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Margaret O. Andanje, Micah Chepchieng, Oranu Philomena Chika

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Students and Teacher-Counsellors' Perceptions of an Appropriate Environment for Bereavement Recovery among Secondary School Students in Mumias District, Kenya

Margaret O. Andanje
Department of Counselling Psychology, Box 536 EGERTON

Dr. Micah Chepchieng
Department of Counselling Psychology, Egerton University, Box 536 EGERTON

Dr Oranu Philomena Chika
University of Port Harcourt (School of Affiliation), Faculty of Education, Department of Curriculum Studies and Educational Technology

Abstract
Bereavement is a state of loss of a loved one through death. The death cases of People including parents of secondary school students are on the increase in Kenya due to road accidents, fire outbreaks HIV and AIDS pandemic and other related illnesses. Grief which is a reaction to bereavement has negative physical, social and emotional effects on the bereaved child. Bereaved students need an appropriate environment for bereavement recovery at school to help them to deal with the negative effects of grief because the surviving parent and significant others who are supposed to help them at home are pre-occupied with their own grieving. The bereaved students also need to continue with their schooling away from the home environment yet the grieving process may take a long time. The purpose of study was to investigate the students and teacher-counsellors' perceptions of the appropriate environment for bereavement recovery among secondary school students. A descriptive survey research design was employed in this study. An accessible population of 49 teacher-counsellors was targeted out of which a sample of 23 participated in the study. The target population was 17,200 secondary school students out of which an accessible population of 634 students who had lost one or both parents through death was selected for the study. A sample size of 170 students who had lost one or both parents through death participated in the study. Purposive sampling methods were used to select the required sample. The data was collected using a questionnaire. The collected data was analyzed by both descriptive and inferential statistics with the help of a Statistical Package for Social

Sciences (SPSS) version 17.0. The descriptive statistics included means, frequencies, percentages and standard deviations whereas inferential statistics involved a t-test. All tests were done at a significant level of $\alpha = 0.05$. The study findings recalled the students and teacher counsellors' perceptions of the appropriate environment for bereavement recovery among secondary school students in Mumias District. The findings of the research indicated that both students and teacher counsellors had a positive perception of the appropriate environment for bereavement recovers among secondary school students. However, the perception of female students of the recovery environment was more positive than that of the male students. It was recommended that teacher and peel' counsellors he trained to effectively help bereaved students to overcome grief. The findings of the research may benefit the Ministry of Education, parents and secondary school Students to effectively work through grief and adjust well in the absence of the deceased parent or parents.

Introduction

Bereavement usually disturbs an individual socially, physically and even emotionally (Mathew. 1999: Matlin. 2004). Bereaved students need to be helped by teacher-counsellors and peers to effectively work through the negative effects of grief at school in an. appropriate environment. The surviving parent and significant others who ought to help them at home are often preoccupied with their own grieving making the bereaved students resume school when still in grief. The grieving process may take long yet the bereaved students need to continue with schooling away from the home environment. Currently, some inadequate help in form of a little talk therapy is given to these students in a few cases where the profound negative effects of grief are indicated by a sharp drop in academic performance, indiscipline and psychological problems such as loss of interest in life, isolation from peers, uncontrollable out bursts of crying and suicidal thoughts among others. The school administration and teacher-counsellors need to establish an appropriate bereavement recovers environment to help students to work through grief. The environment for bereavement recovery will be administered by the teacher-counsellors and the consumers will be the students. There is therefore need to establish the teacher-counsellors' and students' perceptions of the appropriate environment for bereavement recovery among secondary school students

Purpose of the Study

The purpose of this study was investigate the students' and teacher-counsellors' perceptions of the appropriate environment for bereavement recovery among secondary school students in Mumias District of Kenya.

Objectives of the Study

The study was guided by the following objectives:

(i) To establish the students' perceptions of the appropriate environment for bereavement recovery among secondary school students.
(ii) To establish the teacher-counsellors perceptions of the appropriate environment for bereavement recovery among secondary school students.

(iii) To determine whether differences exist in the male and female students' perceptions of the appropriate environment for bereavement recovery among secondary school students.

(iv) To determine whether differences exist in the male and female teacher-counsellors perceptions of the appropriate environment for bereavement recovery among secondary school students.

Research Questions

(i) What are the students' perceptions of the appropriate environment for bereavement recovery among secondary school students in Mumias District?

(ii) What are the teacher-counsellors perceptions of the appropriate environment for bereavement recovery among secondary school students in Mumias District?

Research Hypotheses

HO_1: There is no statistically significant difference in the male and female student's perceptions of the appropriate environment for bereavement recovery among secondary school students in Mumias District?

HO_2: There is no statistical significant difference between male and female teacher counsellors' perceptions of the appropriate environment for bereavement recovery among secondary school students in Mumias District?

