THE ROLE OF COMMUNITY BASED ORGANIZATION (CBO) IN COMMUNITY TRANSFORMATION: THE CASE OF LUKENYA PILLARS OF TRANSFORMATION (LPT), MACHAKOS COUNTY, KENYA

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Abstract: Transformation is a major post COVID 19 issue of focus for Lukenya Pillars of Transformation (LPT), a student engineered Community Based Organization (CBO). The objective of this research is to enhance visibility of the CBO through highlighting and analyzing results by two interns attached to complete their post COVID 19 response on mental health issues and impact among adolescents between the ages of 11-15 years. It is expected that the research would bring visibility for the CBO to attract funding for projects. The research utilized a descriptive research design approach. Quantitative and qualitative methods were employed through the use of questionnaires and key informants. A sample size of 130 pupils filled out questionnaires and 20 key informants were interviewed on the relevant discussions that were ongoing. The pupils were selected using a census sampling method while the key informants were through purposive sampling. The quantitative data was coded and analyzed using SPSS, version 23. Qualitative data was coded and put into themes and concepts that the respondents shared, and analyzed in line with respective research objectives. From the findings, it was observed that COVID 19 lockdown affected the age group 11-15 years adversely yet mortality and morbidity were low. In the same light, some respondents did not have a clear knowledge of COVID 19. Although all pupils were affected emotionally and economically, where there was social support adaptation was positive. As a result of the findings, trainings were implemented for pupils, parents, teachers, social workers, and guardians. Funding was sought to support LPT. The study will contribute positively to applied knowledge in the area of development in Machakos County.

Keywords: LPT, visibility, research, mental health, adolescent, and COVID 19

Introduction

Transformation is a major post COVID 19 issue of focus for Lukenya Pillars of Transformation (LPT), a student engineered Community Based Organization (CBO). It is involved in spearheading developmental projects such as Daystar Mulandi Primary school, which was started and sustained by students until the government took over from 2007 to 2008.

The research had two objectives to guide it in getting answers to the topic, which were as follows:

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Find the feasible role of CBOs in transforming the communities through research by supporting two interns attached for practicum.

Support the student interns to complete their post COVID 19 response on mental health issues among adolescents between the ages of 11-15 years from two sites: Daystar Mulandi Transformational Primary School and a Children's institution known as Pillars of Hope.

Literature Review

The lockdown orchestrated globally by COVID 19 two years ago to date brought in a new dimension of coping with life and affected different age groups in specific ways. Schools had to close down since pupils, students, teachers, and instructors had to practice caution and self-care as the virus ravaged people and destroyed lives. In Africa, predictions had been made that there would be very high mortality rates and plans had been put in place to construct multiple mortuaries in every radius of 10 kilometres to be able to cope with high death rates anticipated by Western countries. Fortunately, there were no reported incidences of child mortality. However, the children were still affected majorly by the disease.

This study addresses itself to the young precarious ages of 11-15 years who were affected variously, not so much as regards mortality and morbidity, but in terms of gender, emotional, and mental health. Stigma surrounding early teenage pregnancy also affected this age group in the same period. The study focuses on preadolescent gender distribution, preventive measures, and adherence to COVID 19 protocols of social distance, quarantine, and mental health, as well as emotional issues arising out of the impact of the lockdown. Several recent studies have clearly articulated the extent to which COVID 19 affected children, especially 11-15 year olds that qualify to be categorized as vulnerable in this case.

Campbell (2020) argued that the lockdown greatly stifled social development of early childhood in the sense that routines, worship, school, and structures that ensured continuity in learning were dismantled and children retreated into fear, anxiety, and idleness. Social distancing was painful and traumatizing to children who could not understand the implications of infection. Besides, there was stigma and discrimination against those who got pregnant in that category. Those who abused drugs were also subjected to discrimination yet they did not know how to handle the prevailing circumstances.

Najamuddin et al. (2022) have reiterated that COVID 19 dealt a profound blow to the overall development of children. They are in agreement with the ideas shared above. The sentiments above are also well captured by Kompaniyets (2022), who discussed children displaying certain symptoms that were cutting cross as a major response to the lockdown in crosscutting studies all over the world.

