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EFFECTS OF PSYCHOSOCIAL INTERVENTION ON ACADEMIC PERFORMANCE OF LEARNERS WITH SPECIFIC LEARNING DISORDERS IN KARACHUONYO NORTH SUB-COUNTY, HOMA BAY COUNTY, KENYA

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ST. PAUL'S UNIVERSITY

A DISSERTATION PRESENTED TO THE FACULTY OF SOCIAL SCIENCES AT ST. PAUL'S UNIVERSITY, IN PARTIAL FULFILMENT OF THE REQUIREMENTS FOR THE DEGREE OF MASTER OF ARTS IN COUNSELLING PSYCHOLOGY

JULY, 2026

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DECLARATION

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ABSTRACT

Quality education remains unattainable for a significant proportion of learners with Specific Learning Disorders (SLDs) in Homa Bay County, Kenya, due to inadequate resources, insufficient support, and limited teacher awareness. This study examined the role of psychosocial interventions in enhancing academic performance among learners with dyslexia (28%, 55 learners), dyscalculia (22%, 43 learners), and dysgraphia (15%, 29 learners) in Karachuonyo North Sub-County. Grounded in Bronfenbrenner's Ecological Systems Theory and Montessori's learner-centered approach, the research employed a descriptive survey design integrating quantitative and qualitative methods. The target population comprised 386 learners and 24 education stakeholders, with a sample size of 219 respondents derived using Yamane's formula. This included 196 Grade 3 learners (89.5%) and 23 stakeholders (10.5%) drawn from teachers, school counselors, and the county education officer. Data were collected through structured questionnaires and interviews, with validity and reliability ensured via a pilot study and expert review. Findings revealed a high prevalence of SLDs (65%, 127 learners), with dysgraphia recording the lowest mean scores (42%) and the highest variation (±18%), suggesting under-recognition by teachers. Inferential analysis using Pearson correlation, simple linear regression, and significance testing ($p < 0.05$) confirmed that dyslexia, dyscalculia, and dysgraphia significantly predicted poor academic performance. Psychosocial interventions demonstrated measurable improvements: teacher reassurance (21%, ≈41 learners), behaviour training (18%, ≈35 learners), and follow-up support (24%, ≈47 learners). The study underscores the urgent need for 30% more screening coverage, a 40% improvement in teacher training, and adequate resources. Integrating ecological perspectives with Montessori's individualized learning principles offers a practical pathway to inclusive education and improved academic outcomes for learners with SLDs.

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LIST OF ABBREVIATIONS AND ACRONYMS

ADHD - Attention-Deficit/Hyperactivity Disorder

CBC - Competency-Based Curriculum

CBSE - Central Board of Secondary Education

CFA - Confirmatory Factor Analysis

DSM-5 - Diagnostic and Statistical Manual of Mental Disorders, Fifth Edition

EFA - Exploratory Factor Analysis

EFL - English as a Foreign Language

FPE - Free Primary Education

KNBS - Kenya National Bureau of Statistics

LDs - Learning Disorders

NACOSTI - National Commission for Science, Technology, and Innovation

NVLD - Nonverbal Learning Disorder

SDGs - Sustainable Development Goals

SLD - Specific Learning Disorder

SPSS - Statistical Package for the Social Sciences

SPU - St. Paul University

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CHAPTER ONE: INTRODUCTION

1.0. Introduction

This chapter covers the background, statement of the problem, purpose, objectives, research questions, justification, scope, limitations, and delimitations of the study. It also focuses on the researcher's assumptions regarding the study and the unique terms used in it.

1.1. Background to the Study

Learning disorders (LDs) are a range of conditions that interfere with the ability to acquire, organize, retain, understand, or apply verbal and nonverbal information, even when individuals possess normal or above-average intelligence (National Center for Learning Disorders, 2020). The DSM-5 classifies Specific Learning Disorders (SLDs) as neurodevelopmental conditions that impair core academic skills, including reading (dyslexia), writing (dysgraphia), and arithmetic (dyscalculia), each presenting distinct challenges to learning (American Psychiatric Association, 2023). These difficulties are often described as "unexpected" because other areas of development typically remain intact. Early signs may appear in preschool, such as trouble recognizing letters or counting, but Specific Learning Disorders are usually identified more consistently after the onset of formal education (Schiller, 2023). Importantly, these disorders are not caused by cultural differences, emotional disturbances, or socioeconomic disadvantages (Afzal, 2019). Without appropriate support, students with Specific Learning Disorders often struggle academically, which can lead to frustration, low self-esteem, and reduced motivation, thereby affecting their academic performance.

Specific Learning Disorders affect about 15% of the global population, but how they are identified and addressed varies significantly across countries (Scaria et al., 2023). In the U.S., roughly 25% of children are diagnosed with a Specific Learning Disorder (National Center for Learning Disorders, 2020), reflecting stronger awareness, early screening, and well-established support systems. In contrast, the UK reports prevalence rates between 10–15%, and Canada shows rates of 5–10% (Department for Education, 2020; Government of Canada, 2020), possibly indicating stricter diagnostic thresholds or under-identification. Brazil reports a 7.6% lifetime prevalence among children (Fortes et al., 2016), while in Greece, nearly half of students in

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special education are diagnosed with learning disorders, with 80% struggling in reading (Sofologi et al., 2022). These variations suggest that, despite differences in policy, resources, and public awareness, learners with Specific Learning Disorders face significant academic barriers, particularly in reading, writing, and math. Such persistent struggles can erode self-esteem, motivation, and mental well-being; around 37% of children with Specific Learning Disorders also experience emotional and behavioral issues, such as anxiety and low self-confidence (Aro et al., 2022). Altogether, this highlights the urgent need to explore how psychological interventions can support the academic performance of these learners, a focus that is only effective with proper identification processes for Specific Learning Disorders.

To effectively support learners with Specific Learning Disorders, psychological interventions are crucial in addressing the emotional and behavioral challenges that often hinder academic success. Interventions such as cognitive-behavioral therapy (CBT), commonly used in the United States, help students develop self-regulation and coping strategies. Mindfulness-based practices, studied in China (Zhang et al., 2019), enhance focus and emotional resilience in learning environments. Additionally, social skills training, which has also been explored in the U.S., fosters peer interaction and reduces isolation among learners with Specific Learning Disorders. However, the impact of these interventions on academic performance remains debated. Foster et al. (2023) argue that psychological support primarily improves emotional well-being and may not significantly influence academic outcomes unless paired with targeted academic interventions (Graham et al., 2018). In Portugal, Rosário et al. (2015) emphasize the importance of follow-up support, indicating that practices such as oral checking, board checking, and grading positively impacted student performance in English as a Foreign Language (EFL) classes, based on a sample of 26 teachers and their students over six weeks. A study by Oduor et al. (2024) found a positive correlation between parent-teacher collaboration and the academic performance of learners with learning disorders in public primary schools in Migori County, Kenya. In contrast, research from China by Huang et al. (2025) and Lee et al. (2020) shows that combining psychological and academic support leads to meaningful gains in both emotional and academic outcomes. A case study from India by Shabina and Raj (2020) further demonstrates how behavioral training helped a 12-year-old boy with a learning disability improve not only his

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academic performance but also his social interactions and leadership skills. While individual outcomes vary, these international findings underscore the need for further exploration of how psychological interventions can be effectively integrated with academic strategies to better support learners with Specific Learning Disorders. This approach may lead to more holistic and impactful educational practices that address both emotional and academic needs.

In many African countries, proper identification of learning disorders remains inadequate, significantly exacerbating challenges for these learners (Lombardi et al., 2021). Teachers often lack the necessary training to recognize and support learning difficulties, leading to under-identification and insufficient interventions. For instance, junior elementary school students aged 9 or younger may exhibit signs of learning disorders but often do not receive formal support (Margolis et al., 2020). This gap contributes to decreased motivation and academic performance, as highlighted by Agbofa (2023), who found that low comprehension levels significantly affect academic success. Additionally, Afeti and Nyarko (2017) demonstrate that students with Attention-Deficit/Hyperactivity Disorder (ADHD) perform worse academically than their peers, emphasizing the urgent need for effective interventions. Research by Cockburn et al. (2017) further reveals that a shortage of trained professionals in Cameroon severely hampers the educational rights of children with Specific Learning Disorders, confirming that the identification of Specific Learning Disorders in Africa is critically inadequate. Given this context, teacher reassurance and behavioral strategies are essential for effectively supporting learners with Specific Learning Disorders. In South Africa, Dean (2019) evaluated the effectiveness of the Virtual Reading Gym (VRG) for Grades 3 to 6 students with reading difficulties. While the study found statistically significant gains only in reading rate within the prospective group, it highlighted the need for clearer definitions of Specific Learning Disorders and structured behavioral strategies, which were lacking in the intervention.

In Kenya, due to several issues, including low awareness, insufficient screening methods, and the stigma attached to learning disorders, there is a shortage of information, especially on the incidence of students with learning problems. Kenya is in the process of implementing a new curriculum known as the Competency-based Curriculum (CBC). Coupled with benefits accumulated from education, like the promotion of distinct welfare and acquisition of skills and

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competencies to contribute implicitly to the economy and society as a whole, the Kenyan government continues to finance this system of education profoundly.

Furthermore, in line with the Children's Act (2022), the Disability Act (2003), and the Kenyan Constitution of 2010, current national policy frameworks primarily address conventional categories of impairment such as hearing, visual, physical, and intellectual disabilities (Nthenge, 2017). This narrow focus often overlooks the unique challenges faced by learners with learning disorders, resulting in limited support and targeted interventions. Learning disorders, particularly those affecting memory recall, can significantly hinder academic performance. Difficulties with retention, comprehension, and task execution tend to disrupt the educational progress of learners diagnosed with such conditions (Sofologi et al., 2022). These policy limitations, combined with the high incidence of memory-related challenges, underscore the need for research and policy adjustments that better respond to the educational needs of learners with learning disorders in Kenya.

The school system's provision for learners with special needs in Homa Bay County, Kenya, frequently ignores important categories of disability, especially learning disorders, despite their crucial significance. The quality, equity, and accessibility of education and training for the county's special needs learners are significantly affected by this narrow focus (Odhiambo et al., 2024). Because of this, getting the right help and interventions can be extremely difficult for learners with learning disorders, which can have a detrimental effect on their academic achievement. The inadequacy of research on how learning disorders affect academic achievement in Homa Bay County exacerbates the challenges experienced by students with Specific Learning Disorders, despite attempts to enhance education for kids with disabilities.

In light of this, the current study investigates the effects of psychosocial support interventions on the academic performance of Grade 3 learners with learning disorders in Homa Bay County, Kenya.

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1.2. Statement of the Problem

Quality education is essential for child development, self-empowerment, and social integration. In Kenya, policies like the Free Primary Education (FPE) program and inclusive education guidelines were introduced to improve access and participation for all learners, including those with disabilities. However, despite progressive frameworks such as the Children's Act (2022), the Persons with Disabilities Act (2003), and the Constitution of Kenya (2010), learners with Specific Learning Disorders, such as dyslexia, dyscalculia, dysgraphia, and auditory/visual processing deficits, remain largely overlooked.

Nationally, studies estimate that 10–15% of school-going children in Kenya may have some form of learning disorder, yet less than 2% are formally identified or supported in school settings (MOE, 2021). In Homa Bay County, where the Kenya National Examinations Council (KNEC) recorded an average dropout rate of 7.2% in lower primary (2022), the problem is compounded by a lack of early diagnosis, insufficient teacher training, and minimal parental involvement. These statistics point to a silent crisis: many Grade 3 learners may be failing, not due to lack of effort, but because their learning challenges go undetected and unsupported.

Although there are national inclusive education policies in place, their implementation is weak due to the shortage of trained special needs professionals, inadequate teaching materials, and limited access to screening or therapeutic services in most public schools. In Homa Bay, most regular schools operate without even basic tools or personnel to identify or support learners with Specific Learning Disorders, meaning that many continue to struggle in silence. Existing research reveals important gaps. For instance, Orwa (2019) focused on physical disabilities in Homa Bay but did not explore learning disorders. Okoth (2014) highlighted the role of parental involvement in special education, but did not address the psychosocial dimension of support. Meanwhile, Ongeko et al. (2018) discussed general intervention strategies but overlooked targeted psychosocial interventions such as teacher reassurance, behavior training, and academic follow-up, which are crucial in the early stages of learning.

Without such support, learners with undiagnosed Specific Learning Disorders are more likely to fall behind, experience low self-esteem, and eventually drop out. In a region like Homa Bay,

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where fishing is a dominant economic activity and school dropout often pushes youth into informal labor and risky social behaviors, this educational neglect increases exposure to health risks such as early pregnancies, drug use, and HIV/AIDS, especially among vulnerable adolescents. This study seeks to fill these gaps by determining the prevalence of Specific Learning Disorders among Grade 3 learners in Homa Bay County and assessing the effectiveness of teacher reassurance, behavioral support, and follow-up strategies in improving their academic performance. The research will also examine the levels of awareness among teachers and the role of school and home environments as moderating factors. Findings will inform evidence-based interventions and influence inclusive education planning and teacher training at both the county and national levels.

1.3. Research Objective

1.3.1. Main Objective

The main aim of this study was to explore the role of psychological interventions in the academic performance of learners with Specific Learning Disorders in Karachuonyo North Sub-County, Homa Bay County, Kenya.

1.3.2. Specific Objectives

This study sought to:

i) Assess the extent to which the prevalence of dyslexia, dyscalculia, and dysgraphia influences the academic performance of learners with Specific Learning Disorders in Karachuonyo North Sub-County, Homa Bay County.
ii) Examine how teacher reassurance affects the academic performance of learners with Specific Learning Disorders in Karachuonyo North Sub-County, Homa Bay County.
iii) Evaluate the role of behavior training in enhancing the academic performance of learners with Specific Learning Disorders in Karachuonyo North Sub-County, Homa Bay County.

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iv) Analyze the contribution of teacher follow-up support to the academic progress of learners with Specific Learning Disorders in Karachuonyo North Sub-County, Homa Bay County.

1.4. Research Questions

i) To what extent does the prevalence of dyslexia, dyscalculia, and dysgraphia influence the academic performance of learners with Specific Learning Disorders in Karachuonyo North Sub-County, Homa Bay County?
ii) How does teacher reassurance affect the academic performance of learners with Specific Learning Disorders in Karachuonyo North Sub-County, Homa Bay County?
iii) What is the role of behavior training in enhancing the academic performance of learners with Specific Learning Disorders in Karachuonyo North Sub-County, Homa Bay County?
iv) In what ways does teacher follow-up support contribute to the academic progress of learners with Specific Learning Disorders in Karachuonyo North Sub-County, Homa Bay County?

1.5. Justification of the Study

This study is justified by the pressing need to understand and address the effects of psychosocial support interventions on the academic performance of Grade 3 learners with learning disorders in Homa Bay County, Kenya. Despite valuable insights from broader research, significant gaps remain in understanding the specific challenges faced by Grade 3 learners in this region, which necessitate localized investigation. While studies from affluent nations such as the United States of America and the United Kingdom have highlighted the detrimental effects of learning impairments on academic performance (Afzal, 2019; Arnold et al., 2020; Grigorenko et al., 2020), similar challenges in Sub- Saharan Africa have resulted in poorer academic outcomes and higher dropout rates among students with learning disorders (Emami et al., 2019). However, research focusing specifically on Homa Bay County is scarce, leaving a critical gap in the literature.

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This research aims to address these gaps by examining several key aspects: the prevalence of learning disorders among Grade 3 learners in Homa Bay County, teachers' awareness of these disorders, and the effectiveness of psychosocial support interventions, such as teacher reassurance and follow-ups. The study aligns with both national and international development priorities. The Sustainable Development Goals (SDGs), particularly Goal 4: Quality Education (SDG, 2019; Boeren, 2019), emphasizes the importance of inclusive and equitable education for all students, including those with learning challenges. Kenya's Vision 2030 also highlights the need for educational reforms to ensure equitable access to quality education. Additionally, the study addresses the critical issue of insufficient and fragmented data on learners with disabilities and special needs in Kenya. Reliable data is crucial for planning and improving support services. By providing evidence-based insights into the prevalence of learning disorders, educators' awareness levels, and the impact of psychosocial support interventions, this research aims to inform evidence-based policy changes.

In summary, this study focuses on the effects of psychosocial support interventions on the academic performance of Grade 3 learners in Homa Bay County and addresses significant gaps in existing research. Its findings will offer valuable information to guide policy and practice, ultimately enhancing educational outcomes and fostering a more inclusive learning environment for all.

1.6. Significance of the Study

The study on the effects of psychosocial support interventions on the academic performance of Grade 3 learners with learning disorders in Homa Bay County is of significant importance to various stakeholders. For policymakers, this research will provide crucial data on the prevalence of learning disorders and assess the effectiveness of psychosocial support interventions, such as teachers' reassurance and follow-ups. This information will be instrumental in designing targeted policies and resource allocation strategies to enhance support systems for affected students. By identifying specific needs and gaps in current educational practices, policymakers can develop effective policies that address current challenges and benefit learners with learning disorders.

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The County Government of Homa Bay will benefit from the study's insights by gaining a clearer understanding of the extent of learning disorders in local schools and evaluating the effectiveness of existing support mechanisms. This knowledge will aid in designing and implementing localized educational strategies, including allocating resources and organizing training programs for educators. Enhanced data on psychosocial support interventions will enable the County Government of Homa Bay to address these challenges more effectively and to develop community outreach initiatives that support affected learners and their families.

Parents, teachers, and community members will directly benefit from the research findings by gaining valuable insights into how psychosocial support interventions affect academic performance. Parents will better understand the challenges their learners face and the available support, empowering them to advocate more effectively and collaborate with educators. Teachers will receive guidance on implementing effective psychosocial interventions to improve their ability to support students in the classroom. Additionally, the broader community will become more informed and supportive, fostering a more inclusive environment for learners with learning disorders. Researchers and other scholars will find the study valuable for filling existing gaps in the literature by providing evidence on the impact of psychosocial support interventions. The research will serve as a foundation for further exploration of effective strategies and interventions, contributing to the broader body of knowledge on supporting students with learning disorders. Overall, the study's focus on psychosocial support interventions will provide essential insights for policymakers, the County Government, educators, parents, the community, and the academic research community, ultimately supporting the development of more effective and inclusive educational practices.

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The Competency-based Curriculum (CBC) focuses on developing learners' competencies through a learner-centered approach. It emphasizes critical thinking, problem-solving, and practical skills (Mwita et al., 2022). For learners with learning disorders, CBC can provide tailored learning experiences that cater to their individual needs, helping them to better understand and engage with the material. Psychosocial support interventions aim to address the emotional and social needs of the learners. For individuals with learning disorders, psychosocial support interventions can help them cope with the challenges they face, build self-esteem, and

develop resilience. This support can come from teachers, counselors, and peers. When combined, CBC and psychosocial support interventions can create a more inclusive and supportive learning environment. The CBC provides the structure and content, while psychosocial support interventions ensure that learners with learning disorders receive the emotional and social backing they need to succeed academically (Mwita et al., 2022).

1.7. Scope of the Study

This study focused on the role of psychological interventions in the academic performance of learners with Specific Learning Disorders in Karachuonyo North Sub-County, Homa Bay County, Kenya. It aimed to explore various interventions, such as teacher reassurance, behavior training, and follow-up support, and their impact on these learners' academic outcomes. By examining these factors, the research seeks to provide a comprehensive understanding of how psychological support can enhance students' educational experiences when facing learning challenges.

The target population includes class teachers, subject teachers, school counselors, and Grade 3 learners from six selected primary schools in Karachuonyo North Sub-County. A sample of 219 respondents was selected to capture diverse perspectives, enabling a more accurate assessment of the effectiveness of the interventions studied. The research was conducted during the academic year 2024, providing timely insights into the region's educational landscape.

The study adopted a descriptive survey research design, incorporating both quantitative and qualitative methods. Quantitative data were collected through structured questionnaires administered to learners, teachers, and guidance counselors, yielding statistical insights into the prevalence of learning disorders and the impact of psychosocial support. Qualitative data were gathered through semi-structured interviews with county-level educational policymakers and educational psychologists, offering in-depth perspectives on the effectiveness of interventions and awareness levels among stakeholders. This approach aims to address the unique challenges faced by learners with Specific Learning Disorders in Homa Bay County.

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1.8. Limitations of the Study

One limitation of this study is its reliance on teacher and school counselor assessments to evaluate academic performance and learning difficulties, which may introduce biases stemming from their subjective interpretations. To mitigate this risk, data collection took place in a private, supportive environment, ensuring that educators felt comfortable providing honest feedback. Emphasizing the anonymity of responses encouraged candid insights, which is particularly important when working with young pupils who may feel intimidated in formal settings.

In addition to potential biases from educators, focusing on Grade 3 learners presents unique challenges, as children at this age may have limited verbal skills and may struggle to articulate their experiences and feelings about learning disorders or psychosocial support. To address this, the study used age-appropriate methods, such as visual aids, simple language, and interactive activities like drawing or storytelling, to facilitate communication. Prompts were designed to elicit responses that feel natural and engaging, such as asking children to describe their favorite classroom activities or to share their feelings about school through relatable scenarios.

Moreover, concentrating specifically on Grade 3 learners in public primary schools in Homa Bay County, Kenya, may limit the generalizability of the findings to other regions or educational levels. The unique social, economic, and cultural dynamics of Homa Bay may influence how learning disorders manifest and how psychosocial support interventions are implemented. To address this limitation, the study provided a clear description of its context, methodology, and findings, offering a valuable reference point for future research. While the results may not offer universally applicable solutions, they can help inform broader efforts to support learners facing academic challenges in similar contexts, thereby contributing to a more nuanced understanding of educational needs in diverse settings.

1.9. Assumptions of the Study

The study holds the assumption that there is a high prevalence of learning disorders among Grade 3 learners in regular schools in Homa Bay County. This supposition emphasizes that learning disorders can significantly affect academic development and that affected individuals

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may need to retake years of school. The study also assumes that awareness of learning disorders among teachers and parents in Homa Bay County is quite low.

Additionally, the study is predicated on the idea that psychosocial support systems are in place, including teachers' reassurance and the requisite follow-up interventions. Teachers' reassurance in the academic performance of Grade 3 learners with learning disorders in Homa Bay County has a positive effect on their academic performance. This assumption highlights the positive relationship between learning disorders and educational results by implying that changes in the aforementioned independent factors directly affect changes in academic performance. Finally, the study assumes that follow-ups on the academic performance of Grade 3 learners with learning disorders have a positive effect on their academic output.

1.10. Operational Definition of Terms

Dyscalculia is a learning disorder that makes it difficult for learners to understand basic arithmetic operations, such as addition, subtraction, multiplication, and division (Kelly, 2020). The study retained its original meaning because the researcher sought to determine how this difficulty in basic arithmetic affects performance.

Dysgraphia is a learning disorder that affects an individual's writing ability despite receiving adequate instruction (Chung et al., 2020). The study adopted the same definition as the author.

