

**EFFECTS OF HIV SUPPORT PROGRAMS ON THE ACADEMIC
PERFORMANCE OF SECONDARY SCHOOL STUDENTS IN MOLO TOWN,
NAKURU COUNTY, KENYA**

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**A RESEARCH PROJECT SUBMITTED TO THE SCHOOL OF EDUCATION,
HUMANITIES AND SOCIAL SCIENCE IN PARTIAL FULFILLMENT OF THE
REQUIREMENT FOR THE AWARD OF THE DEGREE OF BACHELOR OF
EDUCATION (ARTS) OF GREYSA UNIVERSITY**

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DECLARATION

DECLARATION

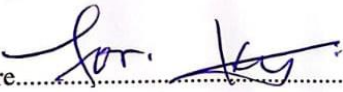
This research project is my original work and has never been presented for the award of degree or for any similar purpose in any other institution.

Signature.....  Date 09/12/24

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Supervisor Approval

This research project has been submitted for examination with my approval as the university supervisor.

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DEDICATION

This research project is dedicated to my beloved parents Mr and Mrs Gachunji, for their unwavering moral and financial support towards my research and my studies in Gretsia University.

ACKNOWLEDGEMENT

My profound gratitude and appreciations is to my supervisor Mr Ongeru for his guidance through all stages of writing this research project. I also want to acknowledge Greta University Research department lead by Mr Mugambi for providing resources and opportunity to undertake this work.

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ABBREVIATIONS AND ACRONYMS

AIDS :	Acquired Immunodeficiency Syndrome
ART:	Antiretroviral Therapy
HAART:	Highly Active Antiretroviral Therapy
HIV:	Human Immunodeficiency Virus
NGO's:	Non-Governmental Organization

OPERATIONAL DEFINITION OF TERMS

- Chronic-** Condition or disease that persist over a long period of time and progresses slowly.
- Depression -** Mental health disorder characterized by persistent feelings of sadness, hopelessness and loss of interest
- Infected -** Affected with a disease causing organism
- Mother to child transmission -** Transmission of HIV from HIV infected mother to her child during pregnancy or breastfeeding
- Stigma -** Negative attitude people have about others
- VCT-** Voluntary Counselling and Testing.
- Vulnerable -** Person who is in state of being exposed to possibilities of being affected

ABSTRACT

Human Immunodeficiency Virus is an infection which weakens the immune system of our body capable for battling off contaminations and infections. Aids is the final stage of HIV contamination. HIV is transmitted through unprotected sex with infected persons, mother to child transmission, contact blood contaminations among others. The research problem studied the effects of HIV support programs to students' academic performance in Molo Sub County in Nakuru County Kenya. The study aimed at determining how schools communities support those students whose family members are infected, the psychological factors of students whose family live with HIV in Molo, Nakuru, Kenya, explored the experiences of secondary school students whom family members are infected by HIV in Molo and also assessing the associations between infections and academic performance among the students in Molo. Molo Sub County has 27 public secondary schools where simple random sampling method was used to select 5 schools where data was collected. Target population were students from the sub county majoring form students four since they had more knowledge about HIV. The study had a target population of 7600 from which the study was based. The research used census sampling method whereby all affected students were included from the selected schools. Tool used in collecting data was questionnaire where closed ended questions was administered. Data was analyzed by use of descriptive statistics using SPSS software to compute frequencies and percentages. Data were interpreted using tables. The entire research was confidential and honest to students. A total of 60 questionnaires were administered. The research had a response rate of 100% with more female respondents than male at 60% and 40% respectively. Majority of respondents agreed that school community supports them in dealing with HIV of their families. Most of them also agreed that they have enough experiences that enable them to respond to stigma accordingly and do well academically. The study concluded that support programs by school community have been effective, inclusivity of affected students, community support have been positively influencing academic performance. and psychological mediation has helped students to do well through support from teachers which help affected students to balance HIV infections management and academic progress. Accessibility to health care services has helped respondents to positively cope with the effects. The study recommended support programs to be enhanced and schools to work closely with government intervention through financial support to increase support system to affected students so as to mitigate the effect.

CHAPTER ONE: INTRODUCTION

1.0 Introduction

This chapter presents background of the study, statement of the research problem, purpose of Research problem Conceptual framework, research questions, objectives of the study, significance of the study, scope of the study, limitations and assumptions of the study.