Significance of the Study

Bereavement is a source of social, physical and emotional disturbance yet it has not been given adequate attention in secondary schools. It may lead to poor academic performance indiscipline and even psychological problems such as depression, isolation and suicidal thoughts when not well addressed. The findings of this study may educate secondary schools and the society leaders at large on the need to address the needs and concerns of bereaved students. Once these needs are adequately addressed the negative physical, social and emotional effects will he eliminated. The bereaved students will therefore adjust to the loss of a parent and move on well with school activities. The findings of the study may also help the M.O.E to come up with guidelines that may help bereaved students to effectively work through grief in an appropriate environment for bereavement recovery in schools.

The Scope of the Study

The study involved secondary school students who had lost either one or both parents through death. The study confined itself to students and teacher counsellors' perceptions of the appropriate environment for bereavement recovery. The Secondary school students were selected because they are teenagers who are at an age to understand and comprehend the concept of death. They are greatly affected by the loss of their parents

Assumptions of the Study

This study was based on the following assumptions:

(i) All parents are care givers and as a result their demise negatively affects their children.
(ii) The students and teacher- counsellors gave honest responses.
(iii) Students react positively or negatively to the death of their parent(s) depending on the care they had given to them.

The factors that influence grief and the counselling interventions for bereaved students have been explained. Various theories that inform the study on death and bereavement such as the cognitive therapy. social learning theories and psychosocial transition theories have been applied.

The Meaning of Grief and Bereavement

The society is complicated with many terminal illnesses, ethnic violence, road and fire accidents among others that have claimed the lives of many people (Nduri, 2008). Death is the ceasation of the integrative action between all organs of the body. It marks the end and the finality of life that has ceased to be. It is described as a road on to which the traveller never returns (Palmer & Macmahon, 2000). The death of a parent for an adolescent is one of the most traumatic and stressful experience of life (Matlin. 2004). This is because the child at this age has double loss that of a parent and a caregiver as well (Mathew, 1999).

The news about death of a close person is received with great shock and disbelief by the bereaved people (Balk. 1999). It is followed by grief which is the emotional reactions and certain behaviour patterns associated with bereavement that enables an individual to overcome the effects of loss (Talitwala, 1999). Furthermore, it is an instinctive and universal response to separation with the function of promoting union. It may also be experienced when people loose other things that are important to them such as a car through a road accident. A house through fire or good health through a terminal illness and even separation of people from their loved ones (Peyne et al., 1999). Grieving involves mourning which is the social or public expression of grief that includes rituals and formalized rites (Palmer & Macmahon, 2000). This implies that bereavement is the loss of a significant other person that triggers a reaction called grief which is manifested in a set of behaviours called mourning.

Response to Grief

Both Matlin (2004); Peyne et al (1999) concur that grief hurts physically, socially and emotionally. Bereaved people feel as if they have lost part of themselves. In fact loss of a loved one is the most traumatic experience that any human being can suffer. The desolation restlessness and raging against death shown in the olden days is familiar to us today. It is therefore impossible to lose without feeling pain which is expressed through physical, cognitive and behavioural reactions (Talitwala, 1999: Balk, 1999).

Bereaved people experience an alarming array of physical problems in the aftermath of bereavement. They may experience fatigue (the loss of energy), insomnia (loss of sleep and changes in sleep patterns). Anaeroxia (loss of appetite) or bulmia which is excessive eating habits (Corr, 1999; Talitwala, 1999). Furthermore, they may experience body aches such as headaches,

back pain, muscular aches and tightness of the throat or chest (Palmer & McMahon. 2000). Moreover, Matlin (2004) cites gastrointestinal changes such as nausea, vomiting, feeling of choking, perception of a lump in the throat or abdominal illness; constipation or diarrhoea as physical reactions to grief. More worryingly for them, they may experience similar symptoms to those of the deceased. They may also become more vulnerable to other infections (Madam. 1999). This implies that the bereavement recovery environment should enable the bereaved to access medical care to relieve their physical illnesses. They should also be given a balanced diet and their eating habits monitored so as to restore their physical health.

Talitwala (1999) suggests that there are no emotional consequences of grief except psychological distress. Infact, its absence in the bereaved among the western societies is regarded as pathological. The most common emotions experienced by the bereaved are sadness and depression characterized by loss of pleasure response and low mood. Moreover, Mathew (1999) notes that anxiety is experienced as an exhausting physical tension that gives rise to muscular aches because the bereaved people are fearful about how they will cope with the present situation. Palmer and Macmahon (2000) cite anger, hostility and guilt as common particularly if the death is attributed to certain events of people. For example, a murder is likely to be associated with a feeling of anger towards the perpetrator. On the other hand, a suicide may leave the survivors with a feeling of guilt which may be expressed as self blame for some aspect of the deceased's death or care during dying. Neimeyer (1998) states that the anger may he directed to the deceased for leaving them to struggle all alone in life. For example, the bereaved students may feel that they have been left to tend for themselves and their siblings at a tender age. Anger may also be directed towards an 'unfair God' for taking their loved ones away. In addition, Matlin (2000) notes that the bereaved are angered by the feeling of being cheated about a future to be shared together with the deceased. This implies that the anger felt by the bereaved stems from what they think about the deceased and the circumstances of the death. The bereaved child should therefore be offered appropriate social and psychological support into which to re-channel their emotional energy. This will help them to concentrate on their class work.

