

**ASSESSMENT OF THE ROLE OF FAMILY SUPPORT ON MENTAL HEALTH
AMONG JUDICIAL EMPLOYEES IN NAIROBI CITY COUNTY**

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**MASTER OF ARTS
(COUNSELLING PSYCHOLOGY)**

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**A RESEARCH DISSERTATION SUBMITTED IN PARTIAL FULFILLMENT OF THE
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COUNSELLING PSYCHOLOGY IN THE SCHOOL OF EDUCATION, ARTS AND
SOCIAL SCIENCES AT KCA UNIVERSITY**

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DECLARATION

I declare that this thesis is my original work and has not been presented in any other university/institution for consideration of any certification.

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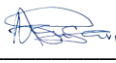
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DECLARATION.....	ii
ACKNOWLEDGEMENT.....	iii
LIST OF TABLES.....	vii
LIST OF FIGURES.....	viii
ACRONYMS AND ABBREVIATIONS.....	ix
OPERATIONALIZATION OF TERMS.....	x
ABSTRACT.....	xii
CHAPTER ONE.....	1
INTRODUCTION.....	1
1.0 Introduction.....	1
1.1 Background of the Study.....	1
1.2 Statement of the Problem.....	3
1.3 Purpose of the Study.....	4
1.4 Objective of the Study.....	4
1.5 Research Questions.....	4
1.6 Assumptions of the Study.....	5
1.7 Significance of the Study.....	5
1.8 Scope and Limitations of the Study.....	6
CHAPTER TWO.....	8
LITERATURE REVIEW.....	8
2.1 Introduction.....	8
2.2 Theoretical Framework:.....	8
2.3.1 The Social Support Theory.....	8
2.2.2 Unveiling Diverse Perspectives on Social Support Theory.....	9
2.3 Literature Review.....	10
2.3.1 Family Support and Mental Health.....	10
2.3.3 Barriers to accessing and utilizing family support.....	13
2.3.4 Strategies for improving provision and Utilization of family support for mental health.....	15
2.3.5 Mental Health.....	17
2.4 Summary and Knowledge Gaps.....	17
2.5 Conceptual Framework.....	19

2.6 Study Variables Relationships.....	20
CHAPTER THREE.....	22
RESEARCH METHODOLOGY.....	22
3.1 Introduction.....	22
3.2 Research Design.....	22
3.3 Study Location.....	22
3.4. Study Population.....	22
3.5: Sampling Procedure and Sampling Size.....	23
3.5.1 Sample Size.....	23
3.5.2 Sampling Techniques.....	24
3.6 Data Collection Procedures.....	25
3.6.1 Data Collection Techniques.....	26
3.6.2 Data Collection Tools.....	26
3.6.3 Ethical Considerations.....	28
3.7 Validity and Reliability of the Instrument.....	28
3.7.1 Pilot Study.....	28
3.7.2 Validity of the Research Instruments.....	28
3.7.3 Reliability of the Research Instruments.....	29
3.8 Data Analysis.....	29
CHAPTER FOUR.....	31
DATA ANALYSIS, PRESENTATION, INTERPRETATION AND DISCUSSIONS	31
4.1 Introduction.....	31
4.2 Demographics and Response Rates.....	31
4.2.1 Response Rate.....	31
4.2:2 Reliability of The Research Instruments.....	32
4.2.3 Age of the respondents.....	32
4.2.4 Gender of The Respondents.....	33
4.2.5 Education Level.....	34
4.2.6 Marital Status.....	35
4.2.7 Occupation of The Respondents.....	36
4.3 Data Presentation and Interpretation.....	36
4.3.1 Forms of Family Support.....	36

4.3.2 Family Support and Work-Related Stress.....	37
4.3.3 Barriers to Access and Utilizing Family Support.....	38
4.3.4 Strategies for Improving the Provision and Utilization of Family Support.....	40
4.3.5 Correlations.....	40
4.3.6 Regression.....	42
4.3.7 ANOVA.....	44
4.4 Discussion of Study Findin.....	44
CHAPTER FIVE.....	47
SUMMARY, CONCLUSIONS AND RECOMMENDATIONS.....	47
5.1 Introduction	47
5.2 Summary of Findings.....	47
5.2.1 Specific forms of family support available to judicial employees in Nairobi City County.....	47
5.2.2 Family support on work related stress among judicial employees in Nairobi City County.....	47
5.2.3 Barriers to access and utilizing family support among judicial employees in Nairobi City County.....	48
5.2.4 Provision and utilization of family support for mental health patients among judicial employees in Nairobi City County.....	48
5.3 Conclusions of the Study	48
5.4 Recommendations of the Study.....	49
5.5 Recommendations for Further Studies	50
REFERENCES.....	51
APPENDICES.....	56
Appendix I: Transmittal Letter.....	56
Appendix II: _Coding Manual:	57
Appendix III: Interview Questions.....	60
Appendix VII: Thematic Analysis of Interview Guide	62
Appendix IV: Research Work Plan: March –September 2023	65
Appendix V: Research Budget.....	66

LIST OF TABLES

Table 1: Target Population.....	23
Table 2: Sample Size	24
Table 3 Response Rate	31
Table 4 Reliability of the Research Instruments	32
Table 5 Age of The Respondents	33
Table 6 Gender of The Respondents	34
Table 7 Education Level	34
Table 8 Marital Status.....	35
Table 9 Occupation of The Respondents.....	36
Table 10 Family Support	37
Table 11 Family Support and Work-Related Stress.....	38
Table 12 Barriers to Access and Utilizing Family Support	39
Table 13 Strategies for Improving the Provision and Utilization of Family Support	40
Table 14 Correlations	41
Table 15 Model Summary	43
Table 16 ANOVA	44

LIST OF FIGURES

Figure 1:Conceptual Framework..... 19

ACRONYMS AND ABBREVIATIONS

SEM	-	Social Ecological Model
WHO	-	World Health Organization
COVID-19	-	Coronavirus Disease 2019
JSC	-	Judicial Service Commission
MOE	-	Margin of error

OPERATIONALIZATION OF TERMS

- Mental health** : An individual's overall psychological and emotional well-being, including the ability to cope with stress and manage their feelings and behaviour.
- Mental health disorders:** A range of conditions that affect an individual's thinking, behaviour, and mood, leading to significant distress and impaired functioning.
- World Health Organization (WHO):** A specialized agency of the United Nations responsible for global public health, including the promotion of mental health and the prevention and treatment of mental health disorders.
- Neurological disorders:** A range of conditions that affect the brain and nervous system, leading to impairment in sensory, motor, or cognitive functioning.
- Social support** : The resources and assistance provided by family, friends, and other social networks to help individuals cope with stress and adversity.
- Emotional support** : The provision of empathy, love, and encouragement to individuals experiencing emotional distress.
- Practical assistance** : The provision of tangible resources and help, such as financial assistance, transportation, or assistance with daily tasks.
- Protective factor** : A factor that reduces the likelihood of negative outcomes, such as mental health issues, in individuals exposed to stress or adversity.
- Stigma** : Negative attitudes and beliefs towards individuals with mental health issues, leading to discrimination and social exclusion.
- High-stress environment:** A setting or situation that involves significant demands, pressures, and challenges that can lead to stress and adverse mental health outcomes.
- Resilience** : The ability to adapt and recover from adversity and stress, often with the support of social and personal resources such as family support.
- Occupational functioning:** An individual's ability to perform work-related tasks and responsibilities effectively.
- Quality of life** : An individual's overall well-being and satisfaction with their life, including physical health, social relationships, and emotional well-being.
- Suicide** : The act of intentionally taking one's own life, often as a result of significant mental health issues and distress.
- Middle-aged adults** : Individuals in the age range of 45-65 years old.
- Traumatic material** : Images, stories, or other stimuli that may cause

Caseloads

significant distress and trigger symptoms of trauma, such as flashbacks or anxiety.

: The number of cases or clients that a mental health professional is responsible for managing or treating.

ABSTRACT

Mental health is a significant global issue that affects individuals and communities worldwide, especially in Africa, where resources are limited and mental health services are inadequate. According to various sources, including the Ministry of Health of the Government of Kenya, the World Health Organization, and the Africa Mental Health Foundation, Kenya has a high prevalence of mental health issues. An estimated 25% of the Kenyan population is believed to have experienced mental health conditions at some point in their lives. This study focused on the role of family support in promoting positive mental health outcomes among judicial employees in Kenya, using the judicial employees in Nairobi City County as a sample population. The theory that was applied in the study is the Social Support Theory which was developed by Cobb in 1976. The aim of this study was to explore the nature and extent of family support among the judicial employees in Nairobi City County; and determine the relationship between family support and mental health. The study was guided by four objectives specifically, to identify the specific forms of family support available to judicial employees in Nairobi City County; to investigate the impact of family support on work-related stress among judicial employees in the Nairobi City County; to explore the barriers to access and utilizing family support among judicial employees in Nairobi City County; to develop strategies for improving the provision and utilization of family support for mental health patients among judicial employees in Nairobi City County. The research method applied is the mixed-methods approach. The research design for this study is both qualitative and quantitative, using cross-sectional data and a qualitative component investigated the relationship between family support and mental health in a large sample size of judicial employees in Nairobi City County. In-depth interviews were conducted with a purposive sample of participants to gain a deeper understanding of the relationship between family support and mental health, as well as potential moderating factors. Multistage sampling consisting of stratified and simple random sampling techniques were used to select a sample size of 282 judicial employees from a target population of 1030 Judiciary's employees in Nairobi City County. The quantitative data was analysed using descriptive statistics, correlation analysis, and regression analysis, while the qualitative data was analysed using thematic analysis. The study followed ethical guidelines including maintaining confidentiality in exploring how family support can enhance mental health in high-stress workplaces, potentially benefiting other occupations beyond the Judiciary. The conclusion for the study was that family support plays a significant role in mitigating work-related stress, thus influencing the overall mental health of judicial employees. These findings emphasize the need for organizations and policymakers to prioritize strategies that promote family support as a means to alleviate work-related stress and enhance the well-being of judicial employees. One of the recommendations of the study is that the policy makers in the Judiciary should prioritize the establishment and enhancement of mental health support services in the Judiciary. The Judiciary should also collaborate initiatives that promote family support as a key component of employee well-being.

CHAPTER ONE

INTRODUCTION

1.0 Introduction

This chapter provides an overview of the study, including the context and rationale behind it, the issues being addressed, the goals of the research, the key questions that the study sought to answer, the importance of the study, the underlying beliefs guiding the study, the boundaries and constraints of the research, and the definitions of important terms used in the study.

1.1 Background of the Study

In recent years, the relationship between family support and mental health has garnered significant attention within the fields of psychology and social sciences. The modern era's fast-paced and demanding lifestyle has led to a surge in mental health concerns, particularly in high-stress professions such as the Judiciary. This study aims to investigate the role of family support in mitigating work-related stress and promoting positive mental health outcomes among judicial employees in the Nairobi City County of Kenya. By focusing on this specific demographic, the study seeks to shed light on a critical yet understudied aspect of mental health and well-being (Brock *et al.*, 2017).

The impact of work-related stress on mental health is a global concern. Numerous studies have highlighted the association between high-stress occupations and adverse mental health effects, including anxiety, depression, and burnout (Stansfeld & Candy, 2006; Milner *et al.*, 2019). In various countries, legal professionals, including judges and lawyers, have been identified as particularly vulnerable to work-related stress due to the nature of their responsibilities, the high stakes involved, and the demanding work hours (O'Brien, 2018; Rinaldi *et al.*, 2020).

In the African context, similar trends of work-related stress affecting mental health can be observed. For instance, a study conducted in South Africa among legal professionals highlighted the prevalence of stress and burnout in the legal field, with substantial implications for psychological well-being (van der Colff & Rothmann, 2009). The pressures of the job, combined with external societal and economic factors, contribute to the mental health challenges faced by professionals in the legal sector across the continent.

Within Kenya, the issue of work-related stress and mental health challenges among judicial professionals is particularly pertinent. The Judiciary plays a pivotal role in upholding the rule of

law and ensuring justice, which often requires making weighty decisions that can impact individuals' lives and societal harmony. The Nairobi City County, being the capital city and a hub of legal activities, is likely to host a high concentration of judicial professionals experiencing significant work-related stress (Van Der Colff & Rothmann, 2009).

However, the potential role of family support in mitigating these stressors and fostering positive mental health outcomes has not been extensively explored. Family support can encompass emotional, instrumental, and informational support from family members, which has been shown to be a protective factor against the negative effects of stress (Brock et al., 2017; Maguire & McCrory, 2019). This study seeks to fill this research gap by investigating the nuanced ways in which family support might influence the mental well-being of judicial professionals in Nairobi.