Dyslexia is a learning disorder that mainly affects a child's ability to read, spell, and write (McBride, 2019). The study retains the author's original meaning because it examines this disorder in the same way.

Prevalence is the degree of frequency of an illness or health situation of inhabitants of an area at a definite time (Carroll, 2013). The study adopted the same meaning as defined by the author.

Psychosocial support is a method of enabling resilience within people, families, as well as groups (Padmanaban & Subudhi, 2019). The study adopted the same meaning as defined by the author.

Reassurance is a supportive tactic in counseling that inspires clients to have faith in themselves, in addition to the real likelihood of improvement (Horowitz & Strack, 2010). The same meaning will be retained because we sought to establish its effect on academic performance.

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1.11 Chapter One Summary

Chapter One introduces the study by outlining the background, problem, objectives, and significance. It highlights that learning disorders such as dyslexia, dysgraphia, and dyscalculia affect many learners worldwide, yet remain under-identified and unsupported in Kenya, particularly in Homa Bay County. The problem is compounded by weak policy implementation, limited teacher training, and a lack of parental involvement, leading to poor academic outcomes and high dropout rates. The study aims to explore how psychosocial interventions—teacher reassurance, behavior training, and follow-up support—can improve the academic performance of Grade 3 learners with learning disorders. It is justified by the need for localized evidence to inform inclusive education policies and aligns with SDG 4 and Vision 2030.

The scope covers six primary schools in Karachuonyo North Sub-County and uses both quantitative and qualitative methods. Limitations include reliance on teacher assessments and restricted generalizability. The study assumes a high prevalence of learning disorders and low awareness among teachers and parents, and defines key terms to guide understanding. Overall, Chapter One sets the foundation for investigating how psychosocial support can enhance educational outcomes for learners with learning disorders in Homa Bay County.

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CHAPTER TWO: LITERATURE REVIEW

2.1. Introduction

This chapter reviews the literature relevant to this study. The review is guided by the objectives of the study, namely, learning disorders and basic arithmetic operations, reading and writing, and recognizing and spelling words. This chapter also covers the study's conceptual framework, which reflects the relationships among the study's variables. Also covered here is the theoretical framework - the theories used in the study.

2.2. Theoretical Review

2.2.1 Bronfenbrenner's Ecological Systems Theory

The Ecological Systems Theory, developed by Urie Bronfenbrenner in 1979 and later renamed the Bio-ecological Systems Theory to emphasize the interaction between a child's biology and their environment, provides a comprehensive framework for understanding human development through the interaction of multiple environmental layers. The main assumption of Bronfenbrenner's theory is that multiple layers influence human development in environmental systems, and these systems interact with each other and with the individual. The theory highlights that a child's development is shaped by the relationships and interactions within these environmental layers, and that changes or conflicts in any one layer can have ripple effects across the others (Bronfenbrenner, 1979).

At its core is the microsystem, the innermost layer, which includes the immediate environments such as family, school, and peers. Relationships within this layer are bidirectional, meaning interactions between the child and these immediate environments directly influence and are influenced by each other (Viola et al., 2021). Surrounding the microsystem is the mesosystem, which focuses on connections among microsystems, such as the interplay between a child's home life and their school environment. This interconnectedness is crucial because experiences in one microsystem, such as home, can affect experiences in another, such as school (Sadownik, 2023).

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The ecosystem encompasses broader social systems that indirectly affect the child, such as parents' workplaces and community resources. Although the child does not directly interact with these systems, changes within them, such as economic shifts or community support, can influence the child's immediate environment (Yang & Sanborn, 2021). The macrosystem represents the outermost layer, encompassing cultural values, societal norms, and laws that shape and influence the conditions and experiences within the other systems (Bronfenbrenner, 1979). Finally, the chronosystem adds the dimension of time, reflecting how changes and continuities over the child's life, such as shifts in family structure or educational policies, impact development. This temporal perspective underscores how the timing and duration of environmental changes can affect a child's growth and development in varying ways (Viola et al., 2021).

However, applying Bronfenbrenner's Ecological Systems Theory presents several challenges. The complexity of interactions across various environmental systems can make it difficult to isolate specific influences or design targeted interventions (Elliott & Davis, 2020). This complexity can obscure the identification of specific factors that affect learning disorders and hinder the development of focused strategies. Additionally, while the theory highlights the importance of cultural and temporal contexts, operationalizing these concepts in empirical research can be challenging, potentially complicating efforts to measure and address their impact effectively.

Despite these challenges, the theory offers significant strengths. One of its main advantages is the emphasis on the bidirectional nature of relationships within the microsystem. This perspective acknowledges that learners are not passive recipients of environmental influences but active participants who shape their surroundings. Furthermore, the theory's recognition of the interconnectedness among different environmental layers underscores the necessity of a supportive, cohesive network of influences. This holistic view highlights the importance of a comprehensive, integrated approach in fostering positive development and effectively addressing learning disorders. Bronfenbrenner's Ecological Systems Theory provides a robust framework

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for understanding the effects of psychosocial support interventions on the academic performance of Grade 3 learners with learning disorders in Homa Bay County. This study will leverage the theory to address four specific objectives by examining how various environmental layers interact to influence learning disorders and academic outcomes.

To assess the prevalence of learning disorders among Grade 3 learners, the microsystem layer will be critical. This layer includes direct interactions within the classroom and home environments. By focusing on these immediate settings, the study will explore how daily experiences and feedback from teachers and parents contribute to identifying and understanding the prevalence of learning disorders among learners. This approach will help uncover how these interactions affect the recognition and reporting of learning difficulties in the educational setting.

The mesosystem layer, which focuses on connections between microsystems such as home and school, will be used to assess the level of awareness of learning disorders among teachers and parents. Effective communication between these environments is essential for managing learning disorders. The study will investigate how well teachers and parents collaborate and share information, and how this interaction influences their awareness and understanding of learning disorders, ultimately affecting their ability to support affected students effectively.

To examine the impact of teachers' reassurance and follow-ups on academic performance, the exosystem and macrosystem layers will provide valuable insights. The exosystem, which encompasses broader social factors such as community resources and educational policies, will help assess how external supports, such as teacher reassurance and follow-up interventions, influence academic performance. The macrosystem, encompassing cultural values and societal norms, will offer context on how cultural attitudes toward education and disabilities shape the effectiveness of these psychosocial interventions. By integrating these layers, the study will reveal how both external resources and cultural perceptions affect the success of support strategies and their effect on learners' academic outcomes.

2.2.2 Montessori Theory

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Montessori Theory is a child-centered educational philosophy that was developed in 1907 by Dr. Maria Montessori, an Italian physician and educator. It is based on the idea that children learn best when they are free to explore and choose activities in a thoughtfully prepared environment. Montessori emphasizes tailoring education to each child's developmental needs. This aligns with psychosocial interventions that prioritize individualized support for learners with Specific Learning Disorders. Her method fosters independence, self-esteem, and emotional regulation through structured freedom and responsibility. These are key psychosocial goals for learners with Specific Learning Disorders, who often struggle with confidence and peer interaction. Montessori classrooms are designed to reduce overstimulation and promote focus through hands-on, sensory materials. Such environments are beneficial for learners with attention, perception, or sensory integration challenges. Encourages social learning and empathy, allowing children with Specific Learning Disorders to learn from and teach peers. This supports psychosocial growth and reduces stigma or isolation. Montessori's original work was with developmentally delayed children, making her methods inherently inclusive. Her approach laid the groundwork for modern inclusive education strategies.

2.3. Application of the theories to the Study Context

The study applied Bronfenbrenner's Ecological Systems Theory to show how different environmental layers shape the academic outcomes of learners with Specific Learning Disorders (SLDs). At the microsystem level, teacher reassurance, behavior training, and follow-up support directly influenced learners' daily experiences, while collaboration among teachers, school counselors, and the county education officer reflected the mesosystem. County education policies and resource allocation represented the exosystem, and cultural attitudes toward SLDs formed the macrosystem. This perspective highlighted that learners' challenges extend beyond the classroom and are shaped by broader systemic factors.

At the same time, Montessori Theory emphasized individualized, learner-centered approaches. Its principles of hands-on learning, self-paced progress, and nurturing independence are aligned with the psychosocial interventions examined in the study. Teacher reassurance built confidence,

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behavior training encouraged self-regulation, and follow-up support mirrored Montessori's emphasis on continuous observation and tailored intervention.

Together, the two theories provided a complementary framework: Bronfenbrenner explained the systemic influences on learners, while Montessori offered practical strategies for individualized support. Their combined application demonstrated that effective interventions for learners with SLDs require both system-level changes and personalized practices to achieve inclusive and equitable education.

2.4. Empirical Review

Sofologi et al. (2022), who emphasize the multidimensional character of learning disorders and their effects on learners' academic and socio-emotional well-being, give a thorough understanding of learning disorders. They stress that learning disorders can be acquired or inherited, and they frequently cause academic challenges that are out of proportion to a child's intellectual capacity. The writers also highlight the variety of internalized and externalized concerns that learners with learning disorders face, such as anxiety and depression disorders, problems with self-esteem, challenges with socialization, and criminal conduct. While their viewpoint provides insight into the difficulties experienced by kids with learning disorders, it is important to evaluate it critically to avoid oversimplification and to acknowledge the range of skills and talents these people possess. Because a deficit-focused perspective on learners with learning disorders may obscure their special abilities and untapped potential, it is important to emphasize. The rest of the review covers four main areas, namely: persistent difficulties in following instructions, low comprehension skills, memory recall challenges, and attention deficits in academic performance.

2.4.1. Academic Performance of Learners with Specific Learning Disorders (SLDs)

Empirical studies across various contexts have consistently shown that learners with Specific Learning Disorders, such as dyslexia, dyscalculia, and dysgraphia, face persistent academic challenges compared to their typically developing peers. These challenges often cut across reading, writing, spelling, and arithmetic, with performance gaps becoming more evident as

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academic demands increase. For instance, the study by Español-Martín et al. (2023) employs a cross-sectional, population-based sample and uses standardized diagnostic methods, including DSM criteria, the Strengths and Difficulties Questionnaire, and the Protocol for Detection and Management of Dyslexia, to assess ADHD and Specific Learning Disorders. Academic performance was evaluated through school records across multiple domains, revealing that emotional and behavioral problems, learning difficulties, and neurodevelopmental disorders (NDs) are more prevalent among children from low-middle-income populations. Both ADHD and Specific Learning Disorders were linked to poorer educational outcomes, with lower socioeconomic status (SES) exacerbating these challenges. While these findings highlight the significant impact of ADHD and Specific Learning Disorders on academic performance and the need for psychological interventions, their applicability to African or rural settings may be limited due to cultural differences in educational practices and resource availability. Furthermore, the study tends to treat learners with Specific Learning Disorders as a homogeneous group, overlooking individual differences in severity and coping strategies, thereby obscuring the diverse needs of these students. The proposed study aims to fill these gaps by focusing specifically on learners in Homa Bay County, Kenya, addressing local educational contexts and challenges. By incorporating a diverse range of perspectives and emphasizing individualized intervention strategies, this study will provide insights that are more relevant to similar settings and contribute to a deeper understanding of how to effectively support students with Specific Learning Disorders.

In India, Bali (2019) examined the prevalence of dyslexia among scholastically backward high school students in Hoskote, using a cross-sectional design across five English-medium high schools. By screening 240 students with a semi-structured proforma and the NIMHANS Index for Specific Learning Disabilities - Level II, the study revealed a 14.2% prevalence of dyslexia. It identified significant associations between dyslexia and factors such as habitat, family type, and mathematics difficulties, highlighting the disorder's detrimental effects on academic performance among both male and female students. However, the study's limitations include its cross-sectional nature, which prevents causal inferences, and a limited sample drawn from only five schools, potentially affecting the generalizability of the findings. The proposed study used a

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descriptive survey research design to address these gaps, employing a mixed-methods approach to gather more comprehensive data, expand the sample size, and explore the lived experiences of students and families. This provided deeper insights into how dyslexia impacts academic performance and guides effective interventions for affected learners.

2.5. Prevalence of Learners with Learning Disorders

The study conducted by Margolis et al. (2020) aimed to estimate the prevalence of Nonverbal Learning Disorder (NVLD) in learners and adolescents across three independent samples from the United States and Canada. The research utilized data from the Healthy Brain Network (HBN), the Nathan Kline Institute–Rockland Sample (NKI), and the Saguenay Youth Study (SYS), involving a total of 2596 participants aged 6 to 19 years. The findings revealed that the prevalence of NVLD ranged from 2.78% to 3.9%, translating to an estimated 3% to 4% of the population, or approximately 2.2 to 2.9 million learners and adolescents in the United States. Despite providing valuable insights into the prevalence of NVLD, the study has several limitations. The samples were over-selected for psychiatric disorders and maternal smoking during pregnancy, which may not represent the general population. Additionally, because the study was conducted in the United States and Canada, the findings may not be entirely applicable to Homa Bay County, Kenya, due to differing socio-economic and educational contexts. This highlights the need for localized research to address the specific challenges and prevalence of learning disorders among Grade 3 learners in regular schools in Homa Bay County.

The study by Al-Qadri et al. (2021) focused on developing an effective observation tool to assess academic learning difficulties among primary school students in Sana'a City, Yemen. The tool, consisting of 34 items, was validated through Exploratory Factor Analysis (EFA) and Confirmatory Factor Analysis (CFA). The sample included 714 students aged 6 to 14 years. The findings demonstrated that the tool effectively categorized learning difficulties into five distinct groups based on observation scores. However, while the study provided a robust method for assessing learning difficulties, it did not offer specific, quantifiable data on the prevalence of learning disorders among the students. Besides, the study does not address the actual prevalence rates of learning disorders. This limitation is particularly relevant when considering its

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application to other regions, such as Homa Bay County. There is a need for research that not only develops assessment tools but also provides concrete data on the prevalence of learning disorders in Homa Bay. Accurate prevalence data is essential for developing targeted interventions and support strategies tailored to the specific needs of students in that region.

In Kenya, the frequency of learners with learning disorders and disabilities is a noteworthy concern. According to a national survey, almost 11.4% of learners in Kenya have some form of disability or special needs in education (Juma, 2018). This comprises several types of learning disorders and neurodevelopmental cases. Another study in 2016 showed that about 2.06% of the population is affected by such neurodevelopmental disorders. Efforts are continuing to expand the value of education and support for such learners. Nevertheless, challenges, for example, stigma, discrimination, as well as lack of correct data, still persist. A study by Moya (2017) aimed to establish the population of individuals with disabilities, their distribution, demographic, as well as socio-economic characteristics. This study established that learners with such disabilities encounter weighty obstacles to education. This is because schools are incapable of providing services to such learners with disabilities, and therefore making it hard for them to go to school. Such learners are less likely to register in school, go to school, and finish primary school.

2.6. Teachers' Reassurance and Academic Performance of Learners with Learning Disorders

In a study by (2024), which was a scoping review that (2024), which was a scoping review, 96 Canadian studies on learning disabilities published between 2000 and 2023 were synthesized, providing a broad overview of the field. The authors found that research has largely concentrated on literacy and mathematics interventions, reflecting the emphasis of Canadian education policy. Teacher support and reassurance consistently emerged as crucial factors in improving student outcomes, with positive expectations and instructional strategies linked to resilience and achievement. Despite these strengths, the review identified notable gaps: limited attention to postsecondary learners, culturally diverse populations, and the intersection of learning disabilities with mental health. Methodologically, quantitative studies dominate, though

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qualitative and mixed-methods approaches are gaining traction and offering deeper insights into lived experiences.

By mapping these trends, the article contributes a comprehensive picture of Canadian LD research, highlighting both strengths and weaknesses. It calls for more inclusive, cross-provincial, and longitudinal studies that integrate cultural diversity and mental health considerations. Ultimately, the review underscores the importance of teacher reassurance and supportive practices in fostering academic success among learners with learning disabilities in Canada.

Another study by Frohlich et al. (2020) surveyed 151 Canadian teachers to explore how they attribute the behavior of students with learning disabilities (LD) and ADHD, and how these beliefs shape their teaching self-efficacy. The findings revealed that teachers often explained challenging behaviors in terms of internal student factors, such as effort or ability, rather than external influences. Importantly, teachers who adopted more positive attributions—believing students could improve with support—reported higher confidence in their ability to manage classrooms and foster learning. The study shows that reassurance and positive expectations from teachers not only strengthen their own self-efficacy but also enhance student engagement and achievement. By linking teacher cognition with classroom practice, the article contributes to understanding how supportive beliefs and reassurance strategies are central to effective inclusion of learners with LD and ADHD. It underscores the need for professional development that helps teachers adopt constructive attribution styles, reinforcing the role of teacher encouragement in improving both student outcomes and teacher confidence.

A study by Bano and Yusuf (2023) in Pakistan (Rawalpindi and Islamabad) explored how learning disabilities influence the academic performance of high school students, with a focus on demographic variables such as gender, age, socioeconomic background, and school type. The findings showed that students with learning disabilities generally perform below their peers in literacy and numeracy, but demographic factors significantly shape these outcomes. For example, socioeconomic status affected access to resources and support, gender differences appeared in coping strategies and subject performance, and school type influenced resilience and

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achievement. The study contributes to understanding that learning disabilities cannot be considered in isolation; demographic variables interact with disability status to either intensify or reduce academic challenges. It emphasizes the importance of designing interventions that account for both disability and demographic context, ensuring equitable support for diverse learners.

However, gaps remain. The research was limited in scope, often relying on small samples and lacking longitudinal data to track long-term outcomes. Cultural diversity and mental health intersections were underexplored, and there was little attention to postsecondary learners. Additionally, the effectiveness of teacher training and policy frameworks in addressing demographic disparities was not fully examined.

A study conducted in Ibadan by Lazarus and Adekanmi (2014) critically examined the impact of psychosocial support interventions on students with learning disabilities, highlighting that such challenges extend beyond academic performance to affect social relationships, vocational outcomes, and transitions to adulthood. The study focused on how guidance and counselors employ research-based interventions, including reassurance and continuous support, to bridge the performance gap between students with learning disabilities and their peers. Findings indicated that these interventions significantly improve academic performance. However, limitations include reliance on existing literature, which may not capture recent developments or regional differences, and potential biases in case studies that may affect the generalizability of the results. The study recommends a more tailored approach to counseling, emphasizing consistent reassurance and follow-up strategies, while also suggesting further research to address these limitations and refine intervention practices.

Supportive environments, particularly the role of teachers, are crucial in influencing academic performance among learners with learning disorders. Theuri and Mutisya (2021) examined how various environmental factors impact adolescents, emphasizing that supportive relationships can significantly affect students' behaviors and outcomes. Their study involving 267 students and 15 principals from public secondary schools underscored the need for strong support systems within educational settings. While the research highlights the significance of teacher support, it

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primarily focuses on secondary school students and specific regional contexts, which limits its applicability to younger learners, such as Grade 3 students in Homa Bay County. This is particularly relevant when considering how teachers' reassurance can enhance the academic performance of learners with learning disorders. The present study aims to fill these gaps by investigating the specific contributions of teacher follow-up support, providing insights into how positive teacher interactions can foster academic success for younger students facing learning challenges.

A study by Akinyi et al. (2024) explored how teacher–student relationships affect the academic performance of learners with learning disabilities in Nairobi County, using a descriptive correlational design informed by Systems Theory and Social Cognitive Theory. The research involved head teachers, classroom teachers, and learners from selected primary schools, aiming to understand how interpersonal dynamics shape learning outcomes in inclusive education settings.

The findings showed that supportive teacher–student relationships were strongly linked to improved academic performance, motivation, and classroom participation, whereas weak or negative relationships were associated with disengagement, reduced confidence, and lower achievement. Teacher reassurance, empathy, and encouragement emerged as critical in helping learners overcome challenges associated with their disabilities, reinforcing the importance of positive classroom interactions for inclusive education. The study contributes empirical evidence from Kenya, highlighting the central role of teacher–student relationships in inclusive education and calling for teacher training programs that emphasize relationship-building skills. It also underscores the need for policies that support teachers in fostering positive, reassuring environments.

However, several gaps remain: the study was limited to a small sample of primary schools, leaving out secondary and postsecondary contexts; it did not fully address cultural and socioeconomic diversity or the intersection of learning disabilities with mental health; and it relied on cross-sectional data, meaning long-term effects of teacher reassurance were not explored. Additionally, the effectiveness of teacher training programs and the integration of

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national policy frameworks were not deeply examined. The current study will fill the gaps left by this study, especially the effects of teacher reassurance.

2.7. Behavior training and academic performance of learners with Specific Learning Disorders

Behavioral training holds significant promise in improving academic performance among learners with Specific Learning Disorders, particularly when interventions target core challenges such as attention deficits. García-Redondo et al. (2019), in a study conducted in Spain, tested this idea by implementing 28 short training sessions using educational video games based on Multiple Intelligences theory to enhance attention in children diagnosed with Specific Learning Disorders and ADHD. The findings showed notable improvements in visual attention, especially in concentration and accuracy, among learners in the experimental group, suggesting that behaviorally focused game-based interventions can positively influence attention, a key behavioral foundation for academic learning. However, the study's limitations include its clinical rather than classroom setting, lack of direct assessment of academic skills like reading or math, reliance on parental observation rather than teacher-based evaluations, and a small sample size that restricts broader application. The proposed study addresses these gaps by applying behavior training interventions within real school environments in Kenya, using teacher assessments and direct academic performance measures to evaluate effectiveness, thereby grounding behavioral interventions in both educational practice and academic outcomes.

In South Africa, Dean (2019) conducted a study in Cape Town to evaluate the effectiveness of the Virtual Reading Gym (VRG), an ICT-based intervention targeting learners in Grades 3 to 6 with reading difficulties. The study used both retrospective (in mainstream schools) and prospective (in a special need school) pre/post-intervention matched-subject designs, involving 40 learners divided into intervention and control groups. Over a 10-week period, learners in the intervention group engaged in three VRG sessions per week. While the study aimed to improve reading accuracy, rate, vocabulary, and comprehension, statistically significant gains were only found in reading rate within the prospective group. Despite its intentions, the study did not anchor the intervention in behavior training frameworks, nor did it clearly define or diagnose

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Specific Learning Disorders such as dyslexia or dysgraphia. The absence of structured behavioral strategies, like reinforcement, cueing, or feedback mechanisms, limits its relevance to research focused on behavior training as a support tool for learners with Specific Learning Disorders. Additionally, the study lacked a guiding theoretical framework and did not address teacher involvement in behavior shaping or academic follow-up. In contrast, the present study directly targets learners with diagnosed Specific Learning Disorders, employs structured behavior-training strategies grounded in behaviorist theory, and examines how such interventions influence academic performance. It also integrates a clearly defined conceptual framework and emphasizes the role of teacher reassurance, follow-up support, and school environment, elements that were not explored in Dean's work. This allows the current research to address critical gaps and contribute more directly to practice and policy on inclusive learning for children with Specific Learning Disorders.