United Nations Children's Fund (UNICEF, 2021) has clarified the nutrition care health and play for babies and young children as having been greatly impacted negatively to the extent that mental health for children drastically worsened. The UNICEF study concluded that 1 child out of 7 for 10-17-year-olds has a mental disorder, which has now become the leading cause of death for children in that age category in recent times. This is compounded by other pre-existing factors such as exposure to violence, parental loss of livelihood, online insecurities with instructors, and lack of appropriate social

support both at home, among friends, and at school. The religious institutions were also not accessible for a considerable amount of time. This can be associated with feelings of isolation and loneliness that prevailed for this vulnerable category in the event that there were no other open avenues of self-expression and counseling available. In this case, both genders were equally affected.

This body of knowledge in the review concurs well with the assumptions of the research. Due to the long stay at home with the lockdown, it was envisaged that the delay in resumption of school, coupled with the factors stated above, would create problems for preadolescents as a special category of vulnerable age group. Regarding our target population, there were no major variations on the impact on gender except possibly for teenage pregnancy, where and when it happened in preadolescent girls with overwhelming pain and trauma on both the girl as well as the family. With quarantine and COVID 19 ravaging nations worldwide, priorities were on other pressing matters as pre-adolescent emotional health was ignored.

Moulin et al. (2022) conducted a longitudinal study and suggested that the prevalence of child and adolescent mental health issues escalated with COVD 19. This concurs accurately with Benton et al.'s (2022) study that reveals the intensity and degree to which Covid 19 impacted young children, negatively confirming what Theberath et al. (2022) have articulated. In their study, symptoms of the affected included obesity, compulsive disorders, anxiety, and chronic lung disease irrespective of gender and age. The impact can be qualified as having been substantial and immensely multifaceted. Theberath et al. (2022) stated that despite the negativity, social and family support along with a positive coping style was associated with better outcomes.

These references have contextualized the research in a locality like Daystar Community appropriately. They provide a justification for such a study knowing that children are universal and are faced with issues irrespective of age, distance, and space.

Materials and Methods

The Study Area

The research was conducted by student interns at LPT with the guidance of the researchers, who are patrons of LPT. Through the research, the CBO was able to capture the need of adolescents, especially with COVID 19, which brought challenges both in the community and schools alike. The research was conducted in Daystar Mulandi Primary School, started by Daystar University students in 2007, and the Children's home called Pillars of Hope that the LPT has been supporting with the various development initiatives that are needed to help the school move forward. Both the school and the children's home are located in the Lukenya plains in Machakos County in Kenya.

Research Design

The research used quantitative and qualitative methods of research through the use of questionnaires and key informants. The study targeted both the pupils and key informants in both sites. The researchers used the questionnaires to collect data from the students while using the key informant guide to collect data from the key informants in both sites.

Sample Size Determination

The research targeted students from standard 6 to 8 at the Daystar Mulandi Primary and form 1 and 2 from the children's home. All the primary children at the children's home go to Daystar Mulandi primary school. The population of the students in both the primary school and the children's home was 130 pupils. Although the sample size of 130 pupils was targeted, only 125 pupils were reached. The research used a census sampling method for it targeted all the pupils. Interviewed were 20 key informants constituting teachers, social workers from the children's home, and parents to give their views on the ongoing relevant discussions.

Sampling Procedures

The research used purposive sampling in targeting children from standard 6 to 8 and also the form 1 and 2 students in the children's home. This was important because they could articulate what was being discussed and would give the data that would help in giving targeted support to the two institutions by LPT. This was then followed by census sampling, where all the pupils in that group were targeted for the questionnaire. On the other hand, there was purposive sampling in identifying the key informants (teachers, social workers from the children's home, and parents) to give their views on relevant discussions.

Ethical Considerations

Being a research study, the main ethical consideration was to acknowledge the various authors of the information that was used. The research has effectively recognized the sources that were used in the study.

There was a partnership done between the Department of Community Development and the Department of Counseling Psychology to help in accountability and adherence to ethical standards, processes, and protocols. All the students were from both departments, in their fourth year, and well equipped in their areas of expertise to assist the pupils.

The research sought consent from the institution's principal, leaders of the children's home, as well as parents and teachers. There was need to get assent from the students to be able to advance with the research.