The growing recognition of the impact of work-related stress on mental health constitutes a pivotal area of global, national, and local research (Muchiri, 2022). The family unit emerges as a crucial factor in nurturing mental well-being, with prior research showcasing its substantial influence on mental health outcomes. However, within the unique context of Kenya and the high-performance expectations on the Judiciary, a research gap persists regarding the impact of family support on the mental well-being of individuals operating in high-stress environments. This research imperative can play a pivotal role in shaping interventions and policies aimed at fostering mental health and overall well-being within professional spaces (Ayacko and Linge, 2017).

The mental health of judicial employees in Nairobi City County, Kenya, is a matter of paramount importance, given the demanding nature of their work. An assessment of the role of family support in maintaining their mental well-being reveals a vital facet of their lives. Family support, which can take various forms including emotional, practical, and social assistance, plays a pivotal role in alleviating work-related stress among these employees (World Health Organization 2022).

In the high-stress environment of the Judiciary, employees often find themselves grappling with intricate cases, intense pressures, and the weight of their decisions. Emotional support from family members provides a safe space for judicial employees to express their feelings, seek solace, and effectively manage their stress levels. Practical support, such as assistance with daily chores and responsibilities, serves to lighten the load and allows them more time for self-care activities, further enhancing their mental resilience. Additionally, social support from family members

enables a healthier work-life balance, reducing feelings of isolation and loneliness that can exacerbate work-related stress (Kanyungu, 2017).

Despite the evident benefits, there can be barriers to the provision and utilization of family support for mental health among judicial employees. These might include communication challenges, conflicting schedules, and a lack of awareness about the specific needs of judicial employees. To improve the provision and utilization of family support, strategies such as educational programs for families about the unique stressors faced by judicial employees, flexible work arrangements to accommodate family support, and open lines of communication between employees and their families could be considered (Kanyungu, 2017).

1.2 Statement of the Problem

The Judiciary, as a cornerstone of the legal system, shoulders the responsibility of upholding justice, safeguarding the rule of law, and ensuring citizens' rights are not infringed. However, the demanding nature of judicial roles exposes individuals in this sector to elevated levels of work-related stress, potentially contributing to adverse mental health outcomes. Work-induced stress, prevalent across various professions, has been extensively documented for its detrimental effects on psychological well-being. In the context of the Judiciary in the Nairobi City County, the pressing concern centers on the impact of work-related stress on mental health, and crucially, the potential mitigating role of family support.

Judicial professionals in the Nairobi City County face a myriad of stressors, including intricate legal cases, high-stakes decision-making, heavy caseloads, and the emotional toll of dealing with sensitive matters. Such stressors can contribute to the manifestation of anxiety, depression, burnout, and other mental health challenges among these professionals. The study by Smith *et al.* (2018) underscores this reality, revealing the prevalence of stress and its associated symptoms within the legal profession.

Against this backdrop, the role of family support becomes pivotal. Family units have been recognized as significant sources of emotional, psychological, and social sustenance, particularly in high-stress environments. The family's capacity to offer a safe space for sharing concerns, seeking validation, and receiving encouragement is crucial, particularly in professions where the psychological toll of the work is considerable. Johnson and Williams (2020) emphasized the

positive effects of family support in mitigating burnout and enhancing job satisfaction among healthcare professionals.

However, within the judicial context of the Nairobi City County, the precise interplay between work-related stress, family support, and mental health remains inadequately understood. While previous research underscores the importance of family support as a coping mechanism in high-stress professions, its application within the Judiciary necessitates deeper exploration.

1.3 Purpose of the Study

This study aimed to determine the role of family support on mental health in judicial employees in Nairobi City County court stations and how it acts as a vital factor in mitigating the potential adverse effects of work-related stress.

1.4 Objective of the Study

The was guided by the following the following objectives:

- i. To identify the specific forms of family support available to judicial employees in Nairobi City County.
- ii. To investigate the impact of family support on work-related stress among judicial employees in the Nairobi City County.
- iii. To explore the barriers to accessing and utilizing family support among judicial employees in Nairobi City County.
- iv. To develop strategies for improving the provision and utilization of family support for mental health patients among judicial employees in Nairobi City County.

1.5 Research Questions

This study provided answers to the following questions:

- i. What are the specific forms of family support available to judicial employees in Nairobi City County?
- ii. What is the impact of family support on work related stress among judicial employees in Nairobi City County?
- iii. What are the barriers to access and utilizing family support among judicial employees in Nairobi City County?

- iv. What strategies can be developed to improve the provision and utilization of family support for mental health patients among judicial employees in Nairobi City County?

1.6 Assumptions of the Study

This study was guided by the following assumptions: that there is open communication between judicial employees and the family members; that the family members are aware of the stressors that the participants are faced with; that the only stressors that the participants face are work-related, and that all courts in Nairobi City County experience the same level of challenges.

1.7 Significance of the Study

This study carries substantial implications for a diverse array of stakeholders, encompassing the Judiciary, the Law Society of Kenya, scholars, the Kenya Government, lawmakers, and the general public. Its overarching objectives encompassed the identification of specific forms of family support accessible to judicial employees, a meticulous investigation into how family support influences work-related stress, a thorough exploration of the barriers influencing the accessibility and utilization of family support, and the formulation of comprehensive recommendations geared toward enhancing the provision and utilization of family support for individuals grappling with mental health challenges in the workplace (Ngari and Namusonge,2023).

The significance of this study amplifies in light of the pervasive prevalence of mental health disorders within contemporary society, and the far-reaching, adverse repercussions they entail. For the Judiciary, this research not only promises insights into nurturing a healthier and more productive workforce but also the prospect of elevating the efficiency and fairness of the legal system itself. The Law Society of Kenya stands to benefit by harnessing these findings to advocate for enhanced mental health support within the legal profession, thereby prioritizing the well-being of its members. Scholars will find valuable insights into the intricate dynamics between family support and mental health, particularly in high-stress work environments, while the Kenya Government and lawmakers can employ these revelations to formulate policies and enact legislation aligned with global trends, fostering a culture of mental health in the workplace (Zvolensky, O'Cleirigh,2020).

Ultimately, the general public stands to gain from a society that is more empathetic and supportive, recognizing and addressing the mental health challenges faced by individuals engaged in demanding professions, such as those within the Judiciary. In summary, this study not only

augments the existing body of knowledge on mental health and family support but also carries tangible implications for the enhancement of mental health outcomes within taxing work environments, particularly within the context of the Judiciary (Walther and Sochacka, 2017).

1.8 Scope and Limitations of the Study

This study is an academic study which has limited scope, time and resources. Nairobi Courts being very busy, the researcher may not meet every Judge, Judicial Officer or Judicial staff, hence the research used a representative sample where employees in each category, in each court in the County, was included in the final sample. As such findings of this study was only generalized to courts in Nairobi City County.

This study relied on self-declarations by judicial employees and therefore some of the subject to bias and personal perception. Therefore, the researcher assured the participants that the information obtained in the study will not be shared with their families, but rather findings will be used purely for academic purposes only; any information given will be for university consumption only and anonymity of the participants will also be observed to ensure confidentiality.

The research applied both qualitative and quantitative research design and used mixed methods approach and questionnaires from a convenient sample of judicial employees working in Nairobi City County. The study is expected to provide insights into the unique work-related stress challenges faced by judicial employees and how family support can promote mental well-being in this population. The findings will benefit the Judiciary, mental health practitioners, and policymakers in understanding the importance of family support in promoting mental health.

The key limitations of this study were the relatively small sample size of judicial employees from Nairobi City County. Due to resource and time constraints, the study could not capture the full spectrum of experiences within this diverse workforce. As such, the findings might not have been fully representative of all judicial employees in Nairobi City County, limiting the generalizability of the results. Moreover, the study's focus on a specific geographic location also restricted the applicability of its findings to other regions with potentially different socio-cultural and workplace dynamics.

The reliance on self-reported data for assessing the role of family support and its impact on mental health introduced the possibility of social desirability bias. Participants might have provided responses they perceived as socially acceptable rather than fully candid responses, potentially

skewing the results. Additionally, self-reported data might not have accurately reflected participants' actual experiences, and mental health issues could have been subject to underreporting due to stigma or fear of repercussions in the workplace.

This study employed a mixed methods approach which captured data at a single point in time. While this design was valuable for understanding associations, it did not establish causality. Thus, the study could not definitively conclude that family support directly caused improvements in mental health among judicial employees. Longitudinal research designs tracking changes over time would have been needed to establish causal relationships between family support and mental health outcomes. The study also did not extensively delve into the specific contextual factors within the Judiciary that may have influenced the role of family support on mental health. Factors such as workplace culture, leadership, and organizational policies may have interacted with family support in complex ways. The study's scope did not allow for an in-depth exploration of these contextual nuance

CHAPTER TWO

LITERATURE REVIEW

2.1 Introduction

This chapter provides the Literature Review, Summary and Knowledge Gaps, Theoretical Framework, Conceptual Framework and the Study Variables Relationships, based on the four aspects of the role of family support on mental health: forms of family support on mental health; impact of family support on mental health; barriers to accessing and utilizing family support; strategies for improving provision and utilization of family support and how they influence mental health. It also provides the knowledge gaps that this study will fill and the conceptual framework upon which the study is based.

2.2 Theoretical Framework:

This research is guided by the social support theory and unveiling diverse perspectives on social support theory.

2.3.1 The Social Support Theory

The Social Support Theory, a foundational framework in the realm of mental wellness, offers profound insights into the role of social support in fostering optimal mental health (Taylor et al., 2011; Thoits, 2011). As postulated by its proponents and fortified by significant studies, this theory delineates four core components of social support: emotional, instrumental, informational, and appraisal support (Taylor et al., 2011; Thoits, 2011). Each of these components plays a distinct and pivotal role in shaping mental wellness, particularly within the context of judicial employees.

At its core, emotional support represents a pillar of strength for individuals facing stress, anxiety, and depression (Thoits, 2011). Rooted in comfort, empathy, and encouragement, emotional support emanates from family members, creating a haven of belonging and affection. For judicial employees, this form of support manifests in various scenarios within the Judiciary's setting. An employee grappling with the pressures of a high-profile case finds solace and reassurance in the empathetic words of a family member. This emotional bolstering significantly contributes to reducing stress, allaying anxiety, and alleviating the weight of depression.

The significance of tangible assistance cannot be understated, especially when it comes to managing work-related stress (Thoits, 2011). Instrumental support, encompassing practical aid and financial assistance, becomes a lifeline for judicial employees. Family members stepping in to

provide financial aid or assist with daily tasks become invaluable allies in stress reduction. By addressing concrete stressors, instrumental support lessens the burden of responsibilities and fosters better mental health outcomes.

Guided decision-making is crucial in times of challenges, and informational support serves as a guiding beacon (Thoits, 2011). Family members contribute by sharing knowledge, resources, and expertise, enabling judicial employees to make well-informed choices that positively impact their mental well-being. The scenario unfolds as a judge faces a complex legal conundrum; the guidance provided by a family member helps navigate the intricacies, ultimately promoting mental wellness.

The role of positive affirmation, validation, and feedback cannot be overlooked (Taylor et al., 2011). Appraisal support, embodied in recognizing and acknowledging an individual's experiences and feelings, becomes a catalyst for enhanced self-esteem and resilience. Judicial employees benefit significantly when family members offer affirmations, constructive feedback, and celebrate their achievements. This empowering dynamic elevates self-esteem, cultivates resilience, and consequently contributes to improved mental well-being.

The social support theory suggests that the family can provide emotional and practical help, promoting self-esteem and buffering against stress. Specifically, family support can provide emotional, instrumental, and informational support to individuals, which can help them cope with stress and adversity.

2.2.2 Unveiling Diverse Perspectives on Social Support Theory

This dedicated section embarks on a comprehensive exploration of the rich tapestry of commentaries that have graced the landscape of the Social Support Theory, specifically within the unique context of Kenyan mental health. These varied perspectives, each a unique brushstroke on the canvas of understanding, offer a profound comparative analysis of the theory's relevance within the distinct realm of mental wellness, particularly within the intricate confines of the Kenyan Judiciary.

Lee *et al.* (2020)'s conducted a study among Korean immigrants in the United States amplifies the theory's global reach, mirroring the theory's foundation by underlining the positive impact of family support on mental health outcomes (Lee et al., 2020). Dalgard et al.,(2021) on the

Norwegian terrain, harmoniously reaffirm the theory's core tenets. Their findings, while echoing the original theory's notions of emotional, practical, and financial support, lend empirical depth to the theory's universality.

Venturing into the vibrant fabric of Bangladeshi university students' psychological well-being, Khaleque et al. weave an intricate narrative that resonates with the Social Support Theory's essence. Their exploration amplifies emotional and instrumental support's significance, mirroring the theory's pillars. However, a nuanced lens uncovers subtle shades of difference, with cultural nuances adding a distinct hue to the theory's canvas. Their findings both align with and diverge from the theory, accentuating its dynamic adaptability across diverse cultural contexts (Khaleque et al., 2020).

