

**THE IMPACT OF GUIDANCE AND COUNSELLING ON ACADEMIC  
PERFROMANCE OF MENTALLY CHALLENGED CHILDREN  
IN NYERI MUNISPALITY IN NYERI DISTRICT KENYA**

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BED/20183/72/DF**

**A RESEARCH REPORT SUBMITTED TO THE INSTITUTE OF OPEN AND  
DISTANCE LEARNING IN PARTIAL FULFILLMENT OF THE  
REQUIREMENT FOR THE AWARD OF BACHELOR OF  
EDUCATION IN GUIDANCE AND COUNSELLING  
OF KAMPALA INTERNATIONAL  
UNIVERSITY**

**DECEMBER, 2009**

## DECLARATION

I, declare that the material in this book has been done entirely by my effort and has not been presented elsewhere for any academic award.

Signed

*G. Kabera*

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DATE *4/12/09*

## APPROVAL

This research report is submitted for examination with my approval as a University Supervisor.

Signed

A handwritten signature in blue ink, appearing to read 'Abeka Silvan', is written over a horizontal dotted line.

**Mr. ABEKA SILVANCE**

DATE: 17/12/2009

## DEDICATION

This work is dedicated to my beloved wife Elizabeth Wangui Gachuri and my twin sons Kabera and Macharia for their patience and understanding during the period of my study at Kampala international university.

## ACKNOWLEDGMENT

First of all I give thanks to the almighty God for his mercy and grace granted to me during this time of my degree course and through this research project

I would like to thank my supervisor Mr. Abeka Silvance for being there for me whenever I needed him and also offering her professional advice where necessary.

I would like also to thank my friends for supporting me in regards to my research.

Am also grateful to my parents Mr. Kabera and Pastor Edith Kabera, my brothers and sisters, my in laws, both my colleagues staff members and staff of Kampala International University for mounting all the directives, procedures and methods of carrying out this research project.

I would also like to thank the respondents who returned the questionnaires and those who were cooperative to me.

May God bless you all.

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## **ABSTRACT**

The purpose of the study was to investigate the Influence of Guidance and Counseling on Academic Performance of Mentally Challenged Children in Nyeri munispality in Nyeri District, Kenya. The specific objectives of the study were to; identify the causes of mental retardation Children in Nyeri munispality in Nyeri District Kenya, , Identify the methods of counseling that are effective on mentally retarded Children and Investigate the impact of guidance and counseling on academic performance of learners with mental retardation Children. The methods used for data collection were questionnaires to the teachers, interviews with the parents and focus group discussions with the pupils. The study revealed by 60% that learners with mental retardation sought guidance and counseling services. However the respondents complained that most schools do not have qualified counselors to handle mentally retarded learners. The most common mentioned cause of mental retardation was hereditary reasons which were mentioned by 90% of the respondents. Group counseling was mentioned by 84%, 76% mentioned individual counseling, 72% mentioned motivation, 64% mentioned parent and child counseling and 56% mentioned behavior counseling. The study also revealed by 52% of the respondents that guidance and counseling has improved the academic performance of mentally retarded. The study recommended that; Counselors who specifically look at cases of mentally retarded learners should be trained and made available in schools to help mentally retarded children. The Ministry of Education to beef up more aggressive awareness campaigns among various stakeholders concerning the negative attitudes towards the mentally retarded. The Ministry to empower all the teachers in the country with appropriate professional skills on how to cater for the mentally retarded learners.

## CHAPTER ONE

### 1.0 INTRODUCTION

#### 1.1 Background of the Study

The history of school counseling formally started at the turn of the twentieth century, although a case can be made for tracing the foundations of counseling and guidance principles to ancient Greece and Rome with the philosophical teachings of Plato and Aristotle. The factors leading to the development of guidance and counseling in the United States began in the 1890s with the social reform movement. The difficulties of people living in Eluhobe slums and the widespread use of child labor outraged many. One of the consequences was the compulsory education movement and shortly thereafter the vocational guidance movement, which, in its early days, was concerned with guiding people into the workforce to become productive members of society. Korinek, L. & Prillaman, D. (1992).

Although there has been an increase in research and professional interest in the area of mental retardation in general, there has been little progress in the area of counseling services for the mentally retarded. Much of this lag, particularly in regard to applied services, may be attributed to professional hesitancy to explore the realm of counseling and psychotherapy for the mentally retarded. Available studies do not thoroughly investigate all ramifications of counseling the mentally retarded, and the key point of the effectiveness of counseling and psychotherapy with mentally retarded persons remains undetermined (Sarason and Gladwin, 1958). Similarly, certain sources that indicated positive results with mental retardates (e.g., Thome, 1948; Stacey and DeMartino, 1957) are frequently overlooked. Recently, Woody and Billy (in press) conducted a survey of the doctoral-level Fellows in the Psychology Section of the American Association on mental Deficiency.

According to author Wolf Wolfensberger, mentally retarded people have been viewed variously as "less than human," "a burden upon society," "a menace to society," "sick/medically ill," "objects of pity," and "eternal children/holy innocents" throughout the long course of Western history. Some of these perceptions have lead to direct persecution of mentally retarded

individuals; others have lead to what might be charitably called "benign neglect." Even though some of these enforced social roles have resulted in better treatment for mentally retarded individuals than others, none of them has allowed for the possibility that mentally retarded individuals are, in their own ways, capable of learning, achieving, and becoming productive members of society. Such perceptions interfere with the counseling services that would have been given to them. It is upon this background that the study was undertaken.

## **1.2 Statement of the Problem**

In the last few years there has been an increase in mental challenges in Kenya. Actually a large section of new patients with disabilities are mentally challenged. Mental Retardation however is related to childhood development. In developing countries where formal tests are neither developed nor widespread used to access intelligence in Nairobi. Mental retardation can be identified by a lack of age-appropriate skills in learning and in caring for themselves UNESCO (2005). The plight of the mentally retarded therefore remains unnoticed which means that counseling services do not serve them and hence need for the study.

## **1.3. Objectives of the Study**

**General:** This study set to investigate the Influence of Guidance and Counseling on Academic Performance of Mentally Challenged Children in Nyeri munispality in Nyeri District Kenya

### **1.2.1 Specific objectives**

This study sought to:

1. Identify the causes of mental retardation Children in Nyeri munispality in Nyeri District Kenya
2. Identify the methods of counseling that are effective on mentally retarded Children in Nyeri munispality in Nyeri District- Kenya
3. Investigate the impact of guidance and counseling on academic performance of learners with mental retardation Children in Nyeri munispality in Nyeri District, Kenya

#### **1.4 Research questions**

1. What methods of counseling are effective on mentally retarded Children in Nyeri munispality in Nyeri District- Kenya?
2. What are the causes of mental retardation Children in Nyeri munispality in Nyeri District Kenya?
3. What is the impact of guidance and counseling on academic performance of learners with mental retardation Children in Nyeri munispality in Nyeri District Kenya?

