FACTORS AFFECTING PERFORMANCE OF ORPHANED AND VULNERABLE CHILDREN PROGRAMMES IN FAITH BASED ORGANIZATION: A CASE STUDY OF HAPPY LIFE CHILDREN’S HOME, NAIROBI

MUNDIA TITUS BRIAN MWANGI

A RESEARCH PROJECT SUBMITTED FOR EXAMINATION TO THE SCHOOL OF MANAGEMENT AND LEADERSHIP IN PARTIAL FULFILLMENT OF THE REQUIREMENT FOR THE AWARD OF THE DEGREE OF BACHELORS OF ARTS IN DEVELOPMENT STUDIES OF THE MANAGEMENT UNIVERSITY OF AFRICA.

OCTOBER 2017
DECLARATION

Declaration by student

This project is my original work and has not been presented for a degree in any other university. No part of this research should be reproduced without the author’s permission or that of the Management University of Africa.

Signature …………………………… Date……………………………

Titus Brian Mwangi Mundia

BDS/8/00048/3/2014

Declaration by the Supervisor.

This research proposal has been submitted with my approval as The Management university of Africa supervisor.

Signature………………………… Date……………………………

Dr. Diana Opollo

Management University of Africa
DEDICATION

This project is dedicated to my father John Mundia, my mum Jane Mwangi, my sister Tracy Nyawira and brother Ben Wangariria for their continued support throughout my studies.
ACKNOWLEDGEMENT

I would like to acknowledge the help of my supervisor Dr. Diana Opollo while conducting this research and the entire staff of Management University of Africa for their help as well.
ABSTRACT

The study seeks to explore the factors affecting the performance of orphans and vulnerable children programs in faith based organization and a specific case study of Happy Life Children’s Home in Nairobi has been done. The study background is premised on the evidence provided by UNICEF on the causes of children becoming orphans such as conflicts, diseases, accidents and most prevalently HIV pandemic. The world perspective focuses on how vulnerability of children comes to be. It also stipulates that young children are the foremost vulnerable over the future since their bodies, brains, social relations and self-confidence grows apace throughout childhood. Local perspective identifies the things that can make the OVC programs to stall such as the need for housing, food, social support and access to education. The problem of the study becomes relevant in identifying substantive evidence based or empirical solutions to the numerous challenges facing orphans and vulnerable children. The objectives of the study are to the socio-economic challenges, the impacts of extended family, the role of the church and the impact of counseling on the orphans and vulnerable children programs. The significance of the study will be to assist the management of Happy Life Children’s Home to know the factors that make the OVC programs to stall and the possible solutions available. The researcher interested in the field to have materials in this study to identify gaps to be explored and the information to derive variables for other related studies. The scope of study targeted the 170 employees of Happy Life Children’s Home in Nairobi drawn from the management, middle and the general staff. Chapter two presents both the theoretical and empirical review where under theoretical the theories that the study is pitched on such as the program theory and the theory childhood. The empirical literature review presents the studies related to the current study with evidence based literature. There is conceptual framework that presents variable and their operationalization. The research design to be used is the quantitative method of research that gives direction to the research. The population used in the study are 170 respondents sampled to 90 of them for the final study. The research instrument used are the questionnaires for collection of data and then the data analyzed by the use of SPSS for a credible finding that are concluded by answering the research questions.
# TABLE OF CONTENT

DECLARATION.................................................................................................................. II
DEDICATION .................................................................................................................... III
ACKNOWLEDGEMENT .................................................................................................... IV
ABSTRACT ....................................................................................................................... V
TABLE OF CONTENT ...................................................................................................... VI
LIST OF FIGURES .......................................................................................................... XI
ACRONYMS AND ABBREVIATIONS ............................................................................. XII

CHAPTER ONE.............................................................................................................. 1
INTRODUCTION ............................................................................................................. 1

1.0 INTRODUCTION ..................................................................................................... 1
1.1 BACKGROUND OF THE STUDY ........................................................................... 1
   1.1.1 Profile of Happy Life Children’s Home ......................................................... 2
1.2 STATEMENT OF THE PROBLEM ......................................................................... 4
1.3 OBJECTIVES .......................................................................................................... 5
   1.3.1 General Objectives ....................................................................................... 5
   1.3.2 Specific objectives ....................................................................................... 5
1.4. RESEARCH QUESTIONS ..................................................................................... 5
1.5 JUSTIFICATION OF THE STUDY ....................................................................... 6
1.6 SCOPE OF STUDY .................................................................................................. 6
1.7 CHAPTER SUMMARY ............................................................................................ 7

CHAPTER TWO............................................................................................................. 8
LITERATURE REVIEW .................................................................................................. 8

2.0 INTRODUCTION ..................................................................................................... 8
2.1 THEORETICAL LITERATURE REVIEW ............................................................... 8
2.1.1 Program theory ................................................................. 9
2.1.2 The Theory of Childhood .................................................. 10
2.2 Empirical Literature Review .................................................. 11
  2.2.1 Socio-economic Factors on orphans and vulnerable children programs .... 11
  2.2.2 Extended family on orphans and vulnerable children programs .............. 13
  2.2.3. Role of church on orphans and vulnerable children programs ............... 15
  2.2.4 Role of counseling on orphans and vulnerable children programs .......... 18
2.3 Summary and Research Gaps .................................................. 19
2.4 Conceptual Framework ........................................................ 21
2.5 Operationalization of Variables ............................................. 21
2.6 Chapter Summary .................................................................... 22

CHAPTER THREE ........................................................................ 23

Research Design and Methodology .............................................. 23

3.0 Introduction ........................................................................... 23
  3.1 Research Design .................................................................... 23
  3.2 Target Population .................................................................. 23
  3.3 Sample and Sampling Techniques .......................................... 24
  3.4 Research Instruments .......................................................... 25
  3.5 Pilot Study ............................................................................ 25
  3.5.1 Validity Test ..................................................................... 25
  3.5.2 Reliability Test .................................................................. 26
  3.6 Data Collection Methods and Procedure .................................. 26
  3.8 Data Analysis and Presentation .............................................. 26
  3.8 Ethical Consideration ........................................................... 27
    3.8.1 Informed consent ............................................................ 27
    3.8.2 Voluntary participation ................................................... 27
    3.8.3 Confidentiality ............................................................... 27
    3.8.4 Privacy .......................................................................... 27
    3.8.5 Anonymity ..................................................................... 27
  3.9 Chapter Summary ............................................................... 27
CHAPTER FOUR .................................................................................................................. 28

RESEARCH FINDINGS AND DISCUSSION ...................................................................... 28

4.0 INTRODUCTION ........................................................................................................... 28

4.1 PRESENTATION OF RESEARCH FINDINGS ............................................................... 28

4.1.1 DEMOGRAPHIC INFORMATION ............................................................................. 28

4.1.2 EXTENDED FAMILY ON OVC PROGRAMS ......................................................... 29

4. 1.2.1 Emotional support of extended families on programs .............................. 29

4.1.2.3 Extended family failure to provide physical needs ...................................... 30

4.1.2.4 Difficulties of vulnerable children from extended families for education access ................................................................. 31

4.1.2.5 Vulnerability of OVC from extended family to peer pressure ............ 32

4.1.3 SOCIO-ECONOMIC ON OVC PROGRAMS .................................................... 33

4.1.3.1 OVC lacking basic health care due to economic situation ............... 33

4.1.3.2 Child labor due to economic constrains ..................................................... 34

4.1.4. COUNSELING ON OVC PROGRAMS .......................................................... 35

4.1.4.1 OVC programs solve mental development issues .................................. 35

4.1.4.2 Emotional intelligence in OVC programs important for program success. .... 36

4.1.5 ROLE OF THE CHURCH ON OVC PROGRAMS ............................................. 37

4.1.5.1 Churches that offer OVC programs .......................................................... 37

4.1.5.2 Impact of church on OVC moral values ................................................... 38

4.2 LIMITATION OF THE STUDY .................................................................................. 39

4.3 Chapter summary ...................................................................................................... 40

CHAPTER FIVE ................................................................................................................. 41

SUMMARY, RECOMMENDATIONS AND CONCLUSIONS ........................................... 41

5.0 INTRODUCTION ........................................................................................................... 41

5.1 SUMMARY .................................................................................................................. 41

5.1.1 DEMOGRAPHIC INFORMATION ........................................................................ 41

5.1.2 EXTENDED FAMILY .......................................................................................... 41

5.1.3 SOCIO-ECONOMIC ............................................................................................ 41

5.1.4 COUNSELING ..................................................................................................... 42
LIST OF TABLES

Table 1 : Population Size .................................................................................................................24
Table 2 : Sample size ..........................................................................................................................24
Table 3 : Demographic Information ..................................................................................................28
Table 4 : Respondents on Emotional Support ..................................................................................29
Table 5 : Failure to provide physical needs .....................................................................................30
Table 6 : Difficulties to Access Education .......................................................................................31
Table 7 : Vulnerable to Peer Pressure .............................................................................................32
Table 8 : Lack of basic Health care .................................................................................................33
Table 9 : Child Labor ........................................................................................................................34
Table 10: Mental Development .......................................................................................................35
Table 11 : Emotional Intelligence ....................................................................................................36
Table 12: Known Church OVC programs .........................................................................................37
Table 13: Impact of Known Church OVC moral Values .................................................................38
LIST OF FIGURES