Collectively, these commentaries transcend mere textual analysis; they breathe life into the Social Support Theory's foundational pillars. Through critical engagement, they unearth nuances that expand the theory's horizons, reaffirming its universal relevance while showcasing its adaptability within diverse cultural contexts. As we embark on this scholarly journey, the commentaries beckon us to explore further, inviting us to unravel the theory's potential in the ever-evolving landscape of mental wellness within the Kenyan Judiciary and beyond.

2.3 Literature Review

The literature on the key variables is reviewed:

2.3.1 Family Support and Mental Health

Family support and mental health have been extensively studied globally, and several studies have shown that social support, particularly from family members, can positively impact an individual's mental health. A study conducted by Lee et al. (2020) on the impact of family support on the mental health of Korean immigrants in the United States found that family support had a significant positive effect on their mental health. The study showed that emotional support, such as encouragement and understanding, practical support, such as instrumental assistance, and financial support were the primary forms of support provided by family members. Similarly, a study conducted by Dalgard, et al. (2006) on the impact of social support on mental health in Norway found that social support, particularly from family members, had a significant positive effect on mental health.

The study identified emotional, practical, and financial support as critical forms of family support. A study by Khaleque, et al. (2020) examined the relationship between family support and

psychological well-being among university students in Bangladesh and found that family support was positively associated with mental health outcomes. The study identified emotional and instrumental support as the most critical forms of family support.

In a study conducted by Afshar, et al. (2018) in Iran, family support was found to be positively associated with mental health outcomes among patients with schizophrenia. The study identified emotional support, such as listening and empathy, as the most critical form of family support. In a different cultural context, a study by Lai et al. (2019) investigated the impact of family support on the mental health of Chinese older adults. The study found that emotional and instrumental support from family members was associated with better mental health outcomes among older adults in China. The study showed that family members provided emotional, practical, and financial support to individuals with mental illness.

Another study by Adewuya, et al. (2017) explored the role of family support in the management of depression among patients in Nigeria. The study found that family support was associated with a higher likelihood of remission from depression and improved quality of life. The authors also noted that emotional and practical support were the most critical forms of family support in the context of depression management. In Africa, family support has been identified as a critical factor in promoting mental health. A study conducted by Abbo (2011) in Uganda found that family support played a significant role in the management of mental illness in the country.

In Kenya, research on the role of family support on mental health is limited. However, a study conducted by Wangari et al. (2021) on the impact of social support on mental health among university students in Kenya found that social support, particularly from family members, had a significant positive effect on mental health. The study identified emotional, practical, and financial support as critical forms of family support.

All in all, Family support is a critical element in promoting mental health, and several studies have shown that emotional, practical, and financial support are essential forms of support provided by family members. The limited research on the role of family support on mental health among judicial employees in Nairobi City County highlights the need for further studies in this area.

The findings of such studies can inform interventions aimed at promoting the mental well-being of judicial employees in Nairobi City County, ultimately improving their ability to administer justice effectively.

2.3.2 Impact of Family Support on Work-Related Stress

Several studies have investigated the relationship between family support and work-related stress in different settings globally. The literature review highlights nine studies that provide evidence that family support is significantly associated with reduced levels of work-related stress.

A study by Büssing et al. (2020) investigated the role of family support in reducing work-related stress among German nurses. The study found that family support significantly reduced levels of work-related stress and was positively associated with job satisfaction. Similarly, a study by Baheiraei et al. (2019) in Iran found that family support played a significant role in reducing work-related stress among female healthcare workers. The study suggested that family support should be considered in the design of interventions aimed at reducing work-related stress in healthcare workers.

A study by Al-Homayan et al. (2020) in Saudi Arabia also found that family support significantly reduced work-related stress among medical students. The study suggested that interventions aimed at promoting family support could be an effective way to reduce work-related stress in medical students. A study by Zhang et al. (2020) in China found that family support had a significant positive effect on mental health outcomes, including reducing levels of anxiety, depression, and burnout, among healthcare workers during the COVID-19 pandemic. The study suggested that family support interventions should be considered as part of comprehensive mental health support for healthcare workers.

A study by Akanni et al. (2021) in Nigeria found that family support was significantly associated with reduced levels of work-related stress among healthcare workers. The study suggested that family support interventions could be an effective way to reduce work-related stress in healthcare workers in Africa. In a study by Ayeni et al. (2021), the impact of family support on the work-related stress of healthcare workers in Nigeria was investigated. The study found that family support was significantly associated with reduced levels of work-related stress among healthcare workers. The findings suggest that family support can play a vital role in promoting the mental well-being of healthcare workers in Nigeria.

In Kenya, a study by Wambua et al. (2020) examined the impact of family support on work-related stress among female employees in the Kenyan hospitality industry. The study found that family support was significantly associated with reduced levels of work-related stress. The findings

suggest that family support can be an essential resource for employees in the Kenyan hospitality industry, promoting their mental well-being and job satisfaction. In another study, Muniu et al. (2018) investigated the role of family support on work-related stress among Kenyan nurses. The study found that family support was significantly associated with reduced levels of work-related stress among nurses. The findings suggest that family support can be an essential resource for nurses in Kenya, promoting their mental well-being and job satisfaction.

Additionally, in a study by Mbau et al. (2020), the impact of family support on the mental health outcomes of women entrepreneurs in Kenya was investigated. The study found that family support was significantly associated with reduced levels of depression and anxiety among women entrepreneurs. The findings suggest that family support can be a vital resource for women entrepreneurs in Kenya, promoting their mental well-being and business success.

The reviewed studies provide evidence of the positive impact of family support on work-related stress and mental well-being in different settings globally. The findings suggest that interventions aimed at promoting family support can be effective in reducing work-related stress and promoting mental well-being among employees.

Further research is needed to investigate the effectiveness of family support interventions in reducing work-related stress and promoting mental well-being among employees in the Judiciary in Nairobi City County.

2.3.3 Barriers to accessing and utilizing family support

Family support is an essential element in promoting mental health outcomes, particularly in individuals facing stress and challenging situations such as Judicial employees. However, accessing and utilizing family support may be hindered by several barriers. This literature review examines the existing literature on the barriers to accessing and utilizing family support in different settings globally.

Language barriers, lack of knowledge about available support services, and stigma were identified as significant barriers to accessing and utilizing family support among immigrant and refugee women in Canada (Lau et al., 2020). Similarly, cultural norms and beliefs, lack of awareness about available support services, and the burden of care on family members were significant barriers to accessing and utilizing family support among breast cancer patients in Saudi

Arabia (Alghamdi et al., 2020). In Africa, stigma, lack of knowledge about mental health, and financial constraints were significant barriers to accessing and utilizing mental health services (Osafo et al., 2018; Kiima et al., 2019).

Alghamdi et al., (2020) studies affirmed that Trust, cultural congruence, and continuity of care were identified as facilitators to accessing and utilizing family support among immigrant and refugee women in Canada (Lau et al., 2020). Social support from family and friends, professional support from healthcare providers, and financial support were identified as facilitators to accessing and utilizing family support among breast cancer patients in Saudi Arabia.

Other studies have also reported various barriers to accessing and utilizing family support. A study on the barriers to accessing and utilizing mental health services among Hispanic/Latino immigrants in the United States found that language barriers, lack of knowledge about available services, and stigma were significant barriers, while social support, cultural congruence, and trust in healthcare providers were facilitators (Sanchez et al., 2013). A study on the barriers to accessing and utilizing mental health services among low-income African American women in the United States found that financial constraints, stigma, and lack of knowledge about available services were significant barriers, while social support and trust in healthcare providers were facilitators (Ward et al., 2016). Similarly, trust in healthcare providers, social support, and the availability of mental health services were identified as facilitators to accessing and utilizing mental health services in Africa and Kenya (Osafo et al., 2018; Kiima et al., 2019).

The African perspective, rooted in diverse cultural contexts, reveals a complex interplay between these factors. The prevalence of stigma, illuminated by research such as Abbo (2011) in Uganda and Gureje et al. (2019) in Nigeria, presents a significant hurdle to seeking family support for mental health. Cultural beliefs that cast shadows on mental well-being often deter individuals from reaching out, fearing potential isolation and discrimination. Moreover, research by Makanjuola et al. (2019) in Nigeria and Atilola et al. (2013) in Ghana underscores the challenge of limited awareness about available support resources. Many remain uninformed about mental health services and familial support options, hindering their ability to access the appropriate care.

While economic constraints emerge as formidable barriers, as evidenced by studies conducted by Sorsdahl et al. (2019) in South Africa and Uwakwe et al. (2018) in Nigeria, the potential for transformative change lies in the facilitators that illuminate the path to mental well-

being. Community support, integration into healthcare systems, and culturally adapted interventions, as highlighted by studies by Campbell-Hall et al. (2011), Jenkins et al. (2019), and Thornicroft et al. (2017), respectively, collectively reveal the promising avenues to enhance family support for mental health across the African continent

In Kenya, a study on the barriers to accessing and utilizing mental health services among university students found that stigma, lack of knowledge about mental health, and financial constraints were significant barriers, while social support and trust in healthcare providers were facilitators (Gitonga et al., 2020). Another study on the barriers to accessing and utilizing mental health services among female sex workers in Kenya found that stigma, lack of confidentiality, and financial constraints were significant barriers, while social support and trust in healthcare providers were facilitators (Njambi et al., 2020).

The findings of the reviewed studies suggest that barriers to accessing and utilizing family support include a lack of knowledge about available support resources, the stigma associated with seeking help, and concerns about confidentiality. Therefore, it is essential for the Judiciary to provide education and information about available support resources and to create a culture that promotes the use of such resources. Additionally, efforts should be made to reduce stigma and increase awareness of the importance of seeking help when needed. By addressing these barriers, the Judiciary can create a supportive environment that promotes the mental health and well-being of its employees and their families.

2.3.4 Strategies for improving provision and Utilization of family support for mental health

Family support is critical in promoting mental health outcomes, and several studies have investigated the provision and utilization of family support in mental health care worldwide.

Studies conducted in various countries have shown that family support is essential in promoting better mental health outcomes. In Hong Kong, Chan et al. (2019) investigated the provision of family support in mental health care and found that interventions that enhance family involvement and support were effective in improving mental health outcomes.

The study recommended the inclusion of families in the care of patients with mental illness. Similarly, a study by Poon et al. (2021) in Singapore found that family involvement in mental health care was positively associated with treatment adherence and better mental health outcomes.

The study concluded that mental health services should prioritize involving families in the care of patients with mental illness.

In Nigeria, Makanjuola et al. (2019) investigated the role of family support in the care of patients with mental illness and found that family support was critical in promoting treatment adherence and better mental health outcomes. The study recommended that mental health services in Nigeria should involve families in the care of patients with mental illness.

A study conducted in Kenya by Kiima et al. (2019) explored the barriers to accessing and utilizing mental health services among university students. The study found that support from family and friends was a facilitator to accessing and utilizing mental health services. The study recommended that mental health services should prioritize involving families and friends in the care of patients.

Mental health challenges are increasingly common among judicial employees in Nairobi City County, and family support can play a crucial role in promoting better mental health outcomes (Mutiso et al., 2018). To improve the provision and utilization of family support for mental health patients, interventions that enhance family involvement and support, such as family psychoeducation, family therapy, and caregiver support groups, should be implemented (Musyimi et al., 2016). Involving families and friends in the care of patients has been shown to improve treatment adherence and better mental health outcomes (Ssebunnya et al., 2011). Additionally, mental health services should be made more accessible and affordable to ensure that patients can access care easily (Kiima et al., 2019). Awareness campaigns on the importance of family support in mental health care should also be conducted to improve family members' understanding and engagement in their loved one's care (Osafo et al., 2018).

Overall, family support is critical in promoting mental health outcomes in individuals facing stress and challenging situations. The reviewed studies suggest that family involvement and support are effective in improving mental health outcomes. To promote better mental health outcomes among judicial employees in Nairobi City County, mental health services should prioritize involving families and friends in the care of patients, and the provision of mental health services should be made more accessible and affordable.

2.3.5 Mental Health

Globally, the investigation into changes in mental health status over time, variations in mental health symptoms, and enhancements in quality of life serves as a cornerstone in comprehending the intricate fabric of family support's impact on mental well-being. Longitudinal studies conducted by Brown and Barlow (2015) emphasize the significance of analyzing mental health trajectories over time, acknowledging that these trajectories are inherently intertwined with support systems such as family dynamics.

Within the African context, the study of these dependent variables gains added complexity due to the diverse socio-cultural and economic landscapes across the continent. Research by Patel et al. (2018) underscores the role of family and community support in mitigating mental health challenges within African societies. Changes in mental health status, symptomatology, and quality of life gain unique dimensions when examined through the lens of African cultures, emphasizing the pivotal role of familial ties in mental health outcomes.

Research by Mochache et al. (2019) highlights the increasing awareness of mental health issues in Kenya and the significance of family support in the recovery process. Changes in mental health status over time, variations in symptomatology, and improvements in quality of life serve as pivotal markers in assessing the effectiveness of interventions and policies geared toward mental health well-being within the Kenyan context.

