

INFLUENCE OF COMMUNITY COUNSELING ON FAMILY WELLBEING OF FIRST TIME PARENTS IN KAKAMEGA COUNTY, KENYA

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Abstract: The addition of a newborn infant to the family brings about more profound changes than any other developmental stage of the family life cycle. This may lead to marital conflict and dissatisfaction, separation or divorce if not managed well. In Kenya, the problems exist despite the fact that counseling programs are in place in various institutions at the county level. New weds are often prepared for marriage and not parental responsibility. The purpose of this study was to assess the influence of community counseling on family wellbeing of first time parents in Kakamega County, Kenya. The specific objective was to investigate the influence of religious leaders in first time parent family counselling on family wellbeing in Kakamega County. The study was guided by general strain Theory of social behaviour. The study employed descriptive survey research design. It was carried out in Kakamega County, Kenya. The target population was 5568 comprising First-time Parent Families, religious leaders, local leaders and professional counselors. The sample size was 373 realised through Yamane formular. Data was collected using interviews, document analysis and questionnaires. Reliability and validity of the instrument was ascertained through Cronbach Alpha Coefficient test and expert opinion respectively. Analysis of data was analyzed using descriptive statistics and inferential statistics, aided by the Statistical Package for Social Sciences (SPSS) computer program. The findings were presented using tables, charts and figures. The study established that religious leaders have positively and significantly influence family well-being ($R=0.456$, $P=0.000$). The study recommended that religious leaders should be trained in counseling since their counseling services besides religious nourishment contribute positively to family-wellbeing.

Keywords: First Time Parent, Religious leaders, Counselling, Kakamega County, Family Well-being.

I. INTRODUCTION

The addition of a newborn infant to the family brings about more profound changes than any other developmental stage of the family life cycle. New roles need to be learned, new relationships developed, and existing relationships realigned (Dankoski, M2011). Raising a child is probably the most challenging responsibility faced by a new parent (Nyström & Öhrling, 2014). Meleis (2015) has proposed that transition is one of the concepts central to nursing. Families are confronted with varying forms of transition throughout family life, and the transition to parenthood is developmental (Elek, Hudson & Bouffard, 2013). Uncertainty and disorganization threaten family members with disruption, and challenge their efforts to reorganize and reconstruct their lives (Walsh, 2015). There are studies about the transition to parenthood as it occurs during pregnancy, the postpartum period, and up to 18 months postpartum (Nyström, 2014). According to Javadifar et al. (2016), mothering is a lifetime occupation for women. Although it is mothers 'transition to parenthood that is most often studied, the transition to fatherhood has also been addressed (Ahlborg & Strandmark, 2011).

The first year is the basis of a child's development and, according to Cataldo (2007) is significant for growth and development. Parents are important models for their children, and childhood is influenced by their competence and ability to create a harmonious and secure environment for their children. Western societies today are characterized by great complexity, fast changes, and new conditions for parenthood (Haworth & Lewis, 2015). The number of couple separations in Sweden is increasing (Roman, 2017) which is leading to many children experiencing strain during the divorce. Child health nurses are the people within the health system who will meet parents and infants regularly and whose role is to support parents in their parenthood, especially during the first year of the child's life. Therefore it seems important to understand parents' experiences.

Gibson and Mitchell (2008), say that counseling is man's heritage from the past. According to them, it is quite possible that the earliest occasion (although not confirmed) in which humans sought a counselor, was when Adam reaped the consequences of his eating the apple in the Garden of Eden. In a later occasion, God Himself gave counseling to the children of Israel to help them change their waste disposal behavior by telling them to design a tea place outside the camp where they could go to relieve themselves. "As part of your equipment have something to dig with and after relieving yourself, turn back and cover that which comes out of you"(Nyarangi, 2011). Gibson and Mitchell (2008), continue to say that no proof exists of this early beginning to counselling, but an abundance of evidence suggests that persons throughout the ages have sought the advice of others believed to possess superior knowledge, in sights or experience. Perhaps the first counter parts of the present-day counsellor were the chieftains and elders to whom the youths turned or were sent to for advice and guidance. In nearly civilizations, the philosophers, priests and other representatives of gods and religions assumed the role of advising and offering counsel.