Like Palmer and Macmahon (2000), Talitwala (1999) recognizes that social expressions of bereavement include agitation or restlessness characterized by constant searching for the deceased. The bereaved may display feelings of hostility and irritability. As a result, they may engage in verbal attack of others or objects, self mutilation and withdrawal from social contact. In addition, Balk (1999) cites crying characterized by wailing as other physical reactions. Overwhelming isolation is also experienced even when the bereaved is surrounded by others. Both Papilia (2002) and Ndambuki and Mutie (1999) agree that these reactions to grief may cause disturbance leading to learning problems and failure to maintain school progress. The social and psychological support should be there for the bereaved students actively listen to them and offer unconditional positive regard to enable them to fully express themselves (Rickey & Cristiani, 1993).

The Grieving Process

According to Madara (1999) grieving is the painful work that a person must accomplish if readjustment to normal life is to take place after loss of a loved one. It entails the expression of emotional, psychological, physical and behavioural responses experienced in early phases of bereavement in an attempt to relieve the pain that accompanies the loss of a loved person. Grieving enables the grief stricken person to come to terms with irreversible absence of the deceased. Grieving as noted by Doreen (2002) involves the task of untangling oneself from the ties that bind one to the deceased, readjusting to their absence and forming new relationships. The recovery environment for the bereaved should ensure effective grieving because grief has no cure but one is only helped to go through it safely. Interfering with any stage would only 'short circuit' the process leading to abnormal grieving.

Normal Grief

Both Palmer and Macmahon (2000) and Doreen (2002) concur that the grieving process varies in people due to the differences in personality, culture, circumstances of death and anticipation of death. There is no particular laid down pattern of grieving. The recovery environment should not be rigid but treat individual cases uniquely as they arise. However Peyne et al. (1999) and Talitwala (1999) argue that despite the variations in individual grieving process. grieving may follow the grief stages outlined b Rose Kubler. These stages include denial, numbness. Shock, anger; bargaining, depression and acceptance News about death is received with shock and disbelief because it implies a permanent loss of a loved person. The bereaved deny the reality of loss, its meaning, and the fact that death is irrevocable. They long for a reunion with the deceased. They may also withdraw silently. Denial serves to protect an individual from experiencing the intensity of loss. This is followed by numbness exhibited by shortness of breath and tightness in the abdomen (Matlin 2004: Balk. 1999). As more awareness of the loss sinks, the initial numbness gives way to overwhelming sadness expressed either by wild outbursts of screaming or silent withdrawal. The bereaved student should he helped through talk therapy and viewing of the body of the deceased to acknowledge the death and work through denial. A bereaved student may also faint out of shock and should be helped to recover through appropriate first aid measures.

Anger is a strong feeling that one experiences when something that a person feels is bad or unfair has happened (Ndungu, 2007). Once the truth through death begins to be accepted by the bereaved students, they become angry. The anger may become intense and directed towards self, other people or objects and even to the deceased person (Peyne et al., 1999). Anger towards self may be expressed verbally by negative comments of self blame as a regret to have been absent during the death. The students may also show self mutilation behaviours such as hitting themselves or tearing their own clothes in attempt to punish themselves for not being able to stop the death of a loved one. Furthermore, the bereaved may hit the corpse or its coffin, destroy his property or verbally blame the deceased for abandoning them as expression of anger towards the deceased (Weirzbicka, 2004).

Talitwala (1999) regards expression of anger as a normal occurrence during grieving because it eases the pain felt by the bereaved individual. More so, Weirzbicka (2004) notes that unresolved anger can lead to illness and attempts to destroy one's own life through suicide. However misdirected anger may lead to alienation of the bereaved student hampering social support that is crucial to the recovery process. The social support should provide a conducive environment of unconditional positive regard and communicate accurate empathy to enable them fully express their anger. They should he helped to direct their anger to the actual cause of the death to avoid alienation. The peers should be helped through training to understand that expression of anger by the bereaved students is not aimed at hurting them. This will help them to accommodate angry students following the loss of a parent without making them feel that their actions are abnormal. As the reality of loss begins to sink, they bargain with God to seek or negotiate a compromise. Individuals may ruminate over what could have been done to prevent loss. This can provide insight into the impact of loss that may result into feelings of remorse or guilt that may hinder the healing process. For example, they may ask God to reverse the situation and in return they will always attend church services or be good to other people (Peyne et al., 1999). However, Weirzhicka (2004) argues out that bargaining rarely provides a sustainable solution to death because it is irrevocable. This implies that while it is normal and helpful to bargain with God after death of a parent the bereaved student should be helped to bargain for things that are possible and achievable. For example, a bereaved student may he encouraged to bargain for his or her own good health and the ability to do well academically so that he or she can he able to take care of his or her siblings in future.

