INFLUENCE OF EDUCATIONAL SUPPORT ON ACADEMIC PERFORMANCE OF ORPHANS AND VULNERABLE CHILDREN IN PUBLIC PRIMARY SCHOOLS IN KALAMA SUB COUNTY, MACHAKOS COUNTY, KENYA

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ABSTRACT

Education gives children hope for life and work, and a strong protector against HIV to which Orphans and Vulnerable Children may be particularly susceptible. Despite the Kenyan government effort in mobilising and supporting community based interventions and ensuring access for Orphans and Vulnerable Children to essential services including but not limited to education, health care, psychosocial support and legal protection, OVC in Machakos County and especially Kalama Sub County have been experiencing challenges in meeting their psychosocial, nutritional, academic and health care needs. The purpose of the study was to establish the influence of educational support on academic performance of OVC in public primary schools in Kalama Sub County in Machakos County, Kenya. The study objectives were to examine the influence of class teacher’s individualized support of OVC learning, to assess the influence of the school provision of OVC feeding programme and to establish the influence of teacher’s/caregiver cooperation on OVC academic performance in Kalama Sub County. The study was premised on Abraham Maslow hierarchy of needs motivational theory. The study adopted descriptive survey design. The study sampled 36 teachers and 11 head teachers. The study data was collected through class teachers’ questionnaire and head teachers interview schedule. Content and construct types of validity were ascertained through scrutiny by a panel of university lecturers. Using test retest technique, teachers; questionnaire was found to have a reliability coefficient of 0.78. Both descriptive and inferential statistics were used to analyze the data. The study’s three formulated null hypotheses were analyzed using multiple regression analysis. School provision of OVC feeding programme had the most significant relative contribution to the prediction of pupils’ academic performance (β = 0.578) followed by level of teachers’ individualized support (β = 0.452) while teacher/caregiver’s cooperation had the least influence (β = 0.329). The study recommended that
all the School Management Committees in collaboration with head teachers should be proactive and start income generating programmes in order to support the home grown school food programme in situations when the government stipend is not forthcoming and when it is inadequate. Further, the SMC should collaborate with local community welfare groups and the larger community in order to extend the food programme to the OVC families.

**Key words**: Academic Performance, Educational Support, Orphan, Vulnerable children, School Feeding Program, Home-Grown School Feeding

### 1.0 Introduction

The United Nations Children’s Fund (UNICEF) maintains that every child requires basic needs to develop and grow to a healthy and responsible adult (UNICEF, 2016). Parental love, care and protection of a child is very crucial in the early stages of development. The immediate family and environment of a child is critical in determining how that child develops because it is in this environment that they get nurtured, thereby experiencing love and acceptance, a sense of belonging, safety and security as well as developing trust, respect and confidence (UNICEF, 2016). Gaventa and Blauert (2016) decries that vulnerable and disadvantaged group of people are often derided, devalued and unappreciated, albeit indirectly by the larger society. The Orphans and Vulnerable children (OVC) fall in the category of the disadvantaged group.

According to USAID (2008) and UNICEF (2016), an orphan is a child under the age of 18 whose mother (maternal orphan), father (paternal orphan), or both parents (double orphan) have died from any cause. Vulnerable children are defined as children whose safety, well-being or development is at significant risk. Similarly, Traflon (2009) considers a vulnerable child as one who is living in circumstances with high risks and whose prospects for continued growth and development are seriously threatened. This includes children that are emotionally deprived or traumatized. Most of these children lack access to basic needs due to high levels of poverty. Most of the orphans are vulnerable, however not all vulnerable children are orphans.

A study spearheaded by UNICEF (2013) estimated that worldwide, there were about 145 million children between the ages of 0 to 17 years without one or both parents. The situation came about due to sickness, conflict and mishaps. The report further disclosed that globally, 15 million children have become orphaned because of AIDS, with 11.6 million of this because of AIDS in sub-Saharan Africa alone (UNICEF, 2013). As such, national governments, NGOs, international
and local stakeholders have recognized the plight of OVC as an issue with economic, social and human right dimensions. Thus, addressing the needs of OVC and mitigation of the living difficulties they encounter has become a priority worldwide.

