

**EFFECTS OF STRESS ON THE HOUSEHOLD DEVELOPMENT, KYANAMIRA
SUBCOUNTY, KABALE DISTRICT**

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**A DISSERTATION SUBMITTED TO THE SCHOOL OF SOCIAL SCIENCES IN PARTIAL
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**UGANDA CHRISTIAN
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DECLARATION

I **ANKUNDA BLESSING**, hereby declare that the information presented in this research report is original and is by my efforts and has never been submitted to any institution for any academic award.

Signature:


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APPROVAL

This is to certify that this research report presented by ANKUNDA BLESSING Reg. No: S23/BBUC/BSW/034 under the topic “Effects of stress on the house hold development, case study Kyanamira Sub-County, Kabale District” was carried out under my supervision.

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SUPERVISOR

DEDICATION

I dedicate my research report to my family, especially my beloved parents Mr Apollo Turyahabwa and Mrs Catherine Turyahabwa for the unconditional love, support and encouragement financially and spiritually. They have made me who I am. May God shower His endless blessings to them with all what they aspire for in life?

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I take this opportunity to express my sincere heartfelt thanks to all the parties that have ensured that I finally compile the information presented herein. As part of my warm acknowledgement, I would like to confirm how much I will continue to value you for your contribution towards my achievement.

I thank all the respondents for the hand rendered and for the great contribution towards the success of this study.

Admittedly, I wish to acknowledge the help and guidance that was portrayed by my supervisor Mr Apollo Mbalema. I am very grateful for the regular support that led to the accomplishment of this research report.

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I wish on a special note to acknowledge the work of my family for the consistent love and financial support they rendered whenever approached. Thanks for the love and sacrifices you rendered to me for the completion and compilation of this research report.

Finally, I cannot forget God Almighty for he keeps us alive and gave the knowledge and understanding to do such a work with my efforts. Give thanks to the Lord, for he is good and his mercy endures forever. "Psalm 136:01."

ABSTRACT

This study explored the effects of stress on household development in Kyanamira Subcounty, Kabale District. It was guided by three main objectives: to identify the causes of stress within households, examine how stress affects household development, and propose strategies to reduce stress and promote family well-being. A descriptive survey design was used, combining both qualitative and quantitative approaches to gain a well-rounded understanding of the issue. The research involved 99 participants, including household members, local leaders, community development officers, and health workers, who provided data through structured questionnaires and interviews.

The study's descriptive survey approach allows for the collection of both qualitative and quantitative data. To ensure that all groups were fairly represented, stratified random sampling was employed. Focus groups, key informant interviews, and structured questionnaires were used to collect data. While qualitative data was thematically investigated to reveal deeper patterns and insights linked to household stress and development, quantitative data was analysed using descriptive statistics such as frequencies and percentages.

The results showed that households are impacted by a number of stressors. One of the main causes was financial instability, which made it hard for families to pay for necessities like food, medical care, and education. Family disputes (such domestic abuse and marital problems), pressure from the workplace, particularly for breadwinners, and health problems including chronic disease and incapacity were additional stressors. Household members' stress levels were also observed to rise in response to peer pressure, societal expectations, and the demands of modern living. It

has been demonstrated that stress has a broad impact on household development. People who were under stress found it difficult to concentrate and work efficiently, which resulted in lower income levels and decreased economic production. There were also more incidences of anxiety, depression, high blood pressure, and related disorders, which had a negative impact on mental and physical health. Family ties were upset by prolonged stress, which frequently resulted in divorce, neglect, and bad parenting. Additionally, it resulted in poor financial decision-making, which had an adverse effect on financial planning, savings, and investments. Stress in the family was linked to children's low academic performance and difficulties focusing.

The study suggested a number of stress-reduction techniques to deal with these issues. These included providing community-based guidance and counselling services via peer support groups and experts. To increase household income, the government and non-governmental organizations were urged to support economic empowerment initiatives such as financial literacy, income-generating activities, and vocational training. The study also underlined how crucial it is to improve family ties through dispute resolution techniques, parenting classes, and open communication. It was believed that raising awareness of mental health issues through community initiatives was essential to assisting people in recognising and better managing stress.

The creation and execution of supportive policies by local governments, such as workplace mental health programs, accessible and reasonably priced healthcare, and community wellness programs, were among the other recommendations. Parents and students were encouraged to learn stress management techniques in schools. In order to lessen the financial strains that lead to stress, broader economic activities like job

creation and better credit availability were also considered essential. According to the study, creative stress-reduction techniques catered to the unique circumstances of rural areas should be the focus of future research. The study concluded that stress significantly affects health, productivity, relationships, and education in Kyanamira Sub County, which in turn affects household development. In order to successfully address stress-related issues and advance long-term, sustainable development, it advocated for a cooperative, multi-sectorial strategy involving legislators, community leaders, non-governmental organizations, and households themselves.

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LIST OF ABBREVIATIONS

CDO -	Community Development Officer
e -	Margin of Error
GBD -	Global Burden of Disease
ILO -	International Labour Organization
LC1 -	Local Council 1
LC2 -	Local Council 2
n -	Sample Size
N -	Total Population
NGOs-	Non-Governmental Organizations
UN -	United Nations
UNESCO -	United Nations Educational, Scientific and Cultural Organization
WHO-	World Health Organization
WHO -	World Health Organization
ILO -	International Labour Organization
NGO -	Non-Governmental Organization
UNESCO -	United Nations Educational, Scientific and Cultural Organization

MGLSD - Ministry of Gender, Labour and Social Development (Uganda)

UBOS - Uganda Bureau of Statistics

PTSD - Post-Traumatic Stress Disorder

HIV/AIDS - Human Immunodeficiency Virus/Acquired Immunodeficiency Syndrome

ABC-Model A (Stressor Event), B (Resources), C (Perception of the Event), X (Crisis)

FAO - Food and Agriculture Organization

HIV/AIDS - Human Immunodeficiency Virus / Acquired Immunodeficiency Syndrome

ILO - International Labour Organization

PTSD - Post-Traumatic Stress Disorder

UNESCO - United Nations Educational, Scientific and Cultural Organization

MGLSD - Ministry of Gender, Labour, and Social Development

PHC - Primary Health Care

GDP - Gross Domestic Product

GDP- Gross Domestic Product

CHAPTER ONE: INTRODUCTION

1.0 Introduction

This chapter introduces the study on the effects of stress on household development in Kyanamira Subcounty, Kabale District. It outlines the background of the study, the statement of the problem, research objectives and questions, the scope of the study, its significance, and the definition of key terms. Together, these elements provide a strong foundation for understanding how stress affects family life and development in this specific rural setting.

1.1 Background of the Study

1.1.1 Historical Background

Stress has long been recognized as a critical health and social issue around the world. In the past, it was mainly associated with extreme or life-threatening situations, but over the years, our understanding has expanded to include everyday challenges that can weigh heavily on individuals and families. The scientific study of stress began in the 1930s with Hans Selye, who described it as "the non-specific response of the body to any demand for change." Since then, researchers from a wide range of fields such as public health, psychology, sociology, and economics have examined stress and its effects on human life.

In many high-income countries, stress is often linked to fast-paced lifestyles, mental health problems, work expectations, and technological advancements. Global events like the COVID-19 pandemic have further highlighted households' susceptibility to stress-related problems like anxiety, depression, and family conflict (UNICEF, 2021).

The rise of globalization has also resulted in stressors like job insecurity and the breakdown of traditional support systems.

In Sub-Saharan Africa, the effects of stress are becoming more noticeable, especially in regions where people are dealing with poverty, political unrest, and poor healthcare. The World Health Organisation (WHO, 2017) reports that stress-related disorders are becoming more common in low-income communities, where families often lack the resources to cope. Issues from the past, like conflict, inequality, and poor infrastructure, have only gotten worse. More localized study is necessary to comprehend how stress impacts household development in these situations, given the increasing burden.

