EFFECTIVENESS OF PASTORAL COUNSELLORS IN HELPING SOUTH SUDANESE DYSFUNCTIONAL FAMILIES LIVING AS REFUGEES IN NAIROBI COUNTY, KENYA

By

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DECLARATION

Declaration by the Candidate

This dissertation is a product of my own and is not a result of anything done in collaboration. It has not been previously presented to any other institution. I agree that this dissertation will be available for reference and photocopy at the discretion of the university.

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Declaration by Supervisors

This thesis has been submitted for examination with our approval as university supervisors.

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DEDICATION

To my late parents and my dear beloved, may the grace of God always rest upon your souls.

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ABBREVIATIONS AND ACRONYMS

AAPC	American Association of Pastoral Counselling
AU	African Union
BBC	British Broadcasting Centre
CPA	Comprehensive Peace Agreement
CAR	Central African Republic
DRC	Democratic Republic of Congo
FBP	Family Bereavement Programme
FGD	Focus –Group Discussion
IDP	Internally Displaced Person
IGAP	Intergovernmental Authority on Development
PSS	Psycho-Social Support
PTSD	Post-Traumatic Stress Disorder
SPLA	Sudanese People's Liberation Army
UN	United Nation
UNHCR	United Nations High Commissioner for Refugees
UNICEF	United Nations International Children's Emergency Fund

DEFINITION OF OPERATIONAL TERMS

Pastoral Counselling: This is a unique form of counselling which provides a holistic approach to healing and growth. Pastoral counsellors attempt to use spiritual resources as well as psychological understanding of the person to help clients meet life's challenges to bring about change (Magezi 2016); (Clinebell, 1984:26) added that pastoral care is the broader, including ministry of correlative healing and growth within a congregation and its community through its lifecycle. Pastoral counselling, then, as an aspect of pastoral care, is the use of a variety of healing (therapeutic) methods to help people handle their problems and crises in a developmental way. The pastor is a shepherd of the congregation." Pastoral counsellors are called and entrusted by religious communities to help people strengthen their faith in God, they are trained to listen, respond empathetically, make assessments, and provide resources for people who seek their help. "Christian modes of healing have always distinguished themselves by achieving a spiritual advance in connection with the healing process" (Hunter, 1990: 497)

American Association of pastoral counselors (AAPC, 2010) defined Pastoral counselor as "a minister who practices pastoral counseling at an advanced level which integrates religious" and pastoral counseling as "a process in which a pastoral counselor utilizes insights and principles derived from the disciplines of theology and the behavioural sciences in working with individuals, couples, families, groups and social systems toward the achievement of wholeness and health.

Dysfunctional Family: Is characterized by a breakdown of the normal beneficial relationship between members of a family (through death, separation or divorce, violence poor communication) and that children lose either or both of their dependents (Collins English Dictionary, 2012 digital edition). An example is the South Sudan crises that have left many

people dead and orphaned many children, families scattered, individual are suffering from psychological and physical problems. It is not only divorce can separate a family but even natural disaster, war and conflict. Hunt (2012) defined dysfunctional family is a family where members fail to function together in a healthy way, that may lead children to develop maladaptive behaviour or any condition that interferes with healthy functioning e.g. stressful circumstances (death in the families, no good .communication, parenting style, etc.). Every person desires a healthy functioning family with members who show love and concern to each other and depends on one another for general life needs. However, today, many families around the world lack this basic function due to both predictable and unpredictable patterns of violence, hostility, hardship, and war that are the major contributors to dysfunctional families in the world.

Armed Conflict: According to the Geneva Conventions of 1949 common article II states "all cases of declared war or of any armed conflict that may arise between two or more high contracting parties, even if the state war is not recognized. The convention shall also apply to all cases of partial or total occupation of the territory of a high contracting party even if the said occupation meets with no armed resistance."

Refugee: This is someone who has been forced to flee his or her home country because of persecution, war or violence. A refugee has a well-founded fear of persecution for reason of race, religion, nationality, political opinion or membership in a particular social group. According to UNHCR refugees are outside their country of origin because of feared persecution, conflict, violence or other circumstances that have seriously disturbed public order and who as a result require 'international protection' as they cross national borders to seek safety in nearby countries. (Example, South Sudanese dysfunctional families' refugees living in Kenya)

Internally Displaced People (IDPs): According to United Nation Guiding Principles on Internal Displacement, are "persons or groups of persons who have been forced or obliged to flee or to leave their homes or places of habitual residence, in particular as a result of order or avoiding the effect of the armed. Displacement is also when a person forced out of his/her place/home. **Civil war**: Collins English Dictionary defines civil war, is fighting between different groups of people who live in the same country (example, South Sudanese) war between parties, group.

ABSTRACT

This study sought to establish the effectiveness of pastoral counsellors in helping South Sudanese dysfunctional families living as refugees in Nairobi County, Kenya. Violent conflicts throughout the world have left millions of people compulsorily displaced in their own homes; others to neighbouring countries.Over18.4 million were living in Sub-Saharan Africa where over 6.6 million of that population were refugees. South Sudan has the highest crisis in Africa and the third largest in the world. Families are regarded as dysfunctional for been witnessed of violent acts and abuse, or unhealthy function family etc. The study based on the assumption that South Sudanese pastors/pastoral counsellors used both their psychological and theological resources to give hope and bring about positive change to these families. The counsellors themselves were influenced by different factors that determined their effectiveness. The objectives were to assess the level of professional counselling training that the pastoral counsellors have, to establish the cultural influence on the pastoral counsellors, to determine the support that the church provides for pastoral counsellors to carry out their role, and to identify the best practices used by pastoral counsellors in solving the issues of these families living in distress and psychological trauma as covered in the scope of the study. The study was guided by the social analysis theory as proposed by Holland and Henriot 1980, using a descriptive research design and both qualitative and quantitative method. The target population, were South Sudanese dysfunctional families living as refugees in Nairobi County, in Kibera, Kasarani, and the Baptist Church along Kibera Road. Purposive sampling technique was employed to select a number of 60 participants of different age groups, with different occupational and educational backgrounds. Both primary and secondary data was obtained through the use of questionnaires, interviews and focus group discussions. The study used content analysis to analyse the data collected. The study findings found out that the pastoral counsellors' were unsuccessful in helping the dysfunctional families, most of the participants suggesting that more should be done to help ease the troubles of these families. The findings also revealed that pastoral counsellors would have been effective if they had the required professional skills to help them carry out their duties confidently. The study further showed pastoral counsellors need to be supported by the church and other institutions through creating awareness and training of those interested in the profession. The study also affirmed that the best practice to solve the issues of these dysfunctional families, pastors/pastoral counsellors has to look at the needs holistically in the sense that they need to meet both psychological and physical needs of the persons. The findings recommended that this study should be given a keen consideration in order to rescue the dysfunctional families of South Sudanese living in Nairobi County. It concludes that the insights and suggestions offered to pastoral counsellors and researchers could be adopted by the church or other party interested in the implementation of pastoral counselling programmes among the dysfunctional families of South Sudanese or similar groups around the world.

CHAPTER ONE

INTRODUCTION

1.1 Introduction

This chapter discusses the background of the study, statement of the problem, research objectives and research questions. The study further discusses the significance of the study, scope and delimitation of the study.

1.2. Background of the Study

Violent conflicts throughout the world have left millions of people compulsorily displaced from their homes, some within their own countries (the internally displaced people) and some cross national or international borders (refugees). The United Nations High Commissioner for Refugees (UNHCR) reported in 2018 that 70.8 million people from over 125 countries were forcibly displaced from their homes by civil or interstate war and that the expense of meeting the needs of this population was nearly $8 billion by the end of the year 2018. According to UNHCR (2018) data, the total number of compulsorily displaced people living in Sub-Saharan Africa was over 18.4 million where over 6.6 million of that population were refugees. UNHCR further reported that Sub-Saharan Africa, therefore, hosts more than 26 per cent of the world's refugee population. That number has gone very high in recent years, partly due to the on-going crises in the Central Africa Republic, (CAR) Nigeria and South Sudan. UNHCR data breaks it down that nearly four-in-five displaced persons living in sub-Saharan Africa came from just five nations: Democratic Republic of Congo, (DRC) South Sudan, Somalia, Nigeria and the Central African Republic.

South Sudan has the highest refugee crisis in Africa and the third-largest refugee crisis in the world (D'orsi 2017; UNHCR 2019). More than 4 million South Sudanese have been

uprooted from their homes since the civil war broke out in 2013 resulting in violent conflict throughout the country. Over 2.3 million of these people have been forced to flee to neighbouring countries such as Sudan, Uganda, Ethiopia, Kenya and the Democratic Republic of Congo. The on-going warfare, flooding and drought continue to worsen what is already a dangerous humanitarian crisis in the area.

Kenya is host to 114,432 South Sudanese refugees as of the end of October 2018 where there has been a steady influx of these refugees into the country since the resumption of hostilities in South Sudan in December 2013 (UNHCR, 2019) The vast majority of these refugees fleeing to Kenya are women and children, and in many cases, the children have been separated from their parents. The refugees are survivors or witnesses of violent attacks and sexual assault thus having experienced pain, trauma and fear. As a result, rates of depression, anxiety, post-traumatic stress disorder and other severe psychological conditions are alarmingly high among these refugees.

1.2.1 Historical Background of South Sudan Crises

South Sudan is located in Northeastern Africa, and its rich biodiversity includes lush savannas swampland and rainforest. South Sudan has a 6,018.00km, border with CAR, 1,055km, with DRC, 714km, with Ethiopia 1,299km, with Kenya 317km, with Sudan 2,158km, and with Uganda, 475km. South Sudan has a population of 12,530,717 making it the 74th largest in the world. The majors ethnic groups are Dinka, Nuer, Shilluk, Zande, Bari Speakers and others minor like Lokoya of South Sudan according to the Encyclopaedia Britannica Inc. last update article.(Jay, Robert, & Ahmad, 2019 edition) South Sudan achieved independence on 9 July 2011 following a six-year interim period after the

Comprehensive Peace Agreement (CPA) was signed in Nairobi, 2005 that ended the two-decade civil war.

Historically, between 1899 and 1955 South Sudan was part of Angola- Egyptian-Sudan, under the joint British- Egyptian rule. Sudan gained independence in 1955 but was wracked down by two civil wars. The first was championed by a secessionist movement in the South between 1956 - 1972, which ended in the measure of autonomy being granted for Southern Sudan.

The second civil war between the north and south erupted in 1983 when Sudanese president Nimeiri abolished that autonomy and transformed Sudan into a Muslim Arab state that prompted the formation of the Sudanese People's Liberation Army (SPLA).

The neighbouring countries tried several times to negotiate for peace between the warring parties in vain, until the year 2005 when the Comprehensive Peace Agreement (CPA) was signed for a permanent ceasefire and promised South Sudan a referendum after six years (Larson 2011, BBC, 2016: 27-28). However, the peace remained unstable as numbers of rebellions erupted, especially after the death of John Garang the leader of the SPLA who was appointed as vice president of Sudan in the 2005 Comprehensive Peace Agreement (CPA). However, during the referendum, South Sudan voted for a fully independent nation on 9 July 2011 and named it the Republic of South Sudan (Larson, 2011; BBC, 2016: 27-28). Since the independence of South Sudan, both internal and external threats continue to disrupt peace and security.

Armed conflict and conflict-related displacements have long psychological and social effects on individuals, families, and communities due to the separation of families, loss of parents, brothers, sisters, and relatives. The United Nations High Commissioner for Refugees

(UNHCR) argues that the peace lasted for only two years. In December 2013, a power struggle between President Kiir and Vice President Riek led to another conflict that left many people dead and thousands displaced both internally and into the neighbouring countries. Subsequent fighting often occurred along with some ethnic groups.

The Inter-governmental Authority on Development (IGAD) UNHCR and the UN worked hard in supporting the two sides for a peace agreement in August 2015 until President Kiir and Vice president Riek was able to sign the peace agreement and cease fire on both sides. However, this agreement collapsed upon the effort of implementation by president Kiir and the vice president Riek the leader of the rebellion group. The violence broke out between the government army and rebel groups that once again forced the citizens out of the country into neighbouring countries. As a result, the increase of South Sudanese refugees is currently one of the largest recorded worldwide, between 2013 and middle 2016 in the Central African Republic (CAR), Democratic Republic of Congo (DRC), Ethiopia, Kenya, Sudan, and Uganda.

For those who fled to the neighbouring countries the majority of them were women and children. Many children were separated from their parents, while some were killed or they fled to different directions; where others were captured and forcibly recruited as armies. Furthermore, severe abuses against civilians in South Sudan have be reported by UNHCR including killings, torture, rape and other forms of violence, like the destruction of property and looting. For example, the South Sudanese profile of new arrivals in Kenya (2017) was predominantly women and children (UNHCR 2017:4, 5; UNHCR, 2019). In Kakuma refugees camp even though the government with the secretary of Refugee affairs tried to

help, the big numbers remain a big barrier and thus the ration is only meeting 70 per-cent of refugee (BBC, 2018).

The conflict and violence in South Sudan have been the major contributors to South Sudan's national food insecurity. In 2014, the food crisis in South Sudan was the worst in the world famine declared toward the end of 2017 and early 2018 so much that nearly five million South Sudanese were at risk from the food insecurity. According to a new study of UN-Security council doing the map of food insecurity rate in South Sudan, the study that was funded by the U.S State Department narrated that, the war and its elements in South Sudan have killed many people since 2013 (Mercy Corps, 2018).

The psychological impact of war like the case in South Sudan, has been widely acknowledged and well documented (Miller & Rasco, 2004; Miller et al. 2002; Mollica, 2006; Murthy & Lakshminarayana, 2006; Porter & Haslam, 2001; Summerfield, 2003; van den Heuvel, 1998). Consequences of war exposure mostly reported include post-traumatic stress disorder (PTSD), depression, recurrent nightmares, insomnia, chronic hyperarousal, impaired concentration and irritability (Miller & Rasco, 2004:1-64).

In a study carried out on the prevalence of psychiatric morbidity among South Sudanese refugees living in Nairobi, Wamukhoma (2011:37-38) has found that 56.2% of refugees were at excess risk of PTSD, major depressive disorder, generalized anxiety disorders and panic disorders. The study showed that refugees face a high risk of psychiatric morbidity because of forced migration, traumatic events, and resettlement in unfamiliar environments. According to Hamblen and Schnurr (2007), PTSD is associated with long-term physical health problems, higher mortality rates and heart diseases (Branis, 2014: 316-331).