1.1 Background of the Study

HIV (Human Immunodeficiency Infection) could be an infection that assaults the safe system, which is capable for battling off contaminations and infections in our bodies. Gabbidon (2023). When an individual gets to be tainted with HIV, it slowly debilitates their resistant system, making them more vulnerable to different diseases and ailments. Ghosh, P., & Kanjirath, S. (2017).

AIDS (Acquired Immunodeficiency Syndrome) is the final stage of HIV contamination. It happens when the immune system is seriously harmed, and the body is unable to battle off artful infections and illnesses. Aids is a life-threatening condition, but with proper restorative care and treatment, its movement can be moderated down.

HIV is basically transmitted through unprotected sexual intercourse, sharing needles or syringes, and from an infected mother to her child amid childbirth or breastfeeding. It is vital to note that HIV cannot be transmitted through casual contact like embracing, shaking hands, or sharing utensils. World Health Organization (WHO). (2021).

Prevention is significant in lessening the spread of HIV. This incorporates practicing secure sex by utilizing condoms, avoiding sharing needles, and getting tested frequently. There's right now no remedy for HIV, but antiretroviral treatment (Art) can successfully oversee the infection and permit people with HIV to live long and sound lives.

It is important for students to have accurate data about HIV and Aids to secure themselves and others. Understanding the dangers, avoidance strategies, and the significance of sympathy and support for those living with HIV/AIDS can contribute to a more advantageous and more comprehensive Physical Wellbeing: HIV weakens the safe framework, making people more vulnerable to different diseases and sicknesses. This may lead to visit unlucky deficiencies from school due to sickness, coming about in missed classes and falling behind in coursework. Cognitive Working: HIV can influence cognitive capacities, counting memory, consideration, and concentration. Understudies may encounter challenges in holding data, preparing modern concepts, and remaining centered amid classes and exams. Cohen, M. S., & Gay, C. L. (2010).

Passionate Well-being: Living with HIV or having a family part influenced by the infection can cause passionate trouble, uneasiness, and discouragement. These mental challenges can affect students' inspiration, self-esteem, and in general mental well-being, influencing their capacity to perform scholastically.

Disgrace and Segregation: HIV and Helps are regularly related with disgrace and separation. Understudies living with HIV or influenced by the infection may confront social prohibition, bullying, and bias from their peers, which can lead to sentiments of confinement and contrarily affect their self-confidence and scholastic execution.

Financial Components: HIV and Helps can have financial suggestions for families, driving to monetary strain and constrained get to instructive assets. Understudies from low-income family units influenced by HIV may confront extra boundaries to scholastic victory, such as need of school supplies, transportation, or back administrations.

It is vital for schools and communities to supply a strong and comprehensive environment for understudies influenced by HIV and Helps. This incorporates get to healthcare, counseling administrations, instructive back, and activities to combat disgrace and separation. By tending to these challenges, understudies can be way better prepared to overcome the impacts of HIV and Helps on their scholarly execution and flourish in their instructive travel. Wang, L., & Zhang, Y. (2019).

