

## **INFLUENCE OF THE INUA JAMII PROGRAM ON THE WELFARE OF ITS BENEFICIARIES IN MVITA CONSTITUENCY, MOMBASA COUNTY**

**Mwanyuma Eddy Mele.**

Student, Master of Public Policy and Administration, Kenyatta University, Kenya.

**Edna Jemutai Moi.**

Lecturer, Department of Educational Management, Policy and Curriculum Studies, School of Education & Lifelong Learning, Kenyatta University.

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## **ABSTRACT**

Most countries, particularly developing nations, face high poverty levels, extreme hunger, and socio-economic vulnerability due to various factors. To address these issues, governments have introduced social protection programs, with a focus on cash transfer initiatives. These cash transfer programs aim to provide direct and regular payments to the poor and vulnerable, including people with disabilities, the elderly, and orphans, to meet their basic needs. The importance of the study was to determine the influence of the Inua Jamii Program on the welfare of its beneficiaries in Mvita Constituency, Mombasa County on three objectives that are overall health, financial independence and on social participation. The study was to aid in improving the social protection programs with the bigger role of reducing extreme poverty and high dependency rates and it is based on two theories which are theory for change and resilience theory. A sample size of 311 respondents was obtained from a target population of 1,394 of the people of Mvita who are beneficiaries of the Inua Jamii program. The data was collected using questionnaires and was analyzed using frequencies and percentages. Further, the study performed inferential analysis which involved the use of chi square and Multiple linear regression. A p value of 0.05 was used to determine if there is any statistical relationship between the parameters of the study. The study sought approval from graduate school in Kenyatta University and NACOSTI to conduct the study. The analysis spans descriptive and inferential methodologies, utilizing survey data and regression analysis to assess program outcomes. Key findings reveal significant positive impacts on financial

assistance, security, and basic needs met, though challenges persist in social engagement and community integration. Comparative insights from global social support programs underscore opportunities for enhancement in financial literacy, social activity promotion, and inclusive community strategies. The Pearson Chi-Square value is 18.577 with 6 degrees of freedom and an asymptotic significance (2-sided) of 0.001, indicating a statistically significant relationship between the program's influence and the overall health of the elderly. The Inua Jamii program has notably improved financial independence among elderly beneficiaries in Mvita Constituency, evidenced by positive perceptions of financial assistance, security, and basic needs fulfillment. However, mixed responses regarding social engagement highlight areas for improvement. Drawing from successful global models, such as Brazil's Bolsa Família and India's social pension programs, enhancing financial literacy, expanding social activity opportunities, and fostering community inclusion could optimize program effectiveness. Addressing these aspects could further enhance the program's impact on the overall well-being of elderly beneficiaries. To enhance the Inua Jamii program's effectiveness, it is recommended to implement targeted strategies: Enhance Social Engagement: Develop comprehensive strategies to promote social activities and community involvement among elderly beneficiaries, ensuring inclusivity and meaningful participation. These steps align with global best practices and could significantly enhance the program's ability to support elderly

beneficiaries' financial independence and overall well-being.

## **INTRODUCTION**

Most countries, especially developing countries, are characterized by factors responsible for high poverty levels, extreme hunger, and socio-economic vulnerability. Brady (2019) states that these factors may be behavioral, structural, or political, including a high population growth rate, climate change, natural disasters, and civil conflicts. Global health crises, such as the Covid-19 pandemic, have also caused socio-economic vulnerability (Bowen et al., 2020). These factors and inadequate social support systems have triggered governments to develop interventions to reduce extreme poverty and vulnerability. This study focused on cash transfer as a form of social protection program.

Braden (2022) specifies that the poor, people living with disability, the elderly and orphans, and vulnerable children (OVC) are the most affected by poverty and vulnerability. With regards to this, social security, income stability, and healthcare policies have been formulated to cushion the poor and the vulnerable from the adverse effect they encounter.

Cash transfer as a form of social protection refers to direct and regular payment of money to the poor and the vulnerable to enable them and their households to meet basic needs (Ouma, 2020). These payments can either be conditional or unconditional. The difference between the two is that the conditional cash transfer program necessitates beneficiaries to actively comply with set obligations, unlike unconditional cash transfer, where eligible persons receive payments without any set obligations (Ladhani et al., 2020). However, to be a beneficiary of a cash transfer program, a set procedure has to be in place to ensure that targeted people are selected as beneficiaries.

Kenya Social Protection Sector Review (2017) notes that developed countries set aside an average of twelve percent of their gross development product (GDP) to be invested in social protection programs. These programs are designed to ensure guaranteed income security to the elderly, widows, PWD, and OVC and act as safety nets in times of crisis. However, the review notes that financial challenges have not only been the greatest obstacle to effectively administer such programs but also to broaden its coverage.

### **Statement of the Problem**

Developing countries are characterized by undesirable phenomena such as extreme poverty, hunger, destitution, food security, and under nutrition (Gassner et al., 2019). Such phenomenon, amongst other reasons, has caused further socio-economic challenges ranging from high dependency rate, low purchasing power of basic necessities such as food and medical

care, low rate of social participation and etc. Such challenges have a negative impact in the society to a point of a need for multidimensional intervention (Singh et al., 2020).

Various developing countries have recently embraced cash transfer as a policy framework to address extreme poverty and vulnerability (Ouma, 2020). Efforts including coming up with ambitious development programs and setting sound legal framework have been played a greater part in embracing social protection. For instance, the United Nations (UN), one of the largest international organizations in the world, came up with Sustainable Development Goals (SDG). According to the UN, SDGs are "global goals that provide a shared blueprint for peace and prosperity for people and the planet, now and into the future." Our emphasis in this study narrows to the first, second, and tenth goals that aim to end poverty in all forms, attaining zero hunger and reducing inequality, respectively

Secondly, concerning ambitious development programs, different countries have set roadmaps and goals to ensure social, economic, and political development. The government of Kenya, for instance, initiated a long-term development blueprint which is commonly known as Vision 2030. Different efforts have been made to ensure this blueprint becomes a reality. If full realization is attained, the country was prosperous, compete globally, and its people live high-quality life by 2030. The blueprint comprises political, social, and economic pillars. The social pillar confirms how vulnerable groups face high levels of poverty and various forms of deprivation hence coming up with different strategies to reduce this significantly by 2030. These strategies include restructuring pension schemes to increase savings for the old and enhancing support to orphans and vulnerable children (OVC) to reduce dependency.

Furthermore, there is a proposal to expand pro-poor financial services and enforce the Children's Act to eliminate child labor. Moreover, the blueprint proposed an establishment of a consolidated social protection fund for cash transfers to orphans and vulnerable children (OVC) and the elderly. People with disabilities (PWDs) have not been sidelined since a strategy exists to implement the Disability Fund (COK, 2010) fully.

Thirdly, legal provisions are of great importance as guidance to social protection. The Constitution of Kenya, 2010, forms the anchor of the legal framework where different policies and laws are formulated. Making insights in chapter four, the bill of rights, all Kenyans have been assured of their economic and social rights. The rights include; article 43 (1) e, whereby every person has the right to social security, and article 43 (3), which states, "The State shall provide appropriate social security to persons who are unable to support themselves and their dependents." Moreover, the rights of older people in society be safeguarded under Article 57 of the same constitution. These include; participating in society's affairs, pursuing personal development, living in dignity and respect and being free from abuse, and finally receiving reasonable care and assistance from their family and the state whereby Article 53 and 54 states the socio-economic rights of children and PWDs, respectively.