Wamukhoma's study (2011:36-38,44-45) thus shows that South Sudanese refugee families living in Nairobi County are not exempted from experiencing such high levels of PTSD, depression and other psychiatric problems making them in need of counselling and psychotherapy support. Though this support has not been provided in a specialised manner and to the required level, (Wamukhoma, 2011:34-40) mention that a few groups or organisations have come forward to offer help and one of such groups were pastoral counsellors.

Pastoral counsellors in Nairobi County, therefore, are always dealing with situations in which they have to provide counselling services and care for the affected refugees, including the South Sudanese dysfunctional families. Such terrible situations need specialised pastoral counselling services, there is need to establish whether the pastoral counsellors are well informed or equipped skilfully lest they are causing more harm to the people that need much care and skilled therapy. This has necessitated the need to assess the effectiveness of pastoral counsellors in helping South Sudanese dysfunctional families living in Nairobi County in Kenya.

The South Sudanese refugees living in Nairobi are multicultural and multi-ethnic and consequently, pastoral counsellors offering professional counselling services faced the challenge of handling diverse languages and cultures (Christodoulidi & Lago, 2010:39-112). A professional counsellor should therefore, be culturally competent by being aware of the influence of his or her cultural values on interactions with others (Uhlmann, Schuette &Yashar, 2011; Weil, 2000). Thus, the need to establish the cultural influence on the pastoral counsellors' efficiency in helping the dysfunctional families of South Sudanese living in Nairobi cannot be overemphasized.

The pastoral counsellors' education is a demanding process that entails/need a considerable amount of personal growth work, professional it may influence the lives of the South Sudanese dysfunctional families living in Nairobi (Wosket, 2010:10-20). Better knowledge of pastoral counsellors' experiences of training and intercultural practice can thus benefit the profession. Nonetheless, scholarly work on this topic is considerably limited. This study would contribute to under-researched area by highlighting the effectiveness of pastoral counsellors in helping South Sudanese dysfunctional families living in Nairobi County. There is also a need to assess the support that the church provides pastoral counsellors with and identify the best practices or strategies used by these pastoral counsellors in helping those dysfunctional families of South Sudanese living in Nairobi County, Kenya.

1.3 Statement of the Problem

The study sought to establish the effectiveness of pastoral counsellors in helping South Sudanese dysfunctional families living as refugees in Nairobi County. Families were regarded as dysfunctional for they have, in one way or another, been subjected to or witnessed violent acts and abuse in different ways during civil war in South Sudan and resettlement in new environment. Or family members fail to function together in a healthy way. The South Sudanese refugees who flee to Nairobi have a high likelihood of suffering from PTSD, anxiety and panic as a result of forced migration, traumatic events among others. Pastoral counsellors, who offer this service, need deep knowledge on therapeutic approaches and skills to effectively carry out their role. Many studies mainly concentrate on the significance of the dilemma of refugees including PTSD, violence and anxiety but almost give no focus on how to effectively fight such trauma and improve psychological health

among refugees (Wamukhoma, 2011:14 -45). There is a need to establish the South Sudanese pastors/ pastoral counsellors are well equipped skilfully and well informed so as not to cause harm to the war refugees' families who need much care and professional therapy. Most research has primarily focused on the psychological impact of war on refugees largely, ignoring the level of professional skills that pastoral counsellors need to handle those refugees who have a terrible need of counselling. Attentiveness on the importance of professional training in counselling on pastoral counsellors is limited and often non-existent (Mollica 2006: 316) It is always important to assess the extent of the consumption and the effectiveness of pastoral counselors according to (Wheeler, 2002; Bogia 2004:15)In the case under study, the extent of the effectiveness of pastoral counselors in managing the psychological impact of war on South Sudanese dysfunctional families living in Nairobi County is also yet to be examined. Identifying the best strategies used by pastoral counsellors in helping those dysfunctional families of South Sudanese refugees living in Nairobi may fill the knowledge gap. Thus, competent and effective pastoral counsellors are the best for helping such cases, as the South Sudanese dysfunctional families. Therefore, the study sought to address the gap, that the pastoral counsellors should know the importance of education and training in both theological and psychological for addressing human behaviour and spiritual matters.

1.4 Research Objectives

1. To assess the level of professional counselling training that the pastoral counsellors have in helping dysfunctional families of South Sudanese living as refugees in Nairobi, County
2. To establish the cultural influence on the pastoral counsellors for helping the

dysfunctional families of South Sudanese living as refugees in Nairobi, County.

3. To determine the support that the church provides pastoral counsellors in addressing issues of dysfunctional families of South Sudanese living as refugees in Nairobi County.
4. To identify the best practices or strategies used by pastoral counsellors in addressing the issues of dysfunctional families of South Sudanese living as refugees in Nairobi.

1.5 **Research Questions**

1. What level of professional counselling training do the pastoral counsellors have in helping the dysfunctional families of South Sudanese living as refugees in Nairobi?
2. What influence do cultures have on the pastoral counsellors in helping dysfunctional families of South Sudanese living as refugees in Nairobi?
3. What support does the church provide pastoral counsellors in addressing issues of dysfunctional families of South Sudanese living as refugees in Nairobi?
4. What are best practices used by pastoral counsellors in addressing issues of dysfunctional families of South Sudanese living as refugees in Nairobi?

1.6 Significance of the Study

This study sought/wanted to assess the pastoral counsellors' 'competence' or skilfulness while handling the dysfunctional families of South Sudanese residing in Nairobi County. The study aims to notify pastoral counsellors on effective counselling approaches to employ while handling traumatized families of the South Sudanese. The study challenges pastoral counsellors to strive to develop more skills through training, workshops and seminars concerning their responsibility of counselling war refugees.

This study would contribute in a way to the existing body of knowledge, as it would give new insights into the counselling skills used within the context of war refugees living in Nairobi County. The study also offers a theological reflection of counselling skills intending to enhance effectiveness in pastoral counselling that can be applied beyond Nairobi toothed/ or brutal forcibly displaced people in the Sub Saharan Africa and the world at large.

1.7 Scope and Limitation of the Study

The study took place in Nairobi County; specifically, in Kibera, Baptist Church along Kibera Road and the Kasarani area targeting South Sudanese dysfunctional families of refugees living in Nairobi. The study was limited to 60 respondents of different age groups, with different occupational and educational backgrounds; where 58% were female and 42% were male. The respondents were picked from the target population that comprised of dysfunctional South Sudanese families living in Nairobi County.

1.8Justification

In essence, the field of helping war refugees in Nairobi County deal with psychological trauma and the level of professionalism that counsellors need to carry out this role effectively is one which requires further assessment. Awareness on the importance of training pastoral counsellors so that they help war refugees better is inadequate making this a priority to study. This research fills the gap by outlining the effectiveness of pastoral counsellors in helping South Sudanese dysfunctional refugee families living in Nairobi County, Kenya. Overall, the findings of this study would help assess the extent of the utilization and the effectiveness of pastoral counselling as well as close the gap on the applicability of pastoral counselling in helping refugees in urban Kenya and beyond.

1.9 Conclusion

This chapter discusses the background of the study, research objectives and research questions drawn from effectiveness of pastoral counsellors in helping dysfunctional families, further the study discusses the significance, scope and delimitation of the study

CHAPTER TWO

LITERATURE REVIEW

2.1 Introduction

This study discusses the related literature on the topic under study. The literature review was guided by the research objectives. The theoretical framework of the study, knowledge gaps and conceptual framework is also discussed.

2.2 Pastoral Counselling Overview

According to Collins (2007: 36), pastoral counselling is the best mode of supervision of the refugee anguish or grief from consequences of war experience. He states that pastoral counselling encourages a whole person, and that pastoral counselling does not only function on the medical model of poor physical condition and pathology. Miller and Rasco (2004, 2010: 33-42) point out that at times problems of refugees are both physical and often mental, and may thus need an action plan that links both modern psychotherapy and spiritual counselling this would go a long way in solving post-traumatic stress disorder (PTSD), extreme anxiety, recurrent nightmares, restlessness, chronic anxious stimulation, impaired concentration and irritability among refugees Malabika (2015: 41).

According to Sigmund (2002: 49-57) pastoral counselors represent a valuable resource for psychiatric referrals as they are uniquely qualified to address certain mental health issues-including bereavement and coping with terminal illness. Pastoral counselors are trained in behavioural sciences can help to assess and treat patients who prefers psychotherapy that reflects their spiritual beliefs. Pastoral counseling and psychotherapy are predominantly insight-oriented but include other therapeutic models as well. Pastoral counseling is a useful

tool for helping individuals who are experiencing mental distress or dysfunction family in their different issues/problems.

2.3 The Uniqueness of Pastoral Counselling

According to Wheeler (2002:54-62) pastoral counselling is a unique form of psychotherapy which uses spiritual resources as well as psychological understanding for emotional healing and growth among refugees. Pastoral counselling is often brief and focuses on identified issues, such as, 'my parents just died', 'I lost my job and need more support'. However, given the changing trends in the modern society, pastoral counsellors need to be more schooled in psychological counselling to be well equipped to handle the diverse challenges of refugees (Miller & Rasco 2004). As such, effective pastoral counselling should combine the insights and principles of Christian faith and theology with the knowledge and skills of behavioural sciences. (Bogia 2004:15-16) showed that pastoral counselling was an magnification of the general ministry of the church, and its main goal was to integrate modern psychotherapy and spiritual insights through the processes of counselling conversations this was done by the hypothesis that both the counselee and the pastoral counsellor sincerely believed that God was present in that counselling work, as a result clients experienced completeness.

Due to the unambiguous belief in the presence of God's Spirit in the counselling environment, pastoral counselling conversations are more accurately understood as "trialogue/theory" rather than as "dialogue". It is, therefore, the integration of the rich resources of theology, faith and behavioural sciences to provide hope and healing of mind, body and spirit to a counselee, that makes pastoral counselling superior to other forms of Psychotherapy. If effectively utilized, pastoral counselling can manage to control

psychological and physical challenges refugees face (Christodoulidi & Lago, 2010: 86-161).Throughout all church history, pastoral counselors have been the foundational and focal point of helping people deal with all sorts of issues and problems. Pastors are frequently the first person church members will seek help from issues, crises situations, family issues and health problems (Allen, 2010)

2.4 Level of Professional Training of the Pastoral Counsellors

According to Collins (2007:36,108) pastoral counselling movement was begun by some pastors and physicians in 1932. Boisen was one of the founding fathers who felt the need to train pastors to work with the mentally illness What triggered/or activated this comprehension was because research findings indicated that, about 60% of the population favoured the counselling services of pastors; this was because, the pastors were readily obtainable, they were offering free services and they offered counsel that appealed to the people's spiritual needs and the patients felt less threatened when talking to the clergy than the psychiatrist (Atherstone, 2011: 36, 141-165).

Since pastoral counsellors help people like refugees deal with life's difficulties such as marriage issues, divorce, loss, trauma, violence, post-traumatic stress disorders, death and ageing. Therefore pastoral counsellors training and skills are of great importance and need to be emphasized (Wambugu, 2013: 1) argues that since pastoral counselling is still a new idea in Africa, Kenya or South Sudan, pastoral counsellors lack adequate professional training in counselling. Wambugu continues to show why some pastors are facing challenges in responding to the clients' issues: only a few pastors go through counselling training and very few professional counsellors acquire entry skills for individual, couple and family counselling through theoretical training.

Refugees goes through serious challenges when they are forcibly displaced from their homes including problems requiring in-depth work like depression, self-esteem issues, loss of faith or meaning in life and conflicts in foreign countries. These are deep psychological conflicts that if not handled by a priest who has an in-depth knowledge of handling and using psychological tools such as the wheel/controls of grieving,/or broken-hearted then the refugees may be left at one stage of grieving for a very long time and may not be able to heal from the grief. Adams (1986) and Dawson (2001) noted that for correct and effective health of an individual, he or she must have a natural drive to grow and become healthier. This then enables the counsellor to discover what potential lies within this person and what prevents him or her from the realization of that potential. This done when the client willingly is lead to identify and express the feelings involved. By so employing the counselling services, the person was helped to move toward new ways of understanding himself or herself and it can best be handled by a trained priest with psychological knowledge.

However, Kottker (2010:14) says, "for better or worse" no matter how the client is; the therapist must feel an opportunity to be available and to understand a client's problem with compassion. Clinebell (1984:26) underline clearly that pastoral counsellors' responsibility is to utilize variety of healing methods to help people handle their problems and crises in more developmental ways, and care for the client's well-being. (Hoeg, 2007:87-89) mentions an excellent example of the family bereavement programme (FBP) which is very helpful for children around 8 to 16 years who lost their parents. The teaching and treatment are helpful for children and caretakers in coping skills that help to cope with any situation (death, trauma, etc.) and how to move on with life. In addition, the social workers can help the client to go through four tasks. Worden (2018:46) explains that a person must accept the reality of

loss and work through the pain of the grief, by adjusting to the environment in which the deceased is missing and emotionally relocating the deceased then move on with life.

However, the level of professional counselling training among the pastoral counsellors to help the dysfunctional families of South Sudanese refugees living in Nairobi was not been emphasized and that is the gap our study sought to fill.

2.5 Cultural Influence on the Pastoral Counsellors in Helping Dysfunctional Families

According to Mollica (2006:316-323), a pastoral counsellor should be aware of cultural differences and how they may affect the counselling relationship; otherwise a pastoral counsellor may act unethically when cultural differences are not considered. The need to balance cultural connections with the home country and the host community can be stressful (Gray & Elliott, 2001); (Taljan, 2015:13-26).The literature suggests that from a psychological standpoint, cultural connections may positively affect the refugees' adjustment to the new environment (Mollica, 2006). Refugees rely on social support during times of transition and resettlement (Simich, 2003:575-591). Isolation from natural support systems often leads to emotional vulnerability. The literature also suggests that access to co-ethnic and co-linguistic communities may help establish better modification Ager, A., Malcolm, M., Sadollah, S. (2002); (Mollica 2006:317-325).