#### **1.5 Significance of the Study**

The study will benefit the following disciplines:

The government will be able to provide school counselors that are specialized in the area of disability so that they know how to handle the mentally retarded.

The research will help those who handle the mentally challenged children to improve their academic performance. Thus the researcher enlightens the readers to make use of guidance and counseling in improving the academic performance of those children.

Parents of mentally retarded children will be encouraged to take up guidance and counseling along with the children so that they are able to handle the situation.

Few researchers have ventured in the area of guidance and counseling for the mentally challenged and hence it will help add knowledge on the existing data.

#### **1.6. Scope of the Study**

The study was carried in Nyeri munispality in Nyeri District Kenya. Nyeri is an administrative district in the Central Province of Kenya. Its capital town is Nyeri The district has a population of 278,196. The study investigated the impact of guidance and counseling on the academic performance of mentally retarded in regard to, methods of counseling and the causes of mental

retardation. The respondents involved teachers, parents and pupils both mentally retarded and normal. The study was conducted from May 2009 and August 2009.

## CHAPTER TWO

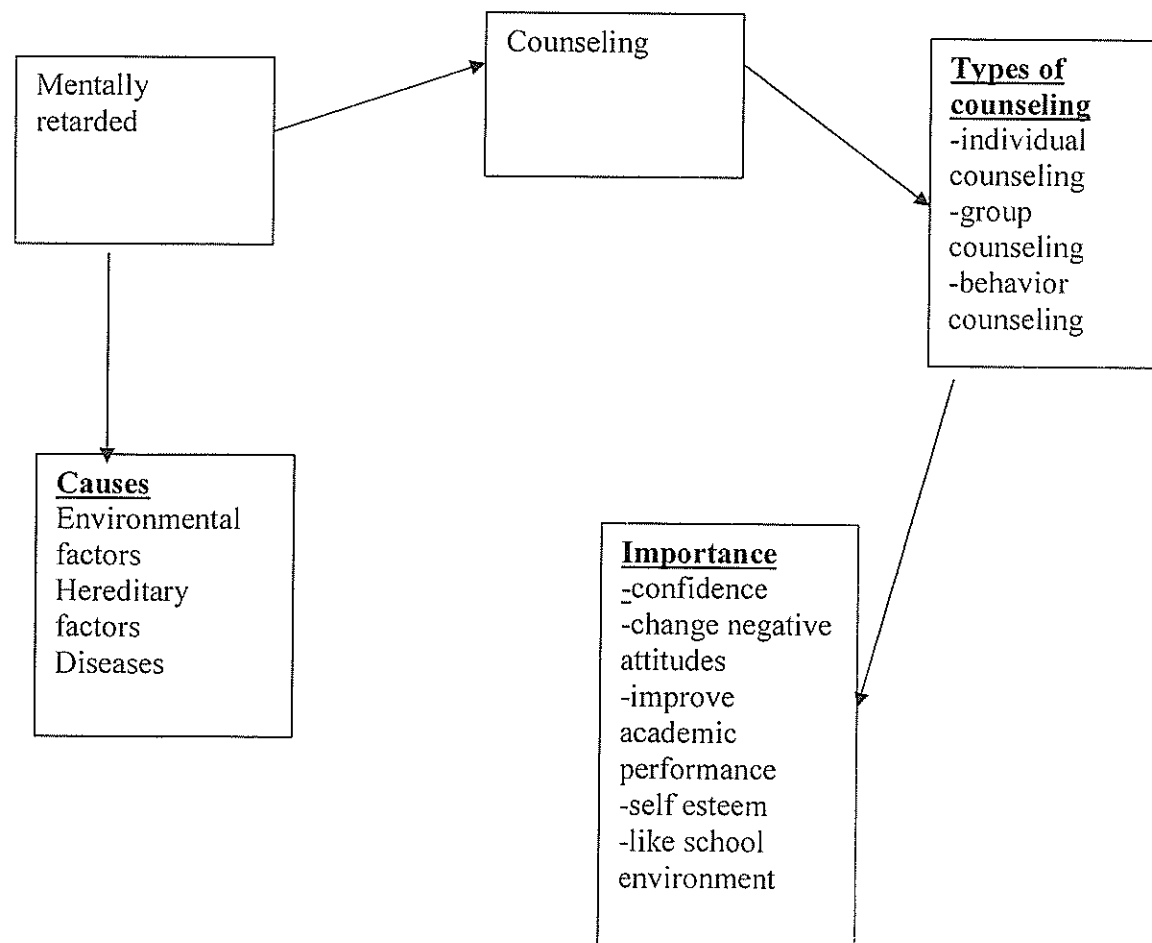
### LITERATURE REVIEW

#### 2.0 Introduction

This chapter discusses the literature by accredited researchers related to guidance and counseling and mental retardation.

#### 2.1. Conceptual frame work

##### Impact of guidance and counseling on academic performance of mentally retarded



The diagram shows the causes of mental retardation, the types of counseling and their importance on mentally retarded learners.

## **2.2. Causes of mental retardation**

Hundreds of specific causes of mental retardation have been identified. Many of these are multiple congenital anomaly/mental retardation syndromes. These include any condition characterized by mental retardation as well as multiple birth defects. However, in nearly a quarter of all cases, the cause of mental retardation is not known.

McDermott, 1994) indicates that a majority of incidences of mental retardation are attributed to environmental factors, environmental factors need to be viewed as interacting with psychosocial and genetic or biological factors (Office of Special education Programs, 2000 & Schettler, Stein, Reich, Valenti, & Wallinga, 2000). Hence, such factors as lack of early exposure to intellectually stimulating experiences, inadequate health care, adverse living conditions, and nutritional problems when, associated with mental retardation can not be said to cause the condition but individuals who are exposed to these factors are at a greater risk for demonstrating low cognitive abilities.

Prenatal factors include disorders associated with chromosomes, metabolic disorders, and infections of the mother during the period of pregnancy. An initial infection of cytomegalovirus (CMV), for example, can be potentially very dangerous to the unborn child posing risks for brain damage, hearing impairments, and mental retardation. Toxoplasmosis, (Centers for Disease Control & Prevention, 2003), another maternal infection, may be contracted through consumption of undercooked or raw meat and eggs or exposure to cat feces. Initial infection during pregnancy puts the unborn baby at risk for very serious complications including blindness, jaundice, cerebral palsy, enlarged liver and spleen, microcephaly, and mental retardation. Sexually transmitted diseases such as gonorrhea, syphilis, and the acquired immune deficiency syndrome (AIDS) are other causes of mental retardation and other problems.