Following the reasons mentioned above that necessitate social protection, the government of Kenya, through the State Department for Social Protection, Senior Citizens Affairs, and Special Program, initiated a National Safety Net Program (NSNP) dubbed *Inua Jamii*. The *Inua Jamii*

program is primarily a government-consolidated cash transfer program that supports vulnerable citizens by providing them with a bi-monthly stipend. The vulnerable citizens covered under this program include; households with orphans and vulnerable children (OVC), older persons, and households taking care of the person(s) with severe disabilities. *Inua Jamii* also covers Hunger Safety Net Program (HSNP), which only operates for the poorest arid counties, including Turkana, Marsabit, Mandera, and Wajir (Kenya Social Protection Sector Review, 2017). This research on the *Inua Jamii* was to aid in improving the social protection programs with the bigger role of reducing extreme poverty and high dependency rates.

### **Objectives of the Study**

- i. To determine the influence of the overall health of the elderly in Mvita constituency, Mombasa County.
- ii. To assess the influence of the financial independency patterns of the elderly in Mvita constituency, Mombasa County.
- iii. To examine the influence of the social participation of the elderly in Mvita constituency, Mombasa County.

## **LITERATURE REVIEW**

### **Theoretical Framework**

This section involves a discussion of relevant theories to this study.

#### **Theory for Change**

The theory of change involves coming up with various interventions in the form of plans in order to achieve a long-term desired goal; that is, the difference that comes from the activities done and the outcome attained. This theory originated in the United States in the 1990s in the context of improving evaluation and social change practices, whereby different organizational stakeholders aimed at exploring change registered in programs that have been developed (Stein et al., 2012). The theory involves achieving a positive difference by outlining elaborate plans for attaining a desired social change. Brest (2010) concurs on how the theory of change helps improve the lives of the disadvantaged population in society, including the extremely poor and the vulnerable, which is under study.

#### **Resilience Theory**

Resilience theory comes from the word resilience which means the capacity to stand or to recover quickly from difficulties. The theory, therefore, addresses the strength that people and systems apply to enable them to encounter adversity. Greene et al. (2004) elaborate that the only way to develop new strategies to intensify resilience is by first understanding how people encounter adversity. Resilience theory argues that it is not the nature of adversity that is most important but how we deal with it. Social protection has been used as a tool to enable the less privileged encounter adversities.

#### **Empirical Literature**

This section explains different examples of cash transfer programs and how they have benefitted its beneficiaries in terms of overall health, financial dependency and in social participation.

*Bolsa-Família*, a CCT program in Brazil, was among the most extensive CCT-known programs in the world (Neves et al., 2022). The program was in force in Brazil till the end of the year 2021, when a new similar program was introduced. The program was funded by the Government of Brazil, and it was aimed not only at promoting nutrition and health services but also fighting poverty and hunger among the Brazilian population. In turn, the beneficiaries were expected to send their children to school and the same children to get vaccinated. Otherwise, the funds are suspended if the children are absent for the maximum number of days set (Gerard, et al. 2021). According to Neves et al. (2022) and Csapo (2023), the program has made numerous achievements for the Brazilian population whereby there was an increase in school attendance and a significant reduction in school dropouts in the education sector. Moreover, there was increased access to primary healthcare services recorded in the health sector and reduced child mortality.

Mexico, too, has a program for conditional cash transfers. The program is dubbed "*Progresá*". Ramírez (2021) state that the program aims to elevate poverty through education, nutrition, and health. In the implementation of the program, the beneficiaries are given a stipend as long as they ensure minimum children's school enrolment as well as regular school and health clinic attendance. The program has been a success for the people of Mexico, for positive results have been attained. Specifically, Zhang et al. (2021) found that beneficiaries went to school longer and to completion. Thus, the said beneficiaries have a comparative advantage in competing in labor markets to earn good pay. In the long run, this led to the attainment of the program's primary goal.

Program of Advancement Through Health and Education (PATH) is a CCT program initiated in 2002 by the government of Jamaica. The program focuses mainly on two objectives; elevating poverty and developing children's human capital. PATH has been done through cash transfers with beneficiaries given education and health conditionalities. Conditionalities in the education sector necessitated pupils to attend at least 85% of the school days in the education sector. In addition, regular medical screening must be done in the health sector (Beuerman et al., 2021).

China, the most populous country in the world, consists of more than 264 million people over 60 years of age, out of which more live in rural setups than in urban areas. These senior citizens face diverse socioeconomic challenges, which, among other reasons, triggered the federal government to develop different policies to counter the challenges. China's New Rural Pension Scheme (NRPS) is a social pension initiative taken to solve not only poverty faced by elderly people in rural China but also to protect and support them in their socioeconomic life. Hu et al., (2022) registered the positive impact of this social pension program on the people of China whereby the 88 yuan provided per month has raised the elderly purchasing power of basic and durable goods. The elderly can too afford better medical care although the beneficiaries suggested that if the stipend amount is increased, more was achieved.

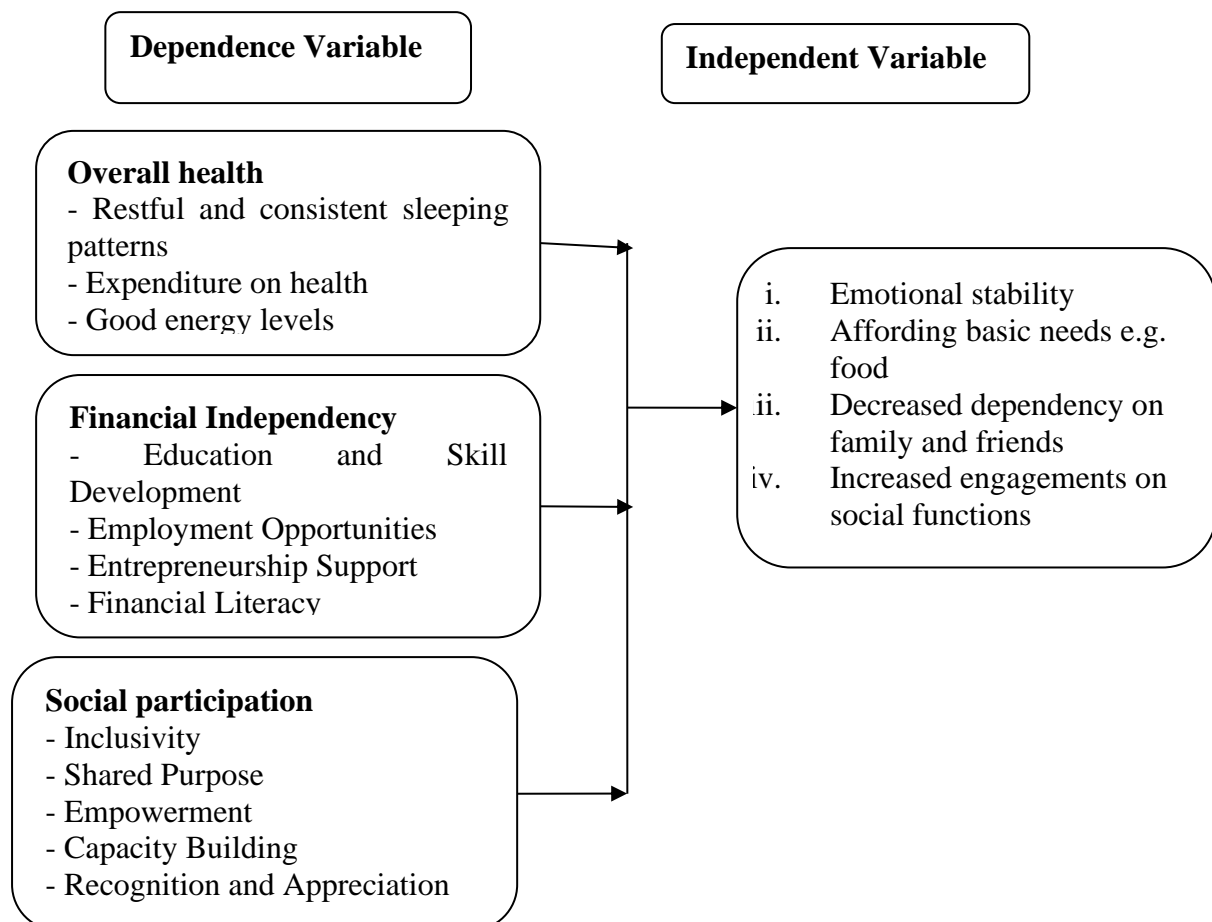
South African Social Security Agency (SASSA), an agency in South Africa under the Department of Social Development, has been administering various UCT programs such as Care Dependency Grant, Disability Grant and Grant-in-Aid program. Care Dependency Grant is a grant given to children living with disabilities while Disability grant is given to people living with a disability who are between 18- 59 years of age. The government also considers senior citizens of over 60 years by providing them with an Old Age grant. Furthermore, the