1.1.2 Conceptual Background

The mental, emotional, and physical reactions people have when they are overburdened by life's responsibilities are referred to in this study as stress. These demands can come from financial struggles, health issues, family conflicts, or unmet expectations. Stress can be short-term (acute), occur in episodes, or last over a long period (chronic) with chronic stress being the most harmful.

Household development means the gradual improvement in a family's overall well-being, including financial stability, education, health, and positive social relationships. When stress is not well managed, it can undermine household development by affecting people's decision-making, emotional balance, and ability to work or relate with others. In severe cases, stress can lead to family violence, poor parenting, illness, or even family breakdown issues that go beyond the home and affect the wider community.

1.1.3 Contextual Background

Kyanamira Subcounty is a rural area in Kabale District, located in southwestern Uganda. The community largely depends on subsistence farming, and many families live on low incomes with limited access to essential services like healthcare and education. Households in Kyanamira, like those in many rural areas of Uganda, deal with persistent issues such as food shortages, inadequate roads, limited healthcare, and youth unemployment.

Poor farming results brought on by shifting weather patterns, volatile market pricing, and a lack of farming equipment or technology frequently cause stress in this region. People who suffer from stress-related disorders frequently go untreated since health facilities, particularly those pertaining to mental health, are limited. Family conflicts, school expenses, and poverty all increase stress, yet most households lack the coping mechanisms or support networks necessary to properly handle these difficulties.

Stress has also had a negative social impact. Children and the elderly are frequently left behind when young people move to cities in pursuit of better prospects. Instability in households has been exacerbated by reports of an increase in alcohol abuse and domestic violence. This study is current and significant because, in spite of these worries, not much research has been done to show how stress impacts household development in Kyanamira.

1.1.4 Theoretical Background

Conger and Elder's (1994) Family Stress Model (FSM), which builds upon Reuben Hill's prior work and the ABC-X model, is used in this study. FSM describes how economic and

social pressures can lead to emotional distress in parents, which then disrupts parenting and harms overall household well-being.

The model has.

Economic pressure, or stressors, include debt, unemployment, and inadequate income. Examples of mediating factors (parental distress) include anxiety, hopelessness, or emotional disengagement.

Ineffective communication or family conflict are examples of broken family relationships.

Negative household outcomes include poor child development, reduced productivity, and family dissolution.

An effective method for analysing the stress that Kyanamira families endure is the FSM. It shows how external challenges like irregular farming or a lack of medical facilities can lead to internal issues in the home. This study uses the model to better understand how these stressors appear in rural Ugandan households and how they could be managed or prevented.

1.2 Statement of the Problem

Anxiety, despair, or emotional disengagement are a few instances of mediating factors (parental distress). Broken family relationships include things like ineffective communication or family strife. Poor child development, decreased productivity, and family dissolution are examples of negative household outcomes. The FSM is a useful tool for analyzing the stress that Kyanamira families experience. It demonstrates how domestic problems can arise from outside factors like erratic farming or a lack of healthcare facilities. In order to better understand how these stressors manifest in rural

Ugandan households and how they might be prevented or managed, this study makes use of the model. Both financial and emotional stress are increased as a result. Short-term health problems brought on by stress include headaches, insomnia, and hypertension (Sapolsky, 2004). Chronic issues like heart disease or depression may result if it persists. According to Evans and Kim (2013), children who grow up in high-stress households may experience emotional difficulties, do poorly in school, or develop mental health issues in the future.

Notwithstanding these facts, there is a dearth of study on the subject and a dearth of focused initiatives in Kyanamira. Programs like community counselling, financial empowerment, and mental health education may have an impact, but they are either underutilised or nonexistent. By investigating how stress impacts local household development and offering workable solutions, this study seeks to close that gap.

1.3 Objectives of the Study

1.3.1 Major Objective

To assess the relationship between household stress and development outcomes in Kyanamira Subcounty, Kabale District.

1.3.2 Specific Objectives

To identify the major causes of stress in households within Kyanamira Subcounty.

To examine the effects of stress on household development in Kyanamira Subcounty.

To suggest possible measures to reduce stress and promote household stability and development.

1.4 Research Questions

What are the main causes of stress in households within Kyanamira Subcounty?

How does stress affect household development in this area?

What strategies can help reduce stress and support stable household development?

1.5 Scope of the Study

1.5.1 Content Scope

The study focuses on how stress affects household development in Kyanamira Subcounty. It looks at the root causes of stress, its impact on family well-being, and practical ways to manage or reduce stress.

1.5.2 Geographical Scope

The study is centered in Kyanamira Subcounty, located about 6 kilometers east of Kabale Municipality in southwestern Uganda. It is bordered by Kitumba, Kamuganguzi, Buhara, and Maziba subcounties and is known for its hilly terrain, fertile soil, and cool climate.

1.5.3 Time Scope

This study focuses on the period from 2019 to 2022. These years were chosen to examine recent trends, including how families have been affected by economic shifts, health crises like COVID-19, and evolving social dynamics.

1.6 Significance of the Study

For Households

The study helped Kyanamira families better understand how stress affects their daily lives and long-term development. Additionally, it will offer practical strategies for stress management and improving family well-being.

For the Community.

By highlighting how stress affects households, the study will support community efforts to build stronger, more supportive environments for families.

For Policymakers and Government.

The findings will provide useful insights to guide the development of programs and policies related to mental health, economic support, and social services in rural areas.

For NGOs and Development Partners:

The findings can be used by Kyanamira-based organisations to develop targeted interventions that directly address household stress and enhance resilience, such as financial assistance, counselling, and awareness campaigns.

1.7 Definition of Key Terms

Stress: A mental or emotional state caused by challenging or demanding situations.

Household development: The overall growth and improvement in a family's financial, health, social, and educational well-being.

Coping mechanisms: Strategies used by individuals or families to manage difficult or stressful situations.

Mental health: A person's emotional and psychological well-being, which affects how they handle stress and relate to others.

Economic stability: The ability of a household to consistently meet its financial needs over time.

Review of Chapter One: Introduction

A comprehensive overview of the research on how stress affects household development in Kyanamira Subcounty is given in Chapter 1. The issue is pertinent and urgent because it provides a comprehensive backdrop that covers historical, conceptual, contextual, and theoretical dimensions. A solid theoretical framework that connects financial difficulty to emotional and social difficulties in families is the Family Stress Model. The problem description makes apparent how serious the stress is and how local remedies are required. An excellent foundation for the remainder of the research is provided by the well-defined and rationally expressed objectives, questions, scope, and significance.

CHAPTER TWO: LITERATURE REVIEW

2.0 Introduction

The literature on the effects of stress on household development is examined in this chapter. It explores the underlying causes of household stress, especially in the context of Kyanamira Sub County, and looks at the ways in which these stressors impact different facets of family life. The chapter also discusses coping mechanisms that can improve household resilience and lessen stress. It also describes the conceptual and theoretical frameworks that serve as the study's compass.

2.1 Theoretical Framework

Hill (1949) developed the Family Stress Theory, which offers a helpful prism through which to view how families react to stressful situations. This model, called the ABC-X Model, divides the stress reaction of the family into four parts:

A (Stressor Event) is any circumstance, such as illness, a loss of employment, or a disagreement in a family that interferes with day-to-day living.

B (Resources): These include the family's financial resources, social networks, and problem-solving skills.

C (Perception of the Event): How the family interprets the incident has a significant impact on their reaction.

X (Crisis): The degree of disturbance brought on by the incident, which might range from tolerable to a major crisis.

2.2.1 Causes of Stress in Households

Stress in the home is caused by a variety of interconnected economic, social, environmental, and health-related problems. These stressors in Kyanamira are influenced by regional customs and realities.

Economic Challenges

Financial difficulties are a major source of stress for families. In Kyanamira, where subsistence farming is the main source of income, household finances are constantly strained by fluctuating crop yields and rising living costs.

The World Bank (2019) notes that many rural families are unable to meet basic needs such as food, education, and medical care.

Access to financial services like savings or credit is limited. This lack of financial cushion means that families struggle to absorb economic shocks. Mwesigwa (2020) highlights that low financial literacy further complicates money management, often leading to debt and more stress (Ninsiima, 2019).

