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THE CONTEMPORARY SITUATION OF ELDERLY PEOPLE IN ETHIOPIA AND THE  
ETHIOPIAN EVANGELICAL CHURCH MEKANE YESUS

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A Thesis  
Presented to the Faculty of  
Concordia Seminary, St. Louis,  
Department of Practical  
in Partial Fulfillment of the  
Requirements for the Degree of  
Master of Arts

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By  
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November 2021

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Reader

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I dedicate this work to my dear mother Abebech Elias who raised me and my nine siblings alone since my father went to the Lord early. To all elderly people in Ethiopia who are facing physical, psychological, social, and spiritual problems.

## CONTENTS

ACKNOWLEDGEMENTS .....	vii
ABBREVIATIONS .....	ix
ABSTRACT .....	x
CHAPTER ONE .....	1
INTRODUCTION .....	1
THESIS .....	7
THE METHODOLOGICAL PROCEDURE TO BE EMPLOYED .....	8
THE STRUCTURE OF THE THESIS .....	8
CHAPTER TWO .....	10
EXAMINING THE STATUS AND CARE SYSTEM FOR THE ELDERLY IN ETHIOPIA .....	10
THE DEMOGRAPHIC STATUS OF THE ELDERLY IN ETHIOPIA .....	10
The Population of the Elderly .....	10
Health Status of the Elderly .....	11
Economic Status of the Elderly .....	14
Social Status of the Elderly .....	17
Spiritual Status of the Elderly .....	21
THE STATUS OF CARE SYSTEM FOR THE ELDERLY PEOPLE IN ETHIOPIA .....	25
Elderly Care in the Traditional Family .....	25
Institutional Care for the Elderly in Ethiopia .....	29
FACTORS THAT AFFECT THE TRADITIONAL ELDERLY CARE SYSTEM .....	31
Effect of Migration on the Elderly .....	33
Effect of HIV/AIDS on the Elderly .....	37

THE PRACTICE OF THE CHURCH IN CONTEXT .....	39
CHAPTER THREE .....	44
DISCERNING THE WISDOM OF THE WORLD–CURRENT SCHOLARSHIP ON THE HOLISTIC CARE OF THE ELDERLY .....	44
WHAT IS HOLISTIC?.....	44
HOLISTIC CARE.....	45
HOLISTIC HEALTH CARE FOR THE ELDERLY .....	46
SPIRITUALITY AND ELDERLY HOLISTIC CARE IN THE WESTERN CONTEXT	48
SPIRITUALITY AND HOLISTIC ELDERLY CARE IN AN AFRICAN CONTEXT ...	53
CHAPTER FOUR.....	58
DISCERNING THEOLOGICAL WISDOM REGARDING THE CARE OF THE ELDERLY .....	58
BIBLICAL PERSPECTIVE FOR THE ELDERLY .....	58
ELDERLY CARE IN THE SCRIPTURE .....	62
JESUS’ MINISTRY AND ELDERLY CARE.....	65
Jesus’ Ministry to the Elderly.....	65
Jesus Teaches His Disciples to Have a Love for Others .....	67
Jesus Teaches His Disciples to Serve Others .....	68
ELDERLY CARE IN THE EARLY CHURCH.....	69
CHAPTER FIVE .....	78
IMPLEMENTING GODLY GUIDANCE AND LEADERSHIP FOR THE EECMY IN THE CARE OF THE ELDERLY .....	78
HOW CAN THE CHURCH OFFER THE BEST CARE FOR THE ELDERLY?.....	81
CONCLUSION.....	86
FURTHER RECOMMENDATIONS.....	87

BIBLIOGRAPHY.....	91
VITA.....	100

## ACKNOWLEDGEMENTS

First and foremost, I am deeply grateful to God, who has brought me this far and helped me in my study and life journey. I would like to thank the Ethiopian Evangelical Church Mekene Yesus leaders and the South Synod leaders who have recommended me for further study.

I would like to express my sincere gratitude to my thesis advisor Dr. James Marriott for his dedicated and ceaseless support and guidance. His continuous encouragement and walking alongside me exceptionally helped me to finish this thesis. Also, I would like to thank Dr. David Schmitt and Dr. Mark Rockenbach for providing advice and guidance regarding the prospects of the thesis during the early stages of the project.

I would like to offer my special thanks to my thesis readers Dr. Joel Biermann and Dr. Mark Rockenbach for their insightful comments and suggestions. I would also like to thank my Graduate School Director Dr. Beth Hoeltke who encouraged and assisted me in the technical setup of the paper and kept me moving forward. Also, I would like to thank Dr. Gillian Bond, the Deaconess Studies Department Head for her continuous encouraging words during my study. I would like to offer my special thanks to Pastor Bruce and Nelda Cameron for their commitment to walk alongside me, sacrificing their quality time to help with the editing of the entire project. I am also grateful to EECMY-DMT Diakonia section head Rev. Tseganesh Ayele for providing valuable resources and documents for the research work.

I am deeply grateful to Pastor Michael Lange (CNH District President) and his wife Kristi Lange who helped coordinate my and my husband's scholarship assistance. My family and I first met Pastor Lange in Ethiopia. He was like God's messenger to us, to enable us to pursue our study in Concordia, St. Louis. Thank you, Pastor Lange once again, for continually facilitating the funds for our study and living expenses and for providing encouragement and prayers. I



believe that God has used you as an instrument to bear tomorrow's church ministers. I would like to thank all the individuals who have been involved in funding my scholarship. It is their kind help and support that have made my study and life in the United States a wonderful time.

I am also grateful for Christ Memorial Lutheran Church Senior Pastor Jeff Cloeter and his wife Bobby Cloeter. Thank you for being our host family and nurturing my faith and my family's faith in Christ. I am also grateful to Joe and Joan Harwell for their kind and unwavering support in many ways. I am also thankful to St. Trinity Lutheran Church Pastor David Lewis and Heidi Lewis, for their incredible support during our arrival to the USA.

My heartfelt thanks go to my mother Abebech Elias for her consistent prayers and encouragement. Also, I cannot forget to thank my siblings, in-laws, and friends for all their unconditional support in these very intense academic years.

Lastly, not least, I am extremely grateful to my beloved husband Wondimu M. Game, who listened and discussed with me as a research partner and offered several important ideas for my thesis writing. I cannot forget his encouraging words when I seemed ready to give up. Finally, thank you to our adorable daughters Doxsa (nine), Hadassah (seven), and Naomi (four) for letting me do my thesis writing while you need me the most.

## ABBREVIATIONS

DASSIC	Development and Social Service Commission
DMT	Department of Mission and Theology
EECMY	Ethiopian Evangelical Church Mekane Yesus
HIV/AIDS	Human Immunodeficiency Virus/Acquired Immunodeficiency Syndrome
IOM	International Organization for Migration
KICCE	Kaliti Institutional Care Center for the Elderly
LWF	Lutheran World Federation
MHEMD	Mekedonia Home for the Elderly and Mentally Disabled
SSA	Sub Saharan Africa

## ABSTRACT

Uddo Tsigewengel B. “The Contemporary Situation of Elderly People in Ethiopia and the Ethiopian Evangelical Church Mekane Yesus.” MA Thesis, Concordia Seminary, 2022. 100pp.

The Church is God’s agent to serve God’s people in the church and society at large. The scope of the Church’s ministry comprises all ages: young, adult, and elderly. Culturally, in Ethiopia, children and close family members are responsible for caring for the elderly, therefore, the church has not given satisfactory attention to holistic elderly care. Moreover, current societal change and globalization have negatively affected the indigenous family-support system for the elderly. As a result, many elderly people are without proper care and suffer from homelessness, loneliness, hunger, and poor health; some are even exposed to the street life. This thesis briefly considers the secular and African traditional views of holistic care and compares them with biblical holistic care. Further, the thesis asks how the Ethiopian Evangelical Church Mekane Yesus offers scriptural-based holistic care for the elderly. Based on its findings, it suggests an approach to Christian holistic care for the elderly, to address their true spiritual needs, needs that often go wholly unrecognized by the secular and African traditional views about the spiritual component of an individual. Christian holistic care is concerned about the spiritual health and wellbeing of all people, of any age, maintained through the true relationship with and worship of the Triune God. Accordingly, this thesis offers recommendations to the EECMY, to rethink her holistic ministry theme, considering the physical and spiritual needs of the elderly people of today.

## CHAPTER ONE

### INTRODUCTION

Without appropriate care, an elderly person's later years can be unpleasant. In Africa, elderly people face multiple challenges as societal changes affect the traditional care system that has provided for the needs of the elderly in the past. The story of Mrs. Bogalech Zewude can illustrate the status of elderly people in Ethiopia.

Mrs. Bogalech Zewude, sixty-six years old, lives in Ethiopia. She had five children and raised them with her husband. Her husband had skills as a carpenter that allowed him to earn money for family expenditures and house rent. He was the breadwinner for the family. Bogalech was occupied with house chores and raising children. She never went to school, nor did she have a paying job. She was a happy woman, however, committed to supporting the family as a mother and wife, helping her children see a better future. All of those in the family were members of the church. Bogalech often attended the Christian women's fellowship of her congregation. Two of the children are married and moved to the city. One of their sons died at an early age. Two daughters have gone to the Middle East to work as housemaids. Their parents have heard no news about them during the two years since they left. After all their children left home either for a job or marriage, Bogalech and her husband were living together, sharing thoughts, joys, pains, and life challenges. Suddenly, one day after coming home from work, her husband came down sick from malaria and went to the hospital. He was admitted to the hospital for a couple of weeks and then died. This was unexpected and shocking for Bogalech. A new chapter of her life started on that day. Life as a widow became worse and worse after she lost the husband who had provided for their daily needs. After his death, she was forced to move from their house to her relatives' house, as she could not pay the rent. She only eats one or two meals each day. As she is growing older, she often feels sick, but she cannot get proper health services and treatments because she cannot afford to pay the medical fees. She has lost all close social networks as she moved to a new neighborhood and church community. She feels too weak, poor, and old to participate in the Christian community the way she used to when she was actively involved with Christian sisters in the church. There is no program or facility from the congregation for welcoming people like her. Her married children seldom visit her; they are striving to manage their daily lives in the city with limited resources and money. Bogalach never dreamt her later life would be like this. She hoped for reciprocal support from her children to provide for her food, medical fees, and house rent. She hoped the church would offer love and support, would listen to her problems, and would welcome her into the

community. Bogalech needs social, psychological, economical, physical, and spiritual care for her later life.<sup>1</sup>

In Ethiopia, there are many more elderly women and men like Bogalech, seeking social and spiritual care during their old age. Traditionally, children, immediate family members, and other relatives provided care for their elderly parents.<sup>2</sup> This tradition of family support, practiced for many years by almost all Ethiopians regardless of tribe or religion, was designed to address the social, physical, personal, and emotional needs of the elderly members in the community.

In Africa, nuclear families, extended families, clans, and other social groups have important roles in exercising care and concern for each other. In Ethiopia, nuclear and extended families are highly valued, and individual members of these groups have many reciprocal and intertwining roles and responsibilities. Additionally, the experience, knowledge, and wisdom of the elderly is greatly esteemed. Honoring and caring for the elderly is a cultural value, the responsibility of the nuclear and extended families as well as of neighbors and communities.

However, in Ethiopian society, while the elderly population is increasing, the traditional family-supporting system is dwindling, so elderly people are facing unprecedented challenges. Especially in towns and cities, the traditional family patterns that supported and cared for elderly people are weakening. Adult children move to the city or another country for education, better jobs, marriage, or for political or economic migration. Older people are then left alone without adequate assistance from their children. They subsequently endure social, economic, physical, psychological, and spiritual problems. In recent times, it is not uncommon to see old men and women begging on the street for their daily bread in cities and towns. These multi-dimensional

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<sup>1</sup>This is a story of an actual event that took place in Ethiopia. The names have been changed to protect those affected.

<sup>2</sup> Abdi Ayana, "Who Takes Care of the Elderly in Ethiopia When Reciprocal Relationships Break Down?" (master's thesis, Lund University, 2012), 1, <http://lup.lub.lu.se/student-papers/record/3054302>.

problems limit elderly people from social interaction with their community and push them away from the Christian community as well.

Current scholars in the field have explained the diverse challenges and situations to addresses the various problems of the elderly. In the Western context, elderly people used to have adequate care from their families. According to studies in the early 1970s, elderly people have a high level of interaction and reciprocal exchange of assistance between them and their families.<sup>3</sup> Formal service providers were providing support only in cases where informal supports were unavailable or insufficient to meet the social care needs of older adults.<sup>4</sup> As the traditional care system became insufficient or unavailable to meet the social care needs of older adults, the care of older people requires collaboration between formal and informal care systems.

In contrast to the individualism of the West, the African culture is described as *collectivist* because of the longstanding integrated life of the family and the extended family. African scholar Benezet Bujo explains how one's life is understood in the African context: "In contrast to Western society of individuality, in the African context, the community is necessary for life. There can be no individual development outside this group which supports the individual."<sup>5</sup> A person's life is bound by the community. Consequently, in the African community, older people have traditionally been viewed in a positive light, as sources of information and wisdom.

Increasingly, however, cultural, and societal changes due to globalization, including the individualistic nature of economic gain, as well as the proliferation of information technology, have challenged the lifestyle and worldview of African society. Several scholars have

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<sup>3</sup> Marjorie H. Cantor and Mark Brennan, *Social Care of the Elderly: The Effects of Ethnicity, Class and Culture* (New York: Springer, 2000), 4.

<sup>4</sup> Cantor and Brennan, *Social Care*, 4.

<sup>5</sup> Benezet Bujo, "Ethics and Aging in Africa," in *Aging*, ed. Lisa Sowle Cahill and Dietmar Mieth (London: SCM Press, 1991), 108.

documented how the traditional culture, which holds and respects elderly people as an asset, is changing. Joseph Kuypers contends that “culture provides inadequate or inaccurate normative guidance. Social supports are underdeveloped or hard to access and the whole family is left vulnerable to moralism concerning ‘duty’ and ‘loyalty.’”<sup>6</sup> Especially in Western and modern society, the traditional family support system is weakening and the tradition that supports elderly people is becoming unnoticeable.<sup>7</sup> Likewise, recent Ethiopian research reveals that as an outcome of globalization, the socio-economic and cultural changes have affected traditional integrated care and deteriorated the system.<sup>8</sup> Moreover, contemporary modernization closely connected with social and economic change is weakening the traditional social values, norms, and networks that provide informal support to elderly people.<sup>9</sup>

Thus, the traditional family-supporting system is weakening. One African researcher, Isabella Aboderin, argues that material family support for older people in Africa has declined in recent decades, exposing increasing numbers to poverty.<sup>10</sup> These changes have left many elderly people vulnerable, marginalized, and poor. Consequently, scholars have been looking at aging in sub-Saharan Africa with a concern about the increasing poverty rate among elderly people and

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<sup>6</sup> Joseph A. Kuypers, “Ego Functioning in Old Age: Early Adult Life Antecedents,” *The International Journal of Aging and Human Development* 5, no. 2 (1974): 157–79, <https://doi.org/10.2190/GYWD-1JCD-QXD2-EGEA>.

<sup>7</sup> Stephen Sapp, *Full of Years: Aging and the Elderly in the Bible and Today* (Nashville: Abingdon, 1987), 27.

<sup>8</sup> Ayana, “Who Takes Care of the Elderly,” 1.

<sup>9</sup> Barney Cohen and Jane Menken, eds., *Aging in Sub-Saharan Africa: Recommendations for Furthering Research* (Washington, DC: National Academies Press 2006), 1. <https://search.covenantseminary.edu/login?url=http://search.ebscohost.com/login.aspx?direct=true&scope=site&db=nlebk&AN=186012>.

<sup>10</sup> Isabella Aboderin, “Decline in Material Family Support for Older People in Urban Ghana, Africa: Understanding Processes and Causes of Change,” *The Journals of Gerontology Series B: Psychological Sciences and Social Sciences* 59, no. 3 (May 1, 2004): <https://doi.org/10.1093/geronb/59.3.S128>.

its impact on all other aspects of their wellbeing.<sup>11</sup>

Furthermore, the multidimensional demands of elderly people require an integrated approach to address their problems. Melvin Kimble asserts that “aging is a multidimensional reality that demands an interdisciplinary approach.”<sup>12</sup> He offers the important reminder that “any examination of aging and the aged should reflect an understanding that it is a whole person who is aging.”<sup>13</sup> Kimble indicates that the “insights of theology, sociology, psychology, and medicine need to be brought into dynamic dialogue if an integrated understanding of the older adult is to emerge.”<sup>14</sup>

Therefore, the African elderly care system requires indigenous communal life and the holistic nature of care. Ann Streaty Wimberly and Edward P. Wimberly indicate, “the indigenous model of pastoral care and nature embraces a worldview or overarching meaning system that emphasizes a communal and holistic orientation toward care and nurture.”<sup>15</sup> As research by Neal M. Krause reveals, a religion that offers spiritual services is one such coping resource for elderly people. He indicates that New and Old Testament stories that help people deal more effectively with stressful life events, as well as assistance provided by the Christian community, can play an important role in the lives of elderly people.<sup>16</sup>

Hence, the current approach in scholarship draws attention to holistic social care in

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<sup>11</sup> Armando Barrientos and Peter Lloyd-Sherlock, “Older and Poorer? Aging and Poverty in the South,” *Journal of International Development* 14, no. 8 (2002): 29, <https://doi.org/10.1002/jid.954>.

<sup>12</sup> Melvin A. Kimble, “Education for Ministry with the Aging,” in *Ministry with the Aging*, ed. William M. Clements (San Francisco: Harper & Row, 1981), 211.

<sup>13</sup> Kimble, “Education for Ministry,” 211.

<sup>14</sup> Kimble, “Education for Ministry,” 211.

<sup>15</sup> Anne Streaty Wimberly and Edward P. Wimberly, “Pastoral Care of African Americans,” in *Aging, Spirituality and Religion: A Handbook*, ed. James J. Ellor, Melvin A. Kimble, and Susan H. McFadden (Minneapolis: Fortress, 1995), 162.

<sup>16</sup> Neal M. Krause, *Aging in the Church: How Social Relationships Affect Health* (West Conshohocken, PA: Templeton Foundation Press, 2008), 33.



addressing older people's multidimensional needs. In an African context, spiritual matters are associated with everyday life, norms, and values. Elderly people especially are more serious about their spirituality in their later years. Consequently, care accompanied with a spiritual focus is more meaningful.

Scholars discuss the nature of the person as having several aspects such as the emotional self, the physical self, the social self, and the spiritual self.<sup>17</sup> James Ellor emphasizes the spiritual needs of the person and underlines how a holistic philosophy would acknowledge and attempt to address the needs of all four aspects of the person, while the spiritual needs hold the individual together.<sup>18</sup> This means that holistic services would not only address the spiritual needs of the person.

In recent decades, researchers have identified religion as one of the coping resources for the elderly. Krause, in his book, *Aging in the Church*, says he believes that stress is a common issue in later years, as an older person is exposed on average to approximately two stressful events every eighteen months.<sup>19</sup> Naturally, many older adults search for coping resources to get rid of stress. Researchers in recent decades have identified religion as one of the coping resources for the elderly. A Latin American scholar, Ivone Gebara, highlights the great role of religious organizations in responding to elderly people's questions of the ultimate meaning of existence and life. While contemporary consumer societies seem to forget the elderly, religious communities are attempting to develop meaningful ethical behavior patterns.<sup>20</sup> The social impact

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<sup>17</sup> James Ellor et al., "Wholistic Theology as a Conceptual Foundation for Services for the Oldest Old," in *Spiritual Maturity in the Later Years*, ed. James J. Seeber (New York: Haworth, 1990), 103.

<sup>18</sup> Ellor et al., "Wholistic Theology," 105.

<sup>19</sup> Krause, *Aging*, 33.

<sup>20</sup> Ivone Gebara, "Religion, Culture and Aging: A Latin American Viewpoint," in *Aging*, ed. Lisa Sowle Cahill and Dietmar Mieth (London: SCM Press, 1991), 101.

of religious communities can play an important role in elderly life. Current scholars in the field believe in the importance of a holistic approach to elderly people.

Consequently, since the 1970s, the EECMY has committed to holistic ministry that addresses the whole person as created in the image of God. The church perceives the concept of “holistic” as referring to the whole person's spirit, body, and mind. Holistic ministry, “serving the whole person,” is a theological point of view for addressing people’s needs and challenges. Holistic ministry in the context of EECMY means that “the whole person cannot be divided arbitrarily, as if the body, spirit, and mind can be cared for separately.”<sup>21</sup> The holistic ministry of the church emphasizes God’s love exhibited to all people and then the church as the body of Christ sharing God’s love in words and actions.