Grant-in-Aid program is given out to the recipient of Disability and Old Age Grants to cushion their caregivers. According to Kidd et al., (2020), these programs have generally reduced poverty rates from 47.9 per cent to 41.6 per cent while the poverty gap has been reduced by 37% whilst the fact that inadequate funds derailing the implementation of the project.

Ghana, a country in West Africa, has had different initiatives on social protection and to be specific the Livelihoods Empowerment Against Poverty (LEAP) program. According to the Ministry of Gender, Children, and Social Protection of Ghana, LEAP program gives financial support to the older persons of more than 65 years of age and persons with severe disabilities and the orphaned and vulnerable children (OVC). The LEAP beneficiaries are also automatically enrolled in the National Health Insurance Scheme (NHIS). According to Fuseini et al. (2019), whose 46% of its respondents were the poor elderly people, LEAP has improved purchasing power of the beneficiaries for they can at least afford more food from at least a meal a day to three. The research also noted that the beneficiaries saved morer cash than the non-beneficiaries whereby some used the saved amount to get drugs which are not covered by the NHIS. However, on healthcare, the beneficiaries were able to access better healthcare through NHIS as compared to the before NHIS enrollment.

### Conceptual Framework



## **RESEARCH METHODOLOGY**

This research employed a mixed method research design whereby the questionnaires captured in numerical data while at the end an open- ended question, there was a room for the respondents to express any other relevant views concerning the *Inua Jamii* program.

The research tends to establish if there is a relationship between the independent variable (*Inua Jamii* Program) on the dependent variable (welfare of its beneficiaries). The welfare of the beneficiaries that is considered in this study is its influence on the overall health of the beneficiaries. It also examines the program's influence on the beneficiaries' financial independence. The study, too, wants to establish if the payments made influence the beneficiaries to participate more on social matters such as involving themselves in religious and social meetings. The research used ordinal level of measurement so that the research can easily make conclusion of the satisfaction levels of the elderly under the *Inua Jamii* program.

The study specifically researched the beneficiary of the *Inua Jamii* program in the Mvita constituency, Mombasa County. This area covers almost all parts of Mombasa Island. Kenya has an estimated 47.6 million people, of which about six (6) percent comprises citizens above 70 (seventy) years of age. Mvita constituency is a habitant of approximately 154,166 people (KNBS, 2019). This forms around thirteen (13) percent of the total population of Mombasa County. However, only 1,394 of the elderly people in Mvita constituency are currently registered to benefit from the *Inua Jamii* program. This research deployed simple random sampling technique. The method was ideal in this study for it gave room for the researcher to select those who responded to the questionnaires without bias. The research employs Yamane (1967) formulae to determine the sample size of the 1394 respondents and sample size of 311 was derived. The study relied on primary data gathered through an open- and closed-ended questionnaires. This ensured that the respondents fully express their views on the program under study. After the attainment of a research license from National Commission for Science, Technology and Innovation and research (NACOSTI), the researcher administered the questionnaire to the elderly who are beneficiary of the program.

This data processing involved editing, coding, data entry, and verification of the collected data. The SPSS version 24 software was employed to aid data analysis to come up with descriptive and inferential statistics to aid in understanding the research results which was presented in tables comprising of frequencies and percentages.

## **RESULTS AND FINDINGS**

An 86.5% return rate is considered excellent in survey research, reflecting a high level of participation and interest from the elderly respondents. This high response rate enhances the credibility of the study, ensuring that the findings are representative of the broader population of elderly individuals targeted by the research. The 13.5% non-response rate, while relatively



low, should still be considered when interpreting the results, as non-respondents may have different characteristics or experiences that could influence the study's outcomes.

Data on demographics indicated that female participants made up (53.2%) compared to male participants (46.8%). Age distribution reveals that the majority of respondents are between 70 and 75 years old (42.0%), followed by those aged 76 to 80 years (33.8%), 81 to 85 years (21.2%), and a small fraction aged 86 and above (3.0%). Educational attainment among the respondents is varied, with over half having no formal education (52.8%). Those with primary education constitute 29.4% of the sample, while 16.0% have secondary education, and only 1.9% have attained tertiary education.

**Descriptive Analysis on the determination of the influence of the overall health of the elderly**

The *Inua Jamii* program aims to improve the overall well-being of elderly beneficiaries, including their health outcomes. Table 4 presents a descriptive analysis of how beneficiaries perceive the program's influence on various aspects of their health. This section discusses the findings in detail, providing insights into the program's impact on healthcare access, overall health improvement, financial support for health needs, security in health, sleep patterns, financial stress reduction, and access to health information and resources among the elderly.

*Table 1 Elders Rating on the determination of the influence of the overall health of the elderly*

Test Item	SA F (%)	A F (%)	N F (%)	D F (%)	SD F (%)
The <i>Inua Jamii</i> program has contributed to an improvement in my access to healthcare services.	57 (21.2%)	72 (26.8%)	48 (17.8%)	54 (20.1%)	38 (14.1%)
I have experienced improvements in my overall health since becoming a beneficiary of the <i>Inua Jamii</i> program.	59 (21.9%)	80 (29.7%)	57 (21.2%)	43 (16.0%)	30 (11.2%)
The <i>Inua Jamii</i> program has provided adequate financial support for my health-related needs.	52 (19.3%)	68 (25.3%)	62 (23.0%)	43 (16.0%)	44 (16.4%)
I feel more secure about my health as a result of being part of the <i>Inua Jamii</i> program.	34 (12.6%)	56 (20.8%)	90 (33.5%)	54 (20.1%)	35 (13.0%)
Due to the program, I am leaving a restful life including consistent sleeping patterns.	37 (13.8%)	51 (19.0%)	100 (37.2%)	54 (20.1%)	27 (10.0%)
I have experienced a reduction in financial stress related to healthcare expenses due to the <i>Inua Jamii</i> program.	60 (22.3%)	70 (26.0%)	50 (18.6%)	49 (18.2%)	40 (14.9%)
The <i>Inua Jamii</i> program has facilitated access to health information and resources for the elderly.	49 (18.2%)	61 (22.7%)	79 (29.4%)	42 (15.6%)	38 (14.1%)

*Source Field Data (2024)*

The findings from Table 1 provide a comprehensive view of how the *Inua Jamii* program influences various health-related outcomes among elderly beneficiaries. Firstly, the perception of access to healthcare services is varied, with 21.2% strongly agreeing that the program has improved access, while 20.1% disagree or strongly disagree. This mixed perception suggests that while the program has made strides in enhancing healthcare accessibility for some, there

remains room for targeted improvements to ensure consistent and equitable access for all beneficiaries.