2.8. Follow-Ups and Academic Performance of Learners with Learning Disorders

The link between follow-ups and the academic performance of learners with learning disorders is critical, as effective teacher support can significantly influence educational outcomes. The findings by Rosário et al. (2015) indicate that practices such as oral checking, board checking, and grading positively impacted student performance in English as a Foreign Language (EFL) classes in Portugal, based on a sample of 26 teachers and their students over a six-week period. These findings inform the present study, which investigates the contribution of teacher follow-up support to the academic progress of learners with Specific Learning Disorders in Karachuonyo North Sub-County, Homa Bay County. However, while the study employed a cross-sectional design to assess different homework follow-up practices, its focus on older EFL students limits the applicability of the findings to younger learners, particularly in diverse educational settings like rural or African contexts. Moreover, the study overlooks the emotional and social impacts of learning disorders, focusing primarily on test scores and grades, which diminishes its overall relevance. By building on Rosário et al.'s insights, this research aims to address the identified limitations, particularly the need for tailored interventions for younger learners across different cultural contexts. It will explore the roles of teachers and parents in supporting students with Specific Learning Disorders, recognizing individual differences in severity and coping strategies.

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By focusing on realistic, context-specific interventions, the current study seeks to fill existing gaps and provide a comprehensive understanding of how teacher follow-up support can enhance the academic progress of students facing learning challenges. Guided by Constructivist Theory, the study by Oduor et al. (2024) found a positive correlation between parent-teacher collaboration and the academic performance of learners with learning disorders in public primary schools in Migori County, Kenya. The research found that active collaboration among parents and teachers significantly improved academic outcomes for these learners. It concluded that such cooperative efforts play a vital role in elevating academic achievement. The study emphasized the importance of leadership, urging head teachers to take the initiative in briefing both parents and teachers on the profound impact of teamwork on the academic success of students with learning disorders. Additionally, it recommended that teachers and Ministry of Education administrators allocate time for meetings with parents to raise awareness about learning disorders and address the specific needs of these learners. While Oduor et al. highlight the significance of parent-teacher collaboration, the present study shifts the focus to the role of teacher support specifically, addressing a different but complementary aspect of academic success. However, Oduor et al.'s study has shortcomings, including a lack of exploration of how different follow-up practices might vary in effectiveness and an absence of consideration of the emotional and social dimensions of learning disorders. The present study aims to fill these gaps by employing a descriptive survey research design that includes both qualitative and quantitative methods. This approach will provide a more comprehensive understanding of the specific follow-up practices that enhance academic progress, while also considering the individual differences among learners. By focusing on context-specific interventions in Homa Bay County, the current research will contribute valuable insights into how targeted teacher support can improve educational outcomes for students with learning disorders.

A study by Wangila et al. (2023) aimed to investigate the effects of psychosocial interventions on the growth of adolescent students in public secondary schools in Trans-Nzoia County, using Social Cognitive Theory. This study used Cognitive Theory to understand behavioral acquisition and maintenance within a social context. The research employed a descriptive design and targeted 239 secondary schools, sampling 116 using Nassiuma's formula, with data collected

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through structured questionnaires, document analysis, interviews, and observation. Findings indicated that psychosocial interventions positively influence student growth, addressing issues such as depression, anxiety, and substance abuse, with a significant correlation (β=0.295, p=0.000) between these interventions and student development. While the study provides valuable insights into the role of psychosocial support in addressing various adolescent challenges and highlights the effectiveness of such interventions, its applicability to Grade 3 learners with learning disorders is limited. The focus on secondary school students and broader developmental outcomes may not translate directly to younger learners, who are at different developmental stages and may experience distinct learning and emotional challenges. Furthermore, the use of general sampling techniques and the inclusion of a diverse array of psychosocial issues may not specifically address the nuanced impacts of follow-ups on academic performance in younger learners with learning disorders. Future research could benefit from a targeted approach, focusing on younger students and examining the specific effects of follow-ups within the context of learning disorders.

2.9. Conceptual Framework

The conceptual framework guiding this study investigates the impact of psychosocial support interventions on the academic performance of Grade 3 learners with learning disorders in Homa Bay County. The framework incorporates independent variables such as the prevalence of learning disorders, awareness levels about these disorders, teacher reassurance, and follow-up practices. This is summarized in Figure 2.1 below.

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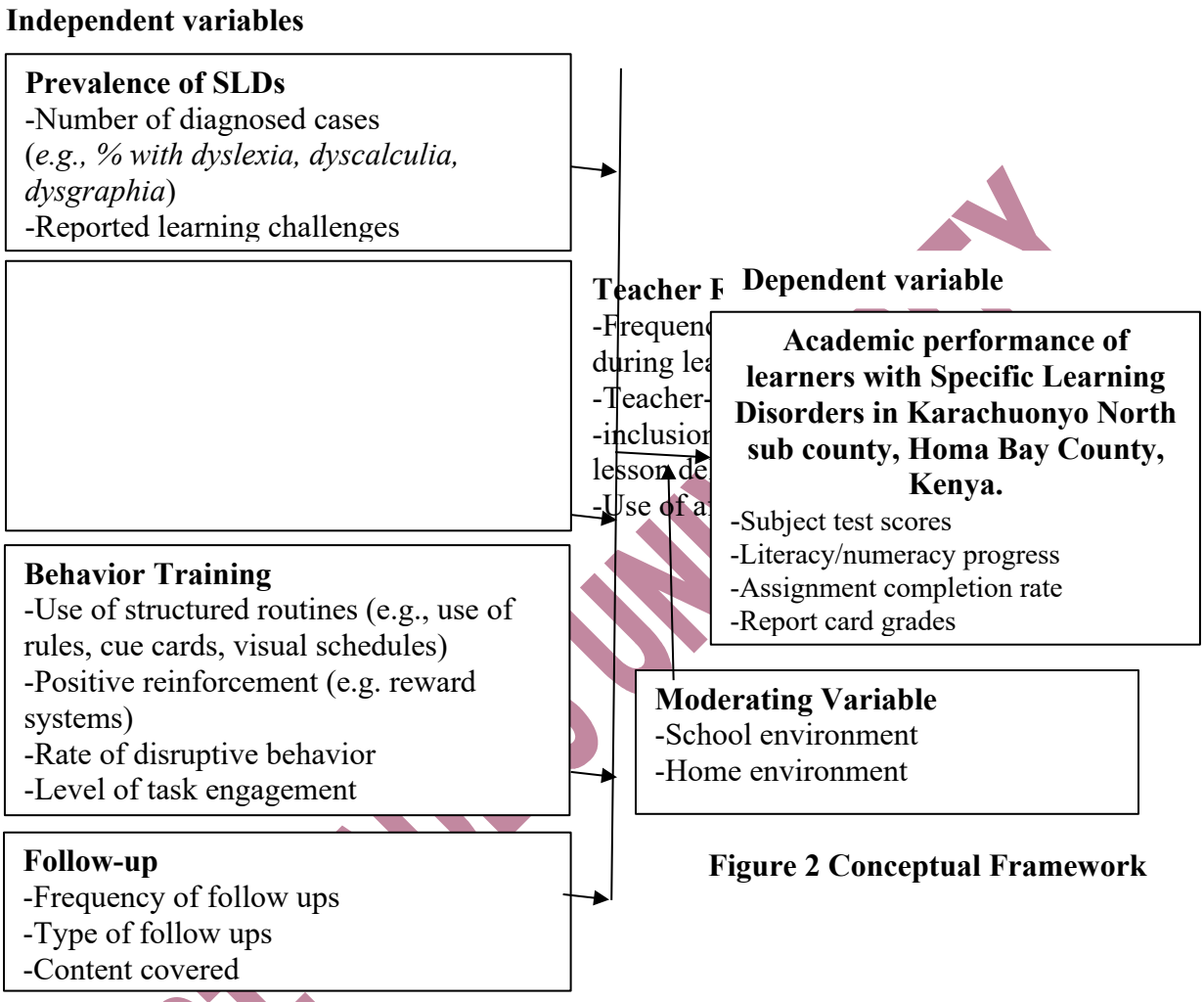


Figure 2 Conceptual Framework

This study hypothesized that psychological interventions, specifically the prevalence of Specific Learning Disorders, teacher reassurance, behavior training, and teacher follow-up, significantly influence the academic performance of learners with Specific Learning Disorders (dependent variable) in Karachuonyo North Sub-County, Homa Bay County. The prevalence of Specific Learning Disorders (independent variable) is measured by the number of learners with diagnoses and reported learning challenges, forming the basis for identifying learners in need of support. Once identified, interventions such as teacher reassurance (e.g., praise, encouragement, and

affirming classroom practices), behavior training (e.g., structured routines, cue cards, and reward systems), and follow-up support (e.g., frequency and type of academic follow-ups) are expected to improve learner engagement, reduce disruptive behaviors, and support task completion. Together, these interventions aim to enhance academic outcomes, measured through subject test scores, literacy/numeracy progress, assignment completion rates, and report card performance (dependent variable indicators).

It is further hypothesized that the effectiveness of these psychological interventions is influenced by moderating variables, namely the school environment and home environment. A supportive school environment, with trained teachers, inclusive practices, and appropriate resources, can strengthen the application and impact of interventions. Likewise, a positive home environment, characterized by caregiver support and consistency, can reinforce school-based strategies and enhance continuity in learning. Conversely, weak or unsupportive environmental conditions may undermine the success of these interventions, limiting improvements in academic performance. Therefore, for interventions to yield sustained impact, both school and home contexts must play a reinforcing role.

2.10. Existing Research Gap

The literature review reveals critical research gaps in understanding learning disorders, particularly concerning geographical, population, and methodological aspects. Studies such as Margolis et al. (2020) and Al-Qadri et al. (2021) provide valuable insights into prevalence and assessment tools in North America and Yemen but fail to address the specific socio-economic and educational contexts of Homa Bay County, Kenya. Margolis et al. (2020) focused on Nonverbal Learning Disorder (NVLD) in North America, leaving a gap in prevalence data for Kenya, while Al-Qadri et al. (2021) developed an assessment tool without providing region-specific prevalence rates.

Additionally, research by Vinokur (2019), Sawhney, and Bansal (2014) primarily addresses older or different educational contexts, which limits its applicability to younger populations such as Grade 3 learners. Methodological limitations, such as small sample sizes and region-specific focus, further constrain the generalizability of the findings. To address these gaps, the proposed

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study will focus on Grade 3 learners in Homa Bay County, using larger, more diverse samples and incorporating perspectives from both teachers and parents. This approach aims to provide localized, actionable data on prevalence, awareness, and effective interventions tailored to the unique educational and socio-economic context of Homa Bay County.

2.11 Chapter Summary – Literature Review

Chapter Two reviews literature relevant to the study, focusing on learning disorders and psychosocial interventions. It begins with the theoretical foundations, highlighting Bronfenbrenner's Ecological Systems Theory, which explains child development through multiple environmental layers (microsystem, mesosystem, exosystem, macrosystem, chronosystem), and emphasizes the importance of family, school, community, and cultural influences. This theory is applied to show how teacher reassurance, parental involvement, and community support shape learners' outcomes. The Montessori Theory is also discussed, emphasizing child-centered, multisensory, and self-paced learning that fosters independence, confidence, and inclusivity, aligning with psychosocial support goals for learners with Specific Learning Disorders (SLDs).

The empirical review shows that learners with SLDs such as dyslexia, dyscalculia, and dysgraphia consistently face academic challenges in reading, writing, spelling, and arithmetic, often accompanied by emotional and behavioral issues like anxiety, depression, and low self-esteem. Studies from different contexts (India, Spain, South Africa, Portugal, Kenya) highlight prevalence rates, intervention strategies, and gaps in localized research. Findings emphasize that while teacher reassurance, behavior training, and follow-up practices improve academic performance, interventions must be tailored to cultural and contextual realities, especially in rural African settings.

The chapter also reviews prevalence data, noting global rates between 2–15%, with Kenyan surveys estimating around 11.4% of learners having disabilities, though data on SLDs remains limited. Teacher reassurance is shown to boost confidence and performance; behavior training enhances attention and structured learning; and follow-ups such as oral checks, grading, and parent-teacher collaboration significantly improve outcomes.

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Finally, the conceptual framework hypothesizes that psychosocial interventions—teacher reassurance, behavior training, and follow-up—together with awareness and prevalence of SLDs, directly influence the academic performance of Grade 3 learners in Karachuonyo North, Homa Bay County.

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CHAPTER THREE: METHODOLOGY

3.1. Introduction

This chapter provides a comprehensive overview of the research methodology, including research design, target population, sample size and procedure, data collection procedure, validity and reliability, data analysis, and ethical considerations. It establishes a solid foundation for conducting the study and ensures the integrity and validity of the research findings.

3.2. Research Design

The study used a descriptive survey research design, which is particularly suited for providing a comprehensive overview of the current state of learning disorders and their impact on the academic performance of Grade 3 learners in Homa Bay County, Kenya. This design facilitated the systematic collection of data regarding the frequency, distribution, and relationships between specific variables, such as teacher reassurance, behavior training, and follow-up support, and their effects on academic outcomes (Creswell & Creswell, 2022). By capturing data from a large sample, this approach effectively aligned with the study's aims and specific objectives.

The justification for using a descriptive survey research design was its ability to identify risk factors and protective variables that influence academic success. It allowed for a thorough assessment of how teacher reassurance and behavior training contributed to positive educational outcomes. Additionally, this design facilitated the exploration of follow-up support mechanisms that may help mitigate challenges faced by learners with Specific Learning Disorders, as noted by Fraenkel, Wallen, and Hyun (2019).

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3.3. Study Area

3.3.1. Location of the Study

The study was conducted in Karachuonyo North Sub-County, Homa Bay County, situated in south-western Kenya along the shores of Lake Victoria, Africa's largest freshwater lake. Homa Bay County, covering an area of 4,267.1 km2, is geographically diverse, bordered by Kisumu and Siaya Counties to the north, Kisii and Nyamira Counties to the east, Migori County to the

south, and the Republic of Uganda to the west. The County's administrative headquarters are located at 0.52° South latitude and 34.45° East longitude, at an elevation of 1166 meters above sea level (Appendix 3). With an estimated population of 963,794 (KNBS, 2019), Homa Bay County is home to a significant portion of Kenya's inhabitants, distributed across its eight sub-counties: Ndhiwa, Rachuonyo North, Rangwe, Rachuonyo East, Rachuonyo South, Mbita, Suba, and Homa Bay (Ogweno, 2020).

The region experiences varying levels of precipitation, with southern areas receiving the highest amounts, around 1750 mm annually, while northern areas closer to Lake Victoria receive 1000-1250 mm per year (Ongeko, Mugalavai, & Obiri, 2018). The climate remains consistently warm year-round, with precipitation evenly distributed, though slightly higher during the first wet season (January-June). However, the county faces challenges such as intense precipitation, heat stress, and occasional dry spells, posing risks to agricultural activities, which are a major source of livelihood for the local population.

Despite the county's economic potential, poverty remains pervasive, with a staggering 77.9% of the population living below the poverty line, significantly higher than the national average of 52% (KNBS, 2019). This high poverty rate reflects the socioeconomic challenges faced by residents, including limited access to education, healthcare, and basic amenities. For learners with learning disorders in Homa Bay County, poverty exacerbates the already significant barriers to academic success. Limited resources and support services hinder their ability to receive proper diagnosis, intervention, and educational accommodations, leading to unmet needs and compromised academic performance.

Major economic activities in Homa Bay County include fishing, agriculture, and trade. Fishing plays a central role in the local economy, given the county's proximity to Lake Victoria, while agriculture, including subsistence farming and cash crop cultivation, provides livelihoods for a significant portion of the population. Trade and small-scale businesses also contribute to the county's economy, albeit to a lesser extent. In light of these economic realities, the study's focus on the impact of psychosocial support interventions on the academic performance of Grade 3 learners with learning disorders in Homa Bay County, Kenya, is significant. By examining how

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poverty intersects with learning disorders, the study aims to highlight the urgent need for targeted interventions and support systems to address the unique challenges faced by vulnerable learners in this context.

3.3.2. Justification of the Study

Karachuonyo North Sub-County has been meticulously chosen as the study area due to its significance in understanding the impact of learning disorders on the academic performance of Grade 3 learners in Homa Bay County, Kenya. This selection is driven by the critical need to address the challenges faced by learners with learning disorders within the county's educational landscape. By focusing on Karachuonyo North, the study aims to provide valuable insights into the specific factors influencing academic outcomes in this region, shedding light on the prevalence and effects of learning disorders on Grade 3 learners.

The decision to concentrate on this sub-county underscores the importance of addressing educational disparities and ensuring equitable access to quality education for all learners, especially those with learning disorders. Through this targeted approach, the study sought to not only identify barriers to academic success but also to propose tailored interventions and support mechanisms to improve educational outcomes for Grade 3 learners with learning disorders in Homa Bay County. Thus, Karachuonyo North Sub-County serves as a strategic focal point for examining the effects of psychosocial support interventions on the academic performance of Grade 3 learners with learning disorders, ultimately aiming to inform evidence-based policies and interventions to enhance educational equity and inclusivity in the region.

3.4. Target Population

The target population for this study comprised Grade 3 learners, their teachers (both class and subject teachers), school counselors (counselors who doubled as subject teachers), and key education stakeholders in Karachuonyo North Sub-County, Homa Bay County, Kenya. This population was organized into two distinct groups aligned with the study's mixed-method design: quantitative survey respondents and qualitative key informants.

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The primary survey respondents comprised 386 Grade 3 learners (195 boys and 191 girls) and 24 teachers from six purposively selected public primary schools within the sub-county, for a total of 410 participants. Grade 3 learners are the focus because this stage marks a critical transition in basic education, during which foundational literacy and numeracy skills are expected to be consolidated. It is also the period when learning disorders, such as dyslexia, dyscalculia, and dysgraphia, tend to manifest more clearly, making this grade level ideal for early screening and intervention (UNESCO, 2021).

Teachers participated as survey respondents rather than key informants because they are directly involved in implementing classroom-level psychosocial support interventions, including reassurance, follow-up, and behavior training. Their views are crucial for assessing the presence, quality, and effectiveness of these interventions in improving learners' academic performance. The inclusion of both class and subject teachers ensures that different dimensions of learner support are captured comprehensively.

The six schools were purposively selected in consultation with the Sub-County Director of Education, using criteria such as school size (based on Grade 3 enrollment) and the documented presence of learners with academic difficulties. According to official records from the Sub-County Education Office (2024), these schools have a total of 386 Grade 3 learners, providing a reliable basis for analysis.

Sampling Frame

Category	Number of Respondents	Source of Selection	Rationale
Learners	386	Grade 3 classes in six purposively selected schools	Focus on the consolidation of literacy & numeracy
Teachers and Key Informants	24	Teachers from the same six schools and education Officers	Provide an instructional perspective
Total	**410**	Six purposively selected public primary schools	Comprehensive coverage of learners, teachers, and Key Informants

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3.5. Sampling Techniques and Sample Size

3.5.1. Sampling Techniques

In the first stage, purposive sampling was used to select six public primary schools in Karachuonyo North Sub-County. Selection was conducted in consultation with the Sub-County Director of Education, based on criteria including the presence of learners with noticeable academic difficulties, school size, and the availability of Grade 3 learners. Purposive sampling was appropriate here because it allowed the researcher to focus on institutions that were most likely to yield relevant data for the study's objectives (Palinkas et al., 2015). This ensured that the schools selected were directly aligned with the problem being studied, psychosocial interventions and academic performance among learners with Specific Learning Disorders.

In the second stage, the study used stratified sampling to divide the participants into specific subgroups: Grade 3 learners, class and subject teachers, and other school-based actors. This stratification ensured each category of respondent was represented fairly and proportionately, reducing variability and improving the accuracy of comparisons between groups (Kothari, 2014). It also helped the study maintain a clear balance between learner perspectives and the experiences of those responsible for instructional and psychosocial interventions.

In the third stage, simple random sampling was applied within each stratum to select the actual learners and teachers who l participated in the survey. For example, names of Grade 3 learners and teachers were randomly drawn from class registers. This method ensured every individual within each group had an equal chance of selection, which reduced sampling bias and enhanced the generalizability of findings across the sub-county, as confirmed by Creswell and Creswell (2022).

For key informants, such as head teachers, school counselors, and county education officials, purposive sampling was used exclusively. These individuals were not selected at random but based on their expert knowledge, direct involvement in school policy or learner support, and their ability to provide system-level insights. This approach was justified because key informants were expected to offer depth and contextual interpretation that go beyond what can be gathered

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from structured questionnaires, as hinted at by Etikan et al. (2016). Their input was essential for interpreting the broader challenges, policy gaps, and institutional practices related to the psychological support of learners with Specific Learning Disorders.

3.5.2. Sample Size

Sampling is a crucial aspect of research, involving the selection of a subset of subjects from a larger population. Kothari (2014) views a sample as a portion of the entire population selected from a target population. It makes it possible for the researcher to get results from a section of the population and make use of them to take a broad perspective of the whole population. The sample size of respondents was determined using the Yamane method at a 95% confidence level, with "e" set to 0.05. This involved a deliberate choice of respondents (the teachers) based on their ability to elaborate more on a specific topic, view, or tendency, which was used to obtain the needed sample from the target population. Using the Yamane formula, the sample size was 219 respondents. **"**Where "n" = Sample Size;

"N" = Population; "e_2" = precision level.

To determine the sample size, Yamane's formula will be used as follows:

$n = \frac{N}{1+Ne^2}$ Where:

- n = Sample size
- N = Population size
- e = Margin of error (precision level)

Given Data:

- Total population of Grade Three Pupils N=386
- Subjective teachers (reading and writing) N1=18
- Counseling and guidance teachers N2=6
- Assuming a margin of error e=0.05e

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Sample Size Calculation for Grade Three Pupils

Using the formula:

$$n = \frac{386}{1 + 386.\ (0.05)^2}$$

Calculating:

1. Calculate e^2
   $e^2=(0.05)^2= 0.0025$
2. Calculate $N\cdot e^2= 386\cdot0.0025=0.965$
3. Add 1 to this value: $1+0.965=1.965$

Now calculate n:

$$n = \frac{386}{1.965} \approx 196.12$$

Thus, rounding to the nearest whole number, the sample size for Grade Three pupils is approximately **196**.

Sample Size Calculation for Teachers

Now, we can calculate the sample size for teachers using the same formula. Assuming a combined population of subjective and counseling teachers:

Total number of teachers N=18+6=24

Using the same margin of error e=0.05e = 0.05e=0.05:

$$n = \frac{24}{1 + 24.\ (0.05)^2}$$

Calculating:

1. Calculate e^2
   $e^2=(0.05)^2= 0.0025$
2. Calculate $24\cdot 0.0025= 0.06$

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3. Add 1 to this value: 1+0.06=1.06
4. Now calculate n:

$$= \frac{24}{1.06} \approx 22.64$$

Thus, rounding to the nearest whole number, the sample size for teachers is approximately **23**.