Few times first time parents require as much adaptation and reorganization. Often couples who had relatively egalitarian relationships prior to the birth of their child find themselves in "traditional" roles highly influenced by stereotypical notions of gender once they become parents. This resulted to decreased sense of intimacy as well as decreased satisfaction in their relationship (Hirschberger, Srivastava & Cowan, 2009). Past commonalities may be overshadowed .by the current focus on different domains, and men and women may resent the restricted roles into which they have fallen or have been forced. New parents must grapple with the pragmatic concerns of child care. They also struggle with personal and cultural expectations of motherhood and fatherhood, and must often adjust to new divisions of labor, power, and intimacy. Partners who were once best friends may feel worlds apart.

The government of Kenya has tried to fill up this gap by introducing counselling in the communities with the hope that it will fill up the part traditionally played by grandparents (Nyarangi & Obwoye, 2015). The counselling profession in Kenya is in its formative years. The growth and development of the counselling profession in Kenya are closely associated with the evolution of traditional societal structures caused by multiple social and economic factors over the last 20 years. Although the "talking cure" is hardly new among Kenyans, the contemporary Western concept of a counsellor is new and one that the wider Kenyan community has been slow to embrace. Historically, the notion of consulting with a stranger about personal or family problems was an unusual concept and even frowned upon. Social challenges that might cast a shadow on the name and reputation of the family had to be resolved privately.

First-time parents in Kakamega County are experiencing many family related problems. These problems range from disrespect, financial challenges, violence, drug and substance abuse and divorce cases. Local administrators in Kakamega County handle at least two people per day due to couple conflicts, marital dissatisfaction and role dissatisfaction (GoK, 2017). Cases of separation and divorce are at a rate of 5% in the county due to marital dissatisfaction and couple conflicts (Kakamega Law Court 2017). Financial challenges due to poverty index in the county are still a menace even by now as it stands at 57% (KNBS, 2015). The police unit receives and records up to 500 criminal and civil cases in their daily operations book at Kabras Police Station within 12 months, due to marital conflicts, violence, drug and substance abuse (GoK, 2018).

People who dominate as far as crime is concerned as obtained from Occurrence Book (OB) in Kabras police station in Kakamega County was newly married (GoK, 2016). They account for more than fifty percent of all marital cases handled by local administrators (GoK, 2016). The final product of this is dysfunctional families which affect the social fabric as well as economic progress of not only the family but also the community and the nation at large.

There are few studies on the relationship between community counselling and family wellbeing among first time parents. Most of the studies of these nature have focused on adolescence (Gachara and Wasanga, 2011), women (Nyarangi, 2011)

and general family marital problems (Musau, 2016). This leaves a significant knowledge gap on the first time parent family wellbeing in Kakamega County. This scenario is alarming and that is why the study sought to assess the influence of community counselling on family wellbeing with specific reference to first time parents in Kakamega County.

Statement of the Problem

First-time parents in Kakamega County are experiencing many family related problems ranging from disrespect, financial challenges, domestic violence, drug and substance abuse and separation cases. Our Communities have a lot of social, economic and academic challenges. They need psychological support to enable them to overcome or cope with the challenges in order to get on with their lives smoothly. This calls for the establishment of counseling programs in the communities. Families and People undergo emotional and psychological changes, they experience trauma and exhibit behavior patterns which may be harmful to their health; they are always in conflict with family expectations and norms. The traditional society offered the support needed at this stage. With the rapid cultural and technological change, however, the setup got broken. Aroko (2014) notes that people require counseling' services now than ever because they are living in a considerably more complex world than the one often years ago. Basically this is the reason as to why there is a need for having well-established and active counseling programs in the community.

Records from Kakamega County shows that they handle at least two cases per day (GoK, 2017) despite the existence of structured and informal counseling services in the county provided by the religious organizations, local administrators and professional counseling. Most studies on counseling focus on adolescence, women and general family marital problems and ignore the plight of first time parent families. This leaves a significant knowledge gap on the first time parent family wellbeing in Kakamega County as related to available counseling services thus this study sought to find.

Objective of The study

The specific objective of this study was to

- i. Investigate the influence of religious leaders' counselling on family wellbeing of first time parents in Kakamega County.