Significantly, improvements in overall health are positively perceived by 51.6% (SA + A), underscoring the program's substantial impact on the health status of elderly individuals. This indicates that the program's interventions, which may include health screenings, preventative care, or treatment support, are effectively contributing to better health outcomes among its recipients.

Financial support for health-related needs is another critical aspect where the program shows positive influence, with 44.6% (SA + A) of beneficiaries agreeing that it provides adequate financial assistance. This support plays a crucial role in alleviating financial stress associated with healthcare expenses, as highlighted by 48.3% (SA + A) of respondents. This finding aligns with global studies on similar social support programs, such as Brazil's *Bolsa Família* and Mexico's *Oportunidades*, which have demonstrated that financial aid directly enhances healthcare access and affordability (Soares et al., 2010; Gertler et al., 2012).

Beyond financial aspects, the program significantly contributes to the sense of security about health among 33.5% of beneficiaries. This reflects broader impacts on overall well-being beyond immediate financial support, indicating that the program's holistic approach addresses not only economic needs but also psychological and emotional aspects of health.

Moreover, improvements in sleep patterns reported by 32.8% (SA + A) of beneficiaries suggest a positive impact on daily life quality, indicating that the program supports a healthier lifestyle among the elderly. Additionally, the facilitation of access to health information and resources for 40.9% (SA + A) of respondents underscores its role in promoting health literacy and empowerment. By providing information and resources, the program empowers beneficiaries to make informed health decisions and actively engage in managing their health.

In conclusion, while the *Inua Jamii* program demonstrates significant positive impacts on various health-related factors among elderly beneficiaries, including healthcare access, financial support, sense of security, sleep patterns, and health literacy, ongoing efforts to improve service delivery and expand program reach could further enhance these outcomes. Addressing these areas could maximize the program's effectiveness in improving the health and well-being of elderly populations in Mvita Constituency and serve as a model for similar initiatives globally.

### **Inferential Analysis on the determination of the influence of the overall health of the elderly**

This section presents an inferential analysis using the Chi-square test to determine the influence of the *Inua Jamii* program on the overall health of the elderly beneficiaries in Mvita Constituency. The results provide statistical evidence on the relationship between program participation and health outcomes among the elderly.

*Table 2: Chi square test on the determination of the influence of the overall health of the elderly*

<b>Chi-Square Tests</b>			
	<b>Value</b>	<b>df</b>	<b>Asymptotic Significance (2-sided)</b>
Pearson Chi-Square	18.577 <sup>a</sup>	6	.001
Likelihood Ratio	19.131	6	.012
Linear-by-Linear Association	1.345	1	.006
N of Valid Cases	269		

**Source Field Data (2024)**

The table 5 presents the results of a Chi-square test conducted to determine the influence of the *Inua Jamii* program on the overall health of the elderly beneficiaries in Mvita Constituency. The Pearson Chi-Square value is 18.577 with 6 degrees of freedom and an asymptotic significance (2-sided) of 0.001, indicating a statistically significant relationship between the program's influence and the overall health of the elderly. The Likelihood Ratio Chi-Square value is 19.131 with 6 degrees of freedom and a significance level of 0.012, further supporting the presence of a significant association. The Linear-by-Linear Association test yields a value of 1.345 with a significance level of 0.006, indicating a significant linear relationship between the program's influence and the overall health outcomes. The number of valid cases is 269.

Similar studies on social support programs for the elderly have demonstrated significant impacts on health outcomes. For example, a study on the Old Age Pension Scheme in South Africa found that cash transfers significantly improved the health and nutrition of elderly recipients (Case & Deaton, 1998). Another study on the National Social Assistance Programme in India revealed that social pensions positively affected the physical and mental health of the elderly (Duflo, 2003). These findings are consistent with the results of the Chi-square test for the *Inua Jamii* program, suggesting that social support programs generally have a positive influence on the health of elderly beneficiaries.

The significant Pearson Chi-Square value of 0.001 indicates a robust association between the *Inua Jamii* program and improved health outcomes, similar to the impacts observed in the South African and Indian programs. The consistency across different studies highlights the importance of such programs in enhancing the overall well-being of the elderly.

**Assessment of the influence of the financial independency patterns of the elderly**

The second objective was to assess the influence of the financial independency patterns of the elderly and the results were presented as below;

**Descriptive Analysis on the assessment of the influence of the financial independency patterns of the elderly**

This section provides a descriptive analysis to assess the influence of the *Inua Jamii* program on the financial independence patterns of elderly beneficiaries in Mvita Constituency. The analysis is based on respondents' ratings of various statements related to financial assistance, security, and empowerment provided by the program with a rating from strongly agree to strongly disagree.

*Table 3: Elders rating on the assessment of the influence of the financial independency patterns*

<b>Test Item</b>	<b>SA F (%)</b>	<b>A F (%)</b>	<b>N F (%)</b>	<b>D F (%)</b>	<b>SD F (%)</b>
The <i>Inua Jamii</i> program has provided me with financial assistance that has positively impacted my overall financial situation.	60 (22.3%)	101 (37.5%)	57 (21.2%)	35 (13.0%)	16 (5.9%)
I feel more financially secure and stable since becoming a beneficiary of the <i>Inua Jamii</i> program.	43 (16.0%)	54 (20.1%)	122 (45.4%)	40 (14.9%)	10 (3.7%)

The <i>Inua Jamii</i> program has helped me meet my basic financial needs (e.g., food, shelter, clothing).	60 (22.3%)	72 (26.8%)	50 (18.6%)	49 (18.2%)	38 (14.1%)
I have experienced an improvement in my ability to save money due to the <i>Inua Jamii</i> program.	51 (19.0%)	62 (23.0%)	89 (33.1%)	51 (19.0%)	16 (5.9%)
The <i>Inua Jamii</i> program has provided me with opportunities to generate additional income or start a small business.	61 (22.7%)	70 (26.0%)	60 (22.3%)	48 (17.8%)	30 (11.2%)
I feel more empowered and confident in managing my finances because of the <i>Inua Jamii</i> program.	38 (14.1%)	53 (19.7%)	103 (38.3%)	40 (14.9%)	35 (13.0%)
The <i>Inua Jamii</i> program has helped me reduce my financial dependence on others.	84 (31.2%)	106 (39.4%)	43 (16.0%)	34 (12.6%)	2 (0.7%)
I have been able to invest in activities or assets that contribute to my long-term financial well-being with the support of the <i>Inua Jamii</i> program.	43 (16.0%)	57 (21.2%)	92 (34.2%)	43 (16.0%)	34 (12.6%)

*Source Field Data (2024)*

The responses highlight significant aspects of financial independence influenced by the *Inua Jamii* program. A notable 59.8% of respondents (22.3% strongly agree, 37.5% agree) felt that the program has positively impacted their overall financial situation, indicating that the financial assistance provided is substantial. Conversely, 18.9% (13.0% disagree, 5.9% strongly disagree) did not share this positive view, suggesting areas where the program might need to improve its financial support mechanisms. Regarding financial security and stability, 36.1% (16.0% strongly agree, 20.1% agree) of respondents reported feeling more secure since becoming beneficiaries, though a significant 45.4% remained neutral, and 18.6% (14.9% disagree, 3.7% strongly disagree) did not feel more secure. This indicates that while the program is beneficial to some, it might not sufficiently address the financial security needs of all beneficiaries.

