circumstances have changed:

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Health

How has your health changed since you joined the SHG?

Much worse	Worse	Stayed the same	Better	Much better
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How much of this change was due to the SHG?

SHG had no impact	SHG had some impact	SHG had a lot of impact	It was only because of the SHG
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Give me an example of how your health circumstances have changed?

How has your family;s changed since you joined the SHG?

Much worse	Worse	Stayed the same	Better	Much better
------------	-------	-----------------	--------	-------------

How much of this change was due to the SHG?

SHG had no impact	SHG had some impact	SHG had a lot of impact	It was only because of the SHG
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Give me an example of how your family's health circumstances have changed?

Education

How have your educational opportunities changed since you joined the SHG?

Much worse	Worse	Stayed the same	Better	Much better
------------	-------	-----------------	--------	-------------

How much of this change was due to the SHG?

SHG had no impact	SHG had some impact	SHG had a lot of impact	It was only because of the SHG
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Give me an example of how your educational circumstances have changed?

How have your family's educational opportunities changed since you joined the SHG?

Much worse	Worse	Stayed the same	Better	Much better
------------	-------	-----------------	--------	-------------

How much of this change was due to the SHG?

SHG had no impact	SHG had some impact	SHG had a lot of impact	It was only because of the SHG
-------------------	---------------------	-------------------------	--------------------------------

Give me an example of how your family's educational circumstances have changed?

Psychological well being

How has your psychological wellbeing changed since you joined the SHG?

Much worse	Worse	Stayed the same	Better	Much better
------------	-------	-----------------	--------	-------------

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How much of this change was due to the SHG?

SHG had no impact	SHG had some impact	SHG had a lot of impact	It was only because of the SHG
-------------------	---------------------	-------------------------	--------------------------------

Give me an example of how your psychological wellbeing has changed?

Spiritual well being

How has your spiritual wellbeing changed since you joined the SHG?

Much worse	Worse	Stayed the same	Better	Much better
------------	-------	-----------------	--------	-------------

How much of this change was due to the SHG?

SHG had no impact	SHG had some impact	SHG had a lot of impact	It was only because of the SHG
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Give me an example of how your spiritual wellbeing has changed?

How has your, and your family's, spiritual wellbeing changed since you joined the SHG?

Much worse	Worse	Stayed the same	Better	Much better
------------	-------	-----------------	--------	-------------

How much of this change was due to the SHG?

SHG had no impact	SHG had some impact	SHG had a lot of impact	It was only because of the SHG
-------------------	---------------------	-------------------------	--------------------------------

Give me an example of how your spiritual wellbeing have changed?

Section 3. Experience of the SHG

What aspects of the SHG have been most positive for you?

Is there an aspect of the SHG that has been negative for you?

Can you give an example of a positive experience with the SHG?

Can you give an example of a negative experience with the SHG?

Section 4. Scales

Psychological well-being scale

	Strongly Disagree	Disagree	Slightly Disagree	Slightly Agree	Agree	Strongly Agree
Autonomy						
I am not afraid to voice my opinions, even when they are in opposition to the opinions of most people.						
My decisions are not usually influenced by what everyone else is doing.						
I tend to worry about what other people think of me.						

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Being happy with myself is more important to me than having others approve of me.						
I tend to be influenced by people with strong opinions.						
I have confidence in my opinions, even if they are contrary to the general consensus.						
It's difficult for me to voice my own opinions on controversial matters.						
I often change my mind about decisions if my friends or family disagree.						
I judge myself by what I think is important, not by the values of what others think is important.						

Environmental Mastery						
In general, I feel I am in charge of the situation in which I live.						
I do not fit very well with the people and the community around me.						
The demands of everyday life often get me down.						
I am quite good at managing the many responsibilities of my daily life.						
I often feel overwhelmed by my responsibilities.						
I generally do a good job of taking care of my personal finances and affairs.						
I am good at juggling my time so that I can fit everything in that needs to get done						
I have difficulty arranging my life in a way that is satisfying to me						
I have been able to build a home and a lifestyle for myself that is much to my liking.						

Personal Growth						
I am not interested in activities that will expand my horizons.						
I don't want to try new ways of doing things—my life is fine the way it is.						
I think it is important to have new experiences that challenge how						

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you think about yourself and the world.						
When I think about it, I haven't really improved much as a person over the years						
I have the sense that I have developed a lot as a person over time						
I do not enjoy being in new situations that require me to change my old familiar ways of doing things						
For me, life has been a continuous process of learning, changing, and growth						
I gave up trying to make big improvements or changes in my life a long time ago						
There is truth to the saying you can't teach an old dog new tricks.						

Positive Relations with Others						
Most people see me as loving and affectionate.						
Maintaining close relationships has been difficult and frustrating for me						
I often feel lonely because I have few close friends with whom to share my concerns.						
I enjoy personal and mutual conversations with family members or friends.						
I don't have many people who want to listen when I need to talk.						
It seems to me that most other people have more friends than I do.						
People would describe me as a giving person, willing to share my time with others						
I have not experienced many warm and trusting relationships with others						
I know that I can trust my friends, and they know they can trust me.						

Purpose in Life						
I live life one day at a time and don't really think about the future.						
I tend to focus on the present, because the future nearly always brings me problems						

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My daily activities often seem trivial and unimportant to me.						
I don't have a good sense of what it is I'm trying to accomplish in life						
I used to set goals for myself, but that now seems like a waste of time.						
I enjoy making plans for the future and working to make them a reality.						
I am an active person in carrying out the plans I set for myself.						
Some people wander aimlessly through life, but I am not one of them						
I sometimes feel as if I've done all there is to do in life						

Self-Acceptance						
When I look at the story of my life, I am pleased with how things have turned out.						
In general, I feel confident and positive about myself.						
I feel like many of the people I know have gotten more out of life than I have.						
I like most aspects of my personality.						
I made some mistakes in the past, but I feel that all in all everything has worked out for the best.						
In many ways, I feel disappointed about my achievements in life.						
My attitude about myself is probably not as positive as most people feel about themselves.						
The past had its ups and downs, but in general, I wouldn't want to change it.						
When I compare myself to friends and acquaintances, it makes me feel good about who I am.						