1.2 Statement of the Research Problem

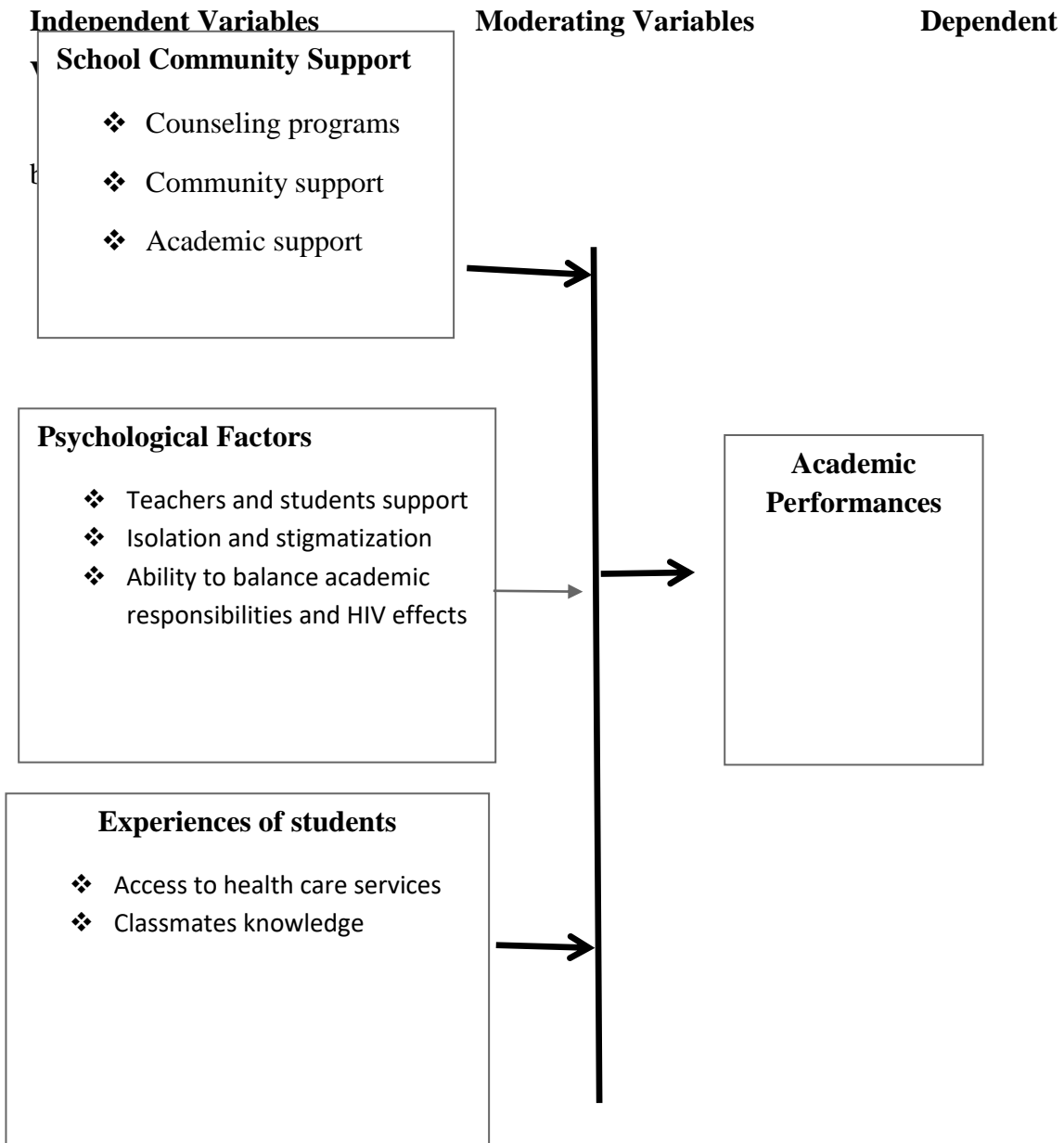
HIV is a chronic disease that affects individual physically, emotionally and socially. The research problem was to study the effects of HIV support programs on the academic performances of secondary schools students who can be affected as a result of having family members living with HIV infections. infected family members of students impacts their ir academic performances, mental health, social relationships, and overall well-being of students. This research aimed to explore the support systems available to them, and assessed the effectiveness of existing interventions in addressing their needs.

1.3 Purpose of the Study

The purpose of the study was to investigate the effects of HIV support programs to students whom family members who live with HIV, including academic performance, mental health, social relationships, and overall well-being. By conducting this research, we aimed at understanding the specific challenges faced by these students, assessed the support systems available to them, and evaluated the effectiveness of existing interventions in addressing their needs. Ultimately, the study was seeking to inform the development of targeted strategies and

interventions to improve the educational outcomes and quality of life for the affected students.

1.4 Conceptual Frame Work



1.5 Research Questions

- i. How can the school community support students whom family members live with HIV to ensure their academic success in Molo town, Nakuru County, Kenya?
- ii. What are the psychological factors that mediates the relationship between HIV infections and academic performance among secondary school students in Molo town, Nakuru County, Kenya?
- iii. What are the experiences of secondary school students whom family with HIV in Molo town, Nakuru County, Kenya?

1.6 Objectives of the Study

1.6.1 General Objective

To assess the effects of HIV support programs on academic performance among secondary school students in Molo Town, Nakuru County, Kenya.

1.6.2 Specific Objectives:

- i. To examine the role of school community in supporting the academic success of secondary school students.
- ii. To identify psychological factors that mediate relationship between HIV infections and academic performance among secondary school students.
- iii. To explore the experiences of secondary school students whose family members live with HIV in Molo town, Nakuru County, Kenya

1.7 Significance of the Study

Study was of benefit to school in providing opportunity to educate students about HIV, its transmission, prevention and treatment. The study was also helpful to society to learn health awareness about health implications and emphasized on importance of prevention and treatment. Study helped in social support , the need for social support system to assist individuals and families affected. Study helped in stigma reduction to students affected by HIV by creating more inclusive environment to reduce discrimination

1.8 Scope of the Study

The study was carried out in public secondary schools in Molo sub county, Nakuru County. The target population of the study were students from the sub county.