This project builds on this holistic approach and spiritual emphasis, with particular attention to the Scriptures. The biblical witness calls the church to give privileged status to the elderly. The biblical witness also serves as the primary guide for the diaconal ministry of the EECMY. This thesis will thus contribute a uniquely scriptural and Ethiopian approach to the care of the elderly.

## **Thesis**

The thesis and purpose of this project is to invoke the role and responsibility of the diaconal ministries in the EECMY for holistic ministry and care to the elderly. As suggested in the introduction, the project will analyze four issues that contribute to the problem of elderly care: globalization and its effect on communal lifestyle, the abandonment of traditional Ethiopian

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<sup>21</sup> Bekure Daba, “An Examination and Assessment of the Role and Status of Women in the ‘Holistic’ Ministry of the Ethiopian Evangelical Church Mekane Yesus,” (Unpublished Doctoral Dissertation, University of Liverpool, 2011), 1, <http://hdl.handle.net/10034/204009>.

values, the scriptural mandate for holistic ministry to include the care of the elderly, and a viable plan and structure for accomplishing holistic ministry and care to the elderly through the God-given gifts and calling of the diaconate.

### **The Methodological Procedure to Be Employed**

The thesis will use an adaptation of Richard Osmer's four tasks of Practical Theology, developed and adopted by the practical department at Concordia Seminary, St. Louis.<sup>22</sup> The framework is based on four interpretive pillars: attending to self and the world, interpreting First Article wisdom, discerning theological wisdom, and implementing godly guidance and leadership. Subsequently, based on the secondary sources, the thesis will examine and assess the contemporary situation of the elderly people in Ethiopia, explore Biblical and historical concepts of aging, and examine the holistic elderly care in Western and African contexts.

Moreover, I will also rely on my own experiences as a deaconess in the Ethiopian Evangelical Church Mekane Yesus, and my experiences with my extended elderly families, neighbors, and relatives. Specifically, I will consider the situation in Ethiopia and the holistic approach to the elderly demonstrated by EECMY.

### **The Structure of the Thesis**

The following chapter presents the status of elderly people and the status of care for the elderly in Ethiopia; it will explore factors that affect the traditional elderly care system and the practice of the church in context. The third chapter will look at the wisdom of the world's current scholarship on the holistic care of the elderly in Western and African contexts. The fourth chapter will discern theological wisdom regarding the care of the elderly. It also considers the

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<sup>22</sup> Richard R. Osmer, *Practical Theology: An Introduction* (Grand Rapids: Eerdmans, 2008).

biblical perspective of elderly people and elderly care. Finally, the fifth chapter will offer ways to implement godly guidance and leadership for the EECMY in the care of the elderly and includes a conclusion and some further recommendations for the EECMY.

## CHAPTER TWO

### EXAMINING THE STATUS AND CARE SYSTEM FOR THE ELDERLY IN ETHIOPIA

This chapter will examine the status of the elderly and the care system which is accessible for them in Ethiopia. The first part will present the demographic situation: the economic, social, physical, and spiritual status of elderly people in Ethiopia. The second part will explore the factors that affect the traditional family support system, the family and institutional systems, and the church practice in this context.

#### The Demographic Status of the Elderly in Ethiopia

##### The Population of the Elderly

A study done in 2019 shows that the number of elderly people in the world, aged sixty-five<sup>1</sup> and over, was 703 million. It is projected to reach over 1.5 billion elderly people in 2050.<sup>2</sup> The highest increase is projected to occur in eastern and southeastern Asia while the second-fastest increase is estimated in sub-Saharan Africa, with an expected increase from 32 million in 2019 to 101 million in 2050.<sup>3</sup> Specifically in Ethiopia, according to the World Bank report in 2019, the total population of the country was 112,078,730.<sup>4</sup> Among these, about 3.52 percent of

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<sup>1</sup> Many global data presented as old age is 65 and above but the World Health Organization (WHO) definition reveals that in Africa the traditional definition of elderly person starts between 50 to 65 years of age. However, I used 65 years of age to refer elderly in my thesis due to the following reasons: most of the current resources refers to year 65 and above for elderly person, the life expectancy of Ethiopians is rising to 66.7 in 2020, and the retirement age is 60.

<sup>2</sup> United Nations, “World Population Aging: Department of Economic & Social Affairs Population Division,” (New York, 2019).  
<https://www.un.org/en/development/desa/population/publications/pdf/ageing/WorldPopulationAgeing2019-Highlights.pdf>.

<sup>3</sup> United Nations, “World Population Aging,”

<sup>4</sup> The World Bank, 2019, <https://data.worldbank.org/indicator/SP.POP.TOTL?locations=ET>.

Ethiopia's total population were 65 years and older.<sup>5</sup>

At present, the life expectancy of individuals is improving, and elderly people are surviving beyond age 65 in most of the world. According to data from the United Nations, between 2015–2020 and 2045–2050, the global average life expectancy is expected to increase by 7.7 years (12%) and is projected by an additional 4.5 years (6%). Sub-Saharan Africa has the largest increase, from 49.1 years in 1990–1995 to 60.5 years in 2015–2020.<sup>6</sup> Likewise, in Ethiopia, the population of elderly people and the life expectancy is increasing over time. From 1990 to 2015, Ethiopia's average life expectancy has increased by more than 18 years.<sup>7</sup> According to recent data from the Index Mundi in 2020, the total Ethiopian population life expectancy at birth was 67.7 years. Female life expectancy is higher than male, 69.7 and 65.5, respectively.<sup>8</sup> This increase in life expectancy occurs mainly as a result of accessibility of health care services and improvements in sanitation, housing, water, as well as increasing knowledge of health-related issues.

### Health Status of the Elderly

In Ethiopia, elderly people deal with innumerable health issues as their age progresses. The HelpAge survey conducted in Addis Ababa, the capital city of Ethiopia, identifies various types of diseases for which older people are undergoing medical treatment. These include eye disease,

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<sup>5</sup> Aaron O'Neill, Ethiopia: "Age Structure from 2009 to 2019," Statista, Apr 1, 2021, accessed on 6/11/2021 <https://www.statista.com/statistics/455134/age-structure-in-ethiopia/>.

<sup>6</sup> United Nations, World population Aging 2019 Highlights, <https://www.un.org/en/development/desa/population/publications/pdf/ageing/WorldPopulationAgeing2019-Highlights.pdf>.

<sup>7</sup> Gizachew Balew Jembere, Youngtae Cho, Myunggu Jung, "Decomposition of Ethiopian Life Expectancy by Age and Cause of Mortality; 1990-2015," PLoS ONE 13(10): e0204395, 2018, <https://doi.org/10.1371/journal.pone.0204395>.

<sup>8</sup> Index Mundi, Ethiopia Demographic Profile, 2020. Accessed on 8/4/2021. [https://www.indexmundi.com/ethiopia/demographics\\_profile.html](https://www.indexmundi.com/ethiopia/demographics_profile.html).

hearing problems, hypertension, arthritis, diabetes, lung/bone tuberculosis, and depression. Eye problems, hypertension, and arthritis are highly prevalent diseases among the elderly in Ethiopia.<sup>9</sup> The study shows that in most Sub-Saharan countries, elderly people are vulnerable to poor health as people age and have poor utilization and accessibility of health care services in their vicinity.<sup>10</sup> A recent study conducted in three regions of the country indicates that in most areas there is fair accessibility and distribution of primary health care and health centers.<sup>11</sup> The accessibility of primary health care for frail elderly people alleviates their challenges.

However, research on public health care has shown that there are some determining factors for the utilization of health care services. The main factors that limit the utilization of the services for elderly people are affordability and cost concerns as well as lack of trust in the effectiveness of modern medicine. Many people tend to utilize traditional medicine<sup>12</sup> even though the health care services are accessible in the area.<sup>13</sup> The Addis Ababa city study shows that elderly people who cannot afford the cost of health care services and cannot travel by

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<sup>9</sup> Ayele Belachew et al., "The State of Health and Aging in Ethiopia: A survey of Health Needs and Challenges of Service Provisions," HelpAge International (Addis Ababa, 2013), 26. <https://www.helpage.org/silo/files/the-state-of-health-and-ageing-in-ethiopia-the-health-needs-and-challenges-of-service-providers.pdf>.

<sup>10</sup> Yonas Biratu Terfa, Gugsu Nemera Germossa, Fikadu Balcha Hailu, Garumma Tolu Feyisa, Fikadu Taffese Jeleta, et al., "Determinants of Health Care Utilization among the Elderly Population in Jimma Town, Oromia Region, Southwest Ethiopia," (*Int Arch Nurs Health Care* 5:131. 2019), doi.org/10.23937/2469-5823/1510131.

<sup>11</sup> Abraha Woldemichael, Amirhossein Takian, Sari A. Akbari Sari, Alireza Olyaeemanesh., "Availability and Inequality in Accessibility of health Centre-Based Primary Healthcare in Ethiopia," *Journal PLoS One* 14, no.3 (2019), <https://doi.org/10.1371/journal.pone.0213896>.

<sup>12</sup> Traditional medicine was developed before scientific medicine by the indigenous people's beliefs and practices. It is different from scientific medicine. Especially, African traditional medicine is a holistic discipline that uses indigenous herbalism combined with some aspects of spirituality (Mainen Julius Moshi, Paulo Peter Mhame, in *Medicinal Plant Research in Africa*, 2013). The World Health Organization (WHO) defines 'traditional medicine' as "the sum total of the knowledge, skills, and practices based on the theories, beliefs, and experiences indigenous to different cultures, whether explicable or not, used in the maintenance of health as well as in the prevention, diagnosis, improvement or treatment of physical and mental illness."

<sup>13</sup> Belachew et al, "State of Health and Aging," 27.

themselves prefer to use traditional medicines. Traditional medicines are easily accessible and available at a reasonable cost.<sup>14</sup> Lack of money is the major reason preventing the elderly from making use of modern medical services when they feel symptoms of any diseases and illness.

In Ethiopia, there are no organized health insurance systems for their citizens. When people get sick or injured, or in cases of emergency, they go to the nearest health care centers and get treatment, but the payment is made directly by the individual. The out-of-pocket payment is not affordable for poor community groups like single mothers, elderly people, people with disabilities, and children. The story of Bogalech Zewide described in the first chapter shows how she, as a widower and an elderly woman, experienced financial constraints to get health services. Though she often feels sick, she cannot get proper health services and treatments because she cannot afford to pay the medical fees, and there is no health insurance and no financial support from her children.

Recently, Ethiopia adopted the Community-Based Health Insurance Schemes which is a strategy for developing countries. The country has applied for community-based health insurance in piloted regions to enhance the utilization of health care services, improve community health, and avoid any financial obstacles to get proper and timely services. The financial source for this program is the premium contribution of members and the government. The government covers the costs of the poorest population groups, which is about 10% of the total population of the area.<sup>15</sup>

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<sup>14</sup> Akawaki Gari, Raghavendra Yarlagadda, Messay Wolde-Mariam, “Knowledge, Attitude, Practice, and Management of Traditional Medicine Among People of Burka Jato Kebele, West Ethiopia,” *Journal of Pharmacy and Bio Allied Sciences* 7, no. 2 (2015):137, doi: 10.4103/0975-7406.148782. PMID: 25883518; PMCID: PMC4399012.

<sup>15</sup> Bekele Demisse, and Negeri Keneni Gutema, “Effect of Community-Based Health Insurance on Utilization of Outpatient Health Care Services in Southern Ethiopia: A Comparative Cross-Sectional Study Risk Managing Health Policy,” *Risk Management and Healthcare Policy* 13 (25 Feb 2020):142, doi: 10.2147/RMHP.S215836. PMID: 32158291; PMCID: PMC7049267.



However, the Community-Based Health Insurance Scheme has been implemented only in some regions of the country. As the result, a study conducted in the Southern part of Ethiopia reveals that the majority of households who utilize outpatient health care services are members of community-based health insurance. Community-based health insurance provides an opportunity for the poorest elderly people to utilize available health care services.<sup>16</sup> This indicates that having accessibility to financial means improves elderly people's utilization of health services. However, the community-based health insurance that provides a financial scheme for the poor has not yet been implemented in all regions of the country. Thus, many elderly people are still looking for a financial scheme that provides for their routine health checkups, treatments, and emergency cases.

#### Economic Status of the Elderly

The economic status of most elderly population depends on the country they live. Most elderly people who live in developed countries have a better economic status while most elderly people in developing countries live under the poverty line. In Africa, most elderly people have no basic income. However, in developed countries like the USA, elderly people are provided retirement income benefits by their government such as Social Security benefits, pensions, and income from assets.<sup>17</sup>

In Ethiopia, approximately 83 percent of the people live in rural areas and are mainly involved in agriculture.<sup>18</sup> Subsistence farming of crop production is the dominant form of

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<sup>16</sup> Demissie and Negeri, "Effect of Community-Based," 141–53.

<sup>17</sup> Emly Brandon, ed., US News. "The 4 Most Important Sources of Retirement Income," March 22, 2012, <https://money.usnews.com/money/blogs/planning-to-retire/2012/03/22/the-4-most-important-sources-of-retirement-income>.

<sup>18</sup> Susan Erb, "A Study of Older People's Livelihoods in Ethiopia," *HelpAge International and Cordaid*, 2011, 6, <https://www.helpage.org/silo/files/a-study-of-older-peoples-livelihoods-in-ethiopia.pdf>.

agricultural activity in Ethiopia. Among the elderly population of the country, most live-in rural areas. Elderly people are usually engaged in subsistence agriculture and the informal sector. They continue to work on domestic farms until they get to an advanced age. Elderly women also participate in subsistence farming especially in cash crops on the household farm. Advanced elderly people are also forced to work due to limited opportunities in income-generating activities, absence of social security, and limited resources.<sup>19</sup> Since the primary mechanism to overcome poverty among the poor people is labor income, the elderly people earn a smaller amount through labor income as their age increases.

Therefore, elderly people have limited financial and material resources. There are two causes: the first cause, mentioned in the HelpAge International study, is that access to credit services was significantly limited among the elderly in Ethiopia.<sup>20</sup> The lack of financial and material resources limited them to continue the same means of livelihood they had formerly utilized or compelled them to choose other coping strategies for survival. The second cause is that, generally, elderly people encounter physical vulnerability and age-related disorders.<sup>21</sup> Therefore, labor farming becomes nearly impossible for aged people who cannot accomplish agricultural manufacturing for their daily food.

Traditionally, in Ethiopia, elderly people primarily rely on their children when they are not able to raise income or participate in labor work. If their children are not able to fill their needs or if they are without children and family support during this time, they would look for other

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<sup>19</sup> Baru Amanti & Wonde Dereje & Jibat Nega, "Socio-Economic Situation of the Elderly in Jimma Zone, Oromia/ Ethiopia. 2407–9532," 2018, [https://www.researchgate.net/publication/331299584\\_Socio-economic\\_Situation\\_of\\_the\\_Elderly\\_in\\_Jimma\\_Zone\\_Oromia\\_Ethiopia](https://www.researchgate.net/publication/331299584_Socio-economic_Situation_of_the_Elderly_in_Jimma_Zone_Oromia_Ethiopia).

<sup>20</sup> HelpAge International, *Vulnerability of Older People in Ethiopia: The Case of Oromia, Amhara and SNNP Regional States*, 2013, <https://www.refworld.org/docid/5301dd884.html>.

<sup>21</sup> Anita M. Schwarz, "Old Age Security and Social Pensions," 2003, 2. <https://citeseerx.ist.psu.edu/viewdoc/download?doi=10.1.1.544.3696&rep=rep1&type=pdf>.

options to survive. In this situation, their coping strategies vary depending on the individual circumstances. Coping strategies include begging, employment as a guard at an individual house for very little compensation, limiting needs (skipping lunch or dinner), using damaged food and other kinds of belongings, and begging for clothes from others. Among the urban elderly, the prevalent coping strategy is begging. Groups of elderly men and women are often seen begging at the entrance of church buildings, mosques, and marketplaces. These coping strategies are socially shameful and morally painful. Many had been longing and planning to have a good life in their later years.

The Government intervention plan, through “food aid” and “safety net” programs, supports severely affected families in coping with food scarcity.<sup>22</sup> Elderly people, the physically impaired, widows, and orphans are the most severely affected households. These government programs respond to their temporary needs but do not alleviate multidimensional and basic needs like housing and food security.

Ethiopia has an inadequate elderly security arrangement for its citizens. Like most African countries, there is no universal pension system, except for a small number of the working population such as those who are working in Government enterprises and large private firms. Most elderly people rely on their families for support when they can no longer engage in strenuous agricultural work.<sup>23</sup> One of the Ethiopian anthropologists suggests, “For the vast majority of elderly in Ethiopia, their pension systems are their children.”<sup>24</sup> Their children are

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<sup>22</sup> Getachew S Endris, Paul Kibwika, Bernard B. Obaa, et al., “How Social Capital Can Inform Targeting Formal Social Safety Net Interventions in Vulnerable Communities in Eastern Ethiopia: an Ethnographic Case Study,” *Journal of International Humanitarian Action* 5, no.10 (2020). <https://doi.org/10.1186/s41018-020-00075-3>.

<sup>23</sup> Monik Rebala, “In Ethiopia, the Elderly Get New Help from an Old Tool,” Addis Ababa, Ethiopia, (2016). <https://www.csmonitor.com/World/Africa/2016/1229/In-Ethiopia-the-elderly-get-new-help-from-an-old-tool>.

<sup>24</sup> Monik Rebala, Ethiopia.

expected to support them in all ways during their later years. However, the absence of public pensions in Ethiopia and the decline of family support puts the well-being of the elderly at risk.<sup>25</sup>

Furthermore, the HIV/AIDS pandemic has also worsened the life of the elderly. Sub-Saharan Africa is considered a center for the HIV/ AIDS pandemic because more than 60 percent of all people living with HIV are in sub-Saharan Africa. HIV/AIDS affected the majority of working-aged adults and has left thousands of children without parents. Elderly people are affected by the death of their adult children. When they faced the loss of their children, they would experience a loss of the main source of support and care for themselves. Also, many elderly people are forced to care for grandchildren and other orphaned children of their extended families.<sup>26</sup> They face huge financial burdens and shortages in caring for orphaned grandchildren and themselves.

### Social Status of the Elderly

African traditional societies are described as living in communalism. Sunday Awoniyi explains, “communalism is expressed in the sharing of a common social life, commitment to the social or common good of the community, appreciation of mutual obligations, caring for others, interdependence, and solidarity.”<sup>27</sup> In this communal society, family is an important component of the social support network. In Ethiopia, like other African countries, traditional family members are not only husband, wife, and children but include grandparents, grandchildren, uncles, aunts, in-laws, and all extended family. Households consist of members of the extended

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<sup>25</sup> M.G. Kotecho and M.E. Adamek, “Providing Long Term Care in a Developing Nation: The Case of Kaliti Care Center in Ethiopia,” *The Gerontologist* 56, Issue 3, (November 2016): 414. <https://doi.org/10.1093/geront/gnw162.1655>.

<sup>26</sup> Cohen and Menken, “Aging.”

<sup>27</sup> Sunday Awoniyi, “African Cultural Values: The Past, Present and Future.” *Journal of Sustainable Development in Africa* 17, no. 1 (2015): 1–13. <https://jsd-africa.com/Jsda/V17No1-Spr15A/PDF/African%20Cultural%20Values.Sunday%20Owoniya.pdf>.

family, not just the nuclear family. The communal aspects of living strengthen the relationships between the elderly family members and young members of the family. The young community values the elderly and respects, honors, and listens to them.

Like most African countries, in Ethiopia wisdom is associated with old age. Elderly people are viewed as a source of information and wisdom. As a result, elderly people are expected to share with the communities the wisdom they have gained through life experiences.<sup>28</sup> Their advice and counsel in social issues, cultural, economic, moral, spiritual, and political issues are welcomed with respect.

In Ethiopia, the perspective and practice of respecting and honoring elderly people is connected to the indigenous African traditions that offer indebtedness and honor for ancestors. Velaphi Bhedlindaba Mkhize, an African healer/spiritualist, explains that African people attach the honor given to the elderly with the honor given to ancestors. Ancestors are important for most Africans because families and communities are shaped by those who have gone before. It is believed that if they are not humble before the ancestors' will and guidance, their wrath will affect them and their children. Therefore, they strive to respect their ancestors.<sup>29</sup> The tradition of honoring the elderly came from the practice of honoring the senior ancestors because elderly people are closer in age to their ancestors than anyone else.

The practice of honoring the elderly creates a positive impact on the status of the elderly. They are given the opportunity to dominate the extended family through the ownership of property and they have the authority to determine spouses for younger generations.<sup>30</sup> In the past,

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<sup>28</sup> Cohen & Menken, "Aging."