Figure 1 Relationship between theories, independent and dependent variables .............21
Figure 2 Emotional Support ............................................................................................30
Figure 3 Failure to Provide Physical Needs ....................................................................31
Figure 4 Difficulty to Access Education .........................................................................32
Figure 5 Vulnerable to peer pressure ...........................................................................33
Figure 6 Lack of Basic Health Care ...............................................................................34
Figure 7 Child Labor .....................................................................................................35
Figure 8 Mental Development .......................................................................................36
Figure 9 Emotional Intelligence .....................................................................................37
Figure 10 Known Church ...............................................................................................38
Figure 11 Impact Of known Church OVC Moral Values ..................................................39
### ACRONYMS AND ABBREVIATIONS

<table>
<thead>
<tr>
<th>Acronym</th>
<th>Full Form</th>
</tr>
</thead>
<tbody>
<tr>
<td>OVC</td>
<td>Orphaned and Vulnerable Children</td>
</tr>
<tr>
<td>FBO</td>
<td>Faith Based Organization</td>
</tr>
<tr>
<td>AIDS</td>
<td>Acquired Immune Deficiency Syndrome</td>
</tr>
<tr>
<td>HIV</td>
<td>Human Immunodeficiency Virus</td>
</tr>
<tr>
<td>CRS</td>
<td>Catholic Relief Services</td>
</tr>
<tr>
<td>U.K</td>
<td>United Kingdom</td>
</tr>
<tr>
<td>U.S.A</td>
<td>United States of America</td>
</tr>
<tr>
<td>WHO</td>
<td>World Health Organization</td>
</tr>
<tr>
<td>SPSS</td>
<td>Statistical Package for Social Sciences</td>
</tr>
<tr>
<td>ALARM</td>
<td>African Leadership and Reconciliation Ministries</td>
</tr>
<tr>
<td>UNICEF</td>
<td>United Nations Children's Fund</td>
</tr>
<tr>
<td>UNAIDS</td>
<td>United Nations Programme on HIV and AIDS</td>
</tr>
<tr>
<td>MOHSW</td>
<td>Ministry of Health and Social Welfare</td>
</tr>
<tr>
<td>UNFPA</td>
<td>United Nations Population Fund</td>
</tr>
</tbody>
</table>
CHAPTER ONE

INTRODUCTION

1.0 Introduction
This chapter examines the background of the organization under study. It explores the problem that the research intends to answer and therefore outlines the objectives that guides the research work to achieve the targeted goal. The chapter also establishes the purpose of the study by revealing its significance, limitations and scope.

1.1 Background of the Study
In the year 2007, according to a study that was spearheaded by (UNICEF 2008b), there was an estimation that about 145 million children between the ages of 0 to 17 years ended up losing either one or both parents. A huge number of other youngsters can be depicted as helpless, because of the impacts of ailment and neediness. There is a number of reasons behind this circumstance, including struggle, sickness, conflict and mishaps. In any case, lately, another and huge reason for the expansion in the number of orphans and helpless kids has been the effect of the HIV pandemic on them and their families.

Around the world, 15 million children have become orphaned because of AIDS, with 11.6 million of this because of AIDS in sub-Saharan Africa alone (UNICEF 2008b). AIDS is additionally one of a kind in its effect on twofold orphans or youngsters who have lost the two guardians. On the off chance that one parent is living with HIV, there is a high probability that the other parent is too and that a youngster will lose the two guardians in a brief timeframe.

In traditional African societies the child-headed household was assumed to be non-existent since orphans would be easily and naturally looked after within the households of their extended families (Foster et al, 1997; Naicker and Tsenhase2004). In this set up, the family unit acted as a social security safety net for vulnerable children. The responsibility of caring for orphans has become a major problem due to poverty which is undermining the extended family’s capacity to adapt to orphans (Foster et al, 1997). The situation has been made worse by the HIV/AIDS pandemic which is leaving many children without parents to provide them with basic needs, socialization and education (UNICEF, 2008)
The word orphan comes from Greek word. In a common usage, only a kid who has lost the two guardians is called an orphan. Grown-ups can likewise be alluded to as vagrants or grown-up vagrants. Be that as it may, survivors who achieved adulthood before their folks kicked the bucket are not ordinarily referred to as orphaned. Orphan is a term by and large held for kids whose guardians have kicked the bucket while they are excessively young, making it impossible for them to fend for themselves (UNAIDS and UNICEF, 2002).

Minority standing, incapacity, and habitation in under-served territories can likewise make youngsters defenseless. The youthful youngsters are the most defenseless over the long-term in light of the fact that their bodies, brains, social relations, and self-assurance grow quickly amid early adolescence. Any intrusions and postponements in young children's developmental potential are hard to recoup in later years, particularly when youngsters keep on living under troublesome conditions. Young children require great nourishment, care, and support from stable parental figures and additionally chances to learn, assurance from damage and preventive human services. Group based early adolescence improvement exercises can give such help and care, particularly when guardians are likewise occupied with putting food on the table.

In numerous settings, young ladies confront a danger of sexual savagery and assault, both inside and outside of marriage, because of sex differences and sexual and social standards. They also worry about an expansive concern of care. While teenagers share similar requirements for housing, nourishment, social help, and instruction as their more youthful partners, they confront key formative advances which might be especially trying for the individuals who are defenseless. Community programs, peer training, and wellbeing administrations tending to the requirements of powerless young people ought to be conveyed through sex-and age-fitting intercessions aimed at expanding backing and decreasing danger.

1.1.1 Profile of Happy Life Children’s Home

Happy Life Children’s Home was supported by Rev. Jim Powell in 2000, the Associate Pastor of Heritage Presbyterian Church in New Castle, DE and Steve Kamau, a Kenyan
who was a member of Heritage, put forth their plan to open a home for abandoned babies in Kenya to the officers of Heritage Church. January 2002, Happy Life Children’s Home started under the direction of Pastor Peter Ndung’u in Kenya under the oversight of Heritage Presbyterian Church in New Castle, Delaware. It started with four children who were twin boys (who were discovered not as much as seven days old in a plastic and who are currently joyfully embraced in one of the USA homes), another boy (who was come back to his folks) and a girl (also returned to her folks). In 2004, Happy Life Children's Home got its certified 501c non-profit status. (Tax ID: 30-0277253). In Kenya, Happy Life is enrolled under Pastor Ndung’u Church, Overcoming Faith Ministries. Later in 2007, the facility for HLCH purchased from the owners who had enabled the setting up a rent-to-own arrangement over several years. In August 2010, a new four stored housing complex was committed in Roysambu, Nairobi. In 2010, 5 acres property in Juja Farm was bought so as to provide a home and later a school for our more established children. Since the starting, more than 170 abandoned children have been adopted into forever families living in Germany, Holland, Australia, the United States, and Kenya. Since the start more than 340 youngsters have found Happy Life Children's Home to be their home, two councils now administer the operations of the Happy Life. Pastor Peter Ndung'u is the Chief of the Board in Kenya and Pastor Jim Powell is the Executive of the Board in the United States of America.

The objectives are to give the kids quality parental figures who sustain them with affection, meet the physical, social, passionate, and instructive necessities of every child so as to make a “family” surrounding for the child at Happy Life, coordinate every kid with a cherishing family for adoption and then to enroll the help and finances of others who also cherish this work.

The research will be case studied at Happy life children home since it is well established with very concrete programmes running for the orphaned children though some have collapsed. The programs that will be assessed at the home are among others, the provision of a Quality Christian Education and Training for Employment and providing Quality Pediatric Outpatient Medical Care etc.
1.2 Statement of the problem

African kids hold the fate of the continent. Education is development. It helps them make wise and well-informed decisions and open doors for them, diminishing neediness and infections, and gives them a voice in the public eye. The advantages of training in a developing nation are comprehensively known. They include expanding workforce efficiency, adding to expanded earnings, improving political cooperation, and diminishing social disparity. For countries, instruction makes a workforce that can contend all around, opening ways to financial and social success. A comprehensive perspective of orphan-hood considers the more extensive social and material settings of kids' day by day lives, including the squeeving, ordinary dangers that shape youth in these specific situations. Pivotal among these were the ways in which sexual orientation, age and family neediness connected in forming youngsters' vulnerabilities. While sexual orientation can be preference, it can likewise be a hazard. Gender-based violence, for example, assault and badgering, were basic apprehensions for high school young ladies, and this impacted their employment openings and sentiments of frailty in the streets. Swarmed living conditions were likewise normal and united outsiders leasing settlement under the same rooftop. This displayed dangers for young ladies and their ethical standing, for example, improper or early sexual relations, regularly started through the trading of favors and material products.

Orphaned children face tremendous challenges in their lives and therefore makes most them vulnerable in many situations. Some of them end up in children homes for survival and sustainability which exposes them to a whole new life that require adjustments to cope. Some other non-governmental organizations come around to assist the orphans and vulnerable children to pull through life. Both the children homes and NGOs initiate programs for the orphaned children as a way of normalizing their lives but most of these programs fails to deliver their mandates and in most cases collapse therefore leaving the target children worse and vulnerable than before. There has been no substantive evidence based or empirical studies that have informed the clear solutions to the known challenges and that what this study seeks to address by identifying and assessing the factors that
influence the execution of the programmes meant for the orphans and vulnerable children.