Cultural and religious background affects a client's choice of a counsellor. Although research has increase the knowledge of the potential value in addition of religion/spirituality in counselling, highly religious individuals may fear that a traditional (secular) counsellor may not be able or willing to adequately acknowledge and honour their religious beliefs Guinee & Tracey, 1997; Keating & Fretz, 1990; Mayers, Leavey, & Barker, 2007; Bergin (as cited in

Guinee & Tracey, 1997; (cited in Barker, 2012) called this phenomenon the spirituality/theology gap. Guinee and Tracey (1997:65-73) discovered that, in a reversal of the religiosity gap, individuals with low levels of religiosity or individuals who identify as non-religious may be apprehensive of engaging with a counsellor who he or she identifies as religious.

The American Association of Pastoral Counsellors (AAPC,2000) summarized research completed as a follow-up to a 1992 Gallup survey and concluded that among Americans surveyed, regardless of religious background, there is a strong preference for mental health professionals who integrate religion/spirituality into their practice (AAPC, 2012: 6).

Keating & Fretz (1990: 37) as cited in completed a study building on the issue of possible clients' confrontation to engaging with a counsellor when there are unequal characteristics (e.g. race, age, gender). Although such differences do not appear to affect actual results of counselling, there is concern about the underutilization of mental health services by potential clients who are resistant to a incompatible counsellor. In particular, Keating and Fretz commented:

> ...many professional psychologists, and even clergy, find that fundamentalist and 'born-again' Christians are often unwilling to accept referrals for needed counselling, especially if the referrer cannot guarantee that the counsellor is a Christian counsellor (Keating & Fretz 1990: 293).

Thus, the researchers explored whether negative anticipations of Christians would be affect by descriptions that ignored, showed empathy, or identified with their beliefs. Second, Keating and Fretz hypothesized that Christians with stronger beliefs would react with stronger negative anticipations. The results confirmed that a description containing spiritually empathetic elements could reduce the level of negative anticipations, also, "for those low on

religiosity, the empathic description is as effective as the explanation of Christian in inducing lower levels of negative anticipations" Keating and Fretz (1990:295), as the study was focusing on refugees who were Christians.

Garzon and Tilley (2009:113-120) state that the spread/increase of Christian lay counsellors is an additional factor that may affect prospective clients' expectations who have experienced lay Christian counselling, which tends to be more biblically informed than clinically informed, may be resistant to professional counselling. Professional counselling can be seeing as not involving 'real' Christian counselling – regardless of the integration and use of Christian values. Consequently, there is a need to determine the influence of culture and background of South Sudanese living as refugees in Nairobi on the pastoral counsellors in helping these dysfunctional families**.**

2.6Church Support to Pastoral Counsellors in Addressing Issues in Dysfunctional Families' Living as Refugees

A pastoral counsellor should have access to qualified supervision from the church (McSwain & Treadwell 2010). He/she should also consult with fellow pastors and counsellors. This is crucial for maintaining professional accountability. Therefore, a pastoral counsellor's willingness to reach out for consultation is evidence of professional maturity, and it is vital if one is counselling those who may be potentially suicidal or dangerous to others. A pastoral counsellor should maintain a working relationship with a Christian psychiatrist for purposes of consultations regarding clients who demonstrate strange behaviours or are deeply depressed (McSwain &Treadwell, 2010) as cited in Nabwrie (2016: 11-12).

According to Ikenye (2014:176-177), pastoral counselling should use the framework of ABCDE (warming and welcoming the client, finding the pain and suffering, and responding with compassion, genuineness, acceptance, empathy and interpathy and stages of treatment and termination) phase as a model for effective, competent and resourceful counselling, the counsellor must focus on the issues that brought the client to seek help, by asking what, how, when and who. Besides the pastors have to visit the congregation and the community and know their difficulties. A caring pastor should be able to realize the problems facing his/her church members, e.g. vulnerable children and women, and help them spiritually and also the pastoral counsellors may have a programme of training skills for the parental groups and families for handling their children. Also, the American Association of Pastoral Counsellors (2019: 3-5) encourages pastors to use spiritual resources as well as psychological understanding for healing and growth.

American Psychiatric Association (2018: 8) argues that family therapy should provide a safe place where family members can freely share feelings and learn better ways to interact with each other and find reliable solutions to their problems. National Association of Christian Counsellors Training (2017) emphasizes that the main benefit of taking counselling training courses is to provide insight for understanding human behaviour and equip counsellors with skills to help others and in this case of the South Sudanese dysfunctional families. (Clinebell, 1984:53) highlights clearly that the pastoral counsellors' responsibility is to care for the client's well-being. Ikenye (2014:49) argues that pastoral counsellors must maintain healthy and functional relationship both in individual and communal life including wholeness and holiness thus the need for accountability.

2.7Best Practice for Pastoral Counsellors in Addressing Issues of Dysfunctional Families Living as Refugees

2.7.1 The Rights of the Counselee

The rights of the counselee are primary. AAPC states that it is malpractice for a pastoral counsellor to depend concussive or unconsciously on the counselee for his/her own emotional fulfilment. This, he/she may do by trying to maintain the counselee in a position of dependence, through biblical threats and manipulations. If such a pastoral counsellor fails to achieve this, he/she may begin to resent the counselee. Therefore, the AAPC insists that a pastoral counsellor preserves clear guidelines to focus the counselling dialogue. It is more effective and loving to conduct the counselling session professionally with the counsellor being primarily aware of the counselee's need for empowerment (Richard, 2010:2885).

2.7.2 Dual Relationships

The Pastor must avoid chaotic dual relationships. The American Association of the Pastoral Counseling (AAPC) states:

> We recognize the trust placed in and the unique power of the therapeutic relationship. While acknowledging the complicity of some pastoral relationships, we avoid exploiting the trust and dependency of clients, we avoid those dual relationships with clients for instance (business or close personal relationship) which could compromise our professional judgment, compromise the integrity of the treatment and/or use the relationship for our gain (Jeffrey, 2008:27).

Being attentive to the counselling relationship while at the same time trying to sustain a personal relationship with the counselee is difficult, this is because there is always a danger of indirectly misusing this position. It is therefore sensible for the pastoral counsellor to refer family members, elders, deacons in the church and those who look up to him; this is because counselling endangers the relationship. However, the pastoral counsellor can listen, support,

educate or minister to those individuals, what should be avoid is a counselling relationship (Wheeler, 2002: 54-62) as cited in (Bogia, 1984: 15-16).

2.7.3 Confidentiality

Confidentiality to a pastoral counsellor must be absolute, unless it is part of the informed consent process. members of the AAPC who charge for their services stick on to the following statement: "We do not disclose client confidences to anyone, except where mandated by the law to prevent a clear and immediate danger to someone for instance case of quick criminal or disciplinary action arising from the counselling where the pastoral counsellor is the defendant; for purposes of supervision or consultation; or by previously obtained written permission." When discussing a counselee in consultation or supervision, only first names are used or false names are used (Wheeler, 2002: 54-62).

Although a pastor or a leader who is counselling within the local church setting may not be under these legal obligations, he is ethically bound to inform the counselee what his criteria are regarding confidentiality. It is also important for the pastoral counsellor to remember that he should have no professional communication with family or friends of a counselee without written permission (Jeffrey, 2008:264-267). Generally, professional pastoral counsellors can only break confidentiality when it is evident that the client may do serious injury to others or self. Abuse to children and the elderly were requiring by the law to be reports (Jeffrey, 2008). Those who follow solution-oriented methodology use all their knowledge and training to help the counselee to become aware of his own ability since the counselee is the expert on his life. It is therefore crucial for an effective pastoral counsellor to be well train and empowered in both theological and psychological counselling procedures to effectively utilizing pastoral counselling skills to be in a position to help war refugees.

2.7.4 Spirituality

Ikenye (2014:127) argues that, from the Bowenian perspective of psychology, there should be a need to promote spirituality as an integral to differentiation. Parents and children need to be encouraged to have the fear of God in the family relationships. He argues that healthy personal relationship with God enables one to deal with anxiety and instead develop hope.

Corey (2013:73) explains that the essential techniques in psychoanalytic practice are maintaining the analytic framework, free association, dream analysis, of resistance and analysis of transference that is used to assist/help the client.

2.7.5 Creating Parental Awareness

Bile (2003:12-15) argues that the gap that needs to be filled is that of caring for children during and after the war because many of them remain wounded, traumatized and depressed. Children from wounded backgrounds deserve great assistance in their early stages so that it would not affect them later as adults.

The UNICEF South Sudan counsellors have on several occasions addressed the issues of violence against women and girls while creating in them awareness, including caretakers and teachers on parenting skills and prevention of family separation. As the study aims to provide insight for solutions to the dysfunctional families' problems, the marriage and family theory says that the corrupted society is not healthy for a child to grow. That needs the intervention of counsellors, pastors, and parents who have skills of raising children and who are showing concerns, care and love. According to Corey (2013:229), a person is the agent of change. Therefore, social learning is the best way people can develop adequate social skills after contact with effective models.

2.7.6 Pastoral Counselling Body

It is also important that all pastoral counsellors be members of a pastoral counselling body to uphold integrity and professionalism in their duties guided by the pastoral counselling ethics. This will enable them to be committed to the various theologies, traditions and values of faith communities, and to the dignity and worth of each individual. It will also enable them to be dedicated to advancing the welfare of those who seek their assistance and to maintain high standards of professional conduct and competence (Crabb, 2007: 655-672).

2.8 Theoretical Framework

A pastoral counsellor must operate from a defined theoretical framework. According to American Association of the Pastoral Counselling (AAPC), Assumption guide in the practice of counselling. The counsellor must clearly understand these assumptions and procedures should flow naturally from them, the pastoral counsellor to have a clear methodology that he follows when counselling. Moorhead (2010) states that sharing some scriptures or eager that the pastor will think of something that will be supportive does not meet the criteria as a clear theoretical framework for working with individuals who are in crisis. Although the counselee is the expert of his life, the pastoral counsellor must also be expert and growing in ability regarding his chosen methodology. He should be improving his skills and knowledge through continuous education preferably with a solution -focused emphasis. The pastoral counsellor must model both spiritual and emotional health, and be honest about his imperfections to avoid being concerned with meeting his personal needs at the expense of the client's needs.

As such, a pastoral counsellor should not manifest the following dishonest personality or tendencies during a session: not demonstrate power and control, not harbour a need for approval and affection, not wish to feel respected and appreciated, not effectively impose his

theological position and should not have an urge to be nurtured. Any manifestations of such unhealthy traits will swing the counselling session into focusing towards meeting the needs of the pastoral counsellor and not the counselee. Such a pastoral counsellor should be advised to go for personal therapy from qualified professionals (Nabwier, 2016:31-33).

2.8.1 Social Analysis Theory

This study uses Holland and Henriot's (1980) theory on Social Analysis. There can be two approaches to the theory of social analysis. One is call "academic" and the other "pastoral". According to Holland and Henriot, the "academic approach" studies a particular social situation in a separate, abstract manner, dividing its elements to understand the "pastoral approach". On the other hand, the "pastoral approach" looks at the reality from an involved, historically committed stance, keen the situation for the action. A social analysis called "pastoral circle" consists of four phases: insertion, social analysis, theological reflection, and pastoral planning or action (Holland & Henriot 1980). The theoretical framework explained below.

Insertion: Through insertion, the church gets into the experience of people and identifies social issues in the community and the world. It tries to feel and understand how the social issues affecting people in the families and community and the way they affect the lives of others (Holland & Henriot 1980). Part of insertion is to get in touch with what people are feeling, what they are undergoing, and how they are responding to the situations they find themselves in.

Social Analysis: This is a means of extending the reflection on our experience, to search out the relationships between values, events, structures, systems or ideologies. It goes beyond our

immediate experience to search the historical roots and future implications of events, issues and systems. The task of analysis is to examine causes, inquire concerns, and outline linkages rooted in the structural realities, which condition our experience and limit or expand our freedom of choice (Holland & Henriot 1980). Analysis helps us become persons who consistently ask the question why in the face of human suffering and injustice. We learn to look for causes, relationships, structural realities to understand and plan for effective action for change.

Theological Reflection: Theological reflection engages the church in exploring the issue from the perspective of faith -the Bible, the social teachings of a denomination, the resources of the Christian tradition, and the lived faith of the church community. This step involves people in exploring what faith says about particular social issues. It involves them likewise in exploring what the faith community is doing about social issues and what motivates its response (Holland & Henriot 1980). The Word of God brought to bear upon the situation challenges old ways of thinking and responding by raising new questions, suggesting new insights, and opening people up to new action possibilities.

Pastoral Action: New experiences and ways of thinking lead naturally to new ways of living and acting, it is these new ways of living and acting that the fourth movement of the process is all about. Action means helping people survive their present crisis or need and addressing the root causes of the problems. Working at a soup kitchen or food centre, visiting the elderly or sick, and training children are common examples of direct service (Holland & Henriot, 1980). Direct service needs to be couple with actions aimed at removing the causes of the problems that direct service is addressing. Legislative advocacy, community organizing, and

working with organizations that are changing the structures that promote injustice are examples of social change actions.

Holland and Henriot (1980) argue that social problems and issues may appear to be isolated pieces, but they are actually link together in a larger system. The church has increasingly recognised that social analysis is important for effective pastoral planning and acting.

In the context of the study, this theoretical framework will help analyse the pastoral care of the church to South Sudanese refugee dysfunctional families living in Nairobi County. Below is a detailed analysis on how each element in this pastoral circle fits and helpfully contributes to the study.

The first element is the insertion. The insertion guides the study to interact with the South Sudanese refugees in Nairobi County. This interaction helps the researcher to know, identify and to understand refugees' experiences, their perspectives as well as their challenges in general. In this way, the insertion highlights the way refugees sense their lives, how the church is responding to their concerns in its pastoral care. It also connects the researcher to the refugee families to talk to them and do interviews with those available according to their willingness. It is through the insertion that the researcher knows what is going on in the refugee society. After the insertion whereby the researcher interacts with refugees, the outcome of the work achieved above leads to social analysis.

The social analysis in this particular study guides the researcher into examining society in general. This implies that the social analysis helps the researcher to understand the way in which society relates to refugees, and how society perceives the refugees, what structures they use in examining and understanding these people. Moreover, the outcome of the social

analysis determines and puts into place the mechanisms that promote the development that can help and improve the lives of refugees and those which hinder their progress. The social analyses are that help the researcher develop a guideline that enables him/her to do the study in empathy with the South Sudanese dysfunctional families living in Nairobi. Hence, through being connected to the community, things are made easier and the researcher is able through the help of the community to identify the challenges the dysfunctional families face in Nairobi County. It also helps the researcher to obtain a more complete picture of the social situation of the dysfunctional families. Furthermore, after exploring the social analysis and its historical setting, this gives way to understanding the structural nature of the relationship between dysfunctional refugees' families and their host society.