Rawlings (2003) cited in Musyoka (2016) observes that in the USA, up to 40% of ninth-grade OVC students in some states repeat ninth grade since their academic skills are found to be insufficient for high school-level work. In New Delhi, India, despite the implementation of the Right to Education (RTE) initiative with increased funding, Harvey and Bailey (2011) noted that nearly one third of the states and union territories have seen an increase in the dropout ratio from 1.2% to 4.3% of OVC in primary education level. In Ghana, the Ghana Demographic and Health Survey (2008) reported that 16.3% of children under the age of 15 have at least one parent dead, 6.6% of children under the age of 15 are not living with either parent and therefore, included in the vulnerable category (Garcia & Moore, 2010).

The OVC in countries with many cases of HIV/AIDS experience discrimination in accessing education and healthcare as orphanhood is associated with HIV/AIDS (Fleming, 2015). Fleming further observes that double and maternal orphans are more prone to failure to access education than paternal orphans. Such orphans lack education related materials and conducive home setting and above all experience financial constraints. Children who head the double orphaned families are often associated with low school participation and chronic absenteeism since they are overburdened with domestic and economic responsibilities (Fleming, 2015).

Afwai (2013) reiterates that the situation of the OVC in Kenya is an issue of concern. In 2013, it was estimated that there are over 3 million Orphans in the country, of which 47 percent were orphaned as a result of HIV and AIDS and many more remain vulnerable due to several other factors. Afwai further notes that the statistics surrounding the rising population and the corresponding increase in children in vulnerable situations depicts a grim future and which requires sustained intervention. For instance, over 25% of the population live on less than $1 per day and 12-15% of households in Kenya are headed by an orphan sibling. These orphans sometimes become antisocial as they undergo trauma due to parents death in a society seemingly impervious to their plight (Afwai, 2013).
HIV and AIDS scourge compounded with high poverty levels has aggravated the situation of OVCs in Kenya. Children affected by HIV/AIDS are vulnerable long before their parents die (Langinger, 2011). Girls, in particular, assume caring responsibilities for their ailing parents besides parenting for their siblings. In some regions of the country, over 25% of orphans are acutely malnourished in a country whose economy is largely driven by agriculture (Munuhe, 2014).

Sloth-Nielsen, (2014) observes that with an economically weakened and overstretched traditional African extended family system that can no longer work effectively to address the high OVC burden, most children find themselves without proper social support with the incapacitation and death of their parents. The future of these children remains very unpredictable. This will deny the OVCs a chance to access their basic needs such as proper health care, education shelter and nutrition. Orphans suffer stigma, stress and trauma in addition to the loss of parental love, care and protection and more often they are disinherited by their next of kin (Kiambi & Mugambi, 2017). Further, OVC are exposed to different forms of abuse and exploitation; physical abuse, defilement, sexual exploitation, child labour, and early marriages while more flock to streets to fend for themselves. This situation diminishes their capacity to participate in matters affecting their lives. Indeed, cases of child abuse have become a common feature in this country with only a few of these being reported to the relevant authorities.

In response to OVC issues, the Kenya government has made strides in ensuring OVC are not only receiving basic education but also their upkeep through cash transfer to their care givers. The OVC response is based in the Kenya OVC Secretariat in the department of children’s and gender services of the Ministry of Gender, Children, and Social Development (MOGCSD) (MOGCSD, 2009). Additionally, the multi sector National OVC Steering Committee was established to advise the government on OVC issues in policy, practice, and implementation; and to monitor OVC programming. Members include key ministries such as finance, education, and health; the National AIDS Control Council (NACC); the National AIDS and STI Control Program (NASCOP); and development partners. The steering committee meets regularly to review and advise the government on OVC issues chaired by the Permanent Secretary of the MOGCSD (MOGCSD, 2009).
Pfleiderer and Kantai (2010) observe that in an effort to quantify the OVC situation, the National OVC Steering Committee carried out a Rapid Assessment, Analysis, and Action Planning (RAAAP) Process for OVC in 2004. This eventually led to the development of the National Plan of Action (NPA) for OVC, 2007–2010. The National Plan of Action (NPA) for OVC, 2007–2010 outlines the policies and guidelines on OVC interventions in Kenya (Pfleiderer & Kantai. 2010). The policies and guidelines provide a strategic framework for the OVC response by program developers and implementers. The Kenyan Cash Transfer Programme (CTP) began in 2005 and was mainly funded by the government, the World Bank, the United Kingdom’s Department for International Development (DFID), and the United Nations Children’s Fund (UNICEF). CTP provides systematic support for OVC by strengthening households to take care of OVC (Pfleiderer & Kantai. 2010).