The researcher informed the respondents that their participation was voluntary and they could withdraw at any time in the research without any consequences. Confidentiality was ensured and assured and anonymity was maintained. No name was written anywhere in the research tools. The findings were analyzed and secured by the interns and the researchers.

Research Findings

The response of the research was 96.15%, which was a very high response and could be used for analysis. This was due to the fact that when the research was being undertaken some pupils in the sample group did not attend class.

Twenty (20) key informants were subjected to respond to questions phrased in line with the objectives of the study. These key informants consisted of teachers, social workers from the children's home, and parents, who were chosen through purposive sampling. They were key stakeholders and their views were considered valuable to the integrity of the study. They were chosen because they spend time with the children and would give valuable information to enrich the study.

The responses from the pupils have been tabulated as envisaged in Table 1 and the analysis of the key informants is incorporated into the discussions.

Table 1: Gender distribution of the respondents

	Frequency	Percent
Male	59	47.2
Female	66	52.8
Total	125	100.0

Source: Author (2022)

In Table 1, it is clear that the research was well represented by all genders, which enriched the research with their responses. Although girls are slightly more than boys, the boys are above the one-third threshold that is acceptable by the Kenyan constitution, thus well represented. Table 2 looks at the age of the respondents.

Table 2: Age distribution

	Frequency	Percent
10-15 years	109	87.2
16-20 years	14	11.2
Above 20 years	2	1.6
Total	125	100.0

Source: Author (2022)

Table 2 indicates that the greater number of students were between 10-15 years (87.2%), which is a clear indication that the children were in their right classes in relation to their age. There are a few students that were above in terms of age in the class they were in. This was not a challenge to the study for they could understand the aspects of the study and were able to give their responses to help the researchers get valid information. Majority of the key informants agreed that age and gender did not change anything on the effects of COVID 19. One informant commented, 'COVID 19, has affected the girls and boys alike' while another said, 'there is no variation in gender as regards the effects of COVID 19'. This leads us to the class levels of the respondents, as shown in Table 3.

Table 3: Class level

	Frequency	Percent
Class 6	36	28.8
Class 7	51	40.8
Class 8	32	25.6
Form 1	5	4.0
Form 2	1	0.8
Total	125	100.0

Source: Author (2022)

As seen in Table 3, the classes were well represented. Form 1 and 2 were from the children's home. Class seven has the greatest number of students (40.8%). The spread from the various classes was very good as it gave a wider view of the students' feelings in terms of COVID 19. One could get the views from the various ages and see how it had affected them. This gave a well-represented response, leading to Table 4.

Table 4: Whether corona is caused by a virus that can spread from one person to another

	Frequency	Percent
True	125	100.0

Source: Author (2022)

Table 4 gives a clear picture that all the students understood the existence of COVID 19 and the fact that it could spread from one person to the other. This is also brought out in Table 5, showing that a majority (97.2%) of the students knew this as a problem that has affected the whole world. There is a small group that needed to be helped to get a clear idea about COVID 19. One key informant stated, 'the children have come to know a lot about COVID 19, but there are a few areas that need to be clarified for them to have a clear understanding of COVID.' Another key informant also indicated, 'we have taught the children a lot about COVID 19 but you can see some still need further clarification'. Table 5 presents the measures to prevent COVID 19.

Table 5: Measures to prevent COVID 19

	Responses		Percent of Cases
	N	Percent	
Keeping social distance	79	25.6	63.2
Wear facemask always	107	34.6	85.6
Wash your hands	77	24.9	61.6
Avoid crowded places	27	8.7	21.6
Avoid touching unnecessary places	6	1.9	4.8
Sanitizing always	13	4.2	10.4
	309	100.0	247.2

Source: Author (2022)

In Table 5, while looking at the measures that one can take to prevent COVID 19, the students had an idea but had some gaps in terms of clarity. This is indicated by the fact that, in terms of keeping social distance, 63.2% said it is a preventive method, wearing face mask was marked by 85.6%, washing hands were 61.6%, avoiding crowded places was 21.6%, avoiding touching unnecessary places was only 4.8%, and sanitizing always was 10.4%. This is a clear indication that the students do not know all the measures they can take to prevent themselves from contracting COVID 19. The key informants agreed with the data from the students that they did not have a clear idea of how to prevent the spread of COVID 19. One key informant indicated that, 'although we have taken the children through the protocols of COVID 19, it has not been easy for them to constituently follow them,' while another key informant stated that, 'children will always be children thus will forget easily and do their own things'. This leads to whether they felt the effect of the virus, as depicted in Table 6.