In conclusion, the dependent variables – changes in mental health status over time, variations in mental health symptoms, and enhancements in quality of life – serve as crucial touchstones in this exploration.

2.4 Summary and Knowledge Gaps

This chapter has conducted an exhaustive exploration of the role of family support in the context of work-related stress within the judicial domain, with a specific focus on the Judiciary in Nairobi City County. The theoretical framework established the foundation for comprehending the intricate dynamics between family support and work-related stress, drawing upon the core components of the Social Support Theory: emotional, instrumental, informational, and appraisal support (Lee et al., 2020; Dalgard et al., 2006).

The literature review encompassed global, African, and Kenyan perspectives, highlighting the crucial significance of family support in alleviating work-related stress. A multitude of studies

illuminated the positive impact of family support on mitigating work-related stress, improving job satisfaction, and contributing to an overall enhanced quality of work life. Additionally, an exploration of barriers to accessing and utilizing family support shed light on the pivotal role of factors such as trust, cultural congruence, and continuity of care in facilitating the utilization of support services (Lau et al., 2020; Alghamdi et al., 2020; Sanchez et al., 2013; Ward et al., 2016; Osafo et al., 2018; Kiima et al., 2019).

Furthermore, an examination of intervening variables deepened our understanding of how factors such as age, gender, marital status, education level, occupation, and personal experiences intricately interact with family support to influence work-related stress levels. These variables were found to play a crucial role in shaping the dynamics between family support and work-related stress outcomes (Sargent-Cox et al., 2012; Gureje et al., 2015; Kizza et al., 2017; Lund et al., 2010; Mochache et al., 2019)

Despite the extensive exploration carried out in this chapter, significant gaps in our understanding of family support's role in managing work-related stress within the Judiciary context in Nairobi City County persist. While studies from diverse cultural contexts contribute valuable insights, a scarcity of research specifically targeting judicial employees in Nairobi City County limits the comprehension of their unique challenges and circumstances.

Moreover, the intricate interplay between family support and other potential determinants of work-related stress within the judicial setting remains underexplored. Factors such as organizational culture, job demands, and coping mechanisms may interact with family support in complex ways, necessitating further investigation.

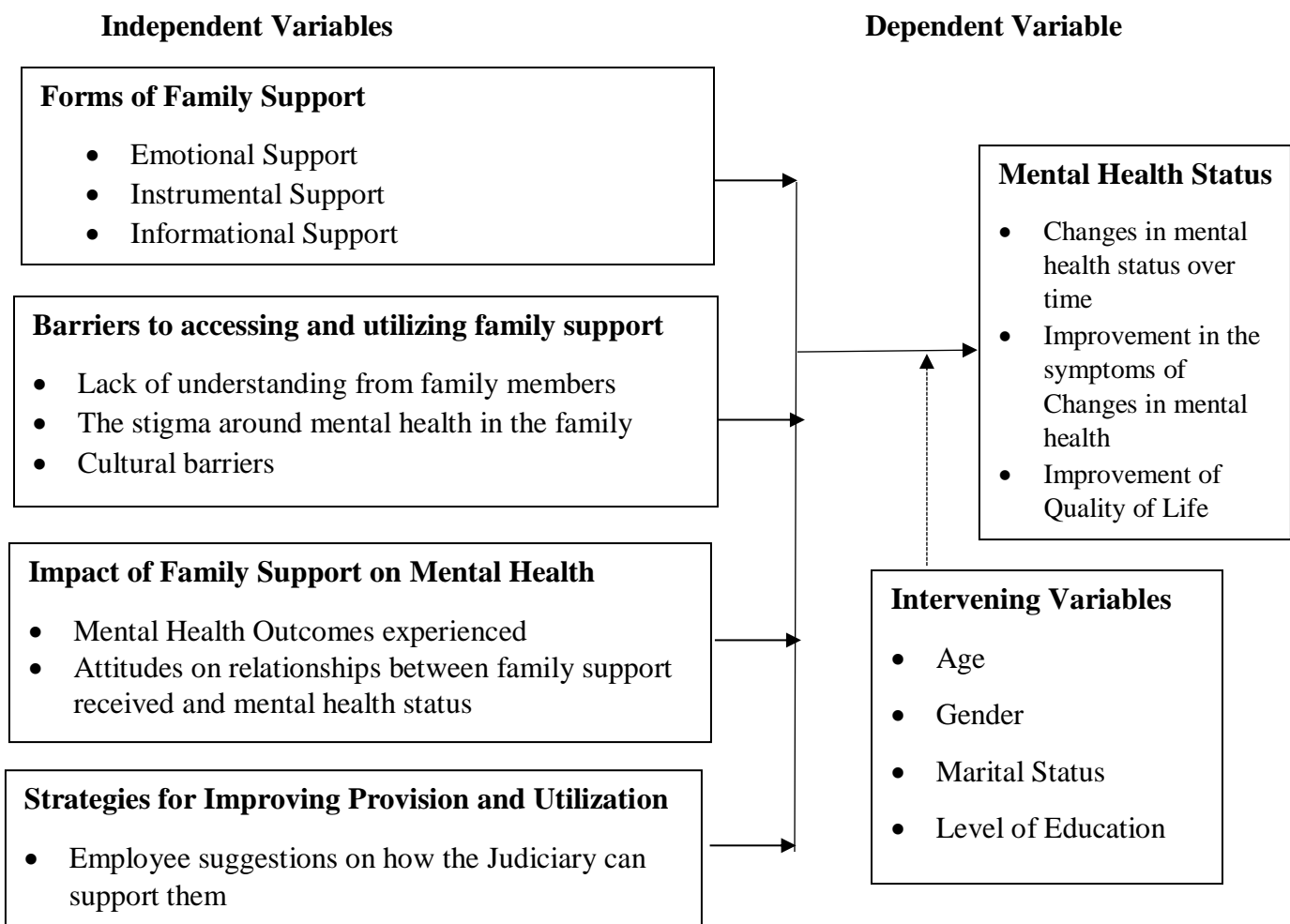
Furthermore, the effectiveness of interventions designed to enhance family support and subsequently alleviate work-related stress among judicial employees in Nairobi City County requires empirical validation. Designing targeted strategies and assessing their impact on work-related stress represents a promising avenue for future research.

While the existing literature provides valuable insights into the relationship between family support and work-related stress within the judicial sector, a more focused inquiry into the specific context of judicial employees in Nairobi City County is warranted. By addressing these knowledge gaps, forthcoming research can contribute to the development of tailored interventions that

effectively manage work-related stress and foster a healthier work environment for this vital professional group.

2.5 Conceptual Framework

This study sought to assess the role of family support on mental among judicial employees. The four forms of family support; Barriers to Accessing and Utilizing family support; Impact of Family Support; Strategies for Improving Provision and Utilization of family support for mental health are the independent variables while Mental Health Outcomes in family support is the dependent variable as shown in Figure 1.



Source (Author 2023)

Figure 1

Conceptual Framework

The first step involved identifying the types of family support that judicial employees with mental health conditions require and their level of satisfaction with this support. The next step was to develop and implement training programs that enhance judicial employees' understanding of family support for mental health, the types of support available, and how to access these resources. Adequate mental health resources should also be made available to judicial employees, including access to mental health professionals, counselling services, and mental health education.

Addressing cultural or organizational barriers that hindered the utilization of family support interventions for mental health was also critical to successful implementation. Data analysis using descriptive and inferential methods helped identify patterns and relationships between the variables, including the mental health issues experienced by individuals and the types of barriers to receiving family support for mental health. Based on the analysis, interventions were designed to address the identified barriers and leverage the facilitators to increase the effectiveness of family support for mental health. The impact of the interventions on mental health was monitored, including changes in mental health status, symptoms, and improvements in quality of life.

Factors that impact the relationship between family support and mental health, such as cultural factors or the severity of the mental health condition, were identified. Finally, the findings can be used to inform best practices for leveraging family support for mental health and guide future research in this area. It is important to note that the successful implementation of family support for mental health among judicial employees is affected by various factors, including the willingness of the Judiciary and judicial employees to support and promote mental health initiatives, availability of resources, cultural factors, and legal and policy frameworks. These factors must be considered in the implementation process to ensure that the intervention is effective and sustainable.

2.6 Study Variables Relationships

The intricate interplay between family support and mental health within the judicial context of the Nairobi City County constitutes a significant area of inquiry. To comprehensively understand this relationship, an in-depth exploration of the study's variables is essential. This literature review critically evaluates and synthesizes existing research to shed light on the complex dynamics that underlie the interrelationships among these variables.

At the core of this study are the independent variables, which encompass a multifaceted array of dimensions pertaining to family support and mental health. These encompass the type of

family support received, the frequency of its provision, the level of satisfaction with such support, the presence or absence of diagnosed mental health conditions, the specific type of diagnosed conditions, the severity and frequency of mental health symptoms, as well as the barriers that influence the reception of family support. Afifi, Cox, and Enns (2006) highlight the significance of differentiating emotional and instrumental support, underscoring the intricate role of distinct support types in mental health outcomes. Pickett et al. (2012) emphasize the role of positive attitudes and open communication as facilitators, aligning with the dimensions probed in this study.

Recent research by Thompson et al. (2020) emphasizes the reciprocity inherent in the family support-mental health relationship, highlighting the potential for support to either mitigate or exacerbate mental health conditions based on individual perceptions and attitudes. The dependent variables, encompassing changes in mental health status and symptoms over time, along with improvements in quality of life, serve as the tangible outcomes of this study. To capture the dynamic shifts in mental well-being and symptomatology, longitudinal analyses are paramount. Methodologies endorsed by Brown and Barlow (2015) provide insights into capturing the evolving mental health trajectories that align with the aims of this study.

The influence of intervening variables, including age, gender, marital status, education level, occupation, personal experiences and work-related stressors adds a layer of complexity to the family support-mental health relationship. McLeod (2019) underscores that these variables introduce nuanced contextual dimensions that can either amplify or attenuate the relationship's strength and direction, necessitating a nuanced examination.

CHAPTER THREE

RESEARCH METHODOLOGY

3.1 Introduction

This chapter presents the methodology that was used to conduct the study. It covers the research design, study area, target population, sampling procedures and sample size, research instrument, validity and reliability of the research instruments, data collection methods, data analysis procedures, and ethical considerations.

3.2 Research Design

The research design for this study integrated both quantitative and qualitative methods using a sequential explanatory mixed methods approach. This design combined a cross-sectional survey with in-depth interviews to achieve a comprehensive understanding of the relationship between family support, work-related stress, and mental health among judicial employees in Nairobi City County.

3.3 Study Location

The study was carried out at Milimani Law Courts and Milimani Commercial Courts in Starehe Constituency, Makadara Law Courts in Makadara Constituency, JKIA Law Courts in Embakasi East Constituency, Kibera Law Courts in Kibra Constituency and Supreme Court in Starehe Constituency, all in Nairobi City County.

3.4. Study Population

According to Etikan et al. (2016), a target population refers to a complete set of individuals or objects that share similar observable characteristics, to which the study's results are meant to be applied.

The target population for this study is judicial employees in Kenya who have been working for at least six months in Nairobi City County. This population was selected because they are likely to have experienced work-related stress, which is the primary stressor under investigation. According to the Judicial Service Commission (JSC) in Kenya, the judicial employees consist of judges, judicial officers and judicial staff who work in the court system.

Statistics provided by the Judiciary of Kenya indicate that there are 1,030 employees Nairobi City County as shown in Table 2

Table 1
Target Population

Employee Category	Number of Employees	Percentage
1. Judges	40	3.9%
2. Judicial Officers	87	8.4%
3. Judicial Staff	903	87.7%
Total	1,030	100%

Source: The Judiciary of Kenya. (n.d.). Judicial Staff Establishment October, 2019.

3.5: Sampling Procedure and Sampling Size

The sampling procedure involves determining and selecting the sample size for the study.

3.5.1 Sample Size

The sample size for this study was determined using Yamane formula (1967) as indicated below:

$$n = \left\{ \frac{N}{1 + N(e)^2} \right\}$$

Where: n=sample size;

N= population under study; and

e=Marginal error

Given:

N= 1030 employees

e= margin error of 0.05

Standard confidence level is 95%, for better accuracy which will give a margin error of 0.05.

Therefore, the Sample size is calculated as follows:

$$n = 1030 / 1 + 1030(0.05)^2$$

$$n = 282$$

Therefore, the sample size for this study was 282 employees. The sample was proportionally distributed across different judicial employees as indicated in Table 3

Table 2
Sample Size

Employee Category	target population	sample ratio	Sample Size	% sample
1. Judges	40	0.274	11	4
2. Judicial Officers	87	0.274	24	8
3. Judicial Staff	903	0.274	247	88
Total	1030	0.274	282	100

Judges include all the Judges of the superior courts, judicial officers include magistrates and kadhis, while the rest of the employees fall under judicial staff.