Weirzbicka (2004) further notes that when bargaining seems not to work and re-union with the deceased is impossible, the bereaved sinks into depression. They experience overwhelming feelings of sadness accompanied by self blame. Corr. (1999) and Talitwala (1999) note that the bereaved students may blame themselves for not being present during the death, not being able to stop the death or for a stormy relationship they had with the deceased. They therefore feel guilty which is the irrational blame on self for loss in which one feels as if he or she would have done something to prevent the demise. A bereaved guilty student is likely to engage in self destructive behaviours such as excessive drinking, accident proneness and carelessness towards personal hygiene (Weirzbicka, 2004). This implies that the self destructive tendencies may harm the student, hamper the healing process and should he worked out in an enhanced appropriate environment for bereavement recovery at school. The appropriate social support may help the bereaved students to understand that death is natural and can occur to any one at any time. They should appreciate that they would not have done much to stop the death. They should be encouraged to work out through their unfinished business with the deceased and make an effort to move on in life. Symptoms of depression such as diarrhoea and constipation should he given medical attention. A special and balanced diet such as a meal a student likes should be given to provide the energy needed for grieving. This will ensure good health and prevent resultant health problems thereby enhancing the recovery process.

Peyne et al. (1999) recognize that once bereaved students overcome depression they accept the loss by acknowledging the situation as it is. They start viewing life, people and situations in a new way and accept their new identities, for example from being a son or a daughter to an orphan

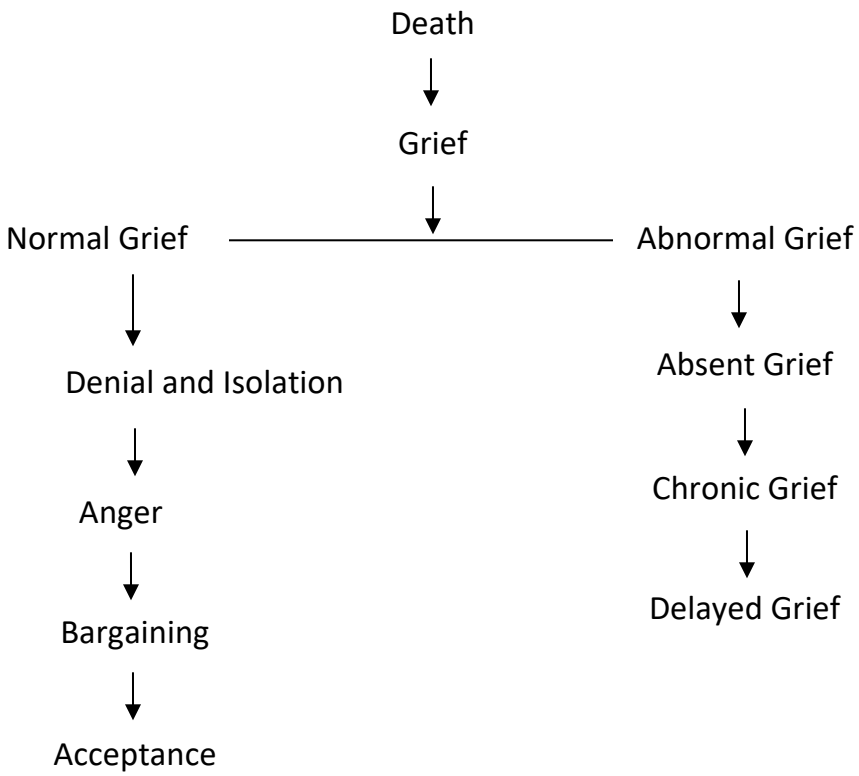
due loss of both parents. Acceptance involves developing new skills in order to manage new experiences. They withdraw the emotional energy from the deceased and re-invest it into new relationships (Weirzbieka, 2004). However, Corr. (1999) notes that they do not have to give up on the deceased but find an appropriate place for him or her in their emotional lives. According to Kanga (2002) and Steve (1999), the re-channeling of the energy from deceased should be done in such a way that the memories of the deceased bring fond feelings mixed with sadness rather than sharp pain and longing for the deceased. The bereaved therefore misses the deceased but clearly understands that life must go on even in the absence of the deceased. Through social support the bereaved should be helped to realize the changes that have occurred and appreciate that life may never be the same again after the death of a parent. For example they may now be under the care of a guardian and they have to adjust accordingly. The enormous energy that was put in a loving and trusting relationship with the deceased parent should now be redirected into establishing a new relationship with the guardian, peer's and other family members. The bereaved should therefore be challenged to work hard and make maximum use of the available learning opportunities in order to be self dependent in future.

Abnormal Grief

According to Neimeyer (1999); Doreen (2002) abnormal grief is also referred to as pathological or complicated grief. It is characterized by exaggerations or deviation from normal grief that is mainly manifested through absent, delayed or chronic grief. It arises from the circumstances of death or the nature of the relationship with the deceased person. As noted by Palmer and Macmahon (2000) absence of grief is sparked by persistent denial and disbelief or the reality of loss through death. It is a normal defense mechanism to protect an individual from intense effect of the strong news about death. However, it is pathological when it persists because it hampers grieving and the setting on of the process of grieving. This implies that the bereaved in persistent denial should he challenged to accept the reality of loss through death and ponder on its implications to their lives in a recovery environment. According to Steve (1990) the bereaved should be taken to view the body of the deceased and challenged through talk therapy to acknowledge the fact that a parent has died. This will help to spark on the anger that is necessary for grieving.