<sup>29</sup> *Velaphi Bhedlindaba Mkhize*, "African Ancestors," 2021, <https://www.southafrica.net/za/en/travel/article/african-ancestors>.

<sup>30</sup> Geography, "Age and Aging," accessed April 1, 2021, <https://geography.name/age-and-aging/>.

it was common for young people to show respect for the elderly in practical ways, including giving up their seat, giving priority to them in any services, keeping their voice down while chatting with them, actively listening to them, and the like.

However, currently, the traditional position given to the elderly in the family and communities is diminishing due to societal changes associated with development and modernization. Ayana states

Contemporary society wrestles with who will take care of the elderly mainly because in recent times there has been a disruption in the reciprocal relationship between parents and children. There are many explanations for this. For example, in developing societies such as Ethiopia, many of the traditional family patterns are breaking down. Sometimes children are unable to look after elderly people due to their desire for education, due to internal migration or external immigration, working conditions, and the hunt for better living, which might make them neglect elderly people.<sup>31</sup>

The decline of traditional family patterns of care for the elderly exposes them to unprecedented situations. Ayana's study reveals that urbanization, migration, children's pursuit for better jobs, and further education affect traditional patterns of care for frail elderly people. As a result of these, basic needs like food, shelter, health service, loneliness, and depression are major problems elderly people are facing in Ethiopia.<sup>32</sup> Not only do they lack material provision, but they also lack appropriate emotional and psychological support.

In Ethiopia, loneliness is becoming an additional factor for elderly people amid these changes to traditional patterns of care. Elderly loneliness becomes worse because of migration and the economic and social demands of contemporary society. As a result of this, children live far away from their parents, so that they may not see each other regularly. This makes parents feel isolated from their children.

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<sup>31</sup> Ayana, "Who Takes Care," 1.

<sup>32</sup> Ayana, "Who Takes Care," ii.

Loneliness is a painful feeling when it occurs in any person, but it is prevalent in elderly people. Loneliness does not only refer to the physical isolation of an individual from others but also when a person's ideas, needs, and contributions are overlooked by others. Weiss, cited by Zaida de Aguiar Sá Azeredo, states that "loneliness is not caused by being alone, but by not having relationships where a person is needed, thus creating an unpleasant feeling of emptiness."<sup>33</sup> Causes of elderly loneliness differ from one individual to another. In Ethiopia, the main factors that lead elderly people to feel loneliness are the death of a spouse, their children moving away physically and then not looking after their parents, the loss of the indigenous tradition to which they belong, the loss of their group and friends due to their declining health, the fear of becoming a burden on others, and the loss of their previous position in the family, such as making decisions in various matters. The Ethiopian indigenous culture provided physical and social support for elderly people. It is gradually declining at this time, but elderly people are still expecting those communal social interactions. Experts suggest that loneliness arises, "when there is a perceived deficit or dissatisfaction of the quality or the number of social interactions. It is the perceived gap between the expected and the actual social relations that account for loneliness."<sup>34</sup> There is a gap between elderly people's expectations and the current reality of the family system and way of life in Ethiopia. This has caused them to experience loneliness in their later years.

The elderly person's loneliness and pain might not be understood by others. It is mainly an individual's personal experience that is only sometimes revealed by physical problems. My own

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<sup>33</sup> Zaida de Aguiar Sá Azeredo, "Loneliness from the Perspective of the Elderly," 2016, <https://www.scielo.br/j/rbagg/a/shGrnPPJKBjYwf3rQCM8skM/?lang=en&format=pdf>.

<sup>34</sup> Ami Rokach, *Correlates of Loneliness*. ([Place of publication not identified]: Bentham Science, 2016). <http://search.ebscohost.com.esl.idm.oclc.org/login.aspx?direct=true&db=nlebk&AN=1511867&site=ehost-live>.

mother suffers from this loneliness and pain. She is 66 years old, and my father died 23 years ago. She grew up in a Christian family. She loves her Savior Jesus Christ and loves sharing her faith with her friends. She has been voluntarily serving her local congregation (Dilla Congregation) in the choir team, prayer team, and Diakonia team. I recognized that my mom had some painful feelings of loneliness, as I had been living with her until I got married. She had several experiences of loneliness. When my father passed away, she experienced loneliness in the responsibility to raise her ten children. Later, she again experienced loneliness when all her children left our home and country in pursuit of jobs, education, and marriage. In response, she engaged herself with church ministry and other social interactions. Yet currently, she has also a feeling of loneliness. A year ago, as she has been staying home by herself, she became paralyzed through hemiparesis. After a couple of months, she could walk with support, but she could not participate and serve in her previous ministries. She is still eager to continue active social interactions with the Christian community as well as the neighborhood, but she is unable to participate in the ministry. The feeling of frustration of her situation leads her to feel lonely and think that as she is becoming a burden on others. Thus, my mother serves as an example of the social status of the elderly in Ethiopia, the social expectations of the elderly, and the consequences of migration on the care for the elderly.

### Spiritual Status of the Elderly

Ethiopia is a country with many religions. Christianity is the predominant religion of the country. The Christian population makes up 62.8% of the Ethiopian population. The second largest group is Islam which makes up 33.9% of the Ethiopian population. The remaining



percentage consists of traditional faiths, Jewish, and others.<sup>35</sup> Religion is influential in the everyday life of people in Ethiopia. According to a Pew Research Center Survey, religion is more important to people in developing countries than in developed countries. This survey also revealed that the number of adults who consider religion to be important in their lives is very high in Africa. In Europe, only 23% of the survey respondents consider religion as important to their daily lives. In contrast, in Sub-Saharan Africa, adult respondents of the study who consider religion very important in their daily lives ranging from a high of 98% in Ethiopia to a low of 71% in Botswana.<sup>36</sup> Almost all Ethiopian people place religion as a high priority in their day-to-day lives.

In Ethiopia, as well as in many parts of Africa, most people are religious and associate everything in their lives with spiritual aspects. Their worldview and perspectives are shaped by their religious thought. Sunday Awoniyi says

There is no community or nation in existence to which religion has not formed the basis of her life. There has always been a sense of belonging to God in Africa, as well as the basic belief that this world is God's world. In Africa, the belief is that God created the world and the whole affairs of the world are under his unitary control. African belief is that society is thus an ordinance of God, and every institution within society is therefore basically religious.<sup>37</sup>

In Ethiopia, most people celebrate many religious ceremonies and customs. For example, the Ethiopian Orthodox Church has arranged many days of worship, prayer, and fasting throughout the year. There are compulsory fasting days for members are approximately 250 days

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<sup>35</sup> "Wikipedia: Religion in Ethiopia," Wikipedia Foundation, last edited on 22 March 2021, at 07:09, [https://en.wikipedia.org/wiki/Religion\\_in\\_Ethiopia](https://en.wikipedia.org/wiki/Religion_in_Ethiopia).

<sup>36</sup> Pew Research Center, *The Age Gap in Religion around the World*, last modified, June 13, 2018, accessed March 23, 2021, <https://www.pewforum.org/2018/06/13/how-religious-commitment-varies-by-country-among-people-of-all-ages/>. Also, the subsequent claims and statistics in this paragraph are drawn from the same source.

<sup>37</sup> Sunday Awoniyi, "African Cultural Values: The Past, Present and Future, *Journal of Sustainable Development in Africa* 17, no.1, (2015): 4, <http://www.jsd-africa.com/Jsda/V17No1-Spr15A/PDF/African%20Cultural%20Values.Sunday%20Owoniya.pdf>.

of fasting a year. Some of the official fasting periods are Wednesday and Fridays, the Lenten fast, the Nineveh, the vigils or gahad of Christmas and Epiphany, the fast of the apostles, and the fast of the prophets.<sup>38</sup> During these prayer and fasting seasons, many people go to church for morning and evening services. The majority of them are elderly women and men. Prayer by the church and by the individual is an important part of worship. A faithful person prays seven times a day. Morning and evening prayers are done at the church and daytime and nighttime prayers are done in their homes. Regular attendance is expected unless the member is ill. If a member of the congregation does not show up at the prayer services of the church for a long time, he/she would be considered as not a member of the congregation. The church encourages anyone who is sick to attend the prayer service so that they may be healed. An individual's devotion is exhibited by his/her attendance at the church prayer and fast services.<sup>39</sup> Thus, as people age, they prefer to attend all the spiritual services available to them.

Furthermore, most days of a month are holy days that relate to events or the persons of Christ, Mary, the disciples, and the angels. Nine major and nine minor holy days are observed in the Ethiopian Orthodox Church. Many feast days are celebrated monthly. About thirty-three holy days are devoted to Mary, as the Church has respect for the Virgin Mary.<sup>40</sup> As many church ceremonies and feast days are available, members are actively devoted to being involved in the worship. While the younger generation attend less regularly due to their workday occupations, elderly people have more time to be involved in ceremonials and worship services.

In the same way, the Protestant churches in Ethiopia have worship services on most days of

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<sup>38</sup> Sergew Hable Sellassie and Belaynesh Mikae, "Worship in the Ethiopian Orthodox Church," <https://www.ethiopianorthodox.org/english/ethiopian/worship.html>.

<sup>39</sup> Sellassie, and Mikae, "Worship,".

<sup>40</sup> Sellassie, and Mikae, "Worship,".

each month and major annual holy days related to Christ's work, such as Christmas and Easter. The Ethiopian Evangelical Church Mekane Yesus congregations provide different kinds of worship services every week. Sunday worship services are common for all congregations, but every congregation also offers various services and programs during the week. For example, at my local congregation, a variety of services are provided for members such as Sunday worship, morning prayers, youth worship services, Bible study group sessions, women's Bible study, and children's Sunday school. In worship services and prayer meetings, everyone can attend and have fellowship with Christian sisters and brothers. In my observation during my stay with the congregation, elderly women were the majority in prayer meetings and diaconal ministry teams. This is a place where they bring their worries to God and share their burdens with their friends. Commonly, as people age, they need more care and more physical, emotional, and psychological support.

At present, many elderly people are looking to find support and cope with life. Studies show that the elderly involve religion in coping with life's hardships however faith is not a way of coping with life.<sup>41</sup> According to the survey studying the coping strategies that the elderly used to deal with the most terrible events, turning to their religion got a higher rating than seeking support from family, friends, and professional help.<sup>42</sup> As most elderly people in Ethiopia are of low socioeconomic status, sometimes religion plays a role in coping with their physical,

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<sup>41</sup> Religion's greatest goal is not to help people to cope with physical need but helps to know the meaning of the life and their creator. Faith helps people to come to Christ and have eternal life. As people suffer from many problems in earthly life, they see the hope of resurrection and life after death and have comfort and satisfaction through suffering. Paul writes "Our suffering is light and temporary and is producing for us an eternal glory that is greater than anything we can imagine. We don't look for things that can be seen but for things that can't be seen. Things that can be seen are only temporary. But things that can't be seen last forever" (2 Cor. 4:17).

<sup>42</sup> Kenneth I Pargament, Kimberly S Van Haitsma, David S. Ensing, "Religion and Coping, in Aging Spirituality, and Religion," in *Aging, Spirituality, and Religion: A Handbook*, ed. Ellor, James J., Melvin A. Kimble, and Susan H. McFadden (Minneapolis: Fortress, 1995), 1:52.

emotional, and psychological challenges. They often attend religious services. They commit themselves to perform other religious practices such as prayers, fasting, reading religious books, and performing the rituals of their respective religions. These practices play a role in altering the emotional and physical health process and outcomes of elderly people.

## **The Status of Care System for the Elderly People in Ethiopia**

### **Elderly Care in the Traditional Family**

The traditions of many African communities guide their day-to-day life. Every member of the society serves and honors the norms and values of the society. There are some cultural values and norms that guide and shape every member of the society—such as hospitality, respect for elderly people, chastity before marriage, truth, covenant-keeping, hard work, and good character.<sup>43</sup> Traditionally, elderly people have a role as advice-givers to the younger generation, directing and leading their families and societies in traditional practices, rituals, and ceremonies. They have a responsibility to keep the survival, existence, and continuity of the values and norms of the societies.<sup>44</sup> The values and norms are culturally bound with the society. Thus, everyone is expected to serve and honor to maintain harmony with the community and for societal solidarity.

Ethiopia, like many African countries, has an oral tradition that passes on information about customs, myths, beliefs, and history to each new generation. The information is passed down through storytelling, proverbs, and songs by word of mouth.<sup>45</sup> The values and norms of the community expressed in proverbs and stories keep the tradition alive for the next generation. For

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<sup>43</sup> Awoniyi, Sunday, “African Cultural Values.”

<sup>44</sup> Tavengwa M Nhongo, “The Changing Role of Older People in African Households and the Impact of Aging on African Family Structures,” Paper presented at HelpAge International’s Regional Representative for Africa. The Ageing in Africa Conference, Johannesburg, 18th to 20th August 2004, [http://archive.kubatana.net/docs/hivaid/helpage\\_impact\\_of\\_ageing\\_0408.pdf](http://archive.kubatana.net/docs/hivaid/helpage_impact_of_ageing_0408.pdf).

<sup>45</sup> “Geography”, Oral Tradition, accessed March 20, 2021, <https://geography.name/oral-tradition/>.

example, there is a popular saying in Ethiopia and other African countries regarding honoring and caring for elderly people: “*Kibir learegawiiian alemesitet yehibreteseb widiket mejemeria newu.*” which means, “Failing to respect and care for elderly is the sign of societal failure.” One of the African proverbs is, “To neglect one’s ancestors would bring ill-fortune and failure in life.”<sup>46</sup> African proverbs and stories signify the values and norms of the community that respects the elderly.

Culturally, Africans believe this and communicate these values to the younger generations through their daily interactions. Anyone who does not follow and live according to the cultural values and norms of the community would not be regarded as a part of that community. These cultural values and norms also ensure that the elderly are treated with care by their families and the community. Caring for elderly parents is mainly the responsibility of their children.

People need care as they age and caring requires the physical and the emotional work of caregiving. Francesca M. Cancian, and Stacey J. Oliner define caring as the “feeling of affection and responsibility combined with actions that provide responsively for an individual’s personal needs or wellbeing, in face-to-face relationships.”<sup>47</sup> Care can involve directly caring for a person, such as feeding and bathing a frail elderly person, taking them for walks, talking to them, and indirect caring, which includes things like preparing meals, shopping, cleaning sheets and clothes. In other words, care is the process of looking after somebody who cannot successfully take care of himself.<sup>48</sup>

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<sup>46</sup> Safari Junkie, “African Proverbs,” accessed March 23, 2021, <https://safarijunkie.com/culture/african-proverbs/>.

<sup>47</sup> Francesca M. Cancian, Stacey J. Oliner, *Caring and Gender* (Lanham, CA: Rowman & Littlefield, 1999), 2. <https://play.google.com/books/reader?id=FcczAAAAQBAJ&hl=en&pg=GBS.PA1>.

<sup>48</sup> Razavi Shahra, “The Political and Social Economy of Care in a Development Context Conceptual Issues, Research Questions and Policy Options,” Researchgate, (January 2007), accessed March 25, 2021, [https://www.researchgate.net/publication/237432821\\_The\\_Political\\_and\\_Social\\_Economy\\_of\\_Care\\_in\\_a\\_Develop](https://www.researchgate.net/publication/237432821_The_Political_and_Social_Economy_of_Care_in_a_Develop)

In the communal society, the family offers emotional and physical support for frail elderly family members. Family caregivers have a feeling of affection and responsibility to support the elderly in the family. They share the same values and norms. Tradition requires parents to care for their children until they are economically independent and get married. Reciprocally, children care for their parents during their later age.<sup>49</sup> The care provided by children, families, kin, and community comes from the love and affection which they share as a family and community. Women especially are the primary caregivers for the frail elderly. Traditionally, wives, daughters, and daughters-in-law have been the primary family caregivers for the elderly.

The studies which have been done in Ethiopia show that elderly people are becoming more dependent on their families because of the multidimensional nature of poverty. Children and families have a moral responsibility to help the elderly people in their families.<sup>50</sup> The nature of this care depends on the existing situation of elderly people. Elderly people who have children are primarily supported by their children. Elderly people who had no child or relative are supported by the community, such as neighbors, religious community, and other communities.

In the rural areas of the country, community-based associations are another supporting system for the community. These associations are initiated and run by the local people without the influence of government bodies. It involves all types of community members regardless of gender, tribe, and age. These community-based associations do not demand high financial and administrative knowledge and skills. They are not too intricate for local people to run. The poor

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ment\_Context\_Conceptual\_Issues\_Research\_Questions\_and\_Policy\_Options.

<sup>49</sup> Ayana, "Who Takes Care," 1.

<sup>50</sup> HelpAge International, "Vulnerability of Older People in Ethiopia: The case of Oromia, Amhara and SNNP Regional States," Addis Ababa (2013,) 52. accessed March 4, 2021, <https://www.refworld.org/docid/5301dd884.html>.

and frail elderly people have especially benefited from them.<sup>51</sup> These traditional associations are intended to give financial, social, emotional, and material support to the members. Idir<sup>52</sup> is one such association founded by members of the community to raise funds that will be utilized when death and emergencies occur within these groups and their families. It is a long-time association and is widely practiced among Ethiopians. The main role of Idir is organizing funeral events, comforting those who lost their loved ones, providing financial support, staying day and night with bereaved families, sharing food, and caring for visitors.<sup>53</sup> Idir functions as informal community-based life insurance which has a large membership; the monthly membership is usually affordable for all members. The minimal membership contribution shows the consideration of people with a low income. The main purpose of this association is to provide financial, social, and emotional support when death occurs in the family.

Idir has existed for some time in Ethiopia. Alula Pankhurst states, “Idir’s funeral associations emerged in the early part of the 20th century in Addis Ababa in a context of migration and urbanization where former ties based on kinship and family were weakened and new forms of association were required to enable migrants to deal with the challenges of modernization.”<sup>54</sup> During the early years, the main purpose was to help neighbors when family members die, organize funerals, and comfort those who were grieving. However, because the

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<sup>51</sup> Silesehi Tessera Bezabhi, “The Role of Traditional Local Institutions to Improve the Livelihood of Rural Community: The case of Tachgayint Wereda, ANRS,” (Master’s Thesis, Addis Ababa University, 2006), 17. <http://africanphilanthropy.issuelab.org/resources/20238/20238.pdf>.

<sup>52</sup> Idir is an indigenous voluntarily organized association in Ethiopia. It is established based on the mutual agreement and harmony of community members to collaborate whenever an unfavorable situation happens in any member of their village. The main duty of the association is to organize funerals for the members and their families and provide comfort for grieving families.

<sup>53</sup> Bezabhi, “Role,” 16.

<sup>54</sup> Alula, Pankhurst, “The Emergence, Evolution and Transformations of Idir Funeral Associations in Urban Ethiopia,” *Journal of Ethiopian Studies* 41, no. 1/2 (2008): 175, <http://www.jstor.org/stable/41967613>.

number of elderly people is increasing and family support is declining, elderly people are more and more left on their own. Thus, Idir has started to serve an additional purpose in helping elderly residents in their daily lives, such as buying foods, accompanying them to get them to the hospital, and helping them pay their monthly Idir fees.<sup>55</sup>

In the absence of family support, the Idir is serving as a social network. Usually, Idir members are neighbors who know each other; they are like a family knowing when someone needs help.<sup>56</sup> As the demand from the members rises and broadens, Idir is addressing the new issues to support poor and frail elderly people among them. A study by Sileshhi Tessera shows Idir also reimburses losses a member might incur, especially losses due to theft. In the rural areas of the country, Idir compensates for the accidental death of oxen, assists with reconstruction fees for houses that have been burned, reconstructs a house burned, and maintains houses for the elderly and disabled members of the association.<sup>57</sup>

### Institutional Care for the Elderly in Ethiopia

In recent years, the challenges faced by elderly people have become more publicly visible, demonstrated in the increased number of elderly beggars in urban areas. The Ethiopian National Government has taken action regarding elderly street people, establishing elderly care associations and enabling humanitarian and charity associations to provide quality of life services for the elderly people in institutional settings.<sup>58</sup> Among these few institutions,

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<sup>55</sup> Monika Rebala, "In Ethiopia, the Elderly Get New Help from an Old Tool," *The Christian Science Monitor*, Addis Ababa, (December 29 2016) accessed March 31, 2021, <https://www.csmonitor.com/World/Africa/2016/1229/In-Ethiopia-the-elderly-get-new-help-from-an-old-tool#:~:text=Established%20around%20100%20years%20ago,and%20provide%20solace%20in%20grieving.>

<sup>56</sup> Rebala, Monika, "Ethiopia."

<sup>57</sup> Bezabhi, "Role of Traditional," 17.