1.3 Objectives

1.3.1 General Objectives
The general objective of this study is to identify the factors affecting performance of orphaned and vulnerable children programmes in faith based organizations in Kenya with a reference to Happy Life Children’s Home, Nairobi

1.3.2 Specific objectives
i. To identify socio-economic challenges on the performance of OVC programs at Happy Life Children’s Home.

ii. To find out the impacts of extended family on the performance of OVC programs at Happy Life Children’s Home

iii. To establish the role of church on the performance of OVC programs at Happy Life Children’s Home

iv. To access the impact of counseling on the performance of OVC programs at Happy Life Children’s Home

1.4. Research Questions
i. What are socio-economic challenges faced by OVC programs at Happy Life Children’s Home?

ii. What is the impact of extended family on OVC programs at Happy Life Children’s Home?

iii. What is the role of the church on OVC programs at Happy Life Children’s Home?

iv. What is the impact of counseling on OVC programs at Happy Life Children’s Home?
1.5 Justification of the study

1.5.1 Management of Happy Life Children’s Home
The study will assist the management of Happy Life Children's home to have an understanding of the factors affecting performance of the orphans and vulnerable children programmes. The study will come up with the conclusion of what needs to be done in order to enhance performance of the programmes. This will assist the management to plan and even change the criteria of its strategies in regard to the programmes performance.

1.5.2 Other Researchers
The research will be of great significance to other researchers who would discern further resource on the same subject in future. The study would facilitate individual researchers to identify gaps in the current research and carry out research in those areas. Consequently the researcher would be able to understand and appreciate the programmes success through its performance.

1.5.3 The Kenya Government
The study is of great importance to the Kenyan government especially the Ministry of Gender and National Development where the welfare of the vulnerable children falls. It will be of great benefit to learn how to ensure the institutions handling orphans and vulnerable children have the right mechanism for effective performance of the programmes. It will be in a better position to provide solutions and collaborate in such programmes in order to enhance success of programmes done by the institutions with such mandate.

1.6 Scope of Study
The study will be concentrated on factors influencing orphaned and vulnerable children programmes at Happy Life Children’s Home at Juja Farm Nairobi. It will target a population of 170 workers comprising of those in management, middle and support staff that assist in the implementation of the programmes. The study will be done from the
mid- August to start of October. The success factors and the failures related to the performance of the programmes will also be explored.

1.7 Chapter Summary
This chapter of the study represented the background of the study which included sections of the statement of the problem, the research objectives with the research questions, the scope of the study, limitation of the study and significance of the study. This chapter gives direction to the entire research work since all other chapters are premised on this chapter one.
CHAPTER TWO

LITERATURE REVIEW

2.0 Introduction.

The chapter entails the review of literature that is relevant to the study. Past studies are important as they guide the researcher on other studies done on the same topic. From this review, a conceptual framework using the dependent and the independent variables in the survey is developed, which lays a framework for the study.

2.1 Theoretical Literature Review

Faith-based organizations (FBOs) are characterized as faith-influenced NGOs. FBOs are regularly organized around improvement and/or relief service delivery programs and can be nearby, national, or worldwide. Such associations assume a focal part in the common society reaction to youngsters in the scourge, (Kirby et al, 2005). They have a special and effective capacity to prepare assets and faith communities at the nearby level for the advantage of kids. FBOs are likewise vital to the spiritual components of reaction to the pestilence that frequently undergird enthusiastic and social reactions for people and groups. (Kirby et al, 2005).

A UNICEF, 2011, report on global programming challenges in addressing OVC education projects revealed that education services for OVC are generally conveyed by little group and religious gatherings with constrained limit and trouble in scaling up. Government services in charge of kids and social welfare have a tendency to be little, inadequately financed, politically powerless and furthermore ineffectively staffed to satisfy the prerequisites expected by worldwide accomplices. Scaling up requests more extensive learning of, measurement of, and quality confirmation for existing, normally separated, specialist organizations for whom minimal national or global direction exists and of which national and local governments may, indeed, be unconscious. Report likewise uncovered that the hardest to achieve helpless populaces are still not getting to administrations. As indicated by the report directed in 11 high-pervasiveness nations, just an expected 15% of vagrants live in family units accepting some type of scholarly help. (UNICEF – OVC, 2011).
2.1.1 Program theory

It is for the most part uncovered that the limit of a program hypothesis is to discover the theoretical sensibility of the program (Chen, 1990b; Lipsey, 2000; Reynolds, 1998; Rogers et al, 2000; Rogers, 2000a; Sedani and Sechrest, 1999; Stufflebeam, 2000; Weiss, 1997). A program hypothesis comprises of an arrangement of proclamations that depict a specific program, clarify why, how, and under what conditions the program impacts happen, anticipate the results of the program, and indicate the prerequisites important to achieve the coveted program impacts (Sedani and Sechrest, 1999).

The primary stage to program development is the conceptual foundation. When this has been built up, the the program theory can be used to make results and intermediate goals. According to Prosavac and Carey (1997), his gathering of orchestrating stages fabricates the shot of program accomplishment. In this manner, a program theory ought to be created preceding the initiation of the program (Bickman, 1987: Prosovac & Carey, 1997, Rogers et al, 2000). It is exceptionally prudent to build up a program theory before they begin of any program. This isn't regularly the case (Bickman, 1987; Reynolds, 1998: Rogers et al, 2000; Stufflebeam, 2000). Be that as it may, regardless of the possibility that the program is in progress, it is vital for a program theory to be produced. Along these lines, program theory can be created amid the operation of the program (Rogers et al, 2000) or preceding assessing a program (Bickman, 1987). The advancement of a program theory is important when wanting to decide why a program is succeeding or falling flat and if and where program change ought to be engaged.

Program theory modeling utilizes three parts to portray the program: the program activities or inputs, the intended outcomes or outputs, and the instruments through which the proposed results are accomplished (Reynolds, 1998; Rogers, 2000; Rogers et al, 2000; Sedani & Sechrest, 1999). A depiction of the basic data sources characterize the segments of the program, portray how these segments are conveyed, characterize the strength or measure of treatment required to instigate the result (Sedani & Sechrest, 1999), and outline the required aspects vital in producing the expected outcomes (Lipsey, 1993). The procedures that the result is dependent upon (Lipsey, 1993) and that take after the sources of info ought to be depicted.
2.1.2 The Theory of Childhood

Despite the numerous interpretations and the different understandings and meanings of “childhood” depending on historical time and cultural context, common to all is a definition of childhood as being the specific period during the early stages of human life set apart by fast development and advancement. Lyons (1998, p. 2) depicts childhood as the times of physical development, in which a child develops towards adulthood. The youngster additionally grows mentally and in ways that characterize scholarly, social, spiritual and emotional qualities. The circumstances or conditions in which the development happens can point of confinement or upgrade improvement. Physical and emotional prosperity and social intellectual improvement can be permanently constrained to a man.

Denied of the opportunities and time to grow and grow effectively during their childhood. It is these circumstances or conditions this study aims at comparing among the interviewed children. In order to understand today’s discourses of childhood one needs to understand the changes over time. In a global perspective the influence and view of children and childhood has changed dramatically over the last 200-300 years. In medieval society “childhood” did not exist, children were not granted a special or distinctive social status.

This awareness, only gradually emerged from the 15thcentury onwards. The first presociological discourse of “the child” assumed that the child was “evil” and needed to be disciplined and punished in order to rise to docile adult bodies. The second discourse, of which Rousseau was the main character, is represented by the “innocent child”. Rousseau opened up the question of the child’s particularity, promoted to the status of a person with needs and desires and even rights (James, Jenks & Prout, 1998). Rousseau paved the way for our contemporary concern about children as individuals. Without precedent for history he influenced a huge gathering to trust that youth was justified regardless of the consideration of savvy grown-ups, empowering an enthusiasm for the way toward growing up rather than just an item (Robertson in James, Jenks & Prout, 1998, p. 8). Such thinking has been instructive of all child-centered learning and special-needs education since then. Following this discourse, developmental psychology entered the arena with the naturally developing child, built on the assumptions that children are
natural rather than social phenomena and that this naturalness extends to the inevitable process of their maturation.

The single most influential figure in the construction of the model of the naturally developing child is Jean Piaget. In his work on development of thought and bodily skills he lays out some clearly defined stages of growth which are well signposted. As consequence Piaget establishes differences between children and adults, with supremacy of adulthood. There is a lack of competence within the child and “childhood must be viewed as an inadequate precursor of the real state of human beings, namely “growing up” (James, Jenks & Prout, 1998:18). Since then, fundamental objections have arisen concerning the view that there is a universal, standardized and inevitable programme of developmental stages. None the less, Piaget’s theory has, through its measuring, evaluating, positioning and surveying of children, ingrained a profound situated idea into our contemporary understandings of the child. Children are compared through testing against a “gold standard” of the ordinary kid, regardless of whether in training, substantial advancement or welfare. In the growth of Freud an psychoanalytic influence, the explanation for aberrant adult behavior lies in the childhood. All adults, it is argued, transport their childhood from action to action like previous incarnation. Freudian theory positions the child as no more than a state of unfinished business or becoming. The review of the pre sociological models of childhood reveals how these understandings of children affects our thinking which continues to inform everyday actions and practices alongside new sociological theorizing about childhood.