Peyne, et. al. (1999) observed that delayed grief is characterized by either absent or distorted grief. There may be a little sense of loss of a loved one and ambivalent syndromes in absent grief. On the other hand, distorted grief is indicated by over activity following death of a loved one such as social withdrawal, physical illness or clinical depression. For example, the bereaved students may be busy working or studying for long hours during early stages of bereavement. This means that such a student may begin to grieve much later when people least expect and as a result they may not receive enough social support .The recovery environment should therefore help set the stage for grieving by challenging the bereaved to acknowledge the loss through death in good time. Both Talitwala (1999) and Weirzbicka (2004) concur that chronic grief is manifested by exaggerated and persistent grief that is experienced following death in a highly dependent relationship. The stages of normal grief such as denial, anger, bargaining, and depression persist without ever reaching acceptance of the reality of loss. Talitwala (1999) indicates that the

bereaved may become fixated in certain stages. For example, students who are fixated at anger stage continuously blame themselves for the death of a parent. As a result they may neglect themselves by refusing to eat, bath and clean their clothes. Through social support such students should be made to understand that death is natural and is beyond any one's control including themselves. They should be encouraged by the teacher - counsellors to direct anger to the actual cause of death and avoid punishing themselves as this would only intensify the pain they are already experiencing. Bereaved students may therefore undergo either normal or abnormal grief as illustrated in the figure below:



The grieving process. Adapted from Peyne. et al (1999) p77

Factors that Influence Grief

As stated earlier by Palmer and Macmahon (2000) there is no laid down pattern of grieving that is followed by all the bereaved people. The pattern and duration of grief vary in individuals due to the differences in personality, circumstances of death. nature of relationship with the deceased, culture, gender, religious and spiritual beliefs. Like Palmer and Macmahon (2000), Balk (1999) notes that personality and coping styles affect grief. A normally resilient person who gets over setbacks in daily life easily is likely to recover from grief more easily than one who is vulnerable even to minor challenges. The teacher-counsellor should therefore understand the personality of the students. This will help him or her be prepared to go an extra mile in assisting a student who usually has difficulties getting over problems in life.

Theoretical Framework

This study will be informed by the following theories:

(i) The cognitive theory
(ii) Social learning theories
(iii) Psychosocial theories

Cognitive Theory

George Kelly in his cognitive therapy based on the idea that psychological problems result from processes such as facility learning, making incorrect inferences on the basis of inadequate information and basing behaviour on unrealistic attitudes (Smith. 1993). This theory can be used by the teacher-counsellor to change the perception of bereaved students about the circumstances of the death of their parent and its implications on their lives by focusing on negative and unrealistic ways of thinking. For instance, bereaved students who blame themselves for not being with their parent at the time of death should be challenged to realize that death is inevitable and their presence could not have stopped its occurrence. They should also be made to understand that they have a life to live beyond the death of their parent. However, Rickey and Cristiani (1993) caution that the teacher-counsellor should act as a guide and be empathic to the bereaved students to think as they do and to see the world as they see it while remaining objective and logical about the students thinking and situation. This will encourage bereaved students to trust their teacher-counsellors and open up their feelings to them in order to change their unrealistic perceptions as a key step towards bereavement recovery.

Social Learning Theories

Smith (1993) notes that the social learning theory profounded by Bandura is concerned with how social relationships, learning mechanisms and cognitive processes jointly contribute to behaviour. Learning experiences affect people through thought processes. Both Rickey and Cristiani (1993) and Smith (1993) concur that the theory employs a technique of social modelling in which clients are helped to modify their behaviour towards that of an observed model. It is used to help clients to- learn new behaviour or strengthen or weaken existing behaviour. This theory can he used to change unacceptable behaviour of bereaved students that stems from unrealistic perceptions of death through an enhanced bereavement recovery environment with appropriate role models. For example, orphans who perform poorly in academic work can be shown the good performance of other orphans in the school. This will help them to be realistic about in their perceptions of the loss that has occurred and strive to excel academically.