Table 6: Whether the respondents felt the effect of coronavirus

	Frequency	Percent
Agree	45	36.0
Strongly agree	48	38.4
Disagree	32	25.6
Total	125	100.0

Source: Author, 2022

As noted in Table 6, many (74.4%) students said that they felt the effect of COVID 19. Similar to the pandemic affecting adults, this is a confirmation that it also affected adolescents. This needed keen attention to help the students adjust to the effects that they faced. The key informants noted that all the children were exposed to the glaring effects of COVID 19 equally. One of them said, 'all children were exposed to the pandemic and felt the same effects,' while another stated that, 'there was no difference on the effects of COVID among the children'. All children felt isolated from their friends at home as well as at school and church, leading to how COVID has affected the respondents presented in Table 7.

Table 7: How COVID 19 has affected the respondents

	Frequency	Percent
It has caused death	43	34.4
Affected the economy	7	5.6
Relative and friends taken to quarantine	5	4.0
change of lifestyle	9	7.2
Led to a high level of poverty which made people unable to afford basic needs	4	3.2
Not being at school for a long time	22	17.6
It has not reached the village	3	2.4
Early pregnancy	3	2.4
Affected school calendar/ and studies	9	7.2

Fear of getting infected by the diseases	3	2.4
Lacked moral values from teachers back at home	3	2.4
Led to loss of jobs	1	0.8
No response	13	10.4
Total	125	100.0

Source: Author (2022)

Table 7 shows the various effects of COVID 19 on the pupils. The major way that it has affected them is seeing those they know die from COVID. Some of the other challenges experienced are their economy being affected, not being in school, relatives and friends taken to quarantine, change of lifestyle, high level of poverty and the inability to afford basic needs, early pregnancy, school calendar affected, fear of being infected, relatives' loss of jobs, and lack of guidance from their teachers. Only 10.4% of the responses did not give any effect. This brings 89.6% that have faced various challenges that need to be taken into consideration if the students are to be able to cope with their academics and other life responsibilities. The key informants said that many children had different symptoms of anxiety disorders and, eventually, they began to understand the meaning behind infection control resulting from the COVID 19 virus. One key informant reported, 'some students were gripped with fear especially due to rumours of death and actual death witnessed to dure the pandemic'. Yet another informant indicated that, 'due to the increase use of social media the pupils were able to follow the information of the effects of the pandemic thus build anxiety in them.' Anxiety was felt at all levels and coping was deemed better where parental and social support mechanisms were improvised, leading to Table 8.

Table 8: Whether you had any problem with your work or daily life due to any emotional problems, such as feeling depressed, sad or anxious

	Frequency	Percent
Yes	113	90.4
No	12	9.6
Total	125	100.0

Source: Author (2022)

As seen in Table 8, the students had been affected with emotional problems at 90.4%. Only 9.4% did not have emotional problems. They may have experienced the emotional problems without knowing they were emotional. They may probably have had fun in the lockdown not knowing what else to feel or do. This is a clear indicator that the students need to be followed up in order to assist them in terms of counselling to help them cope emotionally. Key informants' responses confirm that many children were severely distressed by the lockdown. A key informant indicated that, 'I have noted that the children are quieter than before the pandemic and they seem more fearful.' Yet another key informant indicated that, 'I have observed with the students since they came back from the pandemic seem to have prolonged sadness and anxiety'. This is a clear indication that the children were traumatized by the pandemic, leading to the descriptive details of the symptoms in Table 9.