2.2 Empirical Literature review

2.2.1 Socio-economic Factors on orphans and vulnerable children programs

Regional studies indicate that OVC face many problems. Many end up having to take on prominentobligation for income generation, food production and care of relatives including siblings (UNAIDS, 2002). They confront diminished access to satisfactory sustenance, education, fundamental human services, housing and dressing.

The phenomenon of child heads of households force many to fin employment or depend on the good will of neighbours and relatives to provide them with basic necessities such a
food and clothing (Byrne, 2002). These households, girls are the ones who are often more inclined to drop out of school than young men, as they frequently have to look after younger siblings and perform household chores. Other challenges include malnutrition, illnesses, abuse, child labour and sexual exploitation, and stigma (UNICEF, UNAIDS & WHO, 2002).

Studies conducted on the situation of OVC in Lesotho paint a similarly bleak picture (Sechaba Consultants, 1993; Ministry of Health and Social Welfare, 1999, 2001; UNICEF, 1999; UNAIDS, UNICEF, USAID & WFP, 2004). In the main these studies indicate that OVC face challenges such as: The number of street children rose because of fragmentation of the extended family and traditional support systems psychological trauma caused by loss of parents or caregivers loss of inheritance rights and dispossession.Increase in children coming into conflict with the law as they seek out opportunities for survival Increase in children being abandoned Increase in dropout rates in schools, especially among girls, and denial of access to school due to lack of required fees Lack of parental guidance and supervision leading to increased vulnerability to abuse, exploitation and violation of rights and high risk behavior.

Discrimination due to stigma associated with being orphaned children and in particular orphans who aren't encouraged to participate in decisions affecting their future and wellbeing. It is additionally called to attention that in Lesotho children orphaned by AIDS confront issues of destitution and shame and are frequently denied of school fees, food attire and sometimes shelter by the guardians, Kimame (2005). For instance, youngsters who have lost parents to HIV/AIDS also endure mental scarring and are defenseless against, psychological and sexual exploitation, and violation of their basic human rights on top of the trauma and poverty inflicted upon orphans by the loss of their parents, abuse and exploitation are increasingly disturbing occurrences. In addition, without the protection of parents, cruelty, transactional sex, cheap or forced child labour, early marriage, child rape and even coerced commercial sex are blighting the lives of younger people.
The MOHSW (2001) notes that children orphaned due to AIDS in Lesotho are more likely to lose rights over family property. MOHSW further indicates that where any property is left behind, it often gets misappropriated and abused by relatives. Girls are highly disadvantaged by the system.

2.2.2 Extended family on orphans and vulnerable children programs

A huge and set up body of analysis proof has demonstrated the importance of the family as a significant establishment for ending essentialism in production, consumption, copy, and other accumulative functions that square measure related to the socioeconomic authorization of people and their societies. The major approaches to those functions as well as to social and economic authorization embrace the capital of the family and its resilience. The origin of family capital obtains from the writing on social capital wherever the last alludes to "assets installed at interims a man's interpersonal organization that impact determinations and results by molding a private personality while outlining openings and obstructions at interims a man's social world" Belch et al,(2011:).Social capital has conjointly been spoken to as "those social connections that empower individuals access to assets controlled by their partners, and to the number and nature of these assets whereupon people depend for social, monetary and emotional help" Belsey, (2005.)

Family capital gives empowering assets and reinforces the capacity of individual members from the family to perform and accomplish their present and future objectives and goals Family flexibility, on the inverse hand, alludes to the energy of families "to face and bounce back from turbulent life challenges Walsh, (2003:) and is extremely significant for the first powerless individuals and families United Nations agency, in terms of family perform, are often represented as those possible to expertise the ensuing (Belsey,2005). the powerlessness to satisfy the fundamental needs of their members within the areas of gender, nourishment, shelter, physical and emotional care, and furthermore the improvement of individual physical and mental misuse, the abuse of individual members, victimization against the family or individual members, injustice within the conveyance of rights and obligations and twisting of the parts of relatives; and a higher conceivable likelihood of falling apart as an outcome of outer monetary, social
or political elements. Families and their members demonstrate flexibility after they fabricate caring support systems and solve issues creatively, while their versatile conduct are regularly reflected inside the upkeep of conventional advancement of good faith, genius and assurance regardless of misfortune (Belsey, 2005). These qualities and resources change individuals to answer with progress to emergencies and difficulties, to recoup and develop from those encounters, and to ordinarily achieve approval (Walsh, 2003).

Against this foundation it's clear that every family capital and family versatility accentuate the significance of nonphysical assets that, while not just quantifiable, have a noteworthy outcome on the family's capacity to shape the more extended term. These square measure earned through instrumental and passionate parts of the family (Patterson, 2002). Instrumental parts square measure required with the accessibility of physical assets like sustenance, piece of attire and haven while emotional parts advance emotional help and support of individuals from the family (Peterson, 2009). Those parts that can possibly fortify the financial approval of individuals grasp participation and family development; monetary help; consideration, support, and socialization; and security of powerless individuals.

Enrollment and family development is the seat of the essential combination of individuals into social life, family's square measure the key supply of their members’ fundamental personal and social personality, and ability for adoration and closeness. Since the Centre for Social Justice within the UK shows at intervals the family atmosphere that associate to some degree an individual’s physical, emotional and psychological improvement. It's from our family that we have a tendency to learn unlimited love, we have a tendency to see ideal from wrong, and that we pick up kindred feeling, regard and self-control. These qualities change United States to have association totally in school, at work and in the public eye for the most part , Center for Social Justice, (2010)Indeed, the family environment inside which kids end up noticeably more seasoned has been contemplated a key indicator of their future results; Centre for Social Justice, (2010)

International multidisciplinary analysis proof, as an example, indicates that kids growing up in low-income families and households where parenting practices and behavior area
unit created as a result of economic strain and material hardship generally expertise
social and health conditions that place them in danger of later educational, employment
and behavioral issues Danzinger, (2005). Conversely, early positive childhood
experiences no inheritable through sturdy and effective parent-child attachment and
communication; a nurturing, amorous family environment; sweetening and support of
educational functioning; and watching of peer influence promotes the event of pro-social
and foundational psychosocial systems in kids and adolescents Perrino (2000) Centre for
Social Justice, (2010). Stable purposeful families have conjointly been shown to
contribute to youth social authorization by providing several of the factors that defend
adolescents from participating in risky sexual behavior, drug use and abuse, delinquency,
and alternative anti-social behaviors Perrino et al, (2000). It has been shown, as an
example, that teenagers WHO talked with their folks regarding sex also are a lot of
seemingly to debate sexual risk with their partners, and area unit less seemingly to be
committed deviant peer teams (Perrino et al, 2000; Whitaker and Miller, 2000).

In a horrendously broad sense, along these lines, negative family encounters poor kid
parental connection; a confused, useless, damaging, careless, or ruined family setting
could specifically or in an indirect way hamper youth's social and monetary approval. An
illustration, clarifications are offered at many levels on however need could build youth's
status financial and wellbeing drawbacks. A few examination discoveries have
demonstrated that at its center, poor adolescence is identified with feeble enrichments of
human, capital and money related assets like low levels of training and achievement,
couple of attractive abilities, low work efficiency, and typically weakness standing all of
which may intensify youngsters' financial and wellbeing vulnerabilities together with
HIV infection Ganyaza-Twala&amp;Seager,( 2005). With regards to the latter, it's
conjointly been argued that several poor adolescents typically adopt risky sexual behavior
not as a result of bar messages don't reach them, however as a result of such messages
area unit typically inapplicable or inoperable given the fact of their lives.

2.2.3. Role of church on orphans and vulnerable children programs

According to UNICEF (2007) natural disasters and outbreaks of sickness and diseases
has led groups such as humanitarian agencies that deal with children and churches in
local are to work with aim of providing basic needs as well as legal services. UNICEF 2007, further highlights that they have ensured safety and protection, their main goal afterwards is to reunite families give them support and help them stay close together. There are programs that help ensure that children are kept with their families and communities and help to move on and rebuild their livelihood after such emergencies are over, go hand in hand with how humanitarian organizations and the national government come up with plans pertaining taking care of children during emergency. Through this support there has emerged some transformation which includes developing adoption of care and legislation that is specially formulated with the aim of protecting children who are vulnerable and to ensure that families are kept together after emergencies. To add on, communities become equipped to handle matters of responding to the needs of children after disasters occur, ensuring their protection and helping them rebuild their lives.

Africa churches have integrated with churches in the first world countries like America so as to provide orphans and children who are vulnerable with support. Tanzania, Kenya, Malawi, Uganda, and Zambia are critically impacted by poverty and HIV/AIDS and this has greatly affected the children in these countries. These countries have partnered with America churches in order to try and rehabilitate OVC’s (Holzer et-al, 2007). Rockland Community Church partnered churches in Ngaramtoni Parish located in Tanzania to offer their support to children’s center, secondary school, as well as programs which are community based to meet the needs of children and their families. Mission community church located in Gilbert Arizona partnered with Vision led and Somebody Cares Malawi to aid in the provision of water that is clean, feeding programs and in offering support in other ways for families who were affected by drought and HIV/AIDS Chikudzilire, a Malawian community.