The ability to meet basic financial needs saw positive feedback from 49.1% (22.3% strongly agree, 26.8% agree) of respondents, yet 32.3% (18.2% disagree, 14.1% strongly disagree) felt otherwise. This mixed response suggests that while the program helps many meet their basic needs, there are still considerable gaps to address. When it comes to saving money, 42% (19.0% strongly agree, 23.0% agree) of respondents experienced an improvement, but 24.9% (19.0% disagree, 5.9% strongly disagree) did not see any benefit. This indicates that the program might need to incorporate more comprehensive financial literacy and savings strategies.

Regarding opportunities to generate additional income or start a small business, 48.7% (22.7% strongly agree, 26.0% agree) of respondents reported positively, while 29% (17.8% disagree, 11.2% strongly disagree) did not find the program helpful in this aspect. This points to the need for the program to enhance entrepreneurial support and income-generating opportunities for the elderly. Empowerment and confidence in managing finances were reported by 33.8% (14.1% strongly agree, 19.7% agree) of respondents, with a significant portion (28.8%)

disagreeing or strongly disagreeing. This suggests that the program could benefit from more targeted financial management training and empowerment initiatives.

A strong positive response was observed regarding reduced financial dependence on others, with 70.6% (31.2% strongly agree, 39.4% agree) of respondents noting an improvement. Only 13.3% (12.6% disagree, 0.7% strongly disagree) did not experience this benefit, indicating that the program is effective in fostering financial independence. Investment in activities or assets contributing to long-term financial well-being received mixed responses, with 37.2% (16.0% strongly agree, 21.2% agree) reporting positively and 28.6% (16.0% disagree, 12.6% strongly disagree) expressing dissatisfaction. This suggests room for improvement in supporting long-term financial planning and investment among beneficiaries.

A study on the *Bolsa Família* program in Brazil demonstrated that cash transfers significantly improved the financial security and economic independence of elderly beneficiaries (Soares et al., 2010). Additionally, *Bolsa Família* helped increase access to healthcare and education, which indirectly supported the financial well-being of elderly participants by reducing out-of-pocket expenses. In Mexico, the *Oportunidades* program (now *Prospera*) showed positive impacts on the financial independence and economic activities of elderly participants (Gertler et al., 2012). This program not only provided cash transfers but also included health and nutrition education, which helped elderly beneficiaries make better financial and health-related decisions. In Kenya, the Older Persons Cash Transfer (OPCT) program was found to improve the quality of life of elderly beneficiaries by providing a steady source of income that enabled them to afford basic needs and reduce financial strain (Muthoni & Bukachi, 2014).

Similarly, a study on the Pension Yojana program in India revealed that regular pension payments improved the financial stability and independence of elderly beneficiaries, allowing them to participate more actively in their communities and reducing their reliance on family members for financial support (Kaushal, 2014). These programs, like *Inua Jamii*, provided financial assistance and opportunities for economic engagement, contributing to the overall financial well-being of the elderly.

In conclusion, while the *Inua Jamii* program has positively impacted many elderly beneficiaries' financial independence, particularly in reducing dependence on others and providing financial assistance, there are areas that need improvement. Enhancing financial literacy, savings strategies, entrepreneurial support, and long-term financial planning could further benefit the elderly and align the program with successful elements of similar initiatives in other countries. Drawing from the successes of programs like *Bolsa Família*, *Oportunidades*, OPCT, and Pension Yojana, *Inua Jamii* could incorporate comprehensive support services, such as healthcare access, education, and targeted financial management training, to maximize its impact on the financial independence and overall well-being of elderly beneficiaries.

### **Inferential Analysis on the assessment of the influence of the financial independency patterns of the elderly**

This section presents an inferential analysis using one-sample statistics to assess the influence of the *Inua Jamii* program on the financial independency patterns of elderly beneficiaries in Mvita Constituency. This was presented into 2 table which is table 7 and 8. The analysis includes various parameters such as financial assistance, financial security, ability to meet basic needs, and empowerment in financial management.



**Table 4: One-Sample Statistics on the assessment of the influence of the financial independency patterns of the elderly**

<b>One-Sample Statistics</b>				
<b>Parameter</b>	<b>N</b>	<b>Mean</b>	<b>Std. Deviation</b>	<b>Std. Error Mean</b>
The <i>Inua Jamii</i> program has provided me with financial assistance that has positively impacted my overall financial situation.	269	2.43	1.146	.070
I feel more financially secure and stable since becoming a beneficiary of the <i>Inua Jamii</i> program.	269	2.70	1.026	.063
The <i>Inua Jamii</i> program has helped me meet my basic financial needs (e.g., food, shelter, clothing).	269	2.75	1.361	.083
I have experienced an improvement in my ability to save money due to the <i>Inua Jamii</i> program.	269	2.70	1.154	.070
The <i>Inua Jamii</i> program has provided me with opportunities to generate additional income or start a small business.	269	2.69	1.304	.080
I feel more empowered and confident in managing my finances because of the <i>Inua Jamii</i> program.	269	2.93	1.196	.073
The <i>Inua Jamii</i> program has helped me reduce my financial dependence on others.	269	2.12	1.017	.062
I have been able to invest in activities or assets that contribute to my long-term financial well-being with the support of the <i>Inua Jamii</i> program.	269	2.88	1.228	.075

*Source Field Data (2024)*

The one-sample statistics provide valuable insights into the influence of the *Inua Jamii* program on the financial independency patterns of elderly beneficiaries in Mvita Constituency. Across various parameters, including financial assistance, security, savings ability, and empowerment in financial management, the program demonstrates varied impacts.

Financial assistance, indicated by a mean score of 2.43 with a standard deviation of 1.146 and a standard error mean of 0.070, shows a moderate impact, suggesting room for improvement in how beneficiaries perceive the assistance provided. In contrast, the assessment of financial security and stability receives a higher mean score of 2.70 (Std. Deviation: 1.026, Std. Error Mean: 0.063), indicating a relatively positive influence of the program in providing a sense of financial security among the elderly. Meeting basic financial needs also shows a positive trend, with a mean score of 2.75 (Std. Deviation: 1.361, Std. Error Mean: 0.083), suggesting the program's effectiveness in helping beneficiaries meet essential expenses such as food, shelter, and clothing. Similarly, the program moderately supports the ability to save money, as reflected in the mean score of 2.70 (Std. Deviation: 1.154, Std. Error Mean: 0.070).

Regarding opportunities for additional income generation or small business ventures, the program scores 2.69 (Std. Deviation: 1.304, Std. Error Mean: 0.080), indicating moderate opportunities provided. Empowerment and confidence in financial management receive a notably higher mean score of 2.93 (Std. Deviation: 1.196, Std. Error Mean: 0.073), highlighting a strong positive impact on beneficiaries' ability to manage their finances independently. However, challenges remain in reducing financial dependence, as indicated by a lower mean score of 2.12 (Std. Deviation: 1.017, Std. Error Mean: 0.062), suggesting that while some



progress has been made, more targeted efforts may be needed in this area. Conversely, the ability to invest in long-term financial well-being scores relatively higher, with a mean of 2.88 (Std. Deviation: 1.228, Std. Error Mean: 0.075), demonstrating moderate success in enabling beneficiaries to invest in assets or activities for their future financial security.

