

**INFLUENCE OF GUIDANCE AND COUNSELLING SERVICES ON THE  
SELF-EFFICACY OF ORPHANED CHILDREN LIVING IN ORPHANAGES  
IN BUNGOMA COUNTY, KENYA**

**BENSON MURUMBA NASONGO**

**A Thesis Submitted to the Institute of Post Graduate Studies of Kabarak University  
in Partial Fulfillment of the Requirement for the Award of Doctor of Philosophy in  
Guidance and Counselling**

**KABARAK UNIVERSITY**

**NOVEMBER, 2021**

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**Signed:** \_\_\_\_\_

**Date:** \_\_\_\_\_

Dr. James Kay  
School of Education,  
Kabarak University

**Signed:** \_\_\_\_\_

**Date:** \_\_\_\_\_

Dr. Bernard Chemwei.  
Department of Education,  
Kirinyaga University

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## **DEDICATION**

This thesis is dedicated to my wife Biliah Rinah and my children Joshua, Tony, Ely and Eva. It is also dedicated in equal measure to my Parents Samwel Nasongo and Jonece Naliaka whom all encouraged and prayed for me throughout the time of this Thesis work. I am also greatly and deeply indebted to my classmates and friends whose encouragement was invaluable. I cannot forget to thank most sincerely, my brother Dr Joseph Wamocha and his wife, Dr Lydia Wamocha, for their unceasing prayers and intellectual guiding they offered throughout this work. To you all, I salute you.

## **ACKNOWLEDGEMENT**

I wish to acknowledge the entire academic staff of Kabarak University for the opportunity they offered me to pursue my Doctorate Degree in their prestigious institution. I also wish to offer my deepest and sincerest gratitude to my Supervisors Dr. James Kay and Dr. Bernard Chemwei, who guided me both at the proposal level and in writing this Thesis Report. The two Dons were knowledgeable, professional, and patient and allowed me the space to grow and become an independent thinker. They offered very positive and incisive criticism that helped to move this work to fruition. I will forever remain indebted to them.

## ABSTRACT

The primary focus of many orphanages in Kenya is the provision of shelter and food with little investment in mental health care provision. It presents significant implications for the self-efficacy of children brought up in orphanages, which could persist in their adulthood. Moreover, the orphanages offer general guidance and counselling programs, with little effort directed to counselling services offered for purposes of adjusting and coping with orphanhood. Research has not adequately established the link between counselling services provision and its relationship with orphans efficacy. This study was aimed to find out the influence of guidance and counselling services on the self-efficacy of orphans living in orphanages in Bungoma County. The objectives of the study were; to establish the influence of individual guidance and counselling services on the self-efficacy of orphaned children living in orphanages in Bungoma County, to establish the influence of group guidance and counselling services on the self-efficacy of orphaned children living in orphanages in Bungoma County, to determine the influence of career guidance services on the self-efficacy of orphaned children living in orphanages in Bungoma County, to establish the influence of guidance and counselling referral services on the self-efficacy of orphaned children living in orphanages in Bungoma County and to determine the influence of mentorship programs on the self-efficacy of orphaned children living in orphanages in Bungoma County. Four theories (Adlerian theory, Systems theory, Self-determination theory and the social learning theory) were used in this research. The researcher adopted descriptive survey research design. The population of the study was 2132 orphans in the 20 orphanages within Bungoma County. Two hundred and forty (240) of the orphans in all the 20 orphanages were purposively sampled and interviewed. One (1) caregiver and one (1) administrator (again per orphanage) were interviewed, totalling to 280 respondents. Questionnaires and interview schedules were used to collect data from the respondents who included the orphans, orphanages administrators and caregivers. The self-efficacy scale of 1-4 was converted to between 0-100. The data was prepared, coded and analyzed using the Statistical Package for Social Sciences (SPSS) version 20. Strict ethical considerations were observed during the study. The study established that there was a positive and significant relationship between self-efficacy of orphaned children and individual guidance and counselling services, group guidance and counselling services, career guidance services, guidance and counselling referral services and mentorship programs. The study conclude that guidance and counselling services significantly influences the self-efficacy. The study's recommendation for a policy was that the government should come up with a policy to guide all the orphanages in Kenya, including the process of guidance and counselling. Recommendations for practice were that every orphanage should engage the services of a qualified and practising guidance and counselling specialist for the orphans. Individual guidance and counselling services should be encouraged in orphanages, as they are effective. Group guidance and counselling services should be encouraged in orphanages as they create confidence among orphans. In addition, referral, mentorship and career guidance and counselling services help the orphans open up and focus more on their engagements for purposes of improving their lives in the post-orphanage days. The study recommends further studies on the influence of guidance and counselling services on the quality of life of the orphans, with special reference to their post-orphanage lives as well as on academic performance of the orphans living in orphanages.

**Key Words:** *Guidance, Counselling, Self-efficacy, Mentorship, Career, Referral services, Respondents, Post-orphanage.*

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## LIST OF ABBREVIATIONS AND ACRONYMS

<b>AIDS</b>	-	Acquired Immune Deficiency Syndrome
<b>BC</b>	-	Before Christ
<b>CBOs</b>	-	Community Based Organizations
<b>FBOs</b>	-	Faith-Based Organizations
<b>GSE</b>	-	Generalized Scale of Self-Efficacy
<b>HIV</b>	-	Human Immune Deficiency Virus
<b>IQ</b>	-	Intellectual Quotient
<b>KESSP</b>	-	Kenya Education Sector Support Program
<b>MoE</b>	-	Ministry of Education
<b>MoEST</b>	-	Ministry of Education, Science and Technology
<b>NACADA</b>	-	National Agency for the Campaign against Drug Abuse
<b>NCCS</b>	-	National Council for Children’s Services
<b>NGOs</b>	-	Non-Governmental Organizations
<b>SDT</b>	-	Self-Determination Theory
<b>SLDF</b>	-	Sabaot Land Defense Forces
<b>SPSS</b>	-	Statistical Package for Social Sciences
<b>UNAIDS</b>	-	United Nations Program on HIV/AIDS
<b>UNESCO</b>	-	United Nations Educational Scientific and Cultural Organization
<b>UNICEF</b>	-	United Nations Children’s Emergency Fund
<b>USA</b>	-	United States of America
<b>USAID</b>	-	United States Agency for International Development
<b>WHO</b>	-	World Health Organization.



## OPERATIONAL DEFINITION OF KEY TERMS

**Adoption:** In the context of the current study, adoption will be operationalized as the act of legally taking another's child and bringing it up as one's own.

**An orphanage:** In the context of the current study, the term 'an orphanage' will be used to refer to an institution for the housing, care and education of orphans.

**Career guidance:** For purposes of the current study, career guidance will be defined as a comprehensive, developmental program designed to assist orphaned children living in orphanages in making and implementing informed educational and occupational choices in Bungoma County.

**Charities:** Within the context of the present study, Charities will mean 'charitable fund, foundation, or institution'.

**Client-centred therapy:** In the context of the current study, 'client-centred theory' will be used to state that solutions to a client's challenges lie with the same client.

**Destitute:** Within the context of the current study, the term 'destitute' will be used to mean the state of being extremely poor and lacking the means to provide for oneself.

**Gender:** In the context of the current study, gender as a term will be used operationally to refer to the sex of a child being male or female — the biological definition of a boy or girl.

**Mentorship:** For purposes of the current study, mentorship will be defined as a program to develop awareness on the relationship between academic studies and the life occupation of orphaned children in orphanages in Bungoma County.

**Operant reinforcement:** In the context of the present study, 'operant conditioning' will refer to B.F. Skinner's description of how the results of a particular behaviour affect the future occurrence of the same behaviour in someone.

**Orphans:** For the purpose of this study, orphans are children (both male and female) who reside in orphanages

**Post-Orphanage:** Within the context of the current study, “Post Orphanage” will refer to the period after the orphans have been officially disengaged from the orphanage and living independently.

**Psychoanalysis:** Within the context of the current study, Psycho-social analysis will refer to a systematic structure of theories concerning the relation of conscious and unconscious psychological processes.

**Self-Efficacy:** Within the context of the current study, “self-efficacy” will refer to the belief in one’s capabilities to organize and execute the courses of action required to manage prospective situations.

**Students:** For the purpose of this study, students are the school-going orphans

**Therapy:** Within the context of the current study, ‘therapy’ will refer to the treatment of disease or disorders, as by some remedial, rehabilitating, or curative process

**Vulnerable Children:** Within the context of the current study, ‘vulnerable children’ will be used to refer to children who have the possibility of being wounded or hurt.

# CHAPTER ONE

## INTRODUCTION

### 1.1 Background of the Study

The development of self-efficacy originated in Europe and the United States of America in the 1900s. In 1911, Godwin organized an extensive self-efficacy program in the USA that catered for students. The emphasis was on vocational information, awareness of the world of work, the location of employment and reduction of examination anxiety (Glazer & Liu, 2017). Godwin noted that since the 1950s, popular views of self-efficacy had changed rapidly and that understanding youth's problems are among the functions of the orphanages towards the achievement of self-efficacy through guidance and counselling.

Self-efficacy has been achieved through guidance and counselling services that have been embraced in countries across the world to address the various needs of its citizens (Maddux, Mercandante, Prentice-Dunn, Jacobs, & Rodgers 2011). In Japan, the goal of high school counselling is to "help every student develop abilities of self-understanding, decision-making, life planning, and action-taking to be able to adjust in the career options he or she decides to pursue" (Watanabe-Muraoka, Senzaki, & Herr, 2001, p. 101). In France, orphanage counselling was started in 1922 and by the late 1930s was adopted by the educational system and seen as a necessary part of the institution. Orphanage counsellors assist students with vocational guidance.

In Thailand, in order to achieve self-efficacy, counselling often incorporates advice-giving by teachers. In Israel, orphanage counsellors devote one-third of their time to classroom instruction and the rest of personal and social counselling with the aim of achieving self-efficacy (Maddux et al., 2011).

Career counselling is somewhat curtailed because students are required to enlist in the armed services after high school. In Hong Kong, school guidance and counselling is becoming more of a service that is incorporated into the whole school with an emphasis on prevention. Turkey has a fifty-year history of counselling development. There is a professional association that publishes a journal and sponsors conferences. Many orphanages have counselling services and receive support from the Ministry of National Education. Spain, Portugal, Denmark, Belgium, Finland, France, Italy, the Slovak Republic, and Norway are among many countries using the web to make career and counselling information available to guidance experts. As counselling continues to define itself as a profession and to show its usefulness empirically, counselling services in orphanage are likely to expand worldwide to improve everyone's life satisfaction (Ramakrishnan & Jalajakumari, 2013).

With the aim of achieving self-efficacy, counselling has been structured as a conversation between a counsellor and one or more clients that assist the client to work through particular problems he or she faces (Holm-Hadulla, Hofmann, & Sperth, 2011). Adigwe and Okoro (2016) defined counselling as a process that involves an interpersonal relationship between someone actively seeking help and someone willing to assist with the intention of achieving self-efficacy. The primary goal of counselling is maximizing self-efficacy and reducing risks and to change a situation that is risky and 'disruptive to the extent that one cannot continue through the normal passage of life without stress, dissatisfaction or unhappiness' (Shumba & Moyo, 2014).

Self-Efficacy predicts intellectual performance better than skills alone, and it directly influences academic achievement through cognition. Self-efficacy also indirectly influences perseverance (Diane, 2013). Although past achievement raises self-efficacy, it

is student interpretation of past successes and failures that may be responsible for subsequent success. Perceived self-efficacy predicts future achievements better than past performance. Self-efficacy beliefs also contribute to performance since they influence thought processes, motivation, and behaviours (Ombuya et al., 2012). Fluctuations in achievement may be explained by fluctuations in self-efficacy. For example, varying beliefs in self-efficacy may alter task performance or outcome, whether it involves two similarly-skilled individuals or the same person in two different situations (Shukulaku, 2013). Individuals with high self-efficacy attempt challenging tasks more often, persist longer at them and exert more effort. If there are failures, highly efficacious individuals attribute it to lack of effort or an adverse environment. When they succeed, they credit their achievement to their abilities.

The perception that their abilities caused the achievement affects the outcome rather than their actual abilities (Shwarzar, 2012). On the other hand, those that regard themselves as inefficacious shy away from difficult and challenging tasks, slacken their efforts and give up readily in the face of difficulties, dwell on their personal deficiencies, lower their aspirations and suffer much anxiety and stress. Such self-misgivings undermine performance.

Conversely, individuals with high self-efficacy frequent persevere despite difficult tasks or challenging odds and often succeed because perseverance usually results in a successful outcome. Self-efficacy has been found to positively relate to cognitive engagement and academic performance (Pajares, 2014). Self-efficacy, self-regulated learning and test anxiety have also been found to be the best performance predictors (Bernard, 2012). In a meta-analysis of 39 students from 2005 to 2015, positive and statistically significant relationships were found among self-efficacy, academic

performance and persistence for a number of disciplines (Usher, 2014). Out of the studies analyzed, 28.9% involved higher education. Four factors affected the link between self-efficacy and academic performance. One factor was the time period when the two were assessed. A stronger relationship resulted in post-treatment, meaning that experimental manipulations to change self-efficacy beliefs were successful not only in raising self-efficacy but in enhancing academic performance as well (Usher, 2014).

The construct of counselling self-efficacy is defined as an individual's beliefs about his or her ability to effectively counsel a client successfully (Shukulaku, 2013). The structure and influence of this concept have been investigated in a variety of mental health professions including counselling trainees, masters-level counsellors and psychologists and school counsellors. Some counsellor characteristics have been found to be minimal to moderately associated with self-efficacy, including but not limited to counsellor personality, aptitude, achievement and social desirability and counsellor age (Watson, 2012). In addition to numerous counsellor specific qualities, research has shown that CSE is also closely related to external factors such as perceived and objective work environment, supervisor characteristics and level of quality of supervision (Phan, 2012).

According to Fall (2011), guidance and counselling is a very important part of any education system, and all schools should have some form of structured guidance and counselling services for all levels. It is, however, unfortunate that not all schools and institutions can meet this requirement due to the lack of qualified personnel to offer these services. They further state that in schools where these services are not formally organized, it is still expected that guidance and counselling should be afforded to the children through alternative advisors.

Kobugube (2013) says that there are lots of ways that guidance and counselling can be defined, but they eventually point out to a single essential fact. Guidance and counselling are helping an individual to make wise choices from the many alternatives available to him/her to be able to face life's conflicting situations.

To sum it all, counselling is a relationship that brings together the counselee who need help and the counsellor who is professionally trained and educated to offer that help. The purpose of this relationship is to help the counselee to learn and be able to deal with their situation more effectively. The client, through understanding himself, his strengths and weaknesses, will be able to make the best choice and decision geared towards a favourable personal adjustment and growth regarding education, vocation, family and other moral considerations (Fall, 2011).

In sub-Saharan Africa, self-efficacy is needed by the large numbers of children who have lost one or both parents, primarily due to the HIV/AIDS epidemic in the region (UNICEF, 2014). Also, several million other children live with chronically ill and dying parents, and others live in dire poverty and food-insecure households. Children on the Brink Report (UNICEF, 2014), revealed that approximately 43 million orphans resided in sub-Saharan Africa. Of these children, roughly 11 million have become orphans as a result of the HIV and AIDS pandemic (Naswa & Marfatia, 2010). In response, governments, civil society, and international organizations have developed programs to provide protection, care, and support to orphans and vulnerable children. These programs are informed by the core strategic objectives of the framework for the protection, care, and support of orphans and vulnerable children, as described by UNICEF. Among them is to ensure access for orphans and vulnerable children to essential services, including education, healthcare and self-efficacy (UNICEF, 2014).

Self-efficacy is required in Africa, where it has been noted to have many cases of orphans living in orphanages (Maddux et al., 2011). These orphanages manage to get funds, and while some of the homes/orphanages may be state-funded, many of them are funded by donors, especially from western countries. In the case of Ghana, the government is in the process of doing away with orphanages in favour of adoption and placements. So far, 14 homes have been closed down since the implementation of the National plan of action for orphans and vulnerable children. This closure was informed by the poor quality of life that the orphans lived in the post-orphanage days. It was concluded that placement under foster care was more useful to them than growing up in orphanages. In Rwanda, out of about 400,000 orphans, 5,000 are living in orphanages. In Tanzania, there are currently approximately 52 orphanages that are taking care of almost 3,000 orphans and destitute children who are in need of achieving self-efficacy.

There is need for self-efficacy among children who from a rapid assessment on orphans and vulnerable children conducted in 2004 in Nigeria, they were about 7 million orphans in the in 2003 and the number was expected to rise rapidly. South Africa stopped licensing orphanages in 2000, but they still exist and operate and in an unregulated manner which is potentially harmful to the children. Self-efficacy is a requirement in Zimbabwe, where there are about eight government-run and 38 privately run orphanages. There is no precise figure on the number of orphans in the country, but the facilities are reportedly overwhelmed on a daily basis. By 2005, there were estimated to be about 280,000 orphans who were under the age of 18 in Togo. About 96,000 of these were attending school.

Lack of Self-efficacy among orphans in Kenya where guidance and counselling service is a relatively new profession would be disastrous. Formal guidance and counselling in



Kenyan orphanages were officially recognised in 1970 (Osanloo & Boske, 2015). The Ministry of Education (MOE) established a Guidance and Counselling Unit under its inspectorate division. The unit was charged with the responsibility of dealing with educational and vocational guidance, and psychological counselling in orphanages (Ministry of Education, Science and Technology, [MOEST], 2005). This initiative was, however, not well supported; hence, the implementation did not occur as intended (Oketch & Kimemia, 2012).

Recommendations for guidance and counselling services in orphanages were later made in a government policy document, The Report of the National Committee on Educational Objectives and Policies of 1976 which stated that guidance and counselling be taught in subjects such as religious education and social education and ethics to promote the growth of self-discipline among students in orphanages (Carey, Harris, Lee, & Aluede, 2017). Despite these recommendations, guidance and counselling services failed to meet the needs of students. Furthermore, the government did not show a commitment to ensuring the policy was followed (Oketch & Kimemia, 2012). It is therefore imperative to note that the orphaned children in orphanages are in need of self-efficacy since they are not any better. An emphasis on guidance and counselling programs in their respective orphanages would be a very realistic idea geared to strengthening their self-efficacy and placing them in positions of self-reliance (Maddux et al., 2011).

In order to achieve self-efficacy, the call for the establishment of guidance and counselling in Kenyan orphanages was renewed with more vigour in the 1980s and 1990s after the country witnessed the worst arson cases ever to be committed in the orphanages. Most notably, in 1999, 17 girls were killed and 70 others raped in a co-educational boarding school. In March 2000, 26 girls were killed in an arson attack at the

Bombolulu Girls' secondary school (Daily Nation, 2000). In 2001, 67 boys were burnt to death in a boarding school by their colleagues as they were sleeping (East African Standard Team, 2001). These and many other incidents grabbed the attention of the government and all stakeholders in education. A commission was set up to investigate the causes of the rising spate of unrest. Following the findings of the commission, Report of the Task Force on Student Discipline and Unrest in Secondary Schools, the government recommended that guidance and counselling programs be implemented in all schools (The Republic of Kenya, 2001). Many children and youths in orphanages are struggling with challenges related to, but not limited to anxiety, depression, grief and loss, anger, low self-esteem, bullying, self-harm, among others. To achieve self-efficacy, they obviously need Guidance and counselling programs to support them with coping skills to accept their condition and live on (Hohenshil, Amundson, & Niles, 2015).

Additionally, several other authors and organizations continued to make similar calls (Equal Rights Trust & Kenya Human Rights Commission, 2012). Following recommendations by human rights organizations like African Network for the Prevention and Protection against Child Abuse and Neglect in Kenya, the government banned corporal punishment in all schools through Legal Notice, No. 95 of the Kenya Gazette (Government of Kenya, 2013). In its place, the government recommended that guidance and counselling departments be established in all schools. Since then, the Ministry of Education has continued to establish guidance and counselling programs. Unfortunately, most of these programs are run by teachers designated as counsellors but with very little or no training in counselling (Wambu & Fisher, 2015). Furthermore, these teachers continue to perform duties as regular classroom teachers in addition to counselling with little or no time off of their regular teaching duties, a scenario similar to one witnessed in the United States in the 1920s (Gysbers & Henderson, 2015).

In order to achieve self-efficacy, further support of guidance and counselling in schools has been evidenced in a policy document (Kenya Education Sector Support Program [KESSP], 2005) detailing the government's plan for education, and guidance and counselling as one of the areas requiring support (GOK, 2005). Among the issues identified that need to be addressed through counselling are increasing numbers of HIV/AIDS orphans in schools, inadequate career opportunities, drug and substance abuse among students, and the many family problems that impact students' academic performance (GOK, 2005). In response to these needs, the government has suggested measures to strengthen the guidance and counselling section at the MoEST headquarters, to in-service primary school teachers, and to ensure orphanages work with the National Agency for the Campaign Against Drug Abuse (NACADA) and other partners to sensitise teachers and parents about substance abuse. Despite the government's support for the provision of guidance and counselling services in orphanages, competing forces from various stake-holders seem to be slowing down the pace (Cheloti, 2014). To date, there are no comprehensive and structured guidance and counselling programs in place to catapult this essential service (NACC, 2015).

To get self-efficacy for the young and the youth, recently, the Ministry of Education has responded to student's needs by introducing a new subject, called "Social Skills," into the curriculum (Maddux et al., 2011). This subject is supposed to be taught once a week in every class. The subject aim is to equip students with skills for daily living with the hope that students will learn to self-regulate their emotions and behaviour and eventually reduce the rate of discipline cases. The orphans learning in those schools will not be left out. They will definitely be equipped with the desired life skills and values that will enhance their self-efficacy. Although the intentions of teaching this subject are well-meaning, the ministry did not train teachers in the curriculum; hence most teachers are

unwilling to teach the subject. From the discussion above, it is clear that guidance and counselling services in Kenya have grown out of the need to address discipline problems in schools (Ajowi & Simatwa, 2010). While addressing discipline issues is essential, designating school counselling for this one purpose is a great disservice to the profession and a waste of human resources. The recognition that guidance and counselling programs are meant to address the holistic developmental needs of all students (United Nations Educational Scientific and Cultural Organization (UNESCO, 2014), is yet to be realized in learning institutions in Kenya.

According to Morantz, Cole, Ayaya, Ayuku and Braitstein (2013), there is little research available but increasing concern regarding the psychological well-being of destitute children in Africa. Destitute children experienced multiple stressors that complicated their grief process. Literature reveals that children experience anger, guilt, yearning, denial, shock, disbelief, depression (Kobia 2011), low cognition, anxiety, irritability (Lonnie, Embleton,2014), lowered self-esteem and motivation, sadness, pain, fear; suicidal ideation, aggression and post-traumatic stress disorder (Murugi, 2013). Shumba & Moyo (2014) recommended that African countries need to go beyond the dominant Euro-centric counselling models, and lay the basis for the development of Afro-centric approaches in counselling of orphans and destitute children.

In 2016, an estimated 153 million children worldwide were known to have been orphaned, thus having lost one or both parents (UNICEF, 2016). These children were between the ages of 0-17 years. Many millions of other children were described as having been vulnerable due to the effects of diseases and poverty. Many reasons bring about this scenario; including but not limited to conflict, diseases and accidents. However, in the recent past, anew and a significant cause of the increase in orphans

worldwide has been the impact of HIV and Aids Pandemic. Around the Globe, 15 Million Children are said to have been orphaned due to HIV and Aids, with 11.6 million to be found in Sub-Sahara Africa (UNICEF, 2016). The ravages of Aids have led to an escalation of Orphans, especially in Sub Sahara Africa. This has increased the need for more child-care services; hence an upsurge of orphanages in the continent. Children who are orphaned are more likely to suffer from detrimental health and nutritional hazards. They are also more susceptible to stunted growth, as opposed to non-orphans (UNICEF, 2016).

A major humanitarian and developmental challenge facing Kenya and which has hampered their realization of the Sustainable Development Goals (SDGs) is the ever-increasing number of orphans and vulnerable children in the Country. A spot visit to a number of the Orphanages in Kenya shows that the impetus created by Kenya's participation in some of the International for an on the plight of orphans and vulnerable children has since fizzled out. Although only a small percentage of orphans find their way to the orphanages as most of them find solace in the homes of family and friends where they quite often end up being abused in all manner of ways, the government has an obligation to beam its searchlight and lend some tangible support to the orphanages (UNICEF, 2016). Years of inquiry and research have clearly shown that some of the owners of these orphanages did not set them up because they have enough resources to cater for their day-today needs but rather because of their passion for humanity and human survival.

After over-stretching their resources, many of them have to depend on donations from well-wishers and foreign charitable organizations and individuals as well. Where such donations are not forthcoming, they often resort to all manner of activities to keep the

orphanage up and to run. Apart from those run by religious organizations that have definite access to regular funding, many of the orphanage managers sometimes resort to activities that demean the very existence of this category of children. Today, insurgency and HIV/AIDS pandemic have made the problem even worse, producing millions of orphans and countless vulnerable children whose rights are being violated as a result of the combined effects of poverty, conflicts, terrorism and gender inequity. The children are left to experience untold economic hardships, lack of love and affection, withdrawal from school and poor health and psychological and emotional difficulties (Sloth-Neilsen, 2014).

Education is the mainstay and a fundamental human right for all children, as recognized in the convention on the rights of the child (Committee on the rights of the child, 1989). A child who has access to quality primary education has a better chance of living independently in life. A child who knows how to read, write and do basic arithmetic has a robust and firm foundation for continued learning throughout life (UNICEF, 2016). Education is also critically essential to children's social integration and psychosocial wellbeing. School attendance and excellent academic performance help orphaned children affected by trauma to regain a sense of normalcy and to recover from the Psychosocial Impacts of their experiences and disrupted lives (Sloth-Neilsen, 2014). As well as benefitting individuals, education benefits whole Nations as a significant contributor to social and economic development, particularly at the primary level. It is a significant catalyst for the eradication of poverty. It increases labour productivity, improves health and enables people to participate fully in the economy and social development of their communities (Moyo et al., 2015).

Some studies have been conducted to show the influence of guidance and counselling on children performance in schools. Devi, Devaki, Madhavan and Saikumar (2013) conducted a study to explore the effect of counselling on the academic performance of college students. The study showed that there was an increase in average marks among students. The study showed that the counselling services in colleges had been effective in easing out the students' difficulties. The constructive support which was received from individual counselling seemed to have a positive influence on the academic performance and the number of sessions correlated positively with the academic performance.

The findings, as discussed above, also concur with Nzioki (2014), which found out that students who attended the counselling showed improvement in their grades as compared to those who did not. Students who attended some sessions showed a better response than those who attended fewer sessions. The authors concluded that counselling is very useful in improving the students' performance as well as their confidence. The study did not look at the influence of guidance and counselling on self-efficacy as the current study has done.

In the world today, the Human Immune Deficiency Virus (HIV), which causes HIV and Aids has become a global pandemic with Sub-Sahara Africa severely affected by it (Thupayagale-Tsweneagae & Mokamane 2013). The UNAIDS Report ( 2010) also reveals that Aids claims young adults just as they start forming their families, thus causing orphan prevalence to rise steadily in many countries. Orphaned children face an increasingly uncertain future; they are faced with prejudice and increased poverty which can, further, jeopardize their chances of completing school and may lead to the adoption of survival strategies that further increase vulnerability to HIV. This argument is supported by the study of Kimani et al. (2010), who found that the HIV Pandemic has

increasingly become a significant factor in the emergence of orphans in developing countries (including Kenya) and that these orphans are usually traumatized due to having suffered multiple losses, isolation, stigma and grief. Most of these orphans find themselves in orphanages. Because these orphans will be expected to exit from the orphanages and live independent lives, there is every need to emphasize guidance and counselling services to strengthen self-efficacy (Mugisho, 2012). These studies did not focus on the influence of guidance and counselling on self-efficacy as the current study hopes to do. All the studies above have not looked at how self-efficacy could be improved.

## **1.2 Statement of the Problem**

The challenge of orphaned and vulnerable children is taking centre stage all over the world in general and Kenya in particular. Whereas orphanhood is as old as Man, the despicable state of life that the current orphans lead leaves a lot to be desired. In developing countries such as Kenya, best practices in orphanages is not a priority. Since clients of orphanages lack the psychosocial support that is key to the successful negotiation of developmental milestones, the majority of the children end up vulnerable to bounce back once they are released from their care homes. The primary focus of many orphanages in Kenya is the provision of shelter and food without much investment in primary psychological care. This has led to low self-esteem among children brought up in orphanages, which could persist in their adulthood. Most orphanages have an age limit for orphans who live in their orphanages, after which the support program is discontinued. However, a significant percentage of these orphans are graduated before achieving the required self-efficacy for successful re-integration to mainstream life in society. Many of them end up living as destitute and engaging in anti-social and maladaptive behaviours. Several variables have been identified in research as the cause



for the high cases of return level of orphaned children who are released back to society (Escapa & Julia, 2018). However, the role of psychological behaviours management strategies such as guidance and counselling has not received adequate attention in research in Kenya. Therefore, little is known about the influence of psychological interventions in building self-efficacy for orphaned children in managed care.

The existing studies include Ooi, Jaafar and Baba (2018) who focused on school counselors in Malaysia to establish the relationship between the sources of counseling self-efficacy and counseling self-efficacy. The study noted that mastery experience is strongly and significantly connected with counseling self-efficacy. However,, the gap created by this study was that it was conducted in Malaysia and it did not incorporate the aspect of guidance as well as the orphanages. The study conducted in secondary schools in Koibatek by Salgong, Ngumi and Chege (2016) related guidance and counseling as it relate with student discipline. The study noted a significant and positive relationship between guidance and couneslling and discipline as well as academic performance of students. However, this study create conceptual gap as it revolved around student discipline and not self effecicacy. Muthondeki and Musita (2021) conducted a study whose focus was on effectiveness of guidance and counessling programs on self efficacy of police officers in Nairobi. The study showed that the individual counselling services that police officers received did not effectively enhance their self efficacy. The gap created by this study was that it wasw conducted focusing on police officers and not orphanages. Therefore, in order to fill these gaps created by existing studies, the present study sought to investigate the influence of guidance and counselling services on the self-efficacy of orphaned children living in orphanages in Bungoma County.

### **1.3 Purpose of the Study**

The purpose of the study was to establish the influence of guidance and counselling services on the self-efficacy of orphaned children living in orphanages in Bungoma County.

### **1.4 Objectives of the Study**

The study was guided by the following specific objectives:

- i. To establish the influence of individual guidance and counselling services on the self-efficacy of orphaned children living in orphanages in Bungoma County.
- ii. To examine the influence of group guidance and counselling services on the self-efficacy of orphaned children living in orphanages in Bungoma County.
- iii. To determine the influence of career guidance services on the self-efficacy of orphaned children living in orphanages in Bungoma County.
- iv. To establish the influence of guidance and counselling referral services on the self-efficacy of orphaned children living in orphanages in Bungoma County.
- v. To examine the influence of mentorship programs on the self-efficacy of orphaned children living in orphanages in Bungoma County.

### **1.5 Hypotheses of the Study**

In order to achieve the specific objectives, the study posited the following null hypotheses that were tested at 0.05 significance level:

- i. There is no statistically significant influence of individual guidance and counselling services on the self-efficacy of orphaned children living in orphanages in Bungoma County.

- ii. There is no statistically significant influence of group guidance and counselling services on the self-efficacy of orphaned children living in orphanages in Bungoma County.
- iii. There is no statistically significant influence of career guidance services on the self-efficacy of orphaned children living in orphanages in Bungoma County.
- iv. There is no statistically significant influence of guidance and counselling referral services on the self-efficacy of orphaned children living in orphanages in Bungoma County.
- v. There is no statistically significant influence of mentorship programs on the self-efficacy of orphaned children living in orphanages in Bungoma County.

### **1.6 Significance of the Study**

The current study findings could be important in establishing the influence of guidance and counselling on the self-efficacy of orphaned children living in orphanages in Bungoma County, Kenya. In addition, the current study serves as a revelation to the management of social services department on the influence of guidance and counselling on self-efficacy of orphaned children living in orphanages. Further, the current study would help the orphanages' policymakers to come up with orphanage guidance and counselling policy that will help in improving the self-efficacy of the orphans living in orphanages. Finally, the study findings of the current study would contribute to the existing literature and serve as a point of reference to future scholars who might be interested in this area. The findings of this study, therefore present significant implications for interventions aimed at strengthening and sustaining self-efficacy among orphan ns who are trying to rebuild their lives and live productively in society.

For the orphanages, the findings may go a long way to support in sensitizing caregivers and managers of the institutions to provide quality services for children living in the orphanages by considering their age, sex and years of living in the institution during group living arrangements. Moreover, institutions, counsellors and researchers may use the results of this study as a source of information, means of understanding and helping students and pupils.