The study sample includes 196 Grade Three pupils and 23 teachers, for a total of 219 respondents. This calculation is summarized in Table 3.1, which outlines the population and corresponding sample sizes for both groups, providing a clear overview of the participants involved in the research.

Table 3.1 Sample Size

Respondents	Population	Sample
Teachers and all the key informants	24	23
Grade three children with SLDs	386	196
Total	**410**	**219**

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3.6. Research Instruments

These are the tools researchers use to gather data during research, as Kothari (2014) puts it. The popular data collection instruments in research are interviews, questionnaires, written focus groups, and observation**.** In this study, the researcher used questionnaires as data-collection instruments. This is because questionnaires have certain advantages owing to the nature of the data that was collected and the sample involved.

3.6.1. Questionnaire

The study used structured questionnaires as the primary instruments for quantitative data collection. Two separate questionnaires were used, one for Grade 3 learners and one for their teachers, each designed to align with the study's conceptual framework and research objectives. Both tools followed the same structure for consistency and comparability. The questionnaires contained seven sections: Section A (Demographic Information), Section B (Prevalence of Specific Learning Disorders), Section C (Teacher Reassurance), Section D (Behavior Training), Section E (Follow-Up Support), Section F (Academic Performance of Learners with Specific Learning Disorders), and Section G (Moderating Variables such as school policies or classroom environment). This structure allowed for a systematic examination of the independent, dependent, and moderating variables. Questionnaires were chosen for their efficiency, cost-effectiveness, and ability to gather data from a relatively large population while maintaining anonymity and reducing interviewer bias (Creswell & Creswell, 2022).

The questionnaire for learners was not self-administered. Grade 3 pupils are still developing cognitively and may experience difficulties with reading, comprehension, or attention, especially those with Specific Learning Disorders such as dyslexia or dysgraphia (UNESCO, 2021). To address this, trained research assistants guided the learners through each question in a one-on-one setting, using simplified language and visual aids where necessary. These assistants were briefed thoroughly to maintain neutrality and ethical standards, and parental/guardian consent and child assent were secured in advance, as required in research involving minors (Creswell & Creswell, 2022).

In contrast, the teacher questionnaires were self-administered. Teachers are professionally trained, literate, and capable of providing accurate data on their interactions with learners, particularly regarding psychosocial support mechanisms like reassurance, behavior training, and follow-up strategies. Their insights are crucial because they implement these interventions directly and observe their effects on learners' academic outcomes. The revised version of this section now clarifies that, while both groups used similarly structured tools, only teachers completed theirs themselves. This adjustment addresses earlier concerns by ensuring that tool administration matches the cognitive and literacy levels of each respondent group, leading to more accurate and ethically sound data collection.

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3.6.2. Interview Schedule

To conduct a more thorough investigation of the effects of psychosocial support interventions on the academic performance of Grade 3 learners with learning disorders in Homa Bay County, Kenya, interview guidelines were used to guide interviews with key respondents. The use of oral interviews offers a significant advantage in obtaining perspectives from people who would not have been included in the sampling procedure, thereby augmenting the comprehensiveness of the data (Siedlecki, 2020). The experiences and viewpoints of educational policymakers and educational psychologists about learning difficulties and academic performance were better understood thanks to these interviews. Open-ended discussions allowed the researchers to get rich qualitative information that enhances and supplements the quantitative results they acquire from other data-gathering techniques, such as surveys and evaluations. Furthermore, interviews give participants a forum to share their ideas, worries, and recommendations, which yield insightful information that may be used to improve practices, policies, and treatments targeted at helping students with learning disorders succeed academically.

3.7 Pilot Study

The pilot study was conducted in Karachuonyo South Sub-County, adjacent to the main study area, to ensure the study's contextual appropriateness and avoid contamination effects. The sample size of 54 respondents, which is 10% of the entire population of 219, is highly adequate in identifying the flaws in the study design, particularly when the subjects are vulnerable learners in the country with Specific Learning Disorders. The sample size is justified since it is far above the required amount, which is only needed to ensure the study tools are tested for ease of understanding, usability, and age appropriateness. The pilot study ensured the study tools are appropriate for learners with dyslexia, dyscalculia, and dysgraphia.

3.7.1. Validity of Research Instruments

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Maintaining the authenticity of research data was crucial to ensuring the trustworthiness and integrity of this study. As noted by Cooper and Schindler (2019), validity refers to the extent to which a research instrument measures what it is intended to measure. In this study on psychological intervention and academic performance among learners with Specific Learning Disorders in Karachuonyo North Sub-County, the research instruments were developed to closely align with the study objectives and research questions. This alignment helped to ensure that each item on the learner and teacher questionnaires accurately captures the intended variables, such as emotional support strategies and academic performance indicators. The instruments were reviewed by the research supervisor and subject experts to assess content relevance, clarity, and coverage.

To assess content, the instruments underwent expert review by professionals in educational psychology and special needs education. These experts examined whether the questionnaires and interview guides adequately cover all the critical areas of psychological interventions relevant to learners with Specific Learning Disorders. Their feedback helped eliminate irrelevant or unclear items, ensuring that the tools are both comprehensive and practical.

In addition to enhancing face validity, the instruments were piloted among a sample of 54 participants (50 pupils and 4 teachers) not involved in the main study, drawn from Karachuonyo South Sub-County. This pre-testing allowed the researcher to identify and address potential issues related to language, format, or comprehension, especially considering the needs of young learners with learning difficulties.

Construct validity was ensured by grounding the instrument design in existing theories and frameworks that explain the relationship between psychosocial support and learner performance. Each questionnaire item was designed to reflect well-defined constructs such as reassurance, follow-up support, teacher engagement, and academic progress. Insights from previous studies and validated tools guided the structure and phrasing of the questions to ensure that they accurately measure the underlying concepts. Feedback from the pilot study was incorporated to refine and finalize the instruments before full-scale deployment, ensuring they are clear, relevant, and suitable for both learners and teachers.

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3.7.2. Reliability of Research Instruments

Reliability refers to the consistency with which a research instrument measures what it is intended to measure, even when used under similar conditions at different times or with different groups. According to Creswell and Creswell (2022), a reliable instrument should produce stable and repeatable results. To ensure this, the researcher will conduct a pilot study in Karachuonyo South Sub-County using the same instruments intended for the main study. This preliminary phase will help detect any inconsistencies in the tool's performance and allow for adjustments before full-scale deployment.

A test-retest method was used to check the stability of the instruments. The same set of questionnaires was administered to the same group of respondents at two different times, under similar conditions. The researcher then analyzed the degree of consistency in their responses. In addition, to assess the internal consistency and reliability of the instruments—especially those using Likert-scale items such as teacher and key informant questionnaires—the researcher calculated Cronbach's alpha coefficient. The reliability analysis established a Cronbach alpha value of 0.78, signifying that the tool used for data collection- the questionnaire was reliable. A reliability score of 0.7 or higher was considered acceptable for this study, as recommended by Fraenkel, Wallen, and Hyun (2015). If the alpha score was low, items with poor correlation would be revised or removed to improve reliability.

Finally, the pilot data were evaluated alongside the study's objectives to ensure alignment and coherence across items. Differences in responses across respondent categories were also compared to assess reliability across groups. Expert input from educational psychologists and special needs educators was sought to review item clarity, structure, and relevance. These combined steps enhanced the instruments' dependability and ensured they provided consistent data suitable for assessing psychological interventions and academic performance among learners with Specific Learning Disorders.

3.8. Data Collection Procedure

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The data collection process began with the researcher obtaining a research approval letter from the board of post-graduate of St. Pauls' University. Then St. Paul's University ethics review committee before seeking a research permit from the National Commission for Science, Technology and Innovation (NACOSTI. This was followed by official visits to the six selected public primary schools in Karachuonyo North Sub-County. The researcher presented letters of introduction, authorized by the university and the Sub-County Director of Education, to the respective head teachers. During these visits, the researcher explained the objectives, scope, and significance of the study, emphasizing the importance of honest and open responses in helping improve academic support for learners with Specific Learning Disorders. Parental/guardian consent was sought in advance, followed by child assent for Grade 3 learners. Teachers were also briefed on the importance of their participation as survey respondents.

Questionnaires for teachers and learners were administered on-site. Teachers received printed questionnaires, which they completed independently and returned to the researcher. Grade 3 learners, due to their age and developmental level, were assisted by trained research assistants who helped them understand and respond to the questions accurately and ethically. Learner questionnaires were presented in simplified, child-friendly language and larger print formats where necessary, ensuring accessibility for all participants, especially those with potential learning difficulties. The presence of assistants ensures that learners do not experience confusion, fear, or pressure during the process.

Key informant interviews were conducted with selected educational psychologists and county-level education policymakers. These individuals were identified and reached through the County Director of Education. Once contact was made, interviews were scheduled at a convenient time, either in person or virtually (via Zoom or Google Meet). A semi-structured interview guide was used to explore their insights into diagnostic services, policy implementation, and psychosocial interventions for learners with Specific Learning Disorders. All interviews were conducted by the lead researcher to ensure consistency and depth of inquiry.

3.9. Data Analysis and Presentations

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Data analysis is a methodical procedure essential for providing the gathered information with structure, order, and significance, as explained by Sileyew (2019). The researcher entered the answers on the analysis-recording sheet after carefully going over each completed questionnaire in this study. The Statistical Package for the Social Sciences (SPSS) version 29 was used to analyze quantitative data obtained from closed-ended surveys. Tallying, coding, and a descriptive statistical analysis of this numerical and readily measurable data were undertaken. Correlation, ANOVA, and Regression were used. The results of this study were presented in various formats, including frequency tables, cross-tabulation tables, and graphical aids such as pie charts and graphs, to enhance clarity and interpretation. Using Regression Analysis, the researcher examined the relationships among the variables and drew relevant conclusions. The researcher also conducted an analysis of variance and calculated standard deviations.

Thematic analysis was used to analyze qualitative data from interviews and open-ended questionnaires. The researcher first reviewed the responses and identified patterns across the objectives. The data were coded into four main areas: the impact of dyslexia, dyscalculia, and dysgraphia on learners' performance; the role of teacher reassurance in building confidence; the importance of behavior training in improving focus and discipline; and the contribution of teacher follow-up in sustaining progress. These codes were then grouped into themes, including academic barriers, emotional support, behavioral interventions, and instructional continuity. Together, they helped clarify how learners' performance is shaped by both the challenges of their disorders and supportive teaching practices. The findings were then presented in a narrative form to complement the quantitative results. This approach allowed for a better understanding of how learning disorders affect students in Homa Bay County and ultimately informs interventions and policies that can improve their academic outcomes.

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3.10. Ethical Considerations

Ethical issues were important in research because research deals with and intrudes into people's lives, as outlined by Suri (2020). The researcher was guided by three ethical considerations throughout the study: informed consent, anonymity, and reciprocity. Before beginning research, the researcher sought approval from the Ethics Board of St. Paul University, which ensures that

the study adheres to ethical guidelines and prioritizes participants' rights and welfare. The researcher reached out to the St. Paul's University Ethical Review Board to assess the research proposal and ensure it meets the established ethical standards. This Board evaluated elements like informed consent and confidentiality, as well as the possible risks and values of this study. This will help to protect the rights of the respondents. Additionally, to ensure compliance with national research regulations, authorization was obtained from the National Commission for Science, Technology, and Innovation (NACOSTI).

Upon receiving the necessary permits, the researcher requested formal authorization from the Homa Bay Director of Education. Additionally, the head teachers of the individual schools informed the education administration of Karachuonyo North Sub-County. This procedural phase highlights the researcher's commitment to carrying out the inquiry with proper authorization at institutional and regional levels, stressing transparency and unwavering adherence to ethical standards throughout the research process. The researcher also sought consent from the learners' parents/guardians. Effective communication will be essential throughout the research process. The researcher explained the study's objectives openly and clearly to the participants. Additionally, explicit guarantees were given, emphasizing the complete confidentiality of participants' responses and the protection of their identities. Building on the ethical framework laid out by Cooper and Schindler (2019), the research prioritized ethical conduct, focusing on the rights of Grade 3 students from selected schools in the Karachuonyo North sub-county of Homa Bay County, who would be the study's subjects. This commitment ensured that the welfare, protection, and respect of the participants were given the highest priority. To address reciprocity and demonstrate giving back, the researcher plans to provide the school with a synopsis of the findings and suggestions, distribute the study results, give the school a copy of the entire dissertation, and participate in any school-related activities that do not interfere with the research process.

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3.11 Chapter Summary: Methodology

This chapter outlines the procedures and methods used to conduct the study on the influence of psychosocial support interventions on the academic performance of Grade 3 learners with learning disorders in Homa Bay County, Kenya. The study adopted a descriptive survey research design, enabling the collection of data from a large group to describe relationships among variables such as teacher reassurance, behavior training, and follow-up support. This design was chosen because it is practical, cost-effective, and suitable for examining existing conditions without manipulating variables.

The research was carried out in Karachuonyo North Sub-County, Homa Bay County, an area characterized by high poverty levels and limited educational resources, factors that may affect learners with learning disorders. The location was selected to better understand the challenges these learners face and to propose appropriate interventions. The target population included Grade 3 learners, teachers, school counselors, and education stakeholders. A total population of 410 participants was identified, from which a sample size of 219 respondents (196 learners and 23 teachers) was determined using the Yamane formula.

A combination of sampling techniques was used:

- Purposive sampling to select schools and key informants
- Stratified sampling to group participants
- Simple random sampling to select individual respondents

Data were collected using structured questionnaires for learners and teachers and interview schedules for key informants, such as educational psychologists and policymakers. Learners were assisted by trained research assistants, while teachers completed questionnaires independently. A pilot study was conducted in a neighboring sub-county to test the research tools. This helped improve the validity and reliability of the instruments. Validity was ensured through expert review and alignment with study objectives, while reliability was confirmed using the test-retest method and Cronbach's alpha coefficient (0.78), indicating acceptable consistency.

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The data collection procedure involved obtaining permissions, administering questionnaires in schools, and conducting interviews either physically or virtually. Ethical standards such as informed consent, confidentiality, and voluntary participation were strictly followed. For data analysis, quantitative data were analyzed using SPSS version 29 through descriptive statistics and regression analysis, while qualitative data from interviews were analyzed thematically. Results were presented using tables, charts, and narrative explanations. Finally, the study adhered to strict ethical considerations, including obtaining approval from relevant authorities, ensuring participant confidentiality, and securing consent from parents and learners. The researcher is also committed to sharing findings with participating schools as part of ethical reciprocity.

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CHAPTER FOUR: DATA ANALYSIS, PRESENTATION, AND INTERPRETATION

4.1. Introduction

This chapter presented the results of the data analysis of the primary data collected using the study's collection tools. The study's demographic data, inferential statistics, and descriptive statistics were all presented in the analysis.

4.2. Pilot Test Results

A pilot test was conducted at a separate school in the same County of Homa-Bay. This involved a class of 50 pupils and 4 teachers. The study carried out a reliability test using Cronbach's alpha, and the results are summarized in Table 4.1 below.

Table 4.1: Reliability Test

Variable	Cronbach's Alpha	Comment
Prevalence of SLDs	0.713	Reliable
Teacher Reassurance	0.876	Reliable
Behavior Training	0.743	Reliable
Follow-up	0.784	Reliable

Source: Survey Data (2025)

The reliability results for the study variables indicated internal consistency of the scale (the data collection tool used in the study). This is because a Cronbach's Alpha value of 0.7 or higher is the generally accepted threshold, indicating that the scale used in the study is reliable and consistent. In this study, the results were 0.7 and above. Prevalence of Specific Learning Disorders was 0.713; teacher reassurance was 0.876, followed by behavior training at 0.743, and finally, follow-up at 0.784. The study further conducted a validity test to ensure the accuracy of the measurement tools. The results were summarized in Table 4.2 below.

Table 4.2: Validity Test

Variable	Factor Loading
Prevalence of SLD	0.755
Teacher Reassurance	0.684
Behavior Training	0.821
Follow-up	0.715

Source: Survey Data (2025)

The validity test results, summarized in Figure 4.2, pointed to the fact that all the variables in the study showed positive and adequate factor loadings. For example, behavior training, prevalence of Specific Learning Disorders, and follow-up showed higher factor loadings of 0.821, 0.755, and 0.715, respectively, while Teacher reassurance had a factor loading of 0.684, which was still within the acceptable threshold. These results, therefore, point to the fact that the items were strongly related to the factors. This is because each item in a measurement ought to have a loading of 0.40 or higher on the factor it is intended to measure. It is worth noting that validity tests are intended to establish whether the items in the scale yield appropriate measurements for the research's intended purpose. For that reason, in this study, the factor loadings exceeded the conventional threshold of 0.4, indicating valid results.

4.3. Response Rate

The study had a target population of 219 respondents, obtained from the 6 primary schools in Homa-Bay County. The study included 196 Grade 3 learners and 23 teachers from the six sampled schools. The questionnaires were distributed to all 219 respondents who were allowed adequate time to give dependable information. Nevertheless, only 205 respondents returned appropriately completed questionnaires for the analysis. In line with this, the response rate for this study was 93.6%. This rate was within the acceptable threshold to warrant the data analysis, as argued by Mugenda and Mugenda (2003). Above all, fourteen of the respondents did not

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return their questionnaires at all, despite the fact that sixty-four returned partly filled questionnaires. These were excluded from the data analysis to avoid the appearance of outliers that could skew the precision of the gathered data.

Table 4.3: Response Rate

Response Rate	Frequency	Percentage
Response	205	93.6
Non-Response	14	6.4
Total	219	100

Source: Survey Data (2025)

4.4. Demographic Results

The respondents were asked to give their age, gender, duration of teaching, the level of education, their teaching subjects, and whether they had received any special training or skills relating to Specific Learning Disorders.

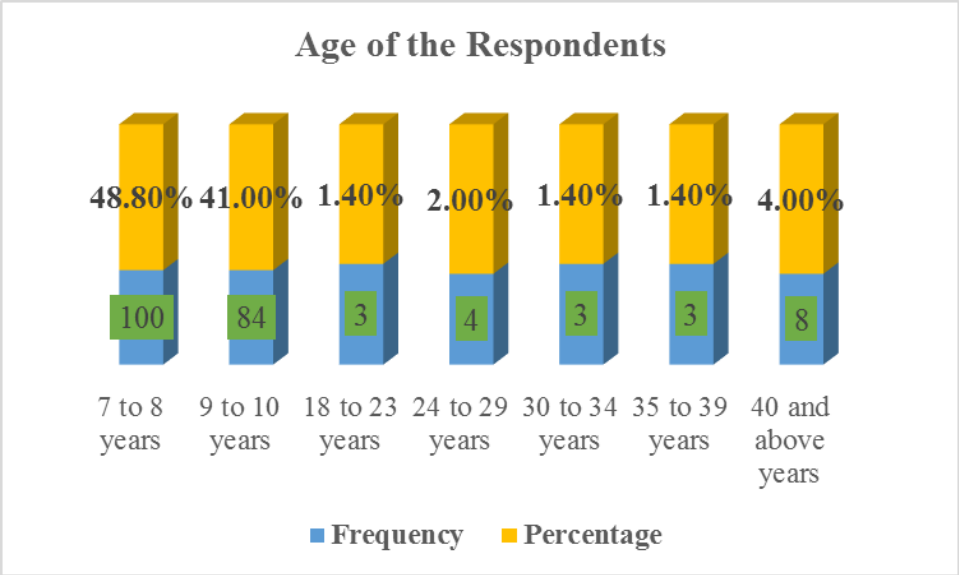


Figure 4.1: Age of the Respondents

The results in Figure 4.1 above indicate that the majority of the respondents, 89.8%, were aged between 7 and 10 years. These were mainly the pupils who formed a bigger part of the target population. The other slightly larger group, 4%, was aged 40 years and above. These were the teachers in the selected schools who participated in the study. The other categories were 24 to 29(2%), 18 to 23 years (1.4%), 30 to 34 years (1.4%), and 35 to 39 years, also 1.4%

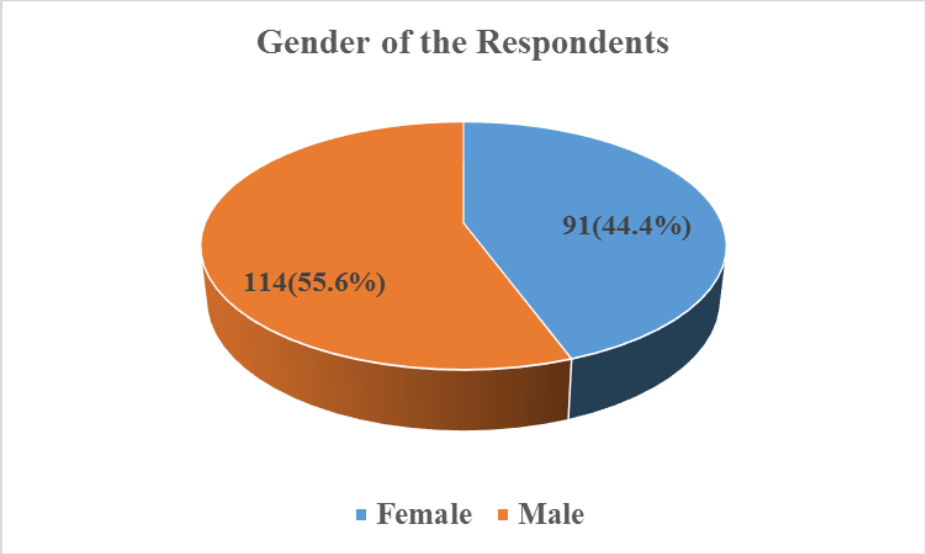


Figure 4.2 Genders of the Respondents

The results summarized in Figure 4.2 show that 44.4% of the respondents were male, while 55.6% were female. It is worth noting that the gender distribution in the study was, to some degree, balanced, permitting relatively inclusive views or data for the study relating to the variables that were investigated.

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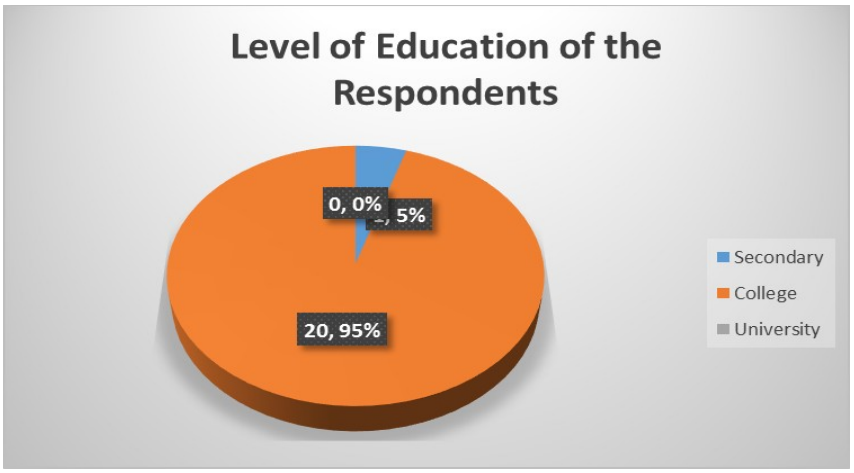


Figure 4.3: Level of Education of the Respondents

The results summarized in Figure 4.3 indicate that the majority, 20(95%) of the respondents (the Teachers) had a college-level education, followed by secondary level at 1(5%). However, none of the respondents had a university-level education.

