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### Influence of Capacity Building of Counsellors on Teenage Pregnancy in Public Secondary Schools in Ruiru Sub-County, Kiambu County, Kenya.

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**Keywords:**  
*Teenage  
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Capacity building plays an important role in equipping counsellors with skills to enable them undertake their tasks of reducing incidences of teenage pregnancy in public secondary schools. However, in Ruiru Sub- County, cases of teenage pregnancy in public secondary schools are still high. Thus, this study sought to assess the influence of capacity building of counsellors on teenage pregnancy in public secondary schools in Ruiru Sub- County, Kiambu County, Kenya. The objectives were; to assess the level of teenage pregnancy and the influence of capacity building of counsellors, motivation of counsellors, provision of counselling materials and implementation of counselling reports on teenage pregnancy in public secondary schools. The study was based on the open systems theory and theory of planned behaviour. The study applied a mixed methodology and thus adopted a concurrent triangulation research design. Qualitative data were analysed thematically along the objectives and presented thematically in narrative forms. Quantitative data were analysed descriptively using frequencies and percentages and inferentially using One-Sample t-Test analysis with the help of Statistical Package for Social Sciences (SPSS 23) and presented using tables. The study established that there have been many cases of teenage pregnancy in public secondary schools. It was also found that implementation of counselling programmes has been a challenge with capacity building of counsellors not effectively undertaken in secondary schools. The study recommends that secondary schools should organize seminars and workshops to train teachers and peer- counsellors on how to undertake counselling activities. The Ministry of Education (MoE) should set and allocate some amount of money to offer as incentives to teachers and students who undertake counselling activities and tasks besides their classroom activities.

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## INTRODUCTION

Teenage pregnancy is a form of pregnancy in human females under the age of 20 years. Finer and Zolna (2011) posit that teenage pregnancy can take place after the start of puberty before the first menstrual period but usually occurs after the onset of periods. Among female students in public secondary schools, teenage pregnancy has become prevalent with global statistics rating the menace at 67.9%. In the United States of America (USA), for example, Henshaw (2012) asserts that approximately one million teenagers become pregnant each year; most of these pregnancies are among older teenagers, that is, those 18 or 19 years old. According to Kost and Henshaw (2012), approximately 51% of teenage pregnancies end in live births, 35% end in induced abortion, and 14% result in a miscarriage or stillbirth.

In Venezuela, Marianella and Pablo (2017) note that cases of teenage pregnancies have become a major problem among youth in schools with high rates being reported on a daily basis. Marianella and Pablo (2017) report that, in Venezuela, teenagers account for 35.6% of births. A similar report by the United Nations Population Fund (UNPF) indicates that Venezuela has one of the highest teenage pregnancy rates in the world. In other words, every 3 minutes, there is a birth from a teenage girl (UNPF, 2018). Drawing from these statistics, secondary schools have introduced counselling as a strategy to help alleviate the deleterious effects of teenage pregnancy on

students' education and realization of career objectives. According to Norwhich (2000), counselling is interaction processes co-joining the counselee, who is vulnerable and who needs assistance and the counsellor, who is trained and educated to give this assistance, the goal of which is to help the counselee learn to deal more effectively with himself or herself and the reality of his or her environment. In the Netherlands, Kauchak (2011) asserts that secondary schools provide free counselling programmes to teenagers about reproductive health and how such programmes in the school setting can help to prevent teenage pregnancy. However, capacity building of counsellors as a mitigant to increasing cases of teenage pregnancy in secondary schools has not been fully explored.

Capacity-building or training entails equipping teachers and students with skills and abilities for adaptive and positive behaviour, that enable individuals to deal effectively with the demands and challenges of everyday life such as teenage pregnancy. According to Botvin et al., (1998), these capacity-building skills include; decision-making, problem-solving, creative thinking, critical thinking, effective communication, interpersonal relationship skills, self-awareness, empathy, and coping with emotions and stress.