II. LITERATURE REVIEW

Theoretical Framework

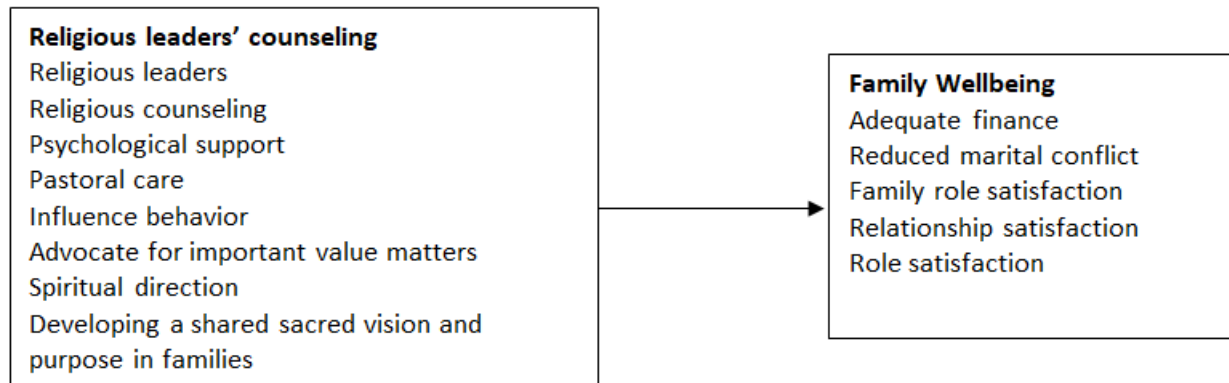
This study adopted General Strain Theory of Social Behavior. According to general strain theory of social behavior it posits that people will rise up and oppose situations that pose a strain to their peaceful and balanced life and environment. (Turanovic & Pratt, 2013) general strain theory posits that strain leads to negative emotions, which may lead to a number of outcomes including delinquency. The specific strains discussed in the theory include the failure to achieve positively valued goals (e.g. money or status), the removal of positively valued stimuli (e.g. physical valued possession), and the presentation of valued stimuli (e.g. physical abuse).

While many specific types of strain may fall into these categories, Agnew has attempted to specify those conditions under which strain may lead to crime (Listwan, Sullivan, Agnew, Cullen & Colvin, 2013). According to general strain theory, individuals experiencing strain may develop negative emotions, including anger, when they see adversity as imposed by others, resentment when they perceive unjust treatment by others, and depression or anxiety when they blame themselves for the stressful consequence. These negative emotions, in turn, necessitate coping responses as a way to relieve internal pressure.

Responses to strain may be behavioral, cognitive or emotional and not responses are delinquent. Coping via illegal behavior, drug and substance abuse, family conflicts and violence may be true especially for first-time parents because of their limited legitimate coping resources, great family pressure and inability to escape many stressful and frustrating family environments. In this case, when first-time parents meet the above mentioned strains, they are likely to react negatively leading to tension, disputes, conflicts and even crime. An individual in a marital relationship may react negatively if some basics such as lack of finance, good shelter, food or even security are denied or not well provided based on Abraham Maslow's hierarchy of needs. It therefore formed part of my study to see how best First time Parents could be counseled to learn on coping mechanism where need be (Carducci, 2009).

Conceptual Review

The framework conceptualizes the relationship between independent, dependent and intervening variables. Below is its diagrammatic expression.



Source: Researcher (2018)

Figure 1.0: Conceptual Framework

From Figure 1, Community counseling which is independent variable is conceptualized by the role of religious leaders counselling, local leaders and professional counseling players. Religious institutions have counseling units which counsel first time parents used by religious leaders on various aspect of marriage and their contribution to family wellbeing cannot be ignored. The dependent variable was family wellbeing which is measured by the absence of couple conflicts, drug and substance abuse, marital dissatisfaction.

Empirical Review

Considering the need for religion in counseling, it is important to consider that individual communities have cultural values and a system of religious beliefs peculiar to each of them. Culture and religion therefore, continue to influence the behavior of individuals in the community. Religion can be used in advocating for sexual behavior change. Religious values and norms focus on encouraging people to cleave to one another, develop unity and intimacy and to remain faithful to a single partner in marriage. This is well taught in Christianity (Doehring, 2006)

The transition to parenthood seems to be most difficult for women, largely because they are typically the primary caretakers of their babies (Florsheim, Sumida & McCann, 2013). The individual difficulties women experience when they become mothers includes extreme fatigue experienced by the vast majority of new mothers (Elek, Hudson & Fleck, 2012). Men seem to experience more strain while their partners are pregnant, and experience increased well-being after their children are born (Keizer, Dykstra & Poortman, 2010). Some fathers experience dysphonia in the early months of new parenthood, but the impact of this disappears by the end of the child's first year (Kollbrunner & Seifert, 2013). New fathers also become more involved (psychologically and in terms of actual time spent) in their work outside the home (Habib, 2012).