The theological reflection element guides the study in knowing what is happening within the church regarding the dysfunctional families: what the church ought to do concerning families, how to explore the activity, what is the calling of the Church, what is the effectiveness of the Church when responding to the needs of refugees? This theological reflection helps in the study to understand the analyzed experiences in the light of the teaching the Word of God, social teaching and living in faith as well. Finally, the last element is pastoral action.

The pastoral action guides the study when it comes to decision making. Since the purpose of pastoral circle is decision-making and taking action, this fourth element plays an important role in the study. The pastoral action helps the researcher identify the actions taken by the church regarding refugees to find durable solutions to the predicament of refugees. It also highlights the role played by all social organizations in seeking solutions to the ongoing influx of refugees; how to advocate for them and alleviate their pain within the communities

where some of them are not yet ready to understand what refugees went through before finding themselves outside of their countries of origin. Pastoral action helps refugees to understand why the communities are still hostile to refugees and take action in promoting justice at all cost.

2.9 Knowledge Gaps

The literature discussed has systematically revealed their best strategies that have been put in place to help the dysfunctional families of South Sudanese living in Nairobi County; however, the effectiveness of these measures is yet to be investigated. Wamukhoma's study (2011:5-7, 36-38, 44-45), thus shows that South Sudanese families living as refugees in Nairobi County are not exempted from experiencing such high levels of PTSD, depression and other psychiatric problems. causes them in need of counselling and psychotherapy support, though this support has not been provided in a quality manner and to the required level. According Onyut, Lp., Neuner, F. (2009) many studies have been carried on Post-traumatic Stress Disorder (PTSD) and psychological trauma among refugees resettled in developed countries, but few studies have been carried out to diagnose mental health disorders amongst post-conflict population in Africa. In Kenya, hardly any studies cover urban refugees within Nairobi County, especially amongst South Sudanese dysfunctional families' refugees living in Nairobi County (Wamukhoma, 2011: 37-38).

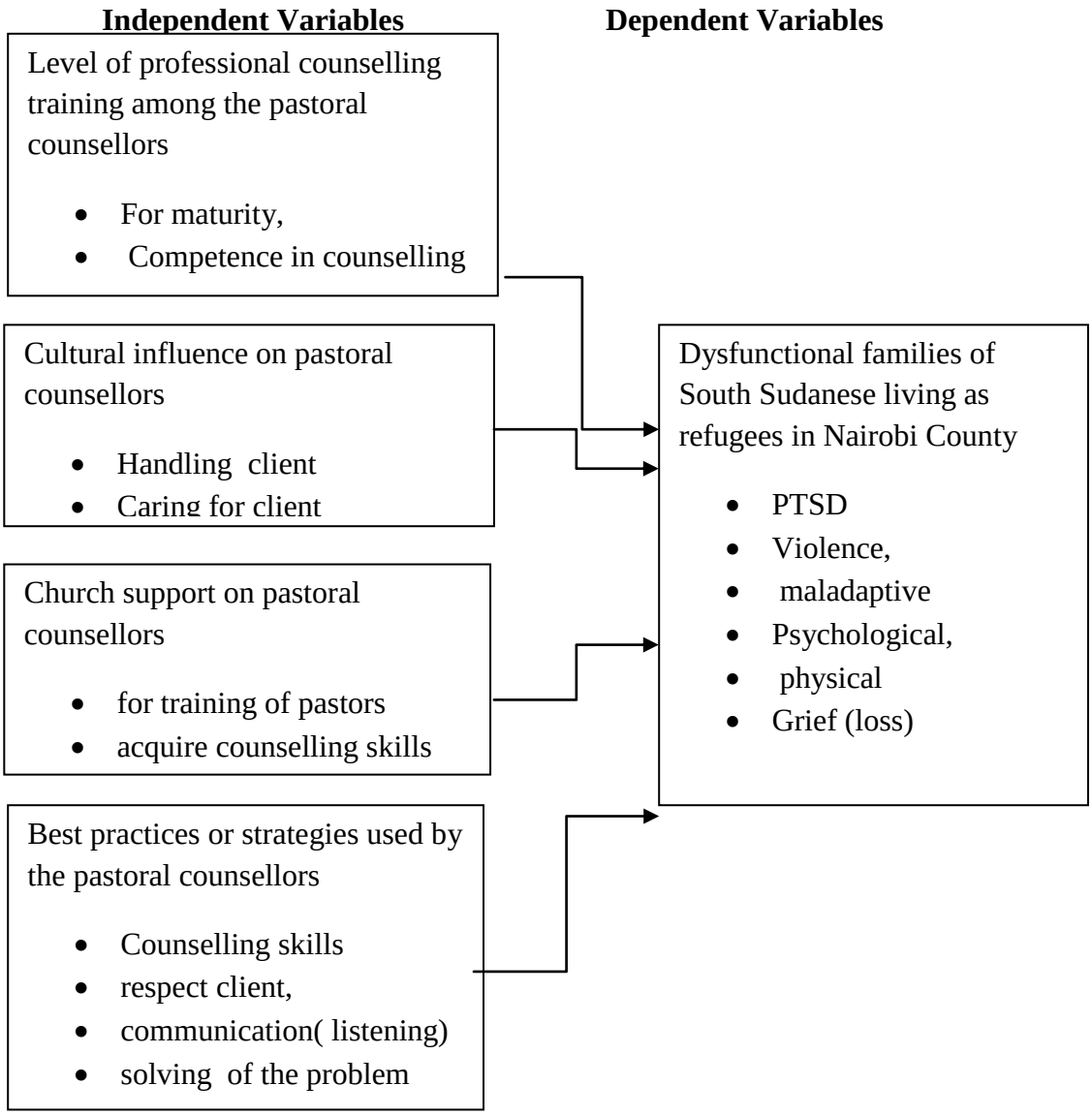
Collins (2007:36) mention that pastoral counselling is the best mode of management of the refugees suffering from consequences of war exposure, because pastoral counselling encourages a whole of person besides (Wambugu, 2013:1) argues that pastoral counselling is still a new idea in Africa, Kenya or South Sudan that some pastoral counsellors lack adequate professional training in counselling, (example South Sudanese). Pastoral counsellors should

emphasizes on the main benefit of taking counselling training courses is to provide insight for understanding human behaviour and equip counsellors with skills to help others and in this case of the South Sudanese dysfunctional families. Pastoral counsellors should be aware of cultural differences and how they may affect the counselling relationships and access to co-ethnic and co-linguistic communities may help establish better adjustment (Ager et al, 2002; Mollica 2006). In addition, pastoral counsellors must maintain healthy and functional relationship both in individual and communal life including wholeness and holiness thus the need for accountability (Bile, 2003:12-15) Further a need to be filled is: of caring for children during and after the war because many remain wounded, traumatized, and depressed.(Christine, 2016:18) Pastoral counsellors' helps people deal with life's difficulties such as: divorce, loss, trauma, violence, post-traumatic stress disorder, death, depression and aging its importance need to be emphasized.

2.10 Conceptual Framework

The conceptual framework illustrates the relationship between the independent variables (effectiveness of pastoral counsellors) and the dependent variable (dysfunctional families of South Sudanese). The study determined how various identified factors:- Level of professional counselling training that the pastoral counsellors have, cultural influence on the pastoral counsellors, church support provides pastoral counsellors, and the best practices or strategies used by the pastoral counsellors in helping the South Sudanese refugee dysfunctional families living in Nairobi County, Kenya.

Figure 1: Conceptual framework of effectiveness of pastoral counsellors in helping dysfunctional families' of South Sudanese living as refugees in Nairobi County.



The mode indicates that when pastoral counseling is successfully employs, it would make change of negative behavior into positive, amongst the dysfunctional families and this indicated by the independent and dependent variables. The competence of pastoral counselors' services given to the families is point out through, the pastoral counsellors' ability that builds up pastoral counselling techniques that are developed by the pastoral

counselors and this is done through two ways of counselling, individual and group counseling. These services of pastoral counselling may help dysfunctional families' refugees of South Sudanese to improve from psychological and physical problems/issues within them. Therefore, the trained pastoral counsellors are capable in offering valuable services to those in need of help spiritual and psychological.

2.11 Conclusion

This chapter reviewed the existing literature in line with the study objectives on the effectiveness of pastoral counsellors in helping dysfunctional families. The conceptual framework that informed the study on the relationship between the independent variables effectiveness of pastoral counsellors) and the dependent variable (dysfunctional families of south Sudanese) has been presented in this chapter.

CHAPTER THREE

RESEARCH METHODOLOGY

3.1 Introduction

In this chapter, the methodology used in undertaking the research outlined. The chapter details the research design, data collection methods, instruments and analysis employed in the research. It also describes the target population, sample and sampling techniques as well as the ethical considerations.

3.2 Research Design

To evaluate the effectiveness of pastoral counsellors in helping South Sudanese dysfunctional families living as refugees in Nairobi County, the descriptive study design was employs then the researcher used social theory to develop a guideline that enable him/her to do study in understanding with the South Sudanese dysfunctional families. Identify the challenges which families facing and how the pastoral action helps pastors to identify dysfunctional family's problems so that they can plan accordingly. According to McCombaes (2019), the descriptive research design is an appropriate choice when the research aims to identify characteristic, frequencies, trends, correlation and categories. Further, it also aims to accurately and systematically describe a population, situation or phenomenon. Besides, McCombaes mentions that a descriptive research design can use both quantitative and qualitative method to investigate one or more variables. The study was qualitative with a focus on the association between independent variables and the dependent variables. The qualitative method according to Mugenda and Mugenda (2003:5) recommends the qualitative way as one that allows the participants to respond according to their experience.

The researcher used focus group discussions, individual interviews and filling in of questionnaires to collect primary data through descriptive and explorative methods, allowing the participants to respond according to their experience.

The qualitative approach also offered more insight and provided rich data about real life, people and situations. The research design also enabled the researcher to make sense of and understand behaviour within the wider social context of the research area. It further enabled the researcher to focus on the links among the sampled number of people who represented the population of South Sudanese dysfunctional families living in Nairobi County.

3.3 Research Study Population

3.3.1 Study Population

The population of the study was the dysfunctional families of South Sudanese living as refugees in Nairobi County. Judgmental sampled 60 refugee respondents of South Sudan origin. According to (Adi, 2019) the researcher chooses only parents and youth who had once received pastoral counseling and were right fit to participate in the research study. The sampled were selected by using sound judgment based on characteristics of a population and the purpose of the study.Out of the 60 participants 15 were pastors or pastoral counsellors who had been serving back in South Sudan. Then 15 women and men leaders in the church some whom had also been leaders back in South Sudan but some took up these roles in Kenya, The study also had 20 parents who are members in the church as well as 10 youth representing the South Sudanese dysfunctional families. Christian believers with different ethnic groups and various social and professional classes, the qualification of these parents and youth is that they should have at least once received pastoral counselling. The youth picked were also still very dependent and vulnerable.

3.3.2 Study Location

Nairobi County has an area of 694 $km^2$and is the Capital City of Kenya; the largest city in Kenya and the second largest city in the African Great Lakes area with over 3.5 million residents. The county has nine districts namely, Westlands, Dagoretti, Kasarani, Langata, Starehe, Kamukunji, Embakasi, Njiru, and Makadara.

3.3.3 The Study Area

The research was conducted within the South Sudanese-based churches/places of worship in Kibera, Nairobi Baptist Church along Kibera Road and Kasarani because these areas were found to have a high number of South Sudanese refugees who despite being from dysfunctional families, professed Christianity and attended church or gatherings of worship with pastors.

(1) Kibera area: the administering of questionnaires, interviews and focus group discussions were been conducted in the South Sudanese church (Episcopal Church of South Sudan Branch of Mundri and Lui Diocese in Kibera Nairobi). The participants here readily availed themselves for the interviews whereby 6 pastors filled in questionnaires, 5 church leaders interviewed and a focus group discussion of 11 respondents held. 7 parents and 4 youths who had at least once received pastoral counselling took part in the focus group discussion.

(2) Baptist church along Kibera Road where 5 pastors filled in questionnaires, 5 church leaders were interviewed and 7 parents plus 3 youths who had at least once received pastoral counselling participated in a focus group discussion.

(3) The church in Zimmerman – Kasarani, where one focus group discussion was conducted among 6 parents and 3 youths who had at least once received pastoral counselling; interviews carried out with 5 church leaders; while questionnaires were administered to the 4 pastors.

The study areas were examined on 10/3/2019 in Kibera and Baptist Church along Kibera Road, then on 16/3/2019 in Kasarani. The pre-visits enabled the researcher to establish rapport with the respondents and also pre-test her questionnaire and interview guide. The focus group discussions, interviews and administering of questionnaires were then conducted in the three areas from the 23rd March 2019 to 5th May 2019 and a repeated visited on 11/August 2019 to 25 August 2019.

3.4 Sampling Procedures

This study employed the qualitative purposive sampling method; According to Kerlinger (1986: 147) purposive sampling is a non-probability sampling method that is characterised by the use of judgment and a deliberate effort to obtain representative samples by including typical areas or groups in the sample. The study, using purposive sampling, aimed at balancing the numbers of respondents from the three areas save for the pastors who varied from one church to the other. Mugenda and Mugenda (2003) also note that purposive sampling allows a researcher to use cases that have the required information concerning the objectives of his or her study. Purposive sample technique was the most ideal for the study. It enhanced access to South Sudanese dysfunctional refugee families that were found at the South Sudanese-based churches/places of worship in Kibera, Nairobi Baptist Church along Kibera Road and Kasarani. The total of 60 participants were chosen that were, 15 pastors, 15 women and men leaders in the church, 20 parents representing dysfunctional families as well

as 10 youth were considered adequate for the descriptive study. Social analysis theory help the researcher to understand the way in which society relates to refugees and develop guidelines enables him/her to do the study in understanding with the participants and know their social, psychological and spiritual challenges. The target population from three churches were 60 participants including pastors. Kibera church 22, baptist church 20 and Kasarani 18. The researcher selected the participants because of knowledge of the research problem to allow selection of appropriate persons for inclusion in the sample and from South Sudan origin. As the non-probability, not everyone will have chance to be selected only few pastors, women and men lay leaders in the church, parents, and youth who were members in the church and have background of pastoral counselling ideas. The main objective is to obtain both a desirable accuracy and a desirable confidence level with minimum cost (Ali, 2014).