In keeping with these assertions, Norwhich (2000) conducted a study in the United Kingdom which revealed that the training of teachers and students on life skills appears in a wide variety of educational programmes with demonstrable

effectiveness, including programmes for the improvement of their behaviour patterns. Norwhich (2000) further established that training on life skills to learners as generic skills about everyday life could form the foundation of capacity building for the promotion of mental well-being and healthy behaviour. More problem-specific skills such as assertively dealing with peer pressures to have unprotected sex which results in teenage pregnancy could be built on this foundation (Norwhich, 2000). This is indicative of the fact that training on skills in this way, as part of broad-based life skills programmes in schools for teachers and students, is an effective approach for primary prevention education against teenage pregnancy.

In Canada, Hancock (2003) reports that a wide range of motives for training on life skills to adolescents includes manifestations of good behaviour through prevention of teenage pregnancy. In the same vein, a study carried out in Australian elementary schools by Jackson (2002) revealed that life skills appear in school guidance and counselling programmes to enable them to acquire skills on how to handle cases of teenage pregnancy. Given the wide-ranging relevance of capacity building and training of teachers and students on life skills, Jackson (2002) suggests that an optimal strategy for the introduction of life skills training would be to make it available to all adolescents in schools. This points to the fact that life skills training of students in schools promotes the learning of abilities that contribute to positive healthy behaviour, positive interpersonal relationships, and psychological well-being.

Many secondary schools in Sub-Saharan Africa have not been immune to the challenges of teenage pregnancy. Cognizant of these viewpoints, Eyrich-Garg (2008) asserts that there is recognition of equipping counsellors with skills through effective capacity building as the best strategy for mitigating such increasing cases of teenage pregnancy. Adentwi (1998) asserts that, in capacity building, counsellors are actively involved in dynamic training on the learning process. The methods used to facilitate this active involvement include working in small groups and pairs, brainstorming, role play, games, and debates. In Tanzania, Mbelwa and Isangula (2012) posit that educational policy has been revised to include the component of guidance and counselling. For effective results to be realized, management of guidance and counselling

programmes is key and thus, secondary school principals should work with counsellors to ensure that each building has written a student development program and that it is revised based on experience, data, and school improvement goals. In Uganda, for example, Atuyambe et al., (2005) indicate that school heads are tasked with the responsibility of supervision of the implementation of guidance and counselling programmes. In Kenya, the situation is not different with many secondary schools having reported cases of teenage pregnancy. An assessment by Achieng (2018) shows that 18% of young women aged 15-19 years have already begun childbearing; 15% are mothers and an additional 3% are pregnant with their first child. In Ruiru Sub- County, an empirical assessment by Taffa et al., (2014) shows that teenage pregnancy stands at a preference rate of 14.0% among students in secondary schools. Thus, the training of counsellors is key. A study conducted by Laura (2014) revealed that investment in life skills capacity building programmes is worthwhile considering that the potential gains of capacity building are so far-reaching. Laura (2014) further noted that the methods used can help to improve teacher and student relationships and life skills lessons are associated with fewer reports of behaviour problems. There are also cases of improved school attendance, less bullying, fewer referrals to specialized support services, and better relationships between students and their parents.

A study undertaken by Joyce et al., (2018) revealed that public secondary schools in Ruiru Sub- County have witnessed increased cases of teenage pregnancy. In 2014, teenage pregnancy cases were 23.8%, 25.9% in 2015, 29.1% in 2016, 29.7% in 2017 and 30.1% in 2018 (Joyce et al, 2018). As a panacea to increasing teenage pregnancy cases among students, Laura (2014) asserts that public secondary schools have embraced capacity building and training of teachers and students. However, much still needs to be done since Laura (2014), as did other empirical studies, has not interrogated how different concepts learnt during capacity-building sessions on life skills specifically influence cases of teenage pregnancy in secondary schools.

### **Statement of the Problem**

Capacity building enables teachers and students to acquire counselling skills that are strategic in reducing incidences of teenage pregnancy in

schools. However, in Ruiru Sub- County, the situation is quite different with many secondary schools having reported cases of increased teenage pregnancy. As noted earlier, a report by Taffa et al., (2014) shows that secondary schools in Ruiru Sub- County are grappling with the increase in the incidences of teenage pregnancy with a prevalence rate of 14.0%. Similarly, a study undertaken by Joyce et al., (2018) also revealed that public secondary schools in Ruiru Sub-County have witnessed increased cases of teenage pregnancy.