Musyoka (2016) notes that the U.S.A. President’s Emergency Plan for AIDS Relief (PEPFAR) was another major source of funding for OVC and which provided nearly $50 million for OVC in 2010. The fund was used to provide free medical services for children below five years; free primary school, including scholarships for OVC; and legal support for inheritance.

Despite the great effort from both national and international bodies to cater for OVC in Kenya, the aid to OVC has not been sustainable. Furthermore, some aiding projects are susceptible to politics from donor countries and terminate their services when politics change. Such sudden changes in flow of aid has left many OVC more traumatized as they drop from schools, run out of food and lack medical attention (Kiambi & Mugambi, 2017).

2.0 Discussion

School Provision of OVC Feeding Programme and Academic Performance
Santa-Ana-Tellez, DeMaria and Galarraga, (2011) says that school feeding when properly programmed and targeted on the basis of poverty prevalence and food insecurity can not only encourage children to get into school but it can also attract new enrolments from marginalised communities. Further, when combined with food fortification and deworming, school feeding can relieve short-term hunger and tackle micronutrient deficiencies.

In Sub Saharan Africa, an introduction of a free lunch programme in most schools can cause a drastic increase in the number of pupils who attend school (UNICEF, 2016). Due to hard economic
conditions and breakdown of traditional social fabric, many children and especially OVC report to school hungry with no hope of getting the next meal. This condition jeopardizes their chances of attaining meaningful education. Not only does education provide a solid foundation for continued learning throughout life, but it is also critically important to children’s social integration and psychosocial well-being. Most of the OVC who have a constant school attendance, do regain a sense of normalcy and recover faster from trauma and impacts of their disrupted lives. School provision of feeding to OVC can provide a social safety net which to a great extent address issues of inequity and gender imbalance. Moreover, retaining these children in school, especially girls, can reduce their vulnerability to sexual abuse and exposure to HIV, provide access to vocational training, life skills education and entrepreneurship (UNICEF, 2013).

**Teachers’ and OVC Caregivers Cooperation and Academic Performance**

Krishnan (2010), observes that the family, neighborhood and the school have the most and earliest influence on the child’s development. Thus, cooperation between family members or care givers and the school community in providing educational needs for OVC is paramount. In doing so, the OVC educational performance can be enhanced. In addition, constant communication and coordination between the teachers and the OVC care givers can help in creation of optimal home environment for a child to develop physically, psychologically and academically. On the same vein Mwoma and Pillay (2016) proffer that in order for OVC to get adequate support from guardians/parents there is a need for workshops to sensitise them to the need to fully support OVC with school/homework and to supervise their personal hygiene at home.

PEPFAR (2006) notes that strengthening the families and school environment capacity to support OVC is one of the potent measures to enhance OVC academic performance and progress. Krishnan (2010) also pointed out that what happens in a microsystem such as home where a child lives, could influence what happens in the school and vice versa. It is imperative therefore, that capacity building for OVC caregivers on how best to offer educational support by providing an enabling environment such as allowing them time to study and providing the necessary guidance and hope is an option that cannot be overlooked. Class teachers should also make an effort to know and identify with each OVC family and especially the caregiver for close monitoring of OVC welfare. Santa-Ana-Tellez, DeMaria and Galarraga (2011) posit that a social worker attached to school can enhance the link between the teacher and the caregiver. Through various home visits,
the social workers can to identify the various needs of OVC alongside the needs of caregivers with a view of identifying the appropriate ways of meeting those needs.