These viruses are able to cross the placenta and attack the fetus's Central nervous system. Along with attacking the Central nervous system of the developing fetus, the AIDS virus also damages



the fetus's immune system leaving it at risk for opportunistic infections. Research indicates that pediatric AIDS is both the fastest growing infectious cause of mental retardation (Baumeister, Kupstas, & Klindworth, 1990) and the single most preventable type of infectious mental retardation (Cohen, 1991).

German Measles (Rubella) is another infection that has been linked to mental retardation and other birth complications such as low birth weight, heart defects, and vision and hearing problems especially if infection occurs during the first trimester of pregnancy. The Rhesus factor, a disease caused by blood group incompatibility between a mother and her unborn child (Beirne-Smith, Ittenbach, & Patton, 1998 & March of Dimes, 1997d), often leads to serious complications for the unborn fetus. These include mental retardation, cerebral palsy, and epilepsy.

Mental retardation may also result from unsafe behaviors of mothers during pregnancy. Consumption of alcohol before or during pregnancy can lead to severe effects on the baby, a condition referred to as Fetal alcohol syndrome (Bauer, 1999 & Jones, Smith, Ulleland, & Streissguth, 1973). Infants with fetal alcohol syndrome (FAS), now a leading cause of mental retardation in the United States could have a damaged Central nervous system and brain damage. These infants have mild to moderate mental retardation, attention deficits, behavior problems, physical deformities, heart defects, low birth weight, and motor dysfunctions. Fetal alcohol effects (FAE) are milder forms of the effects of a mother's alcohol consumption during pregnancy on the infant.

Among the perinatal factors associated with mental retardation are low birth weight, prematurity, and other neonatal complications. Low birth weight (less than 5 pounds, 8 ounces) and premature birth (birth prior to 37 weeks of gestation) are two gestational disorders associated with mild to severe mental retardation. Other perinatal events include neonatal complications neonatal complications which can result from prolonged and difficult deliveries or damaged umbilical cord. These events can result in a fetus being completely or partially cut off from oxygen. Indeed, anoxia has been implicated in as many as one out of every five births that result in mental retardation (McLaren & Bryson, 1987).

Mental retardation may also result from factors occurring postnatally. These include infections, such as meningitis and encephalitis, intoxicants, environmental factors. Lead poisoning (Centers for Disease Control & Prevention, 2003), which results from ingesting lead, can affect the Central nervous system and cause seizures and mental retardation. Meningitis is a viral infection that causes damage to the meninges or tissues covering the brain. Meningitis can result from typical childhood complications such as mumps and measles.

This infection causes seizures, damages the brain, and has a possibility of resulting in mental retardation. Encephalitis, on the other hand, is an inflammation of the brain tissue and may also result from complications of infections associated with childhood. This infection can cause brain damage and has the possibility of leading to varying degrees of mental retardation. (Centers for Disease Control & Prevention, 2003)

According to (Dykens, Hodapp & Finucane, 2000) Mental Retardation is caused by genetic factors and brain damage. Various other cultural factors can cause mental retardation in developing countries. Mental Retardation in Africa is said to be also caused by bad spirits which may have been communicated or transferred by other person due to one reason or another. Your child can be affected by some cultural practice that you did or some person who did something to you and it affected your child.

## **2.3. Effective methods of guidance and counseling on the mentally retarded.**

### **2.3.1. Group counseling**

Group counseling is a form of therapy, which posits that people benefit from shared experiences. Usually group counseling is focused on a particular issue, for example obsessive-compulsive disorder or anger management. While a therapist usually manages group counseling, contributions from other members in the group are considered valuable since all in the group share similar issues (Matson, Johnny L., and James A. Mulick, 1991)

One of the main principals behind group counseling is the idea that dealing with specific issues may cause isolation, and a feeling that one is alone in facing one's problems. Group counseling attempts to counteract this isolation by assembling people with similar issues to enforce that

difficulties are not singular to one person. Additionally, knowing other people with similar troubles can be comforting to each individual, who may not have access in their own family and friends to people with the same problem.

Group counseling may be highly organized, with people doing specific activities together and then sharing the results. Alternately, it may be more freeform, where people share current issues related to the group's purpose. One person's verbal contributions to a group might be discussed, validated, and provoke problem solving by other group members in a session. It might also be an entry into a discussion regarding a certain aspect of an illness or condition that is then primarily led by the therapist.

Not all group counseling efforts are completely successful. Occasionally, group therapy suffers if a group is too large or small. Group therapy may also become problematic when one person appears to monopolize the group. Usually group counseling works best when an experienced counselor can redirect a person who is sharing too much, and allow equal time for people to share their ideas, problems or opinions. (Matson, Johnny L., and James A. Mulick, 1991)

### **2.3.2. Behavior therapy**

In contrast to the psychoanalytic method of Sigmund Freud (1856-1939), which focuses on unconscious mental processes and their roots in the past, behavior therapy focuses on observable behavior and its modification in the present

As an initial step in many types of behavioral therapy, the client monitors his or her own behavior carefully, often keeping a written record. The client and therapist establish a set of specific goals that will result in gradual behavior change. The therapist's role is often similar to that of a coach or teacher who gives the client "homework assignments" and provides advice and encouragement. Therapists continuously monitor and evaluate the course of the treatment itself, making any necessary adjustments to increase its effectiveness (Thorne, F. C. 1948)

A number of specific techniques are commonly used in behavioral therapy. Human behavior is routinely motivated and rewarded by positive reinforcement. A more specialized version of this phenomenon, called systematic positive reinforcement, is used by behavior-oriented therapists.

Rules are established that specify particular behaviors that are to be reinforced, and a reward system is set up. With children, this sometimes takes the form of tokens that may be accumulated and later exchanged for certain privileges. Just as providing reinforcement strengthens behaviors, withholding it weakens them. Eradicating undesirable behavior by deliberately withholding reinforcement is another popular treatment method called **extinction**. For example, a child who habitually shouts to attract attention may be ignored unless he or she speaks in a conversational tone Lapan, R.T., Gysbers, N.C., & Sun, Y. (1997).

#### **2.4. Impact of guidance and counseling on the academic performance of mentally retarded.**

Counseling helps alleviate the stigmas and misconceptions associated with the slow learning level of mental functioning Woody, R. H. (1966). This is done by the following actions : providing direct guidance and counseling services to the slow learning students in order that they may gain understanding and positive feelings about their capabilities; helping all students in the school acquire a realistic understanding of mental sub normality; aiding parents to accept students with limited intelligence and fostering parental guidance of their children's attitudes toward the students with limited intelligence; serving as a consultant on mental sub normality to other educators, e.g., classroom teachers and school administrators, to create feelings of responsibility to these students, e.g., gaining support for the establishment of special education services; and striving for improved community feelings of responsibility for and acceptance of the mentally retarded Woody, R. H. (1966).The researcher agrees with the above because during the study it was pointed out that counseling and guidance makes mentally retarded learners feel confident and therefore behave like normal people which helps change the negative attitudes towards them.