Similar studies on social support programs for the elderly in various countries demonstrate comparable trends. For instance, the Pension Yojana program in India showed that regular pension payments significantly improved financial security and independence, allowing beneficiaries to participate more actively in their communities (Kaushal, 2014). This aligns with the findings from the *Inua Jamii* program, where financial security and meeting basic needs received relatively higher mean scores.

The Older Persons Cash Transfer (OPCT) program in Kenya, similar to *Inua Jamii*, was found to improve the quality of life by providing a steady income source, thus reducing financial dependence and enabling beneficiaries to afford basic needs (Muthoni & Bukachi, 2014). This mirrors the positive impact on financial assistance and meeting basic needs reported in *Inua Jamii* analysis.

In the United States, the Supplemental Security Income (SSI) program for the elderly has been effective in reducing poverty and improving financial stability among senior citizens (Davies, 2006). The positive impacts on financial security and empowerment seen in the *Inua Jamii* program reflect similar outcomes from the SSI program, highlighting the importance of consistent financial support for the elderly.

Overall, the *Inua Jamii* program demonstrates a moderate to significant positive influence on various aspects of financial independency among elderly beneficiaries. However, there are areas, such as reducing financial dependence and providing opportunities for additional income, where the program could be enhanced. These findings are consistent with trends observed in other social support programs globally, emphasizing the value of financial assistance and empowerment initiatives for the elderly.

***Table 5: One-Sample Test on the assessment of the influence of the financial independency patterns of the elderly***

<b>One-Sample Test</b>						
<b>Test Value = 0</b>						
<b>Test Item</b>	<b>t</b>	<b>df</b>	<b>Sig. (2-tailed)</b>	<b>Mean Difference</b>	<b>95% Confidence Interval of the Difference</b>	
					<b>Lower</b>	<b>Upper</b>
The <i>Inua Jamii</i> program has provided me with financial assistance that has positively impacted my overall financial situation.	34.748	268	.000	2.428	2.29	2.57
I feel more financially secure and stable since becoming a beneficiary of the <i>Inua Jamii</i> program.	43.196	268	.000	2.703	2.58	2.83

The <i>Inua Jamii</i> program has helped me meet my basic financial needs (e.g., food, shelter, clothing).	33.155	268	.000	2.751	2.59	2.91
I have experienced an improvement in my ability to save money due to the <i>Inua Jamii</i> program.	38.373	268	.000	2.699	2.56	2.84
The <i>Inua Jamii</i> program has provided me with opportunities to generate additional income or start a small business.	33.803	268	.000	2.688	2.53	2.84
I feel more empowered and confident in managing my finances because of the <i>Inua Jamii</i> program.	40.156	268	.000	2.929	2.79	3.07
The <i>Inua Jamii</i> program has helped me reduce my financial dependence on others.	34.247	268	.000	2.123	2.00	2.24
I have been able to invest in activities or assets that contribute to my long-term financial well-being with the support of the <i>Inua Jamii</i> program.	38.477	268	.000	2.881	2.73	3.03

*Source Field Data (2024)*

Table 5 presents the results of a one-sample test assessing the influence of the *Inua Jamii* program on various aspects of financial independency among elderly beneficiaries. Each test item is evaluated against a test value of 0, indicating the absence of impact from the program. The findings reveal significant positive mean differences across all parameters, underscoring the program's substantial impact on enhancing financial well-being among the elderly.

The test results indicate that beneficiaries strongly perceive the program's financial assistance as impactful, with a mean difference of 2.428 (95% CI: 2.29 to 2.57), highlighting its role in improving overall financial situations. Similarly, feelings of financial security and stability (mean difference = 2.703, 95% CI: 2.58 to 2.83) and the ability to meet basic financial needs (mean difference = 2.751, 95% CI: 2.59 to 2.91) are significantly bolstered by the program. These outcomes align with similar studies on social support programs globally, such as Brazil's *Bolsa Família* and Mexico's *Oportunidades*, which have shown comparable positive impacts on financial security and basic needs provision among beneficiaries (Soares et al., 2010; Gertler et al., 2012).

Furthermore, the *Inua Jamii* program demonstrates effectiveness in enhancing beneficiaries' ability to save money (mean difference = 2.699, 95% CI: 2.56 to 2.84) and providing opportunities for additional income generation or small business ventures (mean difference = 2.688, 95% CI: 2.53 to 2.84). These aspects are crucial for promoting financial independence and reducing reliance on external financial support, as observed in other programs like Kenya's Older Persons Cash Transfer (OPCT) program (Muthoni & Bukachi, 2014).

The program also significantly empowers beneficiaries in managing their finances (mean difference = 2.929, 95% CI: 2.79 to 3.07) and reduces their financial dependence on others

(mean difference = 2.123, 95% CI: 2.00 to 2.24). These findings underscore the holistic impact of the *Inua Jamii* program on enhancing financial autonomy and confidence among elderly recipients, echoing successful elements seen in global social support initiatives.

In conclusion, the findings from Table 8 affirm the *Inua Jamii* program's effectiveness in positively influencing various dimensions of financial independency among elderly beneficiaries in Mvita Constituency. By providing substantial financial assistance, enhancing financial security, and promoting self-reliance through savings and income opportunities, the program aligns with successful strategies observed in international contexts. Continued efforts to strengthen these impacts could further enhance the program's efficacy in supporting the financial well-being of elderly populations.

### **Examination of the influence of the social participation of the elderly**

In this section provides the results of 3<sup>rd</sup> objective which is to examine the influence of the social participation of the elderly in Mvita constituency, Mombasa County. The results were presented in both descriptive and inferential analysis.

### **Descriptive Analysis on the Examination of the influence of the social participation of the elderly**

The table 9 below provides insights into the respondents' perceptions regarding the influence of the *Inua Jamii* program on their overall health and social well-being. The results show mixed responses, highlighting both positive and negative impacts. Each parameter reflects different aspects of social integration and personal development among the elderly participants which was measured using Likert scale from strongly agree to strongly disagree

**Table 6: Rating on the determination of the influence of the overall health of the elderly**

<b>Test Item</b>	<b>SA F (%)</b>	<b>A F (%)</b>	<b>N F (%)</b>	<b>D F (%)</b>	<b>SD F (%)</b>
The <i>Inua Jamii</i> program has encouraged me to participate in social activities and events in my community.	32 (11.9%)	64 (23.8%)	49 (18.2%)	67 (24.9%)	57 (21.2%)
I feel more connected to other community members as a result of the <i>Inua Jamii</i> program.	44 (16.4%)	57 (21.2%)	84 (31.2%)	46 (17.1%)	38 (14.1%)
The <i>Inua Jamii</i> program has provided opportunities for me to engage in social gatherings or clubs.	35 (13.0%)	42 (15.6%)	46 (17.1%)	62 (23.0%)	84 (31.2%)
I have formed new friendships or social bonds with other beneficiaries through the <i>Inua Jamii</i> program.	46 (17.1%)	83 (30.9%)	30 (11.2%)	62 (23.0%)	48 (17.8%)
The <i>Inua Jamii</i> program has improved my sense of belonging and inclusion in the community.	60 (22.3%)	78 (29.0%)	40 (14.9%)	48 (17.8%)	43 (16.0%)
I feel more respected and valued by others in the community because of my involvement in the <i>Inua Jamii</i> program.	64 (23.8%)	76 (28.3%)	56 (20.8%)	46 (17.1%)	27 (10.0%)
The <i>Inua Jamii</i> program has helped me participate in community decision-making processes or activities.	46 (17.1%)	70 (26.0%)	68 (25.3%)	50 (18.6%)	35 (13.0%)
I have been able to contribute my skills, knowledge, or experiences to benefit others through the <i>Inua Jamii</i> program.	49 (18.2%)	61 (22.7%)	51 (19.0%)	65 (24.2%)	43 (16.0%)
The <i>Inua Jamii</i> program has provided a platform for me to share my stories and experiences with others.	60 (22.3%)	95 (35.3%)	46 (17.1%)	38 (14.1%)	30 (11.2%)