<sup>58</sup> Tewodros Habtegiorgis, Zikarge, "Life after Life: An Assessment of Elderly Institutional Care in Addis Ababa City (in Particular Reference to Mekedonia Home for the Elderly and Mentally Disabled)," *Global Journal of*



Mekedonia Home for the Elderly and Mentally Disabled (MHEMD) is a humanitarian and charity institution, and Kaliti Institutional Care Center for the Elderly (KICCE) is a governmental institution administered by the Addis Ababa Bureau of Labor and Social Affairs.<sup>59</sup> Makedonia Home for the Elderly and Mentally Disabled (MHEMD) was established in 2010; the main purpose of the institution is to give full residential support for elderly people who were beggars and for mentally disabled people. The institution started working in the capital city where many elderly people were found on the street without any care and support. The institution provides shelter, clothing, food, health and sanitation, and basic services.<sup>60</sup>

According to Ethiopian traditional orientation, residing in an institutional care center is not desirable. The study on institutional care centers of Ethiopia shows that elderly people want to be with their families and community during their later years. However, the decline of family and community help is pushing them to institutional care and other coping mechanisms.<sup>61</sup>

Surveys conducted in one of the government-sponsored institutions called Kaliti Institutional Care Center for the Elderly identify two shortcomings: first, the challenges of the institution in giving quality services, and secondly, the dissatisfaction of service recipients from institutional care services. According to M.G. Kotecho, and M.E. Adamek, surveys have found untrained caregivers, no recreational facilities, inaccessible buildings for physically disabled and visually impaired residents, and a shortage of funding and material resources. However,

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*Human-Social Science: Sociology & Culture*, 17, Issue 1 (2017):41.

[https://www.researchgate.net/publication/341946006\\_Life\\_after\\_Life\\_An\\_Assessment\\_of\\_Elderly\\_Institutional\\_Care\\_in\\_Addis\\_Ababa\\_City\\_in\\_Particular\\_Reference\\_to\\_Mekedonia\\_Home\\_for\\_the\\_Elderly\\_and\\_Mentally\\_Disabled](https://www.researchgate.net/publication/341946006_Life_after_Life_An_Assessment_of_Elderly_Institutional_Care_in_Addis_Ababa_City_in_Particular_Reference_to_Mekedonia_Home_for_the_Elderly_and_Mentally_Disabled)

<sup>59</sup> Kotecho and Adamek, "Providing Long Term Care," 414.

<sup>60</sup> Zikarge, "Life after Life,"

<sup>61</sup> Segniwork Lemma, "Experiences and Practices of Old Age Home Care and Support to the Elderly Living in the Institutions: Assessment at Three Selected Institutions in Addis Ababa," (Master's Thesis, Addis Ababa University, Ethiopia, 2014), 50,

<http://213.55.95.56/bitstream/handle/123456789/2434/Segniwork%20Lemma.pdf?sequence=1&isAllowed=y>.

there are small-scale changes in the physical and social life of residents as the institution is striving to provide a higher quality life for the elderly.<sup>62</sup>

Secondly, research indicates that some of the recipients of the services are dissatisfied with institutional care services. The institutional care system limits the resident's freedom to have social interaction with the families and community at large. Having limited social interaction in the institution and detachment from traditional family life has made a negative impact on their emotional wellbeing. They feel hopelessness, despair, guilt and depression, and other psychological problems. They would prefer to be supported by their families rather than any external means like institutional care; they feel the disappointment of staying in institutional care, thinking that they are abandoned by their families and community.<sup>63</sup>

However, research by Segniwork also reveals that many residents value living in the institution, especially those who came from the street or were homeless. These residents are satisfied with the services provided by the institution. Compared to their previous living arrangement in the streets, these elderly people are satisfied with the basic services provided at the institutions.<sup>64</sup> However, for elderly people as a whole, living with their family, supported by their children and extended families, is the most enjoyable and comfortable living arrangement.

### **Factors that Affect the Traditional Elderly Care System**

The multifaceted growth and technological advancements of the twentieth and twenty-first centuries have shaped our world for good and ill. On the one hand, this development has produced opportunities and made life easier. On the other hand, it has affected social ties and

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<sup>62</sup> Kotecho, and Adamek, "Providing Long Term Care," 414.

<sup>63</sup> Lemma, "Experiences," 7.

<sup>64</sup> Lemma, "Experiences," 54.

traditional lifestyles. Globalization has impacted traditional lifestyle and social lineage bonds while promoting individualism. Its impact has spread across the world, including the developing world. Globalization is a broad concept, defined in different studies in different ways. Specific to this project Alison I. Griffith defines globalization as "...a set of processes that tend to de-territorialize important economic, social, and cultural practices from their traditional boundaries in the nation."<sup>65</sup> Due to globalization, African indigenous traditions and cultures are fading over time and shifting to modern systems of society, economy, and technology. As Dama Mosweunyane asserts, "The African continent is part of the 'global village' and cannot in its current economic, social, and political situation afford to function in isolation. This means the technological advancement that is so far realized will remain attractive to Africans, which will further compound the problem of indigenization."<sup>66</sup> The continent cannot avoid the negative implications of globalization, even as it benefits from the positive.

As an effect of globalization, it is not unusual to see mobile phones and satellite dishes in remote areas of Africa and in villages and households where there are not even electric sources. This exposure and access to information have made an impact on the young generation by dragging a generation from their ancestor's village and dispatching them to unknown ends. It has brought societal changes and paradigm shifts in the lifestyle of society. These changes have directly impacted the status of the elderly in Ethiopia. Societal changes especially have challenged the traditional importance of the family role in caring for its elderly members.<sup>67</sup>

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<sup>65</sup> Alison I. Griffith, "Globalization, Culture and Education in the New Millennium," *Canadian Journal of Education / Revue Canadienne De L'éducation* 28, no. 3 (2005): 569, accessed April 6, 2021, [https://www-jstor-org.csli.idm.oclc.org/stable/4126490?seq=1#metadata\\_info\\_tab\\_contents](https://www-jstor-org.csli.idm.oclc.org/stable/4126490?seq=1#metadata_info_tab_contents).

<sup>66</sup> Dama Mosweunyane, "The African Educational Evolution: From Traditional Training to Formal Education," *Higher Education Studies* 3, no. 4 (July 18, 2013): 51, URL: <http://dx.doi.org/10.5539/hes.v3n4p50>.

<sup>67</sup> Sapp, *Full of Years*, 39.

Ethiopia is one of the countries affected by these changes. As members of society are introduced to new technologies, they are influenced to leave the previous way of life. In recent years, in sub-Saharan Africa, profound economic and social changes have challenged the traditional family ties that care for and support the elderly. B. Cohen and J. Menken state

Changes associated with development and modernization can, however, combine to weaken traditional social values and networks that stress the important role of older people in society and that reinforce traditions of intergenerational exchange and reciprocity. These changes include increasing formal education and the migration of young people from rural to urban areas, leaving older family members behind.<sup>68</sup>

Also, migration as an outcome of globalization has dragged generations from remote areas to urban areas and across the globe. This has led to significant societal changes in Ethiopia. These societal changes have severely affected the social, economic, health, and emotional status of elderly people. Likewise, the effect of HIV/AIDS has caused a societal change that has exposed unexpected disasters in the social, economic, and physical wellbeing of Ethiopians. All of this will be explored further in the next section, with specific attention to the effect on the traditional family care systems for the elderly.

### Effect of Migration on the Elderly

Migration is a worldwide phenomenon.<sup>69</sup> The reasons for and effects of migration vary, influenced especially by the duration and destination of the movement. The International Organization for Migration (IOM) defines the term migration as “the movement of persons away from their place of usual residence, either across an international border or within a State.”<sup>70</sup>

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<sup>68</sup> Cohen and Menken, “Aging.”

<sup>69</sup> Christine Lagarde, “Migration: A Global Issue in Need of a Global Solution,” IMF (blog), International Monetary Fund, November 11, 2015, accessed 26, 2021, <https://blogs.imf.org/2015/11/11/migration-a-global-issue-in-need-of-a-global-solution/>.

<sup>70</sup> International Organization for Migration, “Glossary on migration,” IML Series No. 34, 2019, accessed March 28, 2021, [https://publications.iom.int/system/files/pdf/iml\\_34\\_glossary.pdf](https://publications.iom.int/system/files/pdf/iml_34_glossary.pdf).

In Africa, the patterns of migration vary and have various economic, social, and political dimensions. Even though migration is a common event for the entire world, Africans have been experiencing it daily. “Historically, migration has been a way of life in Africa. Over the generations, African people have migrated in response to demographic, economic, political, and other factors, including environmental disasters and conflicts.”<sup>71</sup> As a poor continent, Africa’s main cause of migration is due to people reacting to negative events in their vicinity.

In Ethiopia, like other African countries, both internal migration (within the country) and external migration (international) are noticeably increasing. According to G. Adugna, research demonstrates the significant effect of migration on Ethiopia. The last two decades brought high-level international migration numbers and a complicated migration system.<sup>72</sup> Due to the absence of a collected and organized data system on Ethiopian immigrants, the number of Ethiopian migrants across the border is not known. Massive numbers of migrants migrate through illegal migration channels to the Gulf Cooperation Council States, Europe, and South Africa for economic reasons.<sup>73</sup> For instance, since 2017, a minimum of 400,000 Ethiopians have migrated to the Arab Peninsula.<sup>74</sup>

Most people in Ethiopia who seek to migrate are pushed by some circumstances in the country. Some of the factors are significant: war, poverty, and persecution. Other factors also

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<sup>71</sup> Migration - Africa - Internal Migration, Immigration into Africa, Emigration from Africa, Explaining African Migration, Biography and Conclusion, accessed 6/14/202. <https://science.jrank.org/pages/7866/Migration-Africa.html#ixzz6po4wJ33Y>.

<sup>72</sup> Girmachew, Adugna, “Migration Patterns and Emigrants’ Transnational Activities: Comparative Findings from Two Migrant Origin Areas in Ethiopia,” *Comparative Migration Studies* 7, no. 5 (2019), accessed March 29, 2021, <https://doi.org/10.1186/s40878-018-0107-1>.

<sup>73</sup> International Labor Organization, “Addressing the Root Causes of Migration in Ethiopia, Ethiopia, 2020,” accessed March 28, 2021, [https://www.ilo.org/africa/technical-cooperation/WCMS\\_554065/lang--en/index.htm](https://www.ilo.org/africa/technical-cooperation/WCMS_554065/lang--en/index.htm).

<sup>74</sup> Info Migrants, “Ethiopian Migrants to Gulf Unaware of Dangers – IOM, ANSA,” 2020, accessed March 28, <https://www.infomigrants.net/en/post/25016/ethiopian-migrants-to-gulf-unaware-of-dangers-iom>.

contribute to migration in Ethiopia, including marriage, better jobs, and the opportunity to pursue further academic studies.<sup>75</sup> However, inadequate livelihood and unemployment are identified as the main driving forces for local and cross-border migrations.

Consequently, a massive number of women migrate to the Middle East to improve their livelihood. For young women who are especially from rural areas, migration to the Middle East provides economic gain as well as social freedom. According to a study by Kerilyn Schewe, women leave to the Middle East to change their economic and social circumstances, which are difficult in rural life. They want economic gain to support their family and to feel independent in their life, as the traditional culture does not give them freedom in society.<sup>76</sup> The main intention that drives them is to raise capital in a foreign country that enables them to be financially self-reliant, independent, and to support their family.

Even though some migrants provide financial support to their elderly families who are left behind, the impacts of migration on the life of the elderly in Ethiopia go beyond economic gain and wellbeing. Most migrants who left their elderly parents behind were responsible to care for their emotional and psychological needs. When they leave the rural area or the country, the elderly people are left without a caregiver. Culturally, women are responsible for caring for children and elderly people in the family by feeding, bathing, doing laundry, and spending time with them.<sup>77</sup> These roles are considered as women's roles; men can take over only in the absence

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<sup>75</sup> International Labor Organization, "Addressing Root Causes,".

<sup>76</sup> Kerilyn Schewel, "Why Ethiopian Women Go to the Middle East: An Aspiration-Capability Analysis of Migration Decision-Making," *International Migration Institute*, working papers 148, (December 2018), accessed March 30, 2021, <https://www.migrationinstitute.org/publications/why-some-young-women-migrate-to-the-middle-east-an-aspiration-capability-analysis-of-migration-decision-making-in-ethiopia>.

<sup>77</sup> Schatz, Enid, and Janet Seeley. "Gender, Ageing and Care Work in East and Southern Africa: A Review." *Global Public Health* 10, no. 10 (2015): 1185–200. [https://www.researchgate.net/publication/276071560\\_Gender\\_ageing\\_carework\\_in\\_East\\_and\\_Southern\\_Africa\\_A\\_review](https://www.researchgate.net/publication/276071560_Gender_ageing_carework_in_East_and_Southern_Africa_A_review).

of women in the family. As thousands of young women are leaving family behind and moving into urban areas and across the border, many elderly people are left without proper care.

Hence, the impact on older age parents of the migration of adult children from rural areas is significant. Rural people migrate to urban areas or to other countries in search of work, to earn income, or to support their families back home. This trend has increased in recent years. Some studies conducted in Ethiopia contend that migration generally does contribute positively to the economic well-being of migrant families. The remittances improve the living standard and assets of migrant families.<sup>78</sup> On the contrary, other research undertaken maintains that migration to the Middle East and South Africa does not improve the household well-being of migrant families. Most families who have migrant members in the Middle East have no significantly different standard of living from others.<sup>79</sup> Because most migrants work as a housemaid in the Middle East with low wages that would not be sufficient to support the extended families. However, most migrants who work a professional job and better job financial support their families back home. As Bogalech Zewudu's case study shows, her two daughters have gone to the Middle East to work as housemaids.<sup>80</sup> From the time that they left, nothing has been heard of them. These can be due to poor access to phones and other incidents to them. Consequently, Bogalech could not get any help from her migrant daughters.

Furthermore, Girmachew Zewudu's research indicates that migration has negative

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<sup>78</sup> Girmachew Zewudu, "The Impact of Migration and Remittances on Home Communities in Ethiopia" (PhD diss., University of Adelaide, 2014), 175, accessed March 30, 2021, <https://digital.library.adelaide.edu.au/dspace/bitstream/2440/106785/2/02whole.pdf>.

<sup>79</sup> Katie Kuschminder, Lisa Andersson & Melissa Seigel, "Migration and Multidimensional Well-Being in Ethiopia: Investigating the Role of Migrants Destinations," *Migration and Development* 7, no. 3 (2018): 321–40, <https://www.tandfonline.com/doi/full/10.1080/21632324.2018.1463903>.

<sup>80</sup> Bogalech's story is described in chapter one of the Thesis. It is a story of an actual event that took place in Ethiopia retold by me. The names have been changed to protect those affected.

consequences on some elderly people due to the departure of a migrant member. Those elderly parents left behind are more inclined to have psychological and emotional stress and a feeling of abandonment.<sup>81</sup> Migration leaves elderly people on the sidelines of life. Monika Rebala contends, “Rural-urban migration, and modernity generally, has meant that many older people find themselves doing what once was unthinkable —living alone, and having to fend for themselves.”<sup>82</sup>

### Effect of HIV/AIDS on the Elderly

HIV/AIDS is one of the factors which have brought societal changes and impacted traditional lifestyle and elderly care in Ethiopia. HIV/AIDS is not only a health issue in Africa, but also an epidemic that causes a social, emotional, psychological, and economic crisis in the community. Particularly, the AIDS epidemic has weakened the community’s social structures and institutions.<sup>83</sup> As HIV/AIDS mainly struck a working-age group of people, the family system and community associations are affected by the impact of the epidemic. Mduduzi Nkosinathi Gladwin Mtshali states, “The structure and functions of families in most African societies are undergoing rapid transformation due to HIV/AIDS-related deaths of a younger generation. As a result, there has been a reversal in roles whereby many older people have taken on the role of sole caregiver to the young generation.”<sup>84</sup> Many elderly people have become caregivers for the sick, the dying, and the children orphaned by the HIV/AIDS pandemic.

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<sup>81</sup> Zewudu, Girmachew, “Impact,” 175.

<sup>82</sup> Rebala, Monica, “Ethiopia,”

<sup>83</sup> Jonas E. Okeagu, Okeagu Joseph C. and Adegoke Ademiluyi O., “The Impact on African Societies of the Standard Hypothesis that HIV/AIDS Originated in the Continent,” *Journal of Third World Studies* 20, no. 2 (2003): 118, accessed March 25, 2021. doi:10.2307/45194169.

<sup>84</sup> Mduduzi Nkosinathi Gladwin Mtshali, “Role Reversal of Rural Black Grandparents in South Africa,” *Journal of Comparative Family Studies* 47, no. 3 (2016): 369, accessed March 25, 2021. <http://www.jstor.org/stable/44109632>.



In Ethiopia, there is not sufficient research into the impact of HIV/AIDS on grandparents as caregivers but there is much research on the effect of the epidemic on orphan children.<sup>85</sup> However, the orphan children are often under the care of elderly family members who need care from others, too. The prevalence of HIV/AIDS is increasing, with immense influence and pressure on the grandparents as the primary caregivers and the main supporters of orphans in families. The grandparents face double physical, social, economic, and psychosocial challenges while they take on the responsibility of caring for the orphan children.

In fact, both grandparents and grandchildren require caregivers due to their age. But orphaned children rely on elderly and needy grandparents who are not financially, physically, and emotionally ready for this new responsibility. This leaves the grandparents with challenges as they face the incapacity to care for grandchildren, which often has negative effects on their wellbeing.<sup>86</sup> At a time when, according to tradition,<sup>86</sup> grandparents have expected to be recipients of care and support during their old age, many elderly people have no alternative but to assume care of orphaned grandchildren. Christine Oppong supports this clearly: “shaped by traditional values, norms, and roles in their early lives, they currently find many expectations unmet. Indeed, some of the traditional norms that ensured respect, support, reciprocity, and embeddedness may now leave many older people, especially women, isolated, weakened, and victims of illness and violence.”<sup>87</sup>

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<sup>85</sup> Tatek Abebe, Asbjorn Aase, “Children, AIDS and the Politics of Orphan Care in Ethiopia: The Extended Family Revisited,” *Social Science & Medicine* 64, Issue 10 (May 2007): 2059. <https://www.sciencedirect.com/science/article/abs/pii/S0277953607000573>.

<sup>86</sup> Phetlhu, D.R. & Watson, M., “Challenges Faced by Grandparents Caring for AIDS Orphans in Koster, Northwest Province of South Africa,” *African Journal for Physical, Health Education, Recreation and Dance (AJPHERD)*, October (Supplement 1:2): (2014): 348–59. URI <http://hdl.handle.net/10566/1404>.

<sup>87</sup> Christine Oppong, “Familial Roles and Social Transformations: Older Men and Women in Sub-Saharan Africa,” *Research on Aging* 28, no. 6 (November 2006): 654–68. <https://doi.org/10.1177/0164027506291744>.

## The Practice of the Church in Context

As mentioned above, Ethiopia is a religious country and Christianity is the major religion in the country. This study focuses on the practices of the Ethiopian Evangelical Church Mekane Yesus regarding elderly care in Ethiopia. EECMY is one of the largest Lutheran churches in the Lutheran World Federation. According to the Lutheran World Federation (LWF), the EECMY became a national church in 1959 and joined the LWF in 1963.<sup>88</sup> Currently, the church has 10.4 million members.”<sup>89</sup>

The church has a holistic approach, proclaiming the gospel of Jesus and helping the physical and emotional needs of people. Since her establishment, the church has been providing evangelism as well as social services such as health, education, and care for orphaned children. The church has rendered holistic ministry according to its guiding principles.<sup>90</sup> This implies that the church is called to speak to the spiritual needs as well as to serve the social needs of an individual in the community.

On top of the church evangelism ministry, in the year 2000, the church organized the Development and Social Services Commission (EECMY-DASSC) as a legal church-based development agency.<sup>91</sup> The DASSC has been performing major community-based activities to improve the life of the communities. For example, projects include assisting needy children,

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<sup>88</sup> “The Lutheran World Federation”, Lutheran World Federation, accessed March 23, 2021, <https://www.lutheranworld.org/news/ethiopian-church-elects-yonas-yigezu-president>.

<sup>89</sup> “The Lutheran World Federation”

<sup>90</sup> Ethiopian Evangelical Church Mekane Yesus Development and Social Services Commission (EECMY-DASSC) Action Plan, for Seven Years (2012–2016), January 2012, accessed April 1, 2021, <http://www.arcworld.org/downloads/Ethiopian-Evangelical-Church-Plan.pdf>.