In 2014, teenage pregnancy cases were 23.8%, 25.9% in 2015, 29.1% in 2016, 29.7% in 2017 and 30.1% in 2018 (Joyce et al, 2018). To mitigate these challenges, secondary schools have introduced counselling as the panacea to an increasing rate of teenage pregnancy. However, the problem persists. Thus, this study sought to assess the influence of capacity building of counsellors as principals' management approach to counselling on teenage pregnancy in public secondary schools, thus, the study.

### Objective of The Study

The study sought to address the following objectives;

- To assess the prevalence of teenage pregnancy in public secondary schools in Ruiru Sub-County;
- To establish the influence of capacity building of counsellors on teenage pregnancy in public secondary schools in Ruiru Sub- County;

### THEORETICAL FRAMEWORK

This study was based on the open systems theory which was postulated by Luhmann (2004). The open systems theory is an approach to organizations, which likens an organization to an organism with interdependent parts, each with its specific function and interrelated responsibilities. All parts of the organization are interconnected and interdependent. The school as an organization is an open system, which interacts with the environment and is continually adapting and improving through continuous training and capacity building. Luhmann (2004) asserts that the interaction between teachers and students and other stakeholders also incorporates monitoring of students' behaviour and appropriate correction of

any behaviour problems that may be noted among the students.

In the context of this study, some of the changes may include policy changes and policy requirements which encourage teachers and students to undertake re-training programmes, which could reduce cases of teenage pregnancy. This study was also guided by the theory of planned behaviour (TPB) which was postulated by Ajzen (1991). This theory was premised on a well-established social-cognitive model for predicting a variety of human behaviours. This theory assumes that the best predictor of behaviour is a behavioural intention, which is guided by two major constructs. In other words, Ajzen (1991) asserts that how strong an attempt the individual makes to engage in the behaviour and how much control that individual has over the behaviour (behavioural control) are influential in whether he or she engages in the behaviour. In the context of this study, this theory is particularly relevant to sexuality education because it focuses on beliefs and values which strongly influence the decisions young people make about their sexual behaviour. In addition, the relevance of this theory in this study is that it underscores the fact that sexual behaviour such as unprotected sex in teenage mothers is the major contributor to teenage pregnancy.

### RESEARCH METHODOLOGY

The study applied a mixed methodology and thus adopted a concurrent triangulation research design. The study targeted 13 principals, 67 teacher-counsellors and 260 peer counsellors totalling 340 respondents from which a sample of 183 respondents was determined using Yamane's Formula. Stratified sampling was applied to create three strata based on the number of zones in Ruiru Sub- County. From each zone, three principals and 19 teacher-counsellors were sampled using purposive sampling. However, from each zone, 39 peer counsellors were selected using simple random sampling. This procedure resulted in a sample of nine principals, 57 teacher-counsellors and 117 peer counsellors. Questionnaires were used to collect data from teacher- counsellors, while data were collected using interview guides for principals and focus group discussions from peer counsellors. Qualitative data were analysed thematically along the objectives and presented thematically in narrative forms. Quantitative data were analysed descriptively using frequencies and

percentages and inferentially using One-Sample t-Test analysis using Statistical Package for Social Sciences (SPSS 23) and presented using tables.

## RESULTS AND DISCUSSIONS

This section presents the findings of the study based on the objective. It also outlines the methods of presentation of the study findings and discussions.

**Table 1: Response Rates**

Respondents	Targeted	Participated	Return Rate (%)
Principals	9	8	88.9
Teacher-counsellors	57	54	94.7
Peer Counsellors	117	88	75.2
Total	183	150	82.0

*Table 1* shows that principals registered a response rate of 88.7%, teacher-counsellors registered 94.7% whereas peer counsellors registered a response rate of 75.2%. This yielded an average response rate of 82.0% which is consistent with the assertions of Creswell (2014) that a response rate above 75.0% is adequate. This information was important since it allowed the researcher to generalize the study outcomes to the target population.