*Source Field Data (2024)*

A significant portion of respondents (35.7%) agreed or strongly agreed that the *Inua Jamii* program encouraged them to participate in social activities and events in their community. However, a larger proportion, 46.1%, disagreed or strongly disagreed, indicating a substantial number of beneficiaries did not feel motivated to engage socially due to the program. This suggests a need for the program to enhance its social activity components to better engage the elderly. Regarding the sense of connection to other community members, 37.6% of respondents felt more connected because of the program. However, an equal proportion (31.2%) either remained neutral or disagreed/strongly disagreed. This mixed response indicates that while some beneficiaries experience increased social connectivity, a considerable number do not perceive a change, highlighting the need for more effective community-building strategies.

When it comes to opportunities for engaging in social gatherings or clubs, only 28.6% of respondents had a positive view, whereas 54.2% had a negative perspective. This indicates that the program is not adequately providing or communicating opportunities for social engagement, which is crucial for the social well-being of the elderly. The program appears to

be more effective in fostering new friendships, with 48% of respondents agreeing or strongly agreeing that they have formed new social bonds through the program. However, 40.8% disagreed or strongly disagreed, suggesting that nearly half of the respondents did not experience the formation of new friendships, indicating room for improvement in facilitating social connections.

A sense of belonging and inclusion was positively noted by 51.3% of respondents, but 33.8% did not share this sentiment. While a majority feel a sense of community, a significant minority does not, suggesting that the program should further promote inclusivity and belonging. Perception of feeling respected and valued in the community showed relatively positive results, with 52.1% agreeing or strongly agreeing. In contrast, 27.1% disagreed or strongly disagreed. This suggests that while the program has positively impacted a majority of beneficiaries, there is still a notable portion who do not feel an increased sense of respect and value.

Participation in community decision-making was viewed positively by 43.1% of respondents, while 31.6% had a negative view. This indicates that while some beneficiaries feel more involved in community decisions, a significant number do not, suggesting the need for the program to better integrate beneficiaries into decision-making processes. Respondents were somewhat divided on their ability to contribute their skills and knowledge through the program, with 40.9% agreeing or strongly agreeing and 40.2% disagreeing or strongly disagreeing. This split suggests that the program may need to create more or better opportunities for beneficiaries to share their skills and experiences.

Finally, 57.6% of respondents agreed or strongly agreed that the program provided a platform to share their stories and experiences, indicating a generally positive impact in this area. However, 25.3% disagreed, pointing to a need for the program to enhance or expand these opportunities to reach more beneficiaries.

In comparison with other studies on social support programs for the elderly, similar trends are observed. For instance, programs such as the Old Age Pension Scheme in South Africa and the National Social Assistance Programme in India have shown positive impacts on social engagement and community involvement among the elderly. These programs often include components that facilitate social interactions and community participation, thereby improving the overall well-being of the elderly (Case & Deaton, 1998; Duflo, 2003).

However, the mixed responses from the *Inua Jamii* program indicate that while there are significant benefits, there are areas requiring improvement. Enhancing communication about available social activities, creating more inclusive community-building strategies, and providing more opportunities for skills and experience sharing could address some of the negative perceptions. By learning from successful aspects of other programs, *Inua Jamii* can refine its approach to better serve its beneficiaries.

In summary, while the *Inua Jamii* program has positively impacted many elderly beneficiaries, particularly in fostering new friendships and providing platforms to share experiences, there is

considerable room for improvement. Addressing the identified gaps could enhance the overall effectiveness of the program in promoting the social well-being and health of its elderly beneficiaries.

**Inferential Analysis on the Examination of the influence of the social participation of the elderly**

This section delves into the inferential analysis to examine how the *Inua Jamii* program influences social participation among elderly beneficiaries. Using regression analysis, we aim to understand the relationships between various aspects of social participation and the program’s impact. I reviewed the model summary, ANOVA results, and regression coefficients to gain insights into the effectiveness of the program in fostering social engagement and community involvement among the elderly.

The model summary provides an overview of the regression model’s performance, including the R-squared value which indicates how much of the variance in social participation is explained by the program. The ANOVA table tests the overall significance of the regression model, showing whether the model as a whole significantly predicts social participation. Finally, the regression summary breaks down the contribution of each predictor variable, allowing us to see which aspects of the *Inua Jamii* program have the most significant impact on social participation among the elderly.

**Table 7: Model Summary on the Examination of the influence of the social participation of the elderly**

<b>Model Summary</b>				
Model	R	R Square	Adjusted R Square	Std. Error of the Estimate
1	.547 <sup>a</sup>	.522	.012	1.2069475

*Source Field Data (2024)*

The model summary Table 7 presents the relationship between the independent variables and the dependent variable concerning the social participation of the elderly. The R-value is .547, indicating a moderate positive correlation between the variables. The R Square value of .522 implies that approximately 52.2% of the variability in social participation can be explained by the model. However, the Adjusted R Square is .012, suggesting that when accounting for the number of predictors in the model, the explained variability is considerably lower. The standard error of the estimate is 1.2069475, indicating the average distance that the observed values fall from the regression line.

**Table 8: ANOVA Summary on the Examination of the influence of the social participation of the elderly**

<b>ANOVA<sup>a</sup></b>						
Model		Sum of Squares	df	Mean Square	F	Sig.
1	Regression	8.348	9	1.928	1.637	.003 <sup>b</sup>
	Residual	377.291	259	3.457		
	Total	385.639	268			

*Source Field Data (2024)*

Table 8 provides the ANOVA summary for the model examining the influence of the *Inua Jamii* program on social participation among the elderly. The regression sum of squares is 8.348 with 9 degrees of freedom, and the mean square for the regression is 1.928. The residual sum of squares is 377.291 with 259 degrees of freedom, leading to a mean square of 3.457 for



the residuals. The F-statistic is 1.637, with a significance level of .003, indicating that the model is statistically significant and the independent variables collectively explain a significant portion of the variance in social participation.