3.5.2 Sampling Techniques

The study used a stratified random sampling technique, which is a method of sampling that involves dividing the population into homogeneous subgroups or strata and then selecting a random sample from each stratum. This technique ensured that the sample obtained is representative of the population, and it allows for comparisons between subgroups. In this study, the target population was divided into three strata based on gender and job position to ensure that the sample is representative of the population. A multi-stage approach was used to select a sample size of 282 participants.

This approach involved selecting participants in stages, with each stage involving a smaller sample size than the previous stage. The use of a screening process ensured that only eligible participants are selected for the study. Data was collected through a structured questionnaire and interview, which are standard methods for collecting quantitative and qualitative data. Participants were informed of their rights and the study's purpose to ensure that they understand the study and feel comfortable in participating in the research.

The study was conducted confidentially and ethically to protect the participants' privacy and ensure that they are not harmed by participating in the study. Overall, the use of a stratified random sampling technique, a multi-stage approach, and a screening process ensured that the sample obtained was representative of the population.

The sample stratification is at 3 levels. The strata were determined based on gender and job position. The three strata categories are:

1. Judges: This category includes all the Judges of the superior courts.
2. Judicial Officers: This category includes magistrates and kadhis courts.
3. Judicial Staff: This category comprises the rest of the employees under the judicial staff category.

Here's a breakdown of the stratification and the persons in each category:

Strata 1: Judges

- Number of Employees: 11
- Percentage: 3.9%

Strata 2: Judicial Officers

- Number of Employees: 24
- Percentage: 8.4%

Strata 3: Judicial Staff

- Number of Employees: 247
- Percentage: 87.7%

The sample size determination was calculated based on these strata, ensuring proportional distribution within each category. This stratification approach allows for better representation and comparability among different employee categories. The study's total sample size was determined to be 282 employees, and it was proportionally distributed across these three strata based on their respective percentages.

3.6 Data Collection Procedures

The study used primary data collection procedures, and participants were identified through purposive sampling. The structured questionnaire was self-administered to judicial employees in each court within Nairobi City County starting with Milimani Law Courts which is the biggest court in the County. In-depth interviews were conducted to collect more detailed data, which was analyzed using a qualitative approach. Trained research assistants collected the data, which was cleaned, coded, and analyzed using appropriate statistical techniques SPSS. The researcher booked appointments with the participants and interviews were conducted as scheduled. The interviews were recorded and transcribed for analysis.

Ethical considerations were observed throughout the data collection process, including ensuring participants' privacy and confidentiality.

3.6.1 Data Collection Techniques

In this initial phase, a cross-sectional survey was administered first to gather quantitative data. This order ensures that participants' responses are not influenced by the qualitative interview process, allowing for unbiased and comprehensive quantitative data collection to a diverse sample of judicial employees in Nairobi City County. The survey included standardized measures related to family support, work-related stress, and mental health. The quantitative data collected from this survey was analyzed using descriptive statistics, correlation analysis, and regression analysis. This phase provided an overview of the relationships between the variables and identified potential patterns and associations.

Building upon the quantitative findings, a purposive sample of participants were selected from the survey respondents. This subset included individuals who scored high or low on measures of family support and mental health, as well as those who reported experiencing high levels of work-related stress. In-depth interviews were conducted after the quantitative survey to explore participants' experiences in greater depth. This approach ensured that participants' qualitative responses are not constrained by their prior completion of the structured survey. The interviews were conducted with these participants to explore their experiences, perceptions, and contextual factors related to family support, mental health, and work-related stress. The qualitative data collected through the in-depth interviews underwent thematic analysis. This analytical process involved identifying recurring themes, patterns, and nuances in participants' narratives. The goal is to gain deeper insights into the experiences and underlying factors that influence the relationships identified in the quantitative phase.

3.6.2 Data Collection Tools

In this study, the research instruments chosen to collect data were a structured questionnaire and interview guides, with a specific focus on foregrounding the element of stress among judicial employees. The structured questionnaire served as a quantitative tool for data collection. It encompassed a range of aspects, including demographics, family support, work-related stress, and mental health. The items included in the questionnaire have been meticulously chosen to capture the nuances of employee stressors and their impact on mental wellness. Trained research assistants administered the questionnaire to the selected participants. The questionnaire predominantly

consisted of close-ended questions. These questions featured predetermined answer categories, enabling participants to easily select their responses.

This approach aimed at optimizing the questionnaire's response rate and ensuring the collection of accurate data that can be effectively coded, quantified, and analyzed. Special attention has been given to developing items that explore the various dimensions of work-related stress. The questionnaire inquired about specific stressors employees encountered in their roles, such as workload, time pressures, interpersonal conflicts, and organizational pressures. This approach not only aided in comprehending the stress dynamics within the context of family support and mental health but also offered insights into the intricacies of this relationship. To complement and enhance the data collected through the questionnaire, interview guides were employed to gather in-depth qualitative insights from participants. These guides were specially crafted to facilitate detailed discussions on the variables of interest within the framework of the study.

Special attention was given to developing items that explore the various dimensions of work-related stress. The questionnaire inquired about specific stressors employees encounter in their roles, such as workload, time pressures, interpersonal conflicts, and organizational pressures. By eliciting responses on these stress-related aspects, the questionnaire aimed at comprehensively understanding the different facets of stress employees face.

The interview guides probed extensively into the mechanisms through which family support either mitigates or exacerbates work-related stress and its subsequent impact on mental well-being. By foregrounding stress narratives within the interview process, the study aims to provide a sensitive and empathetic platform for participants to articulate their experiences in a meaningful and cathartic manner. The study will also contribute to a richer and more contextual understanding of the intricate interplay between family support, work-related stress, and mental health outcomes.

Recognizing the sensitivity of the mental wellness area, the research team has meticulously selected items for the instruments that foster the collection of desired information without causing any discomfort or distress to participants. The items were formulated to encourage open and honest responses while prioritizing the well-being and emotional comfort of participants.

The research team designed and pre-tested the questionnaire and interview guides to ensure their validity and reliability in accurately measuring the variables of interest. This rigorous

preparation further enhanced the instruments' effectiveness in capturing the intricacies of family support, work-related stress, and mental health outcomes among the study participants.

This combined approach of using structured questionnaires and interview guides provided a holistic understanding of the relationships under investigation. Through foregrounding stress within both the questionnaire and the interview guides, the research gained a more nuanced perspective on the critical role of family support in the employees' overall well-being.

3.6.3 Ethical Considerations

The study followed ethical procedures by acquiring approval from the KCA University Ethics Review Committee (KCA-ERC) and obtaining a permit from the National Commission for Science, Technology and Innovation (NACOSTI). All respondents were asked to sign informed consent forms before the study begins. To ensure confidentiality and anonymity, the data obtained was kept confidential. Moreover, the study aimed to interfere as little as possible with the respondents' administrative and work duties.

Considering the research lead is a judicial employee, measures were put in place to ensure that bias and prejudice were mitigated. Participant anonymity and confidentiality was ensured to prevent the possibility of being influenced by personal relationships or biases when analysing the data. The study upheld ethical guidelines for research involving human subjects. Informed consent was obtained from all participants, both for the survey and the qualitative interviews. Participant confidentiality and anonymity was strictly maintained throughout the study. All collected data was stored securely and used solely for research purposes.

3.7 Validity and Reliability of the Instrument

3.7.1 Pilot Study

The piloting phase of the research study involved a representative sample of 10%, which comprised of 28 participants from Kiambu Law Courts in Kiambu County. This sample was used to identify any ambiguities, duplications, and errors in the questionnaire and interview guide so that they could be improved before the actual data collection process. Piloting ensured that the instructions provided to the respondents were clear. The participants who were engaged in the piloting phase were not included in the actual study.

3.7.2 Validity of the Research Instruments

Validity pertains to the precision of research instruments in measuring the phenomenon under investigation. In this study, the validity of the research instruments was assessed through the use

of expert judgments. Specifically, the researcher consulted with mental health practitioners from the Judiciary's panel of health providers to determine if the research questions could effectively measure the variables of interest. These professionals offered their expert opinions on the effectiveness of the research instruments in measuring the variables being studied. Furthermore, the university supervisors examined the instruments to evaluate the suitability of the content and identified any areas requiring modifications to align with the study's objectives. The expertise of the university supervisors guaranteed that the research instruments were relevant and suitable for the study's purposes.

3.7.3 Reliability of the Research Instruments

Reliability is the consistency and stability of research instruments in measuring the variables of interest. In this study, the reliability of the research instruments was assessed through the use of test-retest reliability method. This method involves administering the same instrument twice to the same participants under similar conditions and measuring the degree of correlation between the two sets of results.

This method was suitable for determining reliability as it measured the extent to which the research instruments produced consistent results over time, assuming that the phenomenon being measured remained stable. To conduct the analysis and generate the method's reliability coefficient, the research team used Statistical Package for Social Sciences (SPSS). The test-retest reliability coefficient was calculated using the Cronbach's Alpha.

The value of Cronbach's Alpha was established to be 0.821. This is a relatively high Cronbach's Alpha value. Alpha was developed by Lee Cronbach in 195 to provide a measure of the internal consistency of a test or scale; it is expressed as a number between 0 and 1.

Pearson correlation coefficient function. A high correlation coefficient (close to 1.0) indicates high reliability, while a low correlation coefficient (close to 0) indicates low reliability. The research team interpreted the results of the reliability analysis to ensure that the research instruments are reliable in measuring the variables of interest.

3.8 Data Analysis

The data collected for this study was analysed using both quantitative and qualitative techniques. To analyse the quantitative data, the Statistical Package for Social Sciences (SPSS) software was used due to its ability to analyse large datasets. Firstly, filled questionnaires were checked for completeness, and errors and prepared for analysis. The data was then coded and entered into the SPSS for analysis. Measures of central tendency such as frequencies, percentages were generated.

Inferential statistics was also be used to measure the significance of the relationship between the independent and dependent variables. Pearson correlation was used to determine the correlation between the study variables. A correlation coefficient of +1 would indicate that the variables are positively perfectly correlated; -1 meant that the variables are perfectly negatively correlated, and zero meant the variable are not correlated. Multiple regression analysis was used to test the significance of the relationship between the independent and the dependent variables. The equation is expressed as follows:

$$Y = \beta + \beta_1 X_1 + \beta_2 X_2 + \beta_3 X_3 + \beta_4 X_4 + e$$

Where:

Y = Mental Health

β = Constant

X1 = Family Support and Mental Health

X2 = Impact of Family Support on Mental Health

X3 = Barriers and Facilitators

X4 = Strategies on Provision and Utilization of Family Support

$\beta_1, \beta_2, \beta_3$ = the slope of the independent variable

e = error term

Qualitative data was drawn from key informant interviews and open-ended questions, which were analysed based on the themes drawn from the research objectives. The researcher closely examined the interview transcripts for emerging patterns and themes concerning the research objectives. Qualitative data was then presented in verbatim quotes and narrative form.

Quantitative and qualitative data was integrated during the analysis and interpretation stages to provide a holistic understanding of the research problem. The findings from both phases were woven together to present a comprehensive narrative. The study's outcomes were reported in a final research report and will be disseminated through presentations at academic conferences and publications in relevant academic journals. This approach ensured that the combined insights contribute to a more profound understanding of the relationships under investigation.

CHAPTER FOUR

DATA ANALYSIS, PRESENTATION, INTERPRETATION AND DISCUSSIONS

4.1 Introduction

This chapter presents the study findings, data analysis and discussions of the study findings. In particular, the chapter is organized as follows: response rate analysis and reliability results, demographic information, descriptive analysis showing the respondents profiles and characteristics, factor analysis and correlation matrix.

4.2 Demographics and Response Rates

4.2.1 Response Rate

The study sought to collect data from 282 Judicial employees in Nairobi City County, Kenya. The questionnaires returned are as shown in Table 3.

Table 3

Response Rate

Employee Category	Issued Questionnaires	Returned Questionnaires	Non-	%	%Non-
			Returned Questionnaires	Returned Questionnaires	Returned Questionnaires
Judges	11	11	0	100%	0%
Judicial Officers	24	24	0	100%	0%
Judicial Staff	247	202	45	82%	18%
Total	282	237	45	84%	16%

Source: Survey Data (2023)

The table provided presents the response rates to questionnaires issued to judicial employees in Nairobi City County, Kenya. For the category of Judges, all 11 questionnaires were returned, resulting in a 100% response rate. None of the questionnaires were left unreturned. For Judicial Officers, all 24 questionnaires were also returned, indicating a 100% response rate. In the Judicial Staff category, there were 247 questionnaires issued. However, only 202 were returned, while 45 were not returned. This category has a response rate of 82% (202/247) and a non-response rate of 18% (45/247). In total, there were 282 questionnaires issued to judicial employees and 237 were returned, while 45 were not returned. The overall response rate for all categories combined is 84% (237/282), and the non-response rate is 16% (45/282). In line with observations made by Mugenda

(2009) who concluded that a response rate of 50% is adequate for analysis and reporting, a rate of 60% is good while a response rate of 70% and above is excellent for analysis purposes. Based on the overall response rate, it was concluded that the response rate of 87% is representative to permit data analysis and reporting.