Willow Greek Community Church located in suburban Illinois came into partnership with Bright Hope and Samfya Community care providers in the rural areas of Zambia, to offer support in education, delivery of home based care, and to provide microloans that may help families to sustain and provide for their children. Watermark Ministries that is based in Dallas, Texas, came into partnership with African Leadership and Reconciliation Ministries (ALARM) Uganda with the aim of improving the lives of vulnerable children,
and the prevention of child labor. This can be done through strengthening livelihoods and making education accessible.

Besides the collaboration of African churches and other churches in the developed countries, African churches have also set aside special days, events and seasons in order to help rehabilitate OVC’s through them raising awareness and spearheading action in support of such children. According to Omwa and Titeca (2011), World AIDS Day, churches around the globe that are involved in offering support to orphans in communities affected with HIV/AIDS take part in World AIDS Day by holding special prayer services and put up activities including lighting candles. Orphan Sunday is a day that requires for all Christians to practice their faith by giving them opportunities annually in order to create awareness and encourage churches to chant prayers for the orphans.

The Roman Catholic Church has also been active in the rehabilitation of OVC’s in Africa and other parts of the world. The Catholic Relief Services (CRS) has been playing a great role in rehabilitating OVC’s since 1943. The CRS has done this through the following domains which are directly customized for OVC’s in the countries: Haiti, Kenya, Rwanda, Tanzania and Zambia.

Food and Nutrition: specially formulated to keep watch of the child’s status in relation to the security of food and their nutrition. This includes the availability of food that is nutritious to the child, a child’s belief of food satisfaction and other important issues regarding nutrition like whether a child goes to sleep hungry.

Shelter: this has to do with the physical infrastructure and the environment which is immediate to the child.

Protection: looks at whether a child is given similar or different treatments compared to other children around them.

Family: this focuses and measure the degree to which a child feels his/her family’s support.

Health: looks at, determines and compares the child’s health status to their age mates.

Spirituality: investigates whether the child’s family and community offers them a platform for spiritual growth.
Mental health: seeks to look into the mental health of the child putting into consideration matters such as emotional support that maybe offered by other people and their level of happiness.

Education: deals with matters pertaining stigmatization in schools, how accessible education is and how the child is satisfied with the school.

2.2.4 Role of counseling on orphans and vulnerable children programs

Counseling process may involve developmental issues or intervening issues. The goals of clients are usually what counselors focus on. Therefore, counseling entails making choices and behavioral change. (Casey, 1996, p. 176), counseling can be a rehearsal of future action. What the children bare in common is the perforation of being exposed to both physical and mental violence, sicknesses and mortality. due to the fact that these children are now victims, their mental development has become much more difficult. Many of these kids have been transitioned into adulthood without the hopes of living as children again or as teens who have access to proper parental care which they can learn and pass it on to future generations. These youngsters are usually separated from their role models, which is their family and other social networks. They may also encounter problems in the maintenance of perpetual feelings of having inner links to their loved ones and that these links may act as a pathway to create links to generations that follow. Child survivors often seem to communicate about how they felt as if they are grownups yet they are still children and how they end up being the ones to be responsible for their family. At that tender age, they find themselves facing difficulties that come with parenting. With such children, they may experience ‘age distorting’ whereby they feel that their current age is not their actual age. This may have an effect in child bearing in future. (Kaplan 2002). This phenomenon of age distorting can also be experienced in those who are orphaned by AIDS. such children end up taking parental roles. After the Rwandan genocide, there were as many as 50000 orphans who took the roe of head of households whereby the oldest child became the caregiver for their young ones. In many African countries, is usually unlikely that children discuss trauma with their parents, many of them even end up being left out of the process of grieving, whereby children of about 10 to 12 years are seen to be too young to understand such matters.
Teenagers who take most of their time in solitude may not get such indirect possibility. It is always expected of them to act as grownups. This may be such a difficult moment for them especially after experiencing trauma with no one to discuss with their feelings. (The Traumatic Stress Letter, 2004). In countries that are affected by war, it is seen that teenagers encounter more suffering. An investigation conducted in cape town indicted that boys attending pre-school and girls in their teenage hood experienced more suffering after attacks arising from political violence in their residential areas. (Dawes. A. Tredoux, C, & Feinstein, A, 1989 in Hjelm, 1997) millions of children who are below the age of 15 who live with HIV in 2008. (Abrams, 2009; UNAIDS, 2009)by the end of the year 2008, about 430,000 children below the age of 15 ended up being infected with HIV with an approximation of 280,000 facing death due to Acquired Immunodeficiency Syndrome (AIDS) (UNICEF, WHO & UNFPA, 2009)

2.3 Summary and research gaps

Orphans and vulnerable children are confronted with diminished access to satisfactory sustenance, education and fundamental human services. The phenomenon child heads of households force many to find employment or depend on the good will of neighbors and relatives to provide them with basic necessities such as food and clothing. These households, girls are the ones who are often more inclined to drop out of school than young men as they frequently have siblings and perform household chores. Without protection, cruelty, transactional sex, cheap or forced child labor, early marriage, child rape and even coerced commercial affects the lives of the children.

Extended family on orphans and vulnerable children is characterized by individual physical and mental misuse, the abuse of individual members, victimization against the family or individual members, injustice within the conveyance of rights and obligations and twisting of the parts of relatives; and a higher conceivable likelihood of falling apart as an outcome of outer monetary, social or political elements. Negative family encounters poor kid parental connection; a confused, useless, damaging, careless, or ruined family setting could specifically or in an indirect way hamper children's social and monetary approval. An illustration, clarifications are offered at many levels on however need could build children's status financial and wellbeing drawbacks.
There are programs that churches provide to help ensure that children are kept with their families and communities and help to move on and rebuild their livelihood after such emergencies are over, go hand in hand with how humanitarian organizations and the national government come up with plans pertaining taking care of children during emergency. Through this support there has emerged some transformation which includes developing adoption of care and legislation that is specially formulated with the aim of protecting children who are vulnerable and to ensure that families are kept together after emergencies.

Counseling is key for children who encounter problems in the maintenance of perpetual feelings of having inner links to their loved ones and that these links may act as a pathway to create links to generations that follow. Child survivors often seem to communicate about how they felt as if they are grownups yet they are still children and how they end up being the ones to be responsible for their family which affect them psychologically.

The existing studies have focused on the factors that results to the orphans and vulnerable children in society by specifically pointing out the areas of concern like the socio-economic factors which the orphans and vulnerable children face, the psychological disturbances due to taking of responsibilities of the family in situation where parents are absent etc.

The studies also identifies the interventions by organizations such as churches, non-governmental organizations and governments to try solve the issues affecting the orphans and vulnerable children.

There has been no known study exploring the factors that affect the operation and implementation of the programs designed to intervene on the issues affecting the orphans and vulnerable children and that is the basis of this study.
2.4 Conceptual Framework

The study will examine four variables which include; socio-economic challenges, extended family, role of Counseling and role of the church in relations to the main objective which is OVC programs. The following conceptual framework was used.

Figure 1 Relationship between theories, independent and dependent variables

2.5 Operationalization of Variables

2.5.1 Socio-economic challenges

The socio-economic challenges facing OVC are the absence of access to instruction, nourishment, insufficient garments and safe house and absence of psychosocial bolster in a specific order. The program for OVC get the challenges of finance and therefore failing to meet their goals.
2.5.2 Extended family

Children in extended family may be more vulnerable to physical harassment. There is little information and evidence about children living in this setting. They may live there because their mother is in prison, dead or divorce and therefore extended family may not be attentive to the children needs making them more vulnerable to risky situations.

2.5.3 Role of the church

The church provides the support to the vulnerable children though the established feeding programs and given them hope in their situation. The church provides moral values to the vulnerable children it administer on and therefore there should be sufficient program for the OVC.

2.5.4 Role of Counseling

Counseling helps the children to understand more of themselves and change their behavior that are necessary for their survival. Orphans and vulnerable children have many challenges that requires attention especially in the role of the significant others in their lives.

2.6 Chapter summary

The chapter avails the theories that the study is premised on and the relevant literature from the theories. This forms the theoretical review of the past literature related to the study. There is also the empirical review of the studies done that are in line with the topic under investigation. This presents evidence based studies that shades more light on the study and provides the gaps that have not been addressed by other researchers so that the current study can address. The conceptual framework presents the variables under study that are realized from the review of literature that shapes the objectives of the study.
CHAPTER THREE

RESEARCH DESIGN AND METHODOLOGY

3.0 Introduction

This chapter outlines the methodology which will be used in undertaking the research. The chapter details the population targeted, research design, methods used in gathering of data, instruments and analysis employed in the research.

3.1 Research Design

With reference to Kerlinger (1986) a research design is explained to be a structured plan adopted so as to retrieve answers that arises from research questions or test the research hypotheses. The plan represents the overall strategy used in collecting and the analysis of data for the purpose of giving answers to questions in research. The researcher will use descriptive survey in finding out the who, where and how OVC programs perform so that the researcher can make an analysis of the factors affecting performance of orphaned and vulnerable children programmes in faith based organizations in Kenya with a reference to Happy Life Children’s Home, Nairobi.