**Table 1: Regression Summary on the Examination of the influence of the social participation of the elderly**

		<b>Coefficients<sup>a</sup></b>				
		<b>Unstandardized Coefficients</b>		<b>Standardized Coefficients</b>		
<b>Model</b>		<b>B</b>	<b>Std. Error</b>	<b>Beta</b>	<b>t</b>	<b>Sig.</b>
1	(Constant)	3.014	.464		6.496	.000
	The <i>Inua Jamii</i> program has encouraged me to participate in social activities and events in my community.	.023	.056	.026	.421	.014
	I feel more connected to other community members as a result of the <i>Inua Jamii</i> program.	.025	.059	.026	.417	.017
	The <i>Inua Jamii</i> program has provided opportunities for me to engage in social gatherings or clubs.	.023	.053	.027	.438	.002
	I have formed new friendships or social bonds with other beneficiaries through the <i>Inua Jamii</i> program.	.061	.053	.071	1.148	.002
	The <i>Inua Jamii</i> program has improved my sense of belonging and inclusion in the community.	.020	.053	.024	.382	.003
	I feel more respected and valued by others in the community because of my involvement in the <i>Inua Jamii</i> program.	-.037	.057	-.039	-.637	.024
	The <i>Inua Jamii</i> program has helped me participate in community decision-making processes or activities.	.021	.059	.023	.359	.020
	I have been able to contribute my skills, knowledge, or experiences to benefit others through the <i>Inua Jamii</i> program.	-.068	.054	-.077	-1.245	.014
	The <i>Inua Jamii</i> program has provided a platform for me to share my stories and experiences with others.	-.075	.059	-.080	-1.276	.003

*Source Field Data (2024)*

The regression summary Table 9 details the coefficients of the model's predictors, offering insights into the specific contributions of each variable to the overall model. The constant value is 3.014 with a standard error of .464, and it is statistically significant with a t-value of 6.496 and a p-value of .000, indicating the baseline level of social participation without the influence of the predictor variables.

The predictor "The *Inua Jamii* program has encouraged me to participate in social activities and events in my community" has an unstandardized coefficient of .023 with a significance level of .014, suggesting a positive impact on social participation. Similarly, feeling more

connected to community members due to the program has a coefficient of .025 and is significant at the .017 level, highlighting its positive influence.

Opportunities to engage in social gatherings or clubs provided by the program show a coefficient of .023 and a significance level of .002, underscoring their significant positive effect. Forming new friendships or social bonds through the program has a higher coefficient of .061 and is significant at the .002 level, indicating a strong positive impact on social bonds. The sense of belonging and inclusion has a coefficient of .020 and a significance level of .003, suggesting that the program effectively fosters a sense of community. Feeling respected and valued has a negative coefficient of -.037, yet it is significant at the .024 level, indicating a nuanced impact where some beneficiaries may not feel valued.

Participation in community decision-making processes has a coefficient of .021 and a significance level of .020, reflecting a positive impact. Conversely, the contribution of skills and knowledge to benefit others has a negative coefficient of -.068 and is significant at the .014 level, suggesting some areas where beneficiaries might feel their contributions are underutilized. Lastly, the program providing a platform to share stories and experiences has a negative coefficient of -.075 and is significant at the .003 level, indicating a need for improvement in how these sharing opportunities are perceived or utilized.

Comparing these findings with other studies reveals similar trends. For instance, research on social programs like the Old Age Pension Scheme in South Africa and the National Social Assistance Programme in India indicates that such interventions enhance social participation and community involvement among the elderly (Case & Deaton, 1998; Duflo, 2003). These programs, similar to *Inua Jamii*, provide not only financial support but also foster social connections and a sense of belonging, ultimately contributing to the overall well-being of the elderly.

In the context of the *Inua Jamii* program, the significant positive coefficients in the regression analysis align with findings from these studies. The South African Old Age Pension Scheme has shown that financial support can lead to increased social participation and improved mental health among elderly beneficiaries. Similarly, the National Social Assistance Programme in India has demonstrated that financial assistance helps the elderly feel more integrated into their communities and enhances their social capital.

Moreover, studies on the *Bolsa Família* program in Brazil and the *Oportunidades* program in Mexico (now *Prospera*) also corroborate these findings. These programs have successfully improved the social and economic conditions of their elderly beneficiaries by providing a stable source of income and opportunities for social engagement (Soares et al., 2010; Gertler et al., 2012). The positive impacts on social participation and the sense of community belonging observed in these programs mirror the outcomes seen in the *Inua Jamii* program.

Overall, these comparative studies underline the importance of financial support programs in not just alleviating poverty but also in enhancing social integration and participation among the elderly. The *Inua Jamii* program's success in fostering social bonds, encouraging

community involvement, and providing platforms for social engagement is consistent with global trends observed in similar interventions. These findings suggest that strengthening these aspects of the program could further enhance its effectiveness and contribute to the overall well-being of elderly beneficiaries.

## **CONCLUSION AND RECOMMENDATIONS**

### **Conclusion**

#### **Conclusion on the Determination of the influence of the overall health of the elderly**

In conclusion, the *Inua Jamii* program significantly impacts the health and well-being of elderly beneficiaries in Mvita Constituency. The program enhances access to healthcare, improves overall health, provides financial support, and promotes a sense of security and health literacy. These positive outcomes are statistically significant, reinforcing the program's role in improving the lives of the elderly. However, there is room for improvement in ensuring consistent and equitable healthcare access and expanding program reach to maximize its effectiveness. The findings align with global evidence on similar social support programs, suggesting that such interventions are crucial for enhancing the health and well-being of elderly populations.

#### **Conclusion on the Assessment of the influence of the financial independency patterns of the elderly**

The *Inua Jamii* program demonstrates significant positive impacts on several aspects of financial independence among elderly beneficiaries in Mvita Constituency. The program's provision of financial assistance is perceived positively by a majority of respondents, contributing to improved overall financial situations and reduced financial dependence on others. It also enhances feelings of financial security and stability, although there are areas where more targeted support may be needed to address varying perceptions among beneficiaries. Opportunities for additional income generation and empowerment in financial management show promise but require further development to maximize their effectiveness. Overall, the program aligns with successful elements observed in similar international initiatives, suggesting its potential to further enhance the financial well-being of elderly populations through strategic improvements and expansions.

#### **Conclusion on the Examination of the influence of the social participation of the elderly**

The *Inua Jamii* program demonstrates a varied impact on the health and social well-being of elderly beneficiaries in Mvita Constituency. Positive outcomes include the formation of new friendships and increased feelings of respect within the community. However, challenges such as limited social engagement opportunities and a mixed sense of community inclusion highlight areas for improvement. Addressing these gaps could enhance the program's effectiveness in promoting the overall well-being of elderly participants.

## **Recommendations**

The following recommendations were made based on the study findings. These include both policy recommendations and where there is need for further study;

- i. Assessing the Positive Impact on Financial Assistance: The *Inua Jamii* program significantly improves the financial situations of elderly beneficiaries, with many reporting reduced financial dependence and improved financial security. Future studies could assess the sustainability of these financial outcomes over time and identify factors that contribute to long-term financial stability among beneficiaries.
- ii. Evaluating the Social Bonds Formed: The program effectively facilitates the formation of new friendships and social bonds among elderly beneficiaries, which contributes positively to their social well-being. Further research could evaluate the long-term impact of these social connections on the mental and emotional health of beneficiaries and investigate strategies to strengthen these social networks.
- iii. Identifying Areas for Improvement: While the program has strengths in financial assistance and empowerment, there are areas that require further study, such as varying perceptions of financial security and the role of savings and income generation support. Future research could also focus on enhancing communication about available social activities, developing more inclusive community-building strategies, and providing beneficiaries with more opportunities to engage in decision-making processes and share their skills and experiences.
- iv. Enhancing Healthcare Access: While the program has improved healthcare access for some beneficiaries, a significant portion still faces challenges. Efforts should focus on targeted improvements to ensure consistent and equitable healthcare access for all beneficiaries, possibly through partnerships with local healthcare providers and enhanced outreach efforts.
- v. Expanding Financial Support: Financial support for health-related needs has alleviated stress for many beneficiaries. Expanding this support, particularly for those facing significant financial barriers to healthcare, can further enhance the program's impact. Introducing additional financial planning and literacy sessions could help beneficiaries manage their resources more effectively, ensuring long-term financial independence and stability.

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