### **1.7 Scope of the Study**

The researcher in this study endeavoured to investigate the influence of guidance and counselling services on the self-efficacy. More specifically, the study focused on individual guidance and counselling services, group guidance and counselling services, career guidance services, guidance and counselling referral services as well as mentorship programs on the self-efficacy. The context of the study was on orphans living in orphanages in Bungoma County. The research was conducted in the 9 sub-counties that constituted the larger Bungoma County. The respondents involved 240 orphans, a caregiver and an administrator (again from each orphanage), totalling to 280. In the period between 2004 and 2008, Bungoma County witnessed fierce inter-clan warfare between 2 sub-clans of the Sabaot community. The wars were fuelled by a militia group christened as SLDF (Sabaot Land Defense Force). Due to the on-going atrocities during this period, many youths and children were orphaned. This period, therefore, witnessed an unprecedented mushrooming of orphanages/centres to tap into the donor funds due to the donor confidence witnessed in this epoch (UNICEF, 2007). It is, therefore, noteworthy to say that the Sabaot Land Defense Force (SLDF) atrocities in Mt Elgon region coupled with the post-election violence (PEV) of 2007-2008 left in its wake hundreds of orphans who had to be moved to existing and new orphanages within Bungoma County and other neighbouring counties like Trans-Nzoia (Opala, 2009). In

addition to the aforementioned period, the year 2012-2018 is characterized by two general elections. For instance, immediately after the 2013 General elections, gang attacks were witnessed in some parts of Bungoma County where hundreds of people were injured while others died (Human Rights Watch, 2019).

### **1.8 Assumptions of the Study**

This study was based on the following assumptions:

- i. The guidance and counselling programs in targeted orphanages are functionally effective both at individual and institutional levels. As part of the guidance and counselling programs, career guidance and counselling services are offered.
- ii. The institutions offer guidance and counselling services in a professional manner, and the guidance counsellors have the requisite qualifications for offering the services.

### **1.9 Limitations of the Study**

In this research, the following limitations were anticipated:

- i. The study would be limited to the orphans and caregivers of the orphanages in Bungoma County as primary respondents to the exclusion of other members of the society. Any generalizations to the larger community would have to be undertaken with caution.
- ii. Almost all orphanages regarded all visitors as potential donors, and visiting these institutions with the sole aim of conducting research would not be received with sufficient enthusiasm. This was surmounted by the researcher clearly outlining the benefits of the study not only to the present status but also as a means of informing policy formulations about funding. This enabled the orphanages'

management to view the study as beneficial both in the short term and long term period.

- iii. The study would not be longitudinal because the university calendar requires the completion of a doctoral program within three years. As a result, it may be difficult to tell how long the influence on self-efficacy would last. This fact paved the way for future longitudinal studies.

## **CHAPTER TWO**

### **LITERATURE REVIEW**

#### **2.1 Introduction**

In this chapter, the researcher attempted to give an in-depth exposition of the influence of guidance and counselling services on the self-efficacy of orphaned children living in orphanages in Bungoma County, Kenya. Put into consideration when it comes to the theoretical framework are the works of Alfred Adler and Rudolph Dreikurs about the Adlerian Theory. Also considered are the works of Albert Bandura (Social Learning Theory), von Bertalanffy (the systems theory) and Niemiec and Ryan (Self-Determination Theory). A generic overview of guidance and counselling, perceptions of counselling services in society and the attendant causes of destitution will also be addressed. In addition, reasons for the proliferation of orphanages in Kenya, the rationale for counselling in orphanages, official government policy on counselling in Kenya and the deinstitutionalization of orphanages in the world today will be highlighted.

#### **2.2 Self-Efficacy**

According to Bandura (2001), self-efficacy is the belief in one's capabilities to organize and execute the courses of action required to manage prospective situations. In other words, it is a person's belief in his or her ability to succeed in a particular situation. Bandura described these situations as determinants of how people think, behave and feel. Since his publication of his seminal paper in 1977 entitled "Self-efficacy: Toward a unifying theory of behavioral change", the subject has become one of the most studied topics in psychology. As Bandura and other psychologists have demonstrated, self-efficacy has become such an important topic that has had an impact on everything from psychological states to behaviors to motivation. Researchers in self-efficacy have found

that an individual's self-efficacy plays a significant role in how goals, tasks and challenges are approached (Schunk, & Luthans, 2010).

A strong sense of self-efficacy enhances human accomplishment and personal well-being in many ways. People with high assurance in their capabilities approach difficult tasks as challenges to be mastered rather than as threats to be avoided. Such an efficacious outlook fosters intrinsic interests and deep engrossment in activities. They set themselves challenging goals and maintain a strong commitment to them. They heighten and sustain their efforts in the face of failure. They quickly recover their sense of efficacy after failure or setbacks. They attribute failure to insufficient effort or deficient knowledge and skills, which are acquirable. They approach threatening situations with the assurance that they can exercise control over them. Such an efficacious outlook produces personal accomplishments, reduces stress and lowers vulnerability to depression (Guut, 2015).

Bandura (2002) explains that perceived self-efficacy serves to regulate the quality of an individual's functioning and emotional well-being that is attained through motivational, decisional, cognitive and affective processes. Regarding the motivational process, perceived self-efficacy determines the amount of effort that people put into a task and how much they will persevere when faced with challenges. The above suggests that individuals with high self-efficacy are more likely to exert more effort and to persevere than do those with low self-efficacy.

In terms of the decisional process, perceived self-efficacy determines people's choice of behaviors. People are more likely to pursue the tasks that they believe they have the ability to perform and tend to avoid the tasks that they perceive are way beyond their capabilities. Perceived self-efficacy, thus, exerts its influence on an individual's psychosocial functioning by way of the accuracy of the judgment of one's abilities



(Bernard, 2012). Bandura further asserts that if such a judgment slightly exceeds one's abilities, it is perhaps the most functional, as it then leads one to undertake practical, challenging tasks. Doing so, in turn, motivates the enhancement of capability.

In contrast, misjudgment of one's abilities (whether in the form of overestimation or underestimation) can lead to severe consequences. Those who underestimate their abilities tend to undertake self-limiting tasks that reduce their exposure to rewarding tasks and that also limit their ability to perform tasks, due to the self-doubt within them. On the other hand, those who overestimate their abilities tend to undertake tasks that are beyond their capabilities and to end up experiencing difficulty and failure (Magampa, 2014).

Cognitively and affectionately, efficacy beliefs influence one's ways of thought and emotional reaction during the actual or anticipated encounter with situations (Moturi, 2012). Bandura goes on to explain that when people perceive themselves as infectious, they tend to focus on their deficiencies and to perceive potential difficult situations as more daunting than they are! The result is the creation of more stress on the individual and reduction in the use of competencies. In contrast, when people perceive themselves as highly efficacious, they are more likely to exert added effort and to pay extra attention to challenging tasks, being incited by the motivation to achieve. Such individuals are also more likely to blame their effort than their ability when they fail in challenging tasks (Mwoma & Pillay, 2015).

Developmental issues in self-efficacy have also been highlighted. Bandura emphasizes that young children, due to their age, lack knowledge about their capabilities and therefore are most likely to misjudge their abilities (Okundi, 2014). At an early age, children depend on adults for judgment about their self-efficacy. As they grow in age and

develop mature cognitive abilities, they tend to depend less on external support and more on their internal abilities to judge their own capabilities. During the early phase of the development of self-efficacy, the family becomes the children's primary source of self-efficacy experiences. As the Child's social world expands, starting with siblings and then broadening to include peers in the larger society, such as in school, becomes the main source of efficacy experiences (Magampa, 2014).

Expectations of self-efficacy determine whether an individual will be able to exhibit coping behaviors and how long effort will be sustained in the face of an obstacle. Individuals with high self-efficacy will exert sufficient efforts that, if well-executed leads to successful outcomes, whereas those with low self-efficacy are likely to lose effort early and fail (Magampa, 2014). Other scholars have defined self-efficacy as belief in innate abilities, meaning; valuing ones particular set of cognitive strength. It also involves determination and perseverance to overcome obstacles that would interfere with utilizing those innate abilities to achieve goals. Self-efficacy affects every course of human endeavors by determining the beliefs a person holds. Regarding their power to affect situations, it strongly influences both the power a person actually has to face challenges competently and choices a person is most likely to make (Guut, 2015).

People generally avoid tasks where self-efficacy is low but undertake tasks where self-efficacy is high. Research shows that the optimum level of self-efficacy is slightly above ability; in this situation, people are most encouraged to tackle challenging tasks and gain experience. In addition, self-efficacy is made up of dimensions like magnitude, strength and generality that help to explain how one believes they will perform a specific task.

Magampa (2014) argues that high self-efficacy can affect motivation in both positive and negative ways. In general people with self-efficacy are more likely to make an effort

to complete a task and to persist longer in those efforts than those with low self-efficacy. A negative effort of low self-efficacy is that it can lead to a state of 'learned helplessness'. This is a state where it is believed that no amount of effort will make a difference in the success of the task at hand (Usher & Pajeras, 2014). Self-efficacy theory has been embraced by management scholars and practitioners due to its applicability in the workplace. Overall, self-efficacy is positively and strongly related to work-related performance. Parents' sense of academic efficacy for their child is linked to their children's scholastic achievement. If the parents have higher perceived academic capabilities and aspirations for their child, the child itself will have those same beliefs. This promotes academic self-efficacy for the child, and which leads to scholastic achievement. Incidentally, this is not possible for orphans living in orphanages. These kids lack the parental "Face" to project a strong and desired sense of academic efficacy for them to strive to achieve (Freedman, 2014).

Bandura (1997) uses the term self-efficacy to refer to beliefs in one's capabilities to organize and execute the courses of education required producing given attainments. According to Bandura (1997), self-efficacy beliefs constitute the key factor of human agency. Bandura states that efficacy beliefs: Influence the course of action people choose to pursue, how much effort they put forth in given endeavours, how long they will persevere in the face of obstacles and failures, their resilience to adversity, whether their thought patterns are self- hindering or self- aiding, how much stress and depression they experience in coping with environmental demands, and the level of accomplishments they realize (Bandura, 1997, p.3).

Self -efficacy beliefs can influence an individual to become committed to successfully execute the behaviours necessary to produce desired outcomes. Self-efficacy theory

states that the level and strength of self-efficacy will determine whether or not behaviours will be initiated, how much effort will result, and how long the effort will be sustained in the face of obstacles. According to Goulao (2014), humans make life decisions based on our perceived self-efficacy by undertaking activities and choosing situations we deem to be within our capabilities for success. Additionally, activities associated with failure are avoided. When humans have a strong sense of perceived self-efficacy, they put forth a greater effort to accomplish a task despite the obstacles they encounter than those who have a weak sense of self-efficacy. It is believed that students who have a higher degree of self-efficacy will have a higher intention to remain enrolled in college and will be more likely to persist in the face of external obstacles. Though self-efficacy has an important influence on behaviours, it is not the only influence. Behaviour is a function of many variables that include skills, outcome expectations and the perceived value of the outcome (Goulao, 2014).

When the necessary skills are lacking, self-efficacy will not produce competent performance. According to Bandura (1997), once efficacy beliefs are formed, they are not stable. They can vary in strength because the individual strength is constantly evaluating new information. However, once efficacy beliefs have been established over long periods of time and based on a large amount of information, they are unlikely to be changed. Because of self-efficacy beliefs are specific in nature; it is impossible to discuss “general” or “global” self-efficacy. For example, students may have strong self-efficacy beliefs about their abilities to thrive in social situations, but weak efficacy beliefs about their abilities to succeed academically and specifically in certain subjects.

Self-efficacy theory states that the level and strength of self-efficacy will determine several things. For example, whether or not behaviours will be initiated, how much effort

will result, and how long the effort will be sustained in the face of obstacles are all determined by self-efficacy. Self-efficacy provides individuals with the ability to influence their own course of action and alter their environments (Bandura, 1997). Bandura (1997) hypothesized that an individual's choice of activities, persistence, and effort is affected by self-efficacy beliefs. For example, people who have a low sense of efficacy for accomplishing a task may avoid it, and those who believe they are capable should participate readily. Those individuals who feel efficacious are hypothesized to persist longer and work harder when they encounter difficulties as opposed to those who doubt their capabilities. The most reliable guide for assessing self-efficacy is the individual's performance. Self-efficacy may go up or down depending on success or failure, but once self-efficacy is developed in an individual, failure may not have much of an impact (Lillian, 2013). According to Usher and Pajeras (2013), accurate and strong expectations of personal efficacy are crucial to the initiation and persistence of behavioural performance in human development. Self-efficacy theory has been applied to several areas of psychosocial functioning such as anxiety, phobias, health behaviours, and school achievement, with largely supportive results. For example, there is evidence that self-efficacy predicts such outcomes as academic achievement, social skills, pain tolerance and athletic functioning, (Synder, 2010).

Self-efficacy has been used interchangeably with self-regulation in the learning context. In their publication, 'self-efficacy for self-regulated learning', Zimmerman & Schunk (1989) define self-regulated in terms of self-generated thoughts, feelings, and actions, which are systematically oriented towards the attainment of students own goals. Self-regulated learners engage in academic tasks for personal interest and satisfaction. They have also met cognitively and behaviourally active participants in their own learning (Ablard & Lipschultz, 2008). Self-regulated learners also have a large arsenal of

cognitive and metacognitive strategies that deploy when needed to accomplish academic tasks. They are also quite persistent in their efforts to reach their goals (Tewan, 2013).

Zimmerman (2009) identifies five key aspects of student's efforts to self-regulate their learning: goal setting, strategy use, context adaptations, social processes and self-monitoring. No single self-regulatory process can explain the complexity and variations in student's effort to learn on their own. Self-efficacy beliefs also provide students with a sense of agency to motivate their learning through the use of self-regulatory processes as self-monitoring, goal setting, self-evaluation and strategy use (Zimmerman, 2009). The more capable students judge themselves to be, more challenging the goals they embrace (Zimmerman, Bandura & Martinez-pons, 2002). When self-efficacy and personal goal setting were compared with the verbal subscale of scholastic aptitude test, there was an increase of 35% in the predicting college student's final grades in writing course (Guut, 2015).

Research in self-regulated learning supports an increase in academic performance when students actively engage in the academic process (Zimmerman, 1989). Therefore, self-regulated learners are typically high achievers (Zimmerman & Martinez-pons, 2009). For example, students scoring in the top 1% on an achievement test more frequently use certain self-learning strategies that optimize (personal regulation, organizing and transforming information, behavioural functioning (providing their own rewards and punishments based on performance and the immediate environment reviewing notes, seeking peer assistance and seeking adult assistance.

### **2.2.1 Sources of Self Efficacy**

People's beliefs about their efficacy can be developed by four primary sources of influence (Bandura, 1997). The most effective way of creating a strong sense of efficacy

is through mastery of experiences. Successes build a robust belief in one's efficacy. Failures undermine it, mainly if failures occur before a sense of efficacy is firmly rooted. Some setbacks and challenges in human endeavours serve a useful purpose in teaching that successes usually require sustained effort. By sticking it out through tough times, they emerge stronger from adversity (Mwoma & Pillay, 2015).

The second way of creating and strengthening self-efficacy is through the vicarious experiences provided by social models. Seeing people similar to oneself succeed by sustained effort raises observers' beliefs that they too possess the capabilities to master comparable activities required to succeed. Observing others fail despite high effort lowers observer's judgments of their efficacy and undermines their efforts. The third source of self-efficacy is social persuasion. Under this source, it is believed that people can be persuaded to believe that they have the skills and capabilities to succeed. Self-efficacy achieved through social persuasion is measured regarding self-improvement rather than by triumphs over others. People also rely partly on their somatic and emotional states in judging their capabilities. They interpret their stress reactions and tensions as signs of vulnerability to poor performance. Mood also affects people's judgment of their self-efficacy. Positive mood enhances perceived self-efficacy; despondent mood diminishes it (Ombuya et al., 2012).

### **2.2.2 Self-Efficacy and Human Functioning**

Of all the thoughts that affect human functioning and standing at the very core of the social cognitive theory, are self-efficacy beliefs that people's judgments of their capabilities to organize and execute courses of action required attaining designated types of performances. Self-efficacy beliefs provide the foundation for human motivation, well-being and personal accomplishment (Bandura, 1977). This is because unless people

believe that their actions can produce the outcomes they desire, they have little incentive to act to persevere in the face of difficulties. Much empirical evidence now supports Bandura's contention that self-efficacy beliefs touch virtually every aspect of people's lives, whether they think productively, self-debilitating, pessimistically or optimistically; how well they motivate themselves and persevere in the face of adversities; their vulnerability to stress and depression and the life choice they make. Self-efficacy is also a crucial determinant of self-regulation (Bandura, 1977).

Human functioning is influenced by many factors. The success or failure that people experience as they engage the myriad tasks that comprise of their naturally influence the many decisions they must make (Stajkovic & Luthans, 2008). Also, the knowledge and skills they possess will certainly play critical roles in what they choose to do and not to. Individuals interpret the results of their attainments, however just as they make judgments about the quality of the knowledge and skills they possess — for example, a student who has just received a grade of B on mathematics tests. In and of itself, attaining a grade of B has no inherent causal properties. An “A student” who worked hard on that assignment will view that B in ways quite dissimilar from that of a “C student” who worked equally hard. For the former, the B will be received with disappointment; for the latter, the B is likely to be received with elation. The student accustomed to A's is likely to have his writing confidence negatively affected; the C-acquainted student is sure to have his confidence boosted (Bandura, 1982).

Bandura's (1997) key contentions as regards the role of self-efficacy beliefs in human functioning is that people's level of motivation, affective states, actions are based more on what they believe than on what is objectively true. For this reason, how people behave can often be better predicted by the beliefs they hold about their capabilities than by what



they are actually capable of accomplishing, for these self-efficacy perceptions help determine what individuals do with the knowledge and skills they have (Bandura,1997). This helps explain why people's behaviours are sometimes disjoined from their actual capabilities and why their behaviours may differ even when they have similar knowledge and skills. For example, many talented people suffer frequent and sometimes debilitating bouts of self-doubt about capabilities they clearly possess, just as many individuals are confident about what they can accomplish despite possessing a modest repertoire of skills. Belief and reality are seldom perfectly matched, and individuals are typically guided by their beliefs when they engage the world (Magampa, 2014).

As a consequence, people's accomplishments are generally better predicted by their self-efficacy beliefs than by their previous attainments, knowledge, or skills. Of course, no amount of confidence or self-appreciation can produce success when requisite skills and knowledge are absent. People's self-efficacy beliefs should not be confused with their judgments of the consequences that their behaviours will produce. Typically, of course, self-efficacy beliefs help determine the outcomes one expects (Magampa, 2014). Confident individuals anticipate successful outcomes. Students confident in their social skills anticipate successful social encounters. Those who are confident in their academic skills expect high marks on exams and expect the quality of their work to reap personal and professional benefits. The opposite is true of those who lack confidence. Students who doubt their social skills often envision rejection or ridicule even before they establish social contact. Those who lack confidence in their academic skills envision a low grade before they begin an examination or enrol in a course.

The expected results of these imagined performances will be differently envisioned; social success or greater career options for the former, social isolation or curtailed

academic possibilities for the latter. According to James (1981), because the outcome's we expect are themselves the result of the judgments of what we can accomplish, our outcome expectations are unlikely to contribute to predictions of behaviours. Moreover, efficacy and outcome judgments are sometimes inconsistent. A higher sense of efficacy may not result in behaviours consistent with that belief, however, if the individual also believes that the outcome of engaging in that behaviours will have undesired effects (Nelson, 2014). A student highly self-efficacious in his/her academic capabilities may elect not to apply to a particular university whose entrance requirements are such as to discourage all but the hardiest souls.

Low self-efficacy and positive outcome expectations are also possible. For example, students may realize that strong mathematics skills are essential for a good KCSE score and eligibility for university education, and this, in turn, may ensure a comfortable lifestyle, but poor confidence in math abilities are likely to keep them away from certain courses, and they may not even bother with the university education or the prestigious courses in the institutions of higher learning. Because individuals operate collectively as well as individually, self-efficacy is both a personal and a social construct. Collective system develops a sense of collective efficacy a group's shared belief in its capability to attain goals and accomplish desired tasks (Maddux et al., 2011). For example, schools develop collective beliefs about the capability of their students to learn of their teachers to reach and otherwise enhance the lives of their students and of their administrators and policymakers to create environments conducive to these tasks. Schools with a strong sense of collective efficacy exercise empowering and vitalizing influences on their students, and these effects are palpable and evident through good performance and achievements, be they academic or social (Ombuya et al., 2012).

### **2.2.3 Self-Efficacy in Academic Achievement**

Perceived academic self-efficacy is defined as personal judgments of one's capabilities to organize and execute courses of action to attain designated types of education performances (Zimmerman, 2008). Bandura (1977) developed scales to measure perceived academic self-efficacy to assess its level, generality and strength across activities and contexts. In terms of academic functioning, self-efficacy level refers to variations across different levels of tasks, such as increasingly different math problems. Self-efficacy generality refers to the transfer of self-efficacy beliefs across activities, such as different academic subject matters. Finally, self-efficacy strength in academics is measured by degrees of certainty that one can perform given tasks (Zimmerman, 2008).

According to Bandura (1997), performance successes generally strengthen efficacy beliefs and repeated performance failures weaken them, particularly if the failure occurs early in the course of events and do not reflect lack of effort or adverse external circumstances. A small performance success that persuades individuals they have what it takes to succeed will often enable them to achieve higher accomplishments and to succeed at new activities or in new settings (Bandura, 1997). But performance alone does not provide sufficient information to judge one's level of capability, because many factors that have little to do with ability can affect performance. According to Bandura (1997), perceived self-efficacy is often a better predictor under variable conditions than past performance, because efficacy judgments encompass more information than just the executed action. Research in academic setting verifies that perceived self-efficacy beliefs contribute independently to intellectual performance (Bandura, 1997). In research with children, Bernard (2012), selected children who judged themselves to be of high and low self-efficacy at each of these levels of mathematical ability, these children were then given mathematical problems to solve. Children who had stronger self-efficacy

beliefs were quicker to discard faulty strategies, solved more problems, chose to rework problems they missed and did so more accurately than children of equal ability who doubted the self-efficacy. In higher education settings, Pajeras (2013) reports that mathematics self-efficacy of college undergraduates was a better predictor of their mathematics interest and majors than either their prior math achievement or math outcome expectations. According to Zimmerman, Bandura and Martinez-pons (2002), academic self-efficacy influenced achievement directly as well as indirectly by raising student's grade goals.

Zimmerman, Bandura and Martinez-pons (2002) used path analysis to demonstrate that academic self-efficacy mediated the influence of self-efficacy for self-regulated learning on Academic Achievements. According to their research, academic self-efficacy influenced achievement directly as well as indirectly by raising student's grade goals. Other findings suggest that students who believe they are capable of performing academic tasks use more cognitive and metacognitive strategies and persist longer than those who do not (Joel, 2017). The research base to support the important role played by self-efficacy in predicting and explaining human behaviours has been well documented by Bandura (2002). Academically, Pajeras (2013) has summarized extensive literature on academic self-efficacy. The following is a summary of Pajera's findings:

- a) Because of beliefs individuals hold about their abilities and the outcomes of their efforts to powerfully influence the way in which they behave, knowledge, skills and prior attainments are often poor predictors of subsequent attainments;
- b) Mathematics self-efficacy of college undergraduates is more predictive of their interest and choice of math achievement or outcome expectations;
- c) Self-Efficacy is powerful motivations construct that works well to predict academic self-beliefs and performance at varying levels;

- d) Self-Efficacy beliefs are correlated with other self-efficacy beliefs, motivation constructs and academic choices, changes and achievement;
- e) General measures of self-efficacy insensitive to context are weak predictors of academic performances.

According to Diane (2003), Academic Achievement is influenced by a multitude of factors: attitude leads to achievements (Schibeci & Riley, 1986), and aptitude is needed for successful performance (Schunk, 1991). Academic Achievement is a result of intellectual capability and motivation as well (Bandura, 1997). Based on replicable finding from several studies, Bandura (1997) states that gender and attitude influence academic achievements to some extent through their mediating effects on an individual's self-efficacy beliefs. Self-efficacy predicts intellectual performance better than skills alone, and it directly influences Academic Achievement through cognition. Self-efficacy also indirectly influences perseverance (Diane, 2003). Although past achievements raise self-efficacy, it is student interpretation of past successes and failures that may be responsible for subsequent success. Perceived self-efficacy predicts future achievement better than past performance. Self-efficacy beliefs also contribute to performance since they influence thought processes, motivation, and behaviours (Bernard, 2012). Fluctuations in achievements may be explained by fluctuations in self-efficacy. For example, varying beliefs in self-efficacy may alter task performance or outcome, whether it involves two similarly- skilled individuals or the same person in two different situations. Individuals with high self-efficacy attempt challenging tasks more often, persist longer at them, and exert more effort (Usher et al., 2014). If there are failures, highly efficacious individuals attribute it to a lack of effort or an adverse environment. When they succeed, they credit their achievements to their abilities. The perception that their abilities caused the achievement affects the outcome rather than

their actual abilities (Joel, 2017). On the other hand, those that regard themselves as inefficacious shy away from difficult and challenging tasks, slacken their efforts and give up readily in the face of difficulties, dwell on their personal deficiencies, lower their aspirations, and suffer much anxiety and stress. Such self-misgivings undermine performance.

Conversely, individuals with high self-efficacy frequently persevere despite difficult tasks or challenging odds and often succeed because perseverance usually results in a successful outcome. Self-efficacy has been found to positively relate to cognitive engagement and academic performance. Self-efficacy, self-regulated learning and test anxiety have also been found to be the best performance predictors (Bandura, 2001). Research findings over the last two decades have supported Bandura's contention that efficacy beliefs mediate the effect of skills or other self-beliefs on subsequent achievements (Urdu, 2013). Scholars have also demonstrated that self-efficacy beliefs influence these achievements by influencing effort, persistence and perseverance (Guut, 2015).

Usher & Pajares, (2014) have been instrumental in tracing the relationship among self-efficacy perceptions, self-efficacy for self-regulation, academic self-regulatory processes, and Academic Achievement. This line of inquiry has successfully demonstrated that self-regulatory efficacy contributes to academic efficacy. For example, Zimmerman et al. (1992) used path analysis to demonstrate that academic self-efficacy mediated the influence of self-efficacy for self-regulated learning on Academic Achievement (Zimmerman, Bandura & Martinez-pons, 1992). Academic self-efficacy influenced achievements directly as well as indirectly by raising student's grade goals. Mwoma & Pillay (2015) reported a correlation between academic self-efficacy and both

cognitive strategy use and self-regulation through the use of metacognitive strategies. Academic self-efficacy also correlated with the semester and final year grades, in-class seatwork and homework, exams and quizzes, and essays and reports.

Mwoma and Pillay concluded that self-efficacy was key in the process of learning of cognitive engagement, that raising self-efficacy beliefs might lead to increased use of cognitive strategies and thereby, higher performance and that students need to have both the will and the skills to be successful in classrooms. Other researchers have assessed judgments of self-efficacy in terms of particularized self-perceptions of competence highly consistent with the criteria task being assessed (Pajares & Johnson, 2008). This assessment requires that, if the criteria-task involves solving specific mathematics problems, the efficacy assessment asks learners to provide judgments of confidence to solve similar problems, if the task involves reading comprehension, learners are asked to provide judgments of their perceived capability to correctly answer various questions that tap comprehension of the main ideas in a passage; if the task involves writing an essay, learners are asked to provide judgments that they possess the various composition, grammar usage, and mechanical skills on which their writing performance is assessed (Pajares & Johnson, 2008).

Recall that significant relationships are obtained even with generalized domain-specific self-perceptions, provided that they assess skills and performance in related domains (Multon et al., 2005). Pajares and Miller (2009) found this performance, as well. Each subscale, as well as the full-scale, correlated significantly with each performance task. Such relationships attest to the generalizability of self-efficacy perception within a domain, but the prediction is enhanced as self-efficacy and performance more closely match. One might also question the practical utility of administering a 52-item

instrument when greater prediction may be had from a shorter instrument more closely matching the performance task.

Findings on self-efficacy coincide on two points: when self-efficacy beliefs are globally assessed and/or do not correspond with the criteria-tasks with which they are compared, their predictive value is diminished or can even be nullified; when efficacy assessments are tailored to the criteria-task, the prediction is enhanced. In general, there is ample reason to believe that self-efficacy is a powerful motivation construct that works well to predict academic self-beliefs and performances at varying levels but works best when theoretical guidelines procedures regarding specificity and correspondence are adhered to (Goulao, 2014).

The tasks will be avoided if it is perceived to be too difficult. Although inefficacious individuals usually avoid challenging tasks, when they do attempt them, they give up more easily than individuals with high efficacy. When inefficacious individuals fail, they attribute the unsuccessful result to a lack of ability and tend to lose faith in their ability and tend to lose faith in their capabilities. When they succeed, they are more likely to attribute their success to external factors. Suppose students master a challenging task with limited assistance, their levels of self-efficacy rise (Urdan & Pajeras, 2013). Individuals who possess a higher degree of self-efficacy are more likely to attempt challenging tasks, to persist longer at them, and to exert more effort in the process. If highly efficacious individuals fail, they attribute the outcome to lack of effort or an adverse environment. When they succeed, they credit their achievement to their abilities. It is the perception that their abilities caused the achievement that affects the outcome rather than their actual abilities (Brown, 2008).



Four factors determine self-efficacy: enactive mastery experience, vicarious experience, verbal persuasion, physiological and emotional states (Magampa, 2014). The most influential of these factors is enactive mastery experience, which refers to individuals' experiences with success or failure in past situations. Information gathered from these experiences is then internalized. Past successes raise self-efficacy and repeated failures lower it, which indicates to individuals their levels of capability. In vicarious experience, individuals compare themselves to peers whom they perceive are similar in ability and intelligence to themselves. Watching peers succeed raises the observer's self-efficacy and seeing them fail lowers it (Bandura, 1986). Exposure to multiple successful role models helps increase self-efficacy in observers. Verbal persuasion tries to convince individuals, who may doubt their capabilities, that they possess the skills needed for success at a given task. In education, verbal persuasion delivered by teachers often takes the form of verbal feedback, evaluation and encouragement. Persuasion must be realistic, sincere, and from a credible source; otherwise, it can negatively affect student self-efficacy beliefs (Okundi, 2014).

#### **2.2.4 Gender and Self-Efficacy**

Self-Efficacy predicts intellectual performance better than skills alone, and it directly influences academic achievement through cognition. Self-efficacy also indirectly influences perseverance (Diane, 2003). Although past achievement raises self-efficacy, it is student interpretation of past successes and failures that may be responsible for subsequent success. Perceived self-efficacy predicts future achievements better than past performance. Self-efficacy beliefs also contribute to performance since they influence thought processes, motivation, and behaviours (Ombuya et al., 2012). Fluctuations in achievement may be explained by fluctuations in self-efficacy. For example, varying beliefs in self-efficacy may alter task performance or outcome, whether it involves two

similarly-skilled individuals or the same person in two different situations (Shukulaku, 2013). Individuals with high self-efficacy attempt challenging tasks more often, persist longer at them and exert more effort. If there are failures, highly efficacious individuals attribute it to lack of effort or an adverse environment. When they succeed, they credit their achievement to their abilities.

The perception that their abilities caused the achievement affects the outcome rather than their actual abilities (Shwarzar, 2012). On the other hand, those that regard themselves as inefficacious shy away from difficult and challenging tasks, slacken their efforts and give up readily in the face of difficulties, dwell on their personal deficiencies, lower their aspirations and suffer much anxiety and stress. Such self-misgivings undermine performance.

Conversely, individuals with high self-efficacy frequent persevere despite difficult tasks or challenging odds and often succeed because perseverance usually results in a successful outcome. Self-efficacy has been found to positively relate to cognitive engagement and academic performance (Pajares, 2014). Self-efficacy, self-regulated learning and test anxiety have also been found to be the best performance predictors (Bernard, 2012). In a meta-analysis of 39 students from 2005 to 2015, positive and statistically significant relationships were found among self-efficacy, academic performance and persistence for a number of disciplines (Usher & Pajares, 2014). Out of the studies analyzed, 28.9% involved higher education. Four factors affected the link between self-efficacy and academic performance. One factor was the time period when the two were assessed. A stronger relationship resulted in post-treatment, meaning that experimental manipulations to change self-efficacy beliefs were successful not only in raising self-efficacy but in enhancing academic performance as well (Usher & Pajares, 2014).

### **2.3 Individual Guidance and Counselling Services and Self-Efficacy**

Individual counselling is a one on one discussion between the counsellor and the Counselee or client. The two form an alliance of sorts, a relationship or a bond that enables trust and personal growth. It is aimed at helping you to cope with addiction, mental health, and trauma and with other life-stressors that can cause anxiety and depression. It is all about helping you to heal from the negative challenges that may have happened in the recent or distant past. Such may include losses, separation and divorce, family strife, violence or abuse. Individual counselling comes in many different types and forms, depending on several factors (Rowell & Hong, 2013). They can be differentiated as to the reason or purpose of counselling, such as career counselling, grief counselling, couples counselling and family counselling. When it comes to the mode of delivery or method of execution, we can classify them as either face-to-face sessions, sessions conducted over the telephone or via other forms of correspondence.