Since most households rely on agriculture, they're particularly vulnerable to unpredictable weather and climate change. Droughts, floods, or pests can wipe out crops, destabilizing incomes and making daily survival even harder (Mugisha, 2018; FAO, 2020). Within households, unequal control of income especially where men dominate financial decisions can also create tension and conflict (Lazarus & Folkman, 1984).

Work-Related Stress

Most people in rural areas like Kyanamira work in informal or seasonal jobs. These jobs often lack security, benefits, and fair pay, which creates ongoing stress. According to

the ILO (2019), such conditions make it hard for families to plan for the future or feel stable.

Long working hours especially for women, who also manage household duties can lead to burnout. Kabagenyi (2021) points out that rural women often juggle multiple responsibilities, leaving little time for rest or personal relationships.

Poor working conditions, such as unsafe environments and low wages, also contribute to the pressure and can affect relationships at home.

Family Conflicts and Relationship Strains

Financial worries, cultural expectations, and uneven sharing of responsibilities often lead to disputes between family members. Gelles (2017) notes that disagreements over money, parenting, or chores are common causes of stress between partners. In areas like Kyanamira, these tensions are often intensified by traditional gender roles that place more household duties on women.

Domestic violence is another serious issue. Ndagire (2020) reports that intimate partner violence is prevalent in rural Uganda, often triggered by financial problems or substance abuse. This kind of stress deeply affects family well-being, especially for victims.

Children are not spared either. When parents are stressed, expectations for children—especially regarding education can become overwhelming. Financial pressure may even push children into work, creating resentment and tension (Ndagire, 2020). In polygamous households, competition among co-wives and children for scarce resources can also cause conflict and stress (Mulumba, 2021).

Health-Related Stress

Families are strained financially and emotionally by illnesses and disabilities. Many households in Kyanamira cannot afford the continuous treatment and medical costs associated with chronic diseases like diabetes or HIV/AIDS (World Bank, 2019; WHO, 2020). Taking care of a family member who is ill or disabled frequently requires time, money, and emotional energy resources that are already limited (Ninsiima, 2019). In rural settings, mental health issues like anxiety and depression are also prevalent but can go undetected. Both the impacted people and their carers experience additional stress as a result of this. According to Gurman (2017), the problem is made worse by stigma and a lack of mental health resources.

Environmental and Social Stressors.

Due to their heavy reliance on natural resources, households in Kyanamira are particularly vulnerable to changes in the environment. Climate disruptions that reduce food production and jeopardise livelihoods include droughts and floods (Mugisha, 2018; FAO, 2020).

Deforestation and soil erosion are two examples of environmental degradation that makes it harder for households to get basic supplies like water and firewood. This is often a burden for women and children (Mwesigwa, 2020).

Men are still expected to support their families and women to take care of the home, according to traditional gender roles that are still widely accepted in society. When either role isn't fulfilled, stress levels can rise sharply (Lazarus & Folkman, 1984).

Political and Policy-Related Issues

Weak institutions and poor governance also play a role. Inadequate access to government services such as affordable healthcare or agricultural support can make it harder for families to cope with stress (Ministry of Gender, Labour, and Social Development, 2022). Corruption and mismanagement of resources only worsen this problem, leaving vulnerable households to fend for themselves (Mulumba, 2021).

2.2.2 Effects of Stress on Household Development

Stress can seriously disrupt a household's ability to grow and thrive. It affects not just finances, but also health, education, and relationships.

Economic Impact

Long-term stress can reduce a person's ability to work effectively, whether in the field or in small businesses. According to the ILO (2020), stress-related problems may result in job loss or absence. This can easily turn into a financial catastrophe in Kyanamira, where the majority of people work in physically hard employment. According to Ninsiima (2019), many families make actions that could jeopardise their long-term stability when they are under stress, such as selling possessions or taking out loans. Spending on essential necessities like healthcare and education may also be reduced by households. According to the World Bank (2019), long-term development objectives are frequently neglected when survival comes first, which can result in poverty cycles.

Health Consequences

Chronic stress has been linked to a range of health problems, including high blood pressure, heart disease, and weakened immunity (WHO, 2020). These issues not only

affect individuals but also impact the entire household through increased medical expenses and lost income.

Mental health is equally impacted. In pressured households, anxiety, sadness, and PTSD are prevalent and can result in communication breakdowns and emotional isolation. Gurman (2017) and WHO (2021) both stress the importance of mental health in maintaining family stability. When mental health issues are not addressed, the household's capacity to support one another and function is significantly diminished.

Maternal and Child Health

Stress during pregnancy can have serious consequences for both the mother and the unborn child. It has been linked to outcomes like preterm births, low birth weight, and delays in child development (Kariuki, 2018). In places like Kyanamira, where maternal healthcare services may not be easily accessible, stress during pregnancy can put women at higher risk for complications. Moreover, children raised in high-stress environments may face a greater likelihood of experiencing developmental issues and chronic health problems.

Impact on Education

Education plays a vital role in improving household well-being, shaping the future of both individuals and communities. However, stress within the home can severely impact children's education, affecting their learning outcomes and long-term potential.

Poor Academic Performance: Children from stressed households often find it difficult to concentrate in school due to emotional strain, lack of parental support, or frequent

absenteeism. According to UNESCO (2019), parental stress and financial hardship can result in poor school performance and even early dropout.

In rural areas like Kyanamira, where educational resources are already limited, the added strain of stress can significantly reduce children's chances of academic success (Nabukera, 2022).

Increased Child Labor: In some households, financial difficulties force children to leave school and contribute to the family income. This is particularly true in agricultural communities. As Ninsiima (2019) notes, children may be engaged in farm work or domestic chores, which interferes with their education and future job prospects. This cycle perpetuates poverty and hinders community development.

Parenting Challenges: Stressed parents often struggle to give their children the time, attention, and emotional support they need particularly when it comes to schooling. Kabagenyi (2021) found that many parents under stress feel overwhelmed, leaving little energy for helping with homework or attending school meetings. This lack of involvement can lead to neglect of children's educational needs.

Social and Psychological Effects

Stress doesn't just affect the economy or education it takes a deep toll on the emotional and social fabric of a household.

Family Strain and Conflict: Prolonged stress frequently causes family members to argue and become tense. Conflict between couples and between parents and children can arise from a variety of factors, including financial difficulties, work-related stress, and the day-to-day grind of home duties, according to Gelles (2017). Traditional gender

roles in Kyanamira can add pressure, sometimes worsening issues like domestic violence or leading to family breakdown.

Psychological Distress. Stress is closely linked to mental health conditions like substance abuse, anxiety, and depression. People may turn to drugs or alcohol as a coping mechanism, which can worsen interpersonal conflict and instability within the family, claims Kaaya (2020).

Social Isolation: When family members are under a lot of stress, they may withdraw from their community. Due to financial constraints or emotional exhaustion, they may be unable to ask for help or attend social gatherings. As Mulumba (2021) notes, this isolation weakens support networks, which are essential for overcoming hardship.

Substance misuse. Stress frequently leads people to turn to unhealthy coping mechanisms, such as abusing drugs or alcohol. According to the WHO (2020), such actions not only impair people's well-being but also increase stress by fostering family strife and emotional neglect.

Impact on Society and Culture

The larger social and cultural ties that bind communities together can also be undermined by stress. **Cultural Expectations and Gender Roles:** Both men and women in Kyanamira are often subject to high expectations due to cultural norms.

Women are supposed to run the home, and men are supposed to provide for the family. When either side struggles to meet these expectations especially during times of

hardship stress increases, often escalating to gender-based violence and family discord (Lazarus & Folkman, 1984).

Social Stigma: In many rural areas, issues like mental illness and poverty are not openly discussed. This stigma makes it harder for families to seek help. Gurman (2017) highlights that fear of judgment often prevents people from accessing mental health services, leaving them to suffer in silence.