Guidance is the assistance that all students need in order to make meaningful decisions about their futures. Guidance activities include individual advisement, small-group activities, and classroom lessons. Guidance should not be confused with counseling. Counseling is the assistance that some students need in order to overcome problems that interfere with learning Borders, L.D. & Drury, S.M. (1992).the researcher agrees to this because during the study it was

pointed out that most retarded learners do not think they have a future and therefore do not make decisions about their future. However with proper guidance and counseling they are capable of making choices that will help them in future.

Counseling decreases classroom distress. Counseling services support teachers in the classroom and enable teachers to provide quality instruction designed to assist students in achieving high standards. Students in schools that provide counseling services indicated that their classes were less likely to be interrupted by other students and that their peers behaved better in school. Borders, L.D. & Drury, S.M. (1992).

Guidance and counseling help all students to grow with self-understanding, developing interpersonal, problem solving, and decision-making skills and occupational awareness. This is accomplished through classroom guidance, large and small group sessions, and individual counseling Lapan, R.T., Gysbers, N.C., & Sun, Y. (1997). The program is designed to be sequential and preventive in nature. It provides assistance and support to students in developing and implementing competencies for academic and career success. The program also provides mechanisms for assisting individuals with resolution of problems which inhibit healthy development and academic achievement Borders, L.D. & Drury, S.M. (1992).

Research shows that school counseling interventions have a substantial impact on students' educational and personal development. Individual and small-group counseling, classroom guidance, and consultation activities seem to contribute directly to students' success in the classroom and beyond. School counselors should spend the majority of their time performing these interventions. Coordination activities should be confined to those that improve the program's efficiency and accountability Mullis, F. & Otwell, P. (1997).

School counseling programs have significant influence on discipline problems. Baker and Baker, S. B., & Gerler, E. R. (2001), reported that students who participated in a school counseling program had significantly less inappropriate behaviors and more positive attitudes toward school than those students who did not participate in the program. Another study reported that group

counseling provided by school counselor's significantly decreased participants' aggressive and hostile behaviors.

A counselor or therapist can also help retarded children cope with the low self-esteem that often results from the realization that they are different from other children, including siblings. Counseling can also be valuable for the family of a retarded child to help parents cope with painful feelings about the child's condition, and with the extra time and patience needed for the care and education of a special-needs child. Siblings may need to talk about the pressures they face, such as accepting the extra time and attention their parents must devote to a retarded brother or sister. Sometimes parents have trouble bonding with an infant who is retarded and need professional help and reassurance to establish a close and loving relationship Bowen, M. L. (1998).

## **CHAPTER THREE**

### **METHODOLOGY**

#### **3.0. Introduction**

This chapter details the methods the researcher used to collect data

#### **3.1 Research Design**

The research is presented in both qualitative and quantitative design. Qualitative design helped the researcher get a deeper meaning of the study while quantitative helped in analyzing the numbers that were involved in the study. A descriptive survey design was used and this helped the researcher get a sample of variables than the whole population.

#### **3.2 Environment**

The research was carried in Nyeri municipality in Nyeri District Kenya. The case study was selected because that is where the researcher lives and therefore it was easy to get information from the respondents. The costs of research were also reduced that is the researcher needed to take few trips. Besides that the area has children and people who are mentally retarded and in need of counseling services.

#### **3.3 Respondents and sample selection**

The study included the teachers and pupils both mentally retarded and normal and parents. The teachers were fit for the study because they spend most of their time with the pupils and therefore were able to tell the impact of guidance and counseling on the academic performance of mentally retarded. The teachers were selected randomly while the parents and pupils were selected purposively. 50 teachers, 10 pupils and 8 parents participated in the study.

#### **3.4 Instruments of Data Collection**

The instruments of the study included; questionnaires with the teachers focus group discussions with the pupils and interviews with the parents. Observation method was also used.

### 3.5. Reliability of the instruments

Questionnaires helped the researcher get a lot of information from the teachers in a short time since they were many they also possessed an element of privacy and hence respondents were free to answer whatever they felt, focus group discussions helped the researcher get relevant information from the pupils especially the mentally retarded and also use the observation method as the discussions went on. Interviews also helped get first hand information from the parents. They also helped the researcher rephrase the questions where the respondents did not understand and hence was able to get relevant data.

### 3.6. Data Collection Procedures

A letter of introduction was picked from the University and this helped in a way that the interviewees gave the researcher information. The letter was introduced to the headmaster before questionnaires were distributed to the teachers and focus group discussions with the pupils. The local leaders were also shown a letter before interviews were carried with the parents. The researcher personally distributed the questionnaires to teachers.

### 3.7. Statistical Treatments of Data

The frequency and percentage were used to determine the number of sample respondents that participated in the study and the number that participated positively in the research.

Formula;

$$\text{Percentage (\%)} = \frac{F}{\text{Total number of respondents}} \times 100$$

Where  $F = \frac{\text{number of respondents}}{\text{Observed}}$

Qualitative analysis; Data from semi-structural, observation, and in-depth interviews were standardized hence required categorization. Such data was presented in a descriptive form above which were used to discuss the results of quantitative data.



### **3.7. Limitations o f the Study**

The major limitation was financial as the researcher had to go to different schools and hence transport was required among other costs but the researcher tried to minimize the little she had to fit the budget.

The researcher being an employee did not have enough time to carry the research but the researcher made a timetable to fit her schedule.

Some respondents were not willing to give out information to the researcher but the researcher tried as much as possible to be tactical in asking questions in order to get relevant information for the study.

## CHAPTER FOUR

### DATA PRESENTATION ANALYSIS AND INTERPRETATION

#### 4.0 Introduction

This chapter is a presentation, interpretation and discussion of the field results. The results are presented in tables and in form of frequency counts and percentages. The results and discussions are centered on the set objectives of the study..

#### 4.1. Profile of the respondents

Table 4. 1: Shows the profile of the respondents.

Respondents	Frequency (fo)	Percentage (%)
<b>Sex</b>		
Male	27	54
Female	23	46
<b>Total</b>	<b>50</b>	<b>100</b>
<b>Age</b>		
19-24 yrs	10	20
25-30 yrs	19	38
31 and above	21	42
<b>Total</b>	<b>50</b>	<b>100</b>
<b>Academic level</b>		
Certificate	10	20
Diploma	25	50
Degree	15	30
<b>Total</b>	<b>50</b>	<b>100</b>

Source: Field data 2009

Sixty (60) questionnaires were distributed to the teachers and 50 were filled and returned this therefore represents 83 % of the total number of questionnaires that were distributed.

The study covered 50 randomly selected teachers of whom (54%) were male and (46%) were female. This shows that the male respondents were many compared to the female respondents

The age category of the respondents were divided in three groups that are 19-24 were 10 which represents (20%), 25-30 yrs were 19(38%) and 31 and above were 21 representing (24%) of the respondents. This implies that most of the respondents were 31 years and above.