### **2.4 Group Guidance and Counselling Services and Self-Efficacy**

Group guidance and group counselling are two current approaches of interest (Hughes, Law, & Meijers, 2017). The consensus in recent writings defines group guidance as a process concerned with the study of interpersonal and intergroup relations, personal and social adjustment, educational and vocational planning, and orientation to school. Group guidance involves teaching and informational processes which help students grow towards goals considered worthwhile. Counselling groups are smaller in size than guidance groups (usually five to eight members). Cohn and his associates have defined group counselling as ‘a dynamic interpersonal process through which individuals within the normal range of adjustment work within a peer group and with a professionally trained counsellor exploring problems Bruce Shertzer and Herman J. Peters, *Guidance: Techniques for Individual Appraisal and Development* (New York: ‘Macmillan Co.,

1965) and feelings in an attempt to modify their attitudes so that they are better able to deal with developmental problems. In short, group counselling is used for clarifying feelings and attitudes of members. This is about counselling individuals with multiple issues or concerns. The strength with group counselling is that if you have 2, 3 or 4 members having a common phenomenon, then it is easier to put them together for them to support each other in navigating over the shared concern. This type of therapy builds up group cohesion and enables the concerned to quickly discover their strengths (Rowell & Hong, 2013).

While individual counselling provides the opportunity to meet with clients on a one to one basis, group counselling offers a unique chance for group members to share similar situations for mutual growth. While the negative portrayal of group therapy may suggest otherwise is a very positive and reliable experience for most people because the therapist and group members can build a safe place to explore the problems surrounding their relationship. Through the sharing process, members can develop a level of trust that allows them to be honest, open with one another and accepting towards each other despite any existing faults. Group counselling usually is effective because members can support the individual through changing these unproductive patterns through feedback. Group counselling is also quite helpful for providing the opportunity to practice alternative ways of interacting with others who are caring and encouraging on the journey of recovery (Walton, 2015).

Within an atmosphere of trust, the group counselling sessions typically involve members speaking openly about their feelings and talking actively to one another about their challenges. Although none will be compelled to divulge their inner and deepest secrets, counsellors expect group members to feel free to relate openly and be honest with others

to discover that they are not alone in their issues. Along with allowing members to observe one another for emotional growth, counsellors also will model healthy behaviours to develop more significant problem- solving skills. Most groups will meet for approximately one to two groups once a week for a predetermined number of weeks with the same members for optimal consistency.

Overall individuals decide to join group therapy because they are having some struggles with their relationships and are seeking help with concerns in their inter-personal life. Walton (2015) postulates that group counselling sessions are usually the most effective for addressing various interpersonal concerns, including loneliness, shyness, excessive dependence, frequent arguments, difficulty trusting others, discomfort in social situations and lack of intimacy. Group counselling therapy is quite ideal for orphans living in orphanages because they share a common phenomenon of orphan-hood. This therapy method provides orphans with a platform to open up on a myriad of issues where they get support and encouragement from each other under the guidance of professional counsellors.

## **2.5 Career Guidance Services and Self-Efficacy**

Career guidance and counselling is a comprehensive, developmental program designed to assist individuals in making and implementing informed educational and occupational choices (Liu et al., 2015). Career guidance and counselling program develop an individual's competencies in self-knowledge, educational and occupational exploration, and career planning. Career guidance and counselling programs help individuals acquire the knowledge, skills, and experience necessary to identify options, explore alternatives and succeed in society. These programs better prepare individuals for the changing workplace of the 21st century by teaching labour market changes and complexity of the

workplace, broadening knowledge, skills, and abilities, improving decision-making skills, increasing self-esteem and motivation, building interpersonal effectiveness, maximizing career opportunities, improving employment marketability and opportunities, promoting effective job placement, strengthening employer relations.

Liu et al. (2015) further state that everyone benefits youth and adults, male and female, disabled, disadvantaged, minorities, limited English proficient, incarcerated, dropouts, single parents, displaced homemakers, teachers, administrators, parents and employers. Everywhere elementary, junior and senior high schools, community colleges, technical institutes, universities, career resource centres, correctional facilities, community-based organizations, human services agencies, community and business organizations, skill clinics, employment and placement services. Career guidance and counselling programs aimed at helping students and pupils make more informed and better educational and career choices. Most students would wish to join the world of work after colleges and universities education. Ideally, all students require career guidance and counselling services in the choice of subjects that are tailored to their prospective careers and job preferences. This is why there is every need for competent, informed and knowledgeable career teachers/masters. As students finish colleges and universities, they need career guidance, including information on the type, requirements, salaries and trajectories of various occupations. Others will require to be supported to make the right career, including trades to train in and venture into. Relevant experts with dedicated and unrivalled skills to facilitate the scholars' strategic choice of an institution will become handy. Another goal of career guidance and counselling services is to support scholars and students in making informed and impactful career choices within industries that practice corporate social responsibility (Nelson, 2014).

Besides, the importance of career guidance and counselling is increasing due to the higher number of graduates finishing schools and colleges and the ever-changing demands in the labour market. Professional and career guidance and counselling take various shapes and forms. Some of these career guidance and counselling programs provide students with contacts of future employers, advice on finding jobs, how to plan and shape professions. These career guidance and counselling programs are instrumental in the world today. They aid in placing talent where it is needed. The student is assisted to make the best possible career choice. Also, it strengthens the educational system by providing motivational and meaning to education. The students are always encouraged to make maximum use of all educational facilities and opportunities since this will be critical to them during their employment lives (UNESCO 2014). Career guidance and counselling services also provide information about occupational opportunities. Students become aware of the world of work and the range of available opportunities that exist in the job market. Orphans living in orphanages need this service as a preparation to live independently after disengagement from the orphanages (Lieu et al., 2015).

## **2.6 Guidance and Counselling Referral Services and Self-Efficacy**

Referral services are an integral part of counselling and guidance and must be available to all applicants and eligible individuals to secure needed services from other agencies (Martin, 2017). This helps assure that those seeking services receive all possible benefits and that guidance and counselling can extend its resources by securing all comparable services and benefits. Referrals may be made to other entities for assessments, specific goods or supplies, consultation, and other services in support of an individual's vocational rehabilitation needs. Referral services may occur at all stages of the rehabilitation process (from application through post-employment services) but are mandated in the following circumstances. The individual should be made aware of the

services of the students' assistance program at the time of application, at the initiation of the individualized plan, and at case closure. Besides, during situations in which vision is not the primary disability, and a medical or psychological condition exists which imposes functional limitations, a referral must be made to the division of vocational rehabilitation (Martin, 2017).

A referral for counselling should be considered when one believes that the youth's problems go beyond one's own experience and expertise, or when one feels uncomfortable supporting the client with some issues. Specialists make referrals either because of the way the students' problems are interfering with instruction for those who are teachers/instructors. Specialists refer clients because observation of the student's behaviours raises concerns outside of their core-business; say education for students or trainees, recognizable indicators of cases in dire need for referral services include: marked decline in quality of course work, class/ group participation, increased absence from group work. Other indicators are prolonged depression depicted through a sad demeanour apathy weight loss, tearfulness and appearance of lack of sleep. Also, nervousness agitation, excessive worry, irritability, aggressiveness, blurred strange speech, violent outbursts, drug and substance abuse, social isolation, physical or sexual assault, nursing suicidal tendencies, among others. Goodner (2015) states that these referrals may either be internal or external. Internal referrals are where the client is referred to as professional or service providers within the same organization. In other words, these are referrals for services that are within the scope of the institution. This personnel may include but not limited to counsellors, administrators, the nurse or particular service providers. If there is no remarkable improvement, the counsellor may do an external referral. External referrals are those that are beyond the scope of the institutional personnel. It is prudent for the institutional counsellor or specialist to keep a



diary of competent service providers for quick referrals on a needs basis. The list of specialists should be updated periodically to bring on board the most recent professionals (Neilson, 2014). In essence, a referral may imply an endorsement of a particular service provider or financial obligation on the part of institution management. The institution specialist should be alive to the fact that there are *pro bono* service providers in a society. Such may be used to cut down the cost on the part of the organization. These services may be free or significantly lower in terms of charges. However, it should be noticed that *pro bono* services should be well chosen without compromising on quality. Referral services are exceptionally vital in children homes as a way of shaping up the youths affected to focus well on career development (Musa, 2013).

## **2.7 Mentorship Programs and Self-Efficacy**

Career Mentorship Program (CMP) serves diverse groups of students with tailor-made modules for students from different socio-economic, and cultural backgrounds, students enrolled in academic or vocational-technical programs, students in need of character development or drug-related issues (Irby et al., 2017). The objective of (CMP) is to develop students awareness on the relationship between academic studies and their life occupation, motivate, inform for improved self-esteem and self-confidence, help students make informed decisions and choices in schools as a preparation for their future career and to stimulate student's participation in curriculum and co-curriculum activities that are essential for successful career life.

Irby et al. (2017) state that benefits of students (CMP) include: increased and accurate knowledge on career choices available; improved motivation levels in their studies; healthier relationships and lifestyle choices; informed choices during subject selection in form II; better attitude about school and schooling challenges; enhanced self-esteem and

self-confidence; improved behaviours, both at home and at school; improved relationships with parents, teachers and peers; improved interpersonal skills and stable career lives. The interactive and practical engagement entails electrifying facilitation with mentally stimulating perspectives. Each session is conducted in a comfortable style that supports adult and students learning based on the most successful change and conditioning technologies of Neuro-Linguistic Programming (NLP) and Neuro-Associative Conditioning (NAC) that encompasses both indoor and out-doors learning activities. The Career Planning Course is a six (6) hour training delivered in three sessions of two hours each (Irby et al., 2017).

The youths are mentored on the potential that exists in their areas of specialization/engagement. The mentorship program involves personal interaction with mentors in one to one interaction, seminars and training session intending to increase their capacity that can unlock their potential in their areas of interest. The mentorship program intends to identify any gaps or potential for interaction in their areas of specialization. Through this program of engagement with the youths, hands-on-experience is developed so that the theoretical knowledge and skills that the youths have maybe put onto fair use. The foregoing may entail visiting related enterprises or sites for interactive sessions and further training through exposure. Experts and specialists in different fields and trades are invited periodically to provide the youths with valuable insights into various opportunities. These training sessions are formulated with a view to impacting the youths with the requisite background knowledge, particularly on how to integrate ICT skills to enhance their work output. Some mentorship programs are aimed at strengthening the sustainability of the projects that the youths may be engaged in through capacity development tailored for young social entrepreneurs (Gardner, 2015).

In order to understand the phenomenal growth of mentorship programs, it is prudent to investigate the meaning and the origins of mentorship. Mentorship has been described as a relationship between an older person (mentor) who is always experienced and willing to journey with a young person (mentee) to keep and guide the mentee's development (ministry of education taskforce, 2014). Through continued involvement, the adult (mentor) offers support, guidance and assistance as the young person goes through a difficult period faces new life's challenges or works to correct earlier problems. As a result, mentorship brings about sustainable growth and development in the academic career, social or personal goals of a mentee (Pardini, 2013). Mentorship programs are quite critical in orphanages, especially for the youths and young adults who are due for disengagement to start charting their own course of life. In order to avoid "fall-backs" to the orphanage, mentorships ought to be strengthened to equip them with robust and vibrant employability skills that are in tandem with the current needs of the job market.

## **2.8 Guidance and Counselling Services and Self-Efficacy**

It is almost impossible for one to succeed in life without guidance and counseling (Gudyanga, Wadesango, Manzira, & Gudyanga, 2015). Since creation, man has managed to face life's hurdles through guidance and counselling. Even though it was not officially known as it is today, it was very much in practice. Taylor and Buku (2006) mention that even before 250 BC, the concept of guidance and counselling had been identified among the Greek community.

Guidance may be defined as a process through which a person is assisted to better their lives (Koos & Kefauver, 1932). In most of the cases, a person who needs guidance does not know much about what they are doing and thus do things in a way they deem best,

but it often turns out to be the wrong way. There have been various views from different authorities regarding the concept of Guidance.

Kobugube (2013) looks at guidance as a systematic profession where an individual is assisted through an interpretive and educative procedure to have a better understanding of his/her potentialities and characteristics and relate to the social opportunities and requirements satisfactorily. Kobugube (2013) has cited the opinions of Fall (2011) on guidance as for the use of professional school personnel and materials to provide a developmental climate that would promote pupils to understand themselves, direct themselves, exercise and utilize their potential to their satisfaction and to that of the society.

Lunenburg (2011) define guidance as a set of organized specialized services that are established as an integral part of the school environment and are designed to promote the development of the students and help them to realize a wholesome sound adjustment and maximum accomplishment that commensurate with their potential. A close study of these definitions will reveal that Guidance is a discipline that is designed with the aim of helping individuals to make useful and diligent decisions in life and relate well to the rest of society.

To a layman, counseling may mean consultation, discussion, exchange of ideas, advice or deliberation of issues (Williamson, 1950). Others also assume counseling and advice to be the same thing, and consequently, many do not agree with professionals that try to differentiate them. Counseling is any effort from someone to help another person in distress to make an informed decision to solve their problem.

Fall (2011) states that counseling is not focused on giving information, but information may be given during the counseling process. It is also not about giving recommendations, suggestions or advice, i.e. concepts that many people associate with counseling. He sees counseling as a discipline that constitutes an interview where the counselor listens and tries to understand the client in privacy and holds whatever the clients communicate to him in confidence. The outcome of this interview would be a change in the clients' behaviour in a way they choose but within certain limits. Fall's definition of counselling is a confidential discussion between a counselor and a client where the counselor helps the client to identify their problem and find alternative solutions.

Lunenburg (2011) defines counseling as a developing interaction between a counselor and a person who is in distress or a temporary state of indecision or confusion. This interaction is to help the individual make their own decision and choices to resolve his confusion or to cope with their distress in a meaningful manner. This means counselling arms a person to identify their problems and find solutions for them. Destitute children need to be equipped with essential counselling to help them solve their problems. Counselling is also defined as the skill of helping individuals cope with their problems through interviews and procedures with the intention of assisting them to arrive at solutions.

Counseling is a helping profession (Kobugube, 2013). He defines counselling as a concept that forms the basis for the role and function of the counsellor in today's society. He further states that it is a helping profession because counselors are trained, licensed and certified to perform unique and needed services to fellow members of their society, and they also begin with the very foundation of human existence; human beings. He further states that counseling is a relationship between a professionally trained and

competent counsellor and an individual seeking help in gaining greater self-understanding, improved decision-making, behavioral change skills for problem solution and developmental growth. The scholar is of the view that individuals with problems can only consult trained and professional counsellors for help.

Neukrug (2011) says that counseling is a service that is designed to help an individual to analyze himself by relating his capabilities, achievements, interests and mode of adjustment to whatever new decision he has made or has to make. He further expounds that counselling is the heart of the work of guidance and counselling and is particularly concerned with the feelings, attitudes and emotional dispositions of an individual about themselves and the situation they are facing. Lunenburg (2011) regards counselling as a means of helping a person to utilize his/her psychological resources by focusing on their definite strengths for development and by concentrating on their personality behavior and emotional assets that can be mobilized. The American Personnel and Guidance Association (1980) define counselling as the application of procedures and other related areas of behavioral sciences to help in learning and how to solve problems or make decisions related to careers, marriage, personal growth, marriage, family or other intersperse issue.

In the world today, the Human Immune Deficiency Virus (HIV), which causes HIV and Aids, has become a global pandemic with Sub-Sahara Africa severely affected by it (Thupayagale-Tsweneagae & Mokamane, 2013). The UNAIDS Report (2010) also reveals that Aids claims young adults just as they start forming their families, thus causing orphan prevalence to rise steadily in many countries. Orphaned children face an increasingly uncertain future; they are faced with prejudice and increased poverty which can, further, jeopardize their chances of completing school and may lead to the adoption

of survival strategies that further increase vulnerability to HIV. This argument is supported by the study of Kimani et al. (2010) who found that the HIV Pandemic has increasingly become a significant factor in the emergence of orphans in developing countries (including Kenya) and that these orphans are usually traumatized due to having suffered multiple losses, isolation, stigma and grief. Development of self-efficacy becomes a sure avenue to prepare these children to face the future with renewed hope and high expectations (Tewan, 2013).

The construct of counseling self-efficacy is defined as an individual's beliefs about his or her ability to effectively counsel a client successfully (Shukulaku, 2013). The structure and influence of this concept have been investigated in a variety of mental health professions including counseling trainees, masters-level counsellors and psychologists and school counsellors. Some counselor characteristics have been found to be minimal to moderately associated with self-efficacy, including but not limited to counsellor personality, aptitude, achievement and social desirability and counselor age (Watson, 2012). In addition to numerous counsellor specific qualities, research has shown that CSE is also closely related to external factors such as perceived and objective work environment, supervisor characteristics and level of quality of supervision (Phan, 2012).

According to Fall (2011), guidance and counseling is a very important part of any education system, and all schools should have some form of structured guidance and counselling services for all levels. It is, however, unfortunate that not all schools and institutions can meet this requirement due to the lack of qualified personnel to offer these services. They further state that in schools where these services are not formally organized, it is still expected that guidance and counseling should be afforded to the children through alternative advisors.

Kobugube (2013) says that there are lots of ways that guidance and counseling can be defined, but they eventually point out to a single essential fact. Guidance and counselling are helping an individual to make wise choices from the many alternatives available to him/her to be able to face life's conflicting situations. To sum it all, counselling is a relationship that brings together the counselee who need help and the counsellor who is professionally trained and educated to offer that help. The purpose of this relationship is to help the counselee to learn and be able to deal with their situation more effectively. The client, through understanding himself, his strengths and weaknesses, will be able to make the best choice and decision geared towards a favourable personal adjustment and growth regarding education, vocation, family and other moral considerations (Fall, 2011).

### **2.8.1 Characteristics of Effective Counselling**

Mwoma and Pillay (2015) argue that counsellors should take an active interest in all students to develop an atmosphere of approachability so that they can resolve the current crises effectively through counselling. They further aver that effective counselling is often hindered by the unavailability of time, especially when the counsellor has too many students to cope with as he/she needs to know their problems. Counselling is, therefore, useful if the numbers of students in the facility are manageable since the counsellor will be able to attend and assist individual students with maximum attention. Nalvern (2014) concurs by remarking that students should be counselled and guided positively in a way that will promote self-efficacy, self-esteem, and self-determination and inculcate a feeling of independence through their freedom to resolve any challenging situations they may meet thus proving the effectiveness. In other words, students should make decisions based on that assistance offered by the counsellor and must own the decision.



Other characteristics of effective counselling include building a trusting relationship between the students and the counsellor to encourage openness on the part of the students and willingness to share and discuss the presenting problems. The counsellors should consider the age, social background, culture, health status and hobbies of the counselees bearing in mind diversity of student characteristics. According to the Care Reform Initiative (2015), group counselling is a useful mode given the vast numbers of orphans in orphanages.

Professional counselors are licensed mental health therapists who provide assessment, diagnosis and counseling to people facing a variety of life stresses and psychological challenges. They help people with relationship issues, family problems, job stresses, mental health disorders such as depression and anxiety and many other challenging problems that can impact negatively on feelings of well-being and happiness (Danladi, 2014). To be effective and efficient in their service delivery, counselors need to enjoy helping others and should pose specific attributes and skills. First, effective counselors should have excellent communication skills. Although some of these skills can be honed during graduate schools and are developed and refined over the course of your career, one should already possess certain communication skills before embarking on a counseling career and practice successfully (Mpofu, 2014). They need to have a natural ability to listen and be able to clearly explain their ideas and thoughts to others, more to their clients.

In addition, being non-judgmental and accepting are very important attributes in any of the helping profession's. Professional counselors ought to start where the clients are. This is used to describe the ability to relate to clients with an open and non-judgmental attitude; accepting the client for who he is, or she is and his / her current situation.

Counselors need to be able to convey acceptance to their clients with warmth and understanding (Nelson, 2014). Another very critical attribute of an effective counselor is the power to empathies counselors help people through some of the most difficult and stressful times and phases of their lives. They must therefore be able to display empathy, the ability to face what the other person is feeling. Empathy means that you are truly able to imagine what it is like to stand in someone else shoes. Compassion and empathy help your clients feel understood and heard. Another attribute is the ability to execute problem-solving skills. It is not the duty of a counselors to solve his/her clients challenges no matter how much information you may have, counselors, must have an excellent problem-solving skills to be able to help their clients identify and make changes to negative thought patterns and other harmful behaviors that might be contributing to their issues. Finally, counselors must display multicultural competencies and adopt a multicultural world view. This is where a counselors strives to relate and understand his or her clients regardless of their race, ethnicity, religion or political affiliation or social-economic backgrounds (Kingston, 2013).

## **2.9 Orphaned Children Living in Orphanages**

AIDS and other diseases, natural disasters, armed conflict, forced displacement and extreme poverty are the leading causes of children who are orphaned, separated or on the brink of family breakdown (Williamson & Greenberg, 2010). Many Kenyan children become destitute due to abandonment by dysfunctional families or after they escape from their homes due to issues such as abuse, neglect or violence. These conditions are usually a result of extreme poverty, substance abuse, lack of parenting skills, and mental or physical ailments of parents or relatives.

Often when families lose their fundamental elements of welfare and well-being, the core of the family is usually broken and the children are left to fend for themselves, and that is how most of them end up on the streets. The HIV/AIDS pandemic is also a major contributing factor. Thousands of children have been orphaned because of this, and they have either been left in extreme poverty or have been pushed into child slavery. According to the UNICEF, about 600,000 children have been rendered destitute due to the pandemic, and 700 more parents die every year because of AIDS-related complications.

A UNICEF report (2009) reveals that there were about six million children around that time that required special care and protection. Of these, about 2.4 million were orphans (having lost one or both parents). Most of these orphans were cared for by family members, but many were in charitable children's institutions, on the streets or in child-headed homes.

Williamson and Greenberg (2010) in their paper "Families not orphanages", state that it is hard to know the number of children in institutional care due to the inadequate monitoring by governments. An unfortunate fact is that many governments, especially those that lack adequate resources, do not know how many orphanages exist in their countries, much less the number of children in these institutions. In Kenya, for example, although the government has policies that require organizations to seek authorization before establishing residential care for destitute children, privately run orphanages have been allowing to proliferate. There is a mismatch between the children's needs and what these institutions are offering (Save the Children, 2013).

The roles of these institutions have been abused, and some of the reasons why they remain intact as opposed to other alternative includes; some children in the street may

not be willing to go back to their original families or stay with a substitute family, and an institution may be the only option of getting them off the streets (Goodner, 2015). Another reason is that an orphanage may be the immediate alternative, especially in cases where the children are being abused. In many countries, Kenya included, institutional care remains the default option for children without adequate family care. The post-election violence in 2008 also gave birth to a high number of the so-called orphanages since large numbers of children were either separated from their families or were left, orphans. Even though a significant number of these children have been reunited with their families, there are still a significant number of the orphanages that have remained open and put up a front to attract donor funding (Phan, 2012).

The government cannot purport to have achieved most of the MDGs, while millions of the orphans are still out of the school when more than 30% Kenyans can hardly feed even ones a day due to abject poverty and the health and wellbeing of the orphans are not prioritized (Freedman, 2014).

Government at various levels ought to go beyond the political achievements of MDGs and chart a way forward towards accessing the ever-increasing plight of orphans and abandoned children in this country. As a matter of fact, the government, through the line ministry, should liaise with county governments towards appraising the activities of orphans in the orphanages. The individuals and groups operating and managing the orphanages have done and are still doing their own part of championing the cause of humanity. It is prudent for the government at different levels to support them in the noble exercise. Corporate bodies should cultivate the will to have the plight of these orphans and abandoned and vulnerable children in our midst (Save the Children, 2014).

Nelson (2014) ably states that HIV/AIDS has devastated the society and economic fabric of African societies and made orphans of a whole generation of children. Although most agencies viewed the plight of orphans as a short term humanitarian disaster, they acknowledge the long term social consequences of African children growing up without parental love and guidance the potential for these children to form a large group of dysfunctional adults which could further destabilize societies already weakened by previous upheavals should be worrying. Studies have found out that children living in institutions/orphanages may suffer more from compatible and mental health issues and mental disorders such as depression, anxiety, aggression, social withdrawal and self-efficacy and symptoms of poor physical health than those living with their natural families or with foster families.

In Africa, little is known about the psychological effects of placing orphans in an institution of care/ orphanages. Some scholars have argued that institutional placement in Africa is culturally unacceptable because institutions only provide help to a small percentage living a majority of the orphans with no option but to pour out into the streets (Walton, 2015). Childhood is a stage of don't in which the reciprocal emotional bonding between child and his/her caregiver should be there and sustained for healthy physical, psychological and social development which has been known over the centuries. Children who experience early deprivation and neglect from parents or caregivers have a significantly increased risk of a range of psychiatric disorders and depression as posited by many researchers (Grobbelaar, 2013).

Studies have shown that children placed in orphanages vary significantly during the early years of age and for a long duration experience serious psychopathology later in life as compared to those living with families. This is because like adults, children are grieved by the loss of their parents, but unlike adults, children do not feel the full impact of the

loss. They may not be able to understand the finality of death immediately, preventing them from going through the grieving process, which is very necessary to recover. Children are, therefore, at the risk of growing up with unresolved/unfinished negative emotions which are often expressed with anger and depression. This automatically ends up impacting negatively on their self-efficacy (Watson, 2014).

### **2.9.1 Causes of Destitution on Children in Kenya**

AIDS and other diseases, natural disasters, armed conflict, forced displacement and extreme poverty are the leading causes of children who are orphaned, separated or on the brink of family breakdown (Williamson & Greenberg, 2010). Many Kenyan children become destitute due to abandonment by dysfunctional families or after they escape from their homes due to issues such as abuse, neglect or violence. These conditions are usually a result of extreme poverty, substance abuse, lack of parenting skills, and mental or physical ailments of parents or relatives. Often when families lose their fundamental elements of welfare and well-being, the core of the family is usually broken and the children are left to fend for themselves, and that is how most of them end up on the streets. The HIV/AIDS pandemic is also a major contributing factor. Thousands of children have been orphaned because of this, and they have either been left in extreme poverty or have been pushed into child slavery. According to the Community Action Network (2014), about 600,000 children have been rendered destitute due to the pandemic, and 700 more parents die every year because of AIDS-related complications.

Worldwide, 16.6 million children below 18 years of age have lost one or both parents to H.I.V/Aids pandemic. 90% of these are in sub-Sahara Africa. Given that orphan-hood has been associated with poorer health outcomes, education attainment and economic disadvantage, this population is another group of children and adolescents who have increased vulnerability due to severe illness in the family or overall household poverty;

hence affecting their well –being and development. Prior estimates in Kenya have found that approximately 3.6 million children are orphaned or are vulnerable and represent about one –fifth of the total population aged below 18 years. It is believed that the number will continue to rise into the future, particularly as HIV/ AIDS remains the leading cause of death of adults in the country (Musa, 2013).

War or political upheavals also contribute immensely to orphan-hood in the world today in two major ways. Firstly, many children lose their parents in the physical combat of the war. In this warfare, people are killed in combat (as soldiers), or civilians are killed in the process. Gardner (2014) further argues that countries torn apart by war, especially developing countries, are often paralyzed in their effort to care for orphans in their midst. In this way, the orphan crisis is created and heavily perpetuated by war. It is therefore shocking to note that many children are orphaned due to war invasion, natural disaster, chronic poverty, diseases (HIV/AIDS) among many other reasons. Child population makes up 2.2 billion, and out of this, ten per cent of the child population is either partially or totally orphaned. It is projected that by 2020, the orphan population will be above 400 million. Asia, Africa, Latin America and the Middle East are the regions where the largest orphan population resides. There are normally referred to as the underdevelopment of developing countries. However, a recent analyst by UNICEF on caring practices in 40 countries in sub – Saharan Africa shows that extended families have assumed responsibility for more than 90% of orphaned children in southern Africa is caring for one or more orphans. These family networks will continue to be the central social welfare mechanism in most countries around the world. Every effort is being made to appeal to families to support one or two orphans to enable them to grow up in a typical family setting (Kingston, 2013).

Mpofu (2014) argues that in Africa, after parental loss, uncles and aunts as members of the extended family are often more obligated to assume a parental role to orphaned children, especially where no other caregiver is available. However, recent reports suggest that extended families lack the full capacity to care for orphans because of rural-urban migration, change in the economy, formal education and changes in the home location. Though extended families continue to care for orphans and vulnerable children, the weakening of the extended family safety net has increased the potential of children ending up on their own, being a part of child-headed families, living on the street, being used for child labor or landing in orphanages. The emergence of orphanages in Africa has served to provide care for orphans who ones were vulnerable for not receiving care from their extended families (Akpalu, 2013). Studies have shown that counseling is useful in alleviating the symptoms of anxiety and aggression in orphans who may have relapsed to trauma as a result of their life's stresses. It, therefore, follows that the environment in which the children are growing, the surrounding people the counseling therapy they receive plays an integral role in their growth rather than the mere absence of parents in the emotional and anxiety development of the child/ orphan. It has been established that adoptive families have a myriad of problems of their own such as caring for large families. This goes a long way to explain why their children are exposed to exploitation and abuse (Evans, 2014). In addition, most fostering adults to a large extent also lack information on the emotional support that these children actually need, which has left many of these orphans angry and depressed. From these on-going discussion, it can be inferred that the quality of life of children in foster and adoptive homes is actually in danger of worsening over time unless government and other donor agencies redouble their effort to sustainably increase the capacity of community-based safety nets and



educate foster families on how best to take care of the ever-increasing number of orphans in society (Beatie, 2014).

### **2.9.2 Why Guidance and Counselling in Orphanages?**

Ludmila (2012) states that due to the increase in the number of endangered children, their physical and psychological health, the increase in crimes and drug abuse cases have been of great concern to society. She further states that there are four significant factors that influence the solutions to these problems; socio-economic, psychological, educational and health-related. Fleming (2015) reveals that from a study conducted on abandoned children, it was reported that growing up in an orphanage inhibited both mental and physical development. The study also showed that orphanages could only undo these adverse effects up to a certain extent, especially in the case of girls. A total of 136 children who were tested were put in institutional care as part of an early intervention program. Of the institutionalized initially children, 69 were randomly selected and put in orphanages. Sixty-seven remained in the orphanage as parents to foster them could not be found.

The researchers tested the intelligence, verbal skills, emotional and behavioural problems, and the physical characteristic of children of different ages. They found significant differences between the boys and the girls. IQ tests that were conducted on children between 4 and five years revealed a difference between the girls in the orphanage and those in orphanages, but there was no difference in the boys; results. Girls in orphanages scored a mean of 82 while those in the orphanage scored a mean of 70. Boys scored an average of 60 regardless of whether they were in orphanages. The IQ average in the general population is 100, and the below-average scores for these children

may have been because of what they have experienced in early life (Lonnie Embleton, 2014).

Dana Johnson from the University of Minnesota and her colleagues studied the physical development of children in orphanages and found that their development had delayed. She states that the children had a noticeably lower level of natural growth hormones. They also discovered that in the case of girls, puberty was delayed by an average of two years while in the case of boys, it was delayed by about one and a half years. Ludmila (2012) explains that the implications of children being orphaned early are very harmful to children. According to her, being orphaned has a destructive effect on the emotional connection of a child to her social environment.

The ability to love and attach is an essential characteristic of a healthy development which is a criterion of psychological health by major psychologists and physiotherapists, starting with Sigmund Freud. Orphanages take in children who are already suffering from psychological deprivation and lack of parental care, both of which can be a significant impediment to academic excellence. Stopping this lengthy deprivation in early childhood can lead to normalization in a child's development. Through counseling services in orphanages, this can be achieved (UNICEF, 2008).

In recent years, Kenya has experienced a high death rate due to HIV/AIDS pandemic and other causes. This has resulted in massive numbers of children of school-going age becoming orphaned due to the loss of one or both parents. Many of these children become vulnerable as a result. Aidar (2014) argues that a good number of these orphans go to the street to "hustle" for survival. With a lack, many of them are rescued and taken to orphanages dotted across the country. Many of these orphans (whether in orphanages or school) seem to suffer the brunt of the realities of their orphanhood. Apart from these

socio-economic burdens, the bereaved children carry heavy psychological baggage which renders them eligible for counseling. Parentally, bereaved children endure social, physical and psychological consequences (Urdan & Pajeras, 2013). Bereavement makes them vulnerable and renders them a population at risk. Over and above bereavement, additional risk factors include; severe chronic illness of a parent or caregiver, poverty, hunger, lack of access to services, inadequate clothing or shelters, overcrowding, physical or sexual violence among many other ills. All children are vulnerable and deemed at risk by virtue of there being children (UNICEF, 2014). This has implications on how bereaved children should be handled, especially after the death of their parents as they would be vulnerable.

Bereavement may be understood as posing particular difficulties in relation to the normal development of children and youths. Ludmilla (2012) states that bereaved children experience multiple stressors that complicate their grief process. In addition, available literature reveals that children experience anger, guilt, yearning, denial, shock, disbelief, depression, low cognition, anxiety, irritability, lowered self –esteem & motivation, suicidal ideation, aggression and post-traumatic stress disorder (PTSD). Parental death is viewed as very depressing! However, the psychological consequences of bereavement resulting from the death of a parent differ in the levels of depression depending on the nature of the death. Kelly (2014) posits that a higher incidence of depression occurs when a parental loss is accidental or due to suicide. Following the deaths of their parents, bereaved children suffer from psychosomatic disorders such as sleep disorders, fatigue, eating disorders, headaches, crying and nightmares. The psychological effects of all the above disorders can have far-reaching negative impacts on the children's lives, hence the need to address them before they hit alarming proportions (Snyder, 2010).