Table 9: Problem with your work or daily life due to any emotional problems, such as feeling depressed, sad or anxious

	Frequency	Percent
I missed friends and classmates with who I used to work together	16	12.8
Back at the start of COVID 19, there was not enough food we suffered from anger	6	4.8
scheduling and planning interference/ affected school calendar	29	23.2
Stress of staying in same class 2 years	22	17.6
Affected my studies	19	15.2
Parents are at home jobless	13	10.4
Limited interaction	7	5.6
No response	13	10.4
Total	125	100.0

Source: Author (2022)

In Table 9, more challenges that the students encountered due to COVID 19 were that they missed their friends when they stayed at home for many months, and their school calendar was changed, which added stress to them. It was also difficult for them to stay in the same class for close to two years, they felt their studies were affected, and some felt the stress of having their parents lose jobs and staying at home. Table 9 emphasizes the challenges that the students were going through due to COVID 19, necessitating the need for attention on how they could move forward to a more fulfilling life. They were going through more than many people knew and thus needed attention to handle these different challenges. One key informant commented that, 'despite all these challenges there are some communities that became creative looking for opportunities to keep the children busy and productive'. This results in Table 10.

Table 10: Whether you noticed any changes in your family during the corona period

	Frequency	Percent
Yes	85	68.0
No	40	32.0
Total	125	100.0

Source: Author (2022)

In Table 10, 68% of the respondents noticed a change in their family as a result of COVID 19. This caused a lot of anxiety among the students. There was need for reassurance and support. Many changes occurred with the pandemic that required adjustment and coping as well. This was also confirmed by the responses from the key informants who reiterated that, 'on the whole children required consistent affirmation that everything would be alright' and another key informant commented that, 'parental reassurance was necessary on a continuous basis'. Table 11 discusses the actual challenges.

Table 11: What are changes in your family during the corona period?

	Frequency	Percent
Interaction was limited	39	31.2
parents are claiming there is no money for take care of the children	26	20.8
movement from one point was limited so our loved one were not able to travel	8	6.4
No family gathering	4	3.2
Parent were jobless, stayed at home due to Corona	10	8.0
Parents were at home and we spent more time together than before	19	15.2
Parents are depressed about school fees	3	2.4
Parent are coming home early due to curfew which is good for us	3	2.4
No response	13	10.4
Total	125	100.0

Source: Author (2022)

Table 11 indicates the students noted some changes in their families. The challenges included interaction being reduced, their parents having economic challenges due to loss of jobs, and not being able to see their loved ones due to restrictions on movement. There were also no family gatherings and a number of parents spent more time at home. Their parents were also depressed due to their inability to pay fees. The presumed positive side to this was that parents were coming home early due to curfew, thus able to spend more time with the children. With the challenges the adolescents were facing, it was necessary to give them some counselling and also encouragement that normalcy would be resumed. All the key informants agreed on the fact that loss of jobs and livelihoods greatly hit the families and increased the level of poverty. This was one area where the responses from the key informants were unanimous, resulting in Table 12.

Table 12: Whether you find it easy to putting face mask every time

	Frequency	Percent
Yes	45	36.0
No	80	64.0
Total	125	100.0

Source: Author (2022)

In Table 12, there was a great challenge with the children having their masks on throughout yet they were the group that was transmitting the disease, thus causing the spread of COVID 19. There is need to conduct training for the students to help them understand the importance of using a face mask. As this training is being done, there is need for using the results in Table 13 to help in discussing with the students so that they can be encouraged to use the mask, which is very effective in preventing COVID 19 if used well and consistently. Key informants alluded to the fact that, 'teachers, parents and other adults were affected and died more than the children of the pandemic' and yet another key informant

commented, 'mortality was high among teacher and very minimal among the pupils'. This leads to Table 13.

Table 13: Explain reason you find it hard to put mask

	Frequency	Percent
Not, putting a facemask when playing is a challenge	17	13.6
Putting on a mask led to difficulty in breathing	64	51.2
We are not used to wearing masks before	24	19.2
It is tiresome putting a mask throughout	3	2.4
It causes a bad smell when put for a long time	3	2.4
No response	14	11.2
Total	125	100.0

Source: Author (2022)

In Table 13, most of the respondents had issues breathing with masks and had not been through the experience of wearing masks before. A substantial number of children found it challenging playing with masks. This is expected of children yet this is what necessitated the need for training and raising awareness of the pandemic and how to cope. The key informants also confirmed, similar to the children, that wearing masks was a new norm that they had never been through. This was stated by one key informant saying, 'we have never seen such a thing before and children are finding wearing a mask strange and cumbersome'. Initially, a majority would have preferred to be careless with respect to the COVID 19 protocol but they had to comply when their neighbours and friends died due to COVID. The reality of death made them responsible for the use of masks as well as the other requirements for the protocol, bringing on Table 14.