2.2.3 Solutions to Reduce Stress and Promote Household Stability

Stress in the home requires a multifaceted approach that addresses financial challenges, fosters emotional well-being, and strengthens family and community ties. Since many families in Kyanamira face financial hardships, limited healthcare, and cultural pressures, solutions must be practical, inclusive, and grounded in local realities.

Economic Empowerment and Financial Stability

Microfinance and Credit Access: Offering microloans and savings plans can help families deal with their financial challenges more effectively. When paired with financial literacy training, these programs help people make better financial decisions. According to the World Bank (2021), microfinance initiatives have helped a number of rural households reduce stress and escape poverty.

Income-Generating Activities: Promoting small businesses and a range of revenue streams, including value-added agriculture, commerce, and crafts, can help reduce reliance on a single source of income. For young people and women, vocational training can increase employment prospects, boost resilience, and lower poverty (ILO, 2019).

Financial Literacy Training: Teaching families how to budget, save, and manage debt is a powerful way to ease financial stress. Households that understand basic financial principles are better equipped to avoid crisis situations and plan for the future (World Bank, 2021).

Strengthening Family and Social Support Systems

Family Communication and Conflict Resolution: Training and counselling can help families communicate more effectively and resolve conflicts. Gurman (2019) asserts that cohesive families are less likely to break down under stress.

Networks of Community Support: Peer counselling, neighbourhood support groups, and religious leaders' involvement can all help stressed-out households. These grassroots solutions can help families feel less isolated and more supported during trying times (Gelles, 2017).

Including Traditional Systems: In rural communities, traditional networks of elders, extended families, and clans are crucial for conflict resolution and support. By strengthening these structures in modern programs, interventions can become more culturally acceptable and sustainable (Mulumba, 2021).

Improving Access to Healthcare and Mental Health Services

Primary Healthcare Access: By funding rural healthcare infrastructure such as health centres and mobile clinics, families can prevent illness before it becomes a crisis and reduce the physical toll of stress (WHO, 2021).

Mental Health Services: Providing mental health counselling and support groups can help people develop better coping mechanisms. De-stigmatizing mental health services and ensuring their accessibility in rural areas are critical.

Health Education Campaigns: If families are more conscious of the detrimental impacts of stress and the importance of mental health, they might seek assistance sooner. Schools, medical facilities, and the local media can all spread these messages (Kariuki, 2018).

Promoting Education and Awareness

School-Based Stress Management: Students can learn how to identify and deal with stress in schools. It has been demonstrated that programs that increase emotional intelligence enhance social well-being and academic achievement (UNESCO, 2020).

Community Outreach: Parents and carers, particularly those with little formal education, can learn stress-coping strategies through workshops and neighbourhood campaigns. These initiatives can lessen family strife and enhance decision-making (Gurman, 2017).

Life Skills and Vocational Training: Teaching practical life skills and trades can improve income and reduce emotional stress. These programs also build confidence and self-reliance, especially among youth (ILO, 2020).

Government Policies and Interventions

Social Welfare Programs: Government assistance such as food aid, cash transfers, and subsidized education or health services can reduce the pressure on families and prevent

stress from escalating into crisis (Ministry of Gender, Labour, and Social Development, 2022).

Agricultural Support: Supporting farmers with better seeds, irrigation systems, and market access can stabilize incomes and reduce stress caused by poor harvests and price fluctuations (Mugisha, 2018).

Legal and Policy Protection: Stronger laws and enforcement mechanisms to prevent domestic violence, support women's rights, and protect children can reduce stress and create safer, more stable homes (Ndagire, 2020).

2.2.4 Research Gaps

While previous research has shed light on stress and its effects on households, several critical gaps remain particularly in rural areas like Kyanamira. These gaps hinder the creation of effective, evidence-based interventions. Key areas needing further study include:

Limited Rural Focus: Most studies focus on urban areas, overlooking rural-specific challenges such as dependency on agriculture, informal labor, and climate vulnerability.

Lack of Long-Term Studies: Few studies track how stress accumulates over time or how it affects households across generations. Longitudinal research could better reveal patterns and long-term outcomes of chronic stress.

Gender-Specific Coping Strategies: There's limited understanding of how men and women in rural household's experience and cope with stress differently. Given their

distinct roles, especially in caregiving and income generation, this gap must be addressed.

Environmental Stressors: Despite their major role in household well-being, environmental factors like climate change and land degradation are underexplored in stress research particularly in agricultural communities.

Traditional Support Systems: More research is needed into the role of traditional family and community support systems, such as clan elders and local religious leaders, in helping households manage stress.

Children's Stress and Development: The impact of household stress on children especially in terms of mental health, education, and long-term outcomes is not well-documented, especially in rural Uganda.

Stress in Informal Economies: There's insufficient research into how households in informal economies cope with financial stress, including the strategies they use and their long-term effects.

Mental Health Access and Use: More research is needed to understand how rural households' access and perceive mental health services, and how stigma affects help-seeking behavior.

Intersectionality of Stress Factors: Studies rarely look at how poverty, gender, social stigma, and cultural expectations interact to shape household stress. A more nuanced, intersectional approach is needed.

Policy Impact: The effectiveness of government and NGO interventions remains poorly assessed. There's a need to evaluate programs like cash transfers, agricultural subsidies, and healthcare initiatives to see how well they actually reduce household stress.

Need for Region-Specific Stress Models

Most existing models of stress and coping are designed for urban environments or developed countries. These frameworks often don't reflect the realities of rural communities like Kyanamira. Local households face unique challenges cultural expectations, environmental hardships, and economic limitations that these generic models may overlook. There's a clear need for region-specific models that consider the local context. By tailoring stress models to reflect life in Kabale District, interventions can become more relevant, practical, and effective for the people they're meant to support.

2.3 Critique of the Literature on Stress and Household Development

A review of the literature on stress and household transformation, as it pertains to Kyanamira Subcounty, shows both valuable insights and substantial shortcomings. This section discusses where research is deficient, where it has been effective, and where future studies might make a more significant impact.

Limited Contextual Focus

Much of the research does not focus particularly on the particular realities of such communities like Kyanamira, though much of the available research does have insightful information on household stress. Studies like Mwesigwa (2020) and Kabagenyi (2021), for instance, offer general rural Uganda stress accounts but without local factors like the peculiar human farming styles, weather patterns, or beliefs in Kabale being considered.

What's missing?

More regional studies are required. Studies that delve deeper into the particular social and economic pressures that Kyanamira households face. In the absence of this, solutions may fall short.

Underrepresentation of Gender Dynamics

Many studies acknowledge that stress impacts men and women differently, but they often don't go beyond the surface. Research like that of Kabagenyi (2021) and Ndagire (2020) mentions gender roles, but it doesn't explore how these roles influence who carries more emotional or financial burden within the home.

What's missing?

A deeper look at how stress affects men and women differently in Kyanamira especially how unpaid care work, child-rearing, and economic expectations fall disproportionately on women is necessary to create more inclusive interventions.

Lack of Longitudinal Data

Most studies cited rely on snapshots single points in time to understand stress in households. While helpful, this approach misses how stress builds up and affects families over years or generations.

What's missing?

Long-term or longitudinal studies would show how stress evolves and what long-lasting effects it has on household health, education, and income. This could also show how well certain interventions actually work over time.

Insufficient Exploration of Coping Mechanisms

While many researchers focus on what causes stress, few explore how families deal with it day to day. Especially in rural settings, families often rely on informal support like neighbors, clan leaders, or religious communities which current research tends to overlook.

What's missing?

Future studies should explore how people in Kyanamira manage stress using their own traditional or community-based strategies. These local coping methods could inspire practical, grassroots solutions.

Inadequate Attention to Mental Health Stigma

Though stress-related mental health issues like depression and anxiety are increasingly recognized, stigma remains a major barrier to seeking help especially in rural areas. Many studies assume that people will access available services, but in communities like Kyanamira, traditional beliefs and fear of judgment may prevent this.

What's missing?