**Table 2: Prevalence of Teenage Pregnancy in Public Secondary Schools**

Academic Year	Number of Cases of Teenage Pregnancy
2015	18
2016	21
2017	26
2018	25
2019	30

*Table 2* shows that many public secondary schools in Ruiru Sub- County have registered an increasing trend in the number of cases of teenage pregnancy from the year 2015 to 2019. This corroborates the findings of the Ministry of Public Health and Sanitation (2012) in its report which showed that teenage pregnancy has alarming statistics in Kenya. The findings further support the assertions of KNBS (2019) that teenage pregnancy has become a common phenomenon among students in public secondary schools. This further supports the assertions of Achieng (2018) who showed that 18% of young women aged 15-19 years have already begun childbearing; 15% are mothers and an additional 3% are pregnant with their first child. These findings further

## Response Rate

In this study, 57 questionnaires were administered to teacher-counsellors and, in return, 54 questionnaires were filled and returned. The researcher also interviewed eight (8) principals and conducted focus group discussions among 88 peer counsellors. This yielded response rates shown in *Table 1*;

## Prevalence of Teenage Pregnancy in Public Secondary Schools

The first objective of the study sought to assess the prevalence of cases of teenage pregnancy in public secondary schools. The findings are presented in *Table 2*;

support the findings of a study carried out in Ruiru Sub- County in which Taffa et al., (2014) also revealed that teenage pregnancy stands at a prevalence rate of 14.0% among students in secondary schools.

Similar assertions are expressed by Joyce et al., (2018) that public secondary schools in Ruiru Sub- County have witnessed increased cases of teenage pregnancy at a range of 23.8% to 30.1%. This implies that teenage pregnancy has become a serious problem in many secondary schools and has compromised the participation rates of students in academic activities. Many students become pregnant and have to suspend their academic activities for a while. Though there is an

opportunity for re-admission, their focus and concentration on academic activities are impacted negatively due to the divided attention of being a parent and a student at the same time.

The researcher also interviewed the principals and undertook focus group discussions with peer counsellors who also admitted that cases of teenage pregnancy in their secondary schools have become commonplace. Principal, P1, noted;

*In my school, I have had so many cases of girls getting pregnant either in form three or form four that they have to suspend their school attendance to focus on childbearing. Though I always admit them back after the delivery, their focus on school activities is often low since they have to take care of their young ones. This has often compromised their academic performance. In some cases, teenage mothers rarely come back to finish their secondary education (P1).*

These views were corroborated by the peer counsellors who noted that they have had to attend classes with their colleagues who are teenage mothers. During the FGD, they reported;

*On many occasions, we have had our colleagues' falling victims to teenage pregnancy. Some of them have come back to finish their secondary education while others do not come back.*

From these verbatims, it is evident that teenage pregnancy has become prevalent among students in public secondary schools. Just as noted in the quantitative findings above, these views further corroborate the assertions of Taffa et al., (2014) that teenage pregnancy has become a serious problem in many public secondary schools in Ruiru Sub- County. Joyce et al., (2018) also supported that view that public secondary schools in Ruiru Sub- County have witnessed increased cases of teenage pregnancy. These findings indicate that teenage pregnancy has become a serious problem in secondary schools.

### Capacity Building of Counsellors and Teenage Pregnancy in Secondary Schools

The second objective of the study sought to examine how capacity building of counsellors influences teenage pregnancy in public secondary schools. Descriptive data were collected from teacher-counsellors and results are shown in *Table 3*;

**Table 3: Influence of Capacity Building of Counsellors on Teenage Pregnancy in Secondary Schools**

Test Items	Ratings in %				
	SA	A	U	D	SD
In public secondary schools, teachers have not undertaken any capacity building on counselling to reduce teenage pregnancy	51.9	11.1	5.6	5.6	25.8
Teachers in public secondary schools rarely undergo capacity building on counselling as a way of reducing teenage pregnancy	53.7	14.8	5.6	11.1	14.8
Capacity-building strategies on counselling adopted by public secondary schools have not been effective in reducing teenage pregnancy	57.4	9.3	7.4	9.3	16.7
In public secondary schools, capacity building of counsellors on counselling is rarely considered as a strategy for reducing teenage pregnancy	48.1	18.5	5.6	9.3	18.5
In public secondary schools, the success of counselling programmes has depended on the capacity building of counsellors	66.7	11.1	3.7	5.6	13.0