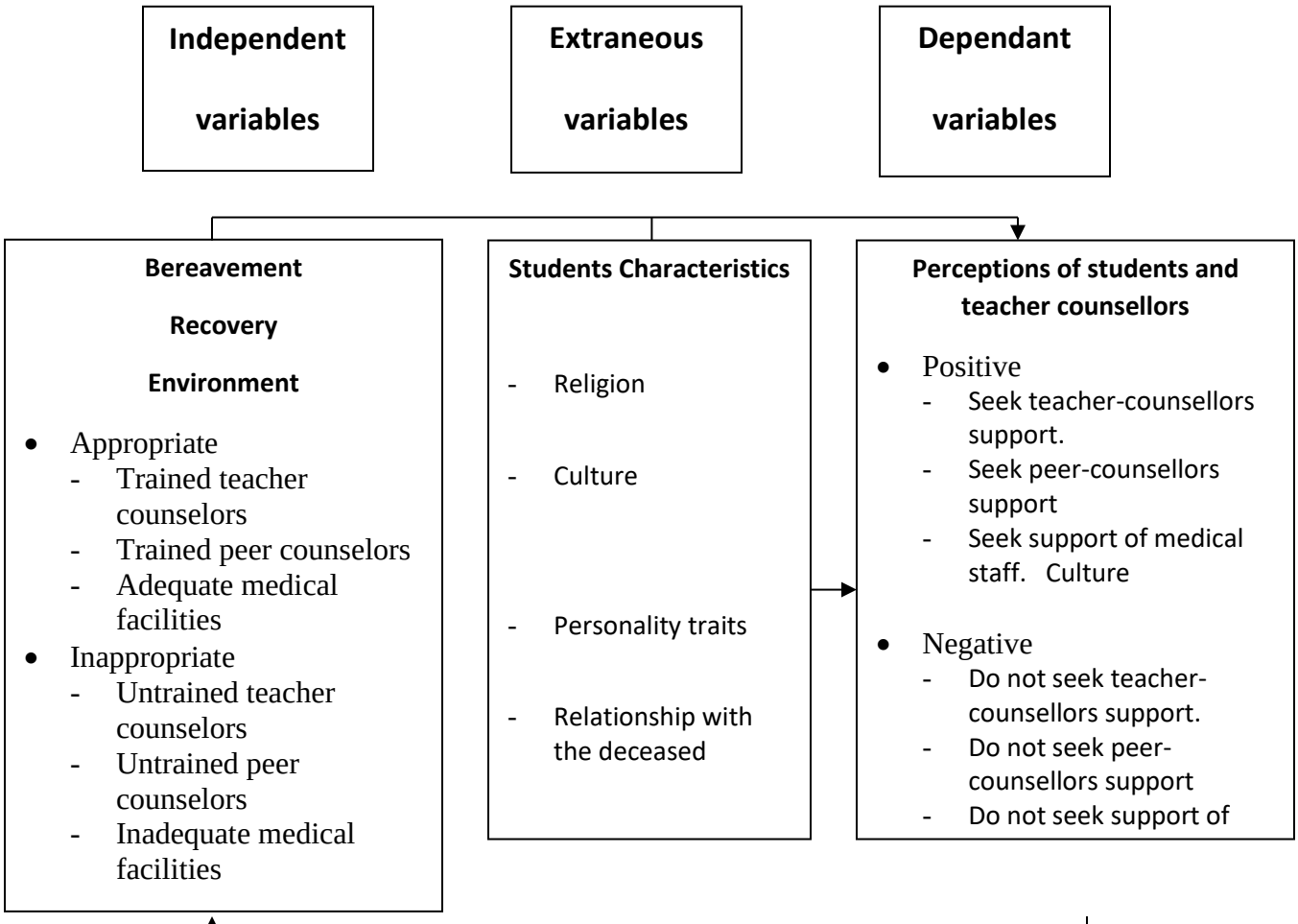
Psychosocial Transitions Theory

Collin Murray Pearks in his theory of psychosocial transitions proposed that grieving is a period of identity transition in which roles, relationships and cognitive schemata are renegotiated because of the changes that have occurred (Talitwala, 1999). He further notes that bereavement brings about the pain of change and the challenges of readjusting one's taken for granted ways of living. This theory challenges bereaved students to perceive and accept that a change has

occurred and strategies to incorporate this change in their new lives. The teacher-counsellor should help bereaved students to develop new identity that is appropriate to new circumstances. For instance, a child who has been identified as a daughter or a son becomes an orphan upon loss of both parents. They should be encouraged to accept this new identity and move on well in life In addition, they may recreate the deceased's identity in their personality or leisure pursuits. For example, a student may be encouraged to study hard in Sciences and Mathematics in order to pursue medicine and become a doctor like his deceased father. This ensures successful grieving through development of a new identity that integrates the deceased in the life story of the survivor (Weirsbicka, 2004; Doreen, 2002).

Conceptual Framework

From the theoretical framework and the variables under study the research has been conceptualized as shown in the figure below.



A model showing interaction of variables in the study

In the conceptual framework illustrated below, the independent variables are the students and teacher-counsellors' perceptions while the dependent variable is the appropriate environment for bereavement recovery. The perceptions of students and teacher-counsellors about death and bereavement may be helpful in establishing an appropriate recovery environment for bereaved students at school. The students characteristics which are the extraneous variables may also he considered in the establishment of the bereavement recovery environment in order to take care of the special needs of individual bereaved students.

Research Design

A descriptive survey research design was employed in this study. The purpose of descriptive survey is to explore and describe characteristics, attitudes, behaviour and values of a population as they exist at the time of the study (Borg, Gall &Gall, 1996; Mugenda & Mugenda, 2003). This design is relevant because the purpose of this study was to establish the students' and teacher-counsellors' perceptions of the appropriate environment for bereavement recovery among secondary school students.