The academic level of the respondents was divided in three categories that are certificate, diploma and degree. 10(20%) of the respondents had certificates, 25(50%) had diploma and 15(30%) had degree level. This shows that most of the respondents had degrees.

Focus group discussions were used to extract data from the pupils and interviews were used to extract information from the parents.

#### **4.2. Causes of mental retardation Children**

The first objective of the study was to identify the causes of mental retardation Children. To achieve this, respondents were asked questions related to the topic. Data collected was analyzed under the question: What are the causes of mental retardation Children? The results are presented below;

The respondents gave a number of causes of mental retardation and they are shown in the following table.

**Table 4.2: Causes of mental retardation**

<b>Causes</b>	<b>Frequency( out of 50)</b>	<b>Percentage (100%)</b>
HIV/AIDS	40	80
Malaria	38	76
Measles	20	40
Hereditary	45	90
Parents taking alcohol during	35	70

pregnancy		
Evil spirits	30	60
Environmental factors	15	30

**Source: Field data 2009**

The most common mentioned cause of mental retardation was hereditary reasons which was mentioned by 90% of the respondents, followed by HIV/AIDS which was mentioned by 80%, 76% mentioned malaria 70% mentioned parents taking alcohol during pregnancy, 60% mentioned evil spirits, 40% mentioned measles and 30% mentioned environmental factors.

According to the parents most children have been affected by the HIV/AIDS scourge in a way that children have been orphaned and some are traumatized which leads to mental retardation.

Most of the children in focus group discussions believed that mental retardation is caused by evil spirits.

According to (Dyken, Hodapp & Finucane, 2000) Mental Retardation is caused by genetic factors and brain damage. Various other cultural factors can cause mental retardation in developing countries. Mental Retardation in Africa is said to be also caused by bad spirits which may have been communicated or transferred by other person due to one reason or another. Your child can be affected by some cultural practice that you did or some person who did something to you and it affected your child.

#### **4.3. Methods of counseling that are effective on the mentally retarded learners**

The second objective of the study was to determine the methods of counseling that are effective on the mentally retarded learners. To achieve this, respondents were asked questions related to the topic. Data collected was analyzed under the question: What methods of counseling are effective on mentally retarded Children? The results are presented below;

The respondents gave a number of methods that were effective for counseling mentally retarded and they are shown in the following table.

**Table 4.3: Opinion on the methods used to counsel and guide the mentally retarded.**

Method	Frequency ( out of 50)	Percentage (100%)
Group counseling	42	84
Individual counseling	38	76
Motivation	36	72
Parent and child counseling	32	64
Behavior counseling	28	56

**Source: Field data 2009**

According to the table group counseling was mentioned by 84%, 76% mentioned individual counseling, 72% mentioned motivation, 64% mentioned parent and child counseling and 56% mentioned behavior counseling.

According to Matson, Johnny L., and James A. Mulick, (1991) One of the main principals behind group counseling is the idea that dealing with specific issues may cause isolation, and a feeling that one is alone in facing one's problems. Group counseling attempts to counteract this isolation by assembling people with similar issues to enforce that difficulties are not singular to one person. Additionally, knowing other people with similar troubles can be comforting to each individual, who may not have access in their own family and friends to people with the same problem.

#### **4.4. Impact of Guidance and Counseling on Academic Performance of Mentally Retarded Learners.**

The third objective of the study was to determine the Impact of Guidance and Counseling on Academic Performance of Mentally Retarded Learners. To achieve this, respondents were asked

questions related to the topic. Data collected was analyzed under the question: What is the Impact of Guidance and Counseling on Academic Performance of Mentally Retarded Learners? The results are presented below;

Teachers were asked whether they provide guidance and counseling to the mentally retarded and this was their response

**Table 4.4: Provision of Counseling Services to the Mentally Retarded.**

Response	Frequency	Percentage
Yes	50	100
No	-	-
Total	50	

**Source: Field data 2009**

All the respondents as seen in table 4.2 above agreed that they offered counseling services to the mentally retarded. The above results imply that most schools provide counseling services to the mentally retarded.

However the parents interviewed complained that schools do not differentiate the mentally and the normal learners and therefore they use the same approach and hence does not benefit the mentally retarded.

The pupils in focus group discussions also agreed to this that the approach used for guiding and counseling is the same regardless of the mental status.

Teachers were asked whether learners with mental retardation seek guidance and counseling and this was the response.

**Table 4.5: Opinion on whether learners with mental retardation seek guidance and counseling services.**

learners with mental retardation seek guidance and counseling	Agree	Disagree	Not sure	Total
<b>Frequency (f)</b>	30	15	5	<b>50</b>
<b>Percentage (%)</b>	60	30	10	<b>100</b>

**Source: Field data 2009**

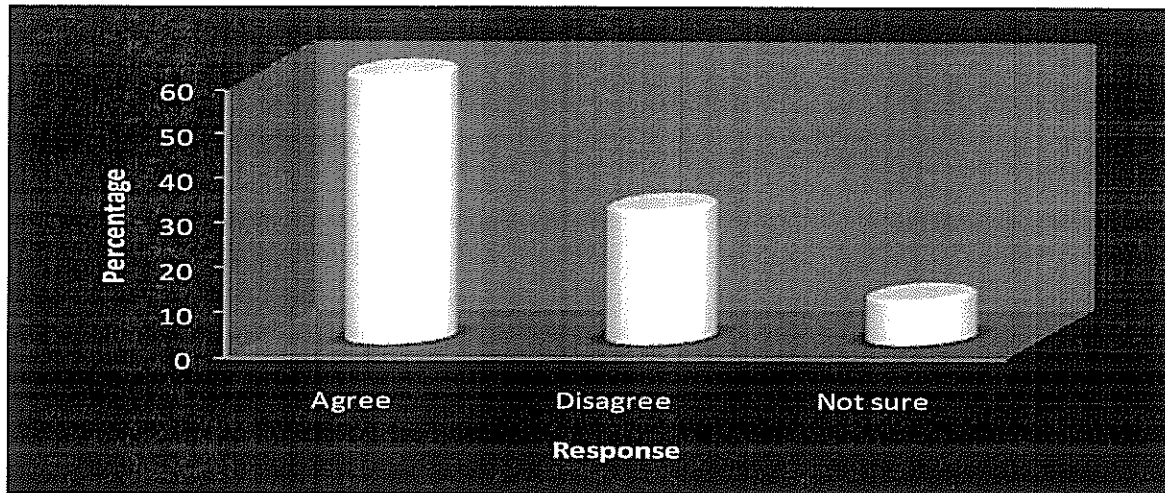
Table 4.3 Shows that 60% of the respondents agreed that learners with mental retardation seek guidance and counseling services 30% disagreed and 10% were not sure. This shows that most of learners with mental retardation seek guidance and counseling services.