More research is needed on how stigma around mental health affects people's willingness to seek help—and how to overcome that stigma through culturally sensitive outreach.

Overemphasis on Quantitative Data

Most research uses statistics to paint the picture of stress, which is important, but it leaves out the emotional and personal side of the story. Numbers can't fully explain what stress feels like to a struggling parent or a worried teenager.

What's missing?

We need more qualitative research interviews, stories, and focus groups that gives voice to the lived experiences of people in Kyanamira. These insights would bring much-needed depth and empathy to stress-related studies.

Lack of Intersectionality in Stress Research

Too often, stress is treated as a “one-size-fits-all” issue. But in reality, different people experience it differently based on factors like age, gender, income level, or disability. These overlapping factors often go unexplored.

What's missing?

Stress research should use an intersectional lens one that looks at how multiple aspects of a person's identity combine to shape their experience of stress. This would help tailor support to those who need it most.

Limited Exploration of Policy Impact

There is some research on government efforts to reduce stress, but little has been done to evaluate how effective those efforts really are. Policies may look good on paper, but are they actually helping families on the ground?

What's missing?

Future research should assess how well existing programs like cash transfers, farming subsidies, or healthcare initiatives are working for communities like Kyanamira. Understanding where the gaps lie will help improve implementation and accountability.

2.4 Conclusion

This chapter has explored the effects of stress on household development in Kyanamira Subcounty, offering a comprehensive review of both global and local studies. It covered the causes and impacts of stress, outlined potential solutions, reviewed theoretical frameworks, and highlighted gaps in current research.

Key takeaways include:

Stress in households is complex, often caused by a mix of financial hardship, work pressures, family tensions, health problems, and environmental factors.

These stressors affect every part of family life weakening relationships, reducing income potential, worsening health, and undermining education.

The literature proposes several promising solutions, including income support, mental health care, community support systems, education, and targeted government policies. However, these must be adapted to fit the local context of Kyanamira to be effective.

The Transactional Theory of Stress and Coping by Lazarus and Folkman (1984) provided a useful framework, emphasizing how people evaluate and respond to stress based on their environment and resources.

However, this review also identified clear limitations in the existing literature:

A lack of locally grounded research in areas like Kyanamira;

Insufficient attention to gender, mental health stigma, and traditional coping strategies;

An overreliance on statistics, with little space for human stories or emotional perspectives;

And few evaluations of how government policies are actually performing on the ground.

Going forward, there's a strong need for contextual, inclusive, and long-term research that captures the full human experience of stress in rural Ugandan households. Such efforts will be key to designing interventions that not only relieve stress but help build stronger, more resilient families and communities.

Ultimately, addressing household stress is not just a health or social issue it's a development issue. If we want to improve the lives of families in Kyanamira and similar settings, we must approach stress with compassion, cultural understanding, and evidence-based action.

CHAPTER THREE: RESEARCH METHODOLOGY

3.0 Introduction

This chapter presents the research design to be used in investigating the effects of stress on family development in Kyanamira Subcounty, Kabale District. The study site, target population, study design, sample size, sampling methods, data collection methods, instruments, data sources, validity and reliability checks, data analysis, ethical issues, and study limitations would all be discussed in detail. This plan would act as a guide to make certain that the research process is accurate, systematic, and in accordance with the aims of the study.

3.1 Research Design

To gather information from the participants in their natural setting without changing any of the environments, the study would employ a descriptive survey research design. The design would best be used in carrying out research on the current stress level and how it would impact household development in Kyanamira Sub-county because it would be employed in an effort to gain both qualitative and quantitative information.

3.2 Area of Study

The study will be conducted in the south western Ugandan Kabale District's Kyanamira Subcounty. The subcounty is adjacent to Kitumba Subcounty to the south, Kamuganguzi Subcounty to the north, and Kabale Municipality to the west. It includes a number of parishes, such as Kicumbi, Nyakagyera, and Kyanamira. The region would primarily be rural, with subsistence farming and rough terrain. Socio-economic challenges such as

poverty, food insecurity, would limit access to healthcare, and unemployment make it relevant to investigate how stress affects household development.

3.3 Study Population

The study population would consist of residents of Kyanamira Subcounty who would either directly or indirectly be affected by stress. These would include household heads, health workers, local council leader, religious leaders, and the business owners. The estimated study population is outlined below:

3.4 Sample Size and Selection

3.4.1 Sample size determination:

The sample size was determined using Slovin's formula (Altares et al., 2003), which is given by: $n = N / (1 + N (e^2))$

Where

n=required sample size

- N = study population = 12,569

- e = margin of error (chosen as 10% or 0.10)

Substituting into the formula:

$$n = 12,569 / (1 + 12,569 \times (0.10)^2)$$

$$n = 12,569 / (1 + 12,569 \times 0.01)$$

$$n = 12,569 / (1 + 125.69)$$

$$n = 12,569 / 126.69$$

$n \approx 99.21$

Therefore, the required sample size is approximately 99 respondents.

3.4.2 Sampling Matrix

Table 1

Category	Study Population	Sample Size
LC1 Chairperson	1	1
Religious Leader	3	3
Health Workers	5	5
Business Owners (e.g., market vendors, shopkeepers)	10	10
Household Heads	12,560	80
Total	12,569	99

Source: field data, April 2025

3.5 Sampling Techniques

The study would use the following sampling techniques.

Simple Random Sampling would be employed to select household heads. A lottery method would be used, where household names would be written on pieces of paper, placed in a container, mixed thoroughly, and drawn at random. This method would ensure that every household had an equal opportunity to participate in the study.

Simple random sampling would be appropriate because it would give each household head an equal and independent chance of selection. This would reduce bias and make the sample more representative of the larger population, improving the generalizability of the findings. Additionally, since there would be many household heads spread across the sub-county, this method would provide an unbiased way to select participants from a large group. Purposive sampling would be used to select religious leaders, business owners, health workers, and a local leader. These key informants would be selected based on their positions and knowledge concerning community well-being and stress-related challenges.

This technique would be suitable because it would allow the researcher to intentionally choose individuals with specific knowledge or expertise relevant to the study. These key informants held leadership and technical roles and would be directly involved in managing issues related to stress and household development within the community. Therefore, their targeted inclusion would offer deeper insights and expert perspectives that would be difficult to obtain through random sampling.

3.6 Data Collection Methods

The following data collection methods would be employed:

Questionnaire: Structured questionnaires would be administered to household heads to collect quantitative data on stress-related impacts on income, education, health, and interpersonal relationships.

Interviews: Semi-structured interviews would be conducted with the business owners, religious leaders, health workers, and a local council leader to collect qualitative data

and professional insights.

3.7 Data Collection Tools

The study would employ the following tools for data collection:
Questionnaire Schedule - to collect structured responses from household heads.
Interview Guide - to conduct semi-structured interviews with key informants.

3.8 Sources of Data

This study would utilize both primary and secondary sources of data to ensure a comprehensive and accurate understanding of the effects of stress on household development.

Primary Data Sources

These would include information collected firsthand from respondents using questionnaires and interviews. Specifically:

Household heads (via questionnaires)

Business owners, religious leaders, health workers, and a local leader (via interviews)

The study would utilize only primary sources of data:
Primary Data would be obtained directly from respondents through questionnaires and interviews.

3.9 Validity and Reliability of Instruments

Validity: To ensure content validity, the questionnaire and interview guide would be reviewed by two experienced social science researchers. Their expert feedback would be used to revise and improve the clarity, relevance, and structure of the instruments.

Reliability: To ensure reliability, the researcher would employ the test-retest method. The questionnaire would be administered to a small sample group and re-administered to the same group after two weeks. The Cronbach's Alpha coefficient would be calculated to assess internal consistency. A value of 0.70 or above would be considered acceptable.

3.10 Data Collection Procedure

The researcher would obtain an introductory letter from Bishop Barham University College to seek authorization from the relevant authorities in Kyanamira Subcounty. Full data collection would then proceed and would be expected to last approximately six weeks.

