THE ROLE OF AFFECTIVE SPEAKING IN
REHABILITATION OF HIV/AIDS INFECTED AND
AFFECTED HOUSEHOLDS IN UASIN-GISHU DISTRICT
OF KENYA

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Abstract

Factors explaining the role of affective speaking in rehabilitation of HIV/AIDS infected and affected households have not been adequately addressed, much effort has been put in preventing the disease while the lives of the infected and affected people are ignored; therefore, the study sought to explain the role of affective speaking in rehabilitation of HIV/AIDS infected and affected households in Uasin-Gishu District of Kenya.

The objectives of the study were: - (i) To establish the role of affective speaking in rehabilitating HIV/AIDS infected and affected families (ii)To determine the challenges faced by caregivers in using affective speaking to rehabilitate HIV/AIDS infected and household members (iii)To assess the response of people living with HIV/AIDS and affected household members to affective speaking and how it helps them come to terms with the epidemic (iv) To evaluate the effectiveness of affective speaking as a strategy in rehabilitating the HIV/AIDS infected and affected families the research design used was survey design, which was used to determine the association between the independent and dependant variables. The data was collected using a structured questionnaire from 150 people living with Aids and the affected families. The questionnaire was both open and closed ended one. To obtain the data the procedure of data collection assumed snow ball as well as purposive sampling to get the respondents. The data collected was coded then analyzed using descriptive statistics.

Research findings supported the 4 research questions that affective speaking plays a very important role in rehabilitation. There are many challenges faced by household members in using affective speaking to rehabilitate HIV/AIDS infected people and that affective speaking should be embraced as one of the response strategies in restoring people living with HIV/AIDS. Affective speaking is an effective method to be used as a strategy in rehabilitating the HIV/AIDS infected and affected families.

Finally, the main value of the study is to contribute to policies and implementation of affective speaking interventions for infected and affected people by HIV/AIDS. It recommends that Positive living should be enhanced by using proper communication methods in restoring the infected people. Through affective communication, from support groups, people living with AIDS can accept their status. There is need to look into ways of involving more affective methods in rehabilitation which will enhance positive living and make them feel accepted by the society. Setting up counselling and care centres for orphans and PLWAs should be initiated. Support of role models and volunteers should be done. This will ensure openness, which is the beginning of the healing process. There is need to constantly assess the effectiveness of rehabilitation strategies.