Table 14: When should you put on a facemask?

	Frequency	Percent
Every time	59	47.2
When you are in a public place	61	48.8
At school	5	4.0
Total	125	100.0

Source: Author (2022)

Table 14 indicates that the students need a clear understanding of when and how one should use a mask to prevent COVID 19. It is clear from the data that the students have half-baked messages on COVID 19 that need clarity in understanding it and its prevention. This leads to Table 15.

Table 15: In case you realize that your desk mate/classmate has COVID 19

	Frequency	Percent
Inform the teacher to take us to the hospital for treatment	72	57.6
Tell her/him to visit a doctor	15	12.0
Advise her/him to for quarantine as I do the same	16	12.8
Go to hospital for checkup and treatment	14	11.2
Put on my mask and keep away from the victim	6	4.8
No response	2	1.6
Total	125	100.0

Source: Author (2022)

Table 15 clearly depicts what the students thought they should do if their friend had COVID 19. Some of the responses include telling their teacher, telling the friend to visit the doctor, advising the friend to go to quarantine, going to the hospital for checkups and treatment, and putting on a mask. It is obvious that the students still need clarity on how to go about handling someone who has COVID 19. This paves way for further raising of awareness through training. Subsequently, the student interns conducted training on both sites. This must be sustained, hence the inherent need for research grant writing for mental health and other issues post covid. Table 16 presents what is feared most about the Coronavirus.

Table 16: What do the respondents fear most about Coronavirus?

	Frequency	Percent
Cause death	100	80.0
Cause loneliness	3	2.4
Weakens the immune system	2	1.6
It is easily spread from one person to another	10	8.0
Being Quarantine	7	5.6
Cause health issues in the body	3	2.4
Total	125	100.0

Source: Author (2022)

As seen in Table 16, what the students feared most was death, which could have been contributed by the number of people they saw die. A few feared being infected and affected by the virus. Hence, there is a clear need for the students to receive counseling and reassurance. According to the key informants, some of the statements they gave were, 'mental health and social development overally seems to have been adversely affected by the lockdown from the onset to the post covid era' another one said, 'mental health issues have escalated immensely with COVID 19' and yet another said, 'we are noticing an upward trend in mental health issues with COVID'. Table 17 shows how COVID 19 affected the respondents' relationships with friends/classmates.

Table 17: How COVID 19 affected respondents' relationships with friends/classmates

	Frequency	Percent
At school we are discouraged not to engage in group discussion	31	24.8
No playing together	27	21.6
Interaction with friends is limited	28	22.4
Some of the friends and classmate have not reported back to school	14	11.2
most of them got pregnant and married	8	6.4
keeping social distance and not getting closer to each other	10	8.0
Not sharing reading materials such as books, pens etc.	5	4.0
No response	2	1.6
Total	125	100.0

Source: Author (2022)

In Table 17, the results show the changes that occurred to the adolescents in the way they interacted with their friends since, for a child, friendship is key. This should be taken into consideration in looking at the programmes that can be developed to help adolescents cope with the challenges that have come about due to the effects of COVID 19. There was a key informant that brought out the case of two girls aged 13 years who got pregnant and delivered babies during that season. They were not able to join school with the initial opening. Two other key informants went further to state that pregnancy among the children caused stigma, discrimination, and wrath from family members, society, and friends. These two key informants were directly involved in the cases where the two girls got pregnant. Yet, with time, the girls were assisted to go back to school as families provided social support for the young mothers. One of the girls who got pregnant was from the children's home, while the second one was from a functional family.

Summary

The study ventured into assessing the overt impact of the lockdown caused by the COVID 19 pandemic on adolescents in two sites in a rural locality in Machakos County in Kenya.

The objectives of the study were met as the analysis from both the 130 pupils and the key informants tallied in agreement up to above 95%.

COVID 19 lockdown affected the age group 11-15 years adversely yet mortality and morbidity were low. Emotional and economic factors have prevailed throughout the findings as key.