The pupils in focus group discussions revealed that sometimes it was not easy to access the counselors in the school. In some schools it was observed that it was the teachers who did the counseling and therefore it was difficult for learners with mental retardation to get them so easily because in most cases they are busy.

The parents pointed out in interviews that most teachers were not qualified to guide and counsel the mentally retarded children and therefore this was a hindrance to the mentally retarded.

The data in table 4.5 was analyzed using a bar chart and figure 1 summarizes the opinion on whether learners with mental retardation seek guidance and counseling services.

**Figure 1: Opinion on whether learners with mental retardation seek guidance and counseling services.**



**Source: Field data 2009**

Teachers were asked the impact guidance and counseling has had on the academic performance of the mentally retarded and this was their response.

**Table 4.6: Impact of guidance and counseling on the academic performance of the mentally retarded**

What impact has guidance and counseling has had on the academic performance of the mentally retarded	Improved academic performance	Performance has deteriorated	Performance has not changed	Total
<b>Frequency (f)</b>	26	14	10	<b>50</b>
<b>Percentage (%)</b>	52	28	20	<b>100</b>

**Source: Field data 2009**

Table 4.6 illustrates that 52% of the respondents said that guidance and counseling has improved the academic performance of mentally retarded while 28% said it has deteriorated and 20% said



that performance has not changed. According to these results it can be concluded that guidance and counseling helps learners with mental retardation improve their academic performance.

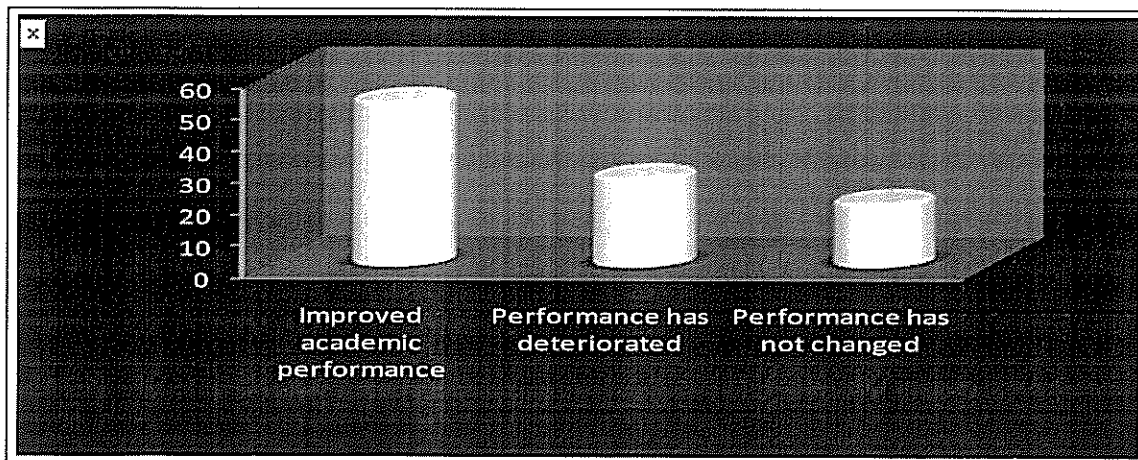
According to the parents mentally retarded children suffer at school due to the stress they go through which interferes with their academic performance and hence through guidance and counseling they can improve their academic performance.

The researcher observed that the mentally retarded learners who had received guidance and counseling were performing better in class than those who had not received any counseling.

Research done by Mullis, F. & Otwell, P. (1997) shows that school counseling interventions have a substantial impact on students' educational and personal development. Individual and small-group counseling, classroom guidance, and consultation activities seem to contribute directly to students' success in the classroom and beyond.

The data in table 4.6 was analyzed using a bar chart and figure 2 summarizes the Impact of guidance and counseling on the academic performance of the mentally retarded

**Figure 2: Impact of guidance and counseling on the academic performance of the mentally retarded**



Source: Field data 2009

Teachers were asked whether guidance and counseling has helped the mentally challenged cope with the school environment and this was their response.

**Table 4.7: Opinion on whether guidance and counseling has helped the mentally challenged cope with the school environment**

Guidance and counseling has helped the mentally challenged cope with the school environment	Agree	Disagree	Not sure	Total
<b>Frequency (f)</b>	30	15	5	<b>50</b>
<b>Percentage (%)</b>	60	30	10	<b>100</b>

**Source: Field data 2009**

According to the table 60% of the respondents agreed that guidance and counseling has helped mentally challenged cope with the school environment while 30% disagreed and 10% were not sure. The results imply that guidance and counseling helps mentally retarded children cope with the school environment.

The parents revealed that the negative attitudes towards the mentally retarded children coupled with their situation makes the school environment hard for them but with proper guidance and counseling they are able to cope with the school environment.

In focus group discussions with the pupils it was revealed that some mentally retarded learners had dropped out of school because they could not cope with the situation. Some of the mentally retarded learners revealed that they were almost dropping out of school but because they received guidance and counseling they were able to remain in school.

Teachers were asked whether guidance and counseling has helped the normal children change their attitudes towards the mentally retarded and this was their response.

**Table 4.8: Opinion on whether guidance and counseling has helped the normal children change their attitudes towards the mentally retarded**

Guidance and counseling has helped the normal children change their attitudes towards the mentally retarded	Agree	Disagree	Not sure	Total
<b>Frequency (f)</b>	25	18	7	<b>50</b>
<b>Percentage (%)</b>	50	36	14	<b>100</b>

**Source: Field data 2009**

The table shows that 50% of the respondents agreed that guidance and counseling has helped the normal children change their attitudes towards the mentally retarded, 36% disagreed and 14% were not sure. This shows that with guidance and counseling the normal learners can change their attitudes towards the mentally retarded children.

The parents revealed that mentally retarded children are called all sorts of names which include dumb, stupid, academic dwarf among others by the normal learners. Such names according to the parents make it difficult for learners with mental disabilities to fit in the school environment. However with children are guided and counseling they understand fully what mental retardation is and hence change their negative attitudes.

The mentally retarded children complained that they are nicknamed many names that make them feel out of place and rejected.