*Table 3* shows that 28(51.9%) of teacher-counsellors strongly agreed with the view that, in public secondary schools, teachers have not undertaken any capacity building on counselling to reduce teenage pregnancy as did 6(11.1%) who agreed. However, 3(5.6%) were undecided,

3(5.6%) disagreed whereas 14(25.8%) strongly disagreed. A fair majority, 29(53.7%) of the teacher-counsellors strongly agreed with the view that teachers in public secondary schools rarely undergo capacity building on counselling as a way of reducing teenage pregnancy while 8(14.8%)

agreed. However, 3(5.6%) were undecided, 6(11.1%) disagreed whereas 8(14.8%) strongly disagreed. These findings contrast the assertions of Hancock (2003) that, in Canada, a wide range of motives for training on life skills to adolescents include manifestations of good behaviour through prevention of teenage pregnancy.

These findings do not support those of a study carried out in Australia in which Jackson (2002) revealed that, given the wide-ranging relevance of capacity building of teachers and students, an optimal strategy for the introduction of life skills training would be to make it available to all adolescents in schools. This indicates that, although it is rarely practised, capacity building of counsellors in schools promotes the learning of abilities that contribute to positive healthy behaviour, positive interpersonal relationships, and psychological well-being. This helps to reduce cases of teenage pregnancy in secondary schools or any other learning institutions. The study also revealed that 31(57.4%) of the teacher-counsellors strongly agreed with the view that capacity-building strategies on counselling adopted by public secondary schools have not been effective in reducing teenage pregnancy while 5(9.3%) agreed. However, 4(7.4%) were undecided, 5(9.3%) disagreed whereas 9(16.7%) strongly disagreed. Table 3 shows that 26(48.1%) of the teacher-counsellors strongly agreed with the view that, in public secondary schools, capacity building of counsellors on counselling is rarely considered as a strategy for reducing teenage pregnancy whereas 10(18.5%) agreed. At the same time, 3(5.6%) were undecided, 5(9.3%) disagreed whereas 10(18.5%) strongly disagreed.

From *Table 3*, majority, 36(66.7%), of the teacher-counsellors strongly agreed with the view that, in public secondary schools, the success of counselling programmes has depended on

capacity building of counsellors while 6(11.1%) agreed, 2(3.7%) were undecided, 3(5.6%) disagreed whereas 7(13.0%) strongly disagreed. These findings are inconsistent with the findings of another study carried out in the United Kingdom in which Norwich (2000) revealed that the training of teachers and students on life skills appears in a wide variety of educational programmes with demonstrable effectiveness, including programmes for the improvement of their behaviour patterns. Norwich (2000) further established that training on life skills to learners as generic skills about everyday life could form the foundation of capacity building for the promotion of mental well-being and healthy behaviour. This implies that, though not fully embraced in many secondary schools, training on skills, as part of broad-based life skills programmes in schools for teachers and students, is an effective approach for primary prevention education against teenage pregnancy.

Secondary schools need to consider equipping counsellors, both teachers and peer, with skills to undertake effective counselling activities to reduce the rates of teenage pregnancy. In other words, investment in life skills counselling and capacity building programmes is worthwhile, considering that the potential gains of capacity building are so far-reaching and can help to improve teacher and student relationships, and life skills lessons are associated with fewer reports of behaviour problems. To verify the influence of capacity building of counsellors on teenage pregnancy in public secondary schools, data were collected on how often capacity building of counsellors is undertaken in the sampled schools (Very Often = 5, Often = 4, Sometimes = 3, Rarely = 2 and Never = 1) and the number of cases of teenage pregnancy in public secondary schools. The results are shown in *Table 4*:

**Table 4: Capacity Building of Counsellors and the Number of Cases of Teenage Pregnancy in Public Secondary Schools**

Frequency of Capacity Building of Counsellors	No. of Cases of Teenage Pregnancy
3	4
2	5
2	3
2	2
3	1
2	4
3	2
3	2

Table 4 shows that capacity building of counsellors in many public secondary schools is an activity that is rarely undertaken. However, in secondary schools, where capacity building of counsellors is frequently undertaken, the number of cases of teenage pregnancy has gone down.