<sup>91</sup> Ethiopian Evangelical Church Mekane Yesus Development and Social Services Commission (EECMY-DASSC) Action Plan, for Seven Years (2012–2016), January 2012, accessed April 1, 2021, <http://www.arcworld.org/downloads/Ethiopian-Evangelical-Church-Plan.pdf>.

youth, disabled and poor people through education, rehabilitation, and social support.<sup>92</sup> The church's approach of holistic ministry positions it to play a vital role within the community.

Concerning the church's evangelistic efforts, the EECMY offers spiritual services through the Department of Mission & Theology (DMT). Diaconal ministry is one of the ministries under the DMT department at the head office level and the ministry is run by a committee at the congregation level. Diaconal ministry committee members are volunteers who have passion for the ministry. Almost all congregations of EECMY do not have full time deaconess who carry on the diaconal ministry. The main objective of diaconal ministry is to support families and individuals of the congregation in their physical, social, and emotional needs. This ministry mainly supports the poor, sick, frail elderly people and the orphaned children in the church. The diaconal ministry serves all ages of congregation members who need physical, spiritual, and emotional support.

However, the needs of individuals differ based on age, gender, and status. As established above, elderly people have a variety of physical, spiritual, mental, emotional, and social needs that must be addressed both implicitly and explicitly. Elderly people need the church to minister to them according to their needs. It is obvious that, as they get old, their physical abilities such as their hearing and vision decline. Further, Janet Parker emphasized the importance of providing an environment in which older persons can deal with their many losses: loved ones, friends, career, sense of worth, and their own death.<sup>93</sup> She says, "Good spiritual care should facilitate the

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<sup>92</sup> "World Counsel Churches", Ethiopian Evangelical Church Mekane Yesus (EECMY) oikoumene, last modified 2021, accessed April 4, 2021, <https://www.oikoumene.org/member-churches/ethiopian-evangelical-church-mekane-yesus-ecmy>.

<sup>93</sup> Janet Parker, "Spirituality and Well-Being," *Working with Older People*, 11 no. 3 (2007):13–16. <https://doi.org/10.1108/13663666200700044>.

mending of broken spirits through love, service, and prayer.”<sup>94</sup> Christian community services can help to[?] address those people’s needs through Bible study, prayer groups, and counseling services.

Recently, the diaconal ministry office of the EECMY headquarters has been conducting symposiums and consultations on how the congregations provide holistic care for elderly members. During these consultations, four aspects of problems facing the elderly were identified. First, there is a lack of spiritual care; most congregation services are youth-centered, not considering the elderly people's limitations. Some of the factors include extended worship services, loud music, new worship songs, the preacher’s speed in speaking. Additionally, there are often no bible studies prayer groups or fellowship groups for the elderly. Second, many elderly people are experiencing social problems like loneliness and hopelessness. Third, some are facing financial problems, even struggling to acquire daily food. Finally, some have health-related problems that might be easily dealt with through physical exercise; however, there is limited awareness of physical exercises.<sup>95</sup>

Therefore, the EECMY Department for Mission and Theology Symposium on Pastoral Care for the Elderly has made some important recommendations that would open the door to improve the current situation of elderly members of the church. Some of them are “setting elderly ministry committee at congregation level under Diakonia ministry, setting a special elderly day in the congregation, make centers at different places where elderly people come together, discuss and share their experience, and like...”<sup>96</sup>

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<sup>94</sup> Parker, “Spirituality and Wellbeing,” 13–16.

<sup>95</sup> Tseganesh Ayele, *The Ethiopian Evangelical Church Mekane Yesus: Diaconal Office Documents*. Addis Ababa, Ethiopia, 2020.

<sup>96</sup> The paper from EECMY-DMT- Diaconal office “The Ethiopian Evangelical Church Mekane Yesus

Furthermore, the EECMY Diaconal Ministry Office report indicates that a few congregations located in Addis Ababa have established an elderly ministry committee that coordinates the elderly diaconal ministry of the congregation.<sup>97</sup> In addition to this, the EECMY council meeting (the high level of decision-making body) minutes affirmed the importance of elderly ministry in each congregation, setting aside an elderly day in EECMY, considering elderly needs in worship services, and making the church sanctuary accessible for elderly and disabled people.<sup>98</sup>

The EECMY is not unaware of societal changes that have been affecting elderly people. Since her establishment, the church has been serving the spiritual and physical needs of various vulnerable and marginalized groups. These holistic endeavors include hostel services for orphaned children, services for mentally challenged children, and provision for deaf children. But the elderly members of her congregations have been facing the same challenges as the societal changes that affect the community at large. As the case of the widow Mrs. Bogalech shows, as she got older, and her children left her behind and migrated into urban areas and the Middle East, she expected appropriate spiritual and physical support from her congregation, but there was no suitable response to her. Frail elderly members of the church have a high demand for support from their congregation when they are unable to actively be involved in the congregation due to poor physical wellbeing. The current initial activities of the church to serve the elderly seem encouraging but demands an understanding of the depth of elderly challenges. In addition to the consideration of the cultural context, the next section of this project will

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Department for Mission and Theology symposium on Pastoral Care for Elderly – Recommendations and way forwards.

<sup>97</sup> Tseganesh Ayele, The EECMY- Diaconal Ministry Office Report, Addis Ababa, Ethiopia, 2020.

<sup>98</sup> The Ethiopian Evangelical Church Mekane Yesus 15<sup>th</sup> Council Meetings Minutes. The Elderly Care, Addis Ababa, Ethiopia, 2020.

examine how the Scriptures also offer insight into strategies for holistic ministry to the elderly.

## CHAPTER THREE

### DISCERNING THE WISDOM OF THE WORLD—CURRENT SCHOLARSHIP ON THE HOLISTIC CARE OF THE ELDERLY

This chapter will discuss secular scholars' views of the holistic care of elderly people. First, I will explore how the term “holistic” is defined and how holistic care is described in different settings. Then, I will explain the importance of holistic health care for elderly people. Finally, I will describe the significance of religiousness/spirituality in elderly care in Western and African contexts.

#### What is Holistic?

The word holistic originally derived from the Greek word “holos” which means whole.<sup>1</sup> Thus, holistic refers to a human being as a whole and considers the relationship of many components in the entire system of an individual. The meaning of a holistic approach is different in different fields of study. The focus of this thesis concerns the holistic nature of human beings, including their physical, emotional, psychological, and spiritual needs.

A philosophy of holism was first founded by Aristotle and dealt with a holistic understanding of nature. Aristotle suggests that “The whole is more than the sum of its parts.”<sup>2</sup> He describes in his metaphysical philosophy that the elements are not the same as the whole part but alongside it. Centuries later, South African Jan Christian Smuts defined the word “Holism” as a “whole” which is the connection of everything with everything and causes the unity of the

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<sup>1</sup> Alexandra Schwarz-Schilling, “What Does 'Holistic' Mean?” Living Gaia(blog), 2021, <https://www.living-gaia.org/what-is-holistic.html>.

<sup>2</sup> Schwarz-Schilling, “What Does 'Holistic' Mean?”.

whole.<sup>3</sup> Both Aristotle's and Smuts's definitions of the philosophy of holism signify the importance of a single part of the whole that gives meaning to the entire body. The present-day scholars Eileen McMillan, Natalina Stanga, and Sharon L. Van Sell further define the word in relationship with mankind saying, "Holism loosely means including the whole being, mind, body, and soul, taking into account that something is more than a sum of the parts."<sup>4</sup> Therefore a holistic conception of a human person entails addressing the mind, body, and soul.

### **Holistic Care**

This understanding of "holistic" is utilized by different scholars in a variety of fields of study. In many disciplines of study, the word holistic is defined and used in recognizing the whole person with components of mind, body, and spirit, acknowledging the interdependence among one's physical, social, psychological, and spiritual aspects. Holistic care or approach considers the key components of a whole person: body, mind, and spirit. For instance, Nilufer Demirsoy affirms, "Holistic care philosophy, acknowledging the existence of a very close relationship between body, mind, and soul and focusing on individualism, emphasize that every dimension of a human is distinctive and unique as well as they are also connected to each other."<sup>5</sup> His emphasis is on a person as an individual being having three key components which are not regarded as separate parts of an individual. Likewise, Leung Andrew, a Chinese nursing scholar, defined holistic care as, "care concerning client's physical, psycho-social, and spiritual

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<sup>3</sup> Melvin A Kimble and Susan H. McFadden, eds., *Aging, Spirituality, and Religion: A Handbook* (Minneapolis: Fortress, 1995), 326.

<sup>4</sup> Eileen McMillan, Natalina Stanga, and Sharon L., Van Sell, "Holism: A Concept Analysis," *International Journal of Nursing & Clinical Practices* 5: 282 (2018): 6 pages, doi: <https://doi.org/10.15344/2394-4978/2018/282>.

<sup>5</sup> Nilufer Demirsoy, "Holistic Care Philosophy for Patient-Centered Approaches and Spirituality," (Intech Open, April 12th, 2017), <https://www.intechopen.com/books/patient-centered-medicine/holistic-care-philosophy-for-patient-centered-approaches-and-spirituality>.



needs.”<sup>6</sup> Moreover, the Hong Kong Hospital Authority and some of its institutions extended the holistic approach from the person’s body, mind, and spirit to environmental and cultural aspects. The “holistic care” defined as, “the care delivered to meet an integral, independent individual’s health needs including physical, psycho-social, spiritual, cultural, and environmental aspects as a whole.”<sup>7</sup> According to this approach, holistic is not only limited to the human whole self but includes its environment and culture as well.

All these definitions and suggestions of a holistic care approach see the person as a whole and propose to address the whole person’s needs. As human beings live in different societies and environments, they might have various challenges. This also shows us that mankind’s need is greater than a single aspect of the whole person. This aspect of caring is interconnected with the environment and culture as well as the broader life spectrum of humanity.

### **Holistic Health Care for the Elderly**

Currently, the holistic approach has become popular in every field of study, including social science, natural science, environmental science, and theology. In health science specifically, health care is adapting the holistic approach to care for the whole person. Thus, scholars are engaged with a holistic approach in order to achieve effective outcomes. Contemporary scientists believe that health care requires a holistic approach because the nature of human beings is holistic. Human beings are unique among living things, with intelligence, memory, mind, ethics, and feelings. Due to the uniqueness of their nature, human beings should be treated and cared for accordingly. Nilufer Demirsoy cited Hippocrates, the founder of medical

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<sup>6</sup> Andrew Leung, *A Holistic Care Program for Psychiatric Rehabilitation in a Chinese Context*. Psychiatry—Theory, Applications and Treatments, (New York: Nova Science Publishers, 2013,) 4.  
<http://search.ebscohost.com.esl.idm.oclc.org/login.aspx?direct=true&db=nlebk&AN=611400&site=ehost-live>.

<sup>7</sup> Leung, *Holistic Care Program*, 5.

science, who says, “It is more important to know what sort of person has a disease than to know what sort of disease a person has.”<sup>8</sup> Knowing the whole nature of a person is important before dealing with the health problems of a person.

In the same way, contemporary health care addresses the individual’s physical body, soul, and spirit since human being’s needs are interconnected with each other. It holistically sees a person as being one that consists of all aspects of life. E. Anthony Allen describes how every individual’s “health and wholeness are correlated.”<sup>9</sup> He explains how some secular scientists understand a holistic approach to the health of a person and how they deal with individual health problems. Some secular scientists focus on the physical and psychological aspects of a person. In such a context, a person’s physical aspect deals with the person as a biological object and the mental or psychological aspect deals with the person as a thinking and feeling subject.<sup>10</sup> These secular scientists consider only the physical and psychological needs of patients but fail to address the spiritual aspects of patients.

However, some secular scientists and Christian health care professionals have demonstrated an interest in dealing with spiritual aspects as one of the components because the whole person is the person who is a physical, psychological, and spiritual being.<sup>11</sup> The spiritual component is often forgotten and considered as only a religious concern, but it is the essence of every individual, interrelated with other aspects and giving meaning to life. Even if the religious group has the most influence in addressing the spiritual need of elderly people, health care and other professionals have their part in considering the spiritual need. Also, during serious illness,

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<sup>8</sup> Demirsoy, “Holistic Care,”

<sup>9</sup> E. Anthony Allen, *Caring for the Whole Person* (Monrovia, CA: MARC, 1995),6.

<sup>10</sup> Allen, *Caring for the Whole Person*, 6.

<sup>11</sup> Allen, *Caring for the Whole Person*, 7.

an elderly person's spiritual values matter in addressing their health and in defining their life. As E. Anthony says, “the spiritual relates to realities such as meaning and purpose, ultimate choices, individual and social morality, taboos, communion with the divine and divine providence and protection.”<sup>12</sup> Thus, including spiritual aspects of care in health care service may foster significant outcomes in the well-being of the elderly.

Likewise, gerontologists believe that holistic care including spiritual aspects is important for elderly people. Scholars like E. Durkheim, M. Weber, and W. James argue that the many dimensions of religion are beneficial for the many dimensions of human health, physical and mental.<sup>13</sup> Religious groups play an important role in providing spiritual care for elderly people. Sociological theorists realized a century ago that religious groups incorporate appropriate care and provide a view and meaning of life that might be comforting in their later years.<sup>14</sup> Thus, as scholars in different fields of studies argue about the significance of spiritual aspects for elderly care, religious groups simply work to fulfill their role in providing appropriate spiritual care for the elderly.

### **Spirituality and Elderly Holistic Care in the Western Context**

All humanity has spiritual needs as well as physical and psychological needs that are naturally given to them. According to Harold G. Koenig, “Spiritual needs are conscious or unconscious striving that arises from the influence of the human spirit on the biopsychosocial

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<sup>12</sup> Allen, *Caring for the Whole Person*, 7.

<sup>13</sup> Ellen L. Idler, Stanislav V. Kasl, “Religion among Disabled and Nondisabled Persons II: Attendance at Religious Services as a Predictor of the Course of Disability,” *The Journals of Gerontology: Series B*, 52B, Issue 6, (November 1997), S306–S316. <https://doi.org/10.1093/geronb/52B.6.S306>.

<sup>14</sup> Idler and Kasl, “Religion among Disabled,”

natures.”<sup>15</sup> The spiritual aspects of humanity are broad and complex, as different people have different views and understanding.

Spirituality is a broader concept and considered an incorporated element of religion. Much of the time religion and spirituality are used interchangeably. However, some scholars claim that they are not the same, but the two were not differentiated until the rise of secularism.<sup>16</sup> Both spirituality and religiousness were considered and recognized as having the same form and content. However, recently in America, scholars have shown high interest in spirituality and religious life, including more elements that are defined as spiritual.<sup>17</sup> This shift of interest helps scholars to produce different definitions and content for religiousness and spirituality. Religiousness focuses on practices and commitment to beliefs associated with religious ideologies, whereas spirituality is more about the individual’s search for meaning and completeness. Brian J. Zinnbauer et.al, clearly defined religiousness, saying,

religiousness have ranged from subscription to institutionalized beliefs of doctrine to a system of beliefs in a divine or superhuman power, and practices of worship or other rituals directed towards such a power the feelings, acts, and experiences of individual men in their solitude, so far as they apprehend themselves to stand in relation to whatever they may consider the divine<sup>18</sup>

According to Zinnbauer’s description, religiousness is more formal or institutionalized, visible with doctrine or rituals, and more objective. Religiousness is associated with a religion of a person. A religious person performs his religion’s rituals, beliefs, and practices. Also, Zinnbauer et.al defines spirituality in the contemporary American context as spiritual practices

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<sup>15</sup> Harold G. Koenig, *Aging and God: Spiritual Pathways to Mental Health in Midlife and Later Years*, (New York: Haworth Pastoral Press, 1994), 18.

<sup>16</sup> Brian J. Zinnbauer, et al., “Religion and Spirituality: Unfuzzifying the Fuzzy,” *Journal for the Scientific Study of Religion*, 36, no. 4 (1997): 549. *JSTOR*, [www.jstor.org/stable/1387689](http://www.jstor.org/stable/1387689). Accessed 20 June 2021.

<sup>17</sup> Zinnbauer, et al, “Religion and Spirituality,” 549.

<sup>18</sup> Zinnbauer, et al, “Religion and Spirituality,” 549.

that have an interest in angels, New Age interest in crystals and psychic readings, and evangelical or Pentecostal religious experiences, which includes forms and contents of worship and religion orders.<sup>19</sup> These practices take place within and outside the religions in the form of religious rituals and worship orders or styles.

Traditionally, spirituality was used to describe the deeply religious person, but it has now expanded to include the superficially religious person, the religious seeker, the seeker of well-being and happiness, and the completely secular person.<sup>20</sup> In the Western context, spirituality is not only for the religious person, it is a practice of every individual in different forms. Everyone has their spiritual practices without belonging to any religious institution. Many people are both religious and spiritual, some are only one or the other.

From the Western perspective of spirituality, a person who does not belong to a specific religion also has a secular spirituality, as secular spirituality is defined by David N. Elkins et.al, as the search for meaning outside of a religious institution while religious spirituality is the search for the meaning of life inside a religious institution.<sup>21</sup> They also acknowledge whatever else one believes to be ultimate: for instance; self, nature, other persons, etc.<sup>22</sup> Because of this view, holistic views and approaches are developed which incorporate not only physical and psychological aspects but also spiritual aspects of humanity. Thus, elderly care aspects are expanded to provide care that includes spiritual dimensions whether the spirituality of elderly people is religious or not.

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<sup>19</sup> Zinnbauer, et al, "Religion and Spirituality," 550.

<sup>20</sup> Harold G. Koenig, MD, "Concerns About Measuring "Spirituality" in Research," *The Journal of Nervous and Mental Disease* 196, Issue 5 (May 2008): 350. doi: 10.1097/NMD.0b013e31816ff796.

<sup>21</sup> David N. Elkins, Hedstrom L. James, Hughes Lori L., Leaf J. Andrew, and Saunders Cheryl, "Toward a Humanistic-Phenomenological Spirituality: Definition, Description, and Measurement," *Journal of Humanistic Psychology* 28, no. 4 (October 1988): 6. <https://doi.org/10.1177/0022167888284002>.

<sup>22</sup> Elkins, James, Lori, Andrew, and Cheryl, "Toward a Humanistic-Phenomenological Spirituality," 6.

Moreover, scholars argue that the spiritual needs of elderly people should get special attention as they affect their wellbeing. Scholars like David Moberg have identified areas that need special consideration in elderly care such as sociocultural needs, relief from anxieties and fears, preparation for death, and personal integration.<sup>23</sup> Thus, care that provides for multiple needs of an individual including spiritual needs may bring life satisfaction for elderly people.

As Western studies show, the philosophy of elderly care has adopted a holistic approach, emphasizing the whole person. Western countries that follow holistic philosophy are integrating social and medical care rather than focusing only on an individual health issue.<sup>24</sup> As people are aging, they need treatment that meets every need, including health problems, grief/loss, search for the meaning of life, and dealing with death and dying. Thus, scholars focus their attention on providing the appropriate services for the elderly in health institutions and nursing home resident facilities. Globally there is a concern about how to improve the quality of human life in later years with well-established levels of good physical and mental health status.<sup>25</sup> This concern would bring a solution for vulnerable elderly people across the globe.

Furthermore, scholars argue that elderly care must consider the aging person's culture. Care depends on the elderly people's perspectives and views, which reflect the place or culture from which they come.<sup>26</sup> In an individualistic culture, most people lead an independent life. However, with age, individuals become dependent on others due to health reasons. Sujj Lee says

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<sup>23</sup> Dan Blazer, "Spirituality and Aging well," *Generations: Journal of the American Society on Aging* 15, no. 1 (1991): 63. Accessed April 17, 2021. <http://www.jstor.org/stable/44876958>.

<sup>24</sup> William Haseltine, "Integrating Social Care and Elder Care has Many Benefits, Haymarket Media," McKnight's Senior Living, 2021. <https://www.mcknightsseniorliving.com/home/columns/guest-columns/integrating-social-care-and-elder-care-has-many-benefits/>.

<sup>25</sup> Ian, Stuart-Hamilton. *An Introduction to Gerontology*. (Cambridge: Cambridge University Press, 2011), 141, <http://search.ebscohost.com.csl.idm.oclc.org/login.aspx?direct=true&db=nlebk&AN=357445&site=ehost-live>.

<sup>26</sup> Stuart-Hamilton, *Introduction to Gerontology*, 342.