3.0 Methodology

This study adopted descriptive survey research design. According to Machakos County schools census report of 2016, there were 36 public primary schools in Kalama Sub County (MOEST, 2017). The study targeted 36 head teachers and all grade/class seven 46 class teachers. The study purposively sampled 36 class teachers for class seven from the 36 public primary schools. However, simple random sampling was used to select only one class teacher in schools with more than one stream in class seven. The study also aimed at gathering information about OVC by interviewing some head teachers. Kothari (2009) argues that a sample of 30% of the study population is sufficient to give reliable findings leading to valid and informed generalization and conclusion. In line with that view, the study sampled 30% of head teachers for the interview. The 11 head teachers were selected through simple random sampling. Thus the study sample consisted of 36 class teachers and 11 head teachers.

4.0 Results and Discussions

Teachers’ individualized support of OVC learning and Academic Performance

The study examined the influence of class teacher’s individualized support of OVC learning on their academic performance. To achieve the objective, a set of statements in form of a Likert scale were posed to the respondents to indicate the extent to which they agreed or disagreed with them. The questionnaire responses were coded such that strongly disagree (SD) was rated number 1 while strongly agree (SA) was rated number 5. The mean responses for class teachers were computed such that: a mean response of above 3.0 was considered as agree while a mean of below 3.0 was considered as disagree. Further, for easier interpretation the responses were collapsed into three columns of Agree (A), Neutral (N) and Disagree (D) as shown in Table 4.1. Table 4.1 shows the proportion of teacher respondents in various levels of agreement, the mean and standard deviation.

Table 4.1: Teachers’ Response on Individualized Support accorded to OVC

<table>
<thead>
<tr>
<th>Statement</th>
<th>A</th>
<th>U</th>
<th>D</th>
</tr>
</thead>
<tbody>
<tr>
<td>Statement</td>
<td>%</td>
<td>%</td>
<td>%</td>
</tr>
<tr>
<td>--------------------------------------------------------------------------</td>
<td>-----</td>
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</tr>
<tr>
<td>I normally invite the OVC individually to review their academic performance</td>
<td>61.1</td>
<td>16.7</td>
<td>22.2</td>
</tr>
<tr>
<td>I guide the OVC in their class assignments and homework after school</td>
<td>13.9</td>
<td>8.3</td>
<td>77.8</td>
</tr>
<tr>
<td>I keenly monitor class attendance of the OVC</td>
<td>41.2</td>
<td>19.7</td>
<td>38.9</td>
</tr>
<tr>
<td>I normally keep some learning materials such as pencils, pens, exercise books and rulers for the OVC who might not be having these items.</td>
<td>25.7</td>
<td>3.6</td>
<td>70.7</td>
</tr>
<tr>
<td>I normally try to intervene when a child is depressed, sad or angry due to happenings at home or at a school</td>
<td>86.1</td>
<td>8.3</td>
<td>5.6</td>
</tr>
<tr>
<td>I constantly enquire from the OVC about the living conditions in their homes</td>
<td>77.8</td>
<td>11.1</td>
<td>11.1</td>
</tr>
<tr>
<td>As the class teacher, I make sure I brief teachers about each OVC with a view to empathize and intervene where possible</td>
<td>41.7</td>
<td>16.7</td>
<td>41.7</td>
</tr>
<tr>
<td>As a class teacher, I occasionally instruct my class on life skills</td>
<td>36.1</td>
<td>27.8</td>
<td>36.1</td>
</tr>
<tr>
<td>I have the skills to handle pupils undergoing trauma and shock</td>
<td>27.8</td>
<td>13.9</td>
<td>58.3</td>
</tr>
<tr>
<td>I have the skills to handle pupils affected by grief and loss</td>
<td>27.8</td>
<td>25</td>
<td>47.2</td>
</tr>
<tr>
<td><strong>Aggregate Score</strong></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

In reference to Table 4.1, most of the teachers (61.1%) affirmed they normally invite the OVC individually to review their academic performance. This implies that teachers are concerned with the academic progress of OVC in their classes. However, the 22.2% of teachers who disagreed and
16.7% who were undecided, shows that, there was still a considerable number of teachers who were not keen in doing a follow up on the OVC academic work.