1.9 Limitations of the Study

The study was conducted only in Molo sub county secondary schools and hence the findings of the study could not be generalized for the whole country.

Challenges in obtaining accurate information due to stigma associated with infections.

1.10 Assumptions

The study was based on the assumption that respondents provided truthful and accurate information during the data collection process. It also assumed that if a similar study were to be conducted in a different location under comparable conditions, the findings would yield consistent results

CHAPTER TWO: LITERATURE REVIEW

2.1 Introduction

HIV remains a major global health challenge, particularly in Sub-Saharan Africa, where the highest rates of infection are found. In Kenya, around 1.6 million people are living with HIV, with the epidemic disproportionately affecting young women and key populations such as sex workers and men who have sex with men. While significant progress has been made in expanding access to antiretroviral therapy (ART) and prevention programs, challenges such as stigma, discrimination, and limited healthcare access continue to hinder efforts to combat the virus.

2.2 School Community Support

Educational institutions and local community support, consider and shows understanding to students whose family live with HIV. Hoadley (2018) states "The boundaries of care education policy intervention for vulnerable children". The role of school is supporting vulnerable students in context of HIV through helps such as emotional support by offering e, g counseling, helping them access health care etc. Rebson(2017) suggests moving towards inclusive education policies and practices by giving basic education for aids affected students. Education that is against discrimination of students with infected families. Juma(2001)Suggests 'copying with HIV' That is, they should be made to be used to it through practices such as access to healthcare, giving counselling and psychological support, regularly monitoring and follow up and giving life skills education to them. According to Ritcher(2006), Building resilience that is, a right based approach to students having infected families with HIV/AIDS. This involves creating supporting environment both within the school and community for instance by creating awareness to reduce stigma (negative attitudes, stereotypes and beliefs) and counseling. Pridmore(2008). Access to conventional schools for children affected by HIV The school should offer a form of education that involves students attending physical classrooms with teachers following a set curriculum and using standard teaching methods e, g lecturing and discussions. This contracts online and homeschooling. Chikoko and Khamare (2020) noted that school management teams conceptualization of school assets in addressing the need of students affected by HIV. Mbugua (2004) Noted responding to the special needs of children with HIV due to their families for instance nutritional support, psychological support, health care, education support and peer support.

2.3 Psychological Factors

Shebi (2016) Found students whose family live with HIV have problem of coping strategies. Students may develop coping mechanism e, g substance abuse to deal with emotional and psychological challenges which further impairs their academic performance. Olagundoyea (2021) stated that depression is among the psychological effects and associated factors among students living with HIV due to background mental disorders. Tarwireyi (2005) noted that stigma and discrimination affects students with HIV psychologically. To assess how students whose families lives with HIV reacted to the knowledge of the information and how they are coping with stigma and discrimination that is through withdrawal from the group. Oyier and Eudia (2013) said HIV has effects on self-esteem of secondary schools students such as self-discrimination, emotional and psychological effects. According to Bankole and Bokare (2017) students with HIV infected families experience psychological complications associated with HIV, they have higher suicide risks. Pennar and Marais (2018) could note that psychological resilience factors associated with higher education performance increased mental issues with lower depression and trauma symptoms among students living with HIV patients. Cluver(2008)Further hypothesized risks to students mental health are high level of bullying and of HIV related illnesses for instance generating infections, cancers, cardiovascular diseases such as stroke and liver disease among others. Sherry, cluver and Stanton (2015) Noted that HIV inhibit expression of negative emotions which can lead to poor performance in academic performance among secondary school students with infected families. Hosek and Harper (2000) found that students living with HIV family in secondary schools have psychological difficulties. His study explored psychological challenges they experience due to their HIV status. For example medical adherence including fixed schedules, disclosing their status to others and psychological burden including stress which eventually affects their academic performance negatively.