Individualistic societies view dependence as an unfavorable trait, which causes elders who seek dependence to be placed lower on the social ladder. Elders are given less control and power as they lose social status, causing discrepancies with their self-concept due to their disadvantage in an individualistic society.<sup>27</sup>

Since the United States shows respect for individualism and social equality, people carry more negative stereotypes to older adults who naturally have more dependence due to their health and limitations.<sup>28</sup> Consequently, among elderly people in America, there is tension between independence and dependence. Some independent elderly people who do not appreciate any help might end up at risk. However, some others want to be fully dependent on others.<sup>29</sup> As a result of this, some elderly people in individualistic cultures that want to be independent have less interest in getting support and care, whereas elderly people in collectivistic cultures appreciate the long-term bond with family that provides support and care. Those who are financially self-sufficient and live alone have less interest in accepting help from others. However, when they become unable to use their resources for themselves and to do their daily routine and are unable to manage all their resources, they turn to look for help. In such cases, elderly people may need to be rendered holistic care in an institutional care setting or residential care settings.

A nursing home is one of the places that provides holistic care for elderly people who need help from others. For instance, in Germany, a nursing home for elderly people is a traditional institutionalized way of living and caring.<sup>30</sup> These nursing homes provide full services for the

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<sup>27</sup> Sujj Lee, "Life as an Elder: Individualistic Versus Collectivistic Societies," October 12, 2011, <https://sujjoryndynlee.wordpress.com/2011/10/12/the-perspective-on-elders-individualistic-versus-collectivistic-societies/>.

<sup>28</sup> Ling-Yi Zhou, "What College Students Know about Older Adults: A Cross-Cultural Qualitative Study," *Educational Gerontology* 33, no. 10 (2007): 811–31, <https://doi.org/10.1080/03601270701364545>.

<sup>29</sup> Dosa Carlson, *Older Adult Ministry: A Resource for Program Development*, (Atlanta, Presbyterian, 1987),67.

<sup>30</sup> Lucia Artner, "Materialities In and Of Institutional Care for Elderly People," *Frontiers in Sociology* 3

elderly, including physical and spiritual needs, such as preparing meals and helping people to eat, cleaning rooms, medical treatment, educational and entertainment programs, sports activities, and interacting with other residents. Most nursing homes also offer pastoral care and terminal spiritual care.<sup>31</sup> Each of these services of the nursing home addresses the physical, psychological, social, and spiritual needs of elderly people.

### **Spirituality and Holistic Elderly Care in an African Context**

African people's everyday life is associated with religion. Among the African community religion/spirituality is an important part of their life. African people are profoundly religious.

John Mbiti states

To be human is to belong to the whole community, and to do so involves participating in the beliefs, ceremonies, rituals, and festivals of that community. A person cannot detach himself from the religion of his group ... to be without religion amounts to a self-excommunication from the entire life of society and African people do not know how to exist[!?] without religion.<sup>32</sup>

The life of an individual is interconnected with religion and community. Religion and community have an important place in every individual life in Africa. Jacob K. Olupona says, "African spirituality simply acknowledges that beliefs and practices touch on and inform every facet of human life, and therefore African religion cannot be separated from the everyday or mundane."<sup>33</sup> African spirituality considers sacred practices and believes in an ultimate power beyond the power of human beings and the power of creation. The culture is traditionally

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(2018): 30, <https://doi.org/10.3389/fsoc.2018.00030>.

<sup>31</sup> Artner, "Materialities In and Of Institutional Care."

<sup>32</sup> John S. Mbiti, *African Religions and Philosophy Second Edition*, (New Hampshire, Heinemann, 1990). [https://books.google.com/books?hl=en&lr=&id=eTUpo9IH-fYC&oi=fnd&pg=PA1&ots=Mhj6Trvtm\\_&sig=CeI3fcAKcT\\_LQrbya3yhUANvH38#v=onepage&q&f=false](https://books.google.com/books?hl=en&lr=&id=eTUpo9IH-fYC&oi=fnd&pg=PA1&ots=Mhj6Trvtm_&sig=CeI3fcAKcT_LQrbya3yhUANvH38#v=onepage&q&f=false).

<sup>33</sup> Anthony Chiorazzi, "The spirituality of Africa, News Harvard University," (October 6, 2015), <https://news.harvard.edu/gazette/story/2015/10/the-spirituality-of-africa/>.



inspired with a sensitivity to the presence of the divine power that human beings acknowledge and worship.<sup>34</sup> In indigenous African Spirituality, no real separation exists between the spirit world and the physical world. Therefore, holistic care for the elderly in the African context is determined by the African's view of spirituality. As Africans consider spirituality in everyday activity and experience, the care rendered to them takes into consideration their religiousness and spirituality.

Religiosity/spirituality is deeply situated in the mind of the majority of Ethiopians, defining their worldview. The study among Sub-Saharan African (SSA) migrant women with HIV/AIDS in Belgium shows the important role of spirituality within African culture and communities. They tend to rely on spirituality and religious practices to relieve stress, maintain hope and purpose in life.<sup>35</sup> They turn to prayer and religious involvement during serious illness which contributes positively to life satisfaction and provides more hope for these African migrant women with HIV/AIDS. They mainly depend on God and consider prayer and religious practices as the way out of their problems. Thus, the role of spirituality is multidimensional, it contributes to the wellbeing of humanity.

Additionally, scholars argue that there are diverse pathways by which religion/spirituality may directly or indirectly affect individual health. Scientific studies have examined the ways that religion/spirituality have shown the power to heal physical illnesses. Some mechanisms that contributed to the physical and mental health of an individual are: first, they consider meditation and prayer as a “relaxation response” that helps to lower blood pressure, reduce muscle tension,

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<sup>34</sup> Marsh-Lockett Carol P. and West Elizabeth J., *Literary Expressions of African Spirituality*, (Lanham: Lexington Books, 2013), 16.  
<http://search.ebscohost.com.csl.idm.oclc.org/login.aspx?direct=true&db=nlebk&AN=562322&site=ehost-live>.

<sup>35</sup> Agnes Ebotabe Arrey et al., “Spirituality/Religiosity: A Cultural and Psychological Resource among Sub-Saharan African Migrant Women with HIV/AIDS in Belgium,” *Plos one* 11, no. 7 (22 Jul. 2016), doi: 10.1371/journal.pone.0159488.

and healthy nervous system activities. Secondly, being religious/spiritual contributes to seeing life as meaningful and having a hopeful view of life.<sup>36</sup> These scientific findings show the importance of holistic treatment or care for elderly people, in particular the role of spiritual treatment for the cure of psychological and physical illness.

In the African traditional understanding, the treatment of a sick person is holistic. This perspective provides treatment for physical, psychological, spiritual, and social symptoms or sickness and addresses the whole problem. The African traditional healers do not separate the physical from the spiritual, or the natural from the supernatural.<sup>37</sup> This will cause them to address health issues from two cooperating perspectives – spiritual and physical. Therefore, they also deal with the health issues of elderly people from two perspectives – spiritual and physical.

Researchers have recognized the connection between religiosity, spirituality, and health care that provides a positive impact on elderly health care. Scholars believe that more research in this area would help to identify determinant factors of the quality of life of elderly people and indicate different means for refining elderly health.<sup>38</sup> More research in this area would be helpful for holistic elderly care among Africans, especially considering the centrality of religion and spirituality in African life. As P. Omonzejele suggests:

For the traditional African, health is not just about the proper functioning of bodily organs. Good health for the African consists of mental, physical, spiritual, and emotional stability of oneself, family members, and community; this integrated view

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<sup>36</sup> Yoon and Lee, “Religiousness/Spirituality,” 194.

<sup>37</sup> Peter White, “The Concept of Diseases and Health Care in African Traditional Religion in Ghana”, *HTS Theologese Studies/Theological Studies*(online)71, no.3 (2015). <http://dx.doi.org/10.4102/hts.v71i3.2762>.

<sup>38</sup> Zachary Zimmer, Carol Jagger, Chi-Tsun Chiu, Mary Beth Ofstedal, Florencia Rojo, Yasuhiko Saito, “Spirituality, Religiosity, Aging and Health in Global Perspective: A Review,” *SSM - Population Health* 2 (2016): 378. <https://doi.org/10.1016/j.ssmph.2016.04.009>.

of health is based on the African unitary view of reality. Good health for the Africans is not a subjective affair.<sup>39</sup>

In African tradition, the well-being of a person is understood as being part of a larger community. A single individual can be healthy only if he has a healthy interaction with that community to which he belongs and with the creation that surrounds him. Nevertheless, as the problems of elderly people have varied from place to place and even with the same country, so also a pattern of care cannot be the same and implemented globally. The solutions must be addressed within each country according to their specific problems.<sup>40</sup>

In Africa, holistic elderly care is provided in two ways: in the integrated long-term system and family-based care. Many elderly people are supported under family-based care. On the other hand, research suggests that all countries in sub-Saharan Africa need a fully integrated long-term care system for their elderly population.<sup>41</sup> Governments and stakeholders' response to long-term elderly care is a cross-cutting development issue for all African countries because family-based care is unable to deliver adequate long-term care for many older people.<sup>42</sup> It is not sustained as it was accustomed, because of the influence of globalization and societal changes.

However, in Africa, some studies reveal that long-term care exists with some poor qualities that create less interest in the recipients. A study by D. Oladeji shows the constraints for holistic long-term elderly care in Nigeria. For instance, lack of skill from caregivers, poor economic situations, and less interest in institutional care from the elderly are some of the limitations in

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<sup>39</sup> Omonzejele, P.F., "African Concepts of Health, Disease, and Treatment: An Ethical Inquiry," *Explore* 4, no. 2, (2008): 120. <http://dx.doi.org/10.1016/j.explore.2007.12.001>.

<sup>40</sup> Williams, Keigher, and Williams, "Spiritual Well-Being."

<sup>41</sup> Anne Margriet, "Towards Long-Term Care Systems in Sub-Saharan Africa," WHO series on long-term care in Sub Sahara Africa, (2017): 11, <https://www.who.int/ageing/long-term-care/WHO-LTC-series-subsaharan-africa.pdf>.

<sup>42</sup> Margriet, "Towards Long Term Care," 11.

long-term elderly care.<sup>43</sup> Further, this study identifies some practical constraints in the institutional elderly care services. These include limited medical care; poor access for transportation services for the elderly (to be able to have access to shops, to attend church services, go to doctors' appointments, and maintain contact with family and friends); lack of caregivers; lack of support to the family to maintain the elderly in their home; and poor socialization opportunities among the elderly.<sup>44</sup> This study indicates how holistic elderly long-term care has many limitations to provide social, physical, mental, psychological, and spiritual services for the frail elderly.

Finally, as is described above, secular researchers argue that elderly people enjoy healthier and happier lives when they receive holistic care. Secular researchers argue that a human being, consisting of body, soul, and spirit, needs appropriate care and treatment of physical, psychological, mental, social, and spiritual aspects. As a person gets older, the physical body deteriorates and demands health care that is accompanied by social, psychological, as well as spiritual care.

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<sup>43</sup> D. Oladeji, "Family Care, Social Services, and Living Arrangements Factors Influencing Psychosocial Well-Being of Elderly from Selected Households in Ibadan, Nigeria," ed. Wayne Martino. *Education Research International* (November 9, 2011): 421898, <https://doi.org/10.1155/2011/421898>.

<sup>44</sup> Oladeji, "Family Care."

## CHAPTER FOUR

### DISCERNING THEOLOGICAL WISDOM REGARDING THE CARE OF THE ELDERLY

#### **Biblical Perspective for the Elderly**

God created the human being in his image and likeness, crowned him over his creation, and delegated him as steward and co-governor of his creation (Gen. 1:26; 2:8–17).<sup>1</sup> It is possible to imagine God’s blessings to human beings as flowing through His fellowship and conversing with humanity, and through human beings’ daily interaction with creation and stewardship. Human beings’ vertical and horizontal fellowship was healthy and flowing smoothly in every direction, at the beginning. This implies that man was enjoying his life and using his God-given authority to subdue the creation. Also, before the fall of humanity into sin, the life expectancy of human beings seems unlimited. But after the fall, death occurred, and the expected long life was changed because of sin.

After the fall, the age of human beings was counted in hundreds of abundant years. For example, the age of Lamech was 782 years, and Methuselah 969 years (Gen. 5:26, 27). But after Noah’s time and the flood’s destruction, the age of human beings continued to decrease. The increased corruption of humanity limited the age of mankind and subjected mankind to a shorter span of life. As the Psalmist indicated, “The years of our life are seventy, or even by reason of strength eighty; yet their span is but toil and trouble; they are soon gone, and we fly away” (Ps. 90:10). Even in this short span, old age is a gift and blessing from God for those who fear him and walk according to his will. God promised to care for His children during their later years, “even to your old age I am he, and to gray hairs, I will carry you. I have made, and I will bear; I

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<sup>1</sup> Unless otherwise noted, all Scriptural references and quotations are taken from ESV Study Bible: English Standard Version (Wheaton, IL: Crossway, 2008).

will carry and will save” (Isa. 46:4). Also, God’s beloved children prayed concerning their age as follows, “Do not cast me off in the time of old age; forsake me not when my strength is spent” (Ps. 71:9).

Thus, old age is God’s plan and gift for human life on earth. Elderly people accumulate wisdom through a life spent with God and God’s people in different situations. The Psalmist says, “They will still yield fruit in old age; they shall be full of sap and very green” (Ps. 92:14). However, the Scripture affirms that there are challenges in old age. The Psalmist says, “For all our days pass away under your wrath; we bring our years to an end like a sigh.” Thus, in the ancient Near East, old age was a stage of dependence and vulnerability. Gordon Harris suggests that “Old age in the Bible signifies the transition into a weakened social and physical condition.”<sup>2</sup> Later years bring dynamic change in physical bodies of human beings including death. From a theological point of view, Mkude Prosper says, “old age is the time natural powers disappear and harbingers of death appear, and the wisdom of the aged person urges that his experience be valued. Long life is a sign of divine approval and is also a sign of election because it bears a likeness to God’s life.”<sup>3</sup> Even if physical weakness leads elderly people to be dependent on others and vulnerable, long life is a blessing from God.

As discussed in the previous section, in the creation account, human beings are at the top of God’s creation. God created human beings in his image and likeness, “in the image of God,” which makes human beings exceptional creatures and shows how God loved humanity. John Painter highlights human beings’ worthiness in creation: “Being created in the image of God and loved by God, each person is of infinite worth, not necessarily for what we are at any given

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<sup>2</sup> Gordon, Harris, *Biblical Perspectives on Aging: God and the Elderly*, (Philadelphia: Fortress, 1987), 16.

<sup>3</sup> Mkude Prosper, “Counseling the Aged in the Changing African Society: Some Theological Reflections,” in *Caring and Sharing*, ed. Douglas Wanjohi Waruta (Kenya: ATIEA, 1995), 246.

moment, but because of what we may become in God's purpose."<sup>4</sup> Human beings are valued in the eyes of God and live for His purpose. Life is a gift of God to the human being that leads to the appreciation of every stage of life: a child, adult, and old age.

According to biblical accounts, God created men and women in His image, and they have the same value before God. In the same way, being young and old does not change the value and identity of humanity. Indeed, if human beings are created in the image of God, they never can be valued solely according to physical attributes or even bodily integrity.<sup>5</sup> The physical attributes do not determine the identity of human beings. Thus, God values elderly people and works with them, and cares for them to accomplish His plan for human beings in a certain, given earthly life.

Furthermore, the Scripture reveals how God regards older adults and used them to unfold His divine plan. The Old Testament offers three helpful examples in three of the patriarchs: Noah, Abraham, and Moses. God used Noah to save humanity and animals. According to the book of Genesis, God commanded Noah to build an Ark to save himself, his family, and every kind of animal because God was going to destroy wicked generations by flood who were unfaithful to God. Noah was around 500 years old when God called him to build a saving ark (Gen. 5:32; 7:6). Abraham was called by God to go to Canaan when he was 75 years old (Gen. 12:4) and received the promised son when he was 100 (Gen. 21:5). Moses was also called by God when he was 80 years old. God sent him to speak to Pharaoh to set His people free from oppression in Egypt. Moses led God's people during his later 40 years in the wilderness (Exod. 7:7). The example of these three patriarchs demonstrates the value of elderly people in God's

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<sup>4</sup> Join Painter, "Outward Decay and Inward Renewal: A Biblical Perspective on Aging and the Image of God," in *Aging, Spirituality and Pastoral Care: A Multi-National Perspective*, ed. Elizabeth Mackinlay, James W. Ellor, and Stephen Pickard (New York, Haworth, 2001), 45.

<sup>5</sup> Sapp, *Full of Years*, 63.

eyes and God's work. The Bible also relates growing old with growing in wisdom. According to Stephen Sapp, aging is emphasized as a source of wisdom, and the elderly people are described with respect, indeed with reverence.<sup>6</sup> Solomon, the writer of Proverbs says, "Gray hair is a crown of glory; it is gained in a righteous life" (Prov.16:31). It is a blessing of God to live longer, to grow older, and to gain wisdom (Ps. 91:16). Aging is a positive event that is given by God.

Likewise, Old Testament writings view the presence of elderly people in a community as a sign of God's favor. The LORD says: "I will return to Zion and dwell in Jerusalem ... once again men and women of ripe old age will sit in the streets of Jerusalem each with cane in hand because of his age" (Zech. 8: 3-4). The existence of elderly people shows God's mercy and blessings to the community. The present existence of elderly people is described as depending on the earlier generations' response to the fourth commandment: "Honor your father and your mother, that your days may be long in the land that the Lord your God is giving you" (Exod. 20:12). God blesses his people with long years on earth as they honor their parents.

Moreover, in the literature of the ancient Near East, respect for older persons was an accepted tradition of the society. In the culture of ancient Egypt, aging was valued, and elderly citizens were important in the community. Their literature connects age with wisdom and appreciates old age.<sup>7</sup> Stephen Sapp demonstrates that in Israel's historic wisdom literature, "the aged are entitled to particular respect and consideration because of their wisdom and special role in the society. Thus, certain obligations toward the elderly are incumbent upon the younger generation."<sup>8</sup> These perspectives contributed to establishing and preserving social structures.

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<sup>6</sup> Sapp, *Full of Years*, 11.

<sup>7</sup> Harris, *Biblical Perspectives*, 22.

<sup>8</sup> Sapp, *Full of Years*, 75.



## Elderly Care in the Scripture

Humankind is created to be in a community to care for each other. The creation at large is the responsibility of all humanity. God created a nuclear family to care for each other and to extend their care for others. Similarly, God considers elderly people worthy of honor and respect. The fourth commandment, referenced just previously, follows the three commandments which are directed toward God. This indicates father and mother have a special position in God's eyes. Luther highlights this in the Large Catechism when he says:

God distinguishes father and mother above all other persons on earth and places them next to himself. For it is a much higher thing to honor than to love. The honor includes not only love, but also deference, humility, and modesty directed (so to speak) toward a majesty concealed within them. Honor requires us not only to address them affectionately and with high esteem, but above all to show by our actions, both of heart and body, that we respect them very highly, and that next to God, we give them the very highest place.<sup>9</sup>

As God is concerned about father and mother and gives to His people the commandment to honor our parents, He requires us to show our love in practical or visible ways to them. Children are responsible to care for their parents, especially when parents get older and need the support and help of others. Gordon Harris writes, "Honoring parents includes treating as important those who are too feeble to demand respect in addition to giving significance to the strong and resourceful."<sup>10</sup> Honoring parents is not only using polite words to them, but it demands valuing and showing them as they are important.

Luther also reminds us of the application of this commandment in the Large Catechism:

First, then, learn what this commandment requires concerning honor to parents. You are to esteem them above all things and to value them as the most precious treasure on earth. Second, in your words you are also to behave respectfully toward them and are not to speak discourteously to them, to criticize them, or to take them to task, but

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<sup>9</sup> Robert Kolb and Timothy J. Wengert, eds., *The Book of Concord: The Confessions of the Evangelical Lutheran Church* (Minneapolis: Fortress Press, 2000), 401.

<sup>10</sup> Harris, *Biblical Perspectives*, 62.

rather to submit to them and hold your tongue, even if they go too far. Third, you are also to honor them by your actions, that is, with your body and possessions, serving them, helping them, and caring for them when they are old, sick, feeble, or poor; all this you should do not only cheerfully, but also with humility and reverence, doing it as if for God.<sup>11</sup>

Honoring parents requires our thoughtful heart to value them, speak gently to them, and humbly help them. It demands our compassionate heart, well-mannered tongue, and generous hands to them.

Family is a basic institution that is made by God to shape human lives. In this institution, God set a hierarchy: parents as leaders and children as followers, so that children practice obedience and honor to their God-given authority. Robert Kolb states, “God is sketching out lifestyles for each of the situations of human life, occupation, political entities, neighborhoods, and worshipping congregations, when he sketches his model for family life with his command to honor, serve, obey, love, and esteem those whom he has given the responsibility to exercise dominion in our lives, our parents, and other superiors.”<sup>12</sup> The command lets the parents exercise their responsibility for their family to serve the purpose of God in the right way. Having this hierarchy helps to have peaceful and harmonious relationships in the family, church, and public affairs.