Survey is defined as the collection of data from a targeted population with the sim of determining the population’s current status as compared to one or more variables” (Yin, 2009). It is claimed to be the best available method to social scientists who have an interest in obtaining first hand data so that they may use it in the description of a large population. (Mugenda and Mugenda, 2003).

3.2 Target population

The target population is the whole group of cases or respondents who meet the required criteria. (Burns & Grove 1997). It is that specific population from which certain information is required or desired. The target population will consist of the following; Management of the home, employed staff and orphaned and vulnerable children from Happy life Children’s Home that will make up 182 targeted to participate. The organization was selected due to having several programs for the orphans and vulnerable children some of which had challenges and failed.
The target population is as follow:

Table 1: Population Size

<table>
<thead>
<tr>
<th>Population Category</th>
<th>Population</th>
<th>Percent (%)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Management of the home</td>
<td>52</td>
<td>29</td>
</tr>
<tr>
<td>Staff</td>
<td>98</td>
<td>54</td>
</tr>
<tr>
<td>Orphans and Vulnerable Children</td>
<td>30</td>
<td>17</td>
</tr>
<tr>
<td><strong>Total</strong></td>
<td><strong>182</strong></td>
<td><strong>100</strong></td>
</tr>
</tbody>
</table>

3.3 Sample and sampling techniques

Sampling is a process that involves the selection of a section of a population to act as a representation of the total population whereby information is extracted from the sub-section. A sample is the sub-section that is obtained from the entire group of people in order to take part in the study at hand. In this study, the method of sampling that will be used in the selection of samples is stratified probability design.

A convenient sample is that that consists of the most suitable subjects (Cohen et al 2000). This sampling method was given an upper hand because it will ensure that the respondents are reached easily. With this method, the researcher is assured of simplicity and practicality. It is also economical and easy to use. Simple random sampling will be utilized in the selection of samples. Random samples have a high probability of yielding reliable representatives as it ensures subject representation. (Brink 1996). For generalization to occur statistically, the study will sample 50% of the respondents for reduction of sampling errors (Cooper & Schindler, 2003).

Table 2: Sample size

<table>
<thead>
<tr>
<th>Population Category</th>
<th>Population</th>
<th>Percent (50%)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Management of the home</td>
<td>26</td>
<td>29</td>
</tr>
<tr>
<td>Staff</td>
<td>49</td>
<td>54</td>
</tr>
<tr>
<td>Orphans and Vulnerable Children</td>
<td>15</td>
<td>17</td>
</tr>
<tr>
<td><strong>Total</strong></td>
<td><strong>90</strong></td>
<td><strong>100</strong></td>
</tr>
</tbody>
</table>
3.4 Research Instruments
In this study, the main data collection tool to be used by the researcher will be a questionnaire. The advantage with this tool is that within a short duration of time it can be administered to a large group of respondents (Kombo and Tromp, 2006). Questionnaires are also generally preferred for this study because they ensure a wide range of respondent perception. The questionnaire consisted of both open-ended questions and the closed questions. Open-ended questions will be for in-depth information while the closed ones will easily be analyzed and understood.

In this study the questionnaire will be divided into; 1. Demographic details 2. Socioeconomic factors 3. Impacts of extended family. 4. Role of church 5. Impact of counseling.

3.5 Pilot Study
This study will pretest the questionnaires to establish their reliability and validity. As such, the test will involve 10 employees drawn from the Happy Life Children's Home who will not be involved in the main study so as to avoid bias.

3.5.1 Validity Test
Validity refers to a measurement devices to change straightforwardly with a measure of a similar build or indirectly with a measure of an inverse development. It permits demonstrating that the test is substantial by contrasting it and an officially legitimate test. Content legitimacy is worried about a tests capacity to incorporate or speak to the majority of the substance of a specific develop.
According to Frankel and Wallen (2000), validity relates to the quality attributed to the degree to which they conform to establish knowledge or truth. It refers to the extent to which an instrument can measure, or, ought to have measured. The validity of the instruments will be done by designing the questionnaires and consulting the supervisors of the contents. Adjustments will be made according to the advice of the supervisor.
3.5.2 Reliability Test
Reliability refers to the consistency or rather the stability of the scores obtained from tests and assessment procedures. Mugenda and Mugenda (2003) argue that reliability is a measure of the degree to which a researchers’ instrument yields consistent results or data after repeated trials. To ensure reliability, Charles (1995), postulates that consistency with which survey or test things are addressed or people scores remain moderately the same can be resolved through the test-retest strategy at two unique circumstances. This method will involve administering the questionnaire at an interval of one week as a pilot test to the same group and then comparing the two scores. Comments that will be made by the pre-testing respondents will be used to adjust and improve the instrument.

3.6 Data collection methods and procedure
Data will be gathered through the administration of questionnaire to a cross-section of respondents drawn from the various categories. The respondents will be requested to fill the questionnaire as the researcher waits. This helps to reduce instances of non-responses. The questionnaires will also be left behind and picked later helping to increase the proportion of usable responses. Follow-ups will be done through telephone calls, e-mails and personal interviews to ensure a viable response rate for the study. The questionnaires will be examined to see if there are any errors, whether some information has been omitted if there is any ambiguity, if it is legible and whether it is relevant.

3.8 Data Analysis and Presentation
Data analysis refers to how investigations are conducted so as to obtain raw data after which a researcher manipulates the data numerically. The process of investigation usually ends up answering the ‘what’ and ‘how many’ questions. This research deals with quantifiable attributes. The answers from the questionnaires will be coded in relation to how they relate for easy Statistical Package for Social Sciences (SPSS) use as the most efficient and convenient processing and analyzing of data.
3.8 Ethical consideration

The main aim of ethics is to make sure that there is no harm or negative consequence arising from the process of research. Given the often sensitive relationships between researcher and respondents, reasonable safeguards will be built in this study based on ethical considerations and requirements. The following ways will address how participants were protected;

3.8.1 Informed consent

The researcher saw to it that the respondents agreed to take part in the process without any feeling of being pressured and were informed that information was being sought from them.

3.8.2 Voluntary participation

The participants were asked to verbally agree on whether they wanted to participate in the research and those that refused were left to be

3.8.3 Confidentiality

The potential respondents will not be identified in any manner as all that will be collected will only be handle by the researcher and research assistant.

3.8.4 Privacy

The respondents were assured that the information will not be shared and all discussed and collected will be limited to those concerned only.

3.8.5 Anonymity

Given the sensitivity of the information being collected, the respondents were asked not to mention their names in the questionnaire so as to ensure that they cannot be identified

3.9 Chapter Summary

The chapter presented the design of the research as both quantitative and qualitative methods of study. The population target as 90 participants from Happy Life Children's Home. The research instrument in the study is the questionnaire for data collection and data to be analyzed by use of SPSS and finally ways of protecting the respondents through ethical consideration was also included.
CHAPTER FOUR

RESEARCH FINDINGS AND DISCUSSION

4.0 Introduction
The chapter presents the findings obtained from the data collected in the field and therefore they are put into perspective by putting them in tables and figures and statistically having the final data represented in percentages for easy interpretation.

4.1 Presentation of Research findings
4.1.1 Demographic Information
The data presented was the personal information of the respondents where the age was determined and noted that female were 68 while men were 22 making it very clear that female participants were majority. The age had 8% below 22 years, 14% for 23-27 years, 28% for 28-33 years, 36% for 34-40 years and 14% for above 40 years and above. On the level of education it was noted that those with certificate course level qualification were 14%, diploma holders at 76%, bachelor’s degree at 6% and then the post graduate at 4%. The duration of service was short and it was established that those who had worked there for 1-2 years were 24%, those for 3-5 years were for 58% and those for 5 years and above for 18%.

Table 3 : Demographic Information

<table>
<thead>
<tr>
<th>Respondents’ characteristics</th>
<th>Frequency</th>
<th>Per cent</th>
</tr>
</thead>
<tbody>
<tr>
<td>Age</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Below 22</td>
<td>6</td>
<td>8%</td>
</tr>
<tr>
<td>23-27</td>
<td>12</td>
<td>14%</td>
</tr>
<tr>
<td>28-33</td>
<td>26</td>
<td>28%</td>
</tr>
<tr>
<td>34-40</td>
<td>35</td>
<td>36%</td>
</tr>
<tr>
<td>Above 40</td>
<td>12</td>
<td>14%</td>
</tr>
<tr>
<td>Gender</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Male</td>
<td>68</td>
<td>75%</td>
</tr>
<tr>
<td>Female</td>
<td>22</td>
<td>25%</td>
</tr>
<tr>
<td>Duration of work</td>
<td></td>
<td></td>
</tr>
<tr>
<td>1-2 years</td>
<td>21</td>
<td>24%</td>
</tr>
<tr>
<td>Age Group</td>
<td>Total</td>
<td>Percent (%)</td>
</tr>
<tr>
<td>-----------------</td>
<td>-------</td>
<td>-------------</td>
</tr>
<tr>
<td>3-5 years</td>
<td>52</td>
<td>58%</td>
</tr>
<tr>
<td>Above 5 years</td>
<td>27</td>
<td>18%</td>
</tr>
<tr>
<td>Certificate Course</td>
<td>12</td>
<td>14%</td>
</tr>
<tr>
<td>Diploma</td>
<td>69</td>
<td>76%</td>
</tr>
<tr>
<td>Bachelor’s degree</td>
<td>5</td>
<td>6%</td>
</tr>
<tr>
<td>Post graduate degree</td>
<td>4</td>
<td>4%</td>
</tr>
</tbody>
</table>

4.1.2 Extended Family on OVC programs

4.1.2.1 Emotional support of extended families on programs

The researcher sort to know the influence of emotional support for the orphans and vulnerable children to keep to the programs and the data was obtained from the respondents.