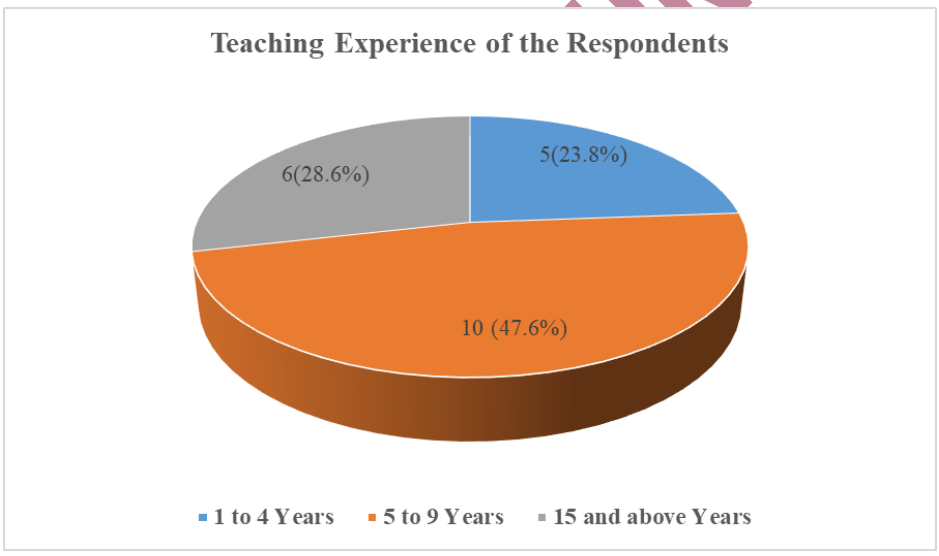


Figure 4.4: Teaching Experience of the Respondents

The study results, summarized in Figure 4.4, indicate that the majority, 10(47.6%) of the respondents (the teachers) had a teaching experience of 5 to 9 years. It is also evident from the results that 6 (28.6%) of the respondents had 15 years or more of teaching experience, while 5

(23.8%) had 1 to 4 years of teaching experience. From the results, it is worth noting that the even distribution of the teaching experience among the schools that participated in the study would make it possible to support learners with certain learning disorders.

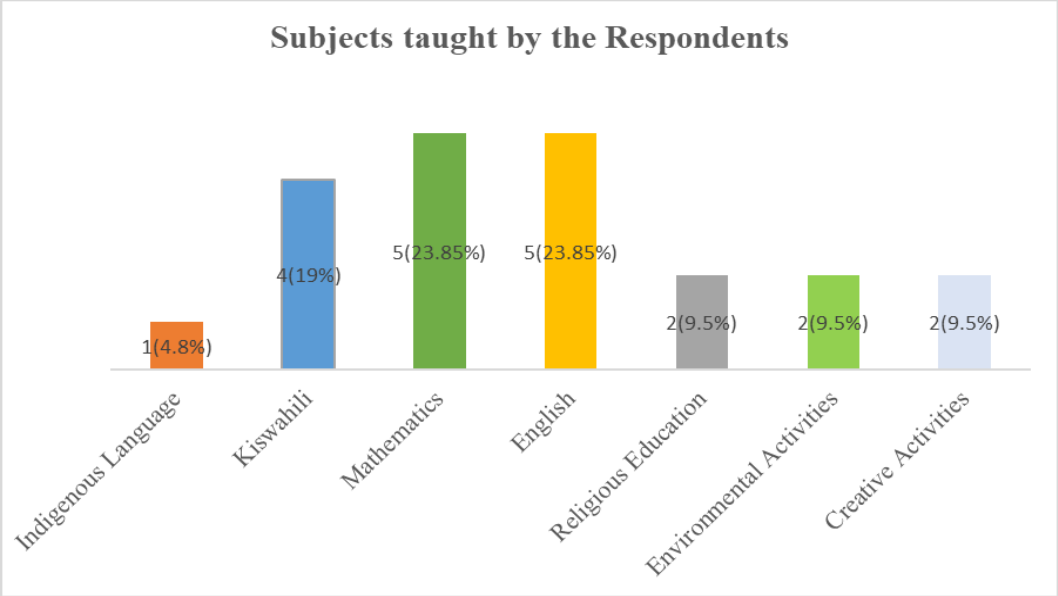


Figure 4.5: Subjects taught by the Respondents

From the study results summarized in Figure 4.5 above, it was evident that the majority of the respondents' teaching subjects were mathematics 5(23.85%), English 5(23.85%), followed by Kiswahili 4(19%). The other respondents indicated their teaching subjects as Religious Education, 2(9.5%), Environmental Activities, 2(9.5%), Creative Activities, 2(9.5%), while Indigenous Language had only 1(4.8%) respondent.

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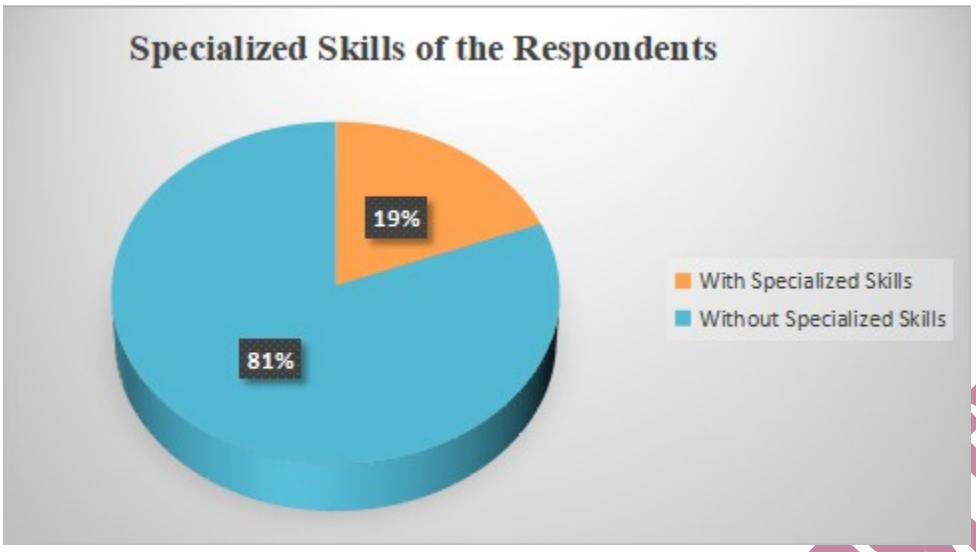


Figure 4.6: Specialized Skills of the Respondents

The study results, summarized in Figure 4.6, indicate that 4(19%) of the respondents (the Teachers) had specialized skills to handle the learners with Specific Learning Disorders in the schools that participated in the study. However, of the rest of the respondents, only 17(81%) had the normal teaching skills. This, therefore, could mean that they were not quite in a position to handle the learners with disorders. From the key informants, it was evident that the Kenya Institute of Special Education (KISE) trains teachers who end up in private schools. Only a few are found in public primary schools. This therefore answered why there were few teachers with specialized skills in the schools that participated in the study. These findings are also in line with the study by Nthenge (2017) which established that Children's Act (2022), the Disability Act (2003), and the Kenyan Constitution (2010), national policy frameworks mainly address conventional impairments such as hearing, visual, physical, and intellectual disabilities, while often overlooks the distinct challenges of learners with learning disorders, limiting support and targeted interventions.

4.5. Prevalence of learning disorders among Grade 3 learners in regular schools in Homa-Bay County

The respondents (teachers) were asked to indicate their level of agreement with statements regarding the prevalence of Specific Learning Disorders among Grade 3 learners. A range of

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responses were gathered from the teachers. The teachers gave their responses relating to the different statements on the Specific Learning Disorders as reflected in Table 4.4. To get deeper meaning from the responses gathered, measures such as mean, variance, and Standard deviation were generated as summarized in Table 4.4 below.

Table 4.4: Prevalence of Specific Learning Disorders (SLDs) among Grade 3 learners

Statement	Strongly Disagree	Disagree	Neutral	Agree	Strongly Agree
I have learners with dyslexia.	1(4.76%)	1(4.76%)	4(19.05%)	14(66.67%)	1(4.76%)
I have learners with dyscalculia.	2(9.52%)	1(4.76%)	4(19.05%)	12(57.14%)	2(9.52%)
I have learners with dysgraphia.	2(9.52%)	3(14.29%)	2(9.52%)	11(52.38%)	2(9.52%)
Many learners struggle with basic reading, writing, or math.	1(4.76%)	1(4.76%)	3(14.29%)	13(61.90%)	3(14.29%)
I suspect some learners have undiagnosed Specific Learning Disorders.	0(0.00%)	0(0.00%)	4(19.05%)	16(76.19%)	1(4.76%)

The overall picture of the results in Table 4.4 is that there's a clear propensity toward agreement across all statements, suggesting that teachers were aware of and observed signs of Specific Learning Disorders in their classrooms. Regarding the statement on dyslexia, 14 (66.67%) of the respondents agreed with the possible cases of this disorder in their classes. Moreover, 13 (61.90%) of the respondents agreed that many learners struggle with basic reading, writing, or math. As was confirmed by 3 (14.29%) who strongly agreed that there are learners who have problems with reading, writing, and basic numeracy, this was evidence enough of the prevalence of a particular Specific Learning Disorder. The findings are close to those of Margolis et al. (2020), who investigated NVLD prevalence among 2,596 learners aged 6–19 in the U.S. and Canada and reported rates of 2.78–3.9%—about 3–4% of the population, or roughly 2.2–2.9 million U.S. adolescents.

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Finally, most teachers 13(61.9%, confirmed that they observed learners struggling with reading, which aligns with dyslexia symptoms. There's strong confidence that it is present in their classrooms. There was a clear indication from the respondents of the prevalence of Dyscalculia among the learners, as 12 (57.14%) agreed with the statement on its prevalence in their classes. This was further confirmed by 2(9.52%) of the respondents who strongly agreed with the statement. The researcher noted that a majority16 (76.19%) of the respondents also believed they had learners facing challenges in numerical reasoning. This disorder seemed somewhat less recognized than dyslexia, but still notably present. These findings are in line with a study by Juma (2018), who confirmed that according to a national survey, almost 11.4% of learners in Kenya have some form of disability or special needs in education.

Regarding the statement on dysgraphia, 11(52.38%) of the respondents agreed they had learners with this learning disorder in their classes. This was further confirmed by 2(9.52%) of the respondents. Nevertheless, while agreement remained high, the responses were more varied—perhaps indicating less familiarity or confidence in identifying writing-specific difficulties than in dyslexia and dyscalculia. It is worth noting that general struggles in literacy and numeracy, 13(61.90%) agreed, witnessing the same, and 3(14.29%) strongly agreed, reinforces the above—teachers were seeing important functional academic challenges, which may or may not be formally diagnosed as Specific Learning Disorders. On the issue of the prevalence of suspected undiagnosed Specific Learning Disorders, 16(76.19%) of the respondents agreed about the existence of such cases, supported by 1(4.76%) who strongly agreed. The strongest consensus was that teachers who participated in this study suspected many learners had Specific Learning Disorders that had not been professionally assessed or diagnosed. This revealed a need for more support in identification and intervention, as shown in **Table 4.4**.

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4.6. Prevalence and Identification of Specific Learning Disorders

Globally, the overall prevalence of Specific Learning Disorder is estimated to be 5–15% of school-aged children across languages and cultures. Reading disorder (dyslexia) is about 4–9%; Mathematics disorder (dyscalculia) is about 3–7%, while written expression disorder (dysgraphia) is less frequently reported but included in global Specific Learning Disorder

estimates. The researcher further established that out of the population of 184 that participated in the study, 60 of them had dyslexia, 44 had dyscalculia, and 30 had dysgraphia, while 30 others were slow learners, and the rest had family-related issues. The researcher conducted counseling for about 75% of the learners identified with Specific Learning Disorders. Further still, the researcher had brief sessions with the teachers and gave them tips on identifying Specific Learning Disorders in learners.

It was also evident that the County government of Homa-Bay has physical facilities for the schools to host the learners with Specific Learning Disorders. However, there are no teachers with these specialized skills, despite KISE training. The researcher was of the opinion that TSC needs to hire more of these teachers to help support these learners with Specific Learning Disorders.

These findings have educational Significance in different ways. These respondents' perceptions suggest that Specific Learning Disorders are prevalent and impactful in Grade 3 learning environments. It is also evident that there's a need for teacher training, early screening, and intervention programs. The high rates of suspected undiagnosed Specific Learning Disorders bring out a gap between observation and diagnosis, which could affect how learners are supported.

All statements had mean values above 4.4, indicating general agreement among teachers that Specific Learning Disorders are present and impactful. The highest mean (3.90) generated was for suspected undiagnosed Specific Learning Disorders, suggesting a strong perception that some learning disorders go unnoticed. The results from the teachers were summarized in **Table 4.5.** From the results on the views from the teachers on Specific Learning Disorders, there were values of both Variance and Standard Deviation generated. The details in Table 4.1 above indicate that a lower SD (0.69) for undiagnosed Specific Learning Disorders shows high consensus. It is evident that most teachers agree about the prevalence of Specific Learning Disorders among the learners in Homa-Bay County, though undiagnosed. On the other hand, higher SDs (around 1.14) for dysgraphia and dyscalculia suggest diverse experiences or uncertainty, possibly because of differences in understanding or identification of these

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conditions. More so, a widespread agreement from the teachers that Specific Learning Disorders exist in classrooms was also evident from the data gathered from the respondents.

Table 4.5: Statistical Results by Statement on the prevalence of Specific Learning Disorders

Statement	Mean Score	Variance	Std. Deviation
I have learners with dyslexia	3.76	0.91	0.95
I have learners with dyscalculia	3.62	1.11	1.05
I have learners with dysgraphia	3.48	1.29	1.14
Learners struggle with reading/writing/math	3.86	0.98	0.99
I suspect some learners have undiagnosed Specific Learning Disorders	3.90	0.47	0.69

Source: Research Data, 2025

As reflected in the data collected, Dysgraphia had the lowest mean and highest variation, possibly revealing that it is the least recognized or most confusing for the teachers. The teachers' responses indirectly confirmed this situation/status. More so, teachers strongly suspect some learners had undiagnosed Specific Learning Disorders, which might reflect gaps in screening, resources, or training.

4.7. Teacher Reassurance

The respondents (teachers) were further asked to indicate their level of agreement with certain statements related to the teacher reassurance to learners with Specific Learning Disorders in Grade 3. The responses were gathered and summarized as reflected in Table 4.6 below. The counts for the responses relating to every statement were considered and tabulated.

Table 4.6: Reassurance to learners with Specific Learning Disorders (SLDs)

Statement	Strongly Disagree	Disagree	Neutral	Agree	Strongly Agree
I regularly encourage learners with Specific Learning Disorders.	1(4.76%)	1(4.76%)	3(14.29%)	10(47.62%)	6(28.57%)
I have built trust with these learners.	1(4.76%)	2(9.52%)	2(9.52%)	11(52.38%)	5(23.81%)
I use praise to boost their confidence.	1(4.76%)	1(4.76%)	3(14.29%)	12(57.14%)	4(19.05%)
I actively reassure anxious learners.	1(4.76%)	1(4.76%)	2(9.52%)	13(61.90%)	4(19.05%)
My teaching includes affirming practices.	0(0.00%)	2(9.52%)	2(9.52%)	14(66.67%)	3(14.29%)
I check in with learners individually to offer emotional support	0(0.00%)	0(0.00%)	1(4.76%)	15(71.43%	5(23.81%)
I adapt my tone and feedback to reduce stress in struggling learners	2(9.52%)	3(14.29%)	3(14.29%)	9(42.86%)	4(19.05%)

Source: Research Data, 2025

The results reflected a high agreement overall from the respondents (the teachers). From the results that, the majority of responses for all five statements fall within "Agree" and "Strongly Agree," indicating that most teachers consciously and systematically offered reassurance to learners with Specific Learning Disorders. There was a strongest Affirmation from the respondents in the form of "my teaching includes affirming practices". This statement had the highest "Agree" response at 14(66.67%) of the respondents, showing educators embrace positive reinforcement in their methods. On trust and praise, over 75% of respondents indicated that they encouraged, praised, or actively reassured learners—strong evidence of an empathetic and supportive approach. Comparatively few chose "Neutral," "Disagree," or "Strongly Disagree," which reinforces that reassurance is a recognized and practiced strategy.

The researcher noted from the findings that across all five statements about providing reassurance to learners with Specific Learning Disorders, the data painted a picture of high levels of empathy, proactive support, and relationship-building by educators. However, there were some emerging issues that affirmation is a core teaching approach, as over 80% of respondents agreed or strongly agreed that they use affirming practices and praise. This was a strong sign that emotional reinforcement is built into instruction. It was also evident from the findings that trust and encouragement go hand in hand. The responses indicated that teachers had cultivated

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trusting relationships with their learners and encouraged them regularly, helping build a safe learning environment. The findings could be slightly aligned with a study by Goegan et al. (2024) that reviewed 96 Canadian studies on learning disabilities (2000–2023), showing a strong emphasis on literacy and mathematics interventions. Teacher support and positive expectations were linked to resilience and achievement, though gaps remain in addressing culturally diverse populations. This study used a scoping review approach, thereby carrying with it some of the gaps embedded in the studies reviewed.

It also came out well that anxiety was being addressed actively. This was confirmed by a combined 80.95% of the respondents who Agreed and also strongly Agreed were actively reassuring learners who may be anxious, which suggests teachers recognize the emotional weight Specific Learning Disorders carry for young learners. There was a low level of disagreement across the board. In this, very few respondents marked "Disagree" or "Strongly Disagree," pointing to a general consistency in supportive behavior. Based on the above insights, the researcher brought out how schools and educators can build on this strong foundation. The researcher was of the view that there needed to be formalized supportive Practices by creating a framework or handbook of affirming classroom strategies so educators have a toolkit to lean on. Also, this could be achieved by the use of model lesson plans that integrate reassurance, praise, and emotional check-ins with academic content. As well, there was a need to focus on professional development through workshops that focused on emotional intelligence in teaching and recognizing and responding to signs of learner distress specific to Specific Learning Disorders.

Peer Support Systems meant to create forums for teachers to share stories, challenges, and successful techniques for engaging and reassuring learners would also be essential. In addition, it was important for the researcher to encourage mentorship pairings where more experienced teachers can support those newer to inclusive practices. More so student voice and reflection could also be encouraged. The schools could allow learners with Specific Learning Disorders to express how they feel supported—via journals, drawings, or classroom surveys. The educators could use this data to tweak classroom climate and identify individual needs more effectively. Finally, collaboration with Specialists would equally support the learners with Specific Learning

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Disorders. In this, the teachers/educators could work closely with special education professionals, psychologists, and counselors to ensure emotional reassurance is aligned with each learner's personalized learning plan. These findings are partially in line with a study by Frohlich et al. (2020), which showed that teachers who viewed student challenges as improvable reported greater confidence and fostered stronger engagement. While their study focused on Canadian teachers' beliefs, it did not address broader school supports or direct learner outcomes. The current study extends this by demonstrating how psychosocial interventions and supportive environments directly improve academic performance among learners with Specific Learning Disorders.

The researcher generated the mean, variance, and standard deviation of the dataset as reflected in Table 4.7 below. There was strong agreement with mild variation on whether the teachers regularly encourage learners with Specific Learning Disorders. The responses to this statement had a mean of 3.86, a variance of 1.26, and a standard deviation of approximately 1.03.

Table 4.7: Statistical Results by Statement on Teacher Reassurance

Statement	Mean	Variance	Std. Dev	Interpretation
I regularly encourage learners with Specific Learning Disorders	3.86	1.06	1.03	Strong agreement with mild variation
I have built trust with these learners	3.76	1.17	1.08	Positive sentiment, but some diversity in response
I use praise to boost their confidence	3.81	0.97	0.99	Consistent praise practices across teachers
I actively reassure anxious learners	3.86	0.93	0.97	High consensus and strong practice of reassurance
My teaching includes affirming practices	3.86	0.70	0.84	Most teachers agree with less variability
I check in with learners individually to offer emotional support	4.19	0.49	0.70	Highest agreement, very consistent responses

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I adapt my tone and feedback to reduce stress in struggling learners	3.43	1.51	1.23	More variation — this may depend on individual teacher style

It was equally evident that most teachers who participated in the study agreed with less variability that their teachings include affirming practices. This had a mean of 3.86, a variance of 0.70, and a standard deviation of 0.84. However, the highest agreement was on checking in individually to offer emotional support (Mean = 4.19). This reflected a strong commitment to emotional support of the learners by the teachers. Furthermore, this lowest variation was on affirming practices and emotional check-ins, indicating that the teachers are unified in these approaches, and hence, there is adequate emotional support for the learners with Specific Learning Disorders. However, most variation was in adapting tone and feedback.

Under this, the responses gathered were more scattered, suggesting it was a less consistently applied strategy. The data showed that most teachers in this study were actively and regularly providing reassurance to learners with Specific Learning Disorders. There was a broad agreement on emotional support strategies such as encouragement, praise, and affirming practices. However, responses around tone adaptation reveal differences, and therefore, this could be an area for training or reflection to enable teachers to offer the essential support required by the learners in the schools in Homa-Bay County.

4.8. Behaviour Training

The respondents were asked their opinions on behaviour training strategies to support Grade 3 learners with Specific Learning Disorders (SLDs). They were given various statements to rate as summarized in Table 4.8 below.

Table 4.8: Behavior training strategies to support Grade 3 learners with Specific Learning Disorders

Statement	Strongly Disagree	Disagree	Neutral	Agree	Strongly Agree
Structured routines	1(4.76%)	1(4.76%)	3(14.29%)	10(47.62%)	6(28.57%)

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Cue cards / visual schedules	2(9.52%)	2(9.52%)	15(71.43%)	2(9.52%)	0(0.00%)
Positive reinforcement	0(0.00%)	0(0.00%)	15(71.43%)	3(14.29%)	3(14.29%)
Classroom rules consistently followed	1(4.76%)	1(4.76%)	4(19.05%)	13(61.90%)	2(9.52%)
Disruptive behavior reduced over time	2(9.52%)	2(9.52%)	9(42.86%)	8(38.10%)	0(0.00%)
Focus and engagement maintained	1(4.76%)	3(14.29%)	17(80.95%)	0(0.00%)	0(0.00%)

On the issue of the adoption of structured routines as part of the strategies of behavior training, the majority of the respondents, 16(76.19%), were in agreement. This pointed to the fact that there were clear routines that were widely used and highly effective, offering consistency and predictability for learners with Specific Learning Disorders. The use of cue cards / visual schedules attracted a different response, with 15(71.43%) neutral, and only 2(9.52%) agreeing. As most educators remained neutral, this may reflect low usage, unfamiliarity, or limited access to such tools. The statement on positive reinforcement attracted a confirmation of 18(85.72%) of the respondents who were in agreement that this approach is adopted across the schools that participated in the study. The researcher noted that a standout result—praise and rewards were actively used and valued to encourage desirable behavior, especially among the learners with Specific Learning Disorders.