Bereaved children also suffer from social consequences. These may be understood as creating particular vulnerabilities in the context of the relatively powerless and institutionalized phase of life. Parental deaths often dismantle a bereaved child's social life (Bernard, 2012). It may lead to the introduction of the child-headed families, relocation to join other families, the emergence of unwanted behaviours like pilfering and truancy, physical and sexual abuse due to lack of parental protection and guidance, loss of social security and stigmatization, poverty, among others. A good number turn to deviance, such as running away from home and drug/substance abuse. In support, Rembe (2015) discussed social consequences of death where children compared life before and after the deaths of their parents where they chose the former. There is, therefore, a greater need to strengthen social support networks during bereavement. Schools and other residential institutions (including orphanages) need to be aware of these social consequences that ravage bereaved children when dealing with them (Jewitt, 2014).

The notion of institutional bereavement /grief counseling therefore is quite crucial. Counseling is defined elsewhere in this work is a structured conversation between a counselor and one or more clients that assist the clients to work through particular problems he/she faces. It is further defined as a process that involves an interpersonal relationship between someone actively seeking help and someone willing to assist. Counseling, therefore, gives people the opportunity to be heard, gives them time to talk, cry, shout or think (Dent, 2015). The main goal of counseling is maximizing resilience and reducing risks and to change a situation that is risky and disruptive to the extent that one cannot continue through the normal passage of life. Hence institutional grief counseling is one of the post-tension strategies that can be employed to alleviate the plight of bereaved children and youths living in orphanages. Counselors must be aware of and bolster grieving children's positive development as this helps them to cope with

grief (Eppler, 2013). Conversant with the most current and child-appropriate approaches to counseling grieving children in their contexts. Counselors, therefore, need to take cognizance of individual contexts of bereaved and grieving children's cases (Mpofu, 2014).

### **2.9.3 The Official Government Policy on Guidance and Counselling in Kenya**

According to their paper "Peer Counseling and Social Adjustment", (Disiye, Kodero, & Ongeti, 2011), the Government of Kenya introduced Guidance and Counseling to secondary schools in the 1970s., a period during which traditional family ties were weakening due to education and urbanization.

As opposed to what many may think, the Government of Kenya has been keen on; and has some policies in regards to Guidance and counseling. According to the 1964 Ominde report, the Government felt the need to train some local people in Guidance and Counseling to replace the colonial counsellors that had just left the country. Some of the recommendations that justified this move were; to ensure children received education and training that best fit their needs and secondly, the need for advice on careers and employment openings (Moturi, 2012).

In a 1974-1978 development plan, head teachers were encouraged to schedule a time for counselling teachers to receive enquiries on careers and personal problems. The 1979-1983 development plans focused on measures to be taken to ensure that Guidance and Counselling programs were more effective in primary and secondary schools. In this same period, guidance and counseling were included in the teacher training curriculum in all teachers' training colleges and universities in Kenya (Mwoma & Pillay, 2015).

Guidance and counseling were started in America at the beginning of the 20<sup>th</sup> century as a reaction to change processes in an industrialized society. Similarly, guidance and

counseling services were introduced formally in Kenya in 1967 under the Ministry of Education and have been a concern for five decades now, as evidenced by the many education commissions. In 1976, for instance, the Gachathi report recommended that the ministry of education expands its services to include guidance and counseling to learners. The report also recommended the establishment of courses and programs at the university for training professional workers in guidance and counseling. The Kamunge Report (1988) further recommended that schools should establish robust guidance and counseling services and senior teachers should be responsible for enforcement of these services. The Presidential Committee on student's unrest and indiscipline in Kenyan secondary schools (2001) attributed the problem of indiscipline in schools to a culture of violence in institutions partly because of poor and ineffective guidance and counseling services (Okundi, 2014).

The importance of guidance and counseling was further emphasized by the ministry of education when it proposed alternatives to corporal punishment through a circular. The circular stated that students and pupils should be disciplined with care and love without necessarily using the cane or harming them in the process. Various students have shown that teachers lacked the necessary skills to fully implement and operationalize guidance and counseling programs. Teachers feel that the ministry emphasizes on guidance and counseling but failed to take into account the fact that many schools were staffed with ill-prepared and also lacked the necessary and requisite resources to support implementation. Good and effective guidance and counseling program are essential in every institution (schools & orphanages). An organized and deep-rooted guidance and counseling program will offer the right environment for the growth and development of the orphans and offer quality adjustment to the realities of life in the orphanage. Orphans are faced with a myriad of issues and challenges. Effective and efficient guidance and

counseling program in the orphanage will therefore be well-received by all (Fleming, 2015).

#### **2.9.4 De-Institutionalization of Children in the Modern World**

The deinstitutionalization program in the western countries sped up in the 1950s after a series of scandals and abuse of orphans (Mulheir & Browne, 2007). Through this program, orphanages were closed down in favor of foster and accelerated adoption. In many works of fiction (notably *Oliver Twist* and *Annie*), the administrators of orphanages are depicted as cruel monsters. In most parts of the world, orphans are kept perpetually in poor and inhuman conditions deliberately to attract more donation and sympathy from their donors. This explains why charities today are increasingly focusing on the reintegration of orphans to keep them with their extended family and communities (Exil, 2012).

Deinstitutionalization is the process of reforming child care systems and closing down children's institutions and orphanages, finding alternative placements for children currently a resident and setting up other services to support vulnerable families in non-institutional ways (Parish, 2005). Even though it became the prevailing trend in many developed countries in the post-war period, it has been happening in Europe since the fall of communism, and it is currently encouraged by the EU for new entrants. Recently, it has also been happening in Africa and Asia even though it is mostly at individual institutions rather than statewide. The new systems are less costly than the institutions since more children are kept within their own families (Nalvern, 2014). In the developed world, deinstitutionalization occurred mostly between 1941 and 1980. This was a consequence of the 1935 social security act that allowed Aid to dependent children to be passed, and thus children could not be separated from their families by poverty alone.

This also occurred during the same period in Western European and some South American countries (Exil, 2012).

In Eastern Europe, it is currently more common in the former Soviet Bloc. Many of the remaining institutions in Eastern Europe are occupied by disabled children who are harder to place in the community. The same is happening in Hungary, where no more children are being placed in institutions. Russia has also recognized that children should be raised in families, but it is yet to start closing the institutions (Guut, 2014). Many of the institutions in Africa are donor-funded and are often not part of the larger child protection system. African countries that have received the support of their governments on institutionalization include Rwanda, Ghana and Ethiopia, but the process can be complicated because the governments do not run the institutions.

In other countries across the world, there have been small-scale moves towards deinstitutionalization and family-based placements. There have been some efforts in China but not yet on a large scale. It has also become a priority for NGOs in Nepal and Haiti (Lillian, 2013). There are efforts to move children out of orphanages and back to their families even though not as part of the broader deinstitutionalization program. It is considered necessary that all institutions-home-transitions must be accompanied by adequate preparations through individual and group counselling (Evans, 2012). The development of social work teams to manage fostering and adoption programs are also considered necessary. Where possible, children are reunited with their birth or extended family members. These children transiting from the orphanage into the community may need significant support as their life skills may be limited. Failure to prepare them adequately can cause a backlash where a significant number of them could return to the orphanage or end up in crime or prostitution (Nalvern, 2014).



Orphanages, orphanages/villages or other group residential facilities may seem a logical response to the growing orphan population. In fact, this approach can impede the development of national solutions for orphans and other vulnerable children. Such residential institution may be appealing because they can provide food, clothing and education, but they dismally fail to meet the young people's emotional and psychological needs. It is generally believed that countries – and children –are better served by programs that keep children with the community, surrounded by leaders and peers they know and love” (Aidar, 2014). Traditional residential institutions usually has too few care-givers and are therefore limited in their capacity to provide children with the affection, attention, personal identification and social connections that families and communities can offer. Institutional care tends to segregate children and adolescents by age and sex and from other communities. Instead of encouraging independence and creative thinking, institutional life tends to promote dependency and discourage autonomy. In the case of young adults, the transition from a residential institution to positive integration and self-support as a young adult in the community becomes a herculean task! They lack essential social and cultural skills and a network of connections in the out-side community (Goulao, 2014). In most developing countries where extended family and community are still the most dependable and reliable social safety nets, any disconnection from their support system and networks greatly increase an orphan's long-term vulnerability (Bala, 2014). Surveys and research have shown that many children under residential, institutional care have at least one living parent or relative. In many parts of the world, impoverished families have stealthily released their children to orphanages to secure access to services or better material conditions for their children. In order to alleviate this trend, there is every need to empower families and communities on the social and economic fronts to stop this trend and by extension reduce

and eventually close down these institutions for kids to grow up in families & communities (Danladi, 2014).

## **2.10 Theoretical Framework**

The Theoretical Framework is the structure that can hold or support a theory of a research study (Ary, Jacobs, Razavieh, & Sorensen, 20 06). The theoretical framework introduces and describes the theories that explain why the research problem under study exists. The following Theories support this Research work.

### **2.10.1 Adlerian Theory**

The theory was founded by Alfred Adler and championed in America by Rudolf Dreikurs (Mosak & Maniacci, 2013). Central to the Adlerian approach is to see the personality as a whole and not as the mere net result of component forces. Thus the term individual (indivisible) psychology (Sommers-Flanagan, 2012). Adlerian psychology places its emphasis on a person's ability to adapt to feelings of inadequacy and inferiority relative to others. He believed that a person would be more responsive and cooperative when he or she is encouraged and harbours a feeling of adequacy and respect (Adler, 1992). Adlerian adopt a radical stance that cuts across the nature-nurture debate by seeing the developing individual at work in creating the personality in response to the demands of nature and nurture but not entirely determined by them. The self-created personality operates subjectively and idiosyncratically. The individual is endowed with a striving both for self-development and social meaning., what Adler himself called "the concept of social usefulness and the general well-being of humanity" (Adler, 1992), expressed in the sense of belonging, usefulness and contribution, and even cosmic consciousness.

Adlerian Psychology emphasizes the proactive, form-giving and fictional nature of human cognition and its role in constructing the “realities” that persons know and to which they respond. The Adlerian theory asserts that humans construct, manufacture, or narrative ways of viewing and experiencing the world. It is an optimistic, positive psychological theory affirming that humans are not determined by heredity or environment. Instead, they are creative, proactive, meaning-making beings, with the ability to choose and to be responsible for their choices. Adlerian theory is a holistic, phenomenological, socially oriented, and teleological (goal-directed) approach to understanding and working with people (Corey, 2013).

Adlerian theory helps to understand the need to identify, understand the purpose of, and modify repetitive self-defeating behaviours; and the importance and benefit of counsellors and clients developing realistic and mutually agreed upon counselling goals (goal alignment). The theory also recognizes that having problems, difficulties, and differences is a regular part of life and can be viewed as opportunities for growth rather than “pathology”. The theory views that counselling as educational, preventative, and growth-promoting, not merely a remedial one. Adlerian counselling is a growth/wellness model. It is an optimistic perspective that views people as unique, creative, capable, and responsible. Adlerian counselling emphasizes prevention, optimism and hope, resilience and growth, competence, creativity and resourcefulness, social consciousness, and finding meaning and a sense of community in relationships (Watts, 2014).

As Prochaska and Norcross (2010) put it, many of Adler’s ideas have quietly permeated modern psychological thinking. Adlerian theory is the most effective personal counselling theory that most people and institutions can identify with.

Wang, Zhang, and Liu (2015) state that one downside to this theory is that it lacks a firm, supportive research base. There have not been many empirical studies that clearly show the effectiveness of the Adlerian theory. The Adlerian approach is vague about some of its terms and concepts. Although others have attempted to clarify this approach, there are still some Adlerian ideas remain unclear. Adler was also vague about how to work with clients. Yet another factor that may be looked at as a drawback to Adlerian technique is that it may be too optimistic when it comes to human nature. Also, a possible limitation of the Adlerian approach focuses on some of its basic principles, such as the concept with individuals whose cultural context purports a lineal social relationship. At last, because the Adlerian approach relies strongly on verbal erudition, logic and insight, it may be limited in its ability to help individuals who are not intellectually bright (Wang, Zhang, & Liu, 2015).

This theory is therefore critical in this study as it helps to understand how counselling services on academic performance and self-efficacy of destitute children in orphanages in Kenya.

### **2.10.2 Social Learning Theory**

Learning is a process where behaviours are learnt or acquired from the environment (Bandura, 1977). One way of learning is through social observation and imitation. This theory is advanced by Albert Bandura (1986). This theory explains delinquency as a behaviour learnt through the complicated process of socialization. The theory postulates that the behaviour is reflective of people observing and imitating others and imagining the consequence of their behaviours.

The theory advocates that human behaviours be modified using learning principles to change behaviours (Omulema, 2000). The behavioural approach emphasizes that the

client define goals in behavioural terms, provide resources and encouragement in helping clients move towards goals and helps clients with different problems (Patterson, 1973). Teacher counsellors can, therefore, apply this to students concerning their academic performance. Makinde (1984) notes that the effectiveness of behaviours is assessed by changes in the specific student's behaviours. This implies that they can use behavioural to create a conducive environment for the students to modify their behaviours to solve their academic problems through the creation of learning conditions.

Teacher counsellors can use behavioural techniques like self-management programs and self-directed behaviours which may deal with learning, studying, and time management skills in schools. This will foster the students' academic performance. The student will drive towards growth, health and adjustment (Makinde, 1984). Therefore, a good environment created by the teacher counsellor can provide room for good self-efficacy that will boost success in academic performance and one's overall life after exiting the orphanage.

With a heavy emphasis on how the child's environment affects him and directs his learning, this theory is weak when it comes to the child's accountability for his own actions. Putting the focus on how setting influences behaviours places more weight on the people and community that the child is part of, and not enough weight on how the child handles and processes new information. It neglects the child's accountability and may go too far in stating that society directs how the individual behaves and acts.

### **2.10.3 The Systems Theory in Psychology**

Human behaviours are often confusing and inexplicable to observers (Von Bertalanffy, 1967). The systems theory is a reaction to some of these practices. One of its central tenets is that the human mind is more than the mere total of its parts. According to

system theorists, the human mind is an intricate weave of psychological mental and chemical processes, and thus human beings should be treated as systems in themselves.

Systems theory in psychology is an adaptation of general systems theory. Developed by Ludwig Von Bertalanffy, general systems theory was developed as a response to what was seen as the radically impersonal nature in then-contemporary science. The mechanistic nature was pure in studying human beings, and there was no way to deal with Teleology (the study of purpose or goals). Humans and other life forms have a purpose, and a lack of acknowledgement of this trait can remove much of human behaviours from the context in which it occurs. General systems theory proposed interrelations between various elements in various systems and also proposed general principles governing those interactions (Nicklaus-Luhman, 2013).

The limitations of systems theory lie in structural functionalism theory (Cox & Paley, 1997). This theory places emphasis on the concept of homeostasis. It only agrees with changes that stabilize the system. This can pose a problem when presented with problems such as racism, LGBTQ, and the poor. Macrosystems benefit from having certain populations remain where they are. Abrupt changes in the rights, opportunities, and privileges of these populations pose a threat to the system by creating a disruption in the balance. Through this theory, only slow and steady change can occur rather than radical changes.

#### **2.10.4 Self-Determination Theory**

According to Niemiec and Ryan (2009), people are centrally concerned with motivation. Everywhere, parents, teachers, coaches and managers struggle with how to motivate those that they mentor, and individuals struggle to find energy, mobilize effort and persist in the tasks of work and life. People are often moved by external factors such as

reward systems. Self-determination theory is a macro theory of human motivation and personality that concerns peoples inherent growth tendencies and innate psychological needs. It is concerned with the motivation behind choices people make without external influence and interference. SDT focuses on the degree to which an individual's behaviours is self-motivated and self-determined.

Self-determination theory (SDT) is a framework conceptualizing the motivation which underlies the choices people make (Gagné & Deci, 2005). The theory was developed by Edward L. Deci and Richard M. Ryan in the mid-1980s. Self-determination theory is all about humans' motivation. This theory indicates that there are two types of motivation. Intrinsic and extrinsic. Intrinsic motivation comes from within. Deci and Ryan identify three basic needs that fuel intrinsic motivation: Competence; the ability to control the outcome of activity and experience mastery of that task; relatedness; the universal need to be connected to and caring for others; autonomy: the desire to be an independent agent in your own life.

Van den Broeck, Ferris, Chang, and Rosen (2016) states that conditions are supporting the individual's experience of autonomy, competence and relatedness are argued to foster the most volitional and high-quality forms of motivation and engagement for activities, including enhanced performance, persistence and creativity. Also, SDT proposes that the degree to which any of these three psychological needs is unsupported or thwarted within a social context will have a robust detrimental impact on wellness in that setting (Deci & Ryan,2000).

Self-determination theory clearly lacks a developmental focus in that it does not look at the above-mentioned distinction in developmental terms (Van den Broeck et al., 2016). Those who are acquainted with the developmental literature know quite well that the

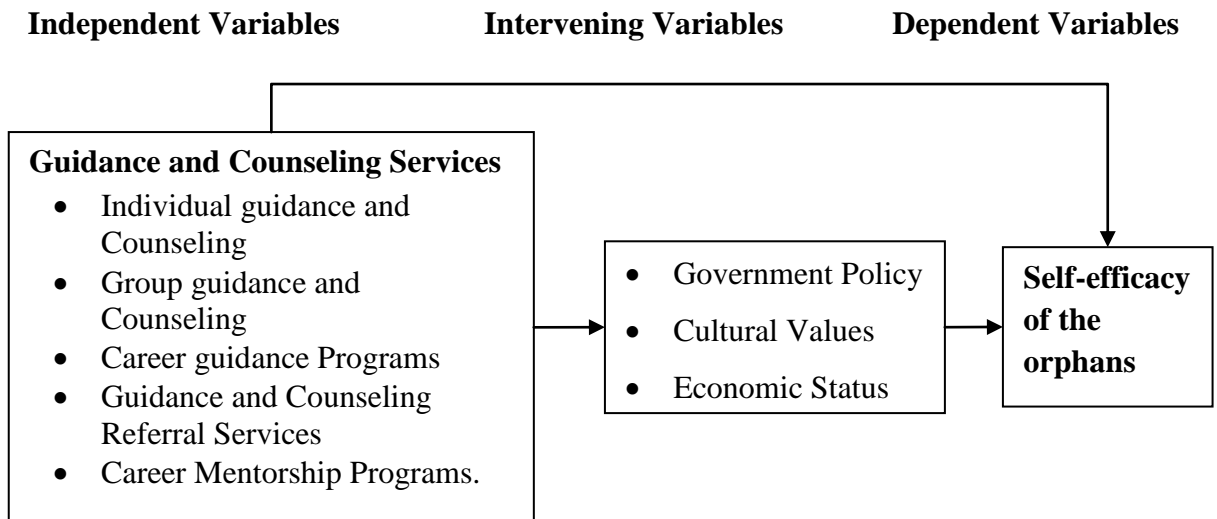
more a child is young, the more s/he is focused on external outcomes, not on internal motives. Thus, it is likely that intrinsic motivation increases with increasing age. To think of an intrinsically motivated baby seems to defy our imagination. The same might be said of, for example, a 4-year-old child as far as meta-cognition is concerned. I cannot imagine such a child engaged in the following chain of thinking: “I know that you know what I know about you.”

### **2.11 Conceptual Framework**

A Conceptual Framework of one’s work is, simply stated, the system of concepts, assumptions, beliefs and theories that supports and informs your research; it is a vital part of your design (Robson, 2011). Miles and Huberman (1994) defined a Conceptual Framework as a visual or written product, one that explains either graphically or in narrative form, the main things or aspects to be studied the vital factors, concepts or variables, and the presumed relationships among them”. The critical function of the conceptual framework is to help the researcher assess and refine one’s goals, develop realistic and relevant Research questions, select appropriate methods and identify potential validity threats to your conclusions.

Figure 1 shows the factors that need the help of Guidance and Counselling therapists. The school Counsellors can either use group, peer or one-on-one counselling to counsel pupils/students in need of this service arising from family/community, environment and personal compulsions since these are some of the reasons leading to poor academic performance. This model is conceptualized and modified by the researcher to help identify the answers to the research questions. The intervening variable comprised of the government policy, cultural values and economic status.





**Figure 1:** A Conceptual Framework Showing the Interplay Between Research Variables

Source : The Researcher (2021)

## **CHAPTER THREE**

### **RESEARCH METHODOLOGY**

#### **3.1 Introduction**

This chapter dealt with the methods and procedures that were used in the data collection. It included the research design, location of the study, the population, sampling procedures and instrumentation.

#### **3.2 Research Design**

This research adopted the survey research design (Mugenda & Mugenda, 2003; Oso & Onen, 2009). The researcher endeavoured to investigate the role of guidance and counselling services on the self-efficacy of orphaned children living in orphanages in Bungoma County. In this type of research, inferences on the influence of the variables were made without direct intervention (Ary et al., 2006). The survey design is a kind of research in which the researcher predicts the possible causes behind an effect that has already occurred. It was an empirically based investigation which did not involve the researcher's direct control or manipulation over the independent variables because they had already led to effects which could no more be manipulated. The researcher, instead of finding out the treatment, focused on the effect of a naturally occurring treatment after it had occurred. It attempted to discover the pre-existing causal conditions between groups (Neil Salkind, 2010).

#### **3.3 Location of the Study**

The study was done in Bungoma County, Kenya. Bungoma County is the third-most populous county in Kenya after Nairobi and Kakamega Counties. The county is located between 0.8479° N and 34.7020° E in the western region of the country (in the former Western Province), bordering Eastern Uganda. It also borders Busia, Kakamega, Uasin-Gishu and Trans-Nzoia Counties. The County is quite cosmopolitan because it lies along

the Great North Road and also since it is a border county. People from all over Kenya can be found in the county involved in cross-border trade. In addition, in the year 2004 to 2008, the county witnessed fierce inter-clan conflict among the Sabaot sub-clans living on the slopes of Mt. Elgon. The wars were fueled by the Sabaot militia christened the 'Sabaot Land Defense Force' (SLDF). The Militia group was used for killing well over 600 people, terrorizing the local population through physical assaults and atrocities and committing a variety of crimes including murder, torture, rape and the theft and destruction of property. It is estimated that over 66000 people were displaced in an 18 Months onslaught. The Kenya Army was deployed to the region to bring to an end the on-going massacres (KNCHR, 2008) in an Operation named "OKOA MAISHA". In this operation, thousands were detained (especially Men and boys) hundreds were tortured, and dozens were killed. Those who survived fled to other parts of the county and some sought for refugee in eastern Uganda. This operation left behind thousands of children either orphaned or abandoned. Most of these victims were taken into the various orphanages spread across Bungoma County (Mwangi, 2012).

### **3.4 The Population of the Study**

The target population was the entire 20 Orphanages within Bungoma County. There are a total of 2000 orphans in the 20 orphanages put together. A total 240 of the orphans in all the 20 orphanages were involved. One (1) caregiver and one (1) administrator (again per orphanage) were interviewed. Caregivers and Administrators were very critical in the study since they spend most of their time with the children and would therefore give reliable information and data of the orphans and how guidance and counselling services were impacting on their self-efficacy. A total of 280 respondents formed the accessible population of this study. This was in line with Krejcie & Morgan (1970) table of specification, which showed that if the population was 2000, then the sample should be

approximately 300. The target population was slightly more than 2000 orphans and caregivers in the entire 20 orphanages. These homes were under different arms of management. A majority were under NGOs, CBOs and FBOs. However, other orphanages were run by philanthropic organizations, trusts and even independent individuals and families.

**Table 1: Population of the Study**

<b>Orphanages</b>	<b>Orphans</b>	<b>Caregivers</b>	<b>Administrators</b>	<b>Maximum Recommended sample size</b>
Restoration of Hope	80	4	1	33
Keasler Orphanage	75	4	1	28
Kanduyi childrens Home	163	8	2	120
Siritanyi Orphanage	78	8	1	31
Bible School Orphanage	87	4	1	41
The Compassion House Orphanage	73	4	1	26
Jordan Family Orphanage	117	6	2	72
Jane Ryken Center of Hope	74	4	1	27
Gustav Orphanage	83	4	1	31
Mothers on a Mission International orphanage	133	8	2	88
Good Samaritan Orphanage	89	4	1	38
Lela Orphanage	125	6	2	80
Community break-through support	104	5	2	56
Faith Homes Children's Center	101	5	2	56
Advent Orphanage	117	6	2	72
Rising Star Orphanage	108	5	2	63
Corner Stone Children's Orphanage	93	5	1	43
Victory Rescue Children's Center	88	4	1	20
Future Generation Orphanage	95	4	1	48
Umoja Orphanage	116	5	2	71
<b>Total</b>	<b>2000</b>	<b>103</b>	<b>29</b>	<b>1044</b>

### 3.5 Sampling Procedures and the Sample

Purposive sampling technique was used to select the most affected orphans regarding poor self-efficacy of its children. The sample comprised of all the 20 orphanages spread across the 9 Sub-counties within Bungoma County. The Sub-Counties were: Tongaren, Kimilili, Webuye East, Webuye West, Bumula, Kabuchai, Kanduyi, Mt. Elgon and Sirisia (IEBC, 2017). Purposive sampling technique was used to select the most affected orphans regarding poor self-efficacy performance of its children. Cozby (2005) asserts that purposive sampling is ideal for obtaining a sample of people who meet same pre-determined criterion which in this case is the influence of guidance and counselling services on self-efficacy of orphaned children living in orphanages in Bungoma County. Fourteen children (preferably 7 boys and 7 girls), a caregiver and an administrator were selected from each of the 20 orphanages. In total, 280 respondents were used in this study.

**Table 2: Sampling Procedure**

Number of Orphanages	Orphans		Administrators	Caregivers	Total
	Boys	Girls			
20	6	6	1	1	
<b>Total</b>	<b>120</b>	<b>120</b>	<b>20</b>	<b>20</b>	<b>280</b>

### 3.6 Research Instruments

Two sets of questionnaires were used in the collection of data for this study. These were questionnaire for orphans and the other one for caregivers and administrators. According to Mugenda and Mugenda (1999), open-ended questions are those that cannot be answered with a “yes” or a “no” response, or with a static response. Open-ended questions are phrased as a statement that requires a response. The response can be

compared to information that is already known to the questioner. In addition, open-ended questions permit the respondent to give open views or opinions.

### **3.7 Pilot Study**

The pilot study in this research work was undertaken in two (2) orphanages from the neighbouring Trans-Nzoia County in the North Rift Region of this country. According to Connelly (2008), extant literature suggests that a pilot study sample should be 10% of the sample projected for the larger parent study. This County (Trans-Nzoia) borders Bungoma County to the North and also witnessed the atrocities that were committed by the SLDF. A pilot study is what one would call a run-through or dress rehearsal of the actual study. A pilot is a good way to troubleshoot any equipment problems, familiarize the team with the procedures and to generally see if the experiment design has any potential flaws. The Sabaots of Saboti Sub County of Trans-Nzoia County received an equal measure of the onslaught by SLDF. The main purpose for the pilot study was major to check on the suitability and clarify the question items on the instruments design, relevance of the information being sought, the language used and the content variety of the instruments (Mugenda & Mugenda, 2003). By subjecting the instruments to piloting, content validity was enhanced. Through piloting, items in the research instrument that could be ambiguous in eliciting relevant information were identified and modified. The main aim of the pilot study was to enhance the validity and reliability of the research instruments (Mugenda & Mugenda, 1999). According to Orodho (2014), validity is concerned with establishing whether the questionnaire content is measuring what it was intended to measure.

### **3.7.1 The Validity of the Instrument**

According to Orodho (2014), validity is concerned with establishing whether the questionnaire content is measuring what it is supposed to measure. An instrument is only valid to the extent that its scores permit appropriate inferences. Validity is specific to the appropriateness of the interpretations we wish to make with the scores. To ensure content validity, the researcher consulted some competent persons in the department, especially the lecturers from the School of Education who are authorities in this area of study (Clark & Watson, 1995). The supervisors examined the questionnaire items and provided useful feedback to the researcher, who then incorporated their views and recommendations in the final questionnaire.

### **3.7.2 Reliability of the Instrument**

Reliability is a measure of the degree to which research instruments yields consistent results after repeated trials (Mugenda and Mugenda, 2007). Reliability test measures the internal consistency of the questionnaire. Reliability was calculated with the help of the test-retest method. Measurement of Self-Efficacy was done by the use of Generalized Scale of Self-Efficacy (GSE) (Schwarzer & Jerusalem, 1995). The scale assessed the strength of an individual's belief in his or her ability to respond to difficult situations. The measure had 10 items, and for each item, there was a 3 point response. High internal consistency ratings were demonstrated with Cronbach's alpha ranges from .82 to .93. Cronbach's alpha was used whereby a co-efficient of above 0.7 implied that the instruments were sufficiently reliable for the measurement (Cronbach, 1951). There are two types of reliability, thus internal and external reliability. Internal reliability assessed the consistency of results across items while external reliability referred to the extent to which a measure varied from one use to another (Lacobucci & Duhachek, 2003). The objectives of pre-testing were to allow for modification of various questions to rephrase,

clarify and or clear up any shortcomings in the questionnaires before administering them to the actual respondents. It helped the researcher to correct inconsistencies that arose from the instruments, which ensured that they measured what was intended to be intended. Table 3 is a summary of thje reliability results.

**Table 3: Reliability Results**

	No. of Items	Cronbach Alpha Coefficients
Individual Guidance and Counseling Services	10	.765
Group Guidance and Counseling Services	10	.789
Career Guidance Services	10	.885
Guidance and Counseling referral services	10	.899
Mentorship programs	10	.783
Self-efficacy	10	.767

Table 3 gives the values of Cronbach Alpha Coefficients for the respective variables of the study. From the findings, all the values are above 0.7. According to Cronbach (1951), a co-efficient of above 0.7 implied that the instruments were sufficiently reliable for the measurement.

### **3.8 Data Collection**

The researcher administered the questionnaire through the drop in personal administration. This method of Data collection gave the researcher an excellent opportunity to interpret and clarify questions in the questionnaire to the respondents (Kothari, 2004). This ensured that the respondents fully understood the questions before answering hence ensuring a high response rate. In order to ensure high response rates, interpretations of the sections of the questionnaires through an interview schedule were



made to the respondents, which ensured that they fully understood the questions before answering.

### **3.9 Data Analysis**

According to Kothari (2004); Mugenda & Mugenda (2003) and Oso & Onen (2009), the data that was collected was further processed and analyzed to facilitate answering the research objectives and questions. The quantitative data was first edited, coded, entered into the Statistical Package for Social Sciences (SPSS), which also aided in the data analysis. This study was expected to generate qualitative and quantitative data. Descriptive statistics were adopted for this study. The quantitative data were analyzed using descriptive statistics. Descriptive statistics included frequency distribution tables and measures of central tendency (the mean), measures of variability (standard deviation) and measures of relative frequencies (Demirdis, 2013). The qualitative data was generated from the open-ended questions and was categorized in themes by research objectives and reported in narrative form along with the quantitative presentation. Quantitative data was presented using tables, charts and graphs. Qualitative data were analyzed by the use of content analysis technique. The analyzed data was then presented in the form of narratives, where verbatim reports of respondents were quoted.

### **3.10 Ethical Considerations**

In the process of data collection, analysis, presentation and reporting, the researcher followed due process, informed consent, confidentiality and anonymity of participants. The researcher applied for clearance from the Institute of Graduate Studies and Research, Kabarak University. The researcher then applied for a research permit from the National Commission for Science Technology and Innovation (NACOSTI) of the Government of Kenya and a research authorization letter. The researcher later sought for research

authorization from the County Commissioners, Bungoma and Trans-Nzoia Counties. Further, orphanage entry approvals were sought from the County Directors of Education, Bungoma and Trans-Nzoia Counties.

In the orphanages, the researcher informed the orphanage management about the nature of the study using the Information Sheet for the orphanage administrators. The participant caregivers were informed by the researcher about the nature, objectives and the procedure of the study through the Participant Information Sheet. The participants participated in the study through a voluntary process (Shamim & Rashida, 2013). To seek the caregivers' approval, they were requested to read and sign their respective Consent Forms. The researcher assured the respondents about the confidentiality of the information that they gave.

The orphanages and the participant caregivers and administrators were assigned pseudonyms to protect their identity (Shamim & Rashida, 2013). Throughout the study process, the information gathered was kept in a locked place away from possible access by a third party. Information that was in soft copy was guarded using access passwords known only by the researcher. The information was used for purposes of the research only.

## CHAPTER FOUR

### DATA ANALYSIS, PRESENTATION AND DISCUSSION

#### 4.1 Introduction

This section summarizes the results and findings of the study. The purpose of the study was to establish the influence of guidance and counselling services on the self-efficacy of orphaned children living in orphanages in Bungoma County. The objectives of the study were; to establish the influence of individual guidance and counselling services on the self-efficacy of orphaned children living in orphanages in Bungoma County, to establish the influence of group guidance and counselling services on the self-efficacy of orphaned children living in orphanages in Bungoma County, to determine the influence of career guidance services on the self-efficacy of orphaned children living in orphanages in Bungoma County, to establish the influence of guidance and counselling referral services on the self-efficacy of orphaned children living in orphanages in Bungoma County and finally to determine the influence of mentorship programs on the self-efficacy of orphaned children living in orphanages in Bungoma County.