The analysis of the findings has created a need for Lukenya area as a fertile space for fundable research in mental health and general health education for schools, families, and the wider community in Daystar.

Grant writing for funding should be encouraged for both Daystar students and faculty interested in research that can be compiled with sustainable interventions where administration and leadership can be articulated.

Results and Discussion

The research findings indicate that there was no difference in the effects of COVID 19 by age or gender. This agreed with the findings of Najamuddin et al. (2022), who said that COVID 19 was a blow dealt to all children alike globally, and Kompaniyets (2022) who indicated that children displayed similar symptoms worldwide.

In the research, it is clear that although the pupils have knowledge about COVID 19, it is not adequate and more needs to be done to help them articulate the knowledge and use it effectively to combat COVID 19. This finding is in agreement with that of Campbell (2020), who argued that children had difficulties following the COVID 19 protocol consistently due to the fact they felt it was traumatizing for them.

In the measures to combat COVID 19, the research found major discrepancies between knowledge given and action taken by the pupils. The application was far lower than the knowledge they knew about the disease. This finding agrees with Campbell (2020), who brought out that there was a disconnect between knowledge given to pupils and what they were applying.

The study clearly brought out that the pupils were greatly affected by the pandemic. This is in line with Moulin et al. (2022), Benton et al. (2022), and Theberath et al. (2022), who are all in agreement that COVID 19 affected children greatly and negatively. The majority experienced emotional issues, which are equally confirmed in the literature review by Moulin et al. (2022), Benton et al. (2022), and Theberath et al. (2022).

From the findings, it is clear that the pupils faced a lot of challenges but there were also some positive aspects, seen in the creativity of parents to keep their children busy and productive. This agrees with UNICEF (2021), which said that children who were given social support were creative and copped better in adverse situations.

With all the challenges that the pupils were facing, continuous reassurance from both parents and teachers was necessary. This also led to the LPT putting in place counselling and training to help cope with the challenges and uncertainties. There was also the aspect of more adults, including teachers, dying due to the pandemic while the pupils were not. This was a concern because the pupils were finding it a challenge to wear their masks consistently.

Conclusion

From the research, the following can be concluded:

1. The students have some knowledge of COVID 19 but it is not sufficient to prevent them fully from being infected.
2. The students have been affected by COVID 19 at 74.4%.

3. The students have faced a lot of emotional problems as indicated by 90% of the respondents.
4. Families were affected (89.6%) as a result of COVID 19.
5. It was traumatizing for students to imagine that any family member who got COVID 19 can die.
6. Sixty-eight percent noticed changes in the family.
7. Livelihoods changed and families did not have enough money.
8. Students did not find it easy to wear masks every time due to breathing problems.
9. Eighty percent of the respondents feared death more than anything else.
10. The key informants' analysis has strengthened the study making it reliable and valid.
11. The study contributes to applied knowledge in Machakos County.

Recommendations/Action as a Result of the Findings

As a result of the findings, the students embarked on the following to support the pupils and their families:

1. Need to have the students trained on preventive measures for they do not have a clear picture of them.
2. Look at the ways that the students have been affected and use them to target the COVID 19 needs of the student.
3. The CBO needs to focus on mental health issues in the community for funding.
4. The students need to be taken through psychological counselling.
5. Students should be taken through trainings and empowerment.
6. Train the students on the importance of using face masks properly and consistently.
7. Awareness of children's mental health needs revisitation -training on both sites with practical sessions.
8. Debriefing for COVID-19-training on how to debrief children post-COVID must intensify for teachers, instructors, parents, and significant others.
9. Resource mobilization for intervention programmes.
10. Network with wider county and national government for appropriate and affordable healthcare.

Way Forward/Further Research

1. Daystar community is a rich area for research on children.
2. COVID and its effects is an area of study, especially mental health among adolescents and youth.
3. Grant writing for funding through the CBO should be encouraged.
4. Prospects of networking with Machakos County and non-governmental organs are available.
5. Increased concern for mental health should be accompanied by appropriate interventions. It requires leadership for sustainability.
6. More focused training and empowerment for families, children, teachers, and all stakeholders.
7. Multidisciplinary strategies and approaches are viable for sustainability.

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