3.5 Description of Research Instruments

This study used a descriptive design; with the reviews based on the effectiveness of pastoral counsellors with South Sudanese dysfunctional families living in Nairobi County. The study employed the primary tools for collecting data, which included interview guide, questionnaires and focus group discussion guide. The use of these various data collection instruments ensured validity, reliability and objectivity of data collected.Further, appendix I-III and IV indicates the interview guide, questionnaires, and focus group discussion interview guide that was drawn from the research objectives and there search questions.

3.6 Description of Data Collection

The study used qualitative method for data collection through individual interviews and filling of questionnaires as well as focus group discussions. The study used purposive sample of interests, through explanation, exploration and description to the individuals of what was needed.The desk literature reviews also ensured triangulation and objective for data collection. The study collected data through, observations and recording what the researcher have seen, heard or encountered in the field notes, she/he used interviews by asking questions in one-on-one conversations and take notes; Also in focus group was through asking question and doing discussion among a group of participants and distribution of questionnaires with open-ended and closed-ended questions, this was how the data was collected.

The research instruments were also per-tested with respondents/participants before commencement of the actual study to ensure they examined the effectiveness of pastors in helping those who are living as refugee families and who were going through difficult situations.

3.7 Validity and Reliability

The questionnaires and focus group discussion interview guides used in the study were tested (researcher introduced purpose of the questionnaire, confidentiality statement, voluntary participation, how to share in focus group, interview and to submit the questionnaire,) with 8 people, two from each group, of the target population before fieldwork to measure their appropriateness and consistency. Mugenda and Mugenda (2003) define validity as the degree of accuracy with which results obtained from analyzed data represent the reality of the phenomenon under study. In other words, the instrument measures what it is supposed to measure.To ensure that the study's research instruments developed accurately measured the

effectiveness of pastoral counsellors with dysfunctional families of South Sudanese living as refugees in Nairobi, the researcher discussed the meaning of all the significant terms with the supervisor beforehand. Further, according to Haladyna, 1999; Trochim, 2001; DeVon et al., 2007, validity is to evaluate the appearance of the questionnaire in terms of feasibility, readability, consistency of style and formatting and the clarity of the language, used. In addition, content validity is the extent that measures the effectiveness of pastoral counsellors with dysfunctional families of South Sudanese in Nairobi County.

Reliability refers to a measure of the degree to which a research instrument yields consistent results after repeated trials (Mugenda & Mugenda, 2003). The reliability repeats measurement constantly for the better results, (that should be equal or above 0.60). In-depth discussions on the interview questions were held with the pastors, church leaders and other respondents. This helped them fully understand and thus avoid distorted questions during interviews. Focus group discussions were held in the South-Sudanese based churches or places of worship, which were familiar to the respondents.

3.8 Description of Data Analysis

This research took a qualitative approach and thus the descriptivedata collected was analyzed through quantitative method, interpreted and inferred through triangulation of information that was employed, to explain the effectiveness of pastoral counsellors in helping the dysfunctional families and how they ought to address their problems.

Different data collection methods and instruments: interview guides, focus group discussions, questionnaires, desk review and field visits employed ensured that the analysis inform by data collected through the different tools used. Data analysis involved the interpretation of

the phenomenon or variables' method. Qualitative data analysis was through content analysis process methods of coding and summarizing into contents. Qualitative data were clustered and analyzed according to the variables. Quantitative data was analyzed through numbers and percent's (%) The identified independent variables were analyzed through review of existing documentation, field visits to undertake interviews and feedback from focus group discussions and other participants.

3.9. Ethical Consideration

The researcher adhered/stick to the ethical research guideline of confidentiality and the principles of ethical standard of code throughout the study, (confidentiality; respect for the client; clear boundaries; informed consent; dual relationship; no manipulation of the client and etc). According to Ikenye (2014:74) in a qualitative study, ethical research standards should be considered. The researcher adhered to the required ethical research principles as pointed out in the letter of research Authorization, National Council for Science technology and Innovation (Nacosti); letter from the County Commissioner Nairobi County; the letter from the County of Education, Nairobi County; as well as the letter from St. Paul's University.

The research participants were informed about the benefits of the research outcome besides; the study was conducted among Christians with sensitivity to every culture. In addition, the researcher informed the participants about the limits of confidentiality for the benefit of the participants and others. Further, the researcher upheld utmost respect towards all the participants, being aware of the well-being of each person, discipline, and professional as well as scientific responsibilities. Beside the researcher made an agreement with the participants through filling the consent form of confidentiality and the participants were free

to participate or not to participate. Where the researcher was not able to obtain a signed consent form due to language or literacy barriers, verbal consent for participation were sought.

3.10 Conclusion

This chapter outlines the methodology employed in the study. The qualitative and quantitative design employed has been in detail with methods for collecting data as well as instruments used, identified and presented. Additionally methods of analysis of the data collected been discussed in the chapter. In the final part, the ethical standards of conducting the study been considered.

CHAPTER FOUR

DATA ANALYSIS AND PRESENTATION OF FINDINGS AND DISCUSSION

4.1 Introduction

This chapter presents findings and analyses data obtained during the study regarding the effectiveness of pastoral counsellors in helping South Sudanese dysfunctional families living as refugees in Nairobi County. The findings were based on a purposive sample/Judgmental sampling of 60 participants from the three sites of study. The researcher used questionnaire, interview guide and focus group discussion guide then employed a descriptive method to present the findings as per the research objectives and questions. The data were present in the form of tables' content and analyzed through qualitative method.

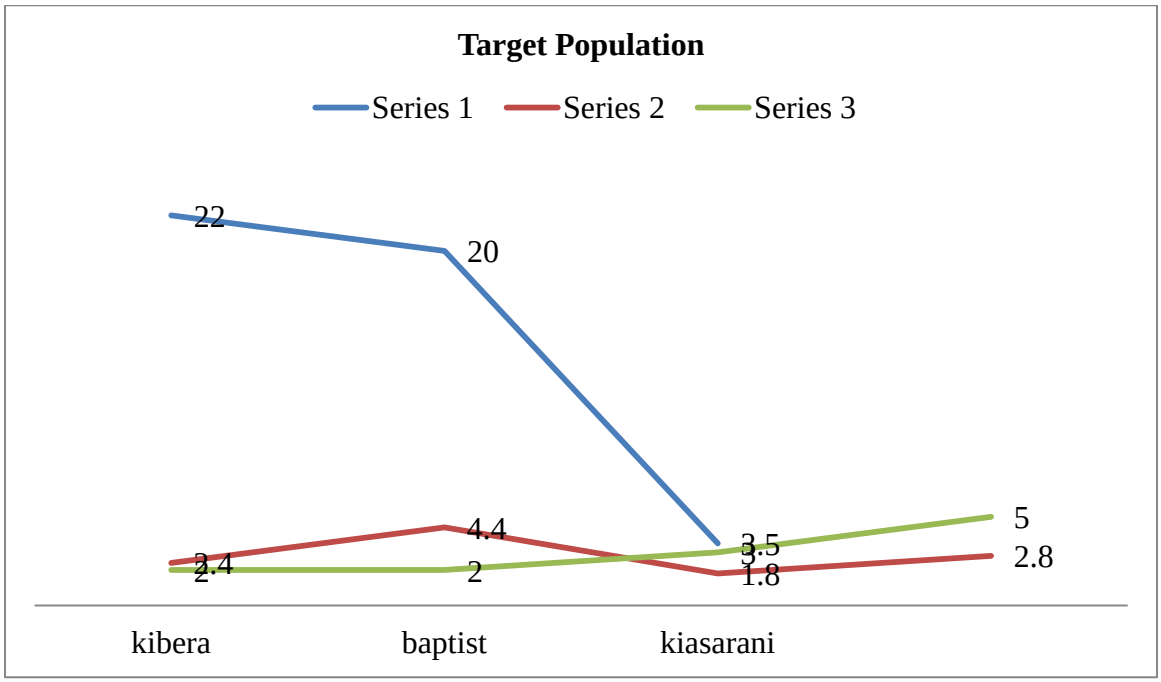
4.2Demographic Distribution of Respondents

Table4.2.1Shows Distribution of Targeted Population from the Three Areas of the findings

4.2.1 Distribution of Target Population

Respondents	**Pastors/pastoral counsellors**	**Church leaders**	**Parents, church members**	**Youth**	**Total**	**Percentages**
Kibera	6	5	7	4	22	**37%**
Baptist	5	5	7	3	20	**33%**
Kasarani	4	5	6	3	18	**30%**
Total	15	15	20	10	60	**100**

Target Population Chart, is the same information of the above (table 4.2.1)



The distribution of the target population from the three areas of the findings

Out of 15 pastors 13 responded, all the 15 church leaders responded, out of the 20 parents 18 responded and out of 10 youth, 9 responded. Therefore, from 60 participants, 55 responded giving a response rate of over 91 per cent. This is evidence that the study was successful and response rate satisfactory.

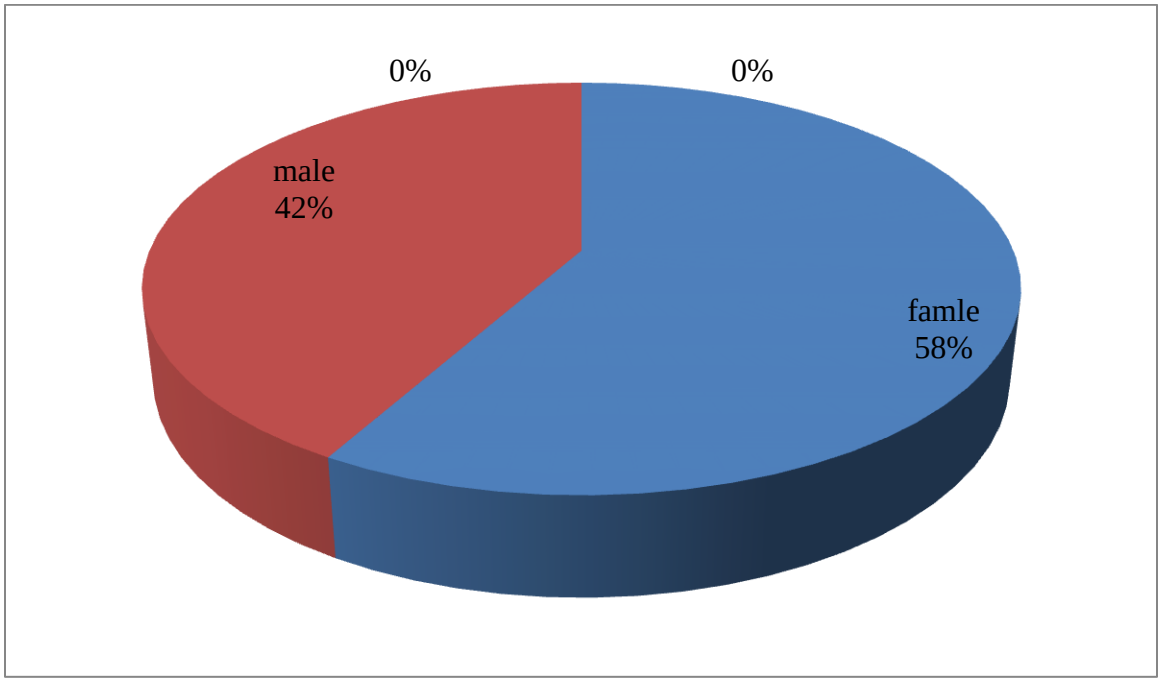
4.2.2 Distribution by Gender

The respondents were asked to indicate their sex and they responded as indicated in Table 4.2.2that explained only 55 respondents participated in the study, and the table also shows the findings, that there were more female respondents to the study than male respondents.

Table 4.2.2 Distribution of Respondents by Genders

Respondents	Pastors/pastoral counselors	Church leaders	Parents/ church members	Youth	Total	Percentages
Male	8	5	6	4	23	**42%**
Female	5	10	12	5	32	**58%**
Total	13	15	18	9	55	**100**

Gender distribution chart is the same (table 4.2.2)



32 (58%) females responded while only 23(42%) male respondents participated in the study. Majority of the participants were women since the majority of victims in South Sudan were women who had fled to Kenya leaving their men behind taking part in the civil war back home.However; it is good to note that there were more male pastors or pastoral counsellors than female.

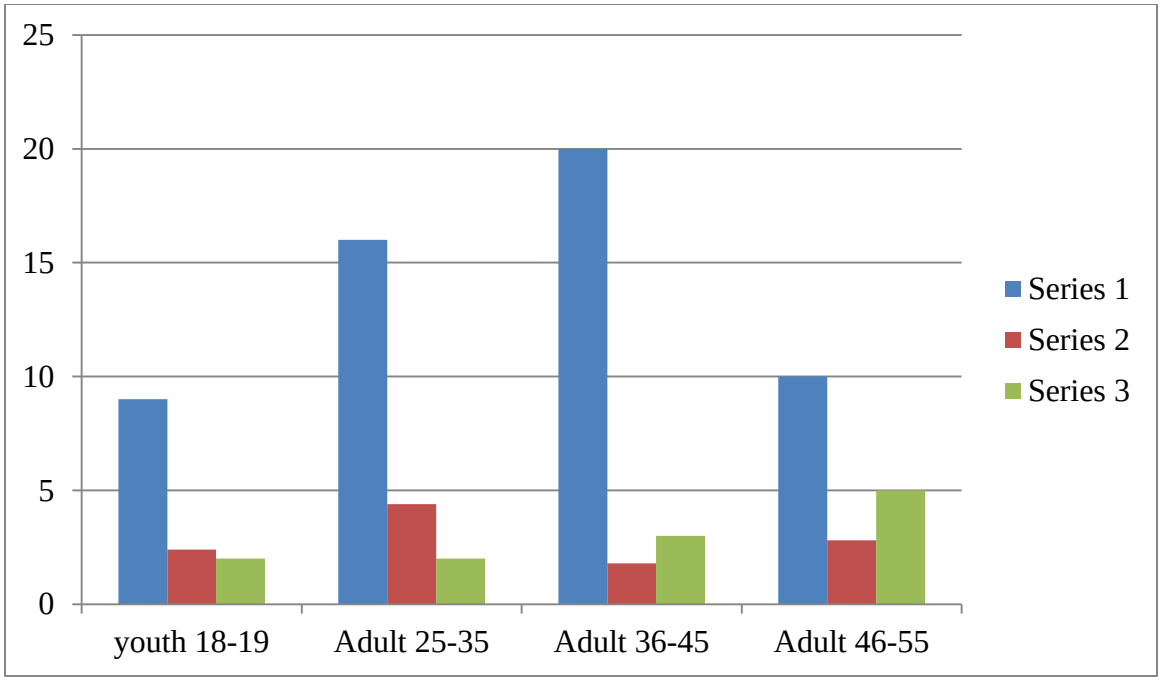
4.2.3 Distribution by Age

The majority of the participants from dysfunctional families interviewed in the study ranged between 25 to 55 years as adults while the youth were 18 and above but under 20 years. Table 4.2.3 shows the findings:

Table 4.2.3 Distribution by Age

Age	Number	Percentage
18 – 19 years (youth)	9	**17%**
25 - 35	16	**29%**
36 - 45	20	**36%**
46 - 55	10	**18%**
Total	55	**100**

Age distribution chart is the same information of the above (table 4.2.3)



From the table show an evident that most of the respondents were between 25 and 45 years old. These were from dysfunctional families, an indicator that they needed pastoral

counselling. Most participants were of the opinion that pastoral counsellors would play very crucial roles in these relatively families.