3.11 Data Analysis

Quantitative Data: Quantitative data from the questionnaires would be coded and entered into SPSS (Statistical Package for the Social Sciences). Descriptive statistics such as frequencies and percentages would be used, and results presented using tables.

Qualitative Data: Qualitative data from interviews and document reviews would be analyzed thematically. The researcher would identify emerging patterns and group them into categories for interpretation and discussion.

3.12 Ethical Considerations

Strict ethical guidelines would be followed in the investigation, including:

Informed Consent: Prior to their involvement, all participants would sign consent forms after being briefed on the goals and parameters of the study.

Anonymity and confidentiality: The identities of the respondents would not be revealed. Data would be safely saved and coded.

Voluntary Participation: There are no consequences if study participants decide to decline or leave at any point.

Transparency: Throughout the research process, the researcher shall uphold objectivity, honesty, and integrity.

3.13 Limitations of the Study

Topic Sensitivity: Some individuals may find it awkward to talk about stress. Building rapport, maintaining secrecy, and fostering a polite atmosphere will all help to address this.

Time Restrictions: The amount of time available for data gathering and analysis would be restricted by the academic calendar. To guarantee prompt completion, a thorough schedule would be adhered to.

Geographic Accessibility: Some settlements would be inaccessible due to challenging terrain or bad roads. The researcher would make plans ahead of time and, if needed, use alternate modes of transportation.

Financial Restrictions: Financial restrictions may restrict the range of fieldwork, especially when it comes to reaching a larger sample. To tackle this, the researcher would prioritise necessary tasks and look for economic data collection methods.

Language Barriers: Some respondents would be more comfortable communicating in the local language. This would limit the accuracy of responses if the researcher would not be fluent. To mitigate this, the researcher would engage local interpreters where necessary to ensure clear and accurate communication.

Respondent Bias: Some participants would give socially desirable responses or underreport stress levels due to cultural norms or fear of judgment. The researcher would reduce this risk by using neutral questioning techniques and ensuring a non-threatening interview environment.

CHAPTER FOUR: PRESENTATION, DATA ANALYSIS, AND INTERPRETATION

4.0 Introduction

This chapter presents the study's findings, based on data collected from 99 respondents in Kyanamira Subcounty. The presentation is structured according to the study objectives: identifying the causes of stress, examining the effects of stress on household development, and analyzing strategies used to manage stress. Data was presented using tables, percentages, and narrative descriptions. Qualitative responses from interviews are also incorporated to deepen the analysis.

4.1 Demographic Characteristics of Respondents

Table 2: Respondents by Gender

4.1.1 Presentation of Data

Gender	Frequency	Percentage
Male	54	54.5%
Female	45	45.5%
Total	99	100%

Source: field data, April 2025

4.2 Comparison between Age and Source of Stress

Table 3: Cross-tabulation of Age Group and Main Cause of Stress

Age Group	Poverty	Domestic Violence	Poor Health	Total
18-30	15	7	3	25
31-50	19	5	5	29
51+	7	2	4	13
Total	41	14	12	67

Source: field data, April 2025

4.1.2 Data Analysis

From Table 4.1, male respondents (54.5%) slightly outnumbered female respondents (45.5%). This suggests that more men were accessible or available during data collection.

In Table 4.2, respondents in the 31-50 age group reported the highest number of poverty-related stress cases (19), while the 18-30 group experienced more domestic violence (7) than older age groups.

4.1.3 Data Interpretation

The slight male dominance in the respondent pool reflected the gendered roles in rural Uganda, where men are often more active in public spaces while women manage domestic duties (WHO, 2021).

Age-wise, individuals aged 31-50—who are typically the economic providers reported higher stress due to poverty, aligning with Muriisa (2022) who asserts that this demographic bears the brunt of financial pressure in households. Young adults reported more domestic violence, likely linked to unstable relationships and early marriages.

The slight male dominance in the sample reflects the reality in many rural Ugandan communities where men are often more available for public engagement, while women may be tied to household responsibilities (WHO, 2021). This gender composition allowed the study to compare stress experiences across gender lines, acknowledging that coping mechanisms and causes of stress often vary between men and women. Muriisa (2022) supports this trend, arguing that middle-aged heads of households are especially vulnerable to economic stress due to their roles as providers, caregivers, and educators. The data also shows that younger respondents face more domestic violence stress, possibly due to unstable early marriages or intimate partner conflicts.

4.3 Causes of Stress among Households in Kyanamira Subcounty

Table 4: Causes of Stress

4.3.1 Presentation of Data

Cause of Stress	Frequency	Percentage
Poverty/Financial problems	41	41.4%
Unemployment	18	18.2%
Domestic violence	14	14.1%

Cause of Stress	Frequency	Percentage
Poor health/illness	12	12.1%
Land disputes	9	9.1%
Substance abuse (alcohol)	5	5.1%
Total	99	100%

Source: field data, April 2025

4.3.2 Data Analysis

The prevalence of poverty is consistent with research by Agaba and Mugisha (2019), who find that one of the main sources of stress in rural Uganda is financial insecurity. According to an LC1 chairperson, "Most households struggle to feed their families or pay school fees, which is very stressful." Interview data supports this. (Interview, 2025 April)

This demonstrates the close connection between psychological suffering and economic hardship in areas such as Kyanamira.

The prevalence of poverty as a stressor is consistent with research by Agaba and Mugisha (2019), who found that the primary cause of psychological distress in rural Uganda was financial insecurity. Stress brought on by illness and land disputes also emphasises how multifaceted household vulnerability is in places like Kyanamira Sub county.

4.4 Effects of Stress on Household Development

4.4.1 Presentation of Data

Table 5: Effects of Stress

Effect	Frequency	Percentage
Reduced income productivity	35	35.4%
School dropout/poor performance	20	20.2%
Family conflicts/divorce	18	18.2%
Health deterioration	16	16.2%
Child neglect	10	10.1%
Total	99	100%

Source: field data, April 2025

4.4.2 Data Analysis

Stress reduces one's ability to generate income, mostly through mental exhaustion and absenteeism. This supports the findings of Musisi and Kinyanda (2020), who associate stress with decreased productivity at work and worsening family dynamics. Stress erodes household stability and development in rural areas, as evidenced by the cascading effects of economic stress on school dropout and broken families.

Untreated mental health conditions are frequently associated with a reduction in one's ability to work and maintain family unity, as Musisi and Kinyanda (2020) contend. The cascade of events from stress to lost income to family dissolution is especially

devastating in rural areas like Kyanamira, particularly when social support networks are weak.

4.5 Strategies for Managing Stress

4.4.1 Presentation of Data

Table 6: Stress Management Strategies

Strategy	Frequency	Percentage
Prayer and spiritual support	27	27.3%
Seeking help from relatives	22	22.2%
Engaging in income activities	19	19.2%
Counseling and therapy	13	13.1%
Substance use	10	10.1%
Doing nothing	8	8.1%
Total	99	100%

Source: field data, April 2025

4.5.2 Data Analysis

Prayer and spiritual support was the leading coping mechanism (27.3%), followed by seeking support from relatives (22.2%) and income-generating activities (19.2%). A minority relied on counseling, substance use, or did nothing.

4.5.3 Data Interpretation:

The community heavily relies on informal coping strategies. As Kaggwa et al. (2021) note, faith and kinship remain primary support systems in rural Uganda. However, the use of substances (10.1%) and the inaction reported by some (8.1%) reveal harmful or ineffective coping behaviors, emphasizing the need for structured mental health interventions.

The dominance of prayer and family support aligns with Kaggwa et al. (2021), who noted the central role of faith and kinship in mental resilience in rural Uganda. These informal strategies often fill the gap left by inadequate formal mental health services. However, the reliance on unstructured approaches like substance use signals the need for professional interventions. The emphasis on prayer reflects not only religious devotion but also the absence of affordable psychosocial support in the community.