**Inferential Analysis of the Influence of Capacity Building of Counsellors on Teenage Pregnancy in Secondary Schools**

The results in Table 4 were subjected to One-Sample t-Test Analysis and the results are shown in Table 5:

**Table 5: One-Sample t-Test Analysis of the Difference between Capacity Building of Counsellors and Teenage Pregnancy in Public Secondary Schools**

	Test Value = 0					
	t	df	Sig. (2-tailed)	Mean Diff	95% Confidence Interval of the Difference	
					Lower	Upper
Frequency of Capacity Building of Counsellors	13.229	7	.000	2.50000	2.0531	2.9469
Number of Cases of Teenage Pregnancy	5.996	7	.001	2.87500	1.7412	4.0088

Table 5 shows the One-Sample t-Test Analysis, which generated a significance level of 0.000 for the mean of the frequency of capacity building of counsellors and 0.001 for the mean of the number of cases of teenage pregnancy in public secondary schools. This indicates that significance values (p-values, 0.000 and 0.001) are less than 5%, that is,  $0.000 < 0.05$  and  $0.001 < 0.05$ , which implies that capacity building of counsellors contributes to a reduction in the number of cases of teenage pregnancy in secondary schools. That is, the higher the frequency of capacity building of counsellors, the lower the number of cases of teenage pregnancy in public secondary schools.

**Thematic Analysis of the Influence of Capacity Building of Counsellors on Teenage Pregnancy in Secondary Schools**

During the interviews with principals and focus group discussions with peer counsellors, it was noted that, in public secondary schools, teachers have not undertaken any capacity building on counselling to reduce teenage pregnancy. On further probing, principal, P2, noted;

*In my school, I have ensured that both teacher-counsellors and peer counsellors undertake training programmes to equip them with basic counselling skills, though there have been*

*numerous challenges due to a lack of resources (P2).*

This view was, however, refuted by the peer counsellors who noted that they are rarely undertaken for capacity-building programmes. During the FGDs, peer counsellors affirmed;

*We have never undergone any training or capacity-building activity to enhance our counselling skills.*

Despite this contradiction, the role of capacity building in equipping both teachers and peer counsellors with skills is crucial as a strategy for reducing rampant cases of teenage pregnancy in secondary schools. The interviewees and discussants, however, concurred with the teachers that capacity-building strategies on counselling adopted by public secondary schools have not been effective in reducing teenage pregnancy. Principal, P3 admitted;

*In my school, there have been challenges organizing for effective capacity building for counsellors to equip them with skills to handle cases of teenage pregnancy and help reduce similar cases in the school.*

On their part, peer counsellors also noted that strategies adopted to reduce cases of teenage pregnancy are not working since capacity-building



strategies have not been fully implemented. During the FGDs, the peer counsellors noted;

*In our school, capacity building is rarely conducted to equip us with techniques of talking to our colleagues on how to avoid behaviour patterns that may lead to instances of teenage pregnancy. A mere invitation of a motivational speaker to talk about the dangers of teenage pregnancy is not enough. The school should organize some training on counselling skills to enable us to be in a position to handle different students differently.*

This indicates that there is recognition that the place of capacity building of counsellors as a model for lowering cases of teenage pregnancy cannot be overemphasized. In summary, these mixed findings indicate that, though not commonly practised, capacity building of counsellors promotes the learning of abilities that contribute to positive healthy behaviour, positive interpersonal relationships, and psychological well-being. This helps to reduce cases of teenage pregnancy in secondary schools.

## SUMMARY OF FINDINGS AND CONCLUSIONS

From the study findings, it is evident that teenage pregnancy has become a serious problem among students with a net negative effect on their pursuit of secondary education. Many public secondary schools in Ruiru Sub-County have had most of their students' falling victims of teenage pregnancy for the last five years (2015-2019). The study established that capacity building of counsellors is a rare undertaking in many public secondary schools. Though not usually practised, capacity building of counsellors in schools promotes the learning of abilities that contribute to positive healthy behaviour, positive interpersonal relationships, and psychological well-being, which help reduce cases of teenage pregnancy in secondary schools.

## Recommendations

The study recommends that secondary schools should organize seminars and workshops to train teachers and peer counsellors on how to undertake counselling activities. This will equip them with the

pre-requisite skills and techniques of advising students to conduct themselves in a disciplined manner and not fall into traps of teenage pregnancy.

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