Teachers overwhelmingly (77.8%) indicated that they do not guide the OVC in their class assignments and homework after school. This implied that, OVC who lack a conducive environment at home for academic work, were not able to accomplish their assignments leading to low academic performance. Nevertheless, 41.2% of the teachers affirmed that they keenly monitor class attendance of the OVC showing that were concerned of OVC academic performance and school participation. However, the 58.5% of teachers who disagreed and were undecided was a manifestation of nonchalance attitude assumed by teachers.

The statement that ‘I normally keep some learning materials such as pencils, pens, exercise books and rulers for the OVC who might not be having these items’ was refuted by 70.7% of teachers. Through the open ended section of questionnaires, some teachers indicated that they were overwhelmed by the number of pupils who required assistance in educational materials such as pens, pencils, rulers, rubbers, geometrical sets and books. It was therefore, safe not to entertain provision of any assistance.

Teachers overwhelmingly (86.1%) affirmed that they normally try to intervene when a child is depressed, sad or angry due to happenings at home or at a school (mean = 4.5, SD = 0.4). This implied that most of the teachers were empathetic towards the tribulations OVC undergo. Teachers’ empathy and concern is a virtue which can help identify more pupils who may need to be classified as OVC in order to benefit from the government Cash Transfer Programme. Likewise, teachers overwhelmingly (77.8%), affirmed that they constantly enquire from the OVC about the living conditions in their homes. However, the relatively high standard deviation of 1.2, showed that there were some teachers who indicated that, they do not constantly enquire about the OVC welfare at their homes. Pupils’ academic performance is also a function of the conditions at home. Pupils need psychosocial support, material support and spiritual support and constant guidance in order to function well in school.

The statement that ‘as the class teacher, I make sure I brief teachers about each OVC with a view to empathize and intervene where possible’ was affirmed by 41.7% of teachers and refuted by the same percentage of teachers. This implied that while some teachers embraced team work in
handling the issues of OVC, others did not. Just like the multi sector approach adopted by the National government to handle OVC issues, teachers should embrace the team work in assisting OVC. The statement that ‘as a class teacher, I occasionally instruct my class on life skills’ elicited mixed reactions from the teacher respondents. About 36% of teachers affirmed, 27.8% were undecided while 36% teachers disagreed. This implied that while some teachers were certain that they did teach the life skills, were not sure. Life skills are essential in order for the OVC to overcome the challenges they encounter on daily basis. For instance, as OVC matures, they encounter pressure from peers to engage in sexual activities and use of substance and alcohol. Teachings of Life skills need not be planned and a class teacher advice or a word on how to avoid the common pitfalls in life as they take roll call daily basis, can be of immense help to OVC and other pupils in general.

Over 55% of teachers refuted that they have the skills to handle pupils undergoing trauma and shock. Similarly, 47.2% of teachers refuted that they have the skills to handle pupils affected by grief and loss while 25% were undecided. Therefore, most of the teachers indicated that they lacked the essential skills that are needed to assist OVC overcome the challenges encounter. This finding was affirmed by some head teachers who lamented of the manner in which some teachers handle the OVC. The following comments exemplifies the concern as expressed by the interviewed head teachers:

Some of my teachers are very crude in the manner they handle OVC…some of the pupils undergo very traumatizing experiences especially when they have very sick people at home…when they perform below expectations or report late to school some teachers are quick to inflict physical pain or mental torture through ridicule in class… it becomes a double tragedy…. (Head teacher one-H1).

Surely, we need to be trained on how to handle pupils who have lost a parent or parents due to AIDS…on one hand the teachers would wish the affected pupils to be carefully handled in order to assist them in healing but on the other hand…much attention on these pupils would end up stigmatizing them…. (Head teacher 8).

The number of pupils who need serious guidance and counseling as result of traumatizing experiences encountered at home are on increase in my school…most of the teachers are
unable to handle these situations and I think that is why most of them are taking too long to recover….(Head teacher 4)

Such comments from head teachers denotes the lack of teachers’ capacity to handle the specialized services required by the OVC. As shown in Table 4.1, overall the aggregate mean of responses was 3.2 with a standard deviation of 1.0. This implied that most of class teachers for grade five in Kalama Sub County accorded the OVC in their school individualized support in learning though to a small extent. The accorded support could have translated to better performance in termly examinations.