2.4 HIV Infections and Academic Performance

Association between HIV status and depressive symptoms among students and adolescent. According to Kibusi (2018), depression factors such cognitive impairments like memory and concentration, loss of interest and also withdraw from group's affects academic performance of students. Relationship between academic self-concept and achievement in high school through perception, belief and ideas. Wilt up (2014) According to Sirin (2005), social economic status and academic achievement can also influence performance for instance through social economic and access to resources. Associations between self-esteem of students and educational performance, Gitumu (2011) through feeling of inadequacy, less

motivation, feeling of sadness, anxiety and stress. Care and support for young living with HIV families in secondary schools Kimera (2021) students face challenges in access to services which can impact their overall academic performance. Relationship between health symptoms and copying strategies of HIV infected, Kwannimit (2001)

2.5 Experiences of Secondary School Students whom Family Members live with HIV

Experience of stigma and access to HAART (Highly active antiretroviral therapy) According to Castro and Barrero(2006) has negative attitudes towards people living with HIV. Care and support of students whose family live with HIV Reynaert (2021) needs e, g treatment, mental health support and educational support. Experiences of discrimination among students living with HIV in Nigeria. Prejudices, Owoaje and Sangowawa (2012)

High school learners experience of learning about HIV. According to Tyilo (2020) when learners learn about HIV, messages that are conveyed have to be diversified to deepen Learners knowledge about HIV Experience of psychological distress of HIV Ogueji (2021) students face difficulties in concentration, lack of support, memory cognitive issues e, g anxiety etc. Copying with challenges of AIDS, the experience of persons living with HIV Almas (2000)

2.6 Theoretical Framework

This study considered theories relating to psychological well-being of students affected by HIV. Pakenham (2001) studied stress and copying theory. This theory suggests that individuals experiencing stressful situations e, g being affected by HIV will utilize various copying strategies to manage their stress levels. For students, the stress of dealing with HIV related issues e, g stigma, discrimination can interfere with their ability to focus on academics. According to Albert Bandura (1998) Social cognitive theory where individuals learn through observing others and through direct experiences. Students affected by HIV may observe how others perceives their illness and may internalize negative beliefs or stereotypes affecting their self-efficiency and academic performance

2.7 Summary of Identified Gaps in Literature Review

Literature review has in general tried to determine how the HIV have been perceived to affect the students' performance academically for instance psychological and emotional, social relationships and interactions change, long-term impacts on career trajectories and also how students affected can be supported both by school and community.

However, the review has limited to address the policy implementation for instance through government intervention to help students affected in aiding their academic performances.

Additionally, the review has limited to highlight how gender differences are affected by HIV for instance, whether male are affected differently from female.

CHAPTER THREE: RESEARCH METHODOLOGY

3.1 Introduction

This chapter will consist of methodological details appropriate to the study they include ;researcher design ,study area ,target population, sampling techniques ,sampling size ,measurement of variables, research instruments , validity of measurements ,reliability of measurements ,data collection techniques , data analysis, logical and ethical considerations.

3.2 Research Design

The study used cross-sectional descriptive research design. This design enabled the research study to collect data quickly without requiring to do follow up.It therefore helped to understand the status of performance of students in relation to their family members HIV status without needing to track changes over time.

3.3 Study Area

The study was conducted in Molo Sub County in Nakuru County, Kenya.Based on the past government reports and statistics, Molo sub county is one of the areas with high identified HIV prevelences,based on National Syndemic Diseases Control Council (NSDCC) high number of schools and also easier accessibility to study the matter. National Syndemic Diseases Control Council (NSDCC). (2021). Nakuru County HIV/AIDS prevalence report.

3.4 Target Population

The target population were students whom family members are infected with HIV in public secondary schools in Molo Sub County. The target population was 7600 people from the sub county from which the study was based.

3.5 Sampling Techniques

The research used simple random sampling method to select schools. There are 56 secondary schools in Molo Sub County, 27 being public. 5 schools were selected where the study was carried out. Census sampling method was used to include all the potential affected students in the selected schools in the process of data collection.The questionnaires administered to the respondents had a gap whereby they were required to fill the status of their family. This enabled the researcher to identify respondents affected.

3.6 Sample Size

The research used census sampling method whereby all affected students were included in the study. The research study administered a total of 60 questionnaires which had 100% response rate.

3.7 Research Instruments

The study used questionnaire. The questionnaire used a closed ended set of questions to students whom family members are infected with HIV. The Questionnaire offered anonymity and confidentiality to this sensitive topic. Participants shared honest responses about personal matters hoping their identities were protected. The questionnaire also ensured that same questions were asked in the same manner which helped in data standardizing process and covered large number of students within short time.

3.8 Validity of Measurements

The study ensured its Validity by comparing the results of a measurement with those of other measures that should be related to construct being measured. Construct Validity was used to ensure HIV status accurately reflect underlying constructs.

3.9 Reliability of Measurements

Reliability of the study was ensured by use of multiple measurements such relying on information from school also, using standardized measures and reliable instruments. Hence reliability of the study is that reputation of same experiments and test in different place will yield same results.