Location of the Study

The study was carried out in Mumias District of Kenya. Mumias like any other part of this country has experienced death of many people of which some are parents of secondary school students through road accidents, excessive alcohol consumption. HIV/AIDS and other related illnesses. The District has one of the leading sugar cane milling factory that has attracted employees from different ethnic groups across the country. They gave varied responses that are useful to the study.

Population of the Study

The study comprised of a target population of 17,200 secondary school students in Mumias District. An accessible population of 634 students who had lost one or both parents through death participated in the study. Secondary school students were selected for the study because they are of an age to understand and comprehend the concept of death. They are greatly affected by it because they not only loose a parent but a caregiver as well (Matlin. 2004). Besides the students' population, the study also involved an accessible population of 49 teacher-counsellors from the 49 secondary schools.

Sampling Procedure and Sample Size

Purposive sampling was used to identify students who had experienced the loss of one or both parents in secondary schools in Mumias District. The number of orphaned students identified through purposive sampling was further stratified into males and females to achieve a desired representation of the various sub- groups in the population (Mugenda &Mugenda, 2003; Orodho, 2004). The sample size of the schools that participated in the study was 23 while that of students who had lost one or both parents through death was 169. This was done using a formula given by Kathuri and Pals (1993). The 23 schools were randomly selected by picking 23 bolls out of 49 that represent the total number of secondary schools in Mumias District. The sample size of students who participate in the study were also randomly selected from the 23 schools to attain

a desired ratio of 1:3 for girls and boys respectively. Besides the students sample size, one teacher-counsellor from each of the 23 selected schools participated in the study.

Instrumentation

The researcher developed two sets of questionnaires for use in collection of data from the respondents. The two questionnaires were code-named the Students Questionnaire (SQ) and the Teacher-Counsellors Questionnaire (TCQ). The SQ was used to collect data on students perceptions whereas the TCQ was used to collect data on the teacher-counsellors' perceptions of the appropriate environment for bereavement recovery among secondary school students respectively. Each of the two sets of questionnaires consisted of three sections that addressed background information that gave the students' details and a 5-point Likert scale closed items to assess the students' and teacher-counsellors' opinions of the appropriate environment for bereavement recovery among secondary school students. The open ended items captured the details that were not addressed by the closed questions.

Validity

To establish validity of the research instrument, the researcher came up with questions in close examination of the study by clearly scrutinizing its concepts and variables. The expertise of supervisors and researchers were sought regarding the test items included in the questionnaires in order to determine their relevance in relation to students' and teacher-counsellors' perceptions of the appropriate environment for bereavement recovery among secondary school students. They also assessed the concepts the instruments measured and determined whether the set of items accurately represent the concepts under study (Mugenda & Mugenda, 2003).

Results and Discussion

The data collected from the respondents was analyzed by both descriptive and inferential statistics. The descriptive statistics included means, frequencies, percentages and standard deviations whereas the inferential statistics involved a t-test. All tests were done at a significant level of $\alpha = 0.05$. The statistical package for social scientists (SPSS) version 7.0 was used. A total of 170 orphaned secondary school students took part in the study. Out of the total, 45 were girls and 125 were boys. The study also involved 23 teacher counsellors out of which 9 were male and 14 were female. Two null hypotheses were tested in the study:

HO_1: There is no significant difference between the male and female students' perceptions of the appropriate environment for bereavement recovery among secondary school students in Mumias District?

HO_2: There is no significant difference between male and female teacher-counsellors' perceptions of the appropriate environment for bereavement recovery among secondary school students in Mumias District?

Characteristics of Respondents

Age of Students

Sampled students were asked to indicate their age which had been categorized into three namely below 15 years, 15 to 18 years and 19 years and above. The findings of the 170 sampled students are presented in the table below.

Table 1: Age of Students

Age category	Frequency	Percent
1. Below 15	34	20.0
2. 15 to 18 years	115	67.6
3. Above 19 years	21	12.4
Total	170	100.0

The findings showed that 67.6 percent of the respondents had an average age of between 15 and 18 years while those below 15 years constitute 20 percent of the sampled students. Most of the students who have lost one or both parents are teenagers between 15 and 1 8 years of age. The study therefore involved students at a very critical age. Neimeyer (2000) and Mary (2010) note that teenagers may respond to loss of a parent through death by delinquency or oppositely become overachievers. They do things repetitively in order to stay above grief. They therefore need enough social support to prevent long term psychological harm.

Orphan Status

The sample size of 170 constituted total orphans (having lost both parents) or partial orphans (having lost only one of the parents). The findings are presented in the table below.

Table 2: Orphan Status

Orphan status	Frequency	Percent
1. Total Orphan	55	32.4
2. Partial Orphan	115	67.6
Total	170	100.0

The findings in Table 2 indicate that 67.6 percent of the students interviewed were partial orphans compared to 32.4 percent who were total orphans. Most of them have a surviving parent whom they can lean on for love, care and financial support that will enhance their recovery from grief.