Classroom rules also attracted majority15 (71.43%) of the respondents who were in agreement about the adoption of this strategy. Most teachers confirmed to have effective systems in place for maintaining discipline, reinforcing the stability that learners with Specific Learning Disorders often need. Regarding the statement on reduction in disruptive behavior, 9(42.86%) remained neutral, while 8(38.10%) agreed. On the contrary 4(19.05%) disagreed. The researcher not that the results were mixed. Although progress was observed, some behaviors may persist or fluctuate depending on interventions used.

When the researcher sought the views of the respondents on the adoption of Focus and Engagement as a strategy for behavior training, the majority, 17(80.95%), were neutral. This suggests that educators find learner attention challenging to assess or maintain, possibly pointing to inconsistent engagement across tasks.

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Based on the findings, the researcher developed the following recommendations: It was essential to boost the use of visual Supports by training teachers in how to design and use cue cards, visual timetables, and anchor charts to simplify task instructions and integrate these tools in daily routines and lesson transitions. Equally, to diversify reinforcement, the researcher recommended that the teachers use both verbal and non-verbal praise, sticker charts, "student of the day" recognition, and incorporate choice-based rewards, allowing learners some autonomy. The researcher further recommended that to measure engagement, the teachers ought to use behavior charts, peer monitoring, or feedback logs to track focus and participation. More so, the teachers needed to consider integrating task-based timers, movement breaks, or gamified activities to sustain attention. The researcher recommended that, to address disruptive behavior holistically, it was essential to train teachers on early signs and triggers of behavior linked to frustration or sensory overload. It was also essential to collaborate with specialists to implement individualized behavior intervention plans (BIPs). Finally, to continue strengthening the structure, the researcher saw it necessary for the educators to reinforce classroom procedures with visual cues, routine reminders, and job charts. It was also essential to ensure transitions between tasks are predictable and low-stress.

Various views were collected and analyzed to generate deeper meaning from the raw data. A correlation analysis was conducted using the data collected on behavior training to understand how closely responses to different statements related to one another. For example, this helped to understand whether teachers who strongly agree with one strategy also tend to agree with another. Since the data were in ordinal format (scale of 1 to 5), the responses were treated as numerical scores, and Pearson correlation coefficients between the items were computed as summarized in Table 4.9. Pearson correlation coefficient values range from +1.0, which represents perfect positive correlation, to -1.0, representing perfect negative correlation, while 0 represents no correlation.

Table 4.9: behavior training strategies to support Grade 3 learners with Specific Learning Disorders (Correlation Matrix)

Statement	Routine	Cue	Reinforcement	Rules	Reduced	Learner

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		Cards			Disruption	Focus
Structured Routines	1.00	0.27	0.65	0.63	0.49	0.30
Cue Cards / Visual Schedules	0.27	1.00	0.13	0.21	0.19	–0.28
Positive Reinforcement	0.65	0.13	1.00	0.51	0.45	0.42
Classroom Rules	0.63	0.21	0.51	1.00	0.59	0.31
Reduced Disruptive Behavior	0.49	0.19	0.45	0.59	1.00	0.49
Learners Stay Focused and Engaged	0.30	–0.28	0.42	0.31	0.49	1.00

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It was evident from the correlation analysis that structured routines have strong positive correlations with positive reinforcement (0.65), and classroom rules (0.63). This pointed to the fact that teachers using routines also relied on praise and consistent rules. More so, cue cards / visual schedules were found to have weak or no correlation, and slightly negative with learner focus (–0.28). This may reflect low usage or inconsistent effectiveness. Further analysis revealed that disruptive behavior reduction correlates moderately with rules (0.59), reinforcement (0.45), and learner engagement (0.49). This indicates that behavior improves most when positive structure and engagement strategies are applied. Finally, it came out fairly clear that learner focus connects with reinforcement and reduced disruption, though not strongly with structured routines or cue cards. In conclusion, it came out that the views collected painted a clear picture that structured environments with positive reinforcement and clear rules are strongly associated with better behavior and focus on learners with Specific Learning Disorders. However, less correlation was established for visual aids, which, according to the researcher, might require further research.

4.9. Follow-Up Support

The respondents were asked to rate various statements in relation to follow-up support on learners with Specific Learning Disorders. Diverse views were gathered as summarized in Table 4.10 below.

Table 4.10: Follow-Up Strategies

Statement	Strongly Disagree	Disagree	Neutral	Agree	Strongly Agree
Regular follow-up for struggling learners	0(0.00%)	1(4.76%)	2(9.52%)	9(42.86%)	9(42.86%)
Individual feedback to learners	0(0.00%)	1(4.76%)	1(4.76%)	10(47.62%)	9(42.86%)
Follow-ups align with classroom instruction	0(0.00%)	1(4.76%)	2(9.52%)	15(71.43%)	3(14.29%)
Discussing progress with parents or guardians	0(0.00%)	0(0.00%)	3(14.29%)	16(76.19%)	2(9.52%)
Observed academic improvements due to follow-ups	0(0.00%)	0(0.00%)	2(9.52%)	15(71.43%)	3(14.29%)

The researcher arrived at the interpretation of findings in Table 4.10 as given below regarding the rating of the different statements on follow-up strategies. The respondents confirmed the existence of high engagement in follow-ups by the teachers. This was evident from a combined 18(85.72%) of respondents who either agree or strongly agree that they regularly follow up with struggling learners. This pointed to a strong commitment to individualized support. Regarding individual feedback, it was evident that the teachers took it as a Priority. Matching trends from follow-up practices, educators also overwhelmingly agreed that personalized feedback played a key role, as confirmed by 19 (90.48%) of the respondents who either agreed or strongly agreed. This is in line with Rosário et al. (2015)'s arguments that follow-ups are quite recommended as these strategies have a positive impact on the performance of the learners with Specific Learning Disorders.

Regarding instructional consistency, 15 (71.43%) agreed that follow-up activities aligned with what was taught, ensuring that learners built on prior knowledge—an important component of effective remediation. The idea was also supported by 3(14.29%) who strongly agreed. The

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responses on family involvement confirmed that this strategy was highly valued. It was evident that over 85% of teachers engaged parents or guardians in monitoring progress. This reflects a holistic support approach involving home-school collaboration. Academic improvements were observed, as confirmed by more than half of the respondents. There was clear evidence that educators/ teachers were not just following up but seeing results—over 85% agreed or strongly agreed that learners improved academically with sustained support. Based on the findings, the researcher made some recommendations.

It was essential to formalize follow-up structures by creating simple tracking templates or digital logs to monitor which learners receive follow-ups and how frequently. More so, it was important to use regular "check-in check-out" routines at the end of lessons for learners with Specific Learning Disorders. The researcher saw it necessary to strengthen feedback delivery. Following this, it was important to deliver feedback in formats that matched learners' strengths, such as verbal for auditory learners, visual symbols for others. It was also recommended that the teachers should keep feedback positive, specific, and focused on effort and improvement rather than correctness alone.

When aligning activities with class content, teachers ought to ensure that all follow-up tasks review key concepts from regular lessons, with reduced complexity or guided scaffolding. Also, introduce multi-modal supports like images, manipulatives, or word banks to reinforce understanding. There should be deepened parent collaboration. The educators to set up monthly mini-reports or brief meetings to share progress in simple terms. They should also encourage parents to practice home strategies aligned with classroom goals—such as shared reading or math games. The educators/teachers ought to evaluate the effectiveness by using simple pre-and post-follow-up activities to track progress and adjust interventions accordingly. Also, they should share best practices across classrooms to identify strategies that consistently show academic gains.

The respondents were asked to rate the statements in Table 4.10 to explore how they supported Grade 3 learners with Specific Learning Disorders (SLDs) through follow-up activities. Diverse

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opinions were gathered, and correlation analysis was conducted for a better understanding of the data patterns.

4.9. Academic Performance of Learners with Specific Learning Disorders

The respondents were asked to give their level of agreement with the statements in Table 4.12 regarding the academic performance of Grade 3 learners with Specific Learning Disorders (SLDs) in Homa-Bay County. Diverse opinions were gathered and their counts summarized as reflected in the table above. To make the data collected more meaningful, statistical measures such as mean and percentages were generated as presented in Table 4.9 below.

Table 4.12: Academic performance of Grade 3 learners with Specific Learning Disorders

Statement	Strongly Disagree	Disagree	Neutral	Agree	Strongly Agree
Subject test scores have improved	1(4.76%	1(4.76%)	2(9.52%)	14(66.67%)	3(14.29%)
Literacy and numeracy skills are improving	1(4.76%)	1(4.76%)	3(14.29%)	15(71.43%)	1(4.76%)
Assignment completion has increased	0(0.00%)	2(9.52%)	4(19.05%)	14(66.67%)	1(4.76%)
Report card grades have improved	0(0.00%)	1(4.76%)	3(14.29%)	16(76.19%)	1(4.76%)
Support has positively impacted performance	0(0.00%)	1(4.76%)	1(4.76%)	18(85.71%)	1(4.76%)

The findings pointed to strong signs of academic progress. Responses to most statements show over 70% agreement or strong agreement, suggesting that support strategies for learners with Specific Learning Disorders were yielding visible improvements. For test scores and assignment completion, the highest agreement rates were around 66.67%. This reflects direct academic gains and increased participation. Responses regarding literacy and numeracy skills revealed diverse trends. Although 71.43% agree, 14.29% are neutral—possibly due to skill variability or differences in how progress is measured. The responses on report card grades showed positive trends. With 76.19% agreement, formal grading reflects improvement—support strategies appear to be influencing mastery of the curriculum. The responses on the overall impact of support

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pointed to highly positive agreement. This had the strongest agreement at 85.71%—clear evidence that interventions are making a real difference in learner performance.

Recommendations for strengthening academic Support included the following. It is essential to expand targeted literacy and numeracy interventions by providing leveled reading materials, adaptive math programs, and peer tutoring. The teachers should monitor individual progress using mini-assessments tailored to learner needs. On how to reinforce assignment structures teachers need to use visual aids, reminders, and checklists to make assignments more accessible. They should break tasks into smaller, achievable steps with frequent feedback. The teachers should continue to track and reflect on grades. They should use report cards and progress portfolios to review learner growth over time and invite learners to self-assess or reflect on their learning journey. On how to maintain and scale support systems, the researcher recommended that the teachers should keep successful strategies active and replicate across classrooms. Finally, the teachers should encourage collaboration between general and special educators to share best practices.

The respondents were asked to give their level of agreement with the statements in Table 4.12 regarding the academic performance of Grade 3 learners with Specific Learning Disorders (SLDs) in Homa-Bay County. Diverse opinions were gathered and their counts summarized as reflected the table above. To make the data collected more meaningful, statistical measures such as mean, variance, and standard deviation were applied to the same data set, as presented in the statistical summary table below.

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Table 4.12(a) Statistical Summary of Academic performance of Grade 3 learners with Specific Learning Disorders

Statement	Mean	Variance	Std. Deviation	Interpretation
Subject test scores improved	3.86	0.78	0.88	High agreement, slight diversity in responses
Literacy & numeracy improving	3.76	0.64	0.80	Solid agreement with tight clustering
Assignment	3.76	0.66	0.81	Consistent perception of

completion increased				positive progress
Report card grades improved	3.81	0.57	0.76	Majority agree, lower variation
Support positively impacted performance	4.00	0.45	0.67	Strongest agreement and most consistent responses

The analysis showed that all mean values were above 3.75. This suggested that teachers generally agreed that academic progress was happening in key areas. On the other hand, the lowest standard deviation (0.67) was for the statement about support positively impacting performance. This means nearly everyone agreed which was a great indicator of consensus. The Variance of these data sets shows how tightly responses were clustered around the mean. The lower it is, the more aligned participants are in their views. The data showed that Educators were broadly optimistic about the effects of support strategies for Grade 3 learners with Specific Learning Disorders — particularly regarding overall impact and improvements in academic areas such as test scores, assignments, and grades. The most unified sentiment was that the respondents felt support systems were working.

4.10. The school environment and how it supports learners with Specific Learning Disorders (SLDs)

The respondents were asked various questions on how this moderating variable (school environment) supports learners with Specific Learning Disorders. The respondents were first asked to describe the level of support for inclusive learning at their respective schools. The following responses were gathered as summarized in Table 4.13 below.

Table 4.13: How the school environment supports learners with Specific Learning Disorders

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Statement	Frequency (f_i)
Very supportive	2
Somewhat supportive	5
Neutral	11
Slightly supportive	2
Not supportive	1

Variance for the data set was calculated to measure how spread out the responses were from the mean, as this would help in understanding the influence of this moderating variable on the support of learners with Specific Learning Disorders. Therefore, the variance for the responses provided was ≈ 1.43 with a standard deviation of ≈ 1.20. The mean was 4.0, which reflects general positivity toward support and inclusive learning. The standard deviation of 3.20 indicates some diversity in responses—though most lean towards supportive; there was a modest spread toward more neutral or unsupportive views. It is worth noting that the school environment has a slightly positive bearing on the learners with Specific Learning Disorders. These findings are in line with the concepts of Bronfenbrenner's theory on interconnections between environments (home ↔ school, peers ↔ family), which help shape the child's development as noted by Sadownik (2023) and Viola et al. (2021). According to these authors, the microsystem highlights direct relationships**,** while the mesosystem emphasizes the interplay between them, showing that development depends not only on individual contexts but also on how those contexts connect.

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Table 4.14: Kind of training received on supporting learners with Specific Learning Disorders

	Formal in-service training	Occasional workshops	Peer-to-peer learning	Personal reading	No training at all

				only	
Count	2(9.52%)	6(28.57%)	5(23.81%)	4(19.05%)	4(19.05%)

The respondents were further asked to specify any kind of training they had received. The responses gathered were summarized in Table 4.14 below, with statistical measures generated to provide further meaning to the responses in Table 4.14a. A total of 2(9.52) of the respondents indicated that they had formal in-service training, while 6(28.57%) indicated they attended occasional workshops. Those who had peer-to-peer learning were 5 (23.81%), followed by 4 (19.05%) who confirmed they had gained knowledge only through personal reading. Finally, 4(19.05%) confirmed that they had no training at all to support learners with Specific Learning Disorders. It was evident that there are teachers with specialized training from KISE, but they are mainly employed by the private schools because of the low remuneration offered by the government.

Table 4.14a: Summary Table of Statistical Measures on the Kind of training received on supporting learners with Specific Learning Disorders

Statistic	Value	Explanation
Mean	4.2	Average count across all training types
Variance	1.76	Average squared deviation from the mean
Standard Deviation	1.33	Indicates the spread of values around the mean

The statistical measures show that responses were fairly evenly distributed, with no extreme highs or lows in training types. The small spread (STD = 1.33) suggests a more balanced experience among the teachers. The researcher was of the opinion that support for learners with Specific Learning Disabilities is not just about whether training exists, but is also about how many teachers have access to it. A balanced distribution could imply that the system is less reliant on a few well-trained individuals, and more teachers can recognize and respond to Specific Learning Disorder-related needs.

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The researcher further noted that from a planning or policy perspective, this dataset may signal progress toward more inclusive education practice. A lower standard deviation hints at a more equitable spread of training among the teachers, which could lead to more consistent support for learners with Specific Learning Disorders. It equally suggests less disparity as fewer teachers are left completely untrained, and more are receiving at least some form of preparation. Finally, the researcher was of the opinion that if training quality is also sufficient, this broader distribution could mean learners with Specific Learning Disorders are more likely to be understood and supported regardless of which teacher they work with.

Table 4.15: The school culture regarding inclusion of learners with Specific Learning Disorders

School Culture Category	Count/ percentage
Highly inclusive	2(9.52%)
Generally inclusive	10(47.62%)
Neutral	3(14.29%)
Minimally inclusive	4(19.05%)
Not inclusive	2(9.52%)

The respondents were asked for their views on the school culture regarding the inclusion of learners with Specific Learning Disorders. The diverse opinions gathered were summarized in Table 4.12 above with key statistics in Table 4.12a below for further understanding. From the responses, 2 (9.52%) confirmed that the school culture was highly inclusive, followed by 10 (47.62%) who indicated that the culture was generally inclusive. 4(19.05%) confirmed that the school culture was minimally inclusive, 3(14.29%) were neutral.

Table 4.15a: Key Statistics

Statistic	Value	Explanation

Mean	4.2	Average number of responses per category
Variance	8.16	Shows how spread out the responses are from the mean
Standard Deviation	≈ 2.86	Higher spread suggests varied perspectives on school inclusion

The statistical measures generated added some meaning to the data. For example, the most common response, "Generally inclusive," possibly indicated that many participants felt there was a positive effort toward inclusion. However, responses also showed a range, from high inclusiveness to minimal and even no inclusiveness, which was reflected in the higher standard deviation. This variation implies that while inclusion is promoted, it may not be consistently practiced across the school or among staff. The researcher further noted that this culture in the schools that participated in the study might indicate a mixed school culture, in which some teachers strongly embrace inclusion, while others may lack the same commitment or resources. Further still, the presence of "Minimally inclusive" and "Not inclusive" responses suggests that some learners with Specific Learning Disorders still face barriers. This, therefore, highlights the need for targeted awareness initiatives, uniform training across all staff, and strong leadership to reinforce inclusive values.

Bano and Yusuf (2023) showed that students with learning disabilities perform below their peers, but outcomes vary depending on socioeconomic status, gender, and school type. This mirrors the inclusivity findings in this study, where responses ranged from "Generally inclusive" to "Not inclusive," reflecting uneven practices across schools and staff. Both highlight that disability outcomes are shaped by broader contexts—resources, culture, and institutional commitment—and both call for systemic interventions such as uniform training, strong leadership, and context-sensitive support to ensure equity.

4.11 Discussion of Interview Responses

When the respondents were asked to indicate how common diagnosed cases of Specific Learning Disorders among early primary learners in their area were, they indicated that prevalence of SLDs diagnosed cases of Specific Learning Disorders were not very widespread, mainly because formal assessments are limited. However, teachers often observed signs of dyslexia, dyscalculia,

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and dysgraphia informally in Grade 3 learners. This is consistent with MOE (2021), which estimates that 10–15% of Kenyan school-going children may have learning disorders, yet less than 2% are formally identified or supported. The study also highlights weak tracking systems, where documentation is manual and cases are flagged mainly through school records, inspections, or referrals — exactly as described in the findings.

Regarding county-level tracking systems, respondents indicated that there is no fully developed digital system. One respondent noted that "*documentation is mostly done through school records and reports submitted to the Sub-County Education Office*". *Cases are flagged during routine inspections or through referrals.*

Respondents noted that teacher training on Specific Learning Disorders is minimal, and that Continuous Professional Development (CPD) only occasionally covers psychosocial support. This is supported by the study's literature review, which shows that teacher training colleges emphasize general inclusive education but provide little depth on SLDs (MOE, 2021). Similarly, professional development programs are limited and inconsistent, often delivered sporadically by NGOs or county initiatives. The study confirms that workshops on empathy, praise, and confidence-building are not standardized across schools (MOE, 2021).

The responses confirmed that behavioral programs are improvised by teachers and not formally supported by the county, while disruptive behaviors are managed through peer support and counseling. By contrast, García-Redondo et al. (2019) showed that structured behavioral training using game-based interventions significantly improved attention and concentration among learners with SLDs and ADHD in Spain. This highlights the potential of systematic behavioral programs to enhance learning, though Kenya's context remains constrained by limited resources and a lack of formal support. Further, the responses indicated that in schools with limited resources, disruptive behaviors were typically addressed through peer support, teacher-led counseling, and, at times, disciplinary measures. The absence of trained special needs staff makes effective management more difficult.

The responses indicated that teachers manage disruptive behaviors through peer support and counseling, but lack structured county-supported programs. Dean (2019), in Cape Town, tested

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the ICT-based *Virtual Reading Gym* and found gains in reading rate, yet the intervention lacked behavioral training frameworks and teacher involvement. Compared to Dean's study, the Kenyan findings highlight the reliance on informal strategies and the need for structured, theory-driven behavioral programs integrated into school practice.

The findings showed that in Karachuonyo North Sub-County, follow-up is mainly teacher-led through remedial lessons, with little sustained psychological support, and continuity often breaks down due to a lack of formal systems. This aligns with Rosário et al. (2015), who found that consistent teacher follow-up practices such as oral checking, board checking, and grading significantly improved student performance in Portugal. While the Kenyan context shows gaps in structured continuity, both sets of findings emphasize that effective teacher-led follow-up is critical for supporting learners with Specific Learning Disorders and improving academic outcomes. While Oduor et al. (2024) found that parent–teacher collaboration in Migori County significantly boosted outcomes for learners with learning disorders. Together, these studies highlight that both teacher monitoring and cooperative support are critical, reinforcing the need for structured follow-up and stronger parental involvement in the Kenyan context.

The findings showed that progress among these learners was measured through literacy and numeracy tests, but learners with SLDs are not tracked separately, relying instead on classroom performance and exam scores. Rosário et al. (2015) showed that consistent teacher follow-up improved student outcomes, while Oduor et al. (2024) emphasized parent–teacher collaboration as key to academic success. Compared with these studies, the Kenyan context highlights a gap in individualized tracking systems, underscoring the need for structured, inclusive progress indicators for learners with SLDs.

The findings confirm that psychosocial interventions like reassurance improve confidence, but academic gains remain inconsistent, hindered by poor follow-up, limited infrastructure, and stigma. Goegan et al. (2024) similarly stressed teacher reassurance as vital for resilience in Canada, while noting gaps in diversity and mental health. Bano and Yusuf (2023) found that demographic factors—such as socioeconomic status, gender, and school type—shaped outcomes for Pakistani learners with disabilities. Together, these studies reinforce that psychosocial

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support matters, but effective interventions must also address structural gaps and demographic realities.

The key informants made the following recommendations. To strengthen support for learners with Specific Learning Disorders, several measures are essential. First, scaling up teacher training will equip educators with the skills to identify and address diverse learning needs. Second, introducing county-level tracking systems can ensure consistent monitoring of learner progress. Third, establishing resource centers staffed with trained specialists will provide targeted interventions and guidance. Fourth, psychosocial support should be reinforced through structured programs that build confidence and participation. Finally, promoting an inclusive school culture is critical to reducing stigma and fostering acceptance, thereby creating environments where all learners can thrive.