3.10 Data Collection Techniques

Questionnaire was used to collect relevant data from the respondents. The reason for using questionnaire for this study was because it offered anonymity to respondents which made them more comfortable in providing honest responses. Questionnaire also ensured same set of questions asked which help in data standardizing process.

3.11 Data Analysis

Descriptive statistics was used to analyze the data collected using statistical methods such as calculation of percentages. Descriptive data were interpreted and presented by use of tables to analyze numerical values collected.

3.12 Logical and Ethical Considerations

The researcher sought permission from school, county health department, and county education department.

The research obtained a written consent from students to document their consent to participate in the study. The respondents filled in a consent form which indicated the title of the study, its purpose and confidentiality of the information. The consent also gave the respondent right to withdraw their participation in the study if need be at no penalty. This ensured that students who participated were well informed about the study.

All questionnaire was anonymous without any personal identification information, and information obtained was only used for research purposes and destroyed when research was completed.

CHAPTER FOUR: FINDINGS AND DISCUSSIONS

4.1 Introduction

This chapter presents the findings of the study and discussion on effects of HIV infections on academic performance among secondary school students in Molo town, Nakuru County, Kenya and is organized under the following sub-headings:

The role of school community in supporting academic success of secondary school students whom family members live with HIV, psychological factors mediating relationships between HIV infections and academic performance and experiences of secondary school students whom family live with HIV.

4.2 Respondent Demographic Data

The research involved both male and female. Males were 40% while female were 60% of sample population. The results of the findings indicated that female were slightly more than male. This indicated that no gender was discriminated in the research. The respondents ages was between 15 to 20 years. Higher number of respondents were between age bracket 17-18 years. More of respondents from the questionnaires administered were from upper. Lower classes recorded few respondents This is shown in the the graph below.

Category	Sub category	Frequency(n)	Percentage (%)
Gender	Male	24	40
	Female	36	60
Level of study	Form 1	6	10
	Form 2	9	15
	Form 3	15	25
	Form 4	30	50
Age	15-16	20	33.3
	17-18	35	58.3
	19-20	5	8.3
N=Respondent (60)			

4.3 Data discussion

4.3.1 Support from the School Community

The first objective of the study was to analyze how school community support students affected. The study used a liker scale of 1-5 to give a rating on the extent to which they agreed on how school community support them. A scale of 1 represents strongly disagree, 2 disagree, 3 Neutral, 4 Agree and 5 Strongly agree. The findings of the study are represented as per the questionnaire as follows

Table 1 Support from the school Community (N=60)

Category	Sub category	Frequency(n)	Percentage (%)
Counseling services	Strongly Disagree	0	0
	Disagree	2	3.3
	Neutral	14	23.3
	Agree	24	40
	Strongly agree	20	33.3
Community support	Strongly disagree	10	16.7
	Disagree	10	16.7
	Neutral	14	23.3
	Agree	20	10
	Strongly agree	6	10
Supportive school environment	Strongly disagree	4	6.7
	Disagree	4	6.7
	Neutral	10	16.7
	Agree	22	36.7
	Strongly agree	20	33.7
Academic support	Strongly disagree	2	3.3
	Disagree	4	6.7
	Neutral	12	20
	Agree	22	36.7
	Strongly Agree	20	33.7
Community influences	Strongly disagree	8	13.3
	Disagree	8	13.3
	Neutral	22	36.7
	Agree	18	30
	Strongly agree	4	6.7
N=number of respondents			

Based on the above statistics, about counseling services offered by school, majority of respondents agreed that the school provides counseling services representing a higher percentage of 40% from the same question, no one strongly disagreed, 2 disagreed, 14

undecided, and 20 strongly agreed. About community support, most of respondents agreed that they get support from community programs. This was represented by 33.3%. 10 (16.7%) strongly disagreed, 10 (16.7%) disagreed, 14 (23.3%) undecided and 3 strongly agreed. Majority of them also agreed that there is inclusivity and support by school environment to students affected representing 36.7%. 4 (6.7%) strongly disagreed, 4 (6.7%) disagreed, 10 (16.7%) undecided and 20 (33.3%) strongly agreed. Many of respondents also agreed that school academic support tailored to the needs of affected students representing 36.7%. 2 (3.3%) strongly disagreed, 4 (6.7%) disagreed 12 (20%) undecided and 20 (33.3%) strongly agreed. On community support negative influences, many respondents were undecided having a percentage of 36.7%. 8 strongly disagreed, 8 disagreed, 18 agreed and 4 strongly agreed.