Table 4: Respondents on Emotional Support

<table>
<thead>
<tr>
<th>Emotional support</th>
<th>Target</th>
<th>Percent (%)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Yes</td>
<td>62</td>
<td>69</td>
</tr>
<tr>
<td>No</td>
<td>38</td>
<td>31</td>
</tr>
<tr>
<td>Total</td>
<td>90</td>
<td>100</td>
</tr>
</tbody>
</table>
Figure 2 Emotional Support

It was noted that 69% of the respondent accepted to emotional support having the influence on the orphans and vulnerable children to keep to the organizations programs designed for them while 31% did not agree.

4.1.2.3 Extended family failure to provide physical needs
The purpose was to know if the extended family fails to provide the physical needs and the response from the participants was tabulated on the table.

Table 5: Failure to provide physical needs

<table>
<thead>
<tr>
<th>Failure to provide physical needs</th>
<th>Target</th>
<th>Percent (%)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Strongly agree</td>
<td>34</td>
<td>38</td>
</tr>
<tr>
<td>Agree</td>
<td>30</td>
<td>33</td>
</tr>
<tr>
<td>Disagree</td>
<td>21</td>
<td>23</td>
</tr>
<tr>
<td>Strongly disagree</td>
<td>5</td>
<td>6</td>
</tr>
<tr>
<td><strong>Total</strong></td>
<td><strong>90</strong></td>
<td><strong>100</strong></td>
</tr>
</tbody>
</table>
It was established that 38% strongly agreed that extended family fails to provide physical needs like food, clothing and shelter to the orphans and vulnerable children, 33% agreed, 23% disagreed and then 6% strongly disagreed.

4.1.2.4 Difficulties of vulnerable children from extended families for education access

The aim was to establish the existence of difficulties of vulnerable children from extended family to access education and the results were recorded.

Table 6 : Difficulties to Access Education

<table>
<thead>
<tr>
<th>Difficulties to access education</th>
<th>Target</th>
<th>Percent (%)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Yes</td>
<td>64</td>
<td>71</td>
</tr>
<tr>
<td>Somehow</td>
<td>18</td>
<td>20</td>
</tr>
<tr>
<td>Not sure</td>
<td>6</td>
<td>6</td>
</tr>
<tr>
<td>No</td>
<td>2</td>
<td>3</td>
</tr>
<tr>
<td><strong>Total</strong></td>
<td><strong>90</strong></td>
<td><strong>100</strong></td>
</tr>
</tbody>
</table>
The results indicated that 71% affirmed that children from extended families have difficulties in accessing education, 20% for somehow, 6% were not sure and 3% did no affirm at all.

4.1.2.5 Vulnerability of OVC from extended family to peer pressure

This was to determine the vulnerability of vulnerable children from extended family to peer pressure and the tabulation was presented.

Table 7 : Vulnerable to Peer Pressure

<table>
<thead>
<tr>
<th>Vulnerable to peer pressure</th>
<th>Target</th>
<th>Percent (%)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Strongly agree</td>
<td>52</td>
<td>58</td>
</tr>
<tr>
<td>Agree</td>
<td>24</td>
<td>26</td>
</tr>
<tr>
<td>disagree</td>
<td>10</td>
<td>11</td>
</tr>
<tr>
<td>strongly disagree</td>
<td>4</td>
<td>5</td>
</tr>
<tr>
<td>Total</td>
<td>90</td>
<td>100</td>
</tr>
</tbody>
</table>
It was determined that 58% strongly agreed, 26% agreed, 11% disagreed and 5% strongly disagreed that children from the orphans and vulnerable children from extended family are more vulnerable to peer pressure that other children.

4.1.3 Socio-economic on OVC programs

4.1.3.1 OVC lacking basic health care due to economic situation
The researcher sort to know the lack of basic health care by orphans and vulnerable children being caused by their economic situations.

Table 8: Lack of basic Health care

<table>
<thead>
<tr>
<th>Lack of basic health care</th>
<th>Target</th>
<th>Percent (%)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Yes</td>
<td>72</td>
<td>80</td>
</tr>
<tr>
<td>No</td>
<td>18</td>
<td>20</td>
</tr>
<tr>
<td>Total</td>
<td>90</td>
<td>100</td>
</tr>
</tbody>
</table>
Figure 6 Lack of Basic Health Care

It was noted that 80% of the respondents agreed that lack of basic health care among the orphans and vulnerable children is due to their economic situations.

4.1.3.2 Child labor due to economic constraints
The aim was establish if the child labor is majorly influenced by the economic disadvantages the orphans and vulnerable children face.

Table 9: Child Labor

<table>
<thead>
<tr>
<th>Child labor</th>
<th>Target</th>
<th>Percent (%)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Strongly agree</td>
<td>65</td>
<td>72</td>
</tr>
<tr>
<td>Agree</td>
<td>20</td>
<td>22</td>
</tr>
<tr>
<td>Disagree</td>
<td>4</td>
<td>5</td>
</tr>
<tr>
<td>Strongly disagree</td>
<td>1</td>
<td>1</td>
</tr>
<tr>
<td><strong>Total</strong></td>
<td><strong>90</strong></td>
<td><strong>100</strong></td>
</tr>
</tbody>
</table>
The results from the data showed that 72% of the respondents strongly agreed that child labor is majorly caused by the economic disadvantages orphans and vulnerable children face, 22% agreed, 5% disagreed and 1% strongly disagreed.

4.1.4. Counseling on OVC programs

4.1.4.1 OVC programs solve mental development issues

This was to seek the solving of mental development issues in orphans and vulnerable children being sort by the programs designed for them.

Table 10: Mental Development

<table>
<thead>
<tr>
<th>Mental development issues</th>
<th>Target</th>
<th>Percent (%)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Yes</td>
<td>22</td>
<td>25</td>
</tr>
<tr>
<td>No</td>
<td>68</td>
<td>75</td>
</tr>
<tr>
<td>Total</td>
<td>90</td>
<td>100</td>
</tr>
</tbody>
</table>
The result indicated that 75% did not agree that mental development issues are sorted by the programs done by organizations that care for the orphans and vulnerable children while 25% did not agree to it.

4.1.4.2 Emotional intelligence in OVC programs important for program success.

The research wanted to know if emotional intelligence for OVC is the most important aspect for the office programs and the results were tabulated.

Table 11: Emotional Intelligence

<table>
<thead>
<tr>
<th>Emotional intelligence</th>
<th>Target</th>
<th>Percent (%)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Yes</td>
<td>32</td>
<td>35</td>
</tr>
<tr>
<td>Somehow</td>
<td>26</td>
<td>28</td>
</tr>
<tr>
<td>Not sure</td>
<td>20</td>
<td>22</td>
</tr>
<tr>
<td>No</td>
<td>12</td>
<td>15</td>
</tr>
<tr>
<td><strong>Total</strong></td>
<td><strong>90</strong></td>
<td><strong>100</strong></td>
</tr>
</tbody>
</table>
It was noted that 35% of the respondents were for yes, 28% for somehow, 22% for not sure and 15% for no to emotional intelligence in terms of managing feelings and emotions in devastating situations of the OVC that determines the success of the OVC programs.

4.1.5 Role of the church on OVC programs

4.1.5.1 Churches that offer OVC programs
The purpose was to establish the number of the known churches that have OVC education programs.

Table 12: Known Church OVC programs

<table>
<thead>
<tr>
<th>Known church OVC programs</th>
<th>Target</th>
<th>Percent (%)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Yes</td>
<td>19</td>
<td>21</td>
</tr>
<tr>
<td>No</td>
<td>71</td>
<td>79</td>
</tr>
<tr>
<td>Total</td>
<td>90</td>
<td>100</td>
</tr>
</tbody>
</table>
The results indicated that 21% of the respondents knew of the churches that offered OVC programs while 79% did not know any church offering such programs.

4.1.5.2 Impact of church on OVC moral values
The research sort to know the impact the church has on imparting the moral values to the orphans and vulnerable children.

Table 13: Impact of Known Church OVC moral Values

<table>
<thead>
<tr>
<th>Known church OVC programs</th>
<th>Target</th>
<th>Percent (%)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Great impact</td>
<td>22</td>
<td>24</td>
</tr>
<tr>
<td>Normal impact</td>
<td>20</td>
<td>22</td>
</tr>
<tr>
<td>Less impact</td>
<td>39</td>
<td>43</td>
</tr>
<tr>
<td>No impact</td>
<td>9</td>
<td>11</td>
</tr>
<tr>
<td><strong>Total</strong></td>
<td><strong>90</strong></td>
<td><strong>100</strong></td>
</tr>
</tbody>
</table>
Figure 11 Impact Of known Church OVC Moral Values

It was therefore identified that 24% agreed to the church having great impact in imparting moral values to the OVC, 22% for normal impact, 43% for less impact and 11% for no impact.