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CHAPTER FIVE: SUMMARY OF THE FINDINGS, CONCLUSSION AND RECOMMENDATIONS

5.1. Introduction

The main aim of this study was to explore the role of psychological interventions in the academic performance of learners with Specific Learning Disorders in Karachuonyo North Sub-County, Homa Bay County, Kenya. The findings of this study, which are discussed in chapter four, are further summarized in this chapter, and the discussion is done in line with the study objectives. Also, the conclusions, recommendations, and areas noted for further study are also indicated in this chapter

5.2. Summary of the findings

5.2.1. Prevalence of learning disorders among Grade 3learners

The study found strong teacher agreement that SLDs are present among Grade 3 learners in Homa-Bay County. Dyslexia was most frequently observed, with over two-thirds of teachers reporting cases, while dyscalculia and dysgraphia were also noted, though with slightly less certainty, as reflected in Table 4.4 on page 56. Many learners were seen to struggle with basic reading, writing, and numeracy, reinforcing the presence of functional academic challenges.

Importantly, more than three-quarters of teachers suspected undiagnosed SLDs in their classrooms, highlighting a significant gap between observation and formal diagnosis, as shown in Table 4.5 on page 59. These findings align with global prevalence estimates and national surveys, underscoring the urgent need for improved screening, early identification, and targeted interventions.

5.2.2. Teacher Reassurance

The study found that teachers consistently used reassurance strategies to support learners with Specific Learning Disorders. Most respondents agreed or strongly agreed that they encouraged, praised, and built trust with learners, actively addressing anxiety and incorporating affirming practices into their teaching, as summarized in Table 4.6, on page 59, and Table 4.7 on page 62. The strongest consensus was for individualized emotional check-ins, reflecting a deep commitment to learner well-being. While encouragement and praise were widely practiced, variation was noted in adapting tone and feedback, suggesting this area requires further training.

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Overall, the findings highlight high levels of empathy, proactive support, and relationship-building by teachers, confirming that reassurance is a recognized and effective strategy. Recommendations included formalizing supportive practices through frameworks or handbooks, integrating reassurance into lesson plans, enhancing professional development in emotional intelligence, and fostering peer support systems. Collaboration with specialists and encouraging student voice were also emphasized to ensure reassurance strategies align with individual needs. These results reinforce the importance of psychosocial interventions and supportive environments in improving confidence, participation, and academic resilience among learners with SLDs.

5.2.3. Follow-up Support

The study revealed strong teacher commitment to follow-up strategies for struggling learners. Over 85% of respondents confirmed they regularly conducted follow-ups and provided individualized feedback, underscoring the importance of personalized support. Teachers also emphasized aligning follow-up activities with classroom instruction to ensure continuity of learning. Family involvement was highly valued, with more than three-quarters of teachers engaging parents or guardians in monitoring progress. Importantly, most respondents observed academic improvements linked to sustained follow-up, highlighting its effectiveness as summarized in Table 4.10, on page 66.

Despite these strengths, the study noted the absence of formalized structures to guide and document follow-up practices. Recommendations included developing tracking templates or digital logs, adopting "check-in/check-out" routines, tailoring feedback to learner strengths, and deepening parent collaboration through regular reports and meetings Tables 4.12**;** 4.13, on pages 69 and 71. Overall, the findings confirm that follow-up support plays a critical role in improving confidence and academic outcomes for learners with Specific Learning Disorders, but greater systematization is needed to sustain its impact.

5.2.4. Behavior Training

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The study showed that structured routines, positive reinforcement, and consistent classroom rules were the most widely adopted and effective strategies for supporting learners with Specific Learning Disorders. Teachers confirmed that routines provided predictability, while praise and rewards encouraged desirable behavior. Classroom rules reinforced discipline and stability, though results on reducing disruptive behavior were mixed, with some learners continuing to struggle. Cue cards and visual schedules were rarely used, reflecting limited familiarity or access, and most teachers remained neutral on their effectiveness. Similarly, maintaining focus and engagement was identified as a challenge, with responses showing uncertainty in how best to sustain attention, as in Table 4.8, page 63.

Correlation analysis revealed strong links between structured routines, reinforcement, and rules, confirming that these strategies work best in combination. Moderate correlations were also observed among reduced disruption, reinforcement, and learner engagement, suggesting that positive structure improves classroom behavior, as shown in Table 4.9 on page 65. However, weak or negative correlations for visual aids highlighted the need for further exploration of their role.

Overall, the findings emphasize that structured environments, clear rules, and positive reinforcement are central to effective behavior training for learners with SLDs seen. Recommendations included boosting teacher training on visual supports, diversifying reinforcement methods, using behavior charts and gamified activities to sustain focus, and collaborating with specialists to design individualized behavior intervention plans.

5.3. Conclusions of the Study

The study confirmed that Specific Learning Disorders (SLDs) such as dyslexia, dyscalculia, and dysgraphia are present among Grade 3 learners in Homa-Bay County. Teachers observed widespread struggles in literacy and numeracy, and more than three-quarters suspected undiagnosed cases. This highlights a significant gap between classroom observation and formal diagnosis, underscoring the need for systematic screening and early intervention.

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Teachers consistently applied reassurance strategies, including encouragement, praise, trust-building, and individualized emotional support. These practices fostered confidence and reduced anxiety among learners. However, variation in how tone and feedback are adapted suggests that, while reassurance is widely practiced, it requires further professional development to ensure consistency.

Teachers demonstrated strong commitment to follow-up, with most providing individualized feedback, aligning activities with classroom instruction, and involving parents. These efforts were linked to observable academic improvements. Nonetheless, the absence of formalized structures for tracking and documenting follow-ups limits sustainability and consistency across schools.

Structured routines, positive reinforcement, and consistent classroom rules emerged as the most effective strategies for managing behavior among learners with SLDs. These approaches were strongly correlated with reduced disruption and improved engagement. However, limited use of visual aids and challenges in sustaining learner focus point to gaps in resources and training were noted.

5.4. Recommendations of the Study

There is an urgent need to establish county-level screening programs, in collaboration with the Ministry of Education and health professionals, to ensure the early identification of learners with Specific Learning Disorders (SLDs). Teachers should be trained to recognize early warning signs of dyslexia, dyscalculia, and dysgraphia, and clear referral pathways must be created for professional assessment. Standardized diagnostic tools should be introduced across schools to guarantee consistency in identifying and categorizing learning disorders. In addition, partnerships with local universities and research institutions should be fostered to develop longitudinal studies that track prevalence, interventions, and long-term outcomes of SLDs, thereby informing evidence-based policy and practice.

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Continuous professional development programs must be scaled up to focus on inclusive pedagogy, emotional intelligence, and differentiated instruction. Specialized modules should be developed on reassurance strategies, tone adaptation, and psychosocial support tailored to learners with SLDs. Mentorship programs should be encouraged, where experienced teachers guide newer colleagues in implementing inclusive practices. Training should also integrate assistive technologies, visual aids, and adaptive learning materials to broaden instructional approaches. Collaboration with the Kenya Institute of Special Education (KISE) is essential to expand training opportunities and ensure that specialists are deployed in public schools, not just private institutions.

Follow-up support must be systematized through standardized tracking templates or digital logs to monitor the frequency and effectiveness of interventions. Schools should institutionalize "check-in/check-out" routines at the end of lessons to reinforce learning and provide immediate feedback. Feedback delivery should be tailored to learner strengths—verbal for auditory learners, visual symbols for visual learners, and simplified formats for those with processing difficulties. Parent–teacher collaboration should be strengthened through monthly progress reports, structured meetings, and home-based learning strategies that align with classroom goals. School-level committees should be established to oversee follow-up practices, ensuring accountability, consistency, and sustainability across classrooms.

Teacher training should be expanded to include the effective use of visual supports such as cue cards, timetables, and anchor charts to simplify instructions and enhance predictability. Reinforcement methods should be diversified by incorporating verbal praise, sticker charts, recognition programs, and gamified activities to sustain learner motivation. Behavior charts, peer monitoring systems, and feedback logs should be introduced to track focus and participation. Teachers should be trained to identify early signs of frustration or sensory overload and implement individualized Behavior Intervention Plans (BIPs). Collaboration with psychologists and special education specialists is necessary to design holistic frameworks tailored to learners with SLDs. Schools should also ensure that classroom transitions are predictable and low-stress by reinforcing routines with visual cues and structured reminders.

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Inclusive education must be promoted by establishing resource centers within schools, equipped with trained staff and specialized materials to support learners with SLDs. Awareness campaigns targeting teachers, parents, and learners should be conducted to reduce stigma and foster acceptance of diverse learning needs. Student voice should be encouraged by creating platforms such as journals, surveys, and art projects that allow learners with SLDs to express their experiences and needs. Peer support systems should be nurtured to enable teachers to share best practices and learners to collaborate in inclusive classroom activities. Inclusive education principles must be integrated into school policies to ensure leadership commitment to equity and diversity. Finally, advocacy for increased government funding is critical to supporting infrastructure development, teacher training, and the provision of resources for inclusive education.

Future research should investigate the long-term effects of reassurance, follow-up, and behavior-training strategies on both the academic achievement and the psychosocial development of learners with Specific Learning Disorders.

Studies should explore how socioeconomic background, school type, and cultural attitudes influence the identification, support, and outcomes of learners with SLDs, to design more context-sensitive interventions.

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APPENDICES

Appendix I: Teacher Consent Form

Title of Study: *Effects of Psychosocial Support Interventions on the Academic Performance of Grade 3 Learners with Learning Disorders in Homa Bay County, Kenya*

Principal Investigator: NOVEMBER G

Consent to Participate in Research
You are invited to participate in a research study to understand how psychosocial support interventions affect the academic performance of Grade 3 learners with Specific Learning Disorders (SLDs) in Homa Bay County. Your participation as a teacher is very important because it will help us better support learners who face challenges in reading, writing, or math. Before you agree to participate, please read the information below carefully.

Purpose of the Study
The study aims to explore the prevalence of Specific Learning Disorders, the effects of teacher reassurance, behavior training, and follow-up practices on learners' academic outcomes, and the ways in which the school and home environments moderate these effects.

What Participation Involves
- You will be asked to fill out a questionnaire that includes multiple-choice and rating-scale questions about your teaching practices, experiences with learners with Specific Learning Disorders, and your observations of their academic performance.
- Completing the questionnaire will take about 30 minutes.
- You may also be contacted for a brief follow-up conversation if clarification is needed (optional).

Voluntary Participation
- Your participation is completely voluntary.
- You may skip any question you are not comfortable answering.
- You may withdraw from the study at any point without any penalty or consequence.

Confidentiality
- All information you provide will be kept strictly confidential.
- Your name or identity will not appear in any report or publication.
- Responses will be coded and used only for academic and policy purposes.

Benefits and Risks
Benefits:
- Your input will help improve support systems for children with Specific Learning Disorders.
- It may inform teacher training and school-based interventions.

Risks:

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- There are no foreseeable risks associated with this study.

Consent Statement
By signing below, you confirm that:

- You have read and understood the information above.
- All your questions have been answered to your satisfaction.
- You voluntarily agree to participate in the study.

Teacher's Name: _____ **Signature:** _____
Date: _____

Researcher's Name: _____ **Signature:** _____
Date: _____

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Appendix II: Questionnaire for Teachers

Thank you for taking the time to participate in our study on the effects of psychosocial support interventions on the academic performance of Grade 3 learners with learning disorders in Homa Bay County, Kenya. Your valuable insights and experiences are crucial to understanding the challenges faced by students with learning disorders and their impact on academic achievement.

Your participation in this study will help identify key areas for intervention and support to enhance educational outcomes for Grade 3 learners in our community. Your responses will be kept confidential, and your honesty is greatly appreciated.

Please check (✓) the appropriate response for multiple-choice questions and provide clear answers where explanations are needed. You may skip any question you feel uncomfortable with or choose to withdraw from the study at any time. If you have any questions, please don't hesitate to ask.

Sincerely,

NOVEMBER G

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Section A: Demographic Information

No.	Question	Response Options
1	What is your age?	a. 18–23 years ☐ b. 24–29 years ☐ c. 30–34 years ☐ d. 35–39 years ☐ e. 40+ years ☐
2	What is your gender?	a. Male ☐ b. Female ☐
3	How many years of teaching experience do you have?	a. 1–4 years ☐ b. 5–9 years ☐ c. 10–14 years ☐ d. 15+ years ☐

4	What is your highest level of education completed?	a. Secondary ☐ b. College ☐ c. University ☐
5	What subject(s) do you primarily teach to Grade 3 students?	
6	How many Grade 3 students with learning disorders are currently in your class?	

SECTION 2: PREVALENCE OF SPECIFIC LEARNING DISORDERS (SLDs)

7. Please indicate your level of agreement with the following statements related to the prevalence of Specific Learning Disorders (SLDs) among Grade 3 learners. Use the scale below to guide your responses: 1 = Strongly Disagree , 2 = Disagree , 3 = Neutral , 4 = Agree , 5 = Strongly Agree. Tick (✓) your preferred choice in the appropriate column. Tick ✓ against your preferred choice

Statements	**1**	2	3	4	5
I have learners with dyslexia.					
I have learners with dyscalculia.					
I have learners with dysgraphia.					
Many of my learners struggle with basic reading, writing, or math.					
I suspect some learners have undiagnosed Specific Learning Disorders.					

SECTION 3: TEACHER REASSURANCE

8. Please indicate your level of agreement with the following statements about how you provide reassurance to learners with Specific Learning Disorders (Specific Learning Disorders). Use the scale below to guide your responses:1 = Strongly Disagree , 2 = Disagree , 3 = Neutral , 4 = Agree , 5 = Strongly Agree. Tick (✓) your preferred choice in the appropriate box.

Statements	**1**	**2**	**3**	**4**	**5**
I regularly encourage learners with Specific Learning Disorders.					
I have built trust with these learners.					

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I use praise to boost their confidence.					
I actively reassure anxious learners.					
My teaching includes affirming practices.					
I check in with learners individually to offer emotional support.					
I adapt my tone and feedback to reduce stress in struggling learners.					

9. In your own observation, how has teacher reassurance influenced the academic performance of learners with Specific Learning Disorders (Specific Learning Disorders)?

.....
.....
.....
.....
.....

SECTION 4: BEHAVIOR TRAINING

10. This section focuses on how you apply behavior training strategies to support Grade 3 learners with Specific Learning Disorders (SLDs). Please indicate your level of agreement with the following statements based on your teaching experience. Use this scale to guide your responses: 1 = Strongly Disagree , 2 = Disagree , 3 = Neutral , 4 = Agree , 5 = Strongly Agree. Tick (✓) the box that best reflects your experience.

Statements	**1**	**2**	**3**	**4**	**5**
I use structured routines to guide learners with Specific Learning Disorders					
I use tools like cue cards or visual schedules during lessons.					
I apply positive reinforcement (e.g., praise, rewards) to encourage behavior					
I have set classroom rules that are consistently followed by learners					
Disruptive behavior among learners with Specific Learning Disorders has reduced over time					
Learners with Specific Learning Disorders stay more focused and engaged during tasks					

SECTION 5: FOLLOW-UP SUPPORT

11. The following statements explore how you support Grade 3 learners with Specific Learning Disorders (SLDs) through follow-up activities. Think about your usual

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classroom practices and indicate how much you agree or disagree with each statement. Use this scale to guide your responses: 1 = Strongly Disagree 2 = Disagree 3 = Neutral 4 = Agree 5 = Strongly Agree. Tick (✓) the box that best reflects your experience.

Statements	1	2	3	4	5
I provide regular follow-up for struggling learners.					
I give individual feedback to learners.					
My follow-ups align with what was taught in class.					
I discuss learner progress with parents or guardians					
I have observed academic improvements as a result of follow-ups.					

SECTION 6: ACADEMIC PERFORMANCE OF LEARNERS WITH Specific Learning Disorders

12. Please indicate your level of agreement with the following statements regarding the academic performance of Grade 3 learners with Specific Learning Disorders (SLDs). Use the scale below to guide your responses:1 = Strongly Disagree 2 = Disagree 3 = Neutral 4 = Agree 5 = Strongly Agree. Tick (✓) your preferred choice in the appropriate column.

Statements	1	2	3	4	5
Subject test scores have improved.					
Literacy and numeracy skills are improving.					
Assignment completion has increased.					
Report card grades have improved.					
Overall, support has positively impacted performance.					

SECTION 7: MODERATING VARIABLE

13. Please answer the following questions about the school environment and how it supports learners with Specific Learning Disorders (SLDs):

No.	Question	Response Options
a	How would you describe the level of support for inclusive learning at your school?	a. Very supportive ☐ b. Somewhat supportive ☐ c. Neutral ☐ d. Slightly supportive ☐ e. Not supportive ☐
b	What kind of training have you received on supporting learners	a. Formal in-service training ☐

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	with Specific Learning Disorders?	b. Occasional workshops ☐ c. Peer-to-peer learning ☐ d. Personal reading only ☐ e. No training at all ☐
c	How would you describe the school culture regarding inclusion of learners with Specific Learning Disorders?	a. Highly inclusive ☐ b. Generally inclusive ☐ c. Neutral ☐ d. Minimally inclusive ☐ e. Not inclusive ☐

14. Please answer the following questions about the school environment and how it supports learners with Specific Learning Disorders (SLDs):

No.	Question	Response Options
a	How actively do parents support their children's learning at home?	a. Very actively ☐ b. Actively ☐ c. Occasionally ☐ d. Rarely. ☐ e. Not at all ☐
b	How often do parents follow up on your academic or behavioral feedback?	a. Always ☐ b. Often ☐ c. Sometimes. ☐ d. Rarely ☐ e. Never ☐
c	How would you describe the overall family environment of learners with Specific Learning Disorders?	a. Very supportive and stable ☐ b. Generally stable ☐ c. Mixed or inconsistent ☐ d. Somewhat unstable ☐ e. Highly unstable ☐

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Appendix III: Scoring Rubric for Dyslexia, Dysgraphia, and Dyscalculia

Dyslexia Screening Rubric

Criteria	Level 1 (Low)	Level 2 (Moderate)	Level 3 (High)	Level 4 (Very High)
Phonemic Awareness	Struggles with basic phoneme tasks	Inconsistent phoneme task performance	Accurate with simple phoneme tasks	Excels in all phoneme tasks
Word Reading	Struggles to read age-appropriate words	Reads simple words with errors	Reads most words with some errors	Reads age-appropriate words fluently
Reading Comprehension	Poor comprehension of simple passages	Partial understanding, frequent errors	Understands most passages, some errors	Excellent comprehension
Parent/Teacher Observations	Regular difficulties with reading tasks	Occasional difficulties	Minor difficulties	No reported difficulties

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Dysgraphia Screening Rubric

Criteria	Level 1 (Low)	Level 2 (Moderate)	Level 3 (High)	Level 4 (Very High)
Fine Motor Skills	Significant struggles with fine motor tasks	Some struggles	Mostly proficient, minor errors	Highly proficient in fine motor tasks
Handwriting Legibility	Illegible handwriting	Mostly illegible with some legible words	Generally legible, minor errors	Highly legible handwriting
Writing Sample Analysis	Frequent spelling, grammar errors, incoherent writing	Some errors, inconsistent coherence	Generally correct, minor errors	Excellent spelling, grammar, and coherence
Parent/Teacher Observations	Regular difficulties with writing tasks	Occasional difficulties	Minor difficulties	No reported difficulties

Dyscalculia Screening Rubric

Criteria	Level 1 (Low)	Level 2 (Moderate)	Level 3 (High)	Level 4 (Very High)
Number Sense	Cannot understand basic number concepts	Inconsistent understanding	Generally understands, some errors	Strong understanding of number concepts
Math Fluency	Frequently slow and inaccurate	Inconsistent speed and accuracy	Generally quick and accurate	Fast and highly accurate
Math Problem-Solving	Struggles with basic problems	Inconsistent problem-solving skills	Solves most problems with some errors	Excels in solving problems
Parent/Teacher Observations	Regular difficulties with math tasks	Occasional difficulties	Minor difficulties	No reported difficulties

Appendix IV: Child Learning Assessment Kit (CLAK)

Section A: Dyslexia Screening

1. Phonemic Awareness Test
   - Task: Ask the child to segment and blend phonemes in simple words.
   - Sample Item: "Can you tell me the sounds in the word 'cat'?"
2. Word Reading Test
   - Task: Have the child read a list of age-appropriate words.
   - Sample Item: Provide a list of words like "dog," "play," "school," etc.
3. Reading Comprehension Test
   - Task: Provide a short passage and ask questions about it.
   - Sample Item: "After reading the story about the picnic, what did the family bring with them?"
4. Parent/Teacher Questionnaire
   - Sample Questions: "Does your child struggle with reading aloud?" "How often does your child read at home?"

Section B: Dyscalculia Screening

1. Number Sense Test
   - Task: Assess the child's understanding of number concepts and relationships.
   - Sample Item: "What is 5 plus 3?" "Can you count backwards from 20?"
2. Math Fluency Test
   - Task: Evaluate the child's speed and accuracy with basic math facts.
   - Sample Item: "How many math problems can you solve in 1 minute?" (e.g., simple addition/subtraction)
3. Math Problem-Solving Test
   - Task: Present word problems and ask the child to solve them.
   - Sample Item: "If you have 10 apples and give 3 to a friend, how many do you have left?"
4. **Parent/Teacher Questionnaire**
   - **Sample Questions**: "Does your child find math difficult?" "How confident is your child when dealing with numbers?"

Appendix V: The Child Consent Form

Title of the Study: Exploring the Role of Psychosocial Support Interventions in Enhancing Academic Performance of Grade 3 Learners with Specific Learning Disorders (SLDs) in Homa Bay County, Kenya.

Principal Investigator and Affiliation: Catherine Atieno Okombo, St. Paul's University

Section C: Dysgraphia Screening

1. Fine Motor Skills Test
   - Task: Engage the child in activities like cutting, drawing shapes, and tracing.
   - Sample Item: "Can you draw a circle and cut it out?"
2. Handwriting Test
   - Task: Have the child write a sentence or a short paragraph.
   - Sample Item: "Write about what you did during recess."
3. Writing Sample Analysis
   - Task: Analyze a sample of the child's writing for legibility, spacing, and consistency.
   - Sample Item: Provide a standard writing prompt and evaluate the output.
4. Parent/Teacher Questionnaire
   - Sample Questions: "Does your child struggle with writing tasks?" "How legible is your child's handwriting?"

Introduction: Dear Parent/Guardian,

We are inviting your child to participate in a research study conducted by Catherine Atieno Okombo at selected schools in Homa Bay County, Kenya. The purpose of this study is to explore the role of psychosocial support

interventions in enhancing the academic performance of Grade 3 learners with Specific Learning Disorders (SLDs) in Homa Bay County, Kenya.