4.2.4 Distribution by Education Level

The respondents' educational levels ranged from those who reached tertiary level (college and university), secondary level and primary school level. Most of these participants had previously lived in different parts of South Sudan before coming to Kenya and from different ethnic groups. The study did not incorporate the completely illiterate because of language barrier, and being qualitative in nature, it depended on the quality of answers that the targeted respondents gave, and only those who has the knowledge of pastoral counselling and were from dysfunctional families living as refugees in Nairobi County. Table 4.2.4 show the findings.

Table 4.2.4 Distribution by the Education Level

Respondents	**Male**	**Female**	**Total**	**Percentage**
Primary level	4	15	19	**35%**
Secondary level	9	12	21	**38%**
Tertiary (college/university)	10	5	15	**27%**
Total	23	32	55	**100**

Most of the respondents had secondary level of education. However, there were more women with primary level of education than the men. Out of the 15 respondents who said they had tertiary education, 13 of them were the pastoral counsellors, that means that the pastoral counsellors had some kind of college education though as it would be seen later, 11 of them confessed they lacked knowledge in counselling according to the respondents' needs and statements; that they were inadequate of their role.

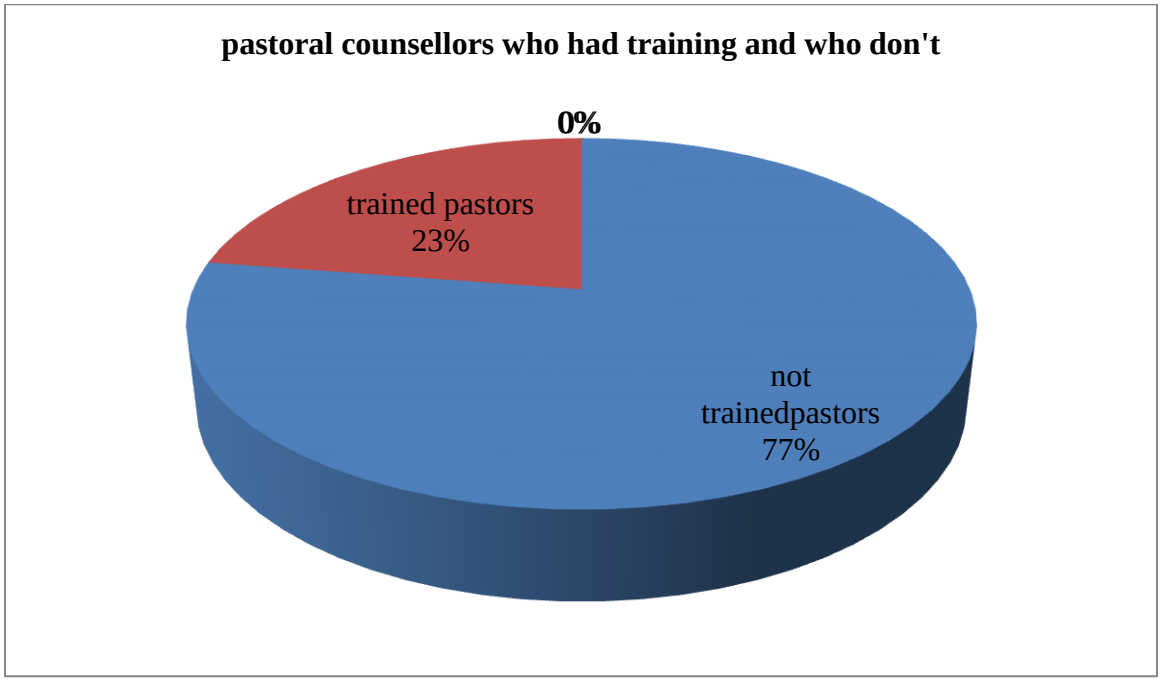
4.3 Level of Professional counselling Training among the Pastoral Counsellors in Helping the Dysfunctional Families

All the 15 pastoral counsellors were given questionnaires to fill. Only 13 questionnaires were fill and submitted back to the researcher, Table 4.2.5 shows the findings.

Table 4.2.5 Distribution of pastoral counsellor who had undergone training and who were not trained

Respondents	Not Trained	Trained	Percentage
Pastoral counsellors(trained)	0	2	**23%**
Pastoral, counsellors (not trained)	11	0	**77%**
Total	**11**	**2**	**100**

The chart described the same above table 4.2.5



Out of the 13 pastoral counsellors who responded, only 2(23%) of them said they had undergone pastoral training. The other 11(77%) said they only depended on their spiritual

theological knowledge to counsel those from dysfunctional families. It was clear that most of the pastoral counsellors did not then obtained pastoral counselling training to support their members from the dysfunctional families suffering since they did have little counselling backgrounds. However, few pastors took up the role easily because they already got pastoral training.

From the three focus group discussions, the parents and youth who participated were asked if they thought the pastors who had counselled them before were professional enough. They all categorically responded in the negative way. These participants almost unanimously said that the pastors/counsellors only addressed the spiritual aspects of their needs and left out the emotional and physical needs. One of the women in Kasarani FGD explained that:

> I went to pastor for help about my situation and tell him that I have six children, since we ran from South Sudan, nobody was helping me, to pay rent, school fees, and feeding, my husband may send money until the end of the year, now my two children were chased from the school because of the balance of school fee, that I cannot afford to pay and two days now I do not have flour to cook for my children, I do not know what to do? I really expected pastor would listen to me and give me something for my children. Instead, the pastor only prayed for me and told me that it shall be well with you. (FGD Kasarani)

From the interviews conducted across the 3 sites on a total of 15 church leaders where 10 of them were women and 5 men, all the respondents expressed their views that the pastoral counsellors' professional level was wanting. These leaders who have also dealt with their own life difficulties such as marriage issues, divorce, loss, trauma, violence, post-traumatic stress disorders or even death, said that since the pastors were not trained they often did not meet their delicate needs. Also, as church leaders, they confirmed that they often talked to the church members after being counselled and many always confirmed their frustration especially when they felt that their psychological and social needs were not met.

4.4 Discussion of Findings

This section provides a contrast and comparison analysis of the findings in reference to works undertaken by other scholars on the effectiveness of pastoral counselling. The discussion is guides by the overall objective of the study, which was to assess the effectiveness of pastoral counsellors in helping dysfunctional refugee families of South Sudanese living in Nairobi County.

4.4.1 Discussion on Objective One

Findings from this study echo with arguments brought forward by other scholars such as Wambugu (2013) who argues that since pastoral counselling is still new in Africa, pastoral counsellors lack adequate professional training to effectively carry out their role; this is why the pastors are facing challenges in responding to dysfunctional family issues. Miller and Rasco (2004) argued that it is important for pastoral counsellors to be more schooled in psychological counselling in order to be well equipped to handle the diverse challenges of refugees, a stand this study agrees with. The study also agrees with Boisen, one of the founding fathers of pastoral counselling, who felt the need to train pastors to work effectively with those going through PTSD and other psychological issues.

Christodoulidi and Lago (2010) stated that if effectively utilized, pastoral counselling can manage to control both the psychological and physical challenges refugees face. The study agrees with this as it shows that for professional counsellors to be effective, they need to look at the whole person, identifying the importance of a person's mental, emotional, social, physical and spiritual well-being. This justifies by the findings in (page 47) the respondents especially the youths often felt threatened by the pastoral counsellors and were motivated to change more out of fear.

For Example, a pastor asked one of the youth.

> I heard that your problem was a result of sin, was it sexual sin. Do you know how deep God's forgiveness is? No matter what had happened, you can ask God to for you, God is just waiting, for you to come back to him, do not carry the burden of your sin, because he is a pastor I fear to argue with him.

Another respondent amongst the youth narrated to a pastor that;-

> I was facing abuse from my stepmother, and I do not have a place to go, my parents died during the civil war, but the pastor said to me, the Bible teaches us that you must obey the elders so that you may live long (FGD, baptist)

This shows that pastors should be competence and professional in dealing with such issues of the dysfunctional families who were in post-traumatic and psychological problem.

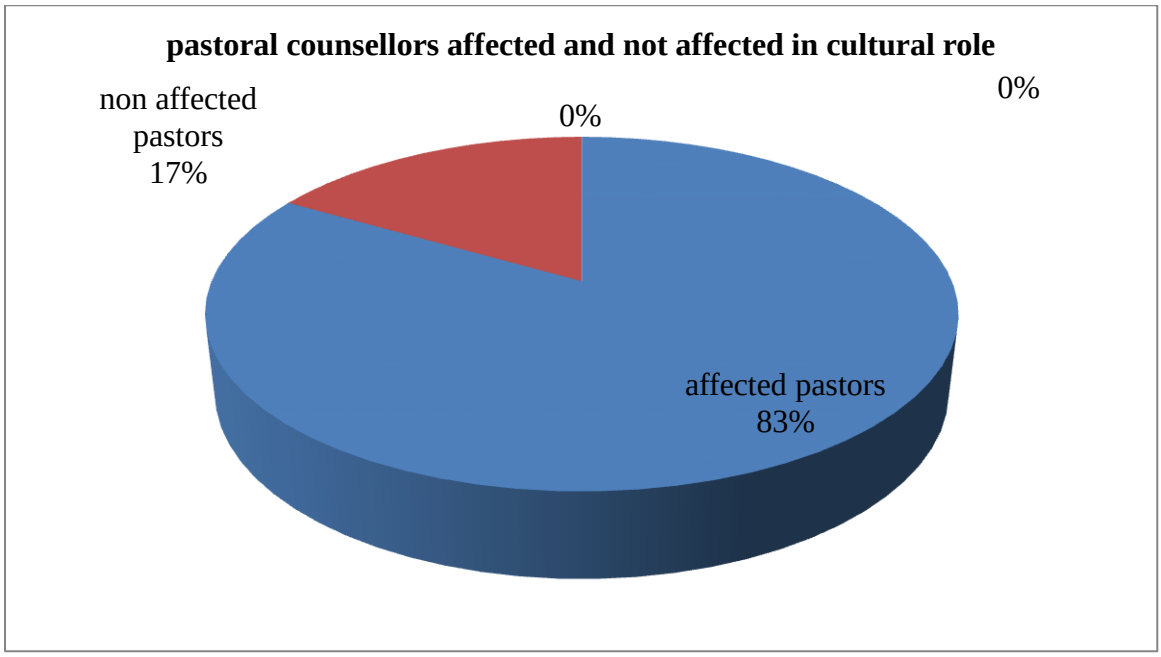
4.5 Cultural Influence on the Pastoral Counsellors

The pastoral counsellors were asked to state if their own cultural background and/or that of their clients affected their role. Ten (83%)of the pastoral counsellors acknowledged that it affects them.3 (17%) pastors stated that some of their clients felt more at ease when they felt the pastors' level of spiritual maturity matched theirs. They said that this was an observation made more among the older clients who sometimes showed contempt openly to the younger pastors since they assumed they had not matured enough spiritually to be able to handle their refugee issues. Table 4.2.6 illustrates the findings

Table 4.2.6 Pastoral Counsellors Cultural Background Role

Respondent	**Affected role**	**Not affected**	**Percentage**
Pastoral counselors who acknowledged the effect were	10	-	**83%**
Pastoral counselors who were not affected	-	3	**17%**
Total	10	3	**100**

The chart is described the above table 4.2.6



A bigger percentage of pastors, 8 out of the thirteen (62%) responded that most of their clients opened up more and were free with the therapist when they realised the pastoral counsellor shared the same ethnic background back home. Often, they would switch to their local language with the counsellor and ended up opening up to more of the issues that affected them as refugees from dysfunctional families. Two male pastors stated that they found it difficult to comfort female clients who often broke down in their presence during counselling sessions. They said this was a major challenge since most of the clients seeking counselling were women from the dysfunctional families and as many were on their own vending for their families single hand, it led to overwhelming. On the other hand, the three female pastors stated that most of the men from the dysfunctional families shied off from opening up to the female pastors even if it was clear they needed help. Table 4.2.7 shows the findings:

Table 4.2.7 Pastors who their clients open up and pastors who found difficulty from their clients

Out of thirteen pastoral counsellors	**Male**	**Female**	**percentage**
Pastoral counsellor who client open up	6	2	**62%**
Pastoral counsellors who clients not open up because of gender issue	2	3	**38%**
Total	8	5	**100**

This chart is for the above table 4.2.7



A man from the respondents mentions that in my traditional belief:

"I should not share my secret with a woman, that will make me weak, also another reason for not to share my problem because women were not hiding the secret and also women are under man". Three female pastors said that the men would approach them for help but end up keeping their discussions so general making it difficult to be reached out to. It is very

important that all pastoral counsellors be members of a pastoral counselling body in order to uphold integrity and professionalism in their duties guided by the pastoral counselling ethics. This will enable them to be committed to the various theologies, traditions and values of faith communities, and to the dignity and worth of each individual. It will also enable them to be dedicated to advancing the welfare of those who seek their assistance and to maintain high standards of professional conduct and competence, (Crabb 2007: 655-672).