4.2 Limitation of the study

The study will be limited to Happy Life Children’s home due to limited resources for the researcher to conduct a research to other faith based institutions for orphans and vulnerable children that are very far from each other. The researcher also experienced lack of cooperation from the management in that they did not want to give permission for research to be carried out in the organization, this was however solved when an introduction letter indicating that it was for academic purposes was given hence, permission was granted to distribute questionnaires to the respondents.
4.3 Chapter summary

The chapter presented the findings of the study from the questionnaires by putting them into tables and figures for easy interpretation. Each table and figure tabulated according to research questions have explanations on how the data on the table and figures are. The information provided are in summary form.
CHAPTER FIVE

SUMMARY, RECOMMENDATIONS AND CONCLUSIONS

5.0 Introduction
The chapter provides answers to the research questions by summarizing the collected data reported in chapter four, the conclusion is derived from summary and there the recommendations made from the conclusions.

5.1 Summary
5.1.1 Demographic Information
The data presented indicated that there were more female at 75% and men 25% showing female dominated population. Majority of the respondents were between the ages of 28-40 years at 64% meaning it composed of young adults as majority. The organization had employed mostly diploma holder at 76% followed by certificate course holders at 14%. The duration of service was characterized by 3-5 years at 58% and 1-2 years at 24%.

5.1.2 Extended family
It was noted that 69% of the respondent accepted to emotional support having the influence on the orphans and vulnerable children to keep to the organizations programs designed for them while 31% did not agree. On the physical needs, 38% strongly agreed that extended family fails to provide physical needs like food, clothing and shelter to the orphans and vulnerable children, 33% agreed, 23% disagreed and then 6% strongly disagreed. The results indicated that 71% affirmed that children from extended families have difficulties in accessing education, 20% for somehow, 6% were not sure and 3% did no affirm at all. It was determined that 58% strongly agreed, 26% agreed, 11% disagreed and 5% strongly disagreed that children from the orphans and vulnerable children from extended family are more vulnerable to peer pressure that other children.

5.1.3 Socio-economic
It was noted that 80% of the respondents agreed that lack of basic health care among the orphans and vulnerable children is due to their economic situations. The results from the data showed that 72% of the respondents strongly agreed that child labor is majorly
caused by the economic disadvantages orphans and vulnerable children face, 22% agreed, 5% disagreed and 1% strongly disagreed.

5.1.4 Counseling
The result indicated that 75% did not agree that mental development issues are sorted by the programs done by organizations that care for the orphans and vulnerable children while 25% did not agree to it. It was noted that 35% of the respondents were for yes, 28% for somehow, 22% for not sure and 15% for no to emotional intelligence in terms of managing feelings and emotions in devastating situations of the OVC that determines the success of the OVC programs.

5.1.5 Role of the church
The results indicated that 21% of the respondents knew of the churches that offered OVC programs while 79% did not know any church offering such programs. It was therefore identified that 24% agreed to the church having great impact in imparting moral values to the OVC, 22% for normal impact, 43% for less impact and 11% for no impact.

5.2 Recommendations
5.2.1 Demographic Information
There is need for the organization to get more personnel with higher academics levels especially those with bachelor’s degree and post graduates to bring in much concrete expertise.

5.2.2 Extended Family
More studies to be pursued to identify the prevailing factors that make the orphans and vulnerable children more vulnerable to peer pressure and the solutions to them.

5.2.3 Socio-economic
More options to be explored on the existing health care that the orphans and vulnerable children can benefit and especially within the OVC programs.

5.2.3 Counseling
The OVC programs require factors in emotional intelligence that will be a factor in propelling the program to succeed.

5.2.4 Role of the church
The churches need to start offering OVC programs since every place has this kind of children and the program must ensure proper impact on the moral values of orphans and vulnerable children.

5.3 Conclusion
5.3.1 Demographic information
It was clear that there were more female employees than men where majority of the total population were the young adults. The level of education had mostly the diploma holders with the duration of service being between 2-5 years.

5.3.2 Extended Family
Emotional support plays a key role in keeping the OVC to the programs designed for them. Also the extended family fails to provide the physical needs like food, clothing and shelter to the OVC. It was clear that children from extended family have difficulties in accessing education. Vulnerable children from extended family are more vulnerable to peer pressure that other children.

5.3.3 Socio-economic
Lack of basic health care among the orphans and vulnerable children is due to their economic situations. Also child labor is majorly caused by the economic disadvantages orphans and vulnerable children face.

5.3.4 Counseling
Mental development issues are sorted by the programs done by organizations that care for the orphans and vulnerable children. It was confirmed that emotional intelligence in terms of managing feelings and emotions in devastating situations of the OVC determines the success of the OVC programs.
5.3.5 Role of the church

Very few churches are known to offer the OVC programs and that those offering have not yet effected on the required impact on imparting moral values to the OVC.
REFERENCES


APPENDIX I

INTRODUCTORY LETTER

Titus Brian Mwangi Mundia

P.O Box 123-00506

Kiserian,

Nairobi.

Dear Sir,

RE: REQUEST FOR COMPLETION OF QUESTIONNAIRE

My name is Titus Mundia, a student of the Management University of Africa pursuing a Bachelor of Arts Degree in Development Studies (Project Management option).

I hereby request for your permission to undertake my research project and ultimately issue questionnaires to the employees and children in your organization for purposes of collecting data for my research project, which is required as a fulfillment for the completion of my degree. You can be rest assured that the data and information collected will be treated with utmost confidentiality as the purpose is of academic research only.

Your consideration will be greatly appreciated.

Yours sincerely

Titus Mundia
APPENDIX II

QUESTIONNAIRE ON FACTORS AFFECTING PERFORMANCE OF ORPHANED AND VULNERABLE CHILDREN PROGRAMMES IN FAITH BASED ORGANIZATION

Section A: Demographic Information

1. Your gender?
   Male [ ]
   Female [ ]

2. What is your age bracket?
   Below 22 years [ ]
   23-27 years [ ]
   28-33 years [ ]
   34- 40 years [ ]
   Above 40 years [ ]

3. Highest level of education?
   Certificate [ ]
   Diploma [ ]
   Bachelor’s degree [ ]
   Post graduate degree [ ]

4. Duration of service at Kenya Literature Bureau?
   1 – 2 years [ ]
   3- 5 years [ ]
   Above 5 years [ ]
**Section B: Extended Family**

5. Does the emotional support of the vulnerable children by extended family help them to keep to the programs meant to empower them?
   
   Yes [ ]

   No [ ]

6. The physical needs of the vulnerable children like food, clothing and shelter are some of the things that are essential for children. Do you agree that extended family may fail to provide such needs that affect the OVC program?
   
   Strongly agree [ ]

   Agree [ ]

   Disagree [ ]

   Strongly disagree [ ]

7. Do vulnerable children from extended families have difficulties in accessing education?
   
   Yes [ ]

   Somehow [ ]

   Not sure [ ]

   No [ ]

8. Do you agree that vulnerable children from extended family are more vulnerable to peer influence than other children?
   
   Strongly agree [ ]

   Agree [ ]

   Disagree [ ]

   Strongly disagree [ ]
**Section C: Socio-economic**

9. Do vulnerable children lack the basic health care due to their economic situation?
   - Yes [ ]
   - No [ ]

10. Access to education for the disadvantaged children is real in our society. What impact does the programs done for intervention have on the education access to these children?
   - Great impact [ ]
   - Normal impact [ ]
   - Less impact [ ]
   - No impact [ ]

11. Do you agree that child labor is majorly influenced by economic disadvantages for orphans and vulnerable children?
   - Strongly agree [ ]
   - Agree [ ]
   - Disagree [ ]
   - Strongly disagree [ ]

**Section D: Counseling**

12. Does the programs for orphans and vulnerable children assist in solving mental development issues that they may have faced?
   - Yes [ ]
   - No [ ]
13. Orphans and vulnerable children sometimes face situations that are very traumatizing to them, lack of counseling in programs for such children renders the program unsuccessful. Do you agree?
   - Yes
   - Somehow
   - Not sure
   - No

14. Do you agree that emotional intelligence in terms of managing feeling and emotions even in the most devastating and trying times for orphans and vulnerable children is the most important aspect in sustaining the programs done by faith based organization?
   - Strongly agree [ ]
   - Agree [ ]
   - Disagree [ ]
   - Strongly disagree [ ]

**Section E: Role of church**

15. Do you know of any church that has education programs that assist orphans and vulnerable children to access education?
   - Yes [ ]
   - No [ ]

16. Do you agree that the church facilitates access to legal services by the orphans and vulnerable children?
   - Strongly
   - Agree
Disagree

Strongly disagree

17. What impact does the church have on imparting moral values to the orphans and vulnerable children?
   Great impact
   Normal impact
   Less impact
   No impact