4.2:2 Reliability of The Research Instruments

The researcher sought to test reliability of the research tool (the questionnaire). The findings are shown on table 4.

Table 4
Reliability of the Research Instruments

Reliability Statistics	
Cronbach's Alpha	N of Items
0.821	21

Source: Survey Data (2023)

Table 4 provides information about the reliability of the set of research instruments used in the study. The value of Cronbach's Alpha was established to be 0.821. This is a relatively high Cronbach's Alpha value. In practice, Cronbach's Alpha values typically range from 0 to 1, where a higher value indicates greater internal consistency among the items. A Cronbach's Alpha of 0.7 or higher is often considered acceptable for research instruments, indicating that the items in the instrument are strongly related and measure the same construct consistently. In this case, the Cronbach's Alpha of 0.821 suggests that there is a strong degree of internal consistency among the 19 items in the research instrument. This is a positive finding, indicating that the items in the instrument are closely related and that they measure the same underlying construct consistently. The researcher had confidence in the reliability of the instrument, and it's likelihood to yield consistent and dependable results.

4.2.3 Age of the respondents

The study sought to determine the distribution of respondents in relation to the age. Table 5 reveals the findings.

Table 5
Age of The Respondents

Age	(n)	(%)
18-25 years	1	0
26-35 years	84	35
36-45 years	112	47
46-55 years	31	13
56 years or above	9	4
Total	237	100

Source: Survey Data (2023)

The demographic information results were gathered through questionnaires issued to the judicial employees in Nairobi City County. Among the 237 participants who provided their age details, a notable pattern emerges. The youngest age group, comprising individuals aged 18 to 25 years, was represented by only one respondent, making up a negligible percentage of the total sample at 0%. The most prominent age bracket among the respondents fell within the 26 to 35 years category, encompassing 84 individuals, constituting 35% of the total. Moving up the age scale, the 36 to 45 years group emerged as the largest demographic, with 112 respondents, making up 47% of the total sample.

Meanwhile, individuals aged 46 to 55 years accounted for 31 respondents, representing 13% of the participants. Lastly, those aged 56 years or above, numbering nine respondents, constituted 4% of the total sample. These demographic findings highlight a diverse age range among the respondents from the Judicial employees, underscoring the importance of considering varying perspectives and experiences when addressing organizational matters and decision-making.

4.2.4 Gender of The Respondents

Analysis on the gender of the respondents was conducted. Table 6 shows the results.

Table 6
Gender of The Respondents

Gender	(n)	(%)
Female	101	43
Male	134	57
Non-binary	1	0
Prefer not to say	1	0
Total	237	100

Source: Survey Data (2023)

Table 6 provides insights into the gender distribution among the participants. Out of the total 237 respondents, the majority identified as male at 134 participants, accounting for 57% of the total sample. On the other hand, female respondents represented a significant number, at 101 participants, making up 43% of the total. Additionally, there were a few respondents who identified as non-binary and preferred not to specify their gender, each accounting for 0.4% of the total sample. These findings underscore the importance of considering gender diversity and inclusivity within the judicial employees, as it is crucial for ensuring a representative and equitable approach to organizational matters and decision-making.

4.2.5 Education Level

The study sought to identify the education level of the respondents. Table 7 shows the findings.

Table 7
Education Level

	(n)	(%)
Secondary school	1	
Diploma	26	11
Bachelor's degree	124	52
Master's degree	84	35
Doctorate	2	1
Total	237	100.0

Source: Survey Data (2023)

The results presented in Table 7 pertain to the education levels of the respondents among judicial employees in Nairobi City County. These findings underscore the diversity of educational qualifications within the organization and have implications for decision-making, recruitment, and workforce development strategies. 11% of the respondents held diplomas, which was represented by 26 individuals. Diplomas often signify specialized vocational or technical training and can bring unique skills to the organization. This category reflects a segment of the workforce that has pursued focused educational pathways beyond secondary school. The most prominent educational category among the respondents was individuals holding a Bachelor's Degree. This group comprised 52% of the total sample, with 124 respondents reporting undergraduate qualifications. This finding is significant as it indicates that a substantial portion of the judicial employees have a foundational higher education, which is typically a prerequisite for many professional roles. Furthermore, 35% of respondents held Master's Degrees, totalling 84 individuals who had pursued advanced education beyond the bachelor's level. The presence of master's degree holders highlights a pool of employees with specialized knowledge and expertise that can be leveraged for the benefit of the organization.

4.2.6 Marital Status

The data on marital status of respondents was sought so as to understand the marital status of the participants to ensure inclusivity in the research.

Table 8
Marital Status

Marital Status	(n)	(%)
Single	42	18
Married	185	78
Separated	6	3
Divorced	4	2
Total	237	100

Source: Survey Data (2023)

In Table 8, the results from the judicial employees provides insights into the marital status of the respondents. From the 237 respondents, the majority, comprising of 78% of the respondents, identified as "Married." In contrast to the married respondents, a smaller proportion of the participants identified as "Single," constituting 18 percent of the total. The data shows that a very

small percentage of respondents, accounting for 3 percent, were "Separated." Lastly, the category of "Divorced" represented 2 percent of the total respondents. This implies that high family values are upheld among the judicial employees in Nairobi City County.

4.2.7 Occupation of The Respondents

The study sought to identify the occupation of the respondents to ensure appropriate distribution of the participants among the 3 categories. Table 9 shows the output.

Table 9
Occupation of The Respondents

Occupation	Frequency	Percent
Judge	11	5
Judicial Officer	24	10
Judicial Staff	202	85
Total	237	100

Source: Survey Data (2023)

Table 9 presents the results from the judicial employees regarding the occupation of the respondents. The largest portion of respondents, comprising 85% of the total, falls under the category of "Judicial Staff." "Judicial Officers" make up 10 % of the respondents. "Judges" represent 5% of the respondents. Understanding the distribution of occupations among respondents is essential for comprehending the composition of the judicial employees in relation to the work-related stress which is a major factor in mental health.

4.3 Data Presentation and Interpretation

The data for the review was collected in line with the study objectives using Likert scale-based responses and the document review guide. The responses were rated on a scale of 1 to 5, with 1 being strongly disagree, 2 being disagree, 3 being neutral, 4 being agree, and 5 being strongly agree. The responses were presented in a specific order to ensure consistency and ease of interpretation during the data analysis phase.

4.3.1 Forms of Family Support

The first objectives were to identify the specific forms of family support available to judicial employees in Nairobi City County and impact on their mental health. Table 10 shows the results.

Table 10
Family Support

		Strongly Disagree	Disagree	Neutral	Agree	Strongly Agree
My family provides emotional support	(n)	43	6	28	140	20
	%	18.1	2.5	11.8	59.1	8.4
I receive instrumental support;	(n)	30	6	27	142	32
	%	15.2	3	11.4	59.9	13.5
I am satisfied with the informational support	(n)	45	6	42	126	18
	%	19	2.5	17.7	53.2	7.6
I am satisfied with the appraisal support	(n)	43	6	28	140	20
	%	18.1	2.5	11.8	59.1	8.4

Source: Survey Data (2023)

Table 10 shows that a total of (8.4% n=20 and 59.1%, n=140) strongly agreed and agreed that their family provides emotional support. This indicates a substantial majority of judicial employees feel emotionally supported by their families, which can positively influence their mental well-being. (13.5% n=32 and 59.9%, n=142) strong agreed and agreed that they receive instrumental support from their families. This suggests that the majority of judicial employees in Nairobi City County rely on their families for practical assistance when needed, which can contribute to their overall mental health. (7.6% n=18 and 53.2%, n=126) strongly agreed and agreed that they are satisfied with the informational support they receive from their families. This reflects that a significant portion of judicial employees finds value in the information and advice offered by their families. Meanwhile (8.4% n=20 and 59.1%, n=140), strongly agreed and agreed that they are satisfied with the appraisal support. This indicates that feedback and encouragement from their families, positively impact their mental health and job satisfaction.

4.3.2 Family Support and Work-Related Stress

The second objective was to identify the impact of family support on work-related stress among judicial employees in the Nairobi City County.

Table 11
Family Support and Work-Related Stress

	(n)	(%)
Workload	52	21.9
Workplace support	8	3.4
Stigma	30	12.7
Family conflict	121	51.1
Other	26	11
Total	237	100

Source: Survey Data (2023)

Table 11 provides valuable insights into the prevalence and contributing factors to work-related stress among judicial employees in Nairobi City County. Family conflict emerges as the most significant source of work-related stress among judicial employees, with a substantial (51.1% n=121) reporting it as a significant factor. This highlights the profound impact of family-related issues on the well-being of judicial employees in Nairobi City County. Workload is the second most commonly reported stressor, accounting for (21.9%, n=52) of the cases, indicating a substantial burden on employees. Stigma and workplace support are of comparatively lower concern, with (12.7%, n=30) and (3.4%, n=8) respectively. The "Other" category, which encompasses various stressors, contributes to (11%, n=26) of the cases. These findings emphasize the pressing need for targeted interventions addressing family-related stressors and workload management to improve the mental health and overall well-being of judicial employees in Nairobi City County.

4.3.3 Barriers to Access and Utilizing Family Support

The third objective was to identify the barriers to access and receiving family support on mental health among judicial employees in Nairobi City County

Table 12
Barriers to Access and Utilizing Family Support

	(n)	(%)
Lack of understanding from family members	4	2
The stigma around mental health in the family	6	3
Cultural barriers	79	33
Financial constraints	131	55
Others	14	6
None	3	1
Total	237	100

Source: Survey Data (2023)

In Table 12, the data reveals the various barriers to receiving family support for mental health among judicial employees in Nairobi City County. The most commonly identified barrier, as reported by (55% n=131), of respondents is financial constraints. These constraints can exacerbate mental health issues, making it difficult for individuals to seek support from their families. Cultural barriers, including the expectation to be strong and not show vulnerability, are identified by (33% n=79) of respondents as a significant hindrance to receiving family support, placing it as the second most prominent barrier. Stigma around mental health in the family follows closely, with (6%, n=14) of respondents; recognizing it as a challenge, often resulting in discrimination and isolation.

Lack of understanding from family members is another barrier identified by (2%, n=4), of respondents; suggesting that family members may not possess the knowledge or awareness needed to provide adequate support. Finally, (1%, n=3) of respondents; reported that none of these factors impact family support, a result attributed to improved communication and reduced presence of stigma and cultural barriers within their families. Additionally, (6% n=14) of respondents, acknowledged that there are other unclassified factors that influence family support on mental health, indicating the complexity and uniqueness of each individual's experience. This implies that if these factors

4.3.4 Strategies for Improving the Provision and Utilization of Family Support

The fourth objective was to identify if there was a need to develop strategies for improving the provision and utilization of family support for mental health patients among judicial employees in Nairobi City County.

Table 13

Strategies for Improving the Provision and Utilization of Family Support

	(n)	(%)
YES	211	89
NO	26	11
Total	237	100

Source: Survey Data (2023)

Table 13 outlines that a significant majority of respondents, (89% n=211), affirmed that there is indeed a need to develop strategies to enhance the provision and utilization of family support for mental health patients. This strong agreement emphasizes the recognized importance of improving support systems for mental health patients within the judicial employee community. In contrast, only (11%, n=26) of respondents indicated that they do not perceive a need for such strategies. This highlights that a small minority of participants may believe that the existing support systems are sufficient or that other measures are more appropriate. Nonetheless, the overwhelming majority supporting the development of strategies underscores the importance of addressing this crucial aspect of mental health care within the workplace.

4.3.5 Correlations

Correlation analysis was conducted to test the relationship among the variables under study. Table 14 shows the results

Table 14
Correlations

		family support	barriers	impact of family support	strategies for improving family support
family support	Pearson Correlation	1	.567**	.819**	0.036
	Sig. (2-tailed)		0	0	0.577
	Sum of Squares and Cross-products	365	223	299.494	3.346
	Covariance	1.548	0.946	1.269	0.014
	N	237	237	237	237
barriers	Pearson Correlation	.567**	1	.429**	0.013
	Sig. (2-tailed)	0		0	0.84
	Sum of Squares and Cross-products	223.35	425.3	169.013	1.308
	Covariance	0.946	1.802	0.716	0.006
	N	237	237	237	237
impact of family support	Pearson Correlation	.819**	.429**	1	0.073
	Sig. (2-tailed)	0	0		0.26
	Sum of Squares and Cross-products	299.494	169.013	365.62	6.759
	Covariance	1.269	0.716	1.549	0.029
	N	237	237	237	237
strategies for Improving Family Support	Pearson Correlation	0.036	0.013	0.073	1
	Sig. (2-tailed)	0.577	0.84	0.26	
	Sum of Squares and Cross-products	3.346	1.308	6.759	23.148
	Covariance	0.014	0.006	0.029	0.098
	N	237	237	237	237

** Correlation is significant at the 0.01 level (2-tailed).

Source: Survey Data (2023)

Table 14 presents insightful data regarding the relationships between various key variables. A correlation of 0.567 between "family support" and "barriers and facilitators," which is both positively oriented and statistically significant at a 2-tailed significance level of 0.05. This correlation signifies a moderate positive connection between "family support" and "barriers and facilitators." when "family support" increases, it's likely that "barriers and facilitators" will also increase. The correlation between "family support" and "impact of family support" stands at a substantial 0.819, indicating a strong and statistically significant positive relationship between these two variables. In practical terms, when "family support" is higher, one can expect a corresponding increase in the "impact of family support." The correlation between "family support" and "strategies for improving family support" is notably low at 0.036, and it lacks statistical significance, with a p-value of 0.577.