Informed Consent: Participation in this study is entirely voluntary. You and your child have the right to withdraw at any time without any consequences. Your child will continue to receive the same educational services regardless of your decision to participate or withdraw.

What Participation Involves: If you consent to your child's participation, they will be involved in a series of psychosocial support interventions designed to aid their learning process. These interventions include follow-ups, Teacher reassurance, etc. Your child may be asked to attend sessions during or after school hours, and their progress will be monitored and recorded.

Risks and Benefits: There are minimal risks associated with this study. However, your child may experience minor discomfort or anxiety during the interventions. The potential benefits include improved academic performance and better coping strategies for learning disorders.

Confidentiality: All information collected from your child will be kept confidential and used only for research purposes. Personal identifiers will be removed to protect your child's privacy. Data will be stored securely and only accessible to the research team.

Contact Information: If you have any questions or concerns about this study, please contact Catherine Atieno Okombo at St. Paul's University.

Child Assent: We would also like to ask your child if they are willing to participate in this study. Please review the assent form with them.

Child Assent Form

Title of the Study: Exploring the Role of Psychosocial Support Interventions in Enhancing Academic Performance of Grade 3 Learners with Specific Learning Disorders (SLDs) in Homa Bay County, Kenya.

Introduction: Hi there! My name is [Your Name], and I am doing a study to see how we can help students like you do better in school. We want to know if certain activities can make learning easier and more fun for you.

What We Will Do: If you agree to join the study, you will take part in special activities during or after school. These activities are meant to help you learn better. We will check in with you regularly to see how you are doing.

Your Choice: You can decide if you want to be part of this study. If you say yes now, you can still change your mind later. No one will be upset with you if you decide to stop.

Confidentiality: Anything you tell us will be kept private. We won't share your answers with anyone who is not part of our research team.

Your Agreement: Do you agree to join this study and try out the activities we have planned? Yes, _____No ____

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Appendix VI: Questionnaire for Grade 3 Learners with Learning Disorders

Title: *Understanding How Support Helps Us Learn Better*
Instructions (to be read aloud to the learner):

Appendix I

No.	Question	Response Options
1	Are you a boy or a girl?	a. boy ☐ b. girl ☐
2	How old are you?	a. 7 years ☐ b. 8 years ☐ c. 9 years ☐ d. 10 years or older ☐
3	Who helps you most with homework at home?	a. Parent ☐ b. Sibling ☐ c. Teacher after class ☐ d. No one ☐

SECTION B: LEARNING CHALLENGES (Prevalence of Specific Learning Disorders)

4. "Please tick (✓) the box that best shows what usually happens to you when learning. "It's short, clear, and easy for Grade 3 learners to understand.

Statement	Never	Sometimes	A lot
I find it hard to read big words.			
Numbers and counting confuse me.			
I try to write neatly but my letters are hard to read.			
I need more time to finish classwork.			
I get mixed up when reading or writing.			

SECTION C: HOW YOUR TEACHER HELPS YOU (Teacher Reassurance)

5. Tell us what your teacher does in class.

Statement	Never	Sometimes	A lot
My teacher says I'm doing well.			
My teacher helps me when I feel stuck.			
My teacher says kind words that make me feel good.			
I feel safe to ask questions in class.			

SECTION D: HOW YOUR CLASS IS ORGANIZED (Behavior Training)

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6. Choose what happens most in your class			
Statement	**No**	**Sometimes**	**Yes**
We use pictures or cards to know what to do.			
We have class rules that we follow.			
I get stars, stickers, or rewards when I do well.			
I like to do my work and stay busy.			
I talk or disturb others during lessons. *(reverse scored)*			

SECTION E: FOLLOW-UP SUPPORT

7. Choose what happens most in your class			
Statement	**No**	**Sometimes**	**Yes**
My teacher checks how I'm doing after a lesson.			
I get extra help when I don't understand something.			
My teacher talks to me about how I can improve.			

SECTION F: YOUR LEARNING (Academic Performance)

8. In your learning, what happens most often in class?" (Tick ✓ the answer that best describes your usual experience with schoolwork and class activities.)			
Statement	**Not true**	**A little true**	**Very true**
I do better in tests now.			
I read better than before.			
I finish more of my homework now.			
I get better marks in my report card.			

SECTION G: SCHOOL & HOME SUPPORT (Moderating Variables)

9. In your learning, what happens most often in class or at home that helps you do well in schoolwork? (Tick ✓ the answer that best describes your usual experience.)				
Statement	**Never**	**Sometimes**	**Often**	**Always**
My teacher helps me when I don't understand.				
I get encouragement from my teacher when I do good work.				
My family helps me with my schoolwork at home.				
I have a quiet place at home where I can do homework or study.				
My teacher talks with my parent/guardian about				

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how I am doing in school.				

Appendix VII: Interview Guides for Key Respondents

Intro Statement (To be read before beginning):
Thank you for your time. This interview explores how policies, programs, and professional interventions support learners with Specific Learning Disorders (SLDs) in Grade 3 across Karachuonyo North Sub-County. Your expertise is key to understanding the current landscape, challenges, and opportunities for improving academic outcomes for these learners.

1. How widespread are diagnosed cases of Specific Learning Disorders (e.g., dyslexia, dyscalculia, and dysgraphia) among early primary learners in your jurisdiction?
2. What systems are in place at the county level to track or document learners with suspected or confirmed Specific Learning Disorders?
3. To what extent are teachers trained to offer psychosocial reassurance and support to learners with Specific Learning Disorders? Prompt: Are there modules in teacher training colleges or CPD courses that cover this?
4. What professional development programs exist to build teacher capacity in areas such as empathy, praise, and confidence-building for learners with Specific Learning Disorders?
5. Are there county-supported behavioral programs (e.g., use of structured routines, reward systems, visual schedules) targeting learners with learning difficulties?
6. How are disruptive behaviors by learners with Specific Learning Disorders managed, especially in under-resourced schools?
7. What follow-up mechanisms are in place to ensure struggling learners, especially those with Specific Learning Disorders, receive sustained academic or psychological support?
8. How is continuity of support ensured when learners transition between grades or schools?
9. What indicators does your office use to assess the academic progress of learners with Specific Learning Disorders? Prompt: Are literacy, numeracy, and test scores tracked separately for these learners?
10. In your view, are psychosocial interventions (like reassurance and follow-up) contributing to measurable academic gains among learners with Specific Learning Disorders? Why or why not?
11. What are the gaps in infrastructure, staffing, or school culture that limit inclusion and learning support?
12. Based on your expertise, what key strategies should be scaled up or introduced to improve outcomes for Grade 3 learners with Specific Learning Disorders?

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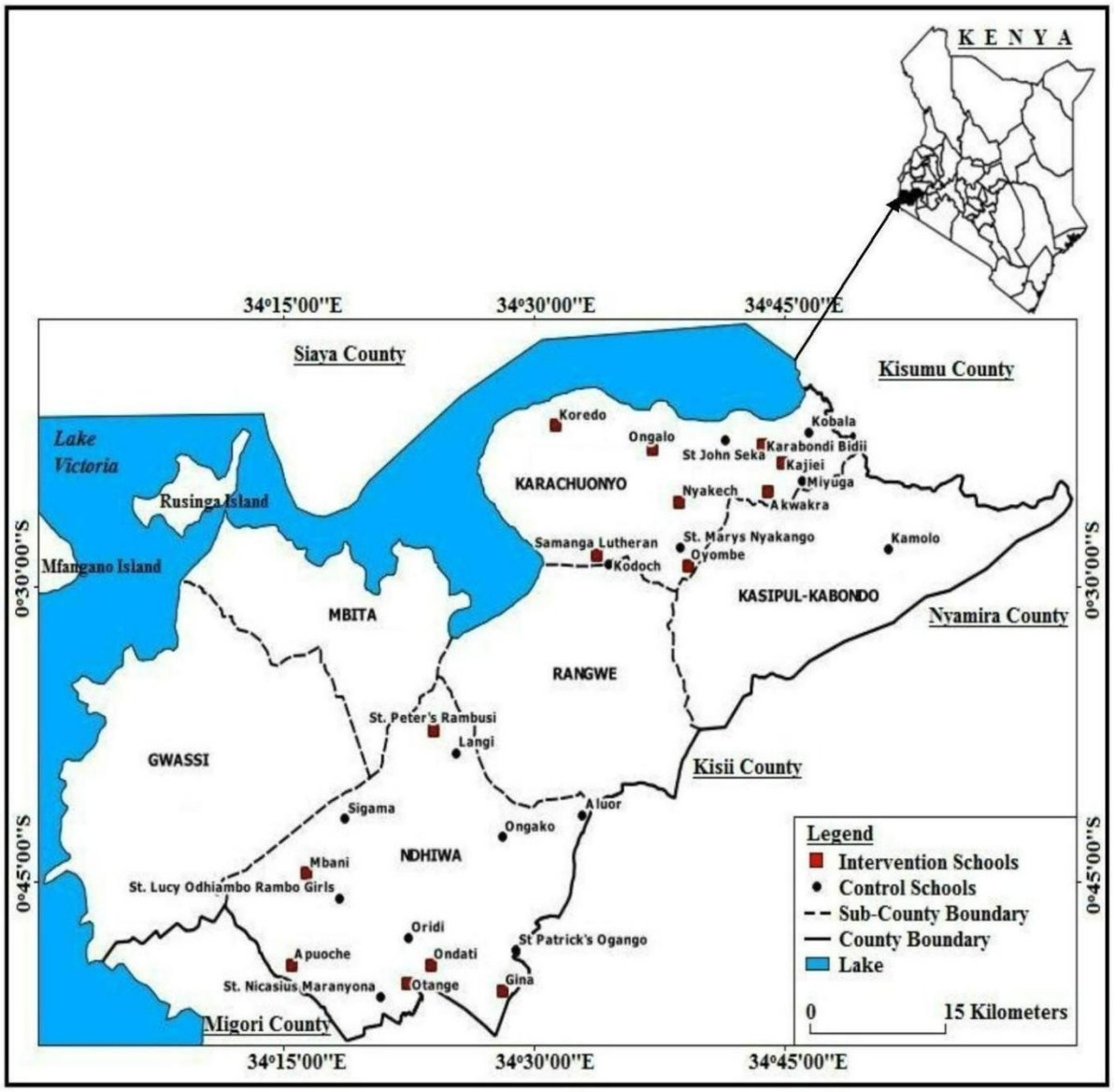
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Appendix VIII: List of Schools in North Karachuonyo Locations

1. Ayub Okoko Primary School (Public) (60)– 25 boys; 35 girls for Grade Three
2. Bware Primary School (Public)- (77) - 42 boys; 35 girls for Grade Three
3. Gendia Primary School (Public) (57) – 36 boys; 21 girls for Grade Three
4. Kanyadhiang Primary School (Public)
5. Kanyadhiang Special Unit Primary School (Public)
6. Kendu Muslim Primary School (Public)
7. Kideswa Primary School (Public)
8. Kotieno Gumba Primary School (Public)- (63) – 26 boys; 37 girls for Grade Three
9. Liera Primary School (Public)
10. Maguti Primary School (Public)
11. Makaka Primary School (Public)
12. Ngoche Primary School (Public)
13. Nyaburi Integrated Primary School (Public) – (68) – 37 boys; 31 girls for Grade Three
14. Nyangaio Primary School (Public)
15. Ogango Primary School (Public)
16. Oneno Nam Primary School (Public) - (59) - 27 boys; 32 girls for Grade Three
17. Seka Dok Primary School (Public)
18. Soko Kagwa Primary School (Public)
19. Wangadonji Primary School (Public)

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Appendix IX: Map of the Study Area



Appendix X: Postgraduate Approval Letter

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Private Bag 00217 LIMURU, KENYA
Email: office@spu.ac.ke
Website: www.spu.ac.ke

Tel Office: +254 (0) 20-2020505/10
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(0) 736 - 424440

BOARD OF POSTGRADUATE STUDIES

9th June, 2025

National Commission for Science and Technology,
P.O. BOX 30623-00100,
Nairobi.

Dear Sir/Madam,

RE: RECOMMENDATION FOR CATHERINE ATIENO OKOMBO – MACPNRB449822 TO CONDUCT RESEARCH

This letter confirms the above-named person is a student in the Master of Arts in Counselling Psychology (MACP) Program at St. Paul's University.

After completion of the course work, the student is engaged in major research work leading to a Thesis/Dissertation writing. The student's selected topic is:

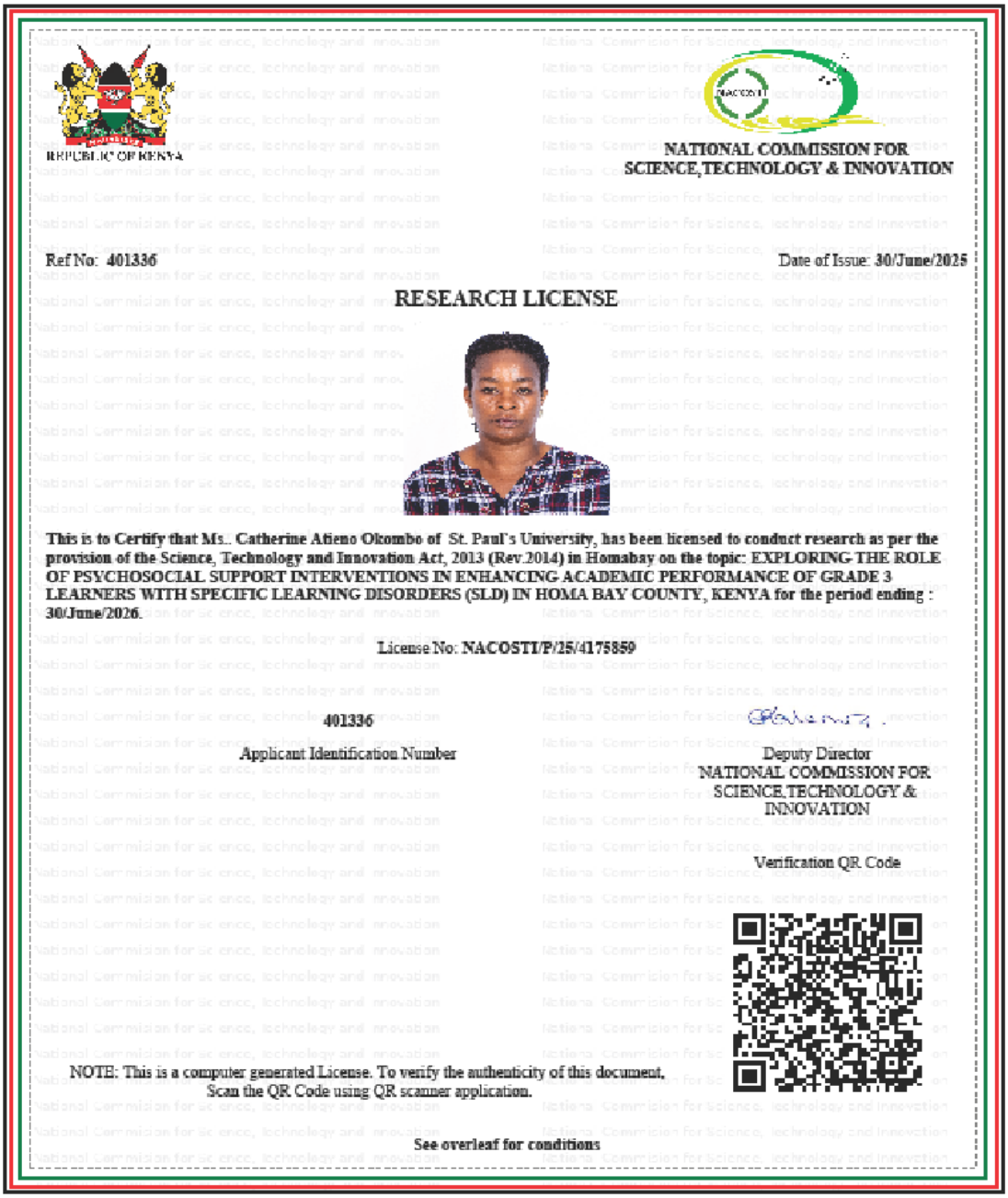
"Exploring the role of psychosocial support interventions in enhancing academic performance of Grade 3 learners with specific learning disorders (SLD) in Homa Bay County, Kenya."

Kindly grant this student the required permit.

Yours Faithfully,

Dr. John Muhoho
Director Board of Postgraduate Studies

Appendix XI: Research License



REPUBLIC OF KENYA

NATIONAL COMMISSION FOR SCIENCE,TECHNOLOGY & INNOVATION

Ref No: 401336

Date of Issue: 30/June/2025

RESEARCH LICENSE

This is to Certify that Ms.. Catherine Atieno Okombo of St. Paul's University, has been licensed to conduct research as per the provision of the Science, Technology and Innovation Act, 2013 (Rev:2014) in Homabay on the topic: EXPLORING THE ROLE OF PSYCHOSOCIAL SUPPORT INTERVENTIONS IN ENHANCING ACADEMIC PERFORMANCE OF GRADE 3 LEARNERS WITH SPECIFIC LEARNING DISORDERS (SLD) IN HOMA BAY COUNTY, KENYA for the period ending : 30/June/2026.

License No: NACOSTI/P/25/4175859

401336

Applicant Identification Number

Deputy Director
NATIONAL COMMISSION FOR SCIENCE,TECHNOLOGY & INNOVATION

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THE SCIENCE, TECHNOLOGY AND INNOVATION ACT, 2013 (Rev. 2014)
Legal Notice No. 108: The Science, Technology and Innovation (Research Licensing) Regulations, 2014

The National Commission for Science, Technology and Innovation, hereafter referred to as the Commission, was the established under the Science, Technology and Innovation Act 2013 (Revised 2014) herein after referred to as the Act. The objective of the Commission shall be to regulate and assure quality in the science, technology and innovation sector and advise the Government in matters related thereto.

CONDITIONS OF THE RESEARCH LICENSE

1. The License is granted subject to provisions of the Constitution of Kenya, the Science, Technology and Innovation Act, and other relevant laws, policies and regulations. Accordingly, the licensee shall adhere to such procedures, standards, code of ethics and guidelines as may be prescribed by regulations made under the Act, or prescribed by provisions of International treaties of which Kenya is a signatory to.
2. The research and its related activities as well as outcomes shall be beneficial to the country and shall not in any way;
    i. Endanger national security
    ii. Adversely affect the lives of Kenyans
    iii. Be in contravention of Kenya's international obligations including Biological Weapons Convention (BWC), Comprehensive Nuclear-Test-Ban Treaty Organization (CTBTO), Chemical, Biological, Radiological and Nuclear (CBRN).
    iv. Result in exploitation of intellectual property rights of communities in Kenya
    v. Adversely affect the environment
    vi. Adversely affect the rights of communities
    vii. Endanger public safety and national cohesion
    viii. Plagiarize someone else's work
3. The License is valid for the proposed research, location and specified period.
4. Neither the license nor any rights thereunder are transferable.
5. The Commission reserves the right to cancel the research at any time during the research period if in the opinion of the Commission the research is not implemented in conformity with the provisions of the Act or any other written law.
6. The Licensee shall inform the relevant County Director of Education, County Commissioner and County Governor before commencement of the research.
7. Excavation, filming, movement, and collection of specimens are subject to further necessary clearance from relevant Government Agencies.
8. The License does not give authority to transfer research materials.
9. The Commission may monitor and evaluate the licensed research project for the purpose of assessing and evaluating compliance with the conditions of the License.
10. The Licensee shall submit one hard copy, and upload a soft copy of their final report (thesis) onto a platform designated by the Commission within one year of completion of the research.
11. The Commission reserves the right to modify the conditions of the License including cancellation without prior notice.
12. Research, findings and information regarding research systems shall be stored or disseminated, utilized or applied in such a manner as may be prescribed by the Commission from time to time.
13. The Licensee shall disclose to the Commission, the relevant Institutional Scientific and Ethical Review Committee, and the relevant national agencies any inventions and discoveries that are of National strategic importance.
14. The Commission shall have powers to acquire from any person the right in, or to, any scientific innovation, invention or patent of strategic importance to the country.
15. Relevant Institutional Scientific and Ethical Review Committee shall monitor and evaluate the research periodically, and make a report of its findings to the Commission for necessary action.

National Commission for Science, Technology and Innovation(NACOSTI),
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Telephone: 020 4007000, 0713788787, 0735404245
E-mail: dg@nacosti.go.ke
Website: www.nacosti.go.ke

Appendix XII: SPU- Institutional Scientific & Ethics Review Committee Approval Letter

ST. PAUL'S UNIVERSITY

Private Bag 00217 Limuru,
Kenya
Email: office@spu.ac.ke
Website: www.spu.ac.ke

Tel Office: +254 (0) 20-2020505/10
Mobile: +254 (0) 728-669000
(0) 736-424440

REF: SPU/402/2025 **Date: 9th June 2025**

TO: Catherine Okombo
St. Paul's University

Dear Catherine,

==========

REF: Exploring the Role of Psychosocial Support Interventions in Enhancing Academic Performance of Grade 3 Learners with Specific Learning Disorders (SLD) in Homa Bay County, Kenya

==========

Greetings,

This is to inform you that SPU- Institutional Scientific Ethics Review Committee has reviewed the above-named research proposal. **Your ERB approval number is 412, for the period between 9th June 2025 – 9th June 2026 (1 year).**

This approval is subject to compliance with the following requirements;

i. Only approved documents including (informed consents, study instruments) will be used.
ii. All changes including (amendments, deviations, and violations) are submitted for review and approval by SPU- Institutional Scientific Ethics Review Committee.
iii. Death and life-threatening problems and serious adverse events or unexpected adverse events whether related or unrelated to the study must be reported to SPU- Institutional Scientific Ethics Review Committee within 72 hours of notification
iv. Any changes, anticipated or otherwise that may increase the risks or affected safety or welfare of study participants and others or affect

the integrity of the research must be reported to *SPU- Institutional Scientific Ethics Review Committee* within 72 hours

v. Clearance for export of biological specimens must be obtained from relevant institutions.

vi. Submission of a request for renewal of approval at least 60 days prior to expiry of the approval period. Attach a comprehensive progress report to support the renewal.

vii. Submission of an executive summary report within 90 days upon completion of the study to SPU- Institutional Scientific Ethics Review Committee.

viii. Should there be any publications from your research, note that you are supposed to anonymize the particulars of the respondents, the identifiers and the name of institution (s) where you collected data.

ix. **Please note that it is within the ISERC's mandate to monitor your research and to do random visits to the site.** All research is subject to post approval monitoring. Kindly provide a closure report after the research.

Prior to commencing your study, you will be expected to obtain a research license from National Commission for Science, Technology and Innovation (NACOSTI) ***https://research-portal.nacosti.go.ke*** **and also obtain other clearances needed in the country where you will collect your data from.**

Yours sincerely,



Dr. Daniel Nzengya, PhD
Chairperson
SPU- Institutional Scientific & Ethics Review Committee





Appendix XIII: Similarity Report



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