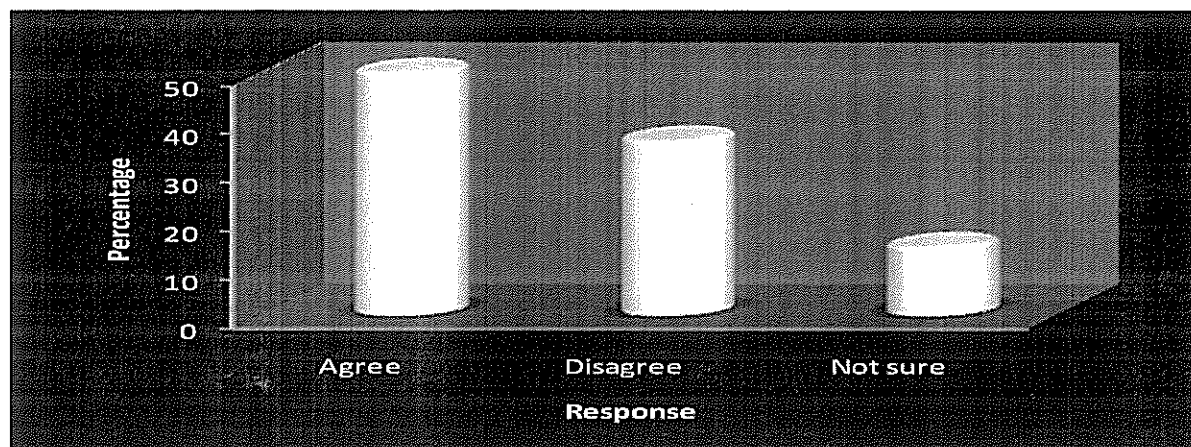
“.....they call all sorts of names and they laugh at me .....”

(Mentally retarded learner Eluhobe primary school)

According to Woody, R. H. (1966) Counseling helps alleviate the stigmas and misconceptions associated with the slow learning level of mental functioning

The data in table 4.8 was analyzed using a bar chart and figure 3 summarizes the Opinion on whether guidance and counseling has helped the normal children change their attitudes towards the mentally retarded

Figure 3: Opinion on whether guidance and counseling has helped the normal children change their attitudes towards the mentally retarded



Source: Field data 2009

Respondents were asked whether guidance and counseling has helped parents of mentally retarded children cope with the situation and this was their response.

**Table 4.9: Opinion on whether guidance and counseling has helped parents of mentally retarded children cope with the situation.**

Guidance and counseling has helped parents of mentally retarded	Agree	Disagree	Not sure	Total

children cope with the situation.				
<b>Frequency (f)</b>	27	13	10	<b>50</b>
<b>Percentage (%)</b>	54	26	20	<b>100</b>

**Source: Field data 2009**

Table 4.9 Shows that 54% of the respondents agreed that guidance and counseling has helped parents of mentally retarded children cope with the situation, 26% disagreed and 20% were not sure. The results imply that guidance and counseling has helped parents of mentally retarded cope with the situation.

The parents interviewed agreed that at first they found the situation very difficult to handle but after they went for counseling and guidance they accepted the situation and have learnt to live with it with no problem.

According to Bowen, M. L. (1998) Counseling can also be valuable for the family of a retarded child to help parents cope with painful feelings about the child's condition, and with the extra time and patience needed for the care and education of a special-needs child. Siblings may need to talk about the pressures they face, such as accepting the extra time and attention their parents must devote to a retarded brother or sister. Sometimes parents have trouble bonding with an infant who is retarded and need professional help and reassurance to establish a close and loving relationship

Respondents were asked whether guidance and counseling has helped the mentally challenged children improve on their discipline and this was their response.

**Table 4.10: Opinion on whether guidance and counseling has helped the mentally challenged children improve on their discipline**

Guidance and counseling has helped the mentally challenged children improve on their discipline	Agree	Disagree	Not sure	Total
<b>Frequency (f)</b>	22	20	8	<b>50</b>
<b>Percentage (%)</b>	44	40	16	<b>100</b>

**Source: Field data 2009**

The table shows that 44% of the respondents agreed that guidance and counseling has helped the mentally challenged children improve on their discipline 40% disagreed and 16% were not sure. This means that learners with mental retardation have improved their discipline through guidance and counseling.

According to the teachers most mentally retarded children have behavioral problems which result in indiscipline. Therefore by guiding and counseling them they improve on their discipline.

The results above are in line with the findings of Baker and Baker, S. B., & Gerler, E. R. (2001) that School counseling programs have significant influence on discipline problems. They reported that students who participated in a school counseling program had significantly less inappropriate behaviors and more positive attitudes toward school than those students who did not participate in the program.

According to Bowen, M. L. (1998) A counselor or therapist can also help retarded children cope with the low self-esteem that often results from the realization that they are different from other children, including siblings.

Respondents were asked whether counseling has helped mentally retarded children gain confidence in themselves and this was their response

**Table 4.11: Opinion on whether counseling has helped mentally retarded children gain confidence in themselves**

Counseling has helped mentally retarded children gain confidence in themselves	Agree	Disagree	Not sure	Total
<b>Frequency (f)</b>	26	14	10	<b>50</b>
<b>Percentage (%)</b>	52	28	20	<b>100</b>

**Source: Field data 2009**

Table 4.11 shows that 52% of the respondents agreed that counseling has helped mentally retarded children gain confidence in themselves 28% disagreed and 20% were not sure. This shows that guidance and counseling has helped learners with mental retardation gain confidence.

The study established that due to the negative attitudes towards them learners with mental retardation feel they are not capable of doing anything worthy and hence are not confident. However by guiding and counseling them they gain the confidence.

## **CHAPTER FIVE**

### **DISCUSSION, CONCLUSION AND RECOMMENDATIONS**

#### **5.0. Over view**

The major purpose of the study was to conduct an investigation on the Influence of Guidance and Counseling on Academic Performance of Mentally Challenged Children in Nyeri munispality in Nyeri District Kenya. This chapter focuses on the discussions of the findings, conclusions and recommendations. Finally the chapter ends with suggestions for further research.

#### **5.1. Discussions**

This section summarizes the findings of the Influence of Guidance and Counseling on Academic Performance of Mentally Challenged Children

##### **5.1.1 Discussion of findings on the causes of mental retardation in Children**

The most common mentioned cause of mental retardation was hereditary reasons which was mentioned by 90% of the respondents, followed by HIV/AIDS which was mentioned by 80%, 76% mentioned malaria 70% mentioned parents taking alcohol during pregnancy, 60% mentioned evil spirits, 40% mentioned measles and 30% mentioned environmental factors.

According to (Dykens, Hodapp & Finucane, 2000) Mental Retardation is caused by genetic factors and brain damage. Various other cultural factors can cause mental retardation in developing countries. Mental Retardation in Africa is said to be also caused by bad spirits which may have been communicated or transferred by other person due to one reason or another. Your child can be affected by some cultural practice that you did or some person who did something to you and it affected your child.



### **5.1.2 Discussion of findings on the methods of counseling that are effective on mentally retarded Children**

Group counseling was mentioned by 84%, 76% mentioned individual counseling, 72% mentioned motivation, 64% mentioned parent and child counseling and 56% mentioned behavior counseling.