The Scripture does not give us clear guidelines on caring for elderly parents. However, there are people in the biblical record who are exemplary in providing care for elderly parents. Joseph was a person who had a concern about his aged father. At the time Joseph lived in Egypt, his father was far from him. But when God had prepared the way, Joseph moved his father closer to him and took care of him (Gen. 45:9–11). His father and brothers came to Egypt and Joseph

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<sup>11</sup> Kolb and Wengert, *The Book of Concord*, 401.

<sup>12</sup> Robert Kolb, *Teaching God's Children God's Teaching*, (Hutchinson, MN: Crown, 1992), 68.

housed and fed them, as recorded in Genesis: “Then Joseph settled his father and his brothers and gave them a possession in the land of Egypt, in the best of the land, in the land of Rameses, as Pharaoh had commanded” (Gen. 47:11). Even though Joseph was a prime minister, he honored his father, showed him respect and love for him while he sent his brothers to bring him to Egypt. Finally, he showed his honor to his father in action, assigning to him the land of Goshen and promising to feed all his family and their cattle during the famine.

Likewise, Ruth, who demonstrated honor to her mother-in-law, is another example. Ruth departed from her country, religion, and her tribe to care for and live with her (Ruth 1:16). Ruth took great action to care for her mother-in-law. She provided care for her emotional, psychological, and physical needs. When Naomi had lost her husband and two sons, Ruth accompanied her on the way back to Bethlehem and lived with her until Ruth married Boaz. She worked tirelessly to care for her. She gleaned in the field for their daily needs (Ruth 2:17, 18, 23). As she sacrificed everything to care for her mother-in-law, God blessed her with a husband, and through that marriage, she is joined into the genealogy of Jesus.

In general, the Scripture discloses the God of Israel as the guardian of the powerless and poor: “He executes justice for the fatherless and the widow, and loves the sojourner, giving him food and clothing” (Deut.10:18). As God commands Israelites, they were caring for widows, the elderly, and all vulnerable groups of people. The command to care for the elderly and vulnerable was not only for children but also for the community at large. There were widows and elderly who did not have their children taking care of them as they aged and became more vulnerable.

Furthermore, Jesus’ coming to the earth and his life with his immediate family signifies that he is obedient and respectful to his heavenly father as well as his earthly parents. He demonstrates his respect for His heavenly father in words and deeds. He taught God’s will, lived

according to God's law, and accomplished the mission of God on the cross. In His earthly life, He obeyed and esteemed His parents, and assigned a disciple to care for His mother after His death. In doing this, Jesus accomplished the commandment and fulfilled the appropriate cultural expectations of the time.

### **Jesus' Ministry and Elderly Care**

Jesus' life and ministry is "good news of great joy that will be for all the people." (Luke 2:10) The New Testament also affirms that God loves all humankind, including all elderly people. God demonstrated His love in sending His only son to all people in the world (John 3:16). As the Gospel reveals to us, all human beings are loved and valued before God regardless of their age and limitations.

Therefore, the birth and ministry of Jesus are not disconnected from elderly people. The elderly were partakers of his birth as well as in his ministry. In particular, in the birth narratives of Jesus Christ, according to the Gospel of Luke, the aging parents of John the Baptist, Zechariah, and Elizabeth, entered Jesus's birth story (Luke 1:18–25, 41–45). Anna was described as representative of the elderly people who were waiting for the coming of the hope of Israel (Luke 2:25–38). The infant Jesus met this old lady in the Temple. At eighty-four years of age and a widow, Anna was an old prophetess who praised God for the child (Luke 2:36–38). Anna was old, but God used her to become one of the early witnesses of the Messiah who came to save Israel.

### **Jesus' Ministry to the Elderly**

The New Testament does not provide specific instruction from Jesus on how to care for elderly people, but there are general and valuable teachings toward aging people. His ministry addressed people's spiritual and physical needs and cared for all the people including those who

were marginalized by their economic, physical, spiritual, and social status. His teaching in Nazareth declared his priorities to those who were disadvantaged: “The Spirit of the Lord is upon me because he has anointed me to proclaim good news to the poor. He has sent me to proclaim liberty to the captives and recovering of sight to the blind, to set at liberty those who are oppressed, to proclaim the year of the Lord's favor” (Luke 4:18–19). Further, in the New Testament, Jesus drew all people to Himself, men and women, rich and poor, young and old, and cared for their needs: healing their sicknesses and disabilities, feeding the hungry, and even raising a few people from the dead (Mark 2:2, 5, 11). Stephen Sapp states, “The Gospel picture of Jesus thus portrays him as one who indisputably stood firmly in his religious tradition in asserting a deep and keenly felt compassion for the unfortunates of the world.”<sup>13</sup> Jesus affirms that He did not come ‘to call the righteous, but sinners (John 2:17).

Jesus, in his ministry on earth, showed that He cared about the physical and spiritual needs of people. Jesus saw people as individuals and addressed their needs in spiritual and physical ways. He healed their sickness, fed their hunger, and forgave their sins. There are many instances of Jesus calling people to repent and to turn away from their sin. He was also addressing and solving their physical problems. In the Gospels, we see a crowd of five thousand men, and more, gathering to hear Jesus preach and see Jesus heal. As the crowd grew hungry, a little boy moved forward to offer his food to help. Jesus then multiplied the food to feed everyone until they were full (Matt. 15:32–39, Mark 6:30–44, Luke 9:10–17, John 6:1–15).

Furthermore, Jesus responds to people’s physical and spiritual hunger. He told them that he was the “Bread of Life” for their spiritual hunger. “Jesus says to them, ‘I am the bread of life; whoever comes to me shall not hunger, and whoever believes in me shall never thirst’ (John

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<sup>13</sup> Sapp, *Full of Years*, 115.

6:35). He also cares about the physical needs of people, so he teaches us to ask in prayer for “daily bread” (Matt. 6:11). In his Small Catechism, Martin Luther underlines that God gives daily bread to everyone without our prayers but encourages us to pray to receive it with thanksgiving.<sup>14</sup> Thus He affirms that whoever comes to Him, would be satisfied in their spiritual and daily physical needs. There were no physical criteria that limited any people group from coming to Jesus. He welcomed all kinds of people, including elderly people as they faced many challenges as they age.

### Jesus Teaches His Disciples to Have a Love for Others

As successors of His ministry, Jesus teaches and equips the disciples according to God’s ultimate plan for all humankind. In the New Testament, the whole Old Testament law is summed up by the two commandments, love God and love your neighbor. Stephen Sapp describes the central teaching of Jesus as expressed in His life, that is, the Great Commandment (Matt. 22:34–40) instructing love of God and love of neighbor as the fulfillment of the Law.<sup>15</sup> Jesus’ central teaching point is “love,” and he displays “love” in two ways. First, Jesus Christ exhibited a perfect example of compassion and love to all people. He died on the cross for all. Secondly, throughout His earthly ministry, Jesus showed His love for others by serving the poor, the sick, and the distressed. Jesus exhibited in His life constant caring for those disadvantaged groups out of love. Jesus says, “This is my commandment, that you love one another as I have loved you” (John 15:12). Jesus is urging His disciples to have the love that he displayed to them. He expects His disciples to sacrifice their themselves for others, with a caring heart and with visible actions

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<sup>14</sup> Martin Luther, *Luther’s Small Catechism: with Explanation* (Saint Louis, Concordia Publishing House, 2017), 258.

<sup>15</sup> Sapp, *Full of Years*, 111.

for the needy.

### Jesus Teaches His Disciples to Serve Others

Jesus taught His disciples to love God and love others by serving others. In the Gospel of Matthew, Jesus commands His disciples to love God and love their neighbor (Matt. 22:34–40). Then, He told them to put their love into action. Jesus' command is based on His life. Jesus became a servant to fulfill His heavenly Father's plan. He says, "For even the Son of Man came not to be served but to serve, and to give his life as a ransom for many" (Mark 10:45). As Paul writes to the Philippians, He takes the "form of a servant" (Phil. 2:7–8). He demonstrated to His disciples great obedience to the point of death to satisfy His heavenly Father's will. Jesus becomes a servant of God to save the creation and to demonstrate His obedience to His disciples.

Jesus is God but He washed the disciples' feet. He told them "I have given you an example, that you should do as I have done to you" (John 13:15). The significance of washing His disciples was to teach them to be humble servants of Christ. Those who would be servants of Christ must serve disadvantaged people like the poor, sick, homebound, marginalized, and frail elderly people.

Furthermore, the Gospel of Luke indicates that the beneficiaries of the service of Jesus were not relatives, rich friends, and high officials but the disadvantaged groups. Jesus says, "But when you give a feast, invite the poor, the crippled, the lame, the blind, and you will be blessed, because they cannot repay you" (Luke 14:13–14). Stephen Sapp states, "To 'serve' the wealthy and the powerful does not require much out of the ordinary (indeed, such behavior is often in reality 'self-serving'), but to put oneself into the role of servant to those who are considered the dregs of society represents something closer to Jesus' actions and more in line with his

demands.”<sup>16</sup> Thus, Jesus wants His disciples to be a real servants of Him in providing services for the poor and marginalized who cannot repay.

### **Elderly Care in the Early Church**

The elderly care in the early church was derived from Jewish tradition and the Old Testament teachings. The first Christians, the Apostles, and Jesus’s disciples were influenced and shaped by the Old Testament laws and practice of Jewish religious leaders concerning elderly care. The Apostles and disciples were also influenced by Jesus' teaching about honoring the elderly as well as care for his parents and elderly in His teaching and practice. Thus, the early church’s elderly care followed the trend that honors parents and cares for the elderly as a fulfillment of the law, accomplishing the law of God. They learned and understood their faith in Jesus through the existing Hebrew Scriptures, with actions based in the Ten Commandments.

However, during Jesus' ministry, the religious leaders held to men’s traditions that were handed down and which rejected the law of God which teaches people to honor the elderly and properly care for their parents. In Mark 7:8–13, Jesus rebuked the Pharisees and scribes for rejecting the fourth commandment: “Honor your father and your mother.” (Exod. 20:12) According to this command, a son had to help provide for his parents in their old age. But the Jews also had an oral tradition, according to which they used to vow to give a gift to God. They abandoned God’s commandments to hold the oral tradition of past elders. (Mark.7:8) However, when they apply the oral law, it often nullifies God’s commandment.<sup>17</sup> Mark uses the Hebrew or Aramaic word “corban” meaning “a gift to God.”<sup>18</sup> The Pharisees and scribes were using this

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<sup>16</sup> Sapp, *Full of Years*, 114.

<sup>17</sup> Robert H. Gundry, *Commentary on the New Testament: Verse-by-Verse Explanations with a Literal Translation* (Peabody, MA: Hendrickson, 2010), 166.

<sup>18</sup> Gundry, *Commentary*, 166.



word in the religious vow, as an excuse for not helping their parents. If someone's elderly parents needed help from their child, the child would say: "I can't help you. I have promised to give my money to God." In this way, they disobeyed God's commandment to honor their parents. The Pharisees and scribes were sidestepping the clear responsibility of children given in Mosaic Law to honor their parents.<sup>19</sup> Furthermore, Martin Franzmann says

A son might declare that the property which he was duty bound to use for the support of his parents had been dedicated by him to God and was therefore unavailable for secular uses. The sacredness of such a vow was utilized to withhold support from parents, even if the property was not actually given to God. Thus, a pretense of religion served to "make void the word of God."<sup>20</sup>

Their hypocritical religious experiences and tradition ignored proper elderly care and developed terms that could replace elderly care and the honor of parents. By teaching and doing this, they held to the tradition of men. By their offering ("corban") and compromised approach, they tried to replace the God-given divine order and commandment of honoring the father and the mother. But Jesus reaffirmed the necessities of the Fourth Commandment and rebuked them for avoiding this divine law of God of honoring the father and the mother and straightforwardly says to them: you are "making void the word of God by your tradition that you have handed down. And many such things you do" (Mark 7:8–13). Thus, Jesus shows them how honoring parents is necessary and more important than fulfilling a purported offering. So, in the New Testament, honoring the father and the mother is not abolished. It is a part of Jesus's concern and teaching in the New Testament and the Christian tradition. Moreover, it is a divine commandment; it is the Word of God that is given from God to all humanity. Further, Jesus's

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<sup>19</sup> Gundry, *Commentary*, 166.

<sup>20</sup> Martin H. Franzmann, *Concordia Bible with Notes: The New Covenant, Commonly Called the New Testament of Our Lord and Savior Jesus Christ, Revised Standard Version* (St. Louis: W. Collins Sons for Concordia, 1971), 46.

discussion and emphasis concerning the Fourth Commandment affirms that this commandment is irreplaceable and enduring and stands higher than ministry and offerings.

Likewise, the Apostles of Jesus and the early Church believed caring for the elderly and poor was the church's responsibility. Looking after the real widows was part of the Great Commandment and part of their evangelistic responsibility. In Acts chapter 6, the early church had a problem. Hellenists arose against the Hebrews because their widows were not receiving proper care. To address this critical need, the Apostles organized deacons, "seven men of good repute, full of the Spirit and wisdom," and appointed for this caring duty. This affected their congregational structure.<sup>21</sup> However, by doing this, the word of God continued to increase, the number of the disciples multiplied greatly in Jerusalem, and a great many of the priests became obedient to the faith. (Acts 6:1–7) Also, priests who were considered as vital for the Jewish religious establishment obeyed the faith. "The amicable settlement of an internal complaint makes the gospel attractive to the outsiders."<sup>22</sup> Thus, caring for the needy and disadvantaged keeps the church healthy and helps it to multiply.

Ignoring the care of the elderly and needy people disintegrates the church and limits the influence of the church. Luke illustrates well this practical problem and the action of the Apostles in Acts 6. The disciples solved the dispute by assigning "seven men of good repute, full of the Spirit and wisdom" (6:3) and the apostles continued in prayer and "the ministry of the word" (6:4). Thus, the early church reflected her holistic ministry in considering her members' physical demands. Additionally, ignoring the physical needs of needy people among the church

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<sup>21</sup> Charles H. Talbert, *Reading Acts: A Literary and Theological Commentary on the Acts of the Apostles*, rev. ed (Macon, GA: Smyth & Helwys, 2018), 60.  
<http://search.ebscohost.com.esl.idm.oclc.org/login.aspx?direct=true&db=nlebk&AN=1876831&site=ehost-live>.

<sup>22</sup> Gundry, *Commentary*, 486.

was a hindrance for the ministry of the word and the harmony of the members. Thus, the early church took responsibility for addressing the physical needs of its members and delegated the deacons to the ministry. Consequently, the church continued to grow in her ministry and multiplied in Jerusalem and beyond. (Acts 6:1–7).

Moreover, in the first century, Greco-Roman culture also “reinforced filial honor and obedience towards parents.”<sup>23</sup>The filial obligation of honoring parents is certainly not against the commandments in the Christian or Jewish Scriptures. In the early first centuries, a filial obligation is a duty that children must offer to their parents. Thus, in the Old Testament commandments, Jewish tradition, and Greco-Roman culture, the elderly are lifted high, and care for the elderly is bannered as a spiritual commandment and a good work accepted by the community.

However, J. Gordon Harris considers that the Scriptures hardly address the issue of caring for elderly people. He points out that the Scripture's main characters in the New Testament, “Jesus and Paul speak passionately for human dignity, unity, and justice but hardly deal with aging issues.”<sup>24</sup> Harris goes on to say the reason that less emphasis is given by those key figures of the New Testament might be that Christianity already largely recognized and practiced the contemporary culture’s views of respect for elderly people.<sup>25</sup> Even though Jesus and Paul do not explicitly address the issues of aging and of caring for the elderly, Scripture already unveiled the basic law in the Old Testament and New Testament. Since in many other ways, Jesus and Paul dealt with justice and human goodness toward disadvantaged groups among early Christian churches, undoubtedly, elderly people were also addressed in their ministry. Likewise, the Old

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<sup>23</sup> Harris, *Biblical Perspectives*, 76.

<sup>24</sup> Harris, *Biblical Perspectives*, 77.

<sup>25</sup> Harris, *Biblical Perspectives*, 77.

Testament Decalogue demonstrated that honoring and respecting elderly people of the community, especially one's elderly parents, was not limited to being polite to them in words but also included caring and providing for their physical needs.<sup>26</sup> The early church reflected the same concern, based on the commandment. The early church leaders emphasized the responsibility of children in caring for their parents and the church's responsibility for widows who are without children.

Furthermore, Jesus' ministry for the sick, disabled, poor, marginalized, and outcasts was significant. His ministry encouraged the early Christians to take seriously caring for the poor, the orphan, and the widows. As we see in Acts, all believers share their possessions so that the needy can have a share: "Now the full number of those who believed were of one heart and soul, and no one said that any of the things that belonged to him was his own, but they had everything in common ... there was not a needy person among them" (Acts 4:32–34). This definitely implies that there was strong caring and sharing for those who are in need.

Further, James in his epistle states the importance of caring for the needy. He also considered such caring as an act of religion that was valued and accepted before God and says, "What good is it, my brothers, if someone says he has faith but does not have works? Can that faith save him? If a brother or sister is poorly clothed and lacking in daily food, and one of you says to them, "Go in peace, be warmed and filled," without giving them the things needed for the body, what good is that? So also, faith by itself if it does not have works, is dead." (James 2:14–17). This message anchored the necessity of serving the whole person and challenged the dichotomized view that would address the spiritual or the physical needs only. James's intention is all-inclusive and a call to apply the Biblical value of caring for each other and applying the 4<sup>th</sup>

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<sup>26</sup> Sapp, *Full of Years*, 119.

Commandment.

The Apostle Paul, in his first letter to Timothy, describes why we care for aging parents and makes clear who bears the responsibility. First, he says that caring for aging parents is right and pleases God. “But if a widow has children or grandchildren, let them first learn to show godliness to their household and to make some return to their parents, for this is pleasing in the sight of God” (1 Tim. 5:4). Paul affirms that it is right and appropriate for adult children or grandchildren to care for elderly families. The care and honor given to their elderly families satisfies not only the recipients of the care but is pleasing to God Himself.

Secondly, Paul states that caring for aging parents is practicing the faith. However, refusing to provide care to aging parents is denying the faith. He says, “But if anyone does not provide for his relatives, and especially for members of his household, he has denied the faith and is worse than an unbeliever” (1 Tim. 5:8). Paul intended to strongly criticize those adult children who failed to show any care for parents because their action displeases God and hurts elderly parents. Also, an adult who claims faith in Jesus has a biblical responsibility to consider the appropriate level of care and support for a parent in need. Likewise, the book of James repeats attitudes afforded to elderly people in the Old Testament, to care for widows and orphans in their affliction. “Religion that is pure and undefiled before God the Father is this: to visit orphans and widows in their affliction and to keep oneself unstained from the world” (James 1:27). Pure worship of God demands caring for frail people and keeping oneself from sinful practices of the world.

Finally, the Apostle Paul insists that caring for aging parents is primarily the responsibility of the family, not the Church. He says, “If any believing woman has relatives who are widows, let her care for them. Let the church not be burdened, so that it may care for those who really are

widows” (1 Tim. 5:16) and, “But if a widow has children or grandchildren, let them first learn to show godliness to their household and to make some return to their parents, for this is pleasing in the sight of God” (1 Tim. 5:4). These verses show that caring for aging parents and relatives is a responsibility given to adult children or family members. In the instances where the elderly have no children and family members, the church is responsible to give care for the elderly.

Furthermore, the Bible directly or indirectly demonstrated that caring for humanity involves addressing both spiritual and physical needs. As described above, Jesus’ ministry addresses people's spiritual and physical needs. Jesus’s ministry was holistic. He cared for his followers and others' physical and spiritual needs. He was concerned about, and addressed, their spiritual need by teaching the true Word of God, and their physical needs by healing their sicknesses and feeding them when it was necessary. Moreover, he made known God the creator and rescuer of mankind. (John 1:18).

In the same way, the Apostles and the early church displayed what they learned from Jesus and the Old Testament traditions, did practical care for widows, the poor, and orphans, and assigned servants who cared for the physical needs of their members. Therefore, the early church was known for caring for needy members among them. Likewise, the New Testament Church is expected to follow the early church ministry model and Jesus’ ministry that demonstrates God’s love and compassion for the needy, which includes the elderly and widows.

Therefore, the Christian view of holistic ministry originated from Biblical truth which is revealed in both New and Old Testament teaching. It is also based on the great commandment and the great commission. Jesus said, “And you shall love the Lord your God with all your heart and with all your soul and with all your mind and with all your strength” (Mark 12:30) The second is this: ‘You shall love your neighbor as yourself’ (Mark 12:31). There is no other

commandment greater than these. Jesus also gave a great commission to His disciples in order to make disciples of the nations (Matt. 28:16–20). The holistic approach is reflected in both the great commandment and great commission.