**School Provision of OVC Lunch Programme and Academic Performance**

The study also assessed the influence of the school provision of OVC feeding programme on their academic performance. To achieve the objective, a set of statements in form of a Likert scale were posed to the respondents to indicate the extent to which they agreed or disagreed with them. The questionnaire responses were coded such that strongly disagree (SD) was rated number 1 while strongly agree (SA) was rated number 5. The mean responses for class teachers were computed such that: a mean response of above 3.0 was considered as agree while a mean of below 3.0 was considered as disagree. The analyzed data was summarized in percentages, means and standard deviations (SD) as depicted in Table 4.2

**Table 4.2: Teachers’ Response on the School Provision of OVC feeding Programme**

<table>
<thead>
<tr>
<th>Statement</th>
<th>A</th>
<th>U</th>
<th>D</th>
<th>Mean</th>
<th>SD</th>
</tr>
</thead>
<tbody>
<tr>
<td>Our school has a sponsored food programme</td>
<td>36.1</td>
<td>5.6</td>
<td>58.3</td>
<td>2.6</td>
<td>0.9</td>
</tr>
<tr>
<td>The school has free lunch for all pupils</td>
<td>69.4</td>
<td>2.8</td>
<td>27.8</td>
<td>4.4</td>
<td>0.6</td>
</tr>
<tr>
<td>OVC are provided with take home package</td>
<td>13.8</td>
<td>25.0</td>
<td>61.1</td>
<td>2.6</td>
<td>0.8</td>
</tr>
<tr>
<td>There is a provision to cater for OVC who may lack supper and breakfast in their homes</td>
<td>22.2</td>
<td>22.2</td>
<td>55.6</td>
<td>2.7</td>
<td>1.0</td>
</tr>
<tr>
<td>The food provided in school is a balance diet</td>
<td>36.1</td>
<td>16.7</td>
<td>47.2</td>
<td>3.0</td>
<td>1.1</td>
</tr>
<tr>
<td>Our school provides lunch throughout the year</td>
<td>22.2</td>
<td>5.6</td>
<td>69.4</td>
<td>2.5</td>
<td>0.7</td>
</tr>
<tr>
<td>The school has food provision for OVC when the school is not in session</td>
<td>13.9</td>
<td>22.2</td>
<td>63.9</td>
<td>2.8</td>
<td>0.8</td>
</tr>
</tbody>
</table>
The school administration is keen on soliciting support for the feeding programme from different stakeholders. The school caters for OVC who require special diet.

<table>
<thead>
<tr>
<th></th>
<th>44.4</th>
<th>19.4</th>
<th>36.1</th>
<th>3.1</th>
<th>1.1</th>
</tr>
</thead>
<tbody>
<tr>
<td>Aggregate Score</td>
<td>2.9</td>
<td>0.8</td>
<td></td>
<td></td>
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</tbody>
</table>

N = 36

In reference to Table 4.2, 58.3% of teacher respondents disagreed that their schools had a sponsored food programme. This implied that though some schools had a sponsor who supplied the food items, others managed without any assistance from sponsors. Incidentally, 69.4% of teachers indicated that their schools had free lunch for all pupils. The interviewed head teachers indicated that most schools in Kalama Sub County had benefitted from the food supply from drought rescue call by the Kenyan government. However, the supply was a seasonal event and could not be relied upon. The statement that ‘OVC are provided with take home package’ was refuted by 61.1% of the teacher respondents implying that, the free food catered for all pupils for lunch regardless of their social economic status but there was hardly any for OVC to take home. However, in some situations head teachers allowed some to have the same food for supper. One of the head teacher commented:

> We sometimes put aside some food though discreetly to cater for OVC in extremely needy situation…especially during end term examinations. The food caters for their supper and sometimes breakfast. It is normally a tricky arrangement because when other pupils and some parents happen to know, the number of pupils who will plead for their desperate cases will be overwhelming big. (Head teacher 11)