Social well-being Scale

	Strongly Disagree	Disagree	Slightly Disagree	Slightly Agree	Agree	Strongly Agree
Social Integration						
You don't feel you belong to anything you'd call a community (-).						

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My decisions are not usually You feel like you're an important part of your community (+).						
If you had something to say, you believe people in your community would listen to you (+).						
You feel close to other people in your community (+).						
You see your community as a source of comfort (+).						
If you had something to say, you don't think your community would take you seriously (-).						
You believe other people in society value you as a person (+).						

Social Acceptance						
You think that other people are unreliable (-).						
You believe that people are kind (+).						
You believe that people are self- centered (-).						
You feel that people are not trustworthy (-).						
You think that people live only for themselves (-).						
You believe that people are more and more dishonest these days (-).						
You think that people care about other people's problems (+).						

Social Contribution						
Your behavior has some impact on other people in your community (+)						
You think you have something valuable to give to the world (+).						
Your daily activities do not produce anything worthwhile for your community (-)						

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You don't have the time or energy to give anything to your community (-).						
You think that your work provides an important product for society						
You feel you have nothing important to contribute to society (-)						

Social Actualization						
You believe that society has stopped making progress (-).						
Society isn't improving for people like you (-).						
You don't think social institutions like law and government make your life better (-).						
You see society as continually evolving (+)						
You think our society is a productive place for people to live in (+).						
For you there's no such thing as social progress (-).						
You think the world is becoming a better place for everyone (+).						

Social Coherence						
The world is too complex for you (-).						
Scientists are the only people who can understand how the world works (-).						
You cannot make sense of what's going on in the world (-).						
Most cultures are so strange that you cannot understand them (-).						
You think it's worthwhile to understand the world you live in (+).						
You find it hard to predict what will happen next in society (-)						

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Meaning of life questionnaire

Please take a moment to think about what makes your life and existence feel important and significant to you. Please respond to the following statements as truthfully and accurately as you can, and also please remember that these are very subjective questions and that there are no right or wrong answers. Please answer according to the scale below:

	Absolutely Untrue	Mostly Untrue	Somewhat Untrue	Can't Say	Somewhat True	Mostly True	Absolutely True
1. I understand my life's meaning.							
2. I am looking for something that makes my life feel meaningful.							
3. I am always looking to find my life's purpose.							
4. My life has a clear sense of purpose.							
5. I have a good sense of what makes my life meaningful.							
6. I have discovered a satisfying life purpose.							
7. I am always searching for something that makes my life feel significant.							
8. I am seeking a purpose or mission for my life.							
9. My life has no clear purpose.							
10. I am searching for meaning in my life.							

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Gratitude questionnaire

	1 strongly disagree	2 disagree	3 slightly disagree	4 neutral	5 slightly agree	6 agree	7 strongly agree
1. I have so much in life to be thankful for.							
2. If I had to list everything that I felt grateful for, it would be a very long list.							
3. When I look at the world, I don't see much to be grateful for							
4. I am grateful to a wide variety of people.							
5. As I get older I find myself more able to appreciate the people, events, and situations that have been part of my life history.							
6. Long amounts of time can go by before I feel grateful to something or someone.							

Team evaluation scale

	1 strongly disagree	2 disagree	3 neutral	4 agree	5 strongly agree
If you make a mistake in the SHG, it is often held against you.					
Members of this SHG are able to bring up problems and tough issues.					
People in this SHG sometimes reject others for being different.					
It is safe to take a risk on this in this SHG.					
It is difficult to ask other members of this SHG for help.					
No one in this SHG would deliberately act in a way that undermines my efforts.					
Working with members of this SHG, my unique skills and talents are valued and utilized					
The SHG is a comfortable place to be					
The SHG challenges me to be a better person					
I feel less alone in the SHG					
SHG leaders help us achieve our goal					

SHG facilitators have a positive impact on the SHG					
The success of the SHG is important to me					
My opinion is valued in the SHG					
I feel responsible for the success of the SHG					
The SHG has given me an opportunity to play a leadership role					
The SHG has provided good training opportunities for me					

8.2 RETAINED AND REMOVED ITEMS OF THE TEAM EVALUATION SCALE

Team evaluation items in the Survey	Source	Items retained in Team evaluation scale
1. If you make a mistake in the SHG, it is often held against you.	Edmondson (1999) Psychological Safety Scale	
2. Members of this SHG are able to bring up problems and tough issues.		X
3. People in this SHG sometimes reject others for being different.		
4. It is safe to take a risk on this in this SHG.		
5. It is difficult to ask other members of this SHG for help.		
6. No one in this SHG would deliberately act in a way that undermines my efforts.		X
7. Working with members of this SHG, my unique skills and talents are valued and utilized		X
8. The SHG is a comfortable place to be		X
9. The SHG challenges me to be a better person		X
10. I feel less alone in the SHG		
11. SHG leaders help us achieve our goal		X
12. SHG facilitators have a positive impact on the SHG		X
13. The success of the SHG is important to me		X
14. My opinion is valued in the SHG		X
15. I feel responsible for the success of the SHG		X
16. The SHG has given me an opportunity to play a leadership role		
17. The SHG has provided good training opportunities for me		X