This result suggests that there isn't a substantial linear relationship between these two variables, or, in other words, changes in one variable do not appear to correspond with significant changes in the other. The data reveals a correlation of 0.429 with "impact of family support." This correlation is moderately positive and statistically significant. Essentially, this suggests that as "barriers and facilitators" increase, the "impact of family support" tends to increase as well. The correlation between "barriers and facilitators" and "strategies for improving family support" is notably low, standing at 0.013, and it is not statistically significant with a p-value of 0.84. Therefore, it appears that there is no strong linear relationship between these two variables. The correlation between "impact of family support" and "strategies for improving family support" is 0.073. This correlation is of a lower magnitude and lacks statistical significance at the 0.05 level, with a p-value of 0.26. Consequently, this indicates a relatively weak positive relationship between these two variables, suggesting that changes in one variable are not strongly reflected in changes in the other.

4.3.6 Regression

Table 15
Model Summary

Model	R	R Square	Adjusted R Square	Std. Error of the Estimate	Change Statistics					Durbin - Watson
					R Square Change	F Change	df1	df2	Sig. F Change	
1	.439 ^a	.193	.182	1.097	.193	18.547	3	233	.000	.205

a. Predictors: (Constant), Family Support, Work Related Stress, Barriers and Strategies

b. Dependent Variable: Mental Health

Source: Survey Data (2023)

The results from the regression analysis, as presented in Table 15 provide insights into the predictive model's performance in explaining mental health outcomes among the study's participants. In this analysis, four predictor variables were considered: family support, work-related stress, barriers and facilitators, and strategies. The model's R-squared value, which is 0.193, indicates that approximately 19.3% of the variance in mental health outcomes can be accounted for by the combination of these predictor variables. This suggests that while the model provides some explanation for mental health outcomes, there are other factors beyond those included in the analysis that also play a role. The adjusted R-squared value, at 0.182, adjusts for the number of predictors in the model. It suggests that when accounting for the complexity of multiple predictor variables, approximately 18.2% of the variance in mental health outcomes is explained by the model.

The standard error of the estimate, at 1.097, represents the average difference between the actual mental health outcomes and the predicted values by the model. A lower value would indicate a better fit of the model to the data. In terms of change statistics, the F-change statistic of 18.547 with a significance level of 0.000 indicates that the addition of the predictor variables family support, work-related stress, barriers, and facilitators, and strategies collectively contribute

significantly to the explanation of mental health outcomes. The Durbin-Watson statistic, with a value of 2.205, is used to test for autocorrelation in the residuals. A value between 1.5 and 2.5 suggests that there is no significant autocorrelation present in the data.

4.3.7 ANOVA

Table 16

ANOVA

Model	Sum of Squares	df	Mean Square	F	Sig.
1 Regression	66.905	3	22.302	18.547	.000 ^b
Residual	280.167	233	1.202		
Total	347.072	236			

a. Dependent Variable: Mental Health

b. Predictors: (Constant), Family Support, Barriers, impact of family support and Facilitators Strategies

Table 16 presents the results of the analysis of variance (ANOVA) for the regression model assessing its overall statistical significance in explaining the variance in the dependent variable, Mental Health. Under "Regression," it shows that the sum of squares for the model is 66.905, with 3 degrees of freedom (df). The mean square, which is the sum of squares divided by the df, is 22.302. The F-statistic, calculated as the mean square for the regression divided by the mean square for the residuals, is 18.547.

This F-statistic tests whether the predictors as a whole have a significant impact on explaining mental health outcomes. The associated significance level (Sig.) is denoted as 0.000 (b), indicating a very low p-value. In practical terms, this means that the regression model, which includes the predictors family support, work-related stress, barriers and facilitators, and strategies, collectively has a highly significant influence on explaining the variance in mental health outcomes. Under "Residual," it shows the sum of squares for the residuals (unexplained variance) is 280.167, with 233 degrees of freedom. The mean square for the residuals is 1.202, representing the average unexplained variance. "Total" provides the sum of squares for the total variance in the dependent variable, which is 347.072.

4.4 Discussion of Study Findings

The data analysis conducted within the context of examining the role of family support in the mental health of judicial employees in Nairobi City County has yielded significant insights across

various aspects of this study. Firstly, regarding the identification of specific forms of family support available to judicial employees. It is evident that a substantial majority of respondents strongly agree (8.4%, n=20) and agree (59.1%, n=140) that their families provide emotional support. This demonstrates a robust emotional support network within the families of judicial employees, which can have a positive impact on their mental well-being. Furthermore, a significant majority of respondents also strongly agree (13.5%, n=32) and agree (59.9%, n=142) that they receive instrumental support from their families. This indicates that judicial employees in Nairobi City County often rely on their families for practical assistance when needed, which can contribute to their overall mental health.

Additionally, a noteworthy percentage strongly agrees (7.6%, n=18) and agrees (53.2%, n=126) that they are satisfied with the informational support they receive from their families. This reflects the value that judicial employees place on the information and advice offered by their families. Lastly, a significant number of respondents strongly agree (8.4%, n=20) and agree (59.1%, n=140) that they are satisfied with the appraisal support from their families. These statistics highlight the positive impact of feedback and encouragement from family members on the mental health and job satisfaction of judicial employees.

Financial constraints emerge as the most prominent barrier, with 55% (n=131) of respondents citing this challenge. The financial limitations hinder individuals from seeking necessary support from their families, potentially exacerbating their mental health issues. Cultural barriers, such as the expectation to be strong and not show vulnerability, are identified by 33% (n=79) of respondents as a significant hindrance to receiving family support, ranking as the second most prevalent barrier. Stigma surrounding mental health within the family context closely follows, with 6% (n=14) of respondents recognizing it as a challenge, often leading to discrimination and isolation. Another barrier is the lack of understanding from family members, identified by 2% (n=4) of respondents. This suggests that family members may lack the knowledge or awareness required to provide effective support. On a positive note, 1% (n=3) of respondents reported that none of these factors impact family support, reflecting improved communication and reduced presence of stigma and cultural barriers within their families.

Additionally, 6% (n=14) of respondents acknowledged the presence of other unclassified factors influencing family support for mental health, indicating the complexity and uniqueness of

each individual's experience. (89% n=211) of respondents, strongly affirmed the necessity of developing such strategies. This consensus underscores the recognized importance of improving support systems for mental health patients within the judicial employee community. In contrast, only (11%, n=26) of respondents indicated that they do not perceive a need for such strategies. This minority opinion suggests that a small segment of participants may believe that existing support systems are sufficient or that alternative measures may be more appropriate. Nonetheless, the predominant support for the development of strategies underscores the critical importance of addressing this crucial aspect of mental health care within the workplace.

CHAPTER FIVE

SUMMARY, CONCLUSIONS AND RECOMMENDATIONS

5.1 Introduction

This last chapter presents a summary of the findings for both descriptive statistics, study objectives, conclusions, policy recommendations, contribution of study to knowledge and areas for further research. The data obtained from the field to answer each of the objectives was presented in chapter four showing descriptive characteristics of the variables and the effect of the independent variable on the dependent variable.

5.2 Summary of Findings

5.2.1 Specific forms of family support available to judicial employees in Nairobi City County

The findings from the study, in line with previous research on family support, have indicated that specific forms of family support indeed play a significant role in influencing the mental health of judicial employees in Nairobi City County. This is consistent with prior research conducted by Lee et al. (2020) on the impact of family support on the mental health of Korean immigrants in the United States found that family support had a significant positive effect on their mental health. The study showed that emotional support, such as encouragement and understanding, practical support, such as instrumental assistance, and financial support were the primary forms of support provided by family members.

5.2.2 Family support on work related stress among judicial employees in Nairobi City County

The study revealed that family support plays a pivotal role in mitigating work-related stress among judicial employees in Nairobi City County, ultimately impacting employee mental health. This assertion is substantiated by the substantial number of respondents who strongly agreed with the positive influence of family support on work-related stress reduction. These findings align with research conducted by Akanni et al. (2021) in Nigeria, where they discovered a significant association between family support and reduced levels of work-related stress among healthcare workers. Akanni et al.'s study not only corroborates the present findings but also suggests that family support interventions can be a potent strategy for alleviating work-related stress among healthcare professionals in Africa.

5.2.3 Barriers to access and utilizing family support among judicial employees in Nairobi City County

The study revealed that barriers to access and utilizing family support among judicial employees in Nairobi City County influence employee mental health, this was evidenced by majority of the respondents who agreed, to this statement. In addition, the findings agreed with the previous studies findings by Gitonga et al., (2020) on the barriers to accessing and utilizing mental health services among female sex workers in Kenya found that stigma, lack of confidentiality, and financial constraints were significant barriers, while social support and trust in healthcare providers were facilitators

5.2.4 Provision and utilization of family support for mental health patients among judicial employees in Nairobi City County

The study found that provision and utilization of family support for mental health among judicial employees in Nairobi City County has a positive impact on the employee's mental health at work. This is in line with majority of the respondents who agreed positively to this statement. This finding concurs with findings by Makanjuola et al. (2019) who investigated the role of family support in the care of patients with mental illness and found that family support was critical in promoting treatment adherence and better mental health outcomes.

5.3 Conclusions of the Study

In conclusion, the study has shed light on the multifaceted relationship between family support, work-related stress, and the barriers affecting the access and utilization of family support among judicial employees in Nairobi City County. The findings have underscored the significant role that family support plays in mitigating work-related stress, thus influencing the overall mental health of judicial employees. Notably, a substantial number of respondents acknowledged the positive impact of family support on reducing work-related stress, aligning with existing research in similar contexts. However, it is crucial to recognize the complex interplay of factors, including cultural barriers, financial constraints, and workplace dynamics, that can hinder or facilitate the utilization of family support. These findings emphasize the need for organizations and policymakers to prioritize strategies that promote family support as a means to alleviate work-related stress and enhance the well-being of judicial employees. Additionally, addressing the identified barriers and capitalizing on the facilitators can contribute to creating a supportive environment that empowers individuals to access and benefit from family support resources effectively, ultimately fostering a healthier and more resilient workforce in the Judiciary.

In conclusion, this study underscores the significant influence of mental health on employee performance within an organization. It is evident that multiple factors must be considered when addressing the significance of employment for individuals dealing with mental health issues and in identifying effective practices to support their engagement, re-engagement, and retention in the workforce. The quest for fulfilling employment remains a paramount aspiration for the adult population across most nations. Employers, employees, and labour unions are increasingly recognizing that mental health disorders constitute the single most substantial contributor to disability, surpassing the global burden of diseases like infections, AIDS, cancer, and physical accidents. The profound impact of mental health problems, such as anxiety disorders, depression, and stress, is only beginning to be fully comprehended.

5.4 Recommendations of the Study

The Judiciary and government policy makers should prioritize the establishment and enhancement of mental health support services within the judiciary which includes the involvement of family members. This includes ensuring the availability of trained mental health professionals and resources for employees and their families to access counselling and support services which will equip the family members to support the judicial employees better. Investing in employee mental health not only improves well-being but also enhances overall workplace productivity.

The Judiciary and government should collaborate on initiatives that promote family support as a key component of employee well-being. This can include awareness campaigns to reduce stigma around mental health and encourage open family communication. Providing resources for mental health education for family members can also empower them to be effective sources of support. Implementing flexible work arrangements, such as telecommuting or flexible hours, can help employees better manage their work-life balance and reduce work-related stress. This can be particularly beneficial for judicial employees who often face demanding workloads and tight schedules. Conduct regular mental health awareness and resilience-building training for both employees and supervisors within the judicial sector. This training can help employees recognize signs of stress and mental health issues in themselves and their colleagues, fostering a more supportive and understanding work environment.