From the focus group discussions and interviews across the three sites of study, most respondents noted that the pastoral counsellors, who tried to help them, did not really understand their clients' family background and environment. They noted that some families out of distress have cultivated an unhealthy culture of drunkenness, consistent domestic violence, fighting, marriage infidelity, disobedience towards their spouses and often these habits have influenced the way children to grow up and responded to situations, consequently creating a pattern of ill-behaviour that has eventually become a culture. The participants insisted that if pastoral counsellors kept ignoring these elements, then their effort would not yield any fruits.

4.5.1 Discussion on Objective Two

The research study findings echo with what Mollica (2006) argues that a pastoral counsellor should be aware of cultural differences and how they may affect the counselling relationship otherwise, a pastoral counsellor may act unethically when cultural differences are not considered. The pastoral counsellors interviewed in this study confirmed that culture affected how they related with their counselees whereby the male pastors felt they were hinder from

consoling their female clients fully while the female pastors felt their male clients held back. This conquers with the observation that:

The ‘religiousness gap’ has been studied and acknowledged before by a number of scholars (Guinee & Tracey 1997; Keating & Fretz 1990; Mayers et al., 2007). The research study agrees with these scholars in that the findings show that the counselees tended to be at ease approaching pastoral counsellors whom they felt resonated with them in their level of spirituality.

Keating and Fretz (1990) studied and highlighted how sometimes counselees resisted in engaging with a counsellor when there were mismatched characteristics (e.g. race, age, gender). In support of this, the research study findings confirmed this on the issue of ethnic and gender inclination when it came to how the dysfunctional families were ready to uptake pastoral counselling. The research findings indicated that male clients were more comfortable in being counselling by male pastors and either gender were more at ease with counsellors who shared with them an ethnic background.

4.6Church Support on Pastoral Counsellors

This question was posed to both the pastoral counsellors and the church leaders. Most of the participants (the pastors, women leader and clergy), stated that the churches were not sending more people for pastoral counselling training in well-established colleges and/or universities to gain professional skills. According the respondents, argue that some of the pastoral counsellors lacking professional skills in counselling often have difficulty in self-acceptance, low self-esteem; which is being aware of their emotional strength, poor self-discipline, their

need to respect and accept responsibility and accountability. According to these participants (pastors, women leaders and counsellors) who are less trained often cannot help clients' issues with competence; it is common to find discrimination, biased judgment, poor listening skills and unethical relationships that lack professional boundaries. These responses were greatly because most clients who seek counselling are women are vulnerable. Therefore, counsellors' must-has skills of how to help and lead these families in a better decision to move on with life.

Most of the pastors (9 out of the 13 who responded) indicated that they lacked enough financial support from the church to help them carry out their duties of pastoral counselling effectively. They indicated often that their clients had material needs they would wish to chip in and meet for example sending away a client with some money for food, but they often would not do this because of financial limitation.

4.6.1Discussion on Objective Three

The research findings show that majority of participants (both pastors and those who represented the dysfunctional families) argued that the church needs to support/give training for pastors to obtain the competence and techniques and procedures of how to work for the benefit of a whole person's well-being. This argument was mirrored in McSwain and Treadwell (2010) who argue that a pastoral counsellor should have access to necessary training and qualified supervision from the church. The research study confirms that the pastoral counselors do not get enough financial support from the church, which is an important incentive in conducting their work effectively.

4.7 The Best Practices or Strategies used by the Pastoral Counsellors in Helping the Dysfunctional Families

4.7.1 The Rights of the Counselee

In the focus group discussions, the respondents were asked if they ever felt the pastors put them in a position of dependence through biblical threats and manipulation during counselling. Generally, the respondents especially the youths often felt threatened by the pastoral counsellors and were motivated to change more out of fear. Counsellors need a good measure of concern/or care in applying the scriptures to other people's lives. This shows that pastors should be competent and professional in dealing with such issues, and expertise to counsel the dysfunctional families who were in post-traumatic problem.

In the questionnaires, pastoral counsellors were ask to state if they consciously adhered to the AAPC guidelines that emphasised counselee's need for empowerment. Some of the pastoral counsellors said they often failed to achieve this because their clients needed to be direct on what to do rather than being guide through dialogue.

4.7.2 Confidentiality of Sharing Personal Information

This question was posed to the respondents in the focus group discussions if they felt the pastoral counsellors upheld their confidentiality. The respondents especially the youths felt their privacy was infringed because they were often counselled in groups and not separated individually. They also said sometimes their issues were escalated to their parents by the pastoral counsellors without their consent. One of the women in Baptist Church also narrated how she felt offended when she heard her pastor refer to her issue in a congregation when she had shared it with him in privacy.

4.7.3 Visiting the Members and Meeting Their Material Needs

Out of the 13 pastoral counsellors who filled the questionnaires, only five said they made it a habit to visit their clients' homes. They said that this was the key in that; it hastened the healing of the dysfunctional families for they felt a sense of social acceptance. During the focus group discussions across the three sites, majority of the participants especially women and youth shared that pastoral counsellors needed to visit their church members in their homes to know exactly what affected them. One of pastoral counsellor mentions that:

"(We must visit the families of our members, to know the problems that are facing them. As a pastor, is very important to visit and listen to client's problem.)" They said pastors and counsellors needed to visit and listen to the client's problem to build and win trust from their clients. Establishing a good rapport with the clients allowed collaboration towards solving one's burning problem.

Out of the 15 church leaders interviewed, a majority of them (12) argued that to address or solve the problem of dysfunctional families, the pastors needed to visit these homes to understand the real issues the families were ailing.

Five of these leaders also encouraged that the pastors even needed to carry some foodstuffs for these families to meet these dysfunctional families' immediate needs. They argued that the counsellors should do beyond their professional requirements by being more compassionate especially to dire cases.

One-woman leader also argued that she wished the pastoral counsellors would help the youth identify their talents and use them to develop themselves. The participant mentioned that counsellors should teach the youth people to admit and accept their situation and learn to

identify and set goals for themselves. She said that if the pastors encouraged the youth to study and work they would help promote self-reliance thus solving the dependency issue among most dysfunctional families.

Another woman leader also during her interview argued that the pastoral counsellors' should teach parents the practical parenting strategies of how to manage their families and children.

> "She mention that children are coping the lifestyles of their parents, if the parents are alcoholic, hostile or fighting, the child will adopt the same habits, like the example of a boy who's both parents were alcoholic, he became a drunkard and worst then his parents. She continues said, children must have best foundation of love and care so that they can have a sense of capability, and this will happen through good parenting style. (Interview, Kibera).

Another respondent mentioned that:-

> The woman continue mention that she has a neighbour, because the husband is far she started misbehaving, going out to search for the living, and will come at the late time unfortunately she has a daughter that seeing her movement and start behaving the same(interview in Kibera).
>
> Therefore, pastoral counsellors need to teach parents parenting strategies.

4.7.4 Discussion of objective four

Richard (2010) stipulated that pastoral counsellors needed to be professional and protect the rights of the counselee ensuring he or she is independent of the counsellor. He noted that it is more effective and loving to conduct the counselling session professionally with the counsellor being primarily conscious of the counselee's need for empowerment. This stand is reflect in the research findings that also advocate for professionalism and that pastor must stick on to the AAPC guidelines, emphasising the counselee's need for empowerment. The finding shows that pastors hardly met these criteria and often ended up putting the counselees in a state of dependence or feeling threatened which is unprofessional.

On the issue of confidentiality, the study agrees with what Wheeler (2002) says that counselees' privacy must always be upheld. The research study findings showed that respondents felt their privacy was violated because they were sometimes counselled in group, and not in separated individually or their issues shared with third parties without their consent.

The study revealed that it was a good idea for the pastors to visit the dysfunctional families to understand their issues better, a finding that resonates with Ikenye's study (2014), which stipulates that pastoral counsellors have an attitude of visiting member's families to encourage and counsel those who have issues as well as share a prayer with them.

4.9 Conclusion

In this chapter, the researcher has presented an analysis and interpretation of the data collected and the key findings from the field based on the objectives that were set in chapter one and discussion. In the succeeding final chapter summary of the findings, recommendation, and conclusion to the study and suggested area for further research will being present.

CHAPTER FIVE

SUMMARY OF FINDINGS, CONCLUSION AND RECOMMENDATIONS

5.1 Introduction

This chapter outlines a summary of the key findings from the study and discusses the findings in concerning the study objectives.The chapter also presents recommendations targeting all stakeholders in pastoral counselling, especially in helping dysfunctional refugee families. The chapter further presents the conclusion of the study and identifies areas for future research.

5.2 Summary of the Key findings

Findings from the study reveal that most of the pastoral counsellors helping the South Sudanese refugee families were not professionally train to take up their role effectively. This means that these pastoral counsellors did not have the required skills to be able to link both modern psychotherapy and spiritual counselling while helping the refugee families in solving various issues such as post-traumatic stress disorder (PTSD), depression, recurrent nightmares, insomnia, chronic anxious arousal, impaired concentration and irritability among other issues. Therefore, most of these pastoral counsellors ended up addressing only the spiritual needs of the counselee while ignoring his or her psychological, emotional and physical/material needs.

The study found out that culture influenced the role/effectiveness of pastoral counsellors in four areas. First, there was the issue of the level of spiritual maturity whereby if a client felt the pastor was not mature enough spiritually – an aspect that was often confused with the age

of the pastor – then the client might show open contempt to the pastoral counsellor and end up terminating the counselling service or feeling underserved.

Secondly, there was the issue of ethnicity of the pastor whereby the counselee felt more at ease with a pastor he or she shared an ethnic group with, back home and would even change to the local language for ease of communication. Out of 13 pastors, 8 (62%) pastors who their client opened up more and were free because they shared the same ethnic background. Thirdly, gender played a significant role in influencing the effectiveness of pastoral counselling as some of the male pastors said they found it hard to comfort their female clients, who were the majority 32(58%) and on the other hand the female pastors felt their male clients found it hard to open up to them fully.

Lastly, there was the issue of family culture where most of the FGD respondents felt that the pastors never cared to understand their family culture before embarking to help them as dysfunctional families.

The findings from the study show that both the pastors and the lay church leaders (clergy) felt that the church was not sending more people for pastoral counselling training in well-established colleges and/or universities to gain professional skills. As mention in the finding that only 2 (23%) were trained pastoral counsellors and 11(77%) were not trained. The pastors also indicated that the church was not giving them adequate financial support to help them carry out their role of pastoral counselling effectively by meeting both psychological and material needs of their clients from the dysfunctional refugee families.

Besides, the study reveals that often most of the pastoral counsellors failed to stick to the AAPC guidelines that emphasises client's need for empowerment as mention in (page 54)

these pastors ended up putting the counselees in a state of dependence or feeling threatened which is not acceptable. On the issue of confidentiality, the study showed that respondents felt their privacy was infringe because they were often counselling them in groups and not separated individually or sometimes their issues shared with third parties without their consent.

The study revealed that it was a good idea for the pastors to visit the dysfunctional families to understand their issues better though not many of the pastors were making the visits. Some of the respondents also felt the pastoral counsellors needed to go an extra mile and teach the parents from dysfunctional families on good parenting strategies and the youth on how to identify their talents and develop them into being independent and self-reliant.

5.3 Conclusion

In conclusion, South Sudanese pastors/ pastoral counsellors should be competence and professional in dealing with issues of dysfunctional families. Consequently, pastors have to be professional trained to deal with both sexes during counselling session without difficulties, besides, South Sudanese churches need to support pastors by sending them for further training and high education for improving their aptitude. Thus pastoral counsellors must stick-on the AAPC guideline while emphasising the counselee needs for empowerment and keeping the confidentiality.

There is a great need for pastoral counsellors' intervention in the lives of the dysfunctional families of South Sudanese living in Nairobi County, and most likely, the same need could be feel in another area where refugees live. This makes the effectiveness of pastoral counsellors critical and thus the critical need to have this role effectively carried out cannot be over emphasised.

5.4 Recommendations

The study makes the following recommendations:

- That in order for pastoral counsellors to effectively support the South Sudanese dysfunctional families as refugee living in Nairobi, various South Sudanese churches and relevant institutions needs to device support programmes to enhance relevant professional training of these pastors.
- South Sudanese pastoral counsellors or others need to be more schooled in psychological counselling and trained to work effectively with those going through psychological, emotional, and physical issues.
- Professional counsellors to be effective, they need to look at the whole person, identifying the importance of a person's mental, emotional, social, physical and spiritual well-being.
- Pastoral counsellors should be aware of cultural difference and how to, they may affect the counselling relationship, so that they may act ethically.
- Majority of participants (both pastors and those who represented the dysfunctional families recommended that the church needs to supports/give training for pastors(south Sudanese pastors) to obtain the competence , techniques and procedures of how to work for the benefit of a whole person well-being.
- Pastors/pastoral counsellors must stick on to the American Association of Pastoral counsellors (AAPC) guidelines, emphasising the counselee's need for empowerment.
- For the confidentiality issues: pastoral counselors need to conduct counseling session separately not in group to protect clients privacy

- Pastoral counsellors should strive to understand the cultural background of those they intend to counsel in all the four areas (spiritual, gender, ethnic and family culture) so as it becomes easier establishing ground for a holistic healing process.
- Pastors should be conscious of the fact that apart from regular preaching, their major concern should be the holistic well-being of the congregation.
- South Sudanese Pastors need to visit and have time of prayer and encourages these dysfunctional families.

5.5 Recommendations for Future Research

This research was only limited to the effectiveness of pastoral Counsellors in helping the dysfunctional South Sudanese families living as living refugees in Nairobi County, yet given the diverse needs in these families, more research needs to be done on the interventions needed to provide holistic solutions for these kinds of families. There is also a need for further study to establish whether pastoral counselling exists back in South Sudan and how effective it is. There is also a gap that researchers need to fill up through similar or related researches by delving/investigating more into the role of pastoral counselling with trauma, pastoral counselling with marriage and family, etc.

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APPENDICES

APPENDIX I: QUESTIONNAIRE FOR PASTORS/PASTORAL COUNSELLORS

Effectiveness of pastoral counsellors in helping South Sudanese dysfunctional refugee families living in Nairobi County, Kenya

Dear respondent,

I invited you all to participate in the exercise and thereby respond to the questions of the study about pastoral counsellors effectiveness within the church community, researcher/ I will give everyone freedom of chooses, are you willing? If yes, please answer the questions below.