Orphan Time

The researcher further asked the orphan time .e ho lone it had taken since the death of the parent(s). The findings are presented in Table 4.

Table 3: Orphan Time

Orphan time	Frequency	Percent
1. Below 3 months	15	8.8
2. 4-9 months	26	15.3
3. Above 1 year	129	75.9
Total	170	100.0

The findings in Table 3 show that majority of the respondents (75.9%) where orphaned more than 1 year from the time of interview. Less than 10 percent were orphaned less than 3 months from the date of interview. Most students have been orphaned for a period of over one year while very few have been orphaned fur less than three months. Njenga (2010) indicates that the acute phase of grief lasts for about two months while milder symptoms may last for a year and over. The teacher-counsellors should pay closer attention to students who are bereaved for less than three months and at the same time watch out for milder symptoms of bereavement much later.

Nature of Parents Death

The respondents were also asked to indicate the nature of death of their parent(s). They were required to indicate whether the death was sudden or occurred after a long illness. The findings are presented in the table below.

Table 4: Nature of parent's death

Nature of parents death	Frequency	Percent
1. Short illness	86	50.6
2. Long illness	84	49.4
Total	170	100.0

Findings in Table 4 indicated that death of the students' parents either occurred after short or as a result of a long illness with an almost 50-50 distribution. The findings concur with Corr (1990) that death is eminent and inevitable. It will occur either suddenly or after a long illness. The teacher-counsellors should be well equipped to deal with both groups of bereaved students. This is because Franci (2010) and Neimeyer (2000) note that students whose parent(s) has died after a long illness are likely to recover from grief faster because they would have suffered anticipatory grief and withdrawn emotionally from them. The death of their parent could also have come as a relief from the pain of the illness.

Care Giver at post-bereavement period

This research had an interest in the care giver of the responding students after total or partial bereavement. The findings are indicated in the table below.

Table 5: Care Giver

Care Giver	Frequency	Percent
1. Relative	63	37.0
2. NGO	18	10.6
3. Surviving Parent	89	52.4
Total	170	100.0

The findings showed that in the case of' partial bereavement the surviving parent became the sole care giver to the students. However. 37 percent of respondents are being taken care of by relatives while slightly over 10 percent are under the guardianship of NGOs. The findings concur with Njenga (2010) that most of the partially' orphaned students lean on the surviving parent for love, care and continued financial support. They will therefore have less severe reaction to the death of their parent. The teacher—counsellor should liaise with the care giver of the bereaved students in order to help them recover effectively.

Perception of Students on the Appropriate Environment for Bereavement Recovery

To establish the perception of students on the appropriate environment for bereavement recovery they were asked to respond to a set of 25 statements. The responses were organized into a five-point Likert scale rated strongly agree to strongly disagree. The statements were a mixture of negative and positive. A high score indicates positive perception on the bereavement recovery environment while low scores indicate negative perception.

Summary of Research Findings

Based on the research questions, hypotheses and analysis of the study, the summary of the findings are as follows:

(i) There was a significant difference in the male and female students' perception of the appropriate environment for bereavement recovery among secondary school students in Mumias District.

(ii) There was no significant difference in the male and female teacher-counsellors perception of the appropriate environment for bereavement recovery among secondary school students in Mumias District.

(iii) The female students had a more positive perception of the appropriate environment for bereavement recovery among secondary school students in Mumias District than the male students.

(iv) Both male and female teacher-counsellors had a positive perception of the appropriate environment for bereavement recovery among secondary school students in Mumias District.

Conclusion

From the study it can he concluded that female students have a more positive perception of the appropriate environment for bereavement recovery environment than the male students. As a result the female students are more likely to recover from grief faster than the male students. Both the male and female teacher-counsellors have similar perceptions of the appropriate bereavement recovery environment. The appropriate recovery environment at school may help the bereaved students to overcome the negative effects of grief. This is because the surviving parent and other relatives could have helped them at home are usually pre-occupied with their own grieving. The bereaved students also resume school when still in grief because the grieving process takes long.

Recommendations

The findings of the study reveal that female students have a more positive perception of the appropriate environment for bereavement recovery at school than the male students. Both the male and female teacher—counsellors have a positive perception of the appropriate environment for bereavement recovery. The findings of the study would enable the Ministry of Education, Parents and Teacher-counsellors to help bereaved students to effectively work through grief and adjust well in the absence of their deceased parents.

(i) There is need to train the teacher—counsellors in order to equip them with knowledge and skills needed to help bereaved students to overcome the negative effects of grief.
(ii) Peer counsellors should he identified and trained to effectively help the bereaved students overcome grief.
(iii) A private office should be established for counselling students at school.
(iv) Teacher-counsellors should carry out pre-bereavement counselling to help bereaved students recover faster from grief.
(v) Teacher-counsellors should establish and maintain data bank of students' background information in order to help them effectively upon loss of a parent through death.

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