#### 4.2 Questionnaire Response Rate

A total of 280 questionnaires were given to the respondents, and they were all filled and returned, as shown in Table 4.

**Table 4: Questionnaire response rate**

	Orphans		Administrators	Caregivers	Total
	Boys	Girls			
20 Orphanages	6	6	1	1	
<b>Total</b>	<b>120</b>	<b>120</b>	<b>20</b>	<b>20</b>	<b>280</b>

**Source: Research data 2019**

The results show that the questionnaire response rate was 280 (100%).

### 4.3 Socio-Demographic Characteristics of the Sample

The respondents were asked to indicate their gender, and their responses are shown in Table 5.

**Table 5: Gender of the respondents**

<b>Gender</b>	<b>Frequency</b>	<b>Percentage (%)</b>
Male	147	52.4
Female	133	47.6
<b>Total</b>	<b>280</b>	<b>100.0</b>

**Source: Research data 2019**

The results in Table 5 shows that 147(52.4%) of the respondents were male, while 133(47.6%) were female.

### 4.4 Individual Guidance and Counselling Services and Self-Efficacy of Orphaned Children

The first objective of the study was to establish the influence of individual guidance and counselling services on the self-efficacy of orphaned children living in orphanages in Bungoma County. Respondents answered a series of questionnaire items tailored to establish their lived experiences on how individual guidance and counselling services influenced their self-efficacy.

#### 4.4.1 Descriptive Statistics

Table 6 is a summary of the descriptive statistics on individual guidance and counselling services.

**Table 6: Descriptive Statistics on Individual Guidance and Counselling Services**

	True		False		Do not Remember	
	n	%	n	%	n	%
I remember well how long I have lived in this Orphanage.	240	93.4	5	1.9	12	4.7
There is a permanently employed counselor who offers individual guidance and counseling services.	98	38.1	125	48.6	34	13.2
There is a part-time counselor who comes periodically to offer individual counseling services on a needs-basis.	177	68.9	67	26.1	13	5.1
On various occasions, I have felt the need to open up and share my life's challenges to a professional counsellor or a trusted person.	179	72.4	62	24.1	9	3.5
I have felt relaxed and at ease to open up freely to the specialists brought in by the management of the Orphanage to offer individual Guidance and Counseling services.	174	67.7	60	23.3	23	8.9
I have found the individual guidance and counseling sessions to be enjoyable and resourceful.	207	80.5	34	13.2	14	5.4
Occasionally, I have noted that some individual counseling sessions have been boring.	101	39.3	132	51.4	23	8.9
I have always managed to solve serious life's challenges on my own after confiding to a counsellor.	196	76.3	33	12.8	28	10.9
I can confidently confirm that Individual Guidance and Counseling Services are offered in the Orphanage.	205	79.8	41	16	11	4.3
I have had confidence in the counselors who provide individual Guidance and Counseling Services in the Orphanage.	167	65	72	28	18	7

The results in 6 show that 240(93.4%) of the respondents remembered well how long they had lived in the Orphanage compared to 5(1.9%) who were not sure and 12(4.7%) who did not remember well how long they had lived in the Orphanage. The researcher sought to establish if there was a resident professionally trained counsellor in the

managed care institution. Respondents were required to respond to the statement “There is a permanently employed trained counsellor who offers individual guidance and counselling services”, and their response presented in Table 4.3. The results in Table 6 show that 98(38.1%) of the respondents indicated that there was a resident professional counsellor in their institution. In comparison, 125(48.6%) claimed there was no resident professional counsellor, and 34(13.2%) did not know if there was a resident professional counsellor in their institution.

To establish the presence of visiting professional counsellor in the orphanages, the respondents responded to the statement “There is a counsellor who comes periodically to offer individual counselling services on a needs-basis”. Table 6 present the data from the responses. Data presented in Table 6 indicates that 177(68.9%) of the respondents asserted that a part-time counsellor visited periodically to offer individual counselling services on a needs-basis, 67(26.1%) claimed there were no visiting professional counsellors, and 13(5.1%) did not know if there was a visiting counsellor who comes periodically to offer individual counselling services on a needs-basis. To establish the level of uptake of counselling services, respondents responded to the statement “On various occasions, I have felt the need to open up and share my life’s challenges to a professional counsellor or a trusted person”. Table 6 presents the generated responses. The results in Table 6 show that 179(72.4%) of the respondents indicated that on various occasions, they had felt the need to open up and share my life’s challenges to a professional counsellor or a trusted person. Moreover, 62(24.1%) had never felt the need to open up, and 9(3.5%) did not remember if, on any occasions, they felt the need to open up and share my life’s challenges to a professional counsellor or a trusted person.

To establish the ease of interaction between professional counsellors and the orphans, respondents gave their lived experiences in response to the statement “I have felt relaxed and at ease to open up freely to the specialists brought in by the management of the Orphanage to offer individual Guidance and Counselling services”. Table 6 presents the observations. The results in Table 6 show that 174(67.7%) of the respondents felt relaxed and at ease to open up freely to the specialists brought in by the management of the Orphanage to offer individual guidance and Counselling services. On the contrary, 60(23.3%) indicated they never felt relaxed opening-up and 23(8.9%) did not remember to have felt relaxed and at ease to open up freely to the specialists brought in by the management of the Orphanage to offer individual Guidance and Counselling services. In order to establish the perception of guidance and counselling experiences, the respondents were required to respond to the statement “I have found the individual guidance and counselling sessions to be enjoyable and resourceful”. The responses are shown in Table 6. Data presented in Table 6 show that 207(80.5%) of the respondents found the individual guidance and counselling sessions to be enjoyable and resourceful, while 34(13.2%) never found it enjoyable and 14(5.4%) did not remember whether they were enjoyable and resourceful. Moreover, 2(0.8%) did not respond to the statement.

The researcher sought to establish if the respondents enjoyed their counselling experience. A statement: “Occasionally, I have noted that some individual counselling sessions have been boring” following the generated responses from the above table. 101(39.3%) of the respondents occasionally noted that some individual counselling sessions were boring while 132(51.4%) indicated their sessions were never boring and 23(8.9%) did not remember noting that some individual counselling sessions had been boring. Guidance and counselling sessions are usually personal, and therefore it is expected that the experiences are quite memorable. It was noteworthy that 8.9%

indicated they could not remember if the sessions were boring. The lapse in memory attributed to other intrusive distractions that could have made the respondents psychologically absent during the sessions or present minimal attention. Research should be conducted to establish the cause for this distraction.

The researcher wanted to establish the orphans' efficacy and required the respondents to indicate their ability to solve life issues. A posited statement: "I have managed to solve serious life's challenges on my own after confiding to a counsellor" yielded the response data presented above. 196(76.3%) of the respondents always managed to solve serious life's challenges on their own after confiding to a counsellor. In comparison, 33(12.8%) indicated they managed to solve serious life's challenges on their own after confiding to a counsellor some of the times, while 28(10.9%) indicated they never managed to solve serious life's challenges on my own after confiding to a counsellor. The descriptive data presented in Table 32 is indicative of the observed efficacy of orphans in solving their life challenges. Since 10.9% of the respondents indicated that they could never effectively solve their life challenges on their own even after confiding to a counsellor in indicative of the need for psychosocial services offered through guidance and counselling.

The researcher sought to find out the level of awareness of the availability of mental health care in the orphanages. Respondents stated their level of agreement with the statement: "I can confidently confirm that individual guidance and counselling services are offered in the orphanage". The responses are summarised in Table 6 above. The results further shows that 205(79.8%) of the respondents agree that they can confidently confirm that their orphanage offered individual guidance and counselling services, compared to 41(16%) who disagreed and 11(4.3%) who were not sure if their orphanage



offered individual guidance and counselling. The fact that 16% of respondents confidently indicated that their orphanage offered individual guidance and counselling was a good indicator that some of the orphanages did not have any mental health care at the time of research.

The researcher set out to establish the perceived efficacy of the counsellors who provided mental health services in the orphanages by observing the opinion of orphans. The respondents stated their level of agreement with the statement: “I have confidence in the counsellors who provide individual guidance and counselling services in our orphanage”. The results shows that 167(65%) of the respondents agree that they have had confidence in the counsellors who provide individual guidance and counselling services in the orphanages. On the other hand, 72(28%) disagreed and 18(7%) were not sure if they had confidence in the counsellors who provide individual guidance and counselling services in the orphanages. The data indicates that a combined proportion of 35% indicated that they either had no confidence or were not sure about the efficacy in the counsellors who provide individual guidance and counselling services in the orphanages.

The researcher triangulated collected data with the interview schedule. A total of 10 respondents were purposively sampled from the orphans identified as beneficiaries of guidance and counselling services in the target institutions. The central question for every respondent was: *How has the guidance and counseling services in your institution helped you in solving the problems that you encounter from day-to-day?* It was observed from their responses that the central theme in their responses centred around self-expression and positive sense of self. One of the sampled orphans (Respondent 3; age 16 years) presented a response as follows:

The first time I went alone to the counsellor's room, I was full of fear; I did not know what to expect; I didn't know what to tell the counsellor. So, that day I did not say much because I was too terrified to speak up my mind. However, with time, I discovered it was not as bad as I feared after all. The counsellor was also very understanding and did not force me to say anything. It was like she knew I was struggling inside. By and by, I started trusting her, and it was easier to tell her my secrets and fears. I finally poured my heart out to the counsellor. I became very free to disclose all my past issues and challenges with the Counsellor. She helped me to look at life differently and handle each life challenge individually. The counsellor taught me new ways of thinking. I have learned various survival skills and techniques on how to face life's challenges. Somehow, I have developed some resilience that has enabled me to accept and treat life's challenges as opportunities to exercise my resilience. I have also developed useful coping skills that give me the energy to face life on a day-to-day basis.

#### **4.4.2 Chi-Square Test for Individual Counselling and Self-Efficacy of Orphans**

The researcher conducted a chi square statistical analysis establish the significance of the relationship between individual counselling and self-efficacy of the orphans. The researcher posited a null hypothesis  $H_0$ : "There is no statistically significant relationship between individual guidance and counselling services and the self-efficacy of orphaned children living in orphanages in Bungoma County". The threshold for testing this null hypothesis was a 0.05 significance level, and Table 7 presented the chi-square output.

**Table 7: Chi-Square Tests for Individual Counselling and Self-Efficacy of Orphans**

	Value	Df	Asymp. Sig. (2-sided)
Pearson Chi-Square	985.931 <sup>a</sup>	169	.000
Likelihood Ratio	309.118	169	.000
Linear-by-Linear Association	62.247	1	.000
N of Valid Cases	254		

a. 183 cells (93.4%) have expected count less than 5. The minimum expected count is .00.

Table 7 presents a Pearson Chi-square value of 935.931 with 169 degrees of freedom and a significance level of 0.00, which is less than the expected 0.05. The lower the significance value, the less likely it is that the two variables are independent (unrelated). In this case, the significance value is so low that it is displayed as 0.000, which means that it would appear that the two variables are, indeed, related, i.e. individual counselling and self-efficacy of orphans are significantly related. We, therefore, reject the null hypothesis and accept the alternative hypothesis.

These findings are in agreement with the findings of many scholars. According to Fall, (2011), guidance and counselling is an essential part of any education system, and all schools should have some form of structured guidance and counselling services for all levels. It is, however, unfortunate that not all schools and institutions can meet this requirement due to the lack of qualified personnel to offer these services. They further state that in schools where these services are not formally organized, it is still expected that guidance and counselling should be afforded to the children through alternative advisors.

It is almost impossible for one to succeed in life without guidance and counselling (Gudyanga, Wadesango, Manzira, & Gudyanga, 2015). Since creation, man has managed to face life's hurdles through guidance and counselling. Even though it was not formally

known as it is today, it was very much in practice. Taylor and Buku (2006) mention that even before 250 BC, the concept of guidance and counselling had been identified among the Greek community.

Guidance may be defined as a process through which a person is assisted to better their lives (Koos & Kefauver, 1932). In most of the cases, a person who needs guidance does not know much about what they are doing and thus do things in a way they deem best, but it often turns out to be the wrong way. These have been various views from different authorities regarding the concept of guidance.

Kobugube (2013) looks at guiding as a systematic profession where an individual is assisted through an interpretive and educative procedure to have a better understanding of his/her potentialities and characteristics and relate to the social opportunities and requirements satisfactorily. Kobugube (2013) has cited the opinions of Fall (2011) on guidance as for the use of professional school personnel and materials to provide a developmental climate that would promote pupils to understand themselves, direct themselves, exercise and utilize their potential to their satisfaction and to that of the society.

Lunenburg (2011) define guidance as a set of organized specialized services that are established as an integral part of the school environment and are designed to promote the development of the students and help them to realize a wholesome sound adjustment and maximum accomplishment that commensurate with their potential. A close study of these definitions will reveal that guidance is a discipline that is designed with the aim of helping individuals to make useful and diligent decisions in life and relate well to the rest of society.

Mosak and Maniacci (2013) argued that the place of individual counselling was established by Adlerian Theory founded by Alfred Adler and championed in America by Rudolf Dreikurs. Central to the Adlerian approach is to see the personality as a whole and not as the mere net result of component forces. Thus the term individual (indivisible) psychology (Sommers-Flanagan, 2012). Adlerian psychology places its emphasis on a person's ability to adapt to feelings of inadequacy and inferiority relative to others. He believed that a person would be more responsive and cooperative when he or she is encouraged and harbours a feeling of adequacy and respect (Adler, 1992). Adlerian adopt a radical stance that cuts across the nature-nurture debate by seeing the developing individual at work in creating the personality in response to the demands of nature and nurture but not entirely determined by them. The self-created personality operates subjectively and idiosyncratically. The individual is endowed with a striving both for self-development and social meaning., what Adler himself called “the concept of social usefulness and the general well-being of humanity” (Adler, 1992), expressed in the sense of belonging, usefulness and contribution, and even cosmic consciousness.

Adlerian Psychology emphasizes the proactive, form-giving and fictional nature of human cognition and its role in constructing the “realities” that persons know and to which they respond. The Adlerian theory asserts that humans construct, manufacture, or narrative ways of viewing and experiencing the world. It is an optimistic, positive psychological theory affirming that humans are not determined by heredity or environment. Instead, they are creative, proactive, meaning-making beings, with the ability to choose and to be responsible for their choices. Adlerian theory is a holistic, phenomenological, socially oriented, and teleological (goal-directed) approach to understanding and working with people (Corey, 2013).

Adlerian theory helps to understand the need to identify, understand the purpose of, and modify repetitive self-defeating behaviours; and the importance and benefit of counsellors and clients developing realistic and mutually agreed upon counselling goals (goal alignment). The theory also recognizes that having problems, difficulties, and differences is a regular part of life and can be viewed as opportunities for growth rather than “pathology”. The theory views that counselling as educational, preventative, and growth-promoting, not merely a remedial one. Adlerian counselling is a growth/wellness model. It is an optimistic perspective that views people as unique, creative, capable, and responsible. Adlerian counselling emphasizes prevention, optimism and hope, resilience and growth, competence, creativity and resourcefulness, social consciousness, and finding meaning and a sense of community in relationships (Watts, 2014).

As Prochaska and Norcross (2010) put it, many of Adler’s ideas have quietly permeated modern psychological thinking. Adlerian theory is the most effective personal counselling theory that most people and institutions can identify with. Wang, Zhang, & Liu (2015) state that one downside to this theory is that it lacks a firm, supportive research base. There have not been many empirical studies that clearly show the effectiveness of the Adlerian theory. The Adlerian approach is vague about some of its terms and concepts. Although others have attempted to clarify this approach, there are still some Adlerian ideas remain unclear. Adler was also vague about how to work with clients. Yet another factor that may be looked at as a drawback to Adlerian technique is that it may be too optimistic when it comes to human nature. Also, a possible limitation of the Adlerian approach focuses on some of its basic principles, such as the concept with individuals whose cultural context purports a lineal social relationship. At last, because the Adlerian approach relies strongly on verbal erudition, logic and insight, it

may be limited in its ability to help individuals who are not intellectually bright (Wang, Zhang, & Liu, 2015).

From the above findings, it is clearly noted that individual Guidance and Counselling services are significantly related. In other words, self-efficacy heavily relies on Individual Counselling services to be rooted in the affected orphans. In addition, this theory was, therefore, critical in this study as it helps to understand how guidance and counselling services influence the Self-efficacy of orphaned children in orphanages in Kenya.

#### 4.4.3 Correlation Results for Individual Counselling and Self-Efficacy of Orphans

Correlation analysis was conducted to establish relationship between Individual Counselling and Self-Efficacy of Orphans. Table 8 provides a summary of the findings.

**Table 8: Correlations between Individual Counselling and Self-Efficacy**

N=280		1
1. Individual guidance and counseling	Pearson Correlation	
	Sig. (2-tailed)	
2. Self-efficacy programmes	Pearson Correlation	.496**
	Sig. (2-tailed)	.000

The analysis results in Table 8 show that there is a positive and significant relationship between individual guidance and counseling services and self-efficacy of orphans at  $r=0.496^{**}$ ,  $P<.001$  significant level.

#### 4.4.4 Regression Results between Individual Counselling and Self-Efficacy

In this section, the researcher sought to come up with a regression model to explain the efficacy of orphaned children. This enabled the determination of how well multiple independent variables (variables characterizing each of the five categories) to predict the

value of a dependent variable. The dependent variable can be characterized as the efficacy of orphaned children.

**Table 9: Regression Model Summary**

R	R Square	Adjusted R Square	Std. Error of the Estimate	Change Statistics				
				R Square Change	F Change	df1	df2	Sig. F Change
.491 <sup>a</sup>	.241	.238	2.58042	.241	78.026	1	246	.000

Table 9 gives the coefficient of determination R square as 0.241, thus individual guidance and counseling contributes 24.1% variability to self-efficacy of orphans when other factors are held constant. Table 10 gives the ANOVA findings.

**Table 10: ANOVA**

Model		Sum of Squares	df	Mean Square	F	Sig.
1	Regression	519.541	1	519.541	78.026	.000 <sup>b</sup>
	Residual	1638.008	246	6.659		
	Total	2157.548	247			

a. Dependent Variable: efficacy of the orphans due to counseling programs

b. Predictors: (Constant), individual guidance and counseling services offered in orphanages

The output in Table 10 show next part of the output, which contains an analysis of variance (ANOVA) that tests whether the model is significantly better at predicting the outcome than using the mean as a “best guess”. Specifically, the F-ratio represents the ratio of the improvement in the prediction that results from fitting the model, relative to the inaccuracy that still exists in the model. This table is split into three sections: one for each model. The value of the sum of squares  $SS_m$  for the model represents the improvement in prediction resulting from fitting a regression line to the data rather than using the mean as an estimate of the outcome. If the improvement due to fitting the regression model is much greater than the inaccuracy within the model, then the value of



F will be greater than one. For the initial model, F-ratio is 78.026, which is very unlikely to have happened by chance ( $p < .001$ ). The output in Table 10 helps us to come up with future predictions if the independent variables are implemented optimally through a multiple linear regression equation. The beta coefficients and significance is shown in Table 11.

**Table 11. Regression Coefficients**

Model	Unstandardized Coefficients		Standardized Coefficients	t	Sig.	95.0% Confidence Interval for B	
	B	Std. Error	Beta			Lower Bound	Upper Bound
(Constant)	.658	1.070		.615	.539	-1.450	2.766
individual guidance and counseling services offered in orphanages	.372	.067	.353	5.540	.000	.240	.504

a. Dependent Variable: efficacy of the orphans due to counseling programmes  
 $\text{Self-efficacy of orphans} = 1.070 + .067X_1$

Where

$\alpha_0 = 1.070$  is a constant, shows that if all independent variables were rated zero, Self-efficacy of orphans rating would be 1.070

**Individual counseling** (standardize  $\beta = .067$ ). This value indicates that as individual counseling increases by one standard deviation, Self-efficacy of orphans increase by .067 standard deviations when other factors are held constant.

#### **4.5 Group Guidance and Counselling Services and Self-Efficacy of Orphaned Children**

The second objective of this study was to establish the influence of group guidance and counselling services on the self-efficacy of orphaned children living in orphanages in Bungoma County. The researcher set out to achieve this objective by giving the

respondents some questionnaire items to establish how group guidance influences the self-efficacy of orphaned children.

#### 4.5.1 Descriptive Statistics on Group Guidance and Counselling Services

Table 11 provides the descriptive statistics on Group Guidance and Counselling Services

**Table 11: Descriptive Statistics on Group Guidance and Counselling Services**

	True		False		Do not Remember	
	n	%	n	%	n	%
There is a permanently employed counselor who offers group guidance and counseling services in the orphanage.	104	40.5	112	43.6	41	16
The orphanage brings in part-time counselors to offer Group Counseling Services	216	84	27	10.5	14	5.4
I have been at ease to open up freely to the specialists brought in by the management of the Orphanage to offer group Guidance and Counseling services.	149	58	85	33.1	23	8.9
I can confirm that group Guidance and Counseling Services are offered in the Orphanage	212	82.5	30	11.7	15	5.8
I have had confidence in the counselors who provide group Guidance and Counseling Services in the Orphanage.	182	70.8	61	23.7	14	5.4
The counselors brought in by the orphanage management have been professional.	167	65	50	19.5	39	15.2
I have noted that my life's challenges are similar to those of my fellow orphans living in this orphanage.	140	54.5	102	39.7	15	5.8
There has been a high turnover of professional counselors brought in by management to take us through group guidance and counseling programs.	95	37	129	50.2	33	12.8
The orphanage management has kept changing the counselors brought in to handle group guidance and counseling programs.	204	79.4	39	15.2	14	5.4
I have noted that most of us (orphans) tend to relapse into our day-to-day challenges even after going through group guidance and counseling sessions.	150	58.4	78	30.4	29	11.3

Respondents indicated their level of agreement with the statement: "There is a permanently employed counsellor who offers group guidance and counselling services in

our orphanage”. Table 11 presents the distribution of responses. 104(40.5%) of the respondents agree that there was a resident counsellor who offers group guidance and counselling services in the orphanage. Those who disagreed with the statement accounted for 112(43.6%) compared to 41(16.0%) who indicated they were not sure of the availability of resident counsellor in their institution.

The research further set to establish if the orphanages engaged guidance counsellors on part-time capacity. The respondents were required to respond to the statement “Our orphanage brings in part-time counsellors to offer Group Counselling Services”. The distribution of the findings are presented in Table 11. 216(84.0%) of the respondents agree that their orphanage engages part-time counsellors to offer Group Counselling Services, while 27(10.5%) disagree and 14(5.4%) were not sure if the orphanage brought in part-time counsellors to offer Group Counselling Services.

The respondents were required to respond to the statement “I have been at ease to open up freely to the specialists brought in by the management of the Orphanage to offer group guidance and Counselling services”. The responses are presented in Table 11. Data presented in Table 11 show that 149(58%) of the respondents agree have been at ease to open up freely to the specialists brought in by the management of the orphanage to offer group guidance and counselling services, 85(33.1%) disagreed and 23(8.9%) were not sure have ever been at ease to open up freely to the specialists brought in by the management of the orphanage to offer group guidance and Counselling services.

The researcher wanted to establish if group guidance and counselling is offered in the orphanages, respondents were required to indicate their level of agreement with the statement: “I can confirm that group guidance and Counselling Services are offered in the Orphanage”. The results indicate that 212(82.5%) of the respondents agree that group

guidance and Counselling Services were offered in the orphanage, 30(11.7%) disagreed and 15(5.8%) were not sure that group guidance and Counselling Services are offered in the orphanage.

The respondents were required to respond to the statement “I have confidence in the counsellors who provide group guidance and Counselling Services in the orphanage”. The responses are presented in Table 11. 182(82.5%) of the respondents agree that have confidence in the counsellors who provide group guidance and counselling services in the orphanage, 61(23.7%) disagreed and 14(5.4%) were not sure they had confidence in the counsellors who provide group guidance and counselling services in the orphanage.

The researcher set out to establish the perceived professionalism among counsellors who are engaged by the orphanages. Respondents indicated their level of agreement with the statement “The counsellors brought in by the orphanage management have been professional”. Data on the observed responses are shown in Table 11. 167(65.0%) of the respondents agree that the counsellors brought in by the orphanage management have been professional, 50(19.5%) disagree and 39(15.2%) were not sure whether the counsellors brought in by the orphanage management were professional.

The respondents were also asked to indicate their level of agreement with the statement “I have noted that my life’s challenges are similar to those of my fellow orphans living in this orphanage”. The results in Table 11 show that 140(54.5%) of the respondents agree that they had noted that their life’s challenges are similar to those of my fellow orphans living in the orphanage. Similarly, 102(39.7%) disagree and 15(5.8%) were not sure whether noting if their life’s challenges are similar to those of my fellow orphans living in this orphanage.

The researcher wanted to establish the consistency in counselling professionals that are engaged to offer psychological support to the orphans. Respondents were asked to indicate their level of agreement with the statement: “There have been many different counsellors brought in by management to offer counselling services”. Table 11 indicates that 95(37.0%) of the respondents agree that there has been a high turnover of professional counsellors brought in by management to take them through group guidance and counselling programs. The data also indicates that 129(50.2%) disagreed and 33 (12.8%) were not sure whether there had been a high turnover of professional counsellors brought in by management to take them through group guidance and counselling programs.

Respondents indicated their level of agreement with the statement “The orphanage management has kept changing the counsellors brought in to handle group guidance and counselling programs”. The observed responses are shown in Table 11. The results 204(79.4%) of the respondents agreed that the orphanage management had kept changing the counsellors brought in to handle group guidance and counselling programs. Those who disagreed accounted for 39(15.2%) of the total sample, while those who were not sure accounted for 14(5.4%).

The researcher wanted to measure the effectiveness of the guidance and counselling services by establishing the relapse incidences. The respondents were, therefore, asked to state their level of agreement with the statement: “I have noted that some orphans tend to go back to their old lives even after group guidance and counselling sessions”. The observed frequencies are presented in Table 11. 150(58.4%) of the respondents agree that “some orphans tend to go back to their old lives even after group guidance and counselling sessions”, compared to 78(30.4%) of respondents who disagree. A sample of

29(11.3%) respondents was not sure if some orphans tend to go back to their old lives even after group guidance and counselling sessions.

The researcher sought to triangulate the questionnaire responses with data from the interview guide. The selected orphans were asked to respond to the following question: *How do you feel after attending the group guidance and counselling sessions with regard to your ability to solve life challenges?* A general theme was that respondents felt they had gained self-efficacy due to group guidance and counselling. A sample response is presented in the excerpt:

*At first, I was afraid to share and tell the counsellor all about my past life experiences. This was because sometimes, when I start talking about the things I have been through, it brings back memories that are bitter and painful. It was very uncomfortable to talk about those things; it was better to try and forget them and move on in life. I did not want anybody to know what I went through because I thought they would laugh at me or feel sorry about me. Remember I had decided that I would better die with those painful memories than to tell people what I went through. I was shocked when some of us in our group freely talked about their past lives! I saw that they appeared better. It is like they were free and happy after talking about their past problems. I realized I was not the only one with problems. I realized some of my friends had worse problems than me. So, I also talked about my own problems to the counsellor and group. Imagine, at first, it was very awkward. But it became easier because the group members did not judge me. Our issues and challenges were so similar; in fact, some guys had more challenges than mine! So, in our group, we support each other, and this helps us to be strong and find support in this group. My life and how I look at life has changed positively because of the group counselling experiences”.*

#### **4.5.2 Chi-Square Tests between Group Counselling and Self-Efficacy of Orphans**

The researcher sought to find out the relationship between group guidance and counselling and self-efficacy of the orphans. Therefore, the researcher generated a null

hypothesis  $H_02$ : *There is no statistically significant influence of group guidance and counselling services on the self-efficacy of orphaned children living in orphanages in Bungoma County.* This hypothesis was tested at 0.05 significance level. A chi-square analysis was performed to test the hypothesis, and the results are shown in Table 12.

**Table 12: Chi-Square Tests between Group Counselling and Self-Efficacy of Orphans**

	<b>Value</b>	<b>Df</b>	<b>Asymp. Sig. (2-sided)</b>
Pearson Chi-Square	994.221 <sup>a</sup>	182	.000
Likelihood Ratio	269.040	182	.000
Linear-by-Linear Association	45.819	1	.000
N of Valid Cases	255		

a. 198 cells (94.3%) have expected count less than 5. The minimum expected count is .00.

In Table 12, the test of significance yielded a chi-square value of 994.221 with 182 degrees of freedom and a significance value of 0.00, which is less than 0.05. Based on these observations, the null hypothesis was rejected, and the alternate hypothesis adopted. It was therefore concluded that group counselling and self-efficacy of orphans were significantly related.

These findings are in agreement with many scholars. Group guidance and group counselling are two current approaches of interest (Hughes, Law, & Meijers, 2017). The general consensus in recent writings defines group guidance as a process concerned with the study of interpersonal and intergroup relations, personal and social adjustment, educational and vocational planning, and orientation to school. Group guidance involves teaching and informational processes which help students grow towards goals considered worthwhile. Counselling groups are smaller in size than guidance groups (usually five to eight members). Cohn and his associates have defined group counselling as ‘a dynamic

and interpersonal process through which individuals within the normal range of adjustment work within a peer group and with a professionally trained counselor, exploring problems Bruce Shertzer and Herman J. Peters, *Guidance: Techniques for Individual Appraisal and Development* (New York: Macmillan Co., 1965) and feelings in an attempt to modify their attitudes so that they are better able to deal with developmental problems. In short, group counselling is used for clarifying feelings and attitudes of members. Some studies have been conducted to show the relationship between guidance and counselling and children performance in schools. Devi, Devaki, Madhavan and Saikumar (2013) conducted a study to explore the effect of counselling on the academic performance of college students. The study showed that there was an increase in average marks among students. The study showed that the counselling services in colleges had been effective in easing out the students' difficulties. The constructive support which was received from individual counselling seemed to have a positive influence on the academic performance and the number of sessions correlated positively with the academic performance.

The findings also concur with Nzioki (2014), which found out that students who attended the counselling showed improvement in their grades as compared to those who did not. Students who attended some sessions showed a better response than those who attended fewer sessions. The authors concluded that counselling is very useful in improving the students' performance as well as their confidence.

The place of group counselling has been argued by Social Learning Theory. The theory argues that Learning is a process where behaviours are learnt or acquired from the environment (Bandura, 1977). One way of learning is through social observation and imitation. This theory is advanced by Albert Bandura (1986). This theory explains



delinquency as a behaviour learnt through the complicated process of socialization. The theory postulates that the behaviour is reflective of people observing and imitating others and imagining the consequence of their behaviours.

The theory advocates that human behaviours be modified using learning principles to change behaviours (Omulema, 2000). The behavioural approach emphasizes that the client define goals in behavioural terms, provide resources and encouragement in helping clients move towards goals and helps clients with different problems (Patterson, 1973). Teacher counsellors can, therefore, apply this to students concerning their academic performance. Makinde (1984) notes that the effectiveness of behaviours is assessed by changes in the specific student's behaviours. This implies that they can use behavioural to create a conducive environment for the students to modify their behaviour to solve their academic problems through the creation of learning conditions.

Teacher counsellors can use behavioural techniques like self-management programs and self-directed behaviour which may deal with learning, studying, and time management skills in schools. This will foster the students' academic performance. The student will drive towards growth, health and adjustment (Makinde, 1984). Therefore, a good environment created by the teacher counsellor can provide room for good self-efficacy that will boost success in academic performance and one's overall life after exiting the orphanage.

With a heavy emphasis on how the child's environment affects him and directs his learning, this theory is weak when it comes to the child's accountability for his own actions. Putting the focus on how setting influences behaviours places more weight on the people and community that the child is part of, and not enough weight on how the

child handles and processes new information. It neglects the child's accountability and may go too far in stating that society directs how the individual behaves and acts.

#### 4.5.3 Correlation Results Group Counselling and Self-Efficacy of Orphans

Table 13 gives the correlation results on Group Counselling and Self-Efficacy of Orphans.

**Table 13: Correlation Results Group Counselling and Self-Efficacy of Orphans**

N=280			1
1. Group guidance and counselling	Pearson Correlation		
	Sig. (2-tailed)		
2. Self-efficacy programmes	Pearson Correlation		.425**
	Sig. (2-tailed)		.000

The analysis results show that there is a positive and significant relationship between group guidance and counseling and self-efficacy of orphans at  $r=0.425^{**}$ ,  $P<.001$  significant level. The coefficient of determinant  $R= r^2$  established that group guidance and counseling contributes 18.1% variability to self-efficacy of orphans when other factors are held constant.

#### 4.5.4 Regression Analysis for Predicting Group Counselling and Self-Efficacy of Orphans

In this section, the researcher sought to come up with a regression model to explain the efficacy of orphaned children. This enabled the determination of how well multiple independent variables (variables characterizing each of the five categories) to predict the value of a dependent variable. The dependent variable can be characterized as the efficacy of orphaned children. Table 14 is the model summary.