Therefore, the Christian view of holistic ministry is Bible-based and is thus different from secular and traditional views of holistic ministry. The Bible demonstrates the person as spirit, soul, and body. Paul described this in his epistles to the Thessalonians and says, “Now may the God of peace himself sanctify you completely and may your *whole spirit and soul and body* be kept blameless at the coming of our Lord Jesus Christ” (Thess. 5:23). Here, Paul makes a distinction that highlights the importance of seeing the reality that man constituted as both physical and spiritual. In the Christian view of the whole person, when a person comes to faith in Christ a fallen and depraved nature of man would be killed and made alive through Holy Baptism. Paul describes “to put off your old self, which belongs to your former manner of life and is corrupt through deceitful desires, and to be renewed in the spirit of your minds, and to put on the new self, created after the likeness of God in true righteousness and holiness” (Eph. 4:22–24). And Paul emphasized on a life renewal “We were buried therefore with him by baptism into death, in order that, just as Christ was raised from the dead by the glory of the Father, we too might walk in newness of life” (Rom. 6:4). Human beings are sinful because of original sin. This sinful nature must be renewed through rebirth or baptism. Thus, Christianity’s holistic view considers the whole person that needs renewal in the spirit through Holy Baptism.

Moreover, as it is described in Chapter Three, the secular holistic approach of elderly care addresses the physical and spiritual needs of an individual. In this approach, the secularists acknowledge a variety of “spiritual” ideas and begin that individuals may believe to be the ultimate source of their faith and beliefs. The Bible-based holistic approach recognizes that

human beings are sinners and would come to Christ with the help of the Holy Spirit made a new creation through baptism. The scientific spiritual component which associates spirituality with anything which a human being can worship, including self-worship, cannot address the person who is dead by the transgression of Adam and which can be made alive only through the death and resurrection of Jesus Christ. Similarly, the African traditional spiritual components which are mainly related to ancestral spirit, cannot renew the fallen man. The fallen man needs to be rightly addressed by the Word of God, which alone can give real spiritual health and satisfaction through the Holy Spirit. Uniquely, the Christian holistic care for the elderly not only addresses the elderly's physical, psychological, and emotional needs but also their true spiritual needs which often go wholly unrecognized by the secular ideas about man's "spiritual" component. It does so through the Word of God in worship, prayer, and Christian fellowship. Moreover, Christian care for the elderly goes beyond this life and cares for the elderly's spiritual relationship with God; it is concerned about eternal life, which is granted through the death and resurrection of Jesus Christ.



## CHAPTER FIVE

### IMPLEMENTING GODLY GUIDANCE AND LEADERSHIP FOR THE EECMY IN THE CARE OF THE ELDERLY

In the present day, elderly people in Ethiopia are facing challenges inside and outside of the church. The life experience of Bogalech, illustrated in the first chapter, is an experience of innumerable elderly people in Ethiopia. Many of these elderly people are church members and ministers who have remained at their homes and are facing multiple challenges. They are facing social, economic, psychological, emotional, and spiritual problems for many reasons. Due to the effects of globalization, socio-economic and socio-cultural conditions, the indigenous elderly care system which demands that adult children provide support for the elderly parents, is declining and has left the elderly vulnerable. As a result of globalization and societal changes, adult children often move to the city or another country for education, better jobs, marriage, or for political or economic migration. Older people are then left alone without adequate assistance from their children and a proper care system from society, government, or the church.

As life expectancy is advancing and people live longer, undoubtedly the number of elderly people in the EECMY church is growing and needs serious attention and help.<sup>1</sup> Most of the EECMY elderly members encounter the same challenges as others who are outside the church. They face economic constraints, loneliness, social limitations, a poor health system, and an inability to attend church services. Thus, the church and other stakeholders must be attentive to physical and spiritual needs of elderly people.

As this thesis discussed in the previous chapters, some scientists believe that human beings

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<sup>1</sup> The Ethiopian Evangelical Church Mekane Yesus, posted on February 15, 2018, accessed on June 5, 2021. <https://www.facebook.com/525043384280330/posts/a-very-interesting-morning-about-care-for-elderly-people-and-what-the-role-the-c/1513120705472588/>.

consist of body, soul, and spirit and it is the whole person who has physical, psychological, and spiritual needs. Based on these views, more importantly many scientists who are in health care and social work community believe the importance of holistic care for elderly needs. Physical needs cannot be treated independently because the body, soul, and spirit are all interrelated. In the same way, the African traditional holistic care approach is concerned with the right daily care of the body, soul, and spirit. They believe that any physical care is integrated with the spiritual aspect of a person and any incident in this life is associated with the spiritual world.

Likewise, many medical health care scientists advocate the unique nature of the human being over against other creatures. According to their views, the human being has mind, memory, reason, and feelings to interact with other living and nonliving things. Thus, contemporary health care science addresses the individual's body, soul, and spirit, since a human being's needs are all interconnected with each other.<sup>2</sup> Therefore, according to these views, elderly health care should address both the physical and spiritual needs of the individual.

Similarly, in the African traditional religions, people worship ancestral spirits, magic, and witchcraft which are subtly related to evil spirits. Many elderly people in the African traditional religion perform rituals and religious practices. As mentioned previously, elderly people typically prefer traditional medicine based on its affordability as well as its familiarity, being established through traditional cultural practices.<sup>3</sup>

Thus, both secular holistic care and African traditional holistic care provide services to the well-being of the elderly person's physical and spiritual aspects. The secular holistic approach

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<sup>2</sup> E. Anthony Allen, *Caring for the Whole Person*, (Monrovia, CA: MARC, 1995), 6.

<sup>3</sup> WHO defines traditional medicine as "the sum total of the knowledge, skills, and practices based on the theories, beliefs, and experiences indigenous to different cultures, whether explicable or not, used in the maintenance of health as well as in the prevention, diagnosis, improvement or treatment of physical and mental illness" [https://en.wikipedia.org/wiki/Traditional\\_medicine?](https://en.wikipedia.org/wiki/Traditional_medicine?)

considers all spiritual aspects that the person believes in, and the African traditional holistic elderly care also considers all views and practices related to their beliefs, ancestral spirits, and ritual practices. However, the Christian's way of addressing the whole person is different from the two approaches. The spiritual matter in the Christian holistic approach is concerned about the spiritual health and wellbeing of humanity that is maintained through true relationship with and worship of the Triune God. Furthermore, Christian holistic approach distinctively sees that human beings have fallen nature that has to be killed and made alive when they come to faith through baptism. They would experience new life and become new creation in Christ. Then, as Christ demonstrated his love and concern for humanity, Christian's care for sick, poor, and frail elderly.

Moreover, the Scripture reveals that God cares for human physical and spiritual needs and provides for all people who are created in His image. Jesus' earthly ministry also reflected God's plan for human beings and His concern for the whole person. Jesus had a compassionate heart to listen to and understand those who are marginalized and disadvantaged groups of people. He has also summarized the commandment as loving God and neighbor and handed over the holistic ministry to his church. The disciples carried out the holistic ministry as Jesus taught them to love and serve others. The early church also had systems in place to look after older widows.

Consequently, the EECMY has developed a holistic ministry theology based on the biblical approach for human physical and spiritual needs. The former EECMY president Rev. Dr. Waqiseyum Eddosa highlights the teaching of Jesus when He fed five thousand people in Matthew. Jesus had a conversation with His disciples about how to feed the crowd in a desolate place. Jesus says, "They need not go away; you give them something to eat" (Matt. 14:16). The

church has something to provide for those who are vulnerable.<sup>4</sup> This biblical witness calls the church to serve the spiritual needs as well as physical needs of the people. Therefore, the EECMY holistic ministry of the church emphasizes God’s love demonstrated to all people. The church as the body of Christ shares God’s love in words and actions through her diaconal ministry. Further, the existing economic, social, and health situation of most people in Ethiopia invites the church to display God’s love and care for vulnerable people in and outside the church.

Therefore, since 1970, the EECMY has developed and introduced a “Holistic Ministry or Holistic Theology” to serve the spiritual and physical needs of people in Ethiopia. Since then, her ministry motto is *servicing the whole person*. Based on this holistic approach, her ministry scope is to address the need of the body, spirit, and soul. The purpose of holistic ministry is to display God’s love for all people created in the image of God, especially for those vulnerable and unprivileged groups.<sup>5</sup> Therefore the church has been providing spiritual and physical services to its members as well as the community at large.

### **How Can the Church Offer the Best Care for the Elderly?**

As discussed, the first and the most important way to offer the best care for the elderly is to understand the Christian views and approach of holistic ministry. The church should imitate the Bible-based holistic ministry and is expected to follow Christ’s model ministry which cared for the whole person in His earthly ministry. The early church experience can be a model for the contemporary church to consider elderly care as part of the church’s ministry. The church can

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<sup>4</sup> Wakseyoum Idossa, “Serving the Whole Person” produced by Jeffrey Khloa, Concordia Seminary, St. Louis, March 3, 2016, Miscellaneous Seminary Lectures, [https://scholar.csl.edu/sem/Ethiopian\\_Evangelical\\_Church/schedule/1/](https://scholar.csl.edu/sem/Ethiopian_Evangelical_Church/schedule/1/).

<sup>5</sup> World Council of Churches, “Ethiopian Evangelical Church Mekane Yesus (EECMY),” <https://www.oikoumene.org/member-churches/ethiopian-evangelical-church-mekane-yesus-ecmy>.

offer the best care for the elderly by keeping the right balance between spiritual and physical needs. For example, every congregation should have responsible ministers for both spiritual and physical needs. For the ministry of the word, pastors, and evangelists should be mainly responsible to provide spiritual services to the elderly. For the physical needs of the elderly, forming an elderly care ministry in each congregation would help to address their needs.

Some congregations have a strong diaconal ministry that provides physical, social, and spiritual care for elderly people. The diaconal ministry is managed by passionate and volunteer members of the congregation. Mostly, diaconal ministry members have a limited ability to address a variety of elderly and other members of physical needs. But they more focus on what they can do with their limited ability and resources. For example, the main problem of elderly people is a lack of finance (for medications, food, and house rent fee), and loneliness. To pay some of their bills, the ministry plan and organize permanent and temporary fund-raising strategies. In Ethiopia, there are few licensed counselors in the capital city so that there are no formal counseling services for most populations of the country. In most EECMY congregations' experience, for those who feel loneliness, and mourn, the diaconal ministry team, and pastors do visit where they are, offer prayers, and spend time with them. For mental and physical illness, they support them financially and accompany them to the health institutions to get appropriate treatments.

Furthermore, the congregations' diaconal ministries have no trained fulltime deaconess. Thus, in most congregations, pastors, evangelists, and elders of the congregations are responsible to organize and provide both physical and spiritual care for elderly people. As the EECMY has a shortage of pastors and ministers, in many areas, one pastor might oversee many congregations. Hence, it is impossible to follow up and even to provide Holy Communion regularly. Therefore,

appointing deaconesses for elderly care ministry in all congregations would help to address the elderly physical needs while pastors are devoted to spiritual services.

Thus, the church's holistic approach is best suited to address the whole person. On the other hand, the church, which is commanded to love and care for the whole person, has sometimes dichotomized, and failed to address the whole person. For example, some EECMY congregations think that the church's duty is only dealing with the spiritual matters of the people. As a result, they only provide prayers for the elderly who are starving and sick. Even if the church's primary work is serving the spiritual aspects, she should consider physical needs of the elderly. The church cannot serve exclusively the spiritual needs of the elderly. When the church considers the whole person as the center of her ministry, then she can offer the best care for the elderly.

Therefore, with this holistic approach and view, the EECMY is in the right position to care for elderly people. Her ministry motto also demands her to look after each generation and each age group of the community including the elderly. More importantly, the concept of holistic ministry in the EECMY is mainly focused on both the spiritual and physical development of people. For example, the Development and Social Services Commission wing of the EECMY operates a variety of development projects for the community while the Evangelism wing is mainly dealing with evangelism and spiritual services. The development services provide essential services to improve the livelihood of the members and community at large. Also, the church offers the gospel message to the development beneficiaries for those who do not come to faith. By doing this, the church addresses the physical, spiritual, emotional, and psychological aspects of an individual. Therefore, the church provides appropriate physical and spiritual care for the elderly who are inside and outside the church.

Certainly, the scope of the Word of God, which has asked us to honor father and mother, has also asked us to give due attention to the elderly. This goes beyond the church members and includes all elderly people. However, the holistic ministry approach of the EECMY, which is dedicated to serving the whole person and committed to addressing underprivileged people, was not spearheaded to address the elderly's critical needs. The EECMY has established holistic ministry-focused institutions to offer services for the community like hostels, orphanage centers, hospitals, clinics, colleges, and schools in most parts of the country. However, there is no single elderly nursing home and elderly-focused services run by the church. It may be the case that the elderly members' issue might be overshadowed by the other ministries of the church.

Nevertheless, Diakonia ministry offers physical and spiritual services for all disadvantaged groups of the congregation. The elderly people are part of this disadvantaged group and benefit from the ministry. However, they are not addressed explicitly as their specific spiritual and physical needs differ from others. This pioneering, holistic ministry-led church has not explicitly pioneered to serve the whole need of the elderly among her members and among those outside of the church who are in critical need in the community. Recently the pressing needs and push from internal and external sources have provoked the church to think about the elderly. So, the EECMY has initiated elderly ministry as part of her diaconal ministry.

This pressing need for elderly care in Ethiopia demands an orchestrated elderly-focused response and wider coverage to respond to these critical and multidimensional challenges. Therefore, the church should respectfully and with godly guidance develop some practical and strategic actions to address the elderly challenges. Particularly, at the congregation level, an individual or a group of elderly first needs to be heard and valued. They should be encouraged to share their challenges, stories, and visions, and congregational leaders must listen. Especially

those elderly people who live alone due to societal changes look for psychological, emotional, and spiritual support from the church. Most of them might not have families who care for them and listen to their worries and fears. They might feel lonely, unaccepted, unfit, incompetent, and consequently decide not to attend worship services. The story of Bogalech shows she expected a visit and help from the congregation community, but no one came to visit, and no one shared her burden. Thus, as Christ valued and care for all human beings, the church is there to care for them and deliver the gospel of Christ to all human beings. Particularly, the elderly who paid their best in their adult age and who are in critical needs in their old age. In a culture that respects and values the elderly, the church is expected to consider and listen to the challenges and expectations of the elderly.

Then, it is vitally important that the church, identify appropriate ways of caring for the spiritual life of elderly members. It is possible to address this need in two ways: through communal worship in the congregation, and in home-bounded settings. The congregational worship setting is for all elderly people who can join worship services. In this setting, they would gather around the Word and Holy Communion as well as encourage each other's Christian faith and life. The home-bounded worship setting would be for those who are not able to join the congregational worship. The Sacrament of Holy Communion is administered to them in private mostly by appropriate ministers of the congregations. The celebration of the Lord's Supper reminds them as they are part of the fellowship of the congregation as well as in fellowship with all the saints of God. Further, some elderly people who were ministers and pastors in the church desire mutual spiritual and practical support with their group which certainly includes spiritual care through Bible study, prayer groups, sharing life experiences, and fellowship. Thus, when the congregation welcomes those retired pastors and ministers to the elderly care ministry, this might



give them an opportunity to continue to serve the other elderly in a way that might also solve the shortage of human resources. Also, it will help them to socialize and to spend time with each other.

Finally, elderly people who are without any practical support from their families may rightly seek and expect some support from the church and Christian brothers and sisters. As Paul says, “Let the church not be burdened, so that it may care for those who are truly widows” (1 Tim. 5:16). Paul reminds the church of their responsibility to care for those who do not have a family. As indicated in chapter two, some elderly people are without shelter, food, and clothes and experiencing street life. The EECMY should develop a strategic plan to accommodate those homeless elderly people. This may involve the establishment of a holistic elderly care center that could help to address the elderly spiritual and physical needs. Or it might also involve creating systems that address the home bound and economically poor members of the congregations. For example, establishing Idir (as referenced in chapter two) associations among the members of the congregation is a better way to help home bound and poor elderly. Possibly the church should exploit the Idir model and create its own uniquely Christian practice for the sake of the impoverished elderly to address their physical and spiritual needs.

### **Conclusion**

The Church is God’s regent, sent to accomplish God’s divine will on earth. God who loves the world, appointed the Church to extend His love to mankind and His creation at large. Therefore, the Church is among the community to serve people—people who are created in the image of God. Jesus also served marginalized people with love and compassion during his earthly ministry. Now, the church is called to extend Jesus’ love and care through her ministry to all people including the elderly. The church is sent to care and to be compassionate toward this

disadvantaged group as Jesus cares and loves them unconditionally.

The EECMY as Christ's church in Ethiopia serves the spiritual and physical needs of the whole person with love and compassion. However, elderly church members are not yet adequately addressed by a holistic ministry of the Church due to some limitations. The EECMY, whose motto is "serving the whole person," is not focused on developing adequate elderly care systems for her elderly members and others in the community at large.

Therefore, this pioneering, holistic ministry-led church has not yet explicitly served the whole need of the elderly among her members and others who are in critical need in the community. However, the current pressing and pushing situation of economic and societal changes within the country have alerted the church to the need to establish a holistic elderly care ministry under the diaconal ministry of the church. The head office Diaconal ministry of the church has been planning and developing strategies for the implementation of the elderly care ministry at all congregational levels of the church.

Lastly, for the EECMY to accomplish this God-given ministry and to give the best possible care for the elderly, it needs to recognize herself as a representative of God and consider the elderly as people who are created in the image of God and recognize them as those for whom Christ died. The church also should consider such ministry as an opportunity to honor God through serving them and their critical needs. Then, the church can walk alongside the elderly in all possible ways and can extend the scope of her holistic ministry to be elderly-inclusive. The congregations of the church would be welcoming elderly people in listening to their challenges and providing spiritual and physical care for those who live without proper family support.

### **Further Recommendations**

In addition to that which is suggested above, the church might extend its God-given

influence and ministry to the elderly by taking the following key steps.

- The Church could care for her retired ministers by developing an adequate retirement allowance and possible care center strategies which can offer them holistic service. Practically, most EECMY retired pastors, evangelists, and their families are economically poor and look for help. Their pension is not sufficient to cover all expenses of their family. So, the retirement allowance would provide for the economic constraints of pastors and evangelists in their later years.
- The church could develop informal and formal systems that care for the elderly at each congregational level and raise funds for the elderly care from congregations. The simple approach would help create elderly-friendly congregations. At the congregation level, the church might develop activities like an elderly club, and free coffee time for the elderly. Likewise, at the head office level, the church should arrange long-term plans to care for the elderly such as holistic nursing homes and some health institutions that provide health services for the elderly as well as raise money for the elderly ministry of the church. These health institutions could provide a discount and possibly free services for the elderly. In addition, they would provide free counseling and prayer services.
- Moreover, to sustain the elderly care system, the church could help restore and revitalize a family care system, promoting it and maintaining it for sustainable elderly care. Even if the family supporting system is declining due to societal changes, the church could reach a new generation teaching them godly ways of fulfilling responsibilities in family life. The church could evaluate and check its young members whether the Fourth Commandment is taught, understood, and followed with regard to care for the elderly. Further, the church could develop a plan to conduct young family consultations on family

and church responsibilities in caring for the elderly. The church could work closely with families through her elderly care ministry.

- Likewise, congregations should act like a family for those elderly without relatives in providing physical, spiritual, psychological, and emotional supports. The holistic ministry-oriented church is expected to be family and home for those who are homeless and abandoned by their communities. This could be done by establishing and empowering the elderly ministry at all congregation levels. As a family, congregations would demonstrate love and compassion to the elderly as Christ did for all people. Practically, the congregations would encourage during their hard times, visiting them where they are, considering their interests and needs. By doing this, they would receive a clear message that they are not forgotten by the body of Christ and feel as they are the members of the family.
- The EECMY has many senior members who served the church and contributed significantly to the expansion of the Gospel in the country as well as served directly in the leadership of the church. The church should keep acknowledging what God has done through their past ministries for the growth of the church and provide opportunities for these wise servants to advise on current issues facing the church. Furthermore, as these now aged servants also have spiritual and physical need, the church could do visitation and listen to their concerns and expectations.

Finally, as the church obeys her Lord and strives to serve all those within her membership and wider communities, it will certainly find ways to care for a precious generation of people who are increasingly finding themselves forgotten by a fast-moving world. And in doing this work God will be honored, faith will be strengthened, lives will be transformed, and the church

will prosper.

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