According to (Matson, Johnny L., and James A. Mulick, 1991) Group counseling is a form of therapy, which posits that people benefit from shared experiences. Usually group counseling is focused on a particular issue, for example obsessive-compulsive disorder or anger management. While a therapist usually manages group counseling, contributions from other members in the group are considered valuable since all in the group share similar issues

### **5.1.3 Discussion of findings on the impact of guidance and counseling on academic performance of learners with mental retardation Children**

The study revealed by 60% that learners with mental retardation sought guidance and counseling services. However the respondents complained that most schools do not have qualified counselors to handle mentally retarded learners. The study also revealed by 52% of the respondents that guidance and counseling has improved the academic performance of mentally retarded.

The findings above are in agreement with research done by Mullis, F. & Otwell, P. (1997) that school counseling interventions have a substantial impact on students' educational and personal development. Individual and small-group counseling, classroom guidance, and consultation activities seem to contribute directly to students' success in the classroom and beyond.

The study revealed by 50% that guidance and counseling has helped the normal children change their attitudes towards the mentally retarded. This is line with Woody, R. H. (1966) that Counseling helps alleviate the stigmas and misconceptions associated with the slow learning level of mental functioning

The findings of the study reveal by 54% of the respondents that guidance and counseling has helped parents of mentally retarded children cope with the situation According to Bowen, M. L. (1998) Counseling can also be valuable for the family of a retarded child to help parents cope with painful feelings about the child's condition, and with the extra time and patience needed for

the care and education of a special-needs child reassurance to establish a close and loving relationship.

## **5.2. Conclusion.**

The most mentioned cause of mental retardation was hereditary reasons.

The study revealed that group counseling was the most effective method of counseling learners with mental retardation.

According to the study guidance and counseling helps the mentally retarded learners improve on their academic performance.

## **5.3. Recommendations.**

Basing on the findings the following recommendations have been made;

Counselors who specifically look at cases of mentally retarded learners should be trained and made available in schools to help mentally retarded children

The Ministry of Education to beef up more aggressive awareness campaigns among various stakeholders concerning the negative attitudes towards the mentally retarded.

The Ministry to empower all the teachers in the country with appropriate professional skills on how to cater for the mentally retarded learners.

The Government of Kenya to source for donor support so that schools are facilitated with appropriate counseling and guidance facilities.

Schools should guide and counsel both the parents of the mentally retarded and their children to help both to cope with the situation.

Many people do not see the need for guiding and counseling the mentally retarded learners such attitudes should be changed by sensitizing and educating the community on the benefits of guiding and counseling the mentally retarded learners.

#### **5.4. Suggestions for further research.**

Few researchers have ventured on the topic of guidance and counseling of the mentally retarded. More research should therefore be done on the subject.

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## APPENDIX A: TRANSMITTAL LETTER



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INTERNATIONAL  
UNIVERSITY**

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**OFFICE OF THE DIRECTOR  
INSTITUTE OF OPEN AND DISTANCE LEARNING (IODL)**

DATE: . . . . .

TO WHOM IT MAY CONCERN:

Dear Sir/Madam,

**RE: INTRODUCTION LETTER FOR MS/MRS/MR . . . . .**

The above named is our student in Institute of Open and Distance Learning (IODL), pursuing a Diploma/Bachelors degree in Education.

He/She wishes to carry out a research in your Organization on:


. . . . .  
. . . . .

Case Study: . . . . .

The research is a requirement for the award of a Diploma/Bachelors degree in Education.

Any assistance accorded to her regarding research will be highly appreciated.

Yours faithfully,

  
**MR. MUHWEZI, JOSEPH**  
**HEAD, IN-SERVICE**

**APPENDIX B: QUESTIONNAIRE TO THE TEACHERS**

**Dear respondent,**

I am a student of Kampala International University carrying out an academic research on the topic “Children in Nyeri munispality in Nyeri District Kenya”. You have been randomly selected to participate in the study and are therefore kindly requested to provide an appropriate answer by either ticking the best option or give explanation where applicable. The answers provided will only be used for academic purposes and will be treated with utmost confidentiality.

NB: Do not write your name anywhere on this paper.

**A) Personal Information**

1. GENDER

Male [ ] Female [ ]

2. AGE

18-25 [ ] 26- 35 [ ] 35 and above [ ]

2. Education

- a) Certificate [ ]
- b) Diploma [ ]
- c) Degree [ ]

1. What are the causes of mental retardation?

.....

.....

.....

.....

2. Do you provide guidance and counseling services to the mentally retarded?



Yes [ ]      No [ ]

3. Do learners with mental retardation seek for guidance and counseling services?

Agree [ ]    Disagree [ ]    Not sure [ ]

4. What effective methods do you use to guide and counsel mentally retarded learners

.....

.....

.....

.....

.....

.....

5. What impact has the guidance and counseling had on the academic performance of the mentally challenged

Improved academic performance [ ]

Performance has deteriorated [ ]

Performance has not changed [ ]

6. Guidance and counseling has helped the mentally challenged cope with the school environment

Agree [ ]    Disagree [ ]    Not sure [ ]

7. Guidance and counseling has helped the normal children change their attitudes towards mentally retarded

Agree [ ]    Disagree [ ]    Not sure [ ]

8. Guidance and counseling has helped parents of mentally retarded cope with the situation.

Agree [ ]    Disagree [ ]    Not sure [ ]

9. Guidance and counseling has helped mentally retarded children improve their discipline.

Agree [ ] Disagree [ ] Not sure [ ]

10. Guidance and counseling has helped mentally retarded children gain confidence in themselves.

Agree [ ] Disagree [ ] Not sure [ ]

## **APPENDIX C: INTERVIEW GUIDE FOR THE PARENTS**

1. What are the causes of mental retardation?
2. What effective methods do you use to guide and counsel mentally retarded learners
3. What impact has the guidance and counseling had on the academic performance of the mentally challenged
4. Do you think Guidance and counseling has helped the mentally challenged cope with the school environment
5. Do you think Guidance and counseling has helped the normal children change their attitudes towards mentally retarded
6. Do you think Guidance and counseling has helped parents of mentally retarded cope with the situation?
7. Do you think Guidance and counseling has helped mentally retarded children improve their discipline?
8. Do you think Guidance and counseling has helped mentally retarded children gain confidence in themselves?

## **APPENDIX D: FOCUS GROUP DISCUSSIONS FOR PUPILS.**

1. What are the causes of mental retardation?
2. Do learners with mental retardation seek for guidance and counseling services?
3. Do you think Guidance and counseling has helped the mentally challenged cope with the school environment?
4. Do you think Guidance and counseling has helped the normal children change their attitudes towards mentally retarded
5. Do you think Guidance and counseling has helped parents of mentally retarded cope with the situation?
5. Do you think Guidance and counseling has helped mentally retarded children improve their discipline?
7. Do you think Guidance and counseling has helped mentally retarded children gain confidence in themselves?