4.3.2 Psychological Factors and Academic Performance.

The second objective for the study was to determine the psychological factors that mediate the relationship between HIV infections and academic performance among affected students.

Liker scale of 1-5 was used to administer questions and responses were as follow

Table 2 : psychological factors and academic performance

Category	Sub category	Frequency(n)	Percentage (%)
Psychological Factors	Strongly disagree	4	6.7
	Disagree	20	33.3
	Neutral	20	33.3
	Agree	8	13.3
	Strongly agree	8	13.3
Inability to study due to anxiety	Strongly disagree	6	10
	Disagree	18	30
	Neutral	14	23.3
	Agree	14	23.3
	Strongly agree	8	13.3
Teachers and students support	Strongly disagree	4	6.7
	Disagree	8	13.3
	Neutral	16	26.7
	Agree	22	36.7
	Strongly agree	10	16.7
Isolation and stigmatization	Strongly disagree	28	46.7
	Disagree	16	26.7
	Neutral	10	16.7
	Agree	4	6.7
	Strongly agree	2	3.3
Ability to balance academic responsibilities	Strongly disagree	4	6.7
	Disagree	10	16.7
	Neutral	16	26.7
	Agree	20	33.3
	Strongly agree	10	16.7

From the above statistics, the first question administered was to find out whether students with family members who have HIV infections faces difficulties in concentrating during class. There was a tie in responses as 20(33.3%) were undecided and other same proportion disagreed. 4(6.7%)strongly disagreed, 8(13.3%)agreed and 8(13.3%)strongly agreed. On

question of whether their studying ability is associated with anxiety and stress, majority disagreed 18(30%).other responses were:6(10%)strongly disagreed, 14(23.3%) undecided, 14(23.3%)agreed and 8(13.3%)strongly agreed. Most of the respondents agreed that they get support from teachers and fellow students representing 36.7%. 4 strongly disagreed, 8disagreed, 16 undecided and 10 strongly agreed. Majority of responfents agreed that they are able to balance their academic responsibilities with managing psychological and emotional effects of HIV of their families representing 33.3%. 4(6.7%) strongly disagreed, 10(16.7%) disagreed, 16(26.7%)undecided and 10(16.7%)strongly agreed.

4.3.3 Experiences of students whom family members live with HIV

The third objective of the study was to find out experiences of students who have family members living with HIV. The study used a liker scale of 1-5 in administering questionnaires to get ratings of students on the extent to which they would agree with study. Findings were as shown in the table :

Table 3 experiences of students

Category	Sub category	Frequency (n)	Percentage (%)
Feeling of stigma at school	Strongly disagree	6	10
	Disagree	26	43.3
	Neutral	12	20
	Agree	6	10
	Strongly agree	10	16.7
Academic performance negatively affected	Strongly disagree	10	16.7
	Disagree	20	33.3
	Neutral	18	30
	Agree	8	13.3
	Strongly agree	4	6.7
Access to health care services	Strongly disagree	0	0
	Disagree	2	3.3
	Neutral	20	33.3
	Agree	28	46.7
	Strongly agree	10	16.7
Classmates knowledge about HIV	Strongly disagree	0	
	Disagree	4	
	Neutral	10	
	Agree	26	
	Strongly agree	20	
N=Number of respondents			

From the above statistics, majority of respondents disagreed on the question posed by the study on whether they feel stigmatized or stressed by their family 's HIV status representing higher percentage of 43.3%. 6 strongly disagreed, 12 undecided, 6 agreed and 10 strongly agreed. Alternatively, on access to health care services, most of the students agreed that yes

they are able to access health care facilities and services which enable them to manage their family 's HIV effects. No one strongly disagreed, 2disagreed, 20 undecided and 10 strongly agreed. About classmates knowledge on HIV, highest number of respondents agreed that they are very aware about HIV and have said knowledge. This represented 43.3% Other responses were:no one strongly disagreed, 4 disagreed, 10 undecided and 20 strongly agreed.

CHAPTER FIVE: SUMMARY OF FINDINGS, CONCLUSIONS & RECOMMENDATIONS

5.1 Introduction

This chapter will present summary of the major findings of the study, the conclusion of the study will also be presented in this chapter. Recommendations for improving the participation of secondary school students in prevention of HIV will be made.

5.2 Summary of the Findings

According to study, on the role of school community in supporting students affected, the school has been providing necessary support to students such as counseling services. The community also offers support programs to students affected in dealing with the effects. School environment is inclusive and supportive to affected students affairs and community support positively influences performance of students who have family members with infections.