Managers of these organizations should create activities that improve employee leisure time for relaxation and reduction of stress. Sporting activities should include forums that bring together employees and their families and award ceremonies in which their immediate family will be

involved. The Judiciary should create child care assistance centres at work place, this will help the employee which are crèche services, day nursery and after school childcare provision of family welfare policies to encourage care for dependent. The management should consult the health care professionals in order to develop and implement service delivery systems in partnership with people with mental health challenges and as (appropriate) their family members, careers, and self-advocated of care workers. The staff transfer policy should be reviewed to consider the family aspect.

5.5 Recommendations for Further Studies

This research study focused on determining the role of family support on mental health among Judicial Employees in Nairobi City County. Suggestions for further studies therefore are encouraged to contribute towards identification of other factors such as management styles, company policies, level of skills and experience affecting quality of service delivery organizations, that were not enclosed by this study.

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APPENDICES

Appendix I: Transmittal Letter

TO WHOM IT MAY CONCERN

Dear

RE: REQUEST FOR ASSISTANCE WITH DATA COLLECTION

My name is **Loise Njeri Muriithi**, a student at KCA University pursuing Degree of Master of Arts in Counselling Psychology.

I am conducting research to assess the **Assessing the role of Family Support on Mental Health among Judicial Employees in Nairobi City County** as a partial fulfilment of the requirements for the conferment of the Master's Degree.

You have been selected to form part of the study and hereby request for your assistance in filling in the attached questionnaire. This research is purely academic and information provided thereof shall be treated with utmost confidentiality. There will be no financial compensation for participating in this study. No reference will be made to any individual(s) in the report of the study.

Your assistance in completing the questionnaire is highly appreciated.

In case of any questions, concerns or clarifications that you would like addressed, please contact me, on **0720305619**

Appendix II: _Coding Manual:

Family Support and Mental Health among judicial Employees in Nairobi City County.

Introduction:

This data coding manual provides guidelines for coding and analyzing the data collected from the study on the role of family support on mental health among judicial employees in Nairobi City County. The purpose of this manual is to provide a standardized process for coding the data to ensure consistency and reliability in the analysis.

Categories:

The data will be classified into the following categories:

- Demographic Information
- Family Support
- Work-related stress
- Mental Health
- Barriers and Facilitators
- Relationship between Family Support and Mental Health Outcomes
- Moderators of the Relationship between Family Support and Mental Health
- Suggestions for Improvement

Coding Manual: Role of Family Support on Mental Health - Structured Questionnaire

Question	Potential Codes
Demographic Information	
1. Age	1 (Under 18), 2 (18-25), 3 (26-35), 4 (36-45), 5 (46-55), 6 (56 or above)
2. Gender	1 (Male), 2 (Female), 3 (Non-binary), 4 (Prefer not to say)
3. Level of Education	1 (Primary), 2 (Secondary), 3 (Diploma), 4 (Bachelor's), 5 (Master's), 6 (Doctorate)
4. Marital Status	1 (Single), 2 (Married), 3 (Separated), 4 (Divorced), 5 (Widowed)
5. Occupation	1 (Judge), 2 (Judicial Officer), 3 (Judicial Staff), 4 (Other - Specify)
Family Support	

6. Emotional Support	1 (Strongly Disagree) - 5 (Strongly Agree)
7. Instrumental Support	1 (Strongly Disagree) - 5 (Strongly Agree)
8. Satisfaction with Support	1 (Strongly Disagree) - 5 (Strongly Agree)
9. Reciprocation of Support	1 (Strongly Disagree) - 5 (Strongly Agree)
Work-Related Stress	
10. Workload	1 (Not at all) - 5 (Extremely)
11. Time Pressures	1 (Not at all) - 5 (Extremely)
12. Interpersonal Conflicts	1 (Not at all) - 5 (Extremely)
13. Organizational Conflicts	1 (Not at all) - 5 (Extremely)
Mental Health	
14. Diagnosis	1 (Yes), 2 (No)
15. Severity of Mental Health Symptoms	1 (Very Mild) - 10 (Unbearably Severe)
16. Frequency of Symptoms	1 (Rarely) - 5 (Almost Daily)
Barriers and Facilitators	
17. Barriers to Family Support	Multiple choices: 1 (Lack of understanding), 2 (Stigma), 3 (Cultural barriers), 4 (Financial constraints), 5 (Lack of time), 6 (Other - Specify), 7 (None)
18. Facilitators of Family Support	Multiple choices: 1 (Open communication), 2 (Supportive family members), 3 (Mental health education), 4 (Financial stability), 5 (Availability of time), 6 (Other - Specify), 7 (None)
19. Moderators of Relationship	Multiple choices: 1 (Workload), 2 (Workplace support), 3 (Stigma), 4 (Family conflict), 5 (Other - Specify)
Suggestions for Improvement	
20. Suggestions for Improving Family Support	1 Yes, 2 No
	If yes, qualitative response.

Conclusion:

The above codes will be used to classify the data obtained from the study on the role of family support on mental health among judicial employees in Nairobi City County. The coding process will be carried out by the researchers to ensure consistency and reliability in the analysis. The categories and codes will aid in the identification of patterns and relationships in the data, which will inform the findings of the study.

Appendix III: Interview Questions

Interview Guide for Studying the Impact of Family Support on Mental Health
Introduction: Thank you for agreeing to participate in this study. The purpose of this interview is to explore the impact of family support on mental health and the types of social support provided by families. The information you provide will be kept anonymous & confidential, and your participation is voluntary. We encourage you to be as open and honest as possible with your responses.
Demographics
1. Can you tell me a little about yourself? (age, gender, occupation, marital status, and number of children)
2. Can you tell me about your family? (size, composition, and any other relevant details)
Family Support
3. Can you describe the types of support you receive from your family? (Emotional, instrumental, informational, and appraisal support)
4. How has the family support you receive influenced your mental health and overall well-being?
5. Have you encountered any barriers in seeking or receiving family support for your mental health? If so, could you elaborate?
6. On the contrary, what factors have facilitated your access to family support for your mental health?
7. Can you share an instance when family support played a significant role in helping you manage your mental health challenges?
Work-Related Stress
8. In your experience, what are the major stressors you encounter in your workplace?
9. How do you cope with work-related stress? Are there specific strategies that have been effective for you?
10. Can you describe any instances where work-related stress has impacted your mental health?
11. How do you perceive the intersection between work-related stress and the family support you receive? Are there instances where one affects the other?
Mental Health Outcomes

12. Can you reflect on changes in your mental health over time? Have you noticed any improvements or challenges?
13. How do you think family support has influenced your mental health outcomes, whether positive or negative?
14. Can you share an experience where family support had a noticeable impact on your mental well-being?
Contextual Factors
15. How do you perceive the influence of your age, gender, marital status, education level, and occupation on your experiences with family support, work-related stress, and mental health?
16. Have these contextual factors ever played a role in shaping your access to family support or managing work-related stress?
17. Do you think these factors have influenced your mental health outcomes? If yes, could you provide some examples?
Closing
18. Is there anything else you would like to share about your experiences with family support, work-related stress, and mental health?
19. What suggestions do you have for enhancing the provision of family support and addressing work-related stress among judicial employees in Nairobi City County?
Thank you
Your insights are incredibly valuable and will contribute to a deeper understanding of the complex relationship between family support, work-related stress, and mental health. Your participation is greatly appreciated

Appendix VII: Thematic Analysis of Interview Guide

Step 1: Transcription: Transcribe the audio recordings of the interviews into text format.
Step 2: Familiarization: Read and re-read the transcripts to become familiar with the content. Identify any recurring ideas or concepts that are relevant to the research question.
Step 3: Coding: Identify and label key ideas and concepts that emerge from the data. Use codes to identify the types of support provided by families (emotional, instrumental, informational, and appraisal support) and the impact of family support on mental health.
Step 4: Themes: Group related codes into themes, which are overarching concepts that emerge from the data. Here are some potential themes based on the interview guide
Theme 1: Types of Family Support
<ul style="list-style-type: none">• Emotional support: Instances where emotional comfort, empathy, and understanding are provided by family members.
<ul style="list-style-type: none">• Instrumental support: Instances where practical assistance, resources, or help with tasks are offered by family members.
<ul style="list-style-type: none">• Informational support: Instances where family members provide advice, guidance, or relevant information related to mental health challenges.
<ul style="list-style-type: none">• Appraisal support: Instances where family members offer feedback, encouragement, or affirmation regarding the participant's mental health journey.
Theme 2: Impact of Family Support on Mental Health
<ul style="list-style-type: none">• Positive influence on mental health: Instances where family support contributes to improved mental well-being, reduced stress, and enhanced coping skills.
<ul style="list-style-type: none">• Negative influence on mental health: Instances where lack of family support leads to increased stress, worsened mental health, and challenges in coping.
Theme 3: Barriers of Family Support
<ul style="list-style-type: none">• Barriers to seeking family support: Instances where participants discuss challenges or obstacles encountered while seeking or receiving family support for mental health.

<ul style="list-style-type: none"> Facilitators of family support: Instances where participants mention factors that make accessing family support for mental health easier or more effective.
Theme 4: Family Support in Managing Mental Health Challenges
<ul style="list-style-type: none"> Instances of significant family support: Narratives of specific situations where family support played a crucial role in helping participants manage their mental health challenges.
Theme 5: Work-Related Stressors
<ul style="list-style-type: none"> Major workplace stressors: Descriptions of the primary sources of stress experienced by participants in their work environment.
Theme 6: Coping Strategies for Work-Related Stress
<ul style="list-style-type: none"> Coping strategies: Discussion of various strategies participants employ to manage and cope with work-related stress.
Theme 7: Impact of Work-Related Stress on Mental Health
<ul style="list-style-type: none"> Effects on mental health: Narratives of instances where work-related stress had an impact on the participants' mental well-being.
Theme 8: Interaction between Work-Related Stress and Family Support
<ul style="list-style-type: none"> Interplay of stress and support: Reflections on how work-related stress and family support influence each other and shape participants' mental health experiences.
Theme 9: Changes in Mental Health Over Time
<ul style="list-style-type: none"> Evolution of mental health: Descriptions of shifts or changes in participants' mental well-being over a period of time.
Theme 10: Family Support's Influence on Mental Health Outcomes
<ul style="list-style-type: none"> Positive and negative effects: Narratives of how family support has influenced mental health outcomes, both positively and negatively.
Theme 11: Family Support's Impact on Mental Well-being
<ul style="list-style-type: none"> Notable instances of impact: Stories of specific moments where family support visibly affected participants' mental well-being.
Theme 12: Contextual Factors and Experiences

<ul style="list-style-type: none"> • Influence of demographics: Discussions on how age, gender, marital status, education level, and occupation shape participants' experiences with family support, work-related stress, and mental health.
<p>Theme 13: Role of Contextual Factors in Accessing Support and Managing Stress</p>
<ul style="list-style-type: none"> • Contextual factors' influence: Reflections on how demographic factors have played a role in accessing family support and handling work-related stress.
<p>Theme 14: Contextual Factors and Mental Health Outcomes</p>
<ul style="list-style-type: none"> • Effects on mental health outcomes: Narratives on how demographic factors have influenced participants' mental health outcomes.
<p>Theme 15: Participant Reflections and Suggestions</p>
<ul style="list-style-type: none"> • Personal insights: Participants' personal reflections and experiences related to family support, work-related stress, and mental health.
<ul style="list-style-type: none"> • Recommendations for improvement: Suggestions for enhancing family support provision and addressing work-related stress among judicial employees
<p>Step 5: Review the themes to ensure they accurately represent the data. Check that the themes capture the main ideas and concepts discussed in the interviews.</p>
<p>Step 6: Define and name themes Define and name each theme, ensuring they accurately represent the data.</p>
<p>Step 7: Map and interpret themes. Examine how the themes relate to each other and draw conclusions from the data. Analyze the relationship between different types of family support and the impact they have on mental health. Determine how family support can either positively or negatively affect mental health.</p>
<p>Step 8: Report Write a report that presents the findings, including quotes from the transcripts to support the themes identified. Use the identified themes to answer the research questions and draw conclusions about the impact of family support on mental health.</p>
<p>Step 9: Ensure that the research is rigorous by checking that the themes are reliable, valid, and coherent, and that the results can be replicated by other researchers. Check that the themes accurately capture the data and that the analysis is robust and reliable.</p>

Appendix IV: Research Work Plan: March –September 2023

Activity	March	April	May	June	July	August	September
Project proposal development & Corrections							
Project proposal defense							
Data collection, analysis & report writing							
Research project defense & Corrections							
Final research project submission							

Appendix V: Research Budget

Item	Unit Cost (KShs.)	Number of Items	Total Cost (KShs.)
1. Printing:			
Consent Form & Screening Tool	10@2pages	282people	5,640
Questionnaires	10@4 pages	282people	11,280
Interview Guide	10@1page	6 people	60
Final Research Proposal	10*60 pages	2	1,200
Final Report	10*100pages	3	3,000
2. Report Binding	200	3	600
3. Transport costs:	500	20times	10,000
Airtime	1000	1	1,000
Contingency	10% of total cost		3,278
TOTAL			36,058