Today counseling is done by different religions; especially in Christianity. The science of meditation is also practiced along with counseling by other religions, especially Buddhism, Bahai and Hare Krishna among others. These religious faiths maintain that meditation can always help to cut the physical and psychological facets of negative religions. People also seek the clergy because the symbols and expectations associated with the church make it very clear where the pastoral counselor stood on important value matters. The goal of marriage is to make the relationship be good and of God-fearing in God's sight. To accomplish this goal, both spouses have to trust God and look to Him for strength, wisdom and marital love. Therefore there should be no escape avenue (divorce) in marriage. Husband and wife relationship is the priority one within the family. God has positive intention for families as He says He hates divorce (Malachi 2:16) (Blackaby & Blackaby, 2011).

The pastoral counselor brings to marital and family counseling a special perspective that is not available from other professionals. This counselor also brings to the table spiritual direction. The purpose of pastoral care is to help people to union with God. Preaching, liturgy, teaching, admonishing, pastoral visiting and feeding the hungry are all forms of

pastoral care. All these ministries can be undertaken with the sole purpose of helping people to union with God and aid in the process of curing the soul (Rodgerson, 2012). Religious belief and practice helped couples prevent conflict by assisting them in developing a shared sacred vision and purpose, which in turn reduced marital conflict by decreasing stress levels in marriage and unifying couples. Practitioners can work to help couples create and sustain a shared vision that, ideally, has its roots in a set of transcendent spiritual and religious ideas and ideals that can motivate and inspire the couple toward relational unity. Practitioners can help couples explore what aspects of their religious beliefs might help them prevent marital contention (Lambert and Dollahite, 2006).

In Nigeria, Rotimi (2014) found out that the influence of Moral/Religious Counseling has significant effect on marital issues especially on the cultism which was found to disintegrate a lot of families and community fabric. Zipporah (2012) found out that use of religion in counseling is effective, because majority of Kenyan have a religious background. It was useful in counseling patients who were found to be affected or infected by HIV/AIDS scourge. Muriithi (2016) proved that, the role of Christian pastoral care and counseling has not been fully exploited in the rehabilitation process of the delinquent children and the juveniles here in Kenya. Although some studies have addressed the role of scripture as part of Christian counseling (Ripley, et al., 2014) there exists a dearth of research focusing on religious organization counseling and its effect on family well-being. The current study sought to add to the narrow base of the literature reviewed.

III. METHODOLOGY

The research employed mixed methodology that consisted of qualitative and quantitative methods. This study was carried out using descriptive survey design. According to Veal (2017) it intends to present facts about the nature and status of a situation as it exists at the time of the study. The study was carried out in Kakamega County. The County comprises of twelve Sub-counties, sixty wards, one hundred and eighty seven Village Units and four hundred Community Areas. The target population was 5,568 first time parents (County Commissioner's office Annual report 2017). The key informants in this study were the local leaders, religious leaders and professional counselors within the county. A sample size of 373 was drawn using Yamane formula from 5,568. Stratified random sampling was used to select respondents randomly from each stratum. The distribution is as shown in Table 1.0 below

Table1.0: Sample Size

Target Respondents	Frequency	Sample Size	Percentage
First Time Parent	4,543	304	81.5
Religious Leaders	577	39	10.46
Professional counselors	269	18	4.83
Local Leader	179	12	3.22
Total	5,568	373	100

Source: Researcher (2020)

Data was collected using questionnaires, interview schedule and document analysis guide. The researcher consulted the experts from the department at Mount Kenya University on the appropriateness of the research instruments hence content validity. To measure the reliability, the Alpha (Cronbach) technique was employed. Kline (1999) noted that acceptable value for Cronbach's alpha is between 0.7 and 0.9 of which the study adopted. The instruments were reliable as they had Cronbach's alpha of 0.818 which is between 0.7 and 0.9. Data collected using questionnaires was subjected to quantitative and qualitative analysis. Quantitative analyses were done through computer program-Statistical package for social sciences (SPSS). This included Pearson correlation analysis for inferential statistics while descriptive statistics comprised of frequency, mean, percentage and standard deviation. Results was presented in; percentages, tables, pie-charts, bar graphs and frequencies.

IV. FINDINGS AND DISCUSSIONS

Descriptive Statistics

A. Family well being

The respondents were asked to mention the extent they rated their family wellbeing by using a scale of not all, Low extent, moderate extent, great extent and very great extent. The results are indicated in Table 2.