Under psychological factors that mediate relationship between HIV infections and academic performance, it is noted that most of the affected students do not feel difficulties in concentration during class due to having a family member with infection. Additionally, most of them don't experience anxiety and stress during class due to the fact that they have a family member who has HIV. Teachers and classmates of the affected students majorly support them in dealing with psychological and emotional effects. It was also noted that students with family member with HIV are not isolated or stigmatized by their colleagues which makes their academic performance going. Finally, students who have family member with HIV are able to balance the academic responsibilities with psychological and emotional effects of HIV management.

Under the experiences of students whom family live with HIV, it was noted that most of the students do not experience stigmatization during learning. Majority of them are able to access health care services required for managing the effect and also agreed that their colleagues are already knowledgeable about the HIV /AIDS.

5.3 Conclusion

On the role of school community in supporting students who has family members who live with HIV infections, We can conclude that the school community support to the affected students by giving them support programs such as counseling them have positively helped them to do well academically. Having inclusivity of affected students by giving them support system have also been of great positive impacts to affected students. Schools have been

providing academic support which is tailored to needs of affected students to manage the effects. Community support have been positively responding to the academic performance of affected students influencing them positively.

About psychological factors that mediate relationship between HIV infections and academic performance, psychological mediation in infections and academic performance such as support from teachers and colleagues students of the affected students have also enabled them to academically do well despite them having psychological issues. Students have been able to balance the educational responsibilities with the management of effects of HIV of their families. Affected students also have adapted the effects and therefore they do not get stigmatized or isolated by their fellow students.

Under experiences of students who have family member living with HIV, Affected students experiences of stigma have not been intense, due to accessibility to health care services and knowledge about the HIV. This has helped them to positively respond to the effects of HIV and do well academically.

5.4 Recommendations

On the role of school community in supporting affected students, I recommend Schools to provide more support programs such as counseling programs since they have been of positive impacts to affected students so as to foster their adaptability to the effect of HIV. School should also engage with community to increase their support to the needs of affected students.

On psychological factors, school should help affected students by providing comprehensive support that addresses both the psychological and academic needs of students who has family members living with HIV, schools can help these students overcome barriers to academic success. A combination of emotional support,, educational initiatives, and a supportive school environment can significantly improve their mental well-being and academic outcomes.

On experiences of students who has family members living with HIV, school should work closely with government and health care sectors for easier accessibility of health care services affected so as to respond to their psychological, emotional and social needs in managing their family's HIV.

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APPENDICES

Appendix I Questionnaire

Introduction

Dear students

The purpose of this questionnaire is to investigate the effects of HIV support programs on students' academic performance. Kindly take your few minutes to go through the questions and provide your thoughtful responses. Please be aware that the answers you give will be confidential and the form will not indicate your name or signature. Thank you for your cooperation.

Section 1

1. What is your gender?

Male () Female ()

2. Tick your age bracket

14-16() 17-18 () 19-20 ()

3. What is your level of study?

Form 1() Form 2() Form 3() Form 4()

4. Do you have any member of your family with HIV infections?

Yes () No ()

Section 2

Measurement key:

1. Strongly disagree

2. Disagree

3. Neutral

4. Agree

5. Strongly agree

1. SCHOOL COMMUNITY SUPPORT

Measurement of indicators	1	2	3	4	5
The school provide adequate counseling services to students whose family members are infected with HIV.					
The community offers support programs for students whose family are infected with HIV.					
The school community is inclusive and supportive of students whose family members are infected with HIV.					
The school provides academic support toiled to the needs of the students.					
Community support positively influences academic performance of students whose family members are infected with HIV.					

2. PSYCHOLOGICAL FACTORS

Measurement of indicators	1	2	3	4	5
The psychological factors of HIV makes it difficult for me to concentrate in class.					
I feel anxious or stressed about my family health which affects my ability to study.					
I feel supported by teachers and classmates in dealing with the psychological and emotional effects of HIV of my family					
I feel isolated or stigmatized because of my family HIV status which affects my academic performance					
I am able to balance my academic responsibilities with managing the psychological and emotional effects of HIV of my family.					

3. EXPERIENCES OF STUDENTS WHOSE FAMILY LIVE WITH HIV

Measurement of indicators	1	2	3	4	5
I have experienced stigma at school due to my family HIV status					
My academic performance has been affected negatively by my family living with HIV.					
I have access to health care services I need to managing my family HIV					
My classmates are knowledgeable about HIV					