**Table 14: Regression Model Summary**

Model	R	R Square	Adjusted R Square	Std. Error of the Estimate	Change Statistics				
					R Square Change	F Change	df1	df2	Sig. F Change
2	.528 <sup>b</sup>	.279	.273	2.52045	.038	12.845	1	245	.000

b. Predictors: (Constant), group guidance and counseling services offered by orphanages

f. Dependent Variable: efficacy of the orphans due to counseling programs

The value of R square from Table 14 is given as .279, which means that 27.9% change in self efficacy is explained by Group Counselling services. The ANOVA results are shown in Table 15.

**Table 15: ANOVA**

Model		Sum of Squares	df	Mean Square	F	Sig.
2	Regression	601.143	2	300.572	47.314	.000 <sup>c</sup>
	Residual	1556.405	245	6.353		
	<b>Total</b>	<b>2157.548</b>	<b>247</b>			

a. Dependent Variable: efficacy of the orphans due to counseling programs

c. Predictors: (Constant), group guidance and counseling services offered by orphanages

The output in Table 15 show next part of the output, which contains an analysis of variance (ANOVA) that tests whether the model is significantly better at predicting the outcome than using the mean as a “best guess”. Specifically, the F-ratio represents the ratio of the improvement in the prediction that results from fitting the model, relative to the inaccuracy that still exists in the model. This table is split into three sections: one for each model. The value of the sum of squares  $SS_m$  for the model represents the improvement in prediction resulting from fitting a regression line to the data rather than using the mean as an estimate of the outcome.

If the improvement due to fitting the regression model is much greater than the inaccuracy within the model, then the value of F will be greater than one. For the second model, the value of F is 47.314, which is also highly significant ( $P < .001$ ). The output in Table 16 helps us to come up with future predictions if the independent variables are implemented optimally through a multiple linear regression equation. The established multiple linear regression equation becomes:

**Table 16: Regression Coefficients**

Model	Unstandardized Coefficients		Standardized Coefficients		t	Sig.	95.0% Confidence Interval for B	
	B	Std. Error	Beta				Lower Bound	Upper Bound
(Constant)	.658	1.070			.615	.539	-1.450	2.766
group guidance and counseling services offered by orphanages	.044	.080	.041		.545	.586	-.114	.201

a. Dependent Variable: efficacy of the orphans due to counseling programmes  
 $\text{Self-efficacy of orphans} = 1.070 + .080X_2$

Where

$\alpha_0 = 1.070$  is a constant, shows that if all independent variables were rated zero, Self-efficacy of orphans rating would be 1.070

**Group counselling** (standardize  $\beta = .080$ ). This value indicates that as group counselling increases by one standard deviation, Self-efficacy of orphans increase by .080 standard deviations when other factors are held constant.

#### 4.6 Career Guidance Services and the Self-Efficacy of Orphaned Children

The third objective of this study was to determine the influence of career guidance services on the self-efficacy of orphaned children living in orphanages in Bungoma County. In order to achieve this objective, the respondents were asked questions with an

aim to establish how career guidance services influence self-efficacy of orphaned children.

#### 4.6.1 Descriptive Statistics on Career Guidance Services

Table 17 summarizes the descriptive statistics on Career Guidance Services

**Table 17: Descriptive Statistics on Career Guidance Services**

	True		False		Do not Remember	
	n	%	n	%	n	%
I have always shared my Career challenges with fellow orphans in the Orphanage.	196	76.3	59	23	2	0.8
I have noted that my Career challenges are quite similar to those of fellow orphans.	142	55.3	103	40.1	12	4.7
I, together with fellow orphans, have willingly shared our Career challenges with counselors	195	75.9	45	17.5	17	6.6
We have not felt shy to open up to the orphanage specializes concerning our Career matters.	33	12.8	209	81.3	14	5.4
Orphanage management has been receptive to all the Career challenges that we have shared with them.	154	59.9	71	27.6	30	11.7
There has been a continuous change of specialists brought in the orphanage to offer Career guidance services.	186	72.4	44	17.1	27	10.5
These Career guidance Sessions are well programed and held mostly during Weekends, on public and school holidays.	176	68.5	59	23	22	8.6
Some of my fellow orphans have NOT seen the need for these Career Guidance and Counseling services offered in the orphanage.	154	59.9	93	36.2	10	3.9
Senior Boys and Girls have had separate Career Guidance and Counselling sessions.	118	45.9	120	46.7	19	7.4
Career Guidance and Counseling sessions should be encouraged in our orphanage.	236	91.8	16	6.2	4	1.6

The researcher set out to establish how psychological support was shared among orphans. The respondents were therefore asked to respond to the statement “I usually share my career challenges with fellow orphans in the orphanage”. The observed

responses are presented in Table 17 above. 196(76.3%) of the respondents indicated that they always shared their career challenges with fellow orphans compared to 59(23%) who indicated that they shared only sometimes. The respondents who indicated that they never shared their career challenges with fellow orphans accounted for 2(0.8%) of the total sample.

The respondents were required to respond to the statement “I have noted that my Career challenges are quite similar to those of fellow orphans” and their responses are shown in Table 17. Data presented shows that 142(55.3%) of the respondents agree that they had noted that their career challenges are quite similar to those of fellow orphans, 103(40.1%) disagree and 12(4.7%) were not sure.

The researcher wanted to establish the respondents’ ease of disclosure of career challenges and their relationship with the counselling service providers. Respondents were required to indicate their level agreement with the statement. “I, together with fellow orphans, have willingly shared our career challenges with counsellors”. The responses are presented in Table 17. The findings shows that 195(75.9%) of the respondents indicated that they always, together with fellow orphans, have willingly shared their career challenges with counsellors. This compared to 45(17.5%) who indicated they only shared some of the times and 17(6.6%) who indicated that they were not sure they were free to willingly shared their Career challenges with counsellors.

The researcher conducted a confirmatory test by asking the respondents to indicate their level of agreement with the statement “I feel shy to open up to the orphanage specialists concerning our career matters”. The results shows that 209(81.3%) of the respondents disagree that they have felt shy to open up to the orphanage specialists concerning their career matters, while 33(12.8%) agreed and 14(5.4%) were not sure feeling shy to open

up to the orphanage specialists concerning their Career matters. It was also observed that 1 respondent representing a 0.4% did not respond to the statement.

The researcher asked respondents to state their level of agreement with the statement “The orphanage management has been receptive to the career challenges that we have shared with them”. The observed responses are presented in Table 17. 154(59.9%) of the respondents agreed that the orphanage management had been receptive to the career challenges that respondents shared. In addition, it was observed that 71(27.6%) of respondents disagreed and 30(11.7%) indicated they were not sure if the orphanage management being receptive to the career challenges that were shared with them. Moreover, 2(0.8%) of the sampled orphans did not respond to the restatement.

The respondents were required to indicate their level of agreement with the statement “There has been a continuous change of specialists brought in the orphanage to offer career guidance services”. The results shows that 186(72.4%) of the respondents agreed that there had been a continuous change of specialists brought in the orphanage to offer career guidance services. On the other hand, 44(17.1%) of respondents disagreed, and 27(10.5%) were not sure if there had been a continuous change of specialists brought in the orphanage to offer career guidance services.

The respondents were required to respond to the statement “The career guidance sessions are conveniently scheduled”. According to the results in Table 17 above, 176(68.5%) of the respondents agree that the career guidance sessions are conveniently scheduled, while 59(23.0%) disagree and 22(8.6%) were not sure.

The respondents were required to respond to the statement “My fellow orphans appreciate the career guidance and counselling services offered in the orphanage”. The results above shows that 93(36.2%) of the respondents agree that my fellow orphans

appreciate the career guidance and Counselling services offered in the orphanage. In addition, 154(59.9%) disagree that their fellow orphans appreciated the Career guidance and Counselling services offered in the orphanage and 10(3.9%) were not sure if their fellow orphans appreciate the career guidance and Counselling services offered in the orphanage.

The respondents were required to respond to the statement “Senior boys and girls have separate career guidance and Counselling sessions”, and their responses are shown in Table 17. 118(45.9%) of the respondents affirmed that senior boys and girls have separate career guidance and counselling sessions compared to 120(46.7%) of respondents who disputed the statement and 19(7.4%) who indicated they were not sure if senior boys and girls have had separate career guidance and counselling sessions.

In order to establish the attitude of orphans towards the psychosocial services, the respondents were required to respond to the statement “Career guidance, and Counselling sessions should be encouraged in our orphanage”. From the table above it shows that 236(91.8%) of the respondents agree that career guidance and counselling sessions should be encouraged in their orphanage, 16(6.2%) disagree and 4(1.6%) did not remember if Career guidance and Counselling sessions should be encouraged in their orphanage. 1(0.4%) did not respond to the statement.

The researcher sought to triangulate the questionnaire responses with data from the interview guide. The sampled interviewees were asked to respond to the following question: *How do career guidance and counselling services influence your feeling of ability to handle challenges in your life?* A general theme was that respondents felt they had gained self-efficacy due to career guidance and counselling. A sample response is presented in the excerpt:



*Career issues were not known to me! When the specialist asked me about where my strengths were, I opened up. He explored with me the details about my preferred career, which was the art of drawing. He walked with me and opened up more horizons in the art of drawing, which I had not noted before. The more we explored, the more I enjoyed the art. My skills and knowledge grew up very fast, unlike before. Because of my positive attitude and a newfound passion for drawing, my grades improved overall. My teachers were full of praise for me! Incidentally, they had no idea about the secret to my sudden improvement. I realized that my career guidance lessons also sharpened and improved my general perception of life.*

#### **4.6.2 Chi-Square Tests between Career Counselling and Self-efficacy**

In order to find out the relationship between career guidance and counselling and self-efficacy of the orphans, the researcher applied inferential statistics to generated data. Therefore, the researcher generated a null hypothesis  $H_03$ : *There is no statistically significant influence of career guidance and counselling services on the self-efficacy of orphaned children living in orphanages in Bungoma County.* A chi-square analysis was performed to test the hypothesis at 0.05 significance level., and the results are shown in Table 18.

**Table 18: Chi-Square Tests between Career Counselling and Self-efficacy**

	<b>Value</b>	<b>df</b>	<b>Asymp. Sig. (2-sided)</b>
Pearson Chi-Square	780.312 <sup>a</sup>	195	.000
Likelihood Ratio	277.968	195	.000
Linear-by-Linear Association	33.484	1	.000
N of Valid Cases	253		

a. 211 cells (94.2%) have expected count less than 5. The minimum expected count is .00.

In Table 18 a chi-square value of 780.312 with 195 degrees of freedom and an observed significance value of 0.000, which is less than the expected value of 0.05. Based on this

observation, the null hypothesis was rejected, and the alternate hypothesis adopted. It was concluded that career guidance and counselling indeed significantly influenced the self-efficacy of orphaned children living in orphanages in Bungoma County.

These findings are in agreement with many scholars. Career Guidance and Counselling is a comprehensive, developmental program designed to assist individuals in making and implementing informed educational and occupational choices (Liu et al., 2015). A career guidance and counselling program develop an individual's competencies in self-knowledge, educational and occupational exploration, and career planning. Career guidance and counselling programs help individuals acquire the knowledge, skills, and experience necessary to identify options, explore alternatives and succeed in society. These programs better prepare individuals for the changing workplace of the 21st century by teaching labour market changes and complexity of the workplace, broadening knowledge, skills, and abilities, improving decision-making skills, increasing self-esteem and motivation, building interpersonal effectiveness, maximizing career opportunities, improving employment marketability and opportunities, promoting effective job placement, strengthening employer relations.

Liu et al. (2015) further state that everyone benefits youth and adults, male and female, disabled, disadvantaged, minorities, limited English proficient, incarcerated, dropouts, single parents, displaced homemakers, teachers, administrators, parents and employers. Everywhere elementary, junior and senior high schools, community colleges, technical institutes, universities, career resource centres, correctional facilities, community-based organizations, human services agencies, community and business organizations, skill clinics, employment and placement services.

This is supported by the Systems Theory in Psychology. Human behaviours are often confusing and inexplicable to observers (Von Bertalanffy, 1967). The systems theory is a reaction to some of these practices. One of its central tenets is that the human mind is more than the mere total of its parts. According to system theorists, the human mind is an intricate weave of psychological mental and chemical processes, and thus human beings should be treated as systems in themselves.

Systems theory in psychology is an adaptation of general systems theory. Developed by Ludwig Von Bertalanffy, general systems theory was developed as a response to what was seen as the radically impersonal nature in then-contemporary science. The mechanistic nature was pure in studying human beings, and there was no way to deal with Teleology (the study of purpose or goals). Humans and other life forms have a purpose, and a lack of acknowledgement of this trait can remove much of human behaviours from the context in which it occurs. General systems theory proposed interrelations between various elements in various systems and also proposed general principles governing those interactions (Nicklaus-Luhman, 2013).

The limitations of systems theory lie in structural functionalism theory (Cox & Paley, 1997). This theory places emphasis on the concept of homeostasis. It only agrees with changes that stabilize the system. This can pose a problem when presented with problems such as racism, LGBTQ, and the poor. Macrosystems benefit from having certain populations remain where they are. Abrupt changes in the rights, opportunities, and privileges of these populations pose a threat to the system by creating a disruption in the balance. Through this theory, only slow and steady change can occur rather than radical changes.

### 4.6.3 Correlation Results between Career Counselling and Self-efficacy

Table 19 gives the correlation results linking Career Counselling and Self-efficacy.

**Table 19: Correlations between Career Counselling and Self-efficacy**

N=280		1
1. Career services	Pearson Correlation	
	Sig. (2-tailed)	
2. Self-efficacy programmes	Pearson Correlation	.365**
	Sig. (2-tailed)	.000

The analysis shows that there is a positive and significant relationship between career guidance and self-efficacy of orphans at  $r=0.365^{**}$ ,  $P<.001$  significant level. The coefficient of determinant  $R= r^2$  established that career guidance contributes 13.3% variability to self-efficacy of orphans when other factors are held constant.

### 4.6.4 Regression Analysis for Predicting Career Counselling and Self-efficacy

In this section, the researcher sought to come up with a regression model to explain the efficacy of orphaned children. This enabled the determination of how well multiple independent variables (variables characterizing each of the five categories) to predict the value of a dependent variable. The dependent variable can be characterized as the efficacy of orphaned children. Multiple regression was used to predict the efficacy of orphaned children in a situation in which effect factors; individual guidance and counselling services, group guidance and counselling services, career guidance services, guidance and counselling referral services and mentorship programs influence the efficacy of orphaned children.

**Table 20: Regression Model Summary**

Model	R	R Square	Adjusted R Square	Std. Error of the Estimate	R Square Change	Change Statistics			
						F Change	df1	df2	Sig. F Change
3	.533 <sub>c</sub>	.284	.275	2.51669	.005	1.734	1	244	.189

d. Predictors: (Constant), career services, referrals services

f. Dependent Variable: efficacy of the orphans due to counseling programs

Table 20 shows that R square is 0.284, implying that 28.4% change in self efficacy is explained by Career Counselling. Table 20 gives the ANOVA findings.

**Table 21: ANOVA**

Model		Sum of Squares	df	Mean Square	F	Sig.
3	Regression	612.123	3	204.041	32.215	.000 <sup>d</sup>
	Residual	1545.425	244	6.334		
	<b>Total</b>	<b>2157.548</b>	<b>247</b>			

a. Dependent Variable: efficacy of the orphans due to counseling programs

e. Predictors: (Constant), career services

The output in Table 21 show next part of the output, which contains an analysis of variance (ANOVA) that tests whether the model is significantly better at predicting the outcome than using the mean as a “best guess”. Specifically, the F-ratio represents the ratio of the improvement in the prediction that results from fitting the model, relative to the inaccuracy that still exists in the model. This table is split into three sections: one for each model. The value of the sum of squares  $SS_m$  for the model represents the improvement in prediction resulting from fitting a regression line to the data rather than using the mean as an estimate of the outcome. If the improvement due to fitting the regression model is much greater than the inaccuracy within the model, then the value of F will be greater than one. For the third model, the value of F is 32.215, which is also highly significant ( $P < .001$ ). Table 4.20 gives the beta coefficients and significance.

**Table 22: Regression Coefficients**

Model	Unstandardized Coefficients		Standardized Coefficients	t	Sig.	95.0% Confidence Interval for B	
	B	Std. Error				Lower Bound	Upper Bound
(Constant)	.658	1.070		.615	.539	-1.450	2.766
career services	-.002	.072	-.001	-.022	.982	-.144	.141

a. Dependent Variable: efficacy of the orphans due to counselling programmes  
Self-efficacy of orphans =  $1.070 + .072X_3$

Where

$\alpha_0 = 1.070$  is a constant, shows that if all independent variables were rated zero, Self-efficacy of orphans rating would be 1.070

**Career counselling** (standardize  $\beta=.072$ ). This value indicates that as career counselling increases by one standard deviation, Self-efficacy of orphans increase by .072 standard deviations when other factors are held constant.

#### **4.7 Guidance and Counselling Referral Services and Self-Efficacy of Orphaned Children**

The fourth objective of this study was to establish the influence of guidance and counselling referral services on the self-efficacy of orphaned children living in orphanages in Bungoma County. In order to achieve this objective, a series of questionnaire items that measured the research construct were presented to the respondents to elicit data responses.

##### **4.7.1 Descriptive Statistics on Guidance and Counselling Referral Services**

The findings of descriptive statistics on Guidance and Counselling Referral Services were determined and presented as shown in Table 23.

**Table 23: Descriptive Statistics on Guidance and Counselling Referral Services**

	True		False		Do not Remember	
	n	%	n	%	n	%
Guidance and Counseling Referral programs and services are common in the children home.	133	51.8	99	38.5	25	9.7
There have been situations I felt that the Guidance and Counseling services I received in the orphanage were inadequate.	110	42.8	120	46.7	27	10.5
For the time I have lived in this Orphanage, I have been referred to specialists for specialised Counselling services.	105	40.9	132	51.4	20	7.8
There have been situations where I have experienced relapses even after I had been guided and counseled by specialists.	162	63	68	26.5	27	10.5
I have been free to share my life's challenges with specialists I have been referred to by Orphanage Management	143	55.6	94	36.6	20	7.8
The specialists I have been referred to have been readily available to attend to my life needs.	154	59.9	78	30.4	25	9.7
I feel that there have been situations where these referral services have not worked well for me.	125	48.6	104	40.5	28	10.9
In some situations, I have witnessed cases where these Referral services have not worked well for my fellow orphans in the orphanage.	100	38.9	125	48.6	32	12.5
The specialists brought in to take us through referral programs have a thorough understanding of issues related to children living in orphanages.	172	66.9	49	19.1	36	14
These referral programs need to be accelerated in the orphanage for more gainful interactions between specialists and orphans in dire need of these services.	224	87.2	13	5.1	20	7.8

The respondents were required to respond to the statement “guidance and counselling referral programs and services are common in the orphanages”. The observed responses are shown in Table 23.133(51.8%) of the respondents agree that guidance and counselling referral programs and services are common in the children home, 99(38.5%)

disagree and 25(9.7%) were not if guidance and counselling referral programs and services are common in the children homes.

In addition, the respondents were required to respond to the statement “There have been situations I felt that the guidance and Counselling services I received in the orphanage were inadequate”. The responses are shown in Table 23. 110(42.8%) of the respondents agree that there had been situations they felt that the guidance and counselling services they received in the orphanage were inadequate. In comparison, 120(46.7%) of respondents disagreed, and 27(10.5%) were not sure if they felt that the guidance and counselling services they received in the orphanage were inadequate.

In order to establish the utilization of referral services within the orphanages, the respondents were required to respond to the statement “For the time I have lived in this orphanage, I have been referred to specialists for specialised counselling services”. The responses are shown in Table 23. 105(40.9%) of the respondents indicated that for the time they have lived in the orphanage, they had been frequently referred for specialised counselling services. In comparison, 132(51.4%) of the respondents indicated that they were rarely referred while 20(7.8%) indicated that for the time they had lived in the orphanage, they have never been referred for specialised counselling services.

In order to find out the rate of post counselling relapse, the respondents were required to indicate their level of agreement with the statement “There have been situations where I have gone back to my original challenges even after I had been guided and counselled by specialists” and their responses are presented in Table 23. The findings from the table show that 162(63.0%) of the respondents agree that there were situations where they had experienced relapses even after they had been guided and counselled by specialists. However, 68(26.5%) of respondents disagreed with the statement that there had been



situations where they had gone back to their original challenges even after they had been guided and counselled by specialists. Finally, 27(10.5%) were not sure if there were situations where they ever experienced relapses even after they had been guided and counselled by specialists.

The respondents were required to respond to the statement “I have been free to share my life’s challenges with specialists I have been referred to by orphanage management”, and their responses are shown from the above. 143(55.6%) of the respondents indicated that they have always been free to share their life’s challenges with specialists they were referred to by orphanage management, compared to 94(36.6%) who often free to disclose. On the other hand, 20(7.8%) of the respondents indicated that they never freely shared their life’s challenges with specialists they were referred to by orphanage management.

In order to establish the availability of counselling services, the respondents were required to respond to the statement “The specialists I have been referred to have been readily available to attend to my life’s needs”, and their responses are shown in Table 23. The results in Table 23 show that 154(59.9%) of the respondents agreed that the specialists they were referred to were readily available to attend to their life’s needs compared to 78(30.4%) who disagreed, and 25(9.7%) who were not if the specialists they were referred to were readily available to attend to their life’s needs.

In order to establish the perceived efficacy of the guidance counsellors engaged by the orphanages, the respondents were required to respond to the statement “I feel that there have been situations where these referral services have not worked well for me”. The responses are shown in Table 23. From the table above shows that 125(48.6%) of the respondents agree that they feel that there have been situations where these referral

services have not worked well for them, 104(40.5%) disagree and 28(10.9%) were not sure if there were situations where these referral services did not work well for them.

In order to confirm the efficacy of the referral services, the respondents were required to respond to the statement “In some situations, I have witnessed cases where these referral services have not worked well for my fellow orphans in the orphanage”. The responses are shown in 23. 100(38.9%) of the respondents agree that in some situations, they witnessed cases where the referral services did not work well for their fellow orphans in the orphanage. Similarly, 125(48.6%) disagreed and 32(12.5%) were not sure if there were situations they witnessed cases where these referral services did not work well for their fellow orphans in the orphanage.

The respondents were required to state their level of agreement with the statement “The specialists brought in to take us through referral programs have a thorough understanding of issues related to children living in orphanages”. The observations are shown in Table 23. 172(66.9%) of the respondents agree the specialists brought in to take them through referral programs had a thorough understanding of issues related to children living in orphanages. On the contrary, 49(19.1%) disagreed and 36(14%) were not sure if the specialists brought in to take them through referral programs had a thorough understanding of issues related to children living in orphanages.

The respondents were required to respond to the statement “These referral programs need to be accelerated in the orphanage for more gainful interactions between specialists and orphans in dire need of these services”. The responses are shown in Table 23. The results in Table 23 show that 224(87.2%) of the respondents agree that these referral programs need to be accelerated in the orphanage for more gainful interactions between specialists and orphans in dire need of these services conversely, 13(5.1%) disagreed and

20(7.8%) were not sure if these referral programs needed to be accelerated in the orphanage for more gainful interactions between specialists and orphans in dire need of these services.

In order to further establish the respondents' perception of referral services, selected interviewees were sampled, and the data from the interview guide collected. The sampled interviewees were asked to respond to the following question: *How does guidance and Counseling Referral Services Influence the Self-Efficacy of Orphans Living in Orphanages in Bungoma County?* A general theme was that respondents felt they had gained self-efficacy due to guidance and counselling referral services. A sample response is presented in the excerpt:

*For some time, I have been receiving guidance and counselling services from our resident counsellor. All has not been well throughout the time I have been receiving those services. Generally, my focus to studies has been very poor. My mind all along has been fixated to the good old days I enjoyed with my parents before that fateful day. At some point, I was referred to another specialist in a town called a Trauma Counselor. This specialist seemed to have a better understanding of the plight of my life. His keen and deep interest in my life made me open up. He seemed genuine, sincere and empathic. Slowly but surely, my world view of despair and hopelessness started changing to one of hope and optimism. The more we talked, the more I shed off the bitterness of my past life. Henceforth, I have developed some strong resilience that has completely transformed my life”.*

#### **4.7.2 Chi-Square Tests between Referral Services and Self-efficacy of the Orphans**

In order to find out the relationship between guidance and counselling referral services and self-efficacy of the orphans, the researcher applied inferential statistics to generated data. Therefore, the researcher generated a null hypothesis  $H_0A$ : *There is no statistically significant influence of guidance and counselling referral services on the self-efficacy of orphaned children living in orphanages in Bungoma County.* A chi-square analysis was

performed to test the hypothesis at 0.05 significance level., and the results are shown in Table 24.

**Table 24: Chi-Square Tests between Referral Services and Self-efficacy of the Orphans**

	Value	Df	Asymp. Sig. (2-sided)
Pearson Chi-Square	766.174 <sup>a</sup>	195	.000
Likelihood Ratio	303.941	195	.000
Linear-by-Linear Association	25.356	1	.000
N of Valid Cases	256		

a. 211 cells (94.2%) have expected count less than 5. The minimum expected count is .00.

In Table 24, the results show a chi-square value of 766.174 with 195 degrees of freedom, an observed significance level of 0.00 which is less than the expected 0.05. This implies that referral services and self-efficacy of orphans are significantly related. We, therefore, reject the null hypothesis and accept the alternative hypothesis.

These findings are in agreement with many scholars. Referral services are an integral part of counselling and guidance and must be available to all applicants and eligible individuals to secure needed services from other agencies (Martin, 2017). This helps assure that those seeking services receive all possible benefits and that guidance and counselling are able to extend its own resources by securing all comparable services and benefits. Referral may be made to other entities for assessments, specific goods or supplies, consultation, and/or other services in support of an individual’s vocational rehabilitation needs. Referral services may occur at all stages of the rehabilitation process (from application through post-employment services) but are mandated in the following circumstances. The individual must be made aware of the services of the

students' assistance program at the time of application, at the initiation of the individualized plan, and at case closure; and in a situation in which vision is not the primary disability, and a medical or psychological condition exists which imposes functional limitations, a referral must be made to the division of vocational rehabilitation (Martin, 2017).

The findings are in line with the Theory of Change Typology by Serena, Masino, Miguel and Nino Zarazua, (2016). The theory talks about three main drivers of change in education quality. The Theory also encourages community participation in the management of higher education. This can be done through the respective Boards of Management (BoM) and government policy.

#### **4.7.3 Correlation Results between Referral Services and Self-efficacy of the Orphans**

Table 24 gives a summary of the correlation results linking Referral Services and Self-efficacy of the Orphans.

**Table 24: Correlations between Referral Services and Self-efficacy of the Orphans**

N=280		1
1. Referrals services	Pearson Correlation	
	Sig. (2-tailed)	
2. Self-efficacy programmes	Pearson Correlation	.315**
	Sig. (2-tailed)	.000

The analysis results show that there is a positive and significant relationship between referral services and self-efficacy of orphans at  $r=0.315^{**}$ ,  $P<.001$  significant level. The coefficient of determinant  $R= r^2$  established that referral services contribute 9.9% variability to self-efficacy of orphans when other factors are held constant.

#### 4.7.4 Regression Analysis for Predicting Referral Services and Self-efficacy of the Orphans

In this section, the researcher sought to come up with a regression model to explain the efficacy of orphaned children. This enabled the determination of how well multiple independent variables (variables characterizing each of the five categories) to predict the value of a dependent variable. The dependent variable can be characterized as the efficacy of orphaned children. Multiple regression was used to predict the efficacy of orphaned children in a situation in which effect factors; individual guidance and counselling services, group guidance and counselling services, career guidance services, guidance and counselling referral services and mentorship programs influence the efficacy of orphaned children. Table 25 is the model summary.

**Table 25: Regression Model Summary**

Model	R	R Square	Adjusted R Square	Std. Error of the Estimate	Change Statistics				
					R Square Change	F Change	df1	df2	Sig. F Change
4	.550 <sup>d</sup>	.302	.291	2.48892	.019	6.474	1	243	.012

e. Predictors: (Constant) referrals services

f. Dependent Variable: efficacy of the orphans due to counseling programs

The value of R square from Table 26 is given as .302, this means that 30.2% change in self efficacy is explained by referral services. Table 26 gives the ANOVA results.

**Table 26: ANOVA**

Model	Sum of Squares	df	Mean Square	F	Sig.
4 Regression	652.228	4	163.057	26.322	.000 <sup>e</sup>
Residual	1505.321	243	6.195		
Total	2157.548	247			

a. Dependent Variable: efficacy of the orphans due to counselling programs

e. Predictors: (Constant), referrals services

The output in Table 26 show next part of the output, which contains an analysis of variance (ANOVA) that tests whether the model is significantly better at predicting the outcome than using the mean as a “best guess”. If the improvement due to fitting the regression model is much greater than the inaccuracy within the model, then the value of F will be greater than one. For the fourth model, the value of F is 26.322 which is also highly significant ( $P < .001$ ). Table 27 is the coefficient and significance.

**Table 27: Regression Coefficients**

Model	Unstandardized Coefficients		Standardized Coefficients	t	Sig.	95.0% Confidence Interval for B	
	B	Std. Error	Beta			Lower Bound	Upper Bound
(Constant)	.658	1.070		.615	.539	-1.450	2.766
referrals services	.079	.051	.090	1.549	.123	-.021	.179

a. Dependent Variable: efficacy of the orphans due to counseling programmes

**Referral counselling** (standardize  $\beta = .051$ ). This value indicates that as referral counselling increases by one standard deviation, Self-efficacy of orphans increase by .051 standard deviations when other factors are held constant.

#### 4.8 Mentorship Programs and Self-Efficacy of Orphaned Children

The fifth objective of this study was to determine the influence of mentorship programs on the self-efficacy of orphaned children living in orphanages in Bungoma County. In order to achieve this objective, the respondents were asked questions to establish how mentorship programs influence the self-efficacy of orphaned children.

##### 4.8.1 Descriptive Statistics on Mentorship Programs

Table 28 summarizes the descriptive statistics on Mentorship Programs.

**Table 28: Descriptive Statistics on Mentorship Programs**

	True		False		Do not Remember	
	n	%	n	%	n	%
For the time I have lived in the orphanage, I have been well matched to a mentor/mentors from among fellow orphans living in the children home.	180	70	66	25.7	10	3.9
The support and growth I have received from this paired mentorship program are immense	149	58	89	34.6	18	7
Arising from this healthy mentorship program, I feel well prepared to face life's challenges long after I exit from this orphanage	212	82.5	36	14.0	9	3.5
Most mentorship programs are well attended by all children in the orphanage	153	59.5	97	37.7	7	2.7
I have been free and confident in opening up to the mentors I have been offered	149	58	101	39.3	7	2.7
We have separate sessions for senior youths for the various mentorship programs	181	70.4	56	21.8	18	7
In some situations, I have witnessed cases where these mentorship programs have not worked well for me	106	41.2	128	49.8	23	8.9
These mentorship programs need to accelerate in our orphanage for more gainful interaction between mentors and mentees	214	83.3	31	12.1	12	4.7
The specialists brought in to take us through Mentorship programs exhibit a lot of professionalism in matters related to children living in orphanages	179	69.6	62	24.1	16	6.2
The orphanage management has confirmed that mentorship programs are too expensive and therefore way above its ability to foot the Bills	113	44.0	107	41.6	36	14

The respondents were required to respond to the statement “For the time I have lived in the orphanage, I have been well matched to a mentor from among fellow orphans living in the children’s home”, and their responses are shown in Table 28. The results in Table 28 show that 180(70%) of the respondents agree that for the time they had lived in the orphanage, they had been well matched to a mentor from among fellow orphans living in the orphans. Conversely, 66(25.7%) disagreed and 10(7.8%) were not sure if for the time they had lived in the orphanage, they had ever been well matched to a mentor/mentors



from among fellow orphans living in the children home. 1(0.4%) did not respond to the statement.

The respondents were required to respond to the statement “The support and growth I have received from this paired mentorship program is immense”. The results in Table 28 show that 149(87.2%) of the respondents agree that the support and growth they have received from this paired mentorship program is immense, 89(34.6%) disagree and 18(7.0%) did not remember the support and growth they have received from this paired mentorship program is immense. 1(0.4%) did not respond to the statement.

The respondents were required to respond to the statement “I feel the mentorship program has prepared me to face life’s challenges when I exit from this orphanage”. The results in Table 28 shows that 212(82.5%) of the respondents agree that they felt the mentorship program had prepared them to face life’s challenges when they exit from the orphanage. Contrariwise, 36(14.0%) disagree and 9(3.5%) were not sure that they felt the mentorship program had prepared them to face life’s challenges when they exit from the orphanage.

The respondents were required to respond to the statement “The mentorship programs are attended by all children in the orphanage”, and their responses are shown in Table 28. The results in Table 28 show that 153(59.5%) of the respondents agree that most mentorship programs are attended by all children in the orphanage, compared 97(537.7%) disagreed and 7(2.7) who were not sure if most mentorship programs are attended by all children in the orphanage.

The respondents were required to respond to the statement “I have been free and confident in opening up to the mentors I have been offered”, and their responses are shown in Table 28. The results in Table 28 show that 149(58.0%) of the respondents

agree that they were free and confident in opening up to the mentors they were offered, 101(39.3%) disagree and 7(2.2%) were not sure if they were free and confident in opening up to the mentors they were offered.