Table 2: Family wellbeing

	Frequency	Percentage	Mean	Sd. Dev
Family disagreement	239	76	4.092	.978
Drug and Substance Abuse	273	87	4.464	.0746
Marital Dissatisfaction	248	79	4.053	.0361
Individual Wellbeing	257	82	4.054	1.064
Role Dissatisfaction	270	86	4.213	1.008

Key: 1- not at all, 2-Low extent, 3-moderate extent, 4-great extent, 5-very great extent

Source: Researcher (2020)

The results in table 2 above show that 239(76%) of the respondents were felt Family disagreement was on great extent (mean 4.092), 273(87%) felt Drug and Substance Abuse was on great extent(mean4.464), 248 (79%) felt Marital Dissatisfaction was on great extent (mean 4.053), 257(82%) felt Individual Wellbeing was on great extent (mean 4.054) and 270 (86%) felt Role Dissatisfaction was on great extend (mean 4.213).

B. Religious Leaders Counselling

The objective of the study was to investigate the influence of religious leaders' counselling on family wellbeing of first time parents in Kakamega County. The respondents were asked to rate the extent they agreed with the following statements regarding the influence of religious leaders in community counseling. The respondents were asked to indicate the level of agreement from strongly disagree (1) to strongly agree (5) in regard to religious leaders counselling. The results are as shown in Table 3.0.

Table 3: Descriptive Results for Religious Leaders Counselling

	Frequency	Percentage	Mean	Sd. Dev
My issues were appropriately addressed through religious counseling	245	78	4.193	.908
I was satisfied and contented with religious counseling	257	82	4.362	.746
After attending religious counseling, we as a first time parent are living in harmony	251	80	4.243	.361
Religious counseling enabled me to acquire self awareness	239	76	4.334	.864
Religious counseling enabled me to gain coping mechanism	264	84	4.313	1.108

Key. 5=Strongly Agree, 4=Agree, 3=Neutral, 2= Disagree, 1= Strongly Disagree

Source: Researcher (2018)

The results in table 3 above s cxvzhow that 245 (78%) of the respondents agree (mean 4.193) that their issues were appropriately addressed through religious counseling, 257 (82%) agree (mean 4.362) that they were satisfied and contented with religious counseling, 251 (80%) agree (mean 4.243) that after attending religious counseling, for the first time parent were living in harmony, 239 (76%) agree (mean 4.334) that religious counseling enabled them to acquire self-awareness and 264 (84%) agree (mean 4.313) that religious counseling enabled them to gain coping mechanism.

Inferential Statistics

Inferential statistics for this objective entailed Pearson's correlation analysis. The results are as shown in Table 4.0 below

Table 4.0: Direct Influence of Religious Leaders Counselling on Family Wellbeing

Correlations	
Religious leaders Counselling	Family Well-Being
Pearson Correlation	.456**
Sig. (2-tailed)	.000
N	314

** . Correlation is significant at the 0.01 level (2-tailed).

Source: Field Data (2018)

The analysis results in table 4.0 above show that religious leaders (Religious counselling, psychological support, pastoral care, influence behavior, advocate for important value matters, spiritual direction and developing a shared sacred vision and purpose in families) positively and significantly family well-being (emotional, Psychological, Social, holistic growth and reduced marital conflict) at $r=0.456^{**}$, $p<.01$ significant level.

Discussion

The results showed that the respondents agree that their issues were appropriately addressed through religious counseling, that they were satisfied and contented with religious counseling, that after attending religious counseling, for the first time parent were living in harmony, that religious counseling enabled them to acquire self-awareness and that religious counseling enabled them to gain coping mechanism.

The correlation analysis results established that religious leaders (Religious counselling, psychological support, pastoral care, influence behaviour, advocate for important value matters, spiritual direction and developing a shared sacred vision and purpose in families) positively and significantly family well-being (emotional, Psychological, Social, holistic growth and reduced marital conflict) at $r=456^{**}$, $p<.01$ significant level.

The findings of this study are in agreement with that of Rotimi (2014) in Nigeria who found out that the influence of Moral/Religious Counseling has significant effect on marital issues especially on the cultism which was found to disintegrate a lot of families and community fabric. Zipporah (2012) found out that use of religion in counselling is effective, because majority of Kenyan have a religious background. It was useful in counseling patients who were found to be affected or infected by HIV/AIDS scourge. Muriithi (2016) proved that, the role of Christian pastoral care and counselling has not been fully exploited in the rehabilitation process of the delinquent children and the juveniles here in Kenya. Although some studies have addressed the role of scripture as part of Christian counseling (Ripley, et al., 2014), there exists a dearth of research focusing on religious organization counseling and its effect on family well-being.