4.6 Qualitative Responses from Key Informants

4.6.1 Presentation of Data

Two key informants—one health worker and one LC1 chairperson provided insights:

“Stress is an invisible driver of poor health. People complain of ulcers, pressure, and body pain, but what they need is psychological support.” - Health Worker, Kyanamira HC (April 2025)

“We don’t have mental health professionals here. People suffer in silence. We only help through village meetings and church counseling.” - LC1 Chairperson (April 2025)

4.6.2 Data Analysis

Stress was explained by both informants as an underreported but a serious issue. They emphasized the absence of professional mental health services and their reliance on community-based or religious interventions.

4.6.3 Data Interpretation

These arguments affirm that stress is both physically and emotionally present and is usually underestimated. The same was affirmed by Ninsiima and Nakigudde (2020), adding that this cycle of suffering in Uganda's rural areas is caused by the lack of appropriate mental health infrastructure and trained personnel.

4.7 Summary of Key Findings

The study revealed that the stress in Kyanamira Sub-county is founded on economic hardships, whereby poverty (41.4%) was the most common cause. Domestic violence and unemployment then came out as major causes of domestic stress. The effect of the stress is rigorous, with reduced productivity (35.4%), strained family relations, poor health, and poor performance academically.

The majority of coping mechanisms were nonequivalent, and the most common were prayer (27.3%) and family support (22.2%). These coping mechanisms reflect the utilization of spiritual and kin-based resources by the community because of limited access to mental health professionals. Informants described that although the coping techniques are helpful in the moment, they are not suitable for fulfilling basic psychological needs.

A deeper analysis showed that the 31-50 age group the economically active demographic experienced the highest level of stress due to poverty. This confirms their critical role in household survival and exposes them to heightened psychological burden (Muriisa, 2022).

In conclusion, the data paints a clear picture of systemic stress rooted in socio-economic challenges, compounded by a lack of professional intervention mechanisms. The study highlights the need for integrated approaches that combine community support with formal mental health services to alleviate household stress in rural areas like Kyanamira Subcounty.

CHAPTER FIVE: DISCUSSION, CONCLUSIONS, AND RECOMMENDATIONS

5.0 Introduction

This chapter discusses the findings presented in Chapter Four in relation to the research objectives and the literature reviewed in Chapter Two. It offers a detailed interpretation of both quantitative and qualitative data, draws conclusions grounded in empirical evidence, and makes informed recommendations. The chapter concludes by identifying areas for further study.

5.1 Discussion of Findings

5.1.1 Causes of Stress among Households

The study revealed that the leading causes of stress among households in Kyanamira Subcounty were poverty and financial hardship (41.4%), unemployment (18.2%), domestic violence (14.1%), and poor health (12.1%) as per Table 4.2.

Poverty and financial hardship, accounting for 41.4% of respondents. Many households reported challenges in meeting basic needs such as food, school fees, clothing, and medical expenses. During interviews, local leaders emphasized that the lack of stable income sources leaves families vulnerable and constantly anxious. As one LC1 Chairperson stated, “Most households struggle to feed their families or pay school fees, which is very stressful.” These findings are consistent with Agaba and Mugisha (2019), who note that poverty remains a dominant stressor in rural Ugandan communities.

Unemployment was another leading cause, affecting 18.2% of respondents. With limited job opportunities, both youths and adults face uncertainty and frustration. In many

cases, men—often viewed as primary providers feel particularly pressured, which can strain family relationships.

Domestic violence, reported by 14.1%, adds another layer of stress. Cases of physical abuse, emotional neglect, and constant conflict were frequently mentioned. Such environments affect everyone in the home, especially women and children. This disrupts household harmony and undermines social cohesion.

Poor health and chronic illness, noted by 12.1%, also emerged as significant stressors. Households with sick members often struggle emotionally and financially, especially when medical services are distant or unaffordable. Caring for ill relatives without support drains resources and adds emotional weight.

Other stressors included land disputes (9.1%) and alcohol abuse (5.1%). Land-related conflicts often arise from inheritance disagreements and can lead to prolonged family rifts. Alcoholism, meanwhile, was both a response to stress and a contributor to it creating a cycle of neglect and conflict.

Adults aged 31-50 were the most affected group. This age bracket typically shoulders the burden of household responsibilities, making them more vulnerable to stress. This finding supports earlier research by Kizza and Ndyabangi (2021), who linked stress in this group to financial and social pressures.

Environmental challenges, such as poor infrastructure and lack of clean water, were also noted during interviews. These barriers complicate access to markets, schools, and healthcare, indirectly increasing stress. This reinforces findings by Ojambo (2018), who connected infrastructural deficits to emotional burden.

The convergence of economic, social, and environmental stressors illustrates that household stress in Kyanamira is multifactorial. These stressors are both structural and interpersonal, necessitating interventions that address root causes such as poverty, land governance, and domestic safety. There is also a need to challenge cultural norms that mask or normalize stress, particularly domestic violence.

5.1.2 Effects of Stress on Household Development

Findings from Table 4.3 revealed that stress significantly impairs household development through various pathways: reduced income productivity (35.4%), school dropout/poor academic performance (20.2%), family conflicts and divorce (18.2%), and health deterioration (16.2%).

The decline in productivity is consistent with World Health Organization (2021) findings that chronic stress negatively affects concentration, motivation, and the ability to perform daily tasks. A health worker interviewed noted that stress leads to absenteeism and reduced output, corroborating Kaggwa et al. (2021) who reported that workplace absenteeism in Uganda is often linked to unmanaged stress.

Poor academic performance and school dropout relate closely to family dysfunction and economic hardship. This aligns with Musisi and Kinyanda (2020) who warned that children in stressful home environments are more likely to underperform or leave school altogether, perpetuating cycles of poverty.

Family instability, such as quarrels and divorces, emerged as another major outcome. These findings mirror Nsereko et al. (2019) who found that unresolved emotional tensions manifest in frequent conflicts and eventual breakdowns of family units.

Regarding health impacts, the study uncovered frequent complaints of chronic fatigue, headaches, and other stress-related illnesses. These are typical manifestations of psychosomatic disorders as described by Mugisha (2017) and point to the widespread neglect of mental health services in rural settings.

Stress clearly undermines the very pillars of household development—economic stability, education, health, and family cohesion. The findings show a vicious cycle where stress triggers social dysfunction, which in turn escalates economic vulnerability. Moreover, inadequate health literacy further exacerbates the under-diagnosis and mismanagement of stress-induced illnesses.

5.1.3 Coping Mechanisms and Management Strategies

Table 4.4 showed that the most commonly used coping strategies were prayer/spiritual support (27.3%), help from relatives (22.2%), income-generating activities (19.2%), and counseling (13.1%). Alarmingly, substance abuse (10.1%) and doing nothing (8.1%) were also reported.

Spiritual coping aligns with Kaggwa et al. (2021) who emphasized the central role of faith-based institutions in Ugandan communities. This method is easily accessible and culturally acceptable, which makes it a default response.

Help from relatives and engagement in economic activities show that social and financial support networks are still vital, albeit under strain. Formal counseling, although present, was low due to a lack of awareness and accessibility—confirming Ninsiima and Nakigudde (2020) who observed that mental health infrastructure is nearly absent in Uganda's rural areas.

Substance abuse as a coping method, though less prevalent, signals desperation and the absence of constructive alternatives. This concurs with Abbo et al. (2018) who noted a growing trend in alcohol use among rural males coping with socio-economic challenges.

Coping mechanisms remain largely informal, reflecting both the resilience and limitations of rural households. The minimal use of formal counseling underscores a glaring gap in mental health outreach. Moreover, reliance on prayer alone, though culturally meaningful, may delay professional help in acute cases.

5.2 Conclusions

Based on the findings and study objectives, the following conclusions are drawn:

Causes of Stress: Stress in Kyanamira Subcounty is predominantly driven by financial challenges, unemployment, land conflicts, and domestic violence, aligning with both survey and interview data.

Impacts of Stress. Stress negatively impacts most critical home-building domains, specifically productivity, education, health, and family harmony. These impacts are self-propelling and self-enhancing.

Coping Strategies. Families mainly employ informal coping strategies such as prayer and support from relatives, with limited access to formal mental health care.