The respondents were required to respond to the statement “We have separate sessions for senior youths for the various mentorship programs”, and their responses are shown in Table 28. The results in Table 28 show that 181(70.4%) of the respondents agree that they had separate sessions for senior youths for the various mentorship programs, 563(21.8%) disagree and 18(7.0%) were not sure if they had separate sessions for senior youths for the various mentorship programs. Finally, 2(0.8%) did not respond to the statement.

The respondents were required to respond to the statement “In some situations, the mentorship programs have not worked well for me”. The responses are shown in Table 28. The results in Table 28 show that 106(41.2%) of the respondents agree that in some situations, the mentorship programs did not work well for them, compared to 128(49.8%) who disagreed and 23(8.9%) who indicated they were not sure if in some situations, the mentorship programs did not work well for them.

The respondents were required to respond to the statement “These mentorship programs need to accelerate in our orphanage for more gainful interaction between mentors and mentees”. The observed responses are shown in Table 28. The results in Table 28 show that 214(87.2%) of the respondents agree that these mentorship programs need to be accelerated in orphanages for more gainful interaction between mentors and mentees. On the other hand, 31 (12.1%) disagreed and 12 (4.7%) were not sure if it was necessary for these mentorship programs to be accelerated in orphanages for more gainful interaction between mentors and mentees.

The respondents were required to respond to the statement “The specialists brought in to take us through mentorship programs exhibit a lot of professionalism in matters related to children living in orphanages”. The results in Table 28 show that 179(69.6%) of the respondents agree that the specialists brought in to take them through mentorship programs exhibit a lot of professionalism in matters related to children living in orphanages. In addition, 62(24.1%) disagreed and 16(6.2%) were not sure if these specialists brought in to take them through Mentorship programs exhibited a lot of professionalism in matters related to children living in orphanages.

The respondents were required to respond to the statement “The orphanage management has confirmed that mentorship programs are too expensive”. The results in the above Table shows that 113(44.0%) of the respondents agree that the orphanage management has confirmed that mentorship programs are too expensive. In comparison, 107(41.6%) disagreed and 36(14.0%) were not sure if the orphanage management had confirmed that mentorship programs are too expensive.

In order to further establish the respondents’ perception of referral services, selected interviewees were sampled, and the data from the interview guide collected. The sampled interviewees were asked to respond to the following question: *How has the mentorship programs influenced the self-efficacy of orphaned children living in orphanages in Bungoma County?* A general theme was that respondents felt they had gained self-efficacy due to mentorship programs. A sample response is presented in the excerpt:

*“For a long time, I had a very simplistic sense of where my potential lay. Because of my poor Grades generally, I had come to conclude that I would be a total failure in life! This made me look hopeless and even helpless. Little did I know that I had some hidden potential in me! When the administrator brought in an expert in the*

*area of Mentorship who talked to us on a range of issues, I realized that I had a lot of strength in the area of martial arts that was lying untapped! Gradually, I was introduced to the only Martial Arts Centre in town for mentorship and growth in my field. Since then, things have never been the same! Am now officially a member of the Acrobatic Crew in town where we perform at a fee. I can now afford my basic needs without necessarily depending on food rations from the orphanage.”*

#### **4.8.2 Chi-Square Tests between Mentorship Program and Self-efficacy**

In order to find out the relationship between mentorship programs and self-efficacy of the orphans, the researcher applied inferential statistics to generated data. Therefore, the researcher generated a null hypothesis  $H_0$ : *There is no statistically significant influence of mentorship programs on the self-efficacy of orphaned children living in orphanages in Bungoma County.* A chi-square analysis was performed to test the hypothesis at 0.05 significance level. The results are shown in Table 29.

**Table 29: Chi-Square Tests between Mentorship Program and Self-efficacy**

	<b>Value</b>	<b>Df</b>	<b>Asymp. Sig. (2-sided)</b>
Pearson Chi-Square	1028.626 <sup>a</sup>	182	.000
Likelihood Ratio	307.831	182	.000
Linear-by-Linear Association	52.390	1	.000
N of Valid Cases	253		

a. 197 cells (93.8%) have expected count less than 5. The minimum expected count is .00.

Data presented in Table 29 indicates a chi-square value of 307.831 with 182 degrees of freedom and an observed significance level of 0.000, which is less than the expected 0.05. It was inferred that the two variables are, indeed, related, i.e. mentorship program and self-efficacy of orphans are significantly related. We, therefore, reject the null hypothesis and accept the alternative hypothesis.

These findings indicate that mentorship programs are a significant factor in the self-efficacy of orphaned children. These findings are in agreement with many scholars. Career Mentorship Program (CMP) is designed for diverse groups of students with tailor-made modules for students from different socio-economic, and cultural backgrounds, students enrolled in academic or vocational-technical programs, students in need of character development or drug-related issues (Irby et al., 2017). The objective of (CMP) is to develop students awareness on the relationship between academic studies and their life occupation, motivate, inform for improved self-esteem and self-confidence, help students make informed decisions and choices in schools as a preparation for their future career and to stimulate student's participation in curriculum and co-curriculum activities that are essential for a successful career life.

Irby et al. (2017) state that benefits to youths/orphans arising from career Mentorship Program (CMP) include: increased and accurate knowledge on career choices available; improved motivation levels in their studies; healthier relationships and lifestyle choices; informed choices during subject selection in form II; better attitude about school and schooling challenges; enhanced self-esteem and self-confidence; improved behaviours, both at home and at school; improved relationships with parents, teachers and peers; improved interpersonal skills and stable career lives. The interactive and practical engagement entails electrifying facilitation with mentally stimulating perspectives. Each session is conducted in a comfortable style that supports adult and students learning based on the most successful change and conditioning technologies of Neuro-Linguistic Programming (NLP) and Neuro-Associative Conditioning (NAC) that encompasses both in the door and out-doors learning activities. The Career Planning Course is a six (6) hour training delivered in three sessions of two hours each (Irby et al., 2017).

These findings are supported by Self-Determination Theory. According to Niemiec & Ryan (2009), people are centrally concerned with motivation. Everywhere, parents, teachers, coaches and managers struggle with how to motivate those that they mentor, and individuals struggle to find energy, mobilize effort and persist in the tasks of work and life. People are often moved by external factors such as reward systems. Self-determination theory is a macro theory of human motivation and personality that concerns people's inherent growth tendencies and innate psychological needs. It is concerned with the motivation behind choices people make without external influence and interference. SDT focuses on the degree to which an individual's behaviours is self-motivated and self-determined.

Self-determination theory (SDT) is a framework conceptualizing the motivation which underlies the choices people make (Gagné & Deci, 2005). The theory was developed by Edward L. Deci and Richard M. Ryan in the mid-1980s. Self-determination theory is all about humans' motivation. This theory indicates that there are two types of motivation. Intrinsic and extrinsic. Intrinsic motivation comes from within. Deci and Ryan identify three basic needs that fuel intrinsic motivation: Competence; the ability to control the outcome of activity and experience mastery of that task; relatedness; the universal need to be connected to and caring for others; autonomy: the desire to be an independent agent in your own life.

Van den Broeck, Ferris, Chang, & Rosen (2016) states that conditions are supporting the individual's experience of autonomy, competence and relatedness are argued to foster the most volitional and high-quality forms of motivation and engagement for activities, including enhanced performance, persistence and creativity. Also, SDT proposes that the degree to which any of these three psychological needs is unsupported or thwarted within

a social context will have a robust detrimental impact on wellness in that setting (Deci & Ryan,2000).

Self-determination theory clearly lacks a developmental focus in that it does not look at the above-mentioned distinction in developmental terms (Van den Broeck et al., 2016). Those who are acquainted with the developmental literature know quite well that the more a child is young, the more s/he is focused on external outcomes, not on internal motives. Thus, it is likely that intrinsic motivation increases with increasing age. To think of an intrinsically motivated baby seems to deify our imagination. The same might be said of, for example, a 4-year-old child as far as meta-cognition is concerned. I cannot imagine such a child engaged in the following chain of thinking: “I know that you know what I know about you.”

#### 4.8.3 Correlation Results between Mentorship Program and Self-efficacy

Table 30 gives the correlation results between Mentorship Program and Self-efficacy

**Table 30: Correlations between Mentorship Program and Self-efficacy**

		<b>1</b>
<b>N=280</b>		
3. Mentorship programmes	Pearson Correlation	
	Sig. (2-tailed)	
4. Self-efficacy programmes	Pearson Correlation	.456**
	Sig. (2-tailed)	.000

The results show that there is a positive and significant relationship between mentorship program and self-efficacy of orphans at  $r=0.456^{**}$ ,  $P<.001$  significant level. The coefficient of determinant  $R= r^2$  established that mentorship program contributes 20.8% variability to self-efficacy of orphans when other factors are held constant.

#### 4.8.4 Regression Analysis for Predicting Mentorship Program and Self-efficacy

In this section, the researcher sought to come up with a regression model to explain the efficacy of orphaned children. This enabled the determination of how well multiple independent variables (variables characterizing each of the five categories) to predict the value of a dependent variable. The dependent variable can be characterized as the efficacy of orphaned children. Multiple regression was used to predict the efficacy of orphaned children in a situation in which effect factors; individual guidance and counselling services, group guidance and counselling services, career guidance services, guidance and counselling referral services and mentorship programs influence the efficacy of orphaned children. Table 31 gives the model summary.

**Table 31: Regression Model Summary**

Model	R	R Square	Adjusted R Square	Std. Error of the Estimate	R Square Change	Change Statistics			
						F Change	df1	df2	Sig. F Change
5	.588 <sup>e</sup>	.346	.332	2.41532	.043	16.035	1	242	.000

e. Predictors: (Constant), mentorship programs offered by orphanages

f. Dependent Variable: efficacy of the orphans due to counselling programs

The findings in Table 31 indicate that R-square value is 0.346, this means that 34.6% change in self efficacy is explained by mentorship programs in place. Table 32 gives the ANOVA findings.

**Table 32: ANOVA**

Model		Sum of Squares	df	Mean Square	F	Sig.
5	Regression	745.770	5	149.154	25.567	.000 <sup>f</sup>
	Residual	1411.778	242	5.834		
	<b>Total</b>	<b>2157.548</b>	<b>247</b>			

a. Dependent Variable: efficacy of the orphans due to counselling programs

f. Predictors: (Constant), mentorship programs offered by orphanages



The output in Table 32 shows next part of the output, which contains an analysis of variance (ANOVA) that tests whether the model is significantly better at predicting the outcome than using the mean as a “best guess”. Specifically, the F-ratio represents the ratio of the improvement in the prediction that results from fitting the model, relative to the inaccuracy that still exists in the model. This table is split into three sections: one for each model. The value of the sum of squares  $SS_m$  for the model represents the improvement in prediction resulting from fitting a regression line to the data rather than using the mean as an estimate of the outcome.

If the improvement due to fitting the regression model is much greater than the inaccuracy within the model, then the value of F will be greater than one. For the fifth model the value of F is 25.567 which is also highly significant ( $P < .001$ ). The output in Table 33 helps us to come up with future predictions if the independent variables are implemented optimally through a multiple linear regression equation. Table 33 gives the beta coefficients and significance.

**Table 33: Regression Coefficients**

Model	Unstandardized Coefficients		Standardized Coefficients	t	Sig.	95.0% Confidence Interval for B	
	B	Std. Error				Lower Bound	Upper Bound
(Constant)	.658	1.070		.615	.539	-1.450	2.766
mentorship programs offered by orphanages	.314	.078	.279	4.004	.000	.159	.468

- a. Dependent Variable: efficacy of the orphans due to counselling programmes  
 Self-efficacy of orphans =  $1.070 + .078X_5$

Where

$\alpha_0 = 1.070$  is a constant, shows that if all independent variables were rated zero, Self-efficacy of orphans rating would be 1.070

**Mentorship program** (standardize  $\beta=.078$ ). This value indicates that as mentorship program increases by one standard deviation, Self-efficacy of orphans increase by .078 standard deviations when other factors are held constant. The youths are mentored on the potential that exists in their areas of specialization/engagement. The mentorship program involves personal interaction with mentors in one to one interaction, seminars and training session intending to increase their capacity that can unlock their potential in their areas of interest. The mentorship program intends to identify any gaps or potential for interaction in their areas of specialization. Through this program of engagement with the youths, hands-on-experience is developed so that the theoretical knowledge and skills that the youths have maybe put onto fair use. The foregoing may entail visiting related enterprises or sites for interactive sessions and further training through exposure. Experts and specialists in different fields and trades are invited periodically to provide the youths with valuable insights into various opportunities.

These training sessions are formulated with a view to impacting the youths with the requisite background knowledge, particularly on how to integrate ICT skills to enhance their work output. Some mentorship programs are aimed at strengthening the sustainability of the projects that the youths may be engaged in through capacity development tailored for young social entrepreneurs (Gardner, 2015). In order to understand the phenomenal growth of mentorship programs, it is prudent to investigate the meaning and the origins of mentorship. Mentorship has been described as a relationship between an older person (mentor) who is always experienced and willing to journey with a young person (mentee) to keep and guide the mentee's development (ministry of education taskforce, 2014). Through continued involvement, the adult (mentor) offers support, guidance and assistance as the young person goes through a difficult period faces new life's challenges or works to correct earlier problems. As a

result, mentorship brings about sustainable growth and development in the academic career, social or personal goals of a mentee (Pardini, 2013). Mentorship programs are quite critical in orphanages, especially for the youths and young adults who are due for disengagement to start charting their own course of life. In order to avoid “fall-backs” to the orphanage, mentorships ought to be strengthened to equip them with robust and vibrant employability skills that are in tandem with the current needs of the job market.

## **CHAPTER FIVE**

### **SUMMARY, CONCLUSION AND RECOMMENDATIONS**

#### **5.1 Introduction**

This chapter gives a summary of the findings, make conclusions and recommendations based on the study findings.

#### **5.2 Summary**

##### **5.2.1. Influence of Individual Guidance and Counselling Services on the Self-Efficacy of Orphaned Children**

The first objective of the study was to establish the influence of individual guidance and counselling services on the self-efficacy of orphaned children living in orphanages in Bungoma County. Data analysis and interpretation of questionnaire responses from the orphaned boys, orphaned girls, Administrators and Caregivers revealed that individual guidance and counselling services are an assurance to the self-efficacy of orphaned children. The study established that there was a positive and significant influence between individual guidance and counselling services and the self-efficacy of orphaned children at  $r=.496^{**}$ ,  $p<.001$  significant level contributing 24.6% variability to the self-efficacy of orphaned children when other factors are held constant. These findings indicate that individual guidance and counselling services are a significant factor for the self-efficacy of orphaned children.

##### **5.2.2. The Influence of Group Guidance and Counselling Services on the Self-Efficacy of Orphaned Children**

The second objective of this study was to establish the influence of group guidance and counselling services on the self-efficacy of orphaned children living in orphanages in Bungoma County. Data analysis and interpretation of questionnaire responses from the orphaned boys, orphaned girls, Administrators and Caregivers revealed that group guidance and counselling services are an assurance to the self-efficacy of orphaned

children. The study established that there was a positive and significant relationship between group guidance and counselling services and the self-efficacy of orphaned children at  $r=.425^{**}$ ,  $p<.001$  significant level contributing 18.1% variability to the self-efficacy of orphaned children when other factors are held constant. These findings indicate that group guidance and counselling services are a significant factor for the self-efficacy of orphaned children.

### **5.2.3. The Influence of Career Guidance services on the Self-efficacy of Orphaned Children.**

The third objective of this study was to determine the influence of career guidance services on the self-efficacy of orphaned children living in orphanages in Bungoma County. Data analysis and interpretation of questionnaire responses from the orphaned boys, orphaned girls, Administrators and Caregivers revealed that career guidance and counselling services are an assurance to the self-efficacy of orphaned children. The study established that there was a positive and significant relationship between career guidance and counselling services and the self-efficacy of orphaned children at  $r=.365^{**}$ ,  $P<.001$  significant level contributing 13.3% variability to the self-efficacy of orphaned children when other factors are held constant. These findings indicate that career guidance and counselling services are a significant factor for the self-efficacy of orphaned children.

### **5.2.4. The Influence of Guidance and Counselling Referral Services on the Self-Efficacy of Orphaned Children.**

The fourth objective of this study was to establish the influence of guidance and counselling referral services on the self-efficacy of orphaned children living in orphanages in Bungoma County. Data analysis and interpretation of questionnaire responses from the orphaned boys, orphaned girls, Administrators and Caregivers revealed that guidance and counselling referral services are an assurance to the self-

efficacy of orphaned children. The study established that there was a positive and significant relationship between guidance and counselling referral services and the self-efficacy of orphaned children at  $r=.315^{**}$ ,  $p<.001$  significant level contributing 9.9% variability to the self-efficacy of orphaned children when other factors are held constant. These findings indicate that guidance and counselling referral services are a significant factor for the self-efficacy of orphaned children.

#### **5.2.5. The Influence of Mentorship Programs on the Self-Efficacy of Orphaned Children.**

The fifth objective of this study was to determine the influence of mentorship programs on the self-efficacy of orphaned children living in orphanages in Bungoma County. Data analysis and interpretation of questionnaire responses from the orphaned boys, orphaned girls, Administrators and Caregivers revealed that mentorship programs are an assurance to the self-efficacy of orphaned children. The study established that there was a positive and significant relationship between mentorship programs and the self-efficacy of orphaned children at  $r=.456^{**}$ ,  $P<.001$  significant level contributing 20.8% variability to the self-efficacy of orphaned children when other factors are held constant. These findings indicate that mentorship programs are a significant factor in the self-efficacy of orphaned children.

### **5.3. Conclusions**

This study assessed the influence of guidance and counselling services on the self-efficacy of orphaned children living in orphanages in Bungoma County, Kenya. It was intended to establish the influence of individual guidance and counselling services, group guidance and counselling services, career guidance services, guidance and counselling referral services; and mentorship programs on the efficacy of orphaned children. This was in relation to the fact that the challenge of orphaned and vulnerable children is

taking centre stage all over the world since the mismanagement of the phenomenon could result in deleterious long term socio-economic challenges. In third world countries such as Kenya, best practices in orphanages is not a priority in children homes. Since the clients of orphanages lack the psychosocial support that is key to the successful negotiation of developmental milestones, the majority of the children end up vulnerable to relapse once they are released from their care homes. The primary focus of many orphanages in Kenya is the provision of shelter and food without much investment in primary psychological care.

This has led to low self-esteem among children brought up in orphanages, which could persist in their adulthood. Most orphanages have an age limit for orphans who live in their orphanages, after which the support program is discontinued. However, a significant percentage of these orphans are graduated before achieving the self-efficacy for successful re-integration to mainstream society. Many of them end up living as destitute and engaging in anti-social and maladaptive behaviours'. Several variables have been identified in research as the cause for the high cases of relapse of rehabilitated children who are released back to society. However, the role of psychological behaviours management strategies such as guidance and counselling has not received adequate attention in research in Kenya. Therefore, little is known about the influence of psychological interventions in building self-efficacy for orphaned children in managed care. This research aimed at bridging this gap by investigating the influence of guidance and counselling services on the self-efficacy of orphaned children living in orphanages in Bungoma County.

The study established that there was a positive and significant influence between the efficacy of orphaned children and individual guidance and counselling services. This

means that promoting individual guidance and counselling services will go along way to improving efficacy of orphaned children living in orphanages. Group guidance and counselling services had significant effect on self efficacy. This means that any orphanage that has invested in group guidance and counselling services would realize an improvement in self effeciacy among the orphans.

At the same time, career guidance services had significant effect on self efficacy. Thus, enhancing self efficacy of the orphans require orphanages to invest resources in career guidance services. Guidance and counselling referral services were significant. This implies that for improved efficacy of orphaned children to be realized, guidance and counselling referral services are critical. Mentorship programs are key when orphanages wish to realize self efficacy of the orphans. The mentors working in orphanages should be adequately trained so as to significantly enhance self efficacy of the orphans.

#### **5.4 Recommendations of the Study**

The researcher has argued that individual guidance and counselling services, group guidance and counselling services, career guidance services, guidance and counselling referral services; and mentorship programs are key to the efficacy of orphaned children. The study has also established that these services are significant factors for the efficacy of orphaned children in orphanage homes. There was a positive and significant influence between individual guidance and counselling services, group guidance and counselling services, career guidance services, guidance and counselling referral services; mentorship programs are key to the efficacy of orphaned children and efficacy of orphaned children. Despite its limitations, these study findings should be used to enhance the efficacy of orphaned children. Basing generalization on the findings of this study, the researcher recommends that:



#### **5.4.1. Recommendations for Policy**

The government should come up with policies to guide all the orphanages in Kenya, including the process of guidance and counselling.

#### **5.4.2. Recommendations for Practice**

- i. Individual guidance and counselling services should be encouraged in orphanages as they are effective, help the orphans open up and share challenges and most specifically, enables the orphans to solve serious life's challenges. In addition, individual counselling provides an opportunity for the development of an alliance of sorts, a bond or a relationship that enhances trust and personal growth.
- ii. Group guidance and counselling services should be encouraged in orphanages as they create confidence among orphans. Group counselling is used for clarifying ideas and attitudes of the members for purposes of dealing with their day-to-day life's upheavals. By sharing the challenges, they realize their challenges are similar, hence making their burden to appear lighter. The strength of group counselling is that it builds up group cohesion and enables the concerned to easily discover their immense talents and skills.
- iii. Career guidance and counselling services should be encouraged in orphanages as it provides a platform for the orphans to share their career challenges with fellow orphans and counsellors as they shape the future career of these orphans. It enables the orphans to make more informed and better educational and career choices that make them live independent and gainful lives in their post-orphanage days.

- iv. Guidance and counselling referral services should be encouraged in orphanages so as to give the opportunity to more specialized counsellors and other therapists to handle emerging and complicated challenges faced by orphaned children. Referrals provide orphans with an avenue to receive more specialized and comparable services that enhances their focus on overall developmental growth.
- v. Immense mentorship programs in orphanages should be supported and made to grow as they prepare the orphans to face life's challenges, especially in their world of work. Mentorship programs enhance student's participation in curriculum and co-curriculum activities that are essential for successful career lives, especially after disengagement from their respective orphanages. Through intensive mentorship programs, the orphans are strengthened and equipped with robust and vibrant employability skills that are in tandem with the most current trends and needs on the job market.

### **5.5 Suggestions for Further Research**

Based on the findings, the study recommends further studies in the following areas.

- i. Influence of guidance and counselling services on the quality of life of the orphans, with special reference to their post-orphanage lives.
- ii. Influence of guidance and counselling services on academic performance of the orphans living in orphanages.
- iii. Diverse backgrounds of orphans living in orphanages and how it affects their self-efficacy

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## APPENDICES

### Appendix I: Questionnaire for the Orphanageadministrators/Care-Givers

This Research is intended for Research Purposes. May I request you to respond appropriately? I wish to assure you that all information adduced in this questionnaire will be treated with strict confidence. Thank you in anticipation for your assistance and co-operation. Put a TICK against your correct choice of Response.

#### Section A. Background information.

i) Gender of the respondent male ( ) female ( )

#### Section B. Questionnaire for the respondent.

1. Roughly, how many children are in your orphanage? Below100. Above 100.
2. Who (between boys and girls) are the majority, Boys, Girls, Equal number of boys and girls?
3. Was there any known abuse for the children before placement? Yes, No, Do not know.
4. Has the Child been abused while under placement in your orphanage? Yes, No, Do not know
5. Do the sampled children have friends in the orphanage? Yes, No, Do not know
6. Do the sampled children have favourite care-givers? Yes, No, Not sure.
7. Do the Children exhibit some known behavioural problems? Yes, No, Not sure.
8. Have these children had any prior incidents, accidents, injuries or serious illnesses? Yes, No. Not sure.
9. Does the child have any physical disability? Yes, No, Not sure.
10. (a). Do you ever discipline children at this orphanage? Yes, No, Do not know.  
(b). If the answer is YES, briefly explain the form (s) of punishment, you give.  
(c). If the answer is No, show how you handle indiscipline cases?
11. In your opinion, do you think that the children are happy living in this orphanage? Yes, No, Not sure.
12. What are the main fears of the children as they go about their business in this orphanage?
13. Are these children often visited by their families since placement? Yes, No, Not sure.
14. Three out of every four children in every orphanage have at least one living parent!  
True, ----- False-----, Do Not Know-----

15. It has been noted that nothing is done by the management of orphanages to cultivate strong relationships between children and their families of origin. True, False. Do not know.
16. Is the organization locally registered with the Children's department of the line Ministry in the National government? Yes, NO, I do not know.
17. Does your organization have a child protection policy that covers all the children against staffs and volunteers? Yes, No, Do not know
18. Does the organization try to replicate family value systems? Yes, No, Do not know!
19. Do your children in the orphanage attend to public or private schools for their education? Public, Private, Both.
20. Overall, how do the children perform in school academic work? Excellent, Very Good, Good, Satisfactory, poor, very poor,
21. Do you have qualified professional counsellors among your employees? Yes, No, Do not know.
22. What do you do to have the kids improve in their Self-Efficacy? Punish them, Guide & counsel them, Reprimand them, take them to their rural homes as a punishment

## Appendix II: Questionnaire for the Orphaned Children

This Questionnaire is intended for Research Purposes. May I request you to respond appropriately? I wish to assure you that all information adduced in this questionnaire will be treated with strict and utmost confidence. Thank you in anticipation of your assistance and co-operation.

### Section A. Background information.

i) Gender of the respondent male ( ) female ( )

Please TICK /CIRCLE one statement that best describes your response to the Statement.

1. = True
2. = False
3. = Do not Remember

### SECTION I. The effectiveness of Individual Guidance and Counselling Services on orphans living in Orphanages in Bungoma County.

1. I remember well how long I have lived in this Orphanage.

1.            2.            3.

2. There is a permanently employed counsellor who offers individual guidance and counselling services.

1.            2.            3.

3. There is a part-time counsellor who comes periodically to offer individual counselling services on a needs-basis.

1.            2.            3.

4. On various occasions, I have felt the need to open up and share my life's challenges to a professional counsellor or a trusted person.

1.            2.            3.

5. I have felt relaxed and at ease to open up freely to the specialists brought in by the management of the Orphanage to offer individual guidance and Counselling services.

1.            2.            3.

6. I have found the individual guidance and counselling sessions to be enjoyable and resourceful.

1.            2.            3.

7. Occasionally, I have noted that some individual counselling sessions have been boring.

1. 2. 3.

8. I have always managed to solve serious life's challenges on my own after confiding to a counsellor.

1. 2. 3.

9. I can confidently confirm that Individual guidance and Counselling Services are offered in the Orphanage.

1. 2. 3.

10. I have had confidence in the counsellors who provide individual guidance and Counselling Services in the Orphanage.

1. 2. 3.

**SECTION II. The effectiveness of Group Guidance and Counselling Services on orphans living in Orphanages in Bungoma County.**

1. There is a permanently employed counsellor who offers group guidance and counselling services in the orphanage.

1. 2. 3.

2. The orphanage brings in part-time counsellors to offer Group Counselling Services.

1. 2. 3.

3. I have been at ease to open up freely to the specialists brought in by the management of the Orphanage to offer group guidance and Counselling services.

1. 2. 3.

4. I can confirm that group guidance and Counselling Services are offered in the Orphanage.

1. 2. 3.

5. I have had confidence in the counsellors who provide group guidance and Counselling Services in the Orphanage.

1. 2. 3.

6. The counsellors brought in by the orphanage management have been professional.

1. 2. 3.

7. I have noted that my life's challenges are similar to those of my fellow orphans living in this orphanage.

1. 2. 3.



8 .There has been a high turnover of professional counsellors brought in by management to take us through group guidance and counselling programs.

1                      2                      3

9. The orphanage management has kept changing the counsellors brought in to handle group guidance and counselling programs.

1                      2                      3

10 . I have noted that most of us (orphans) tend to relapse into our day-today challenges even after going through group guidance and counselling sessions.

1                      2                      3

**SECTION III. The influence of Career Guidance Services on self-efficacy of Orphans living in Orphanages in Bungoma County.**

1. I have always shared my Career challenges with fellow orphans in the Orphanage.

1.                      2.                      3.

2. I have noted that my Career challenges are quite similar to those of fellow orphans.

1.                      2.                      3.

3. I, together with fellow orphans, have willingly shared our Career challenges with counsellor s.

1.                      2.                      3.

4. We have not felt shy to open up to the orphanage specialises concerning our Career matters.

1.                      2.                      3.

5. orphanage management has been receptive to all the Career challenges that we have shared with them.

1.                      2.                      3.

6. There has been a continuous change of specialists brought in the orphanage to offer Career guidance services.

1.                      2.                      3.

7. These Career guidance Sessions are well prograded and held mostly during Weekends, on public and school holidays.

1.                      2.                      3.

8. Some of my fellow orphans have NOT seen the need for these Career Guidance and Counselling services offered in the orphanage.

1.                      2.                      3.

9. Senior Boys and Girls have had separate Career Guidance and Counselling sessions.

1.            2.            3.

10. Career guidance and Counselling sessions should be encouraged in our orphanage.

1.            2.            3.

**SECTION IV. The influence of Guidance and Counselling referral services on the self-efficacy of orphans living in orphanages within Bungoma County.**

1. Guidance and Counselling Referral programs and services are common in the children home.

1.            2.            3.

2. There have been situations I felt that the Guidance and Counselling services I received in the orphanage were inadequate.

1.            2.            3.

3. For the time I have lived in this Orphanage, I have been referred to specialists for specialised Counselling services.

1.            2.            3.

4. There have been situations where I have experienced relapses even after I had been guided and counselled by specialists.

1.            2.            3.

5. I have been free to share my life's challenges with specialists I have been referred to by Orphanage Management.

1.            2.            3.

6. The specialists I have been referred to have been readily available to attend to my life needs.

1.            2.            3.

7. I feel that there have been situations where these referral services have not worked well for me.

1.            2.            3.

8. In some situations, I have witnessed cases where these Referral services have not worked well for my fellow orphans in the orphanage.

1.            2.            3.

9. The specialists brought in to take us through referral programs have a thorough understanding of issues related to children living in orphanages.

1.            2.            3.

10. These referral programs need to be accelerated in the orphanage for more gainful interactions between specialists and orphans in dire need of these services.

- 1.
- 2.
- 3.

**SECTION V. The influence of Mentorship programs on the self-efficacy of orphans living in orphanages within Bungoma County.**

1. For the time I have lived in the orphanage, I have been well matched to a mentor/mentors from among fellow orphans living in the children home.

- 1.
- 2.
- 3.

2. The support and growth I have received from this paired mentorship program are immense.

- 1.
- 2.
- 3.

3. Arising from this healthy mentorship program, I feel well prepared to face life's challenges long after I exit from this orphanage.

- 1.
- 2.
- 3.

4. Most mentorship programs are well attended by all children in the orphanage.

- 1.
- 2.
- 3.

5. I have been free and confident in opening up to the mentors I have been offered.

- 1.
- 2.
- 3.

6. We have separate sessions for senior youths for the various mentorship programs.

- 1.
- 2.
- 3.

7. In some situations, I have witnessed cases where these mentorship programs have not worked well for me.

- 1.
- 2.
- 3.

8. These mentorship programs need to accelerate in our orphanage for more gainful interaction between mentors and mentees.

- 1.
- 2.
- 3.

9. The specialists brought in to take us through Mentorship programs exhibit a lot of professionalism in matters related to children living in orphanages.

- 1.
- 2.
- 3.

10. The orphanage management has confirmed that mentorship programs are too expensive and therefore way above its ability to foot the Bills.

- 1.
- 2.
- 3.

**Section Vi. Self-Efficacy Questionnaire.**

1. From individual guidance and counselling services received, I can always manage to handle difficult challenges if I try hard enough.

1.                      2.                      3.

2. I have developed resilience as a result of the robust mentorship programs and services put in place by the orphanage management.

1.                      2.                      3.

3. From Group guidance and Counselling skills acquired, I am now confident that I can deal more effectively with unexpected occurrences.

1.                      2.                      3.

4. Thanks to my resourcefulness, I now know how to handle unforeseen situations and challenges.

1.                      2.                      3.

5. I have realized that I can solve most life's problems if I invest the necessary effort and input.

1.                      2.                      3.

6. When I am confronted with a challenge, I can usually find several solutions out of the challenge.

1.                      2.                      3.

7. The career services I have received have strengthened my resolve to focus and succeed in my post-orphanage life.

1.                      2.                      3.

8. I can remain calm when facing difficulties because I can rely on my coping skills and abilities acquired through counselling referral services.

1.                      2.                      3.