V. CONCLUSION AND RECOMMENDATION

The correlation analysis results established that religious leaders counselling which entails Religious counselling, psychological support, pastoral care, influence behavior, advocate for important value matters, spiritual direction and developing a shared sacred vision and purpose in families positively and significantly family well-being indicators such as emotional, Psychological, Social, holistic growth and reduced marital conflict. Therefore, the study concluded that Religious leaders' counselling have a moderate positive and significant influence on first time parents' wellbeing.

The study recommended that every religious leader should be trained in counselling since their counselling services contribute positively to family-wellbeing. Besides, there is need for capacity building so that they can add professionalism in their family counselling sessions. On the other hand, government and other stakeholders such as non-governmental organization should provide adequate resources so as they can effectively offer counselling services to first time parents.

REFERENCES

- [1] Agbaje, A. A., & Eyo, U. E. (2011). Counselling Psychologists'skills, Educational Reforms And Innovations In Nigeria Primary Schools. *International Journal of Academic Research*, 3(5).
- [2] Agostini, F., Neri, E., Dellabartola, S., Biasini, A., & Monti, F. (2014). Early interactive behaviours in preterm infants and their mothers: influences of maternal depressive symptomatology and neonatal birth weight. *Infant Behavior and Development*, 37(1), 86-93.
- [3] Ahlborg T, Strandmark M. (2011). The baby was the focus of attention - first-time parents' experiences of their intimate relationship. *Scand J Caring Sci.*;15:318–25.
- [4] Ahlborg, T., & Strandmark, M. (2011). The baby was the focus of attention—first-time parents' experiences of their intimate relationship. *Scandinavian Journal of Caring Sciences*, 15(4), 318-325.
- [5] Ahlborg, T., Dahlöf, L. G., & Hallberg, L. R. M. (2015). Quality of the intimate and sexual relationship in first-time parents six months after delivery. *Journal of Sex research*, 42(2), 167-174.
- [6] Akaranga, S. I., & Makau, B. K. (2016). Ethical Considerations and their Applications to Research: a Case of the University of Nairobi. *Journal of educational policy and entrepreneurial research*, 3(12), 1-9.

- [7] Anyama, S. C. (2012). *Assessment and Management of Commitment and Conflict Experienced by Educated Stay-at-Home Mothers in Lagos State* (Doctoral dissertation).
- [8] Appleyard, K., Berlin, L. J., Rosanbalm, K. D., & Dodge, K. A. (2011). Preventing early child maltreatment: Implications from a longitudinal study of maternal abuse history, substance use problems, and offspring victimization. *Prevention Science, 12*(2), 139-149.
- [9] Ariplackal, R., & George, T. S. (2015). Psychological components for marital distress and divorce in newlywed Indian couples. *Journal of Divorce & Remarriage, 56*(1), 1-24.
- [10] Aroko, R. A. (2014). *Challenges facing effective implementation of guidance and counseling services in higher learning institutions in Tanzania: a case of The University of Dodoma* (Doctoral dissertation, The University of Dodoma).
- [11] Haworth, J., & Lewis, S. (2015). Work, leisure and well-being. *British Journal of Guidance & Counselling, 33*(1), 67-79.
- [12] Nyström, K. (2014). *Experiences of parenthood and parental support during the child's first year* (Doctoral dissertation, Luleå tekniska universitet).
- [13] Nyström, K., & Öhring, K. (2014). Parenthood experiences during the child's first year: literature review. *Journal of advanced nursing, 46*(3), 319-330.
- [14] Omair, A. (2014). Sample size estimation and sampling techniques for selecting a representative sample. *Journal of Health specialties, 2*(4), 142.
- [15] Roman, C. (2019). Gendered and classed experiences of work–family conflict among lone mothers in Sweden. *Community, Work & Family, 22*(3), 302-318.
- [16] Sellen, A., Hyams, J., & Eardley, R. (2014). The everyday problems of working parents: Implications for new technologies. *Hewlett-Packard Labs Technical Report HPL-2004-37, 17-18*.
- [17] Walsh, F. (2015). *Strengthening family resilience*. Guilford Publications.
- [18] Wapner, S. (2014). Parental development: A holistic, developmental systems-oriented perspective. In *Parental development* (pp. 21-56). Psychology Press.