A. Yes

B. No

Personal Information

Gender: Female		Male	
How old are you?			
Ethnic group in your home country:			
What is your location?	Kibera	Baptist	Kasarani
What is your education level?			
How long have you been a pastor?			
What is your professional qualification as a pastoral counsellor?			

Level of Professional Counselling Training that the Pastoral Counsellors have in Helping the Dysfunctional Families

1. How have you obtain your professional as pastoral counsellors

   _____

2. do your attained skills help you play your role better as a pastoral counsellor when handling clients from dysfunctional families? If yes how

_____

3. If you said no in question 1, do you think your lack of professional skills affect your role as a pastoral counsellor?

   In which way_____

4. Does your spirituality influence how you counsel dysfunctional families? Explain

   Why?

_____

5. Will you advocate for more professional trainings of pastoral counsellors so as to help clients from dysfunctional families better? Describe

_____

Cultural Influence on the Pastoral Counsellors

1. Which more clients from dysfunctional families seek counselling services from you in terms of their gender?

   A. Male

   B. Female

   And how are you handling them_____

2. Do you find it difficult to counsel clients from dysfunctional families of the opposite gender?

   A. Yes

   B. No

   Why?

_____

3. When you get clients from dysfunctional families who share with you a similar ethnic background at home, do you feel they feel more at ease with you than those from other ethnic backgrounds? Explain

   Why?

_____

4. Are there clients from dysfunctional families who despise your services because they feel more spiritual than you?

   A. Yes

   B. No

Why?

_____

5. Do you find out about the family background of your clients from dysfunctional families of the opposite gender?

   How?

   _____

Church Support on Pastoral Counsellors

1. Do the church support pastoral counsellors by sending them for professional training so that they can help clients from dysfunctional families (or any other client) better?

   Ifyes,how? _____

2. How does the church support pastors/pastoral counsellors to enable them help clients from dysfunctional families better?

   _____

3. What other kind of support do you think the church can offer pastors/pastoral counsellors to enable them help clients from dysfunctional families better?

   _____

The Best Practices or Strategies used by the Pastoral Counsellors in Helping the Dysfunctional Families

1. Do you know the rights of your counselee?

   A. Yes

   B. No

   If yes, how do you ensure clients from dysfunctional families enjoy these rights?

   _____

2. Do you consciously ensure confidentiality of your counselees from dysfunctional families?

   If yes, how?

   _____

   If no, why?

   _____

3. Do you visit your counselees from dysfunctional families?

   A. Yes

B. No

If yes, how often?

_____

4. When/if you visit members from dysfunctional families, do you feel a need to carry them any material goods?

   A. Yes

   B. No

   If yes, why? _____

5. Have you ever as a pastoral counsellor taught the dysfunctional families about parenting?

   A. Yes

   B. No

   If yes, how often? _____

6. Have you ever as a pastoral counsellor mentored the youth from the dysfunctional families to help them grow into independence?

   A. Yes

   B. No

   If yes, how often?

Additional Information

1. Do you have any additional comments as regards:

A. Professional level of pastoral counsellors

_____

B. Cultural influence on pastoral counsellors_____

C. Church support on pastoral counsellors_____

D. Strategies used by pastoral counsellors_____

E. Any other_____

2. What recommendations/suggestions would you give to make pastoral counselling in helping dysfunctional refugee families better?

_____

APPENDIX II: INTERVIEW GUIDE FOR THE LAY CHURCH LEADERS

Effectiveness of Pastoral Counsellors in Helping South Sudanese Dysfunctional Refugee Families Living in Nairobi County, Kenya

Date: _____

Venue: _____

Interviewer: _____

Interviewee (optional) _____

Personal Information

Gender: Female		Male	
How old are you?			
Ethnic group in your home country:			
What is your location?	Kibera	Baptist	Kasarani
What is your education level?			
How long have you been a church leader?			

1. Are the pastoral counsellors in your church professionally trained to help the South Sudanese dysfunctional refugee families? How do you confirm this?
2. Do you ever talk to the counselee members from the South Sudanese dysfunctional refugee families? Do they say they get a satisfactory service? If no, why?
3. What support does the church offer the pastoral counsellors to enable them counsel dysfunctional refugee families better?
4. Would you know of any unique strategies that pastoral counsellors use to help the dysfunctional families of South Sudanese?
5. As a church leader, how have you witnessed cultural influence on pastoral counsellors as they carry out their role of helping dysfunctional families?
6. Do you have any recommendation on what the pastoral counsellors can do to support the dysfunctional families living in Nairobi or anywhere in Kenya?
7. Do you have any recommendations for the church on how it can support pastoral counsellors to help refugee families better?

APPENDIX III: FOCUS GROUP DISCUSSION GUIDE

Effectiveness of Pastoral Counsellors in Helping South Sudanese Dysfunctional Families Living as refugees in Nairobi County, Kenya

Date: _____

Venue of FGD_____

Group (Adults or Youth, both) _____

Gender (Men, Women, both) _____

Age range of participants' _____

Education range of participants' _____

Number of participants in the FGD_____

1. As counselees, did you find the pastoral counsellors professional enough to help you with your unique needs as members from the refugee families? Why?
2. As a counselee from the South Sudanese refugee families, can you say you were satisfied when you sought the services of the pastoral counsellor? Why?
3. How do you think your ethnic background or that of the pastoral counsellor affected the level of service you got?
4. How does the level of your spirituality influence the pastoral counsellor you approach for help?
5. How does your gender influence the pastoral counsellor you approach for help?
6. Do you think your rights as a counselee (independence and confidentiality) were held up? How?
7. Did you expect any material help from the pastoral counsellor when you approached him or her for help?
8. As members from the refugee families would you welcome advice from pastoral counsellors on parenting or youth mentorship? Why?
9. Do you wish that pastoral counsellors visited in your homes to know and help you better?

10. What did you wish the pastoral counsellor did/knew so as to help you better when you sought for counselling?
11. Do you have any recommendation on what the pastoral counsellors can do to support the refugee families living in Nairobi or anywhere in Kenya?
12. Do you have any recommendations for the church on how it can support pastoral counsellors to help refugee families better?

APPENDIX IV: SOUTH SUDAN MAP WITH THE DIVISION OF THE STATES AND BORDERING COUNTRIES

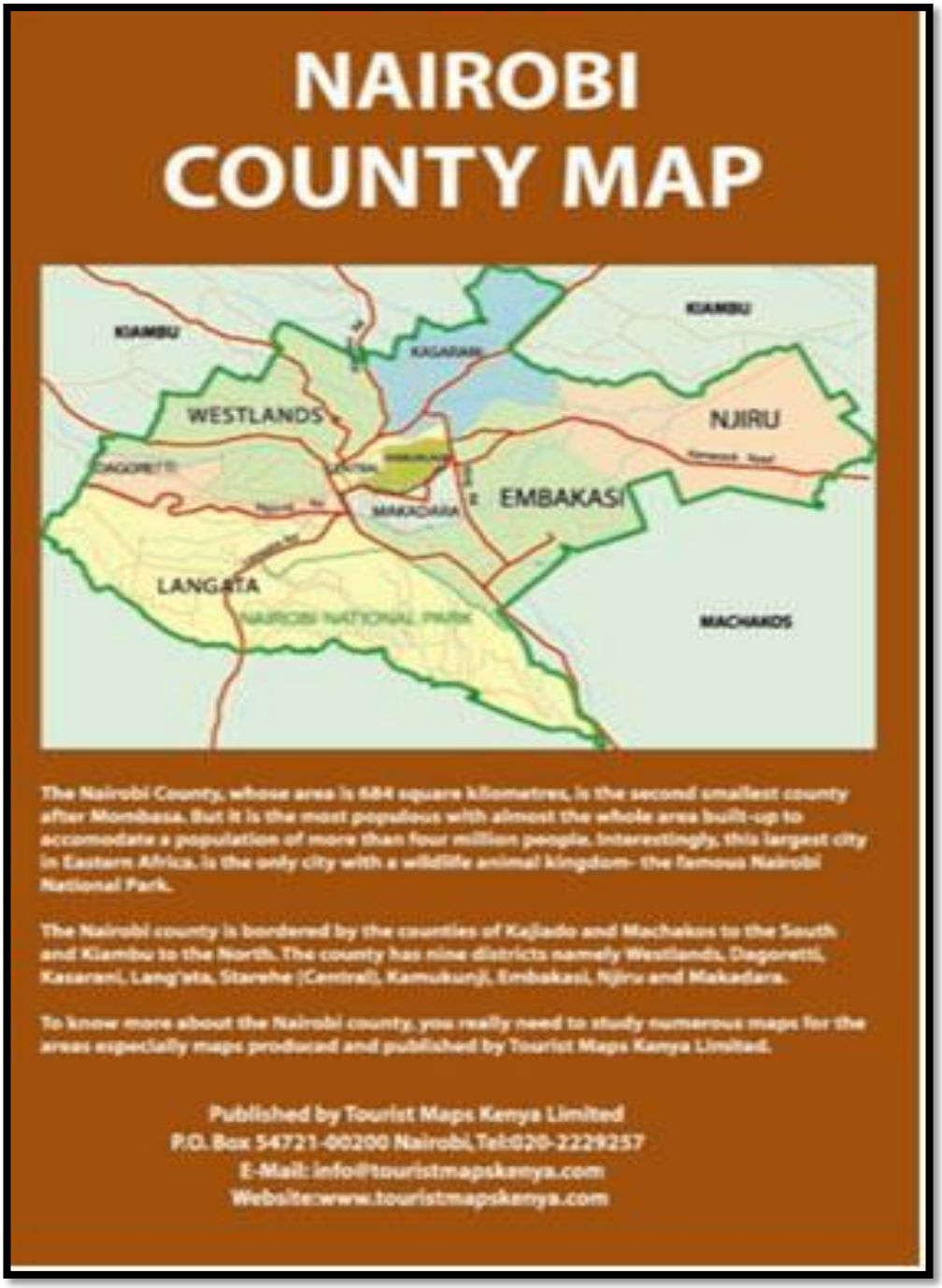


South Sudan map/ geography of South Sudan /map of …World sat Encyclopaedia Britannica, In World Atlas Map: Google website



APPENDIX V: MAP OF NAIROBI COUNTY THE STUDY AREA

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Tourist map Kenya limited Google website

APPENDIX VI: RESEARCH PERMIT REQUE

ST. PAUL'S UNIVERSITY

Private Bag 00217 LIMURU, KENYA
Email: postgraduatestudies@spu.ac.ke
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Tel Office: +254 (0) 20-2020505/10
Mobile: +254 (0) 728-669000
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BOARD OF POSTGRADUATE STUDIES

National Commission for Science, Technology and Innovation
Off Waiyaki Way, Upper Kabete
P.O Box 30623, 00100
Nairobi, KENYA.

Dear Sir/Madam,

RE: LADO SANTA LUDIA MARK - MTHLMR101718

This is to confirm that the above named is a final year student of St. Paul's University registered for Master of Theology.

The final year consists of a major research work leading to a dissertation comprising 20,000 words. The student's selected topic is:

THE ROLE OF PASTORAL COUNSELORS WITH SOUTH SUDAN DYSFUNCTIONAL FAMILIES LIVING IN NAIROBI

The research will take place in NAIROBI COUNTY County from March 2019 to May 2019.

Kindly grant the student the required permit.

Yours Faithfully,

BOARD OF POSTGRADUATE STUDIES ST. PAUL'S UNIVERSITY 01 MAR 2019 KENYA TEL: 020 - 2020505 / 2020510 P.O. PRIVATE BAG - 00217, LIMURU.

Regina Ndinda
For: Dr. Sammy Githuku
Director, Postgraduate Studies

APPENDIX VII- RESEARCH AUTHORIZATION, MINISTRY OF EDUCATION

Republic of Kenya

MINISTRY OF EDUCATION

STATE DEPARTMENT OF EARLY LEARNING AND BASIC EDUCATION

Telegrams: "SCHOOLING", Nairobi
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NAIROBI REGION
NYAYO HOUSE
P.O. Box 74629 – 00200
NAIROBI

When replying please quote

Ref: RCE/NRB/RESEARCH/1/64/VOL.I

Date: 15th March, 2019

Santa Ludia Mark Lado
St. Pauls University
P. O. Private Bag - 00217
LIMURU

RE: RESEARCH AUTHORIZATION

We are in receipt of a letter from the National Commission for Science, Technology and Innovation regarding research authorization in Nairobi County on *"The role of pastoral counselors with South Sudan Dysfunctional Families living in Nairobi County, Kenya".*

This office has no objection and authority is hereby granted for a period ending **12th March, 2020** as indicated in the request letter.

Kindly inform the Sub County Director of Education of the Sub County you intend to visit.

REGIONAL COORDINATOR OF EDUCATION
NAIROBI
16 MAR 2019

SHINU SINTAYO
FOR: REGIONAL DIRECTOR OF EDUCATION
NAIROBI

Copy to: Director General/CEO
National Commission for Science, Technology and Innovation
NAIROBI

APPENDIX VIII- RESEARCH AUTHORIZATION, NACOSTI

NATIONAL COMMISSION FOR SCIENCE, TECHNOLOGY AND INNOVATION

Telephone:+254-20-2213471,
2241349,3310571,2219420
Fax:+254-20-318245,318249
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P.O. Box 30623-00100
NAIROBI-KENYA

Ref: No. **NACOSTI/P/19/23249/28697**

Date: **13th March, 2019**

Santa Ludia Mark Lado
St. Pauls University
P.O. Private Bag - 00217
LIMURU.

RE: RESEARCH AUTHORIZATION

Following your application for authority to carry out research on ***"The role of pastoral counselors with South Sudan Dysfunctional Families living in Nairobi County, Kenya"*** I am pleased to inform you that you have been authorized to undertake research in **Nairobi County** for the period ending **12th March, 2020.**

You are advised to report to **the County Commissioner and the County Director of Education, Nairobi County** before embarking on the research project.

Kindly note that, as an applicant who has been licensed under the Science, Technology and Innovation Act, 2013 to conduct research in Kenya, you shall deposit **a copy** of the final research report to the Commission within **one year** of completion. The soft copy of the same should be submitted through the Online Research Information System.

GODFREY P. KALERWA MSc., MBA, MKIM
FOR: DIRECTOR-GENERAL/CEO

Copy to:

The County Commissioner
Nairobi County.

15/3/2019
COUNTY COMMISSIONER
NAIROBI COUNTY
P. O. Box 30124-00100, NBI
TEL: 341666

The County Director of Education
Nairobi County.