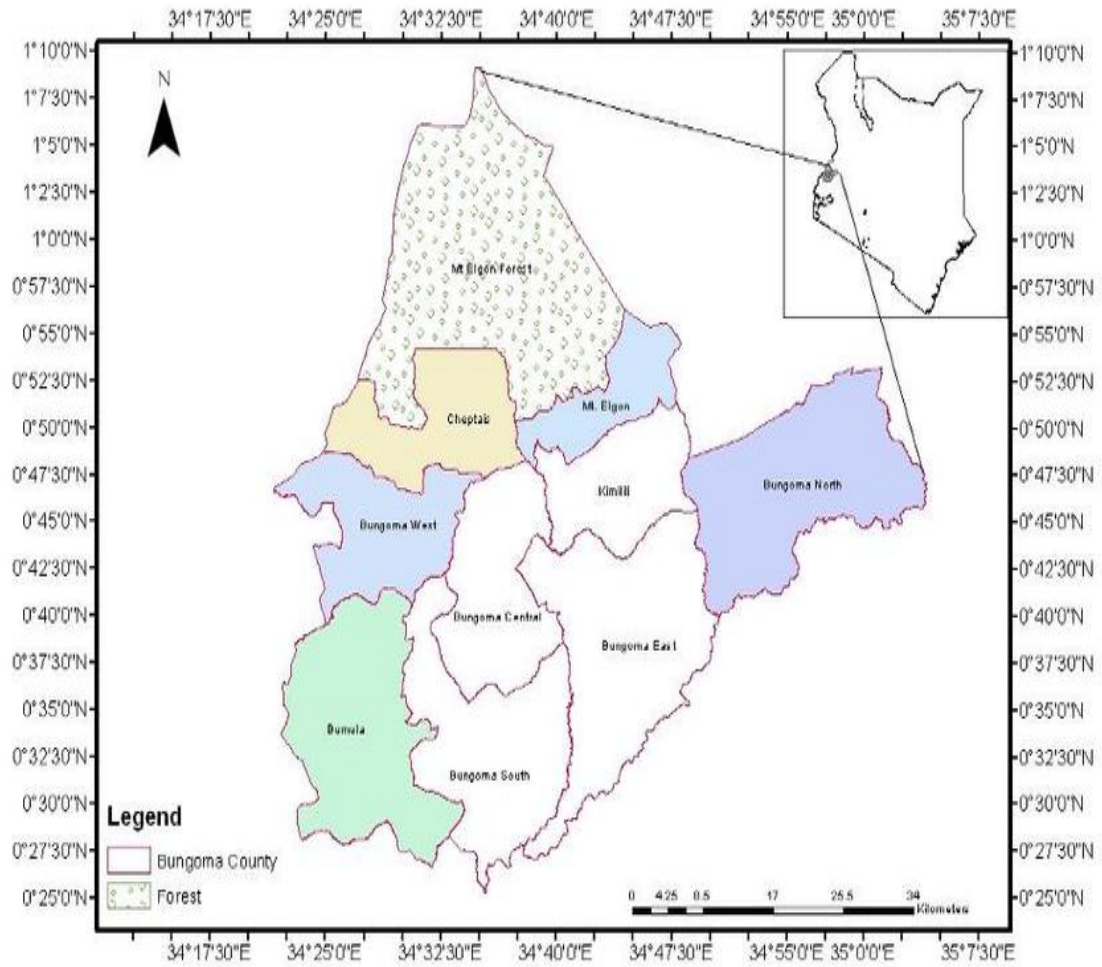
9. If I am in trouble, I can usually think of a solution arising from the numerous skills acquired through the various mentorship programs mounted in the orphanage.

1                              2                              3

10. Arising from the robust mentorship programs in the orphanage, I am confident that I will always achieve the goals that I set for myself.

1.                      2.                      3.

### Appendix III: Map of Bungoma County in Kenya



Source: <https://www.kenyacountyguide.co.ke/bungoma-county-039/>

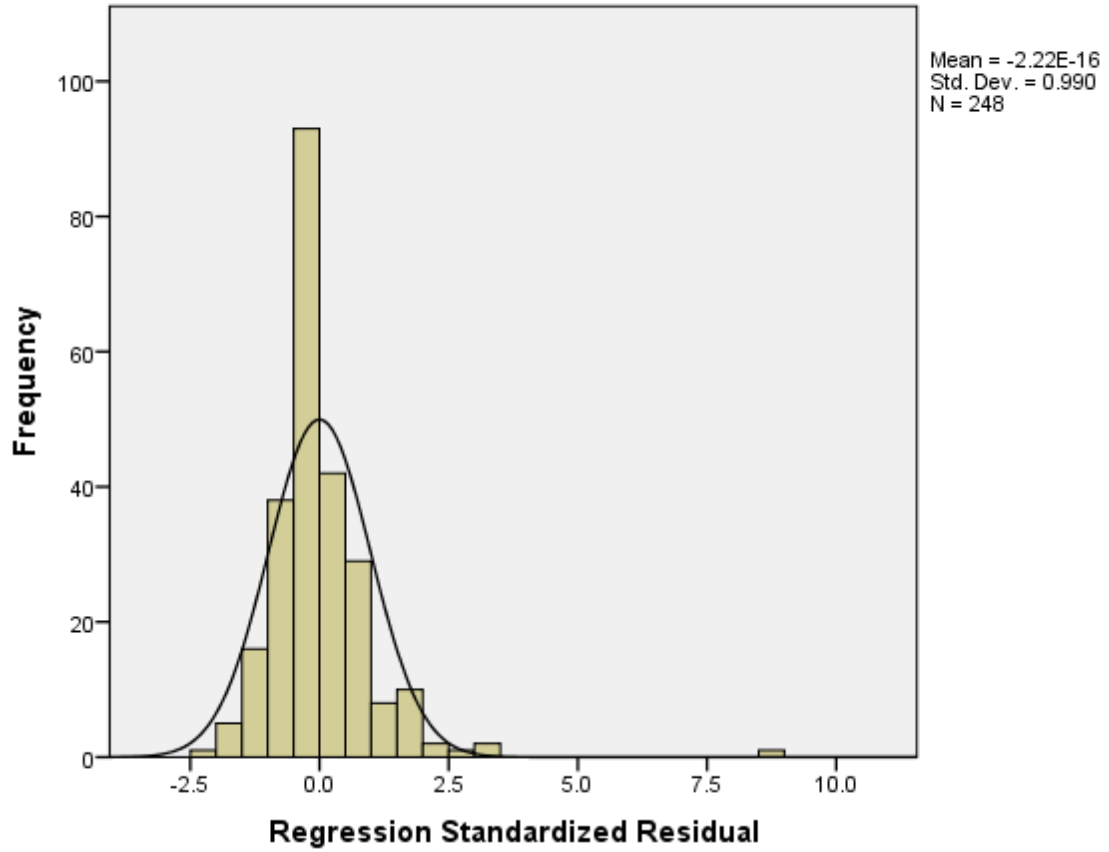
**Appendix IV: Table for Determining the Sample Size of a Finite Population**

N	S	N	S	N	S	N	S	N	S
10	10	100	80	280	162	800	260	2800	338
15	14	110	86	290	165	850	265	3000	341
20	19	120	92	300	169	900	269	3500	246
25	24	130	97	320	175	950	274	4000	351
30	28	140	103	340	181	1000	278	4500	351
35	32	150	108	360	186	1100	285	5000	357
40	36	160	113	380	181	1200	291	6000	361
45	40	180	118	400	196	1300	297	7000	364
50	44	190	123	420	201	1400	302	8000	367
55	48	200	127	440	205	1500	306	9000	368
60	52	210	132	460	210	1600	310	10000	373
65	56	220	136	480	214	1700	313	15000	375
70	59	230	140	500	217	1800	317	20000	377
75	63	240	144	550	225	1900	320	30000	379
80	66	250	148	600	234	2000	322	40000	380
85	70	260	152	650	242	2200	327	50000	381
90	73	270	155	700	248	2400	331	75000	382
95	76	270	159	750	256	2600	335	100000	384

## Appendix V: Charts

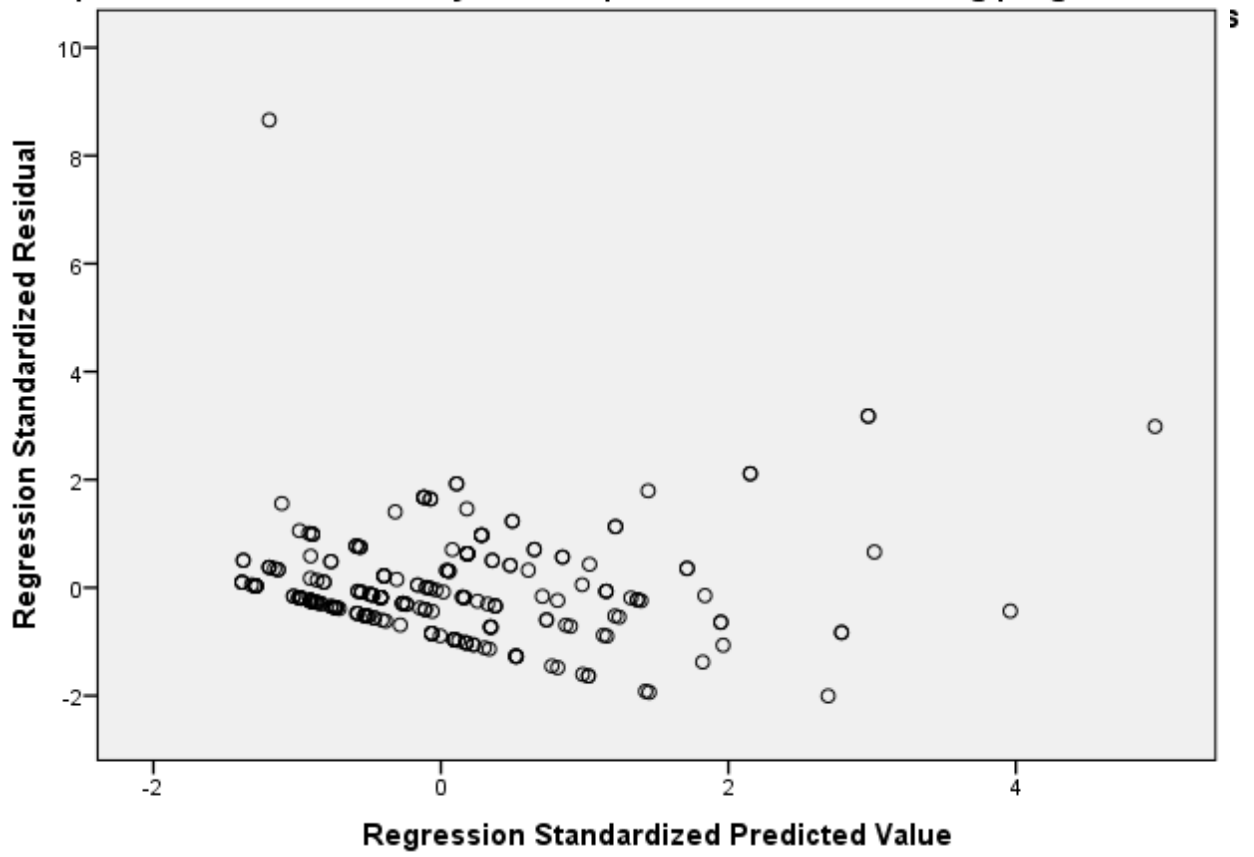
### Histogram

Dependent Variable: efficacy of the orphans due to counselling programmes



### Scatterplot

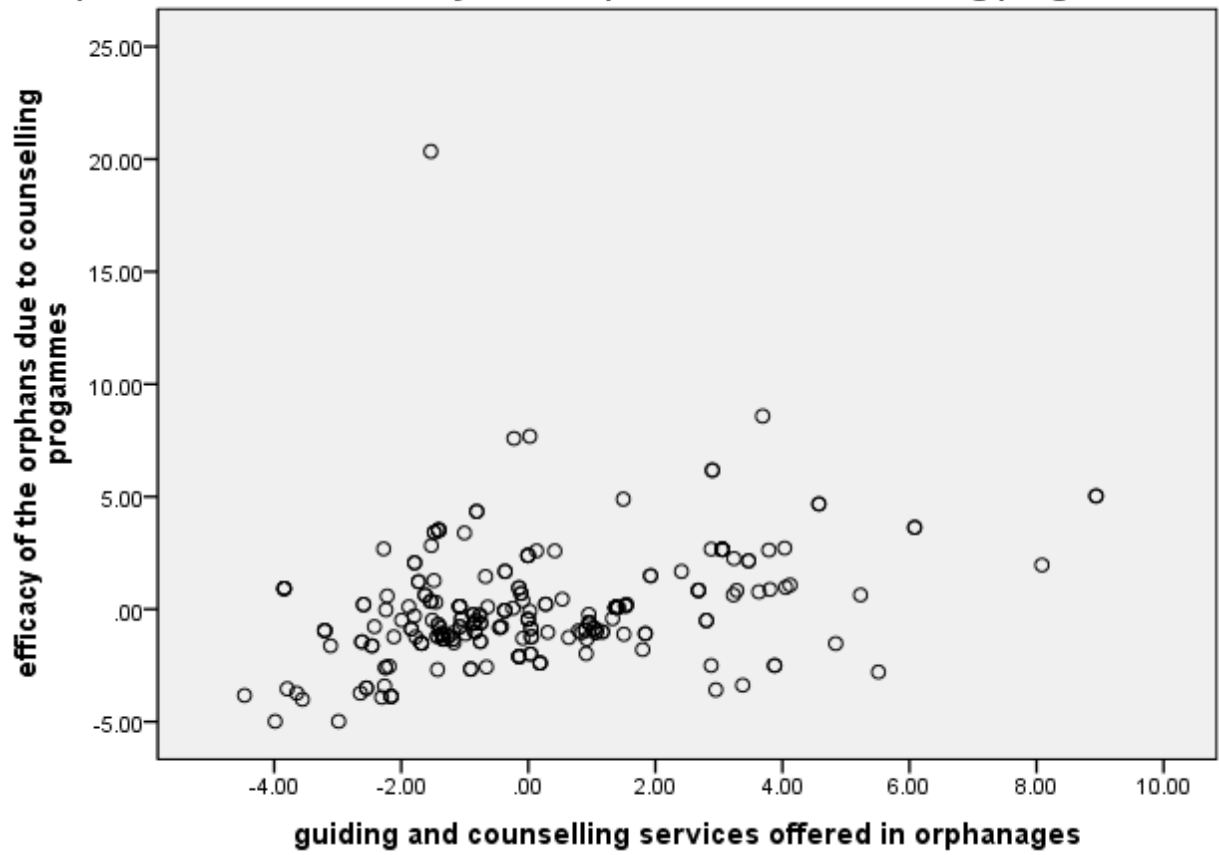
Dependent Variable: efficacy of the orphans due to counselling programmes





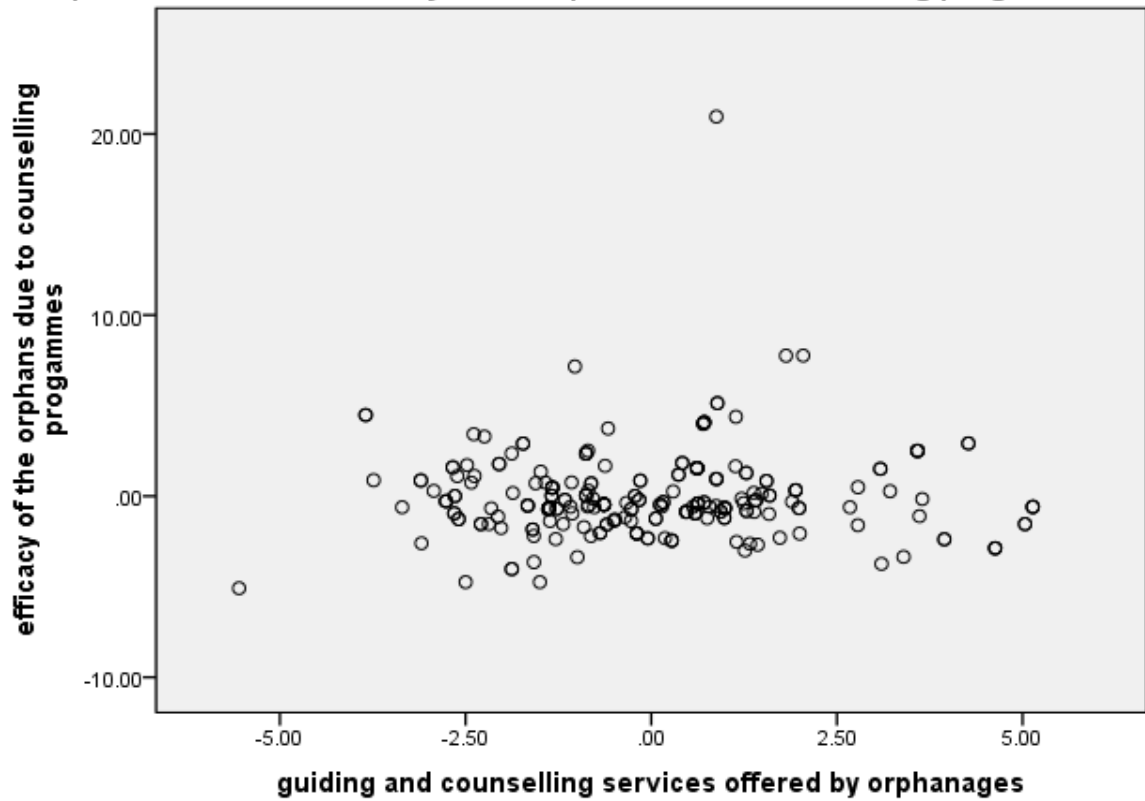
### Partial Regression Plot

Dependent Variable: efficacy of the orphans due to counselling programmes



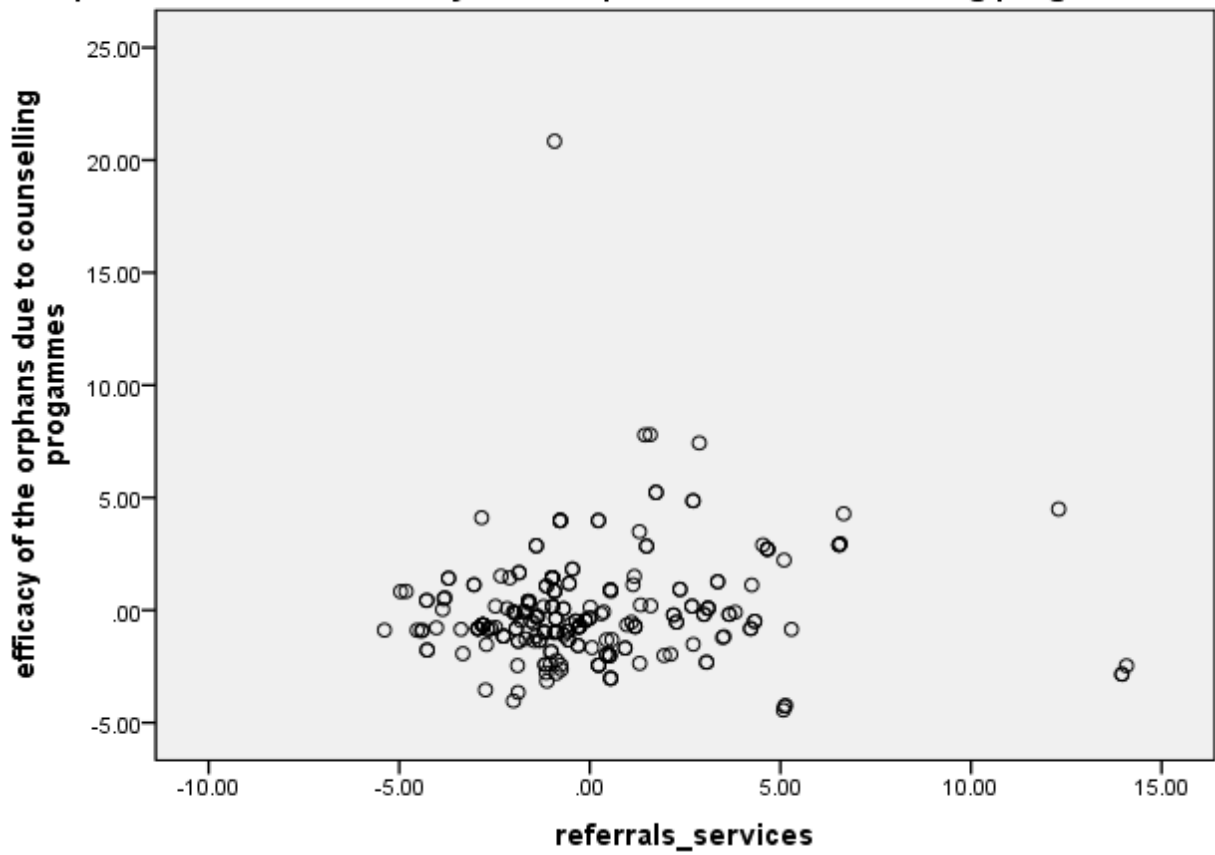
### Partial Regression Plot

Dependent Variable: efficacy of the orphans due to counselling programmes



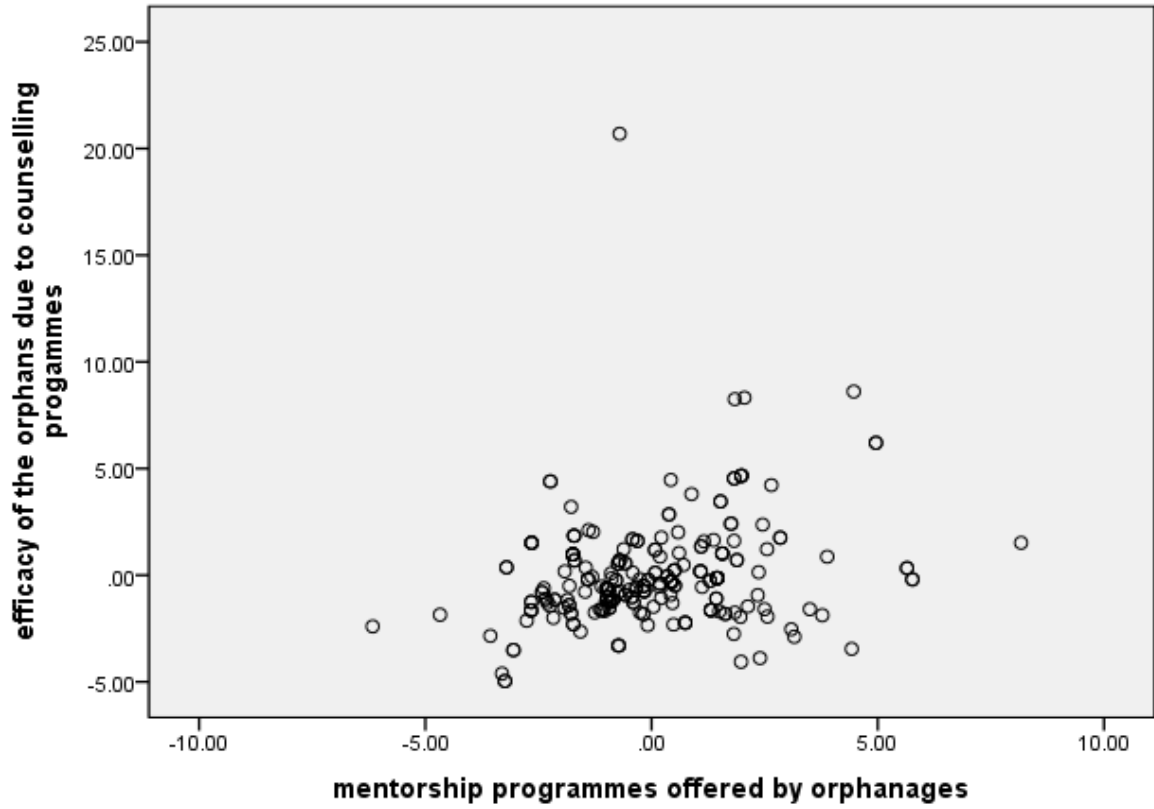
### Partial Regression Plot

Dependent Variable: efficacy of the orphans due to counselling programmes



### Partial Regression Plot

Dependent Variable: efficacy of the orphans due to counselling programmes



## Appendix VI: University Authorization Letter

**KABARAK**

Private Bag - 20157  
KABARAK, KENYA  
<http://kabarak.ac.ke/institute-postgraduate-studies/>



**UNIVERSITY**

Tel: 0773 265 999  
E-mail: [directorpostgraduate@kabarak.ac.ke](mailto:directorpostgraduate@kabarak.ac.ke)

### BOARD OF POSTGRADUATE STUDIES

16<sup>th</sup> April, 2019

The Director General  
National Commission for Science, Technology & Innovation (NACOSTI)  
P.O. Box 30623 – 00100  
NAIROBI

Dear Sir/Madam,

RE: BENSON MURUMBA NASONGO- REG. NO: GDE/M/1095/09/11


The above named is a Doctor of Philosophy student at Kabarak University in the School of Education. He is carrying out research entitled "**Influence of Guidance and Counselling Services on Self Efficacy of Orphaned children Living in Orphanages in Bungoma County, Kenya**". He has defended his proposal and has been authorized to proceed with field research.

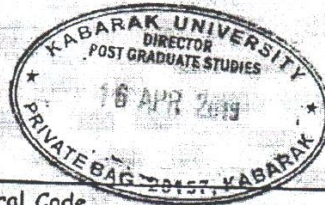
The information obtained in the course of this research will be used for academic purposes only and will be treated with utmost confidentiality.

Please provide him with a research permit to enable him to undertake his research.

Thank you.

Yours faithfully,

  
Dr. Betty Tikoko  
DIRECTOR, POSTGRADUATE STUDIES



**Kabarak University Moral Code**

*As members of Kabarak University family, we purpose at all times and in all places, to set apart in one's heart, Jesus as Lord. (1 Peter 3:15)*





## Appendix VII: NACOSTI Research Authorization Letter



### NATIONAL COMMISSION FOR SCIENCE, TECHNOLOGY AND INNOVATION

Telephone: +254-20-2213471,  
2241349,3310571,2219420  
Fax: +254-20-318245,318249  
Email: dg@nacosti.go.ke  
Website : www.nacosti.go.ke  
When replying please quote

NACOSTI, Upper Kabete  
Off Waiyaki Way  
P.O. Box 30623-00100  
NAIROBI-KENYA

Ref. No. **NACOSTI/P/19/48751/29921**

Date: **25<sup>th</sup> April, 2019**

Nasongo Benson Murumba  
Kabarak University  
Private Bag - 20157  
**KABARAK.**

#### RE: RESEARCH AUTHORIZATION

Following your application for authority to carry out research on "*Influence of guidance and counseling services on the self-efficacy of orphaned children living in orphanages in Bungoma County, Kenya*" I am pleased to inform you that you have been authorized to undertake research in **Bungoma and Trans Nzoia Counties** for the period ending **25<sup>th</sup> April, 2020**.

You are advised to report to the **County Commissioner and the County Director of Education, Bungoma and Trans Nzoia Counties** before embarking on the research project.

Kindly note that, as an applicant who has been licensed under the Science, Technology and Innovation Act, 2013 to conduct research in Kenya, you shall deposit a **copy** of the final research report to the Commission within **one year** of completion. The soft copy of the same should be submitted through the Online Research Information System.

  
**GODFREY P. KALERWA MSc., MBA, MKIM**  
**FOR: DIRECTOR-GENERAL/CEO**

Copy to:

The County Commissioner  
Bungoma County.

*National Commission for Science, Technology and Innovation is ISO9001:2008 Certified*



## Appendix VIII: NACOSTI Research Permit


**THIS IS TO CERTIFY THAT:**

**MR. NASONGO BENSON MURUMBA**  
**of KABARAK UNIVERSITY, 116-30218**  
**Tongaren, has been permitted to**  
**conduct research in Bungoma**  
**Transzoia Counties**  
**on the topic: INFLUENCE OF GUIDANCE**  
**AND COUNSELING SERVICES ON THE**  
**SELF-EFFICACY OF ORPHANED**  
**CHILDREN LIVING IN ORPHANAGES IN**  
**BUNGOMA COUNTY, KENYA.**

**for the period ending:**  
**25th April, 2020**

**Applicant's Signature**

**Permit No : NACOSTI/P/19/48751/29921**  
**Date Of Issue : 25th April, 2019**  
**Fee Received :Ksh 2000**

  
**Director General**  
**National Commission for Science,**  
**Technology & Innovation**


**THE SCIENCE, TECHNOLOGY AND INNOVATION ACT, 2013**

**The Grant of Research Licenses is guided by the Science, Technology and Innovation (Research Licensing) Regulations, 2014.**

**CONDITIONS**

- 1. The License is valid for the proposed research, location and specified period.**
- 2. The License and any rights thereunder are non-transferable.**
- 3. The Licensee shall inform the County Governor before commencement of the research.**
- 4. Excavation, filming and collection of specimens are subject to further necessary clearance from relevant Government Agencies.**
- 5. The License does not give authority to transfer research materials.**
- 6. NACOSTI may monitor and evaluate the licensed research project.**
- 7. The Licensee shall submit one hard copy and upload a soft copy of their final report within one year of completion of the research.**
- 8. NACOSTI reserves the right to modify the conditions of the License including cancellation without prior notice.**

**National Commission for Science, Technology and Innovation**  
**P.O. Box 30623 - 00100, Nairobi, Kenya**  
**TEL: 020 400 7000, 0713 788787, 0735 404245**  
**Email: dg@nacosti.go.ke, registry@nacosti.go.ke**  
**Website: www.nacosti.go.ke**

  
**REPUBLIC OF KENYA**  
**National Commission for Science,**  
**Technology and Innovation**  
**Serial No.A 24264**  
**CONDITIONS: see back page**

## Appendix IX: Trans-Nzoia County Commission Authorization Letter



### THE PRESIDENCY

Telephone: 054 – 30020  
Fax No: 054 – 30030

MINISTRY OF INTERIOR  
AND  
COORDINATION OF  
NATIONAL GOVERNMENT

COUNTY COMMISSIONER'S OFFICE  
TRANS NZOIA COUNTY  
P.O BOX 11 - 30200  
KITALE

E-mail: [cctranszoiacounty@yahoo.com](mailto:cctranszoiacounty@yahoo.com)

When replying please quote

TNZC/CONF/ED.12/1/VOL.III /111

8<sup>th</sup> May, 2019

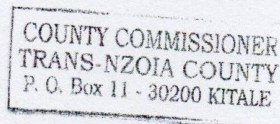
#### TO WHOM IT MAY CONCERN

#### RESEARCH AUTHORIZATION

This is to inform you that Nasongo Benson Murumba of **Kabarak University** has been authorized by National Commission for Science, Technology and Innovation to carry out research on “**Influence of guidance and counseling services on the self-efficacy of orphaned children living in orphanages**” in Trans Nzoia County for the period ending 25<sup>th</sup> April, 2020.

Kindly accord him the necessary assistance that he may require.

**BEATRICE BIKEYO**  
**FOR: COUNTY COMMISSIONER**  
**TRANS NZOIA COUNTY**





## Appendix X: Trans-Nzoia County Director of Education Authorization Letter



**REPUBLIC OF KENYA**  
**Ministry of Education**  
**State Department of Early Learning and Basic Education**

**Telegrams:** .....  
**Telephone:** Kitale 054-31653 - 30200  
**Fax:** 054-31109  
**Email:** transnzoiacde@gmail.com  
**When replying please quote:**

**County Director of Education**  
**Trans Nzoia**  
**P.O. Box 2024 - 30200**  
**KITALE.**

**Date:** 16<sup>th</sup> May, 2019

**Ref. No.** TNZ/CNT/CDE/R.GEN/1/VOL.II/29

**TO WHOM IT MAY CONCERN**

**RE: RESEARCH AUTHORIZATION – BENSON MURUMBA NASONGO**

This office acknowledges receipt of a letter on the above subject Ref: NACOSTI/P/19/48751/29921 dated 25<sup>th</sup> April, 2019

**Benson Murumba Nasongo** a student at Kabarak University is authorized to carry out research on “**Influence of guidance and counseling services on the self-efficacy of orphaned children living in orphanages in Trans-Nzoia County Kenya**” for a period ending 25<sup>th</sup> April, 2020

The purpose of the letter is to request you to accord him the necessary assistance.

A handwritten signature in black ink, appearing to read 'S. W. Maina'.

**COUNTY DIRECTOR OF EDUCATION**  
**TRANS - NZOIA COUNTY**  
**P. O. Box 2024 - 30200,**  
**KITALE.**

**DR. S. W. MAINA (PhD)**  
**COUNTY DIRECTOR OF EDUCATION**  
**TRANS-NZOIA COUNTY.**

**Appendix XI: Bungoma County Director of Education Authorization Letter**



REPUBLIC OF KENYA

MINISTRY OF EDUCATION, SCIENCE AND TECHNOLOGY  
State Department of Education – Bungoma County

When Replying please quote  
e-mail: [bungomacde@gmail.com](mailto:bungomacde@gmail.com)

County Director of Education  
P.O. Box 1620-50200  
BUNGOMA

Ref No: BCE/DE/19/VOL.III/154

Date: 2<sup>nd</sup> May, 2019

TO WHOM IT MAY CONCERN

**RE: AUTHORITY TO CARRY OUT RESEARCH – NASONGO BENSON MURUMBA  
NACOSTI/P/19/48751/29921**

The bearer of this letter Nasongo Benson Murumba of Kabarak University has been authorized to carry out research on *"Influence of guidance and counseling services on the self-efficacy of orphaned children living in orphanages in Bungoma County"* for a period ending 25<sup>th</sup> April, 2020.

Kindly accord him the necessary assistance

A handwritten signature in black ink, appearing to read 'Jemimah E. Maina'.

JEMIMAH E. MAINA  
For: COUNTY DIRECTOR OF EDUCATION  
BUNGOMA COUNTY