Vulnerable Groups. The financially prudent with ages between 31 and 50 are most impacted, and therefore, the necessity for special care is indicated.

Systemic Gaps. Cultural stigma and infrastructure deficits that discourage active stress management fuel maladaptive behaviors like drug abuse.

5.3 Recommendations

5.3.1 Government and Policy-Level Interventions

Incorporate mental health services into local health units: This is required because current facilities are ill-equipped to handle psychological issues. Specialized counselors and mobile outreach teams would bridge the rural-urban mental health divide.

Scale up rural economic empowerment programs: Economic pressure being one of the primary driver's demands that programs like SACCOs, skills training, and PDM programs are scaled up to build income resilience.

5.3.2 Local Government and Community Leadership

Train local leaders in basic psychosocial support: LC1s and parish chiefs are the first point of contact. Equipping them can enhance early intervention and referrals.

Establish community mediation teams for land disputes: Many stress cases stem from land wrangles; having structured, culturally respectful mediation can reduce long-standing tensions.

5.3.3 Civil Society and Faith-Based Organizations

Equip churches and mosques with counseling tools: These institutions are already trusted spaces; training clergy in mental health first aid can ensure appropriate spiritual and psychological support.

Deploy mobile counseling and sensitization units: NGOs should focus efforts on raising awareness about stress symptoms, management, and where to seek help.

5.3.4 Educational Institutions

Introduce school-based mental health programs: Mental health education would build resilience among children and parents and reduce stigma.

Train teachers to identify early stress indicators: Teachers are well-positioned to notice changes in student behavior. With training, they can refer cases to professionals early enough.

5.3.5 Household and Individual Level

Encourage family-based income projects: Small enterprises like poultry farming offer dual benefits—income and reduced idleness—which improves mental wellbeing.

Promote open intra-family communication: Encouraging dialogue can ease emotional burdens and prevent isolation, especially among household heads.

5.4 Contribution of the Study to Knowledge

This study adds value to the existing body of knowledge by:

Offering a localized understanding of stress causes and impacts in a rural Ugandan subcounty.

Demonstrating the interconnectedness of stress and household development in low-resource settings.

Highlighting the role of informal support systems, which are often overlooked in policy interventions.

Providing actionable recommendations grounded in both statistical data and lived community experiences.

5.5 Areas for Further Research

While this study provides critical insights into the impact of stress on household development in Kyanamira Subcounty, several areas merit further academic exploration:

Longitudinal Studies on Stress Impacts

Future studies could track the same households over time to observe how stress influences their development trajectories.

Stress and Gender Dynamics

An in-depth examination of how stress affects men and women differently would enrich the understanding of gender-sensitive interventions.

Role of Traditional Healers and Indigenous Coping Mechanisms

Investigate the role of traditional beliefs and herbal remedies in managing stress and their effectiveness compared to modern methods.

Impact of COVID-19 on Household Stress

Explore how the pandemic amplified stress levels and how households coped with the health and economic fallout.

Effectiveness of Government Interventions

Assess the impact of government programs such as the Parish Development Model (PDM) on reducing stress and poverty among rural households.

Child and Adolescent Mental Health

Study how household stress affects children and youth in school performance, mental health, and behavior.

5.6 Summary

This chapter has synthesized and interpreted the findings of the study in relation to literature and the research objectives. It has demonstrated that stress, rooted in economic and social hardships, has profound effects on household development in Kyanamira Subcounty. The chapter also outlined clear and practical recommendations to mitigate these challenges. It emphasizes the importance of integrating formal mental health services with existing community and religious structures to provide a holistic and culturally relevant response.

5.7 Conclusion

This study sought to examine causes and effects of stress on household development in Kyanamira Subcounty, and to determine coping strategies used by affected households. The study results showed that stress is a common phenomenon that basically erodes local households' social and economic security.

The primary source of stress was economic insecurity and poverty (41.4%), loss of employment (18.2%), domestic violence (14.1%), and poor health (12.1%). The most economically productive years are the most stressed by these interlinking stressors. This is a society held back by restricted access to social protection nets, healthcare, and opportunities.

Stress was also reported to affect both extensively and significantly. The most common effects were diminished earning ability (35.4%), school dropping out and academic deficiency (20.2%), disintegration of the family structure (18.2%), and declining health (16.2%). These effects undermine the developmental fabric of the household and tend to create a cycle of perpetually continuing poverty and emotional strain. Coping strategies used were primarily informal, e.g., prayer and religious support, reliance on kin, and taking up income-generating activities. Formal avenues like therapy and counseling were hardly ever sought out, mainly because of limited access and knowledge. This indicates a colossal imbalance in access to mental health services among rural communities like Kyanamira. The study concludes that stress is a critical but often overlooked factor that hampers household development. Effective interventions require a multidimensional approach involving economic support, healthcare access, and community-based psychosocial services.

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THE DEPARTMENT OF SOCIAL SCIENCES

10/02/2025

Dear Sir/Madam,

RE: INTRODUCTORY LETTER FOR DATA COLLECTION

This is to introduce to you Mr/Ms. **Ankunda Blessing** Reg. No. **S23/BBUC/BSW/034** who is a student at Uganda Christian University, Bishop Barham University College. He/She is a finalist pursuing a Bachelors degree in Social Work & Social Administration. It is a requirement of the University for students on this program to write a dissertation in partial fulfilment of the award of the degree. For this purpose, he/she is conducting research on the topic:

Effects of Stress on Household Development, Kyanamira Subcounty, Kabale District.

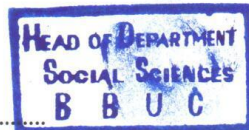
The findings and analysis of this research will be treated confidentially and will not be used for any other purpose other than the partial fulfilment of the award of the above qualification.

Please accord him/her every possible assistance.

Thank you,

Yours faithfully,





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Appendix B **QUESTIONNAIRE**

For Community Members (e.g., Household Heads)

Topic: *Effects of Stress on Household Development in Kyanamira Subcounty*

Part A: About You

(Demographic Information for Contextual Understanding)

1. What is your age? _____ years

2. Are you:
 Male Female

3. What is your marital status?
 Single Married Widowed Divorced

4. What is the highest level of school you finished?
 Never went to school Primary school Secondary school College/University

5. What kind of work do you do? _____

6. How many people live in your household (home)? _____

Part B: Questions About Stress and Your Home Life

Aligned with Objective 1: To identify the major causes of stress in households

7. Do you sometimes feel stressed or worried?

Yes No Sometimes

8. What things cause you the most stress at home? (Tick all that apply)

Not enough money

Sickness in the family

Family problems or fights

No job or work

School fees or children's education

Others: _____

9. How often do you feel stressed?

Every day Every week Once in a while

Aligned with Objective 2: To examine the effects of stress on household development

10. When you are stressed, does it affect your work or money-making?

Yes, very much A little Not at all

11. Does stress affect how you get along with your family members?

Yes No Sometimes

12. Has stress made it hard for your children to attend or perform well in school?

Yes No Not sure

13. In general, how much has stress affected your household's progress?

Very much Somehow Not much

Aligned with Objective 3: To suggest possible measures to reduce stress

INTERVIEW GUIDE

For Key Informants: Leaders, Health Workers, and Community Development Officers

Aligned with Objective 1: Causes of stress

1. Can you tell me about yourself and your work in this community?
2. What do you think are the main causes of stress among families in Kyanamira?

Aligned with Objective 2: Effects of stress

3. Have you seen how stress affects the lives of people in this area? If yes, in what ways?
4. In your view, how does stress affect family income, health, and relationships?

Aligned with Objective 3: Coping and recommendations

5. Do people here talk about their stress or ask for help? If yes, who do they talk to?
6. What do most people do when they feel stressed?
7. Are there any programs or organizations that help families with stress?
8. As a leader/worker, what challenges do you face in helping people deal with stress?
9. What do you think can be done to help reduce stress in households in Kyanamira?

Closing

10. Is there anything else you would like to share about this issue?