Over 45% of teachers refuted that the food provided in their schools was a balanced diet, 16.7% were not sure while 36.1% affirmed. Some teachers argued that, the mixture of maize and beans which was mostly cooked did not qualify to be termed as balanced diet since there were no vitamins. Other teachers were reluctant to commit themselves for the reason that they were not dieticians. One of the head teacher commented:

> There was a time we were supplied with a fortified rice…in which all the essentials required by growing children were said to have been in cooperated…however the current batch consists of only maize and beans…and I doubt whether it can adequately cater for a growing child. (Head teacher 5).
Most of the teachers (69.4%) refuted that lunch was provided throughout the year. This implied that the supply of food stuff was not constant in all schools. According to some head teachers, the World Food Program scaled down their supply and which gave way to the Kenyan Home Grown School Meals (HGSM) programme. The programme aimed at acting as a safety net strategy to increase food supply, improve incomes and reduce hunger and malnutrition. The government was expected to grant schools money to pay the local suppliers. However the flow of the expected funds has been erratic and schools are forced to either organize through the school committee or do without lunch programme. The gravity of the situation when the school runs out of supply was captured from one of the head teachers’ comment, thus:

I dread the situation when our food store runs dry in the middle of the term…you notice areal stress among the pupils…some stop coming to school, some become dirty, irritable and general restlessness…it is even worse with OVC, where some seek transfer to other school with running food programme and some leave school for street life…in such situations their academic performance drop drastically…teachers sometimes come together and contribute money to sustain the OVC in grade seven and eight… (Head teacher 6).

The statement that ‘the school has food provision for OVC when the school is not in session’ was refuted by 63.9% of teachers, 13.9% agreed while 22.2% of teachers were not sure. This implied that most schools did not have an elaborate arrangement for OVC to continue getting food assistance when the school was not in session. One of the interviewed head teachers noted:

OVC suffer from hunger and lack of supportive environment during the school holidays…this has prompted me to organize for those in grade seven and eight to board in a place nearby the school. The arrangement enables teachers to assist them in both material, psychosocial and academic work. Most of those who board end up performing well in KCPE… (Head teacher 4).

The statement that ‘the school administration is keen on soliciting support for the feeding programme from different stakeholders’ elicited varied responses from the teacher respondents. While 44.4% of teachers agreed, 19.4% and 36.1% of teachers disagreed (mean = 3.1 and SD = 1.1). The relatively high standard deviation arose from the fact that being an administrative task, most teachers might not have been aware of the efforts made by the administration to solicit support for the food programme. However, the researcher gathered more information from the head teachers. Some head teachers expressed their frustrations in regard to finding a reliable school
programme sponsor who would supplement the government funding or fund the programme fully. Further, though some schools management committees had mobilized parents to start food programmes, they often ran into problems due the fact that some parents claimed that education was totally free and hence were reluctant to continue their contributions.

In regard to school catering for OVC who require special diet, majority of teachers (80.5%) indicated to the contrary. Only 13.8% of teachers affirmed. On the same issue, one of the interviewed head teacher commented:

…the issue of a special diet has no place in our school…in the first place we struggle to get whatever is available and when it is not forth coming we stay without…when it is a must that an OVC needs a special diet…we try to connect the affected pupil to a private children’s’ home. (Head teacher 9).

Overall the teachers mean response on the school provision of food programme as a function of OVC academic performance, was 2.9 with a standard deviation of 0.8. Thus, on average, teachers indicated that the educational support for OVC in terms of food was unsatisfactory and they could not perform to their potential in the prevailing food situation in Kalama Sub County public primary schools.

5.0 Conclusion

Most of the class teachers in Kalama Sub County in Machakos County were not giving OVC the attention that their situation deserved. Apart from showing empathy, teachers should be able guide and counsel and above all instruct on life orientation skills especially after OVC traumatic experience. In addition, OVC need encouragement and guidance in academic work.

School food programmes in Kalama Sub County were found to be erratic in that most were not sustainable. In some schools the programmes collapsed the moment the free food from World Food Programme (WFP) got exhausted prompting massive OVC absenteeism and drop out. Most schools were yet to embrace fully the government initiated home grown school food programme. The School Management Commitees are expected to take the stewardship of the school food programme where parents are to contribute some funds to make it successful.

REFERENCES


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