

Implementation of Aids Education Curriculum in Gweru Urban Primary Schools

Jeofrey Mtemeri

*Department Of Psychology
Midlands State University
Gweru, Zimbabwe*

Abstract

The aim of this study was to investigate the implementation of AIDS Education Curriculum in primary schools in Gweru Urban. Schools play a pivotal role in communicating national issues. Children being part of the larger community, if they are well informed about AIDS issues would help by giving correct information which the community may be ignorant about. Children themselves are made aware of the challenges ahead of them. In collecting the data the researcher used questionnaires and interviews. Four primary schools (two from low density and two from high density) were used. The descriptive survey design was used to collect the data. Eighty teachers were selected through random sampling. Data was presented in tables for easier analysis and interpretation. Inferential statistics in the form of chi-square was also used. The major findings drawn from the study indicated that AIDS Education curriculum is being implemented and children are benefiting from it although a lot still need to be done for it to be more effective. Teachers were less supportive of the program. More resources such as text books and other learning materials should be channelled into schools. Lack of support by the government hinders the success of the program. The research made the following recommendations; that more teaching and learning resources be channelled into schools, refresher courses be done to update teachers on new developments in the subject and that the subject be examined at all levels so that teachers will seriously teach it.

Key words: Aids Education, HIV, Primary Schools, Curriculum, Teaching, Gweru Urban

Introduction

AIDS is a disease that has no known cure as yet. In Zimbabwe the death toll of both the adults and the children has risen since the late 1990s because of HIV/AIDS (O'Donoghue 2002). The life expectancy has also fallen down to alarming levels. AIDS is now the leading killer of people in Africa and Zimbabwe is one of the worst affected countries in the region (The Child Advocate No 2 VOL 1). According to UNICEF (2002) more than two thousand people are dying each week in Zimbabwe because of AIDS. This is no small figure to a country like Zimbabwe with a population of about 14 million. All the stakeholders have been working

hard and are still working hard to fight HIV/AIDS but very little has been achieved. So many media both electronic and print have been used to sensitize people about AIDS but the impact is too severe to ignore. Both the working class and the youth are hard hit by the pandemic. The big question is who is going to work for the country if the devastation is going unabated. According to the Horizon Fall (2001) schools, colleges and universities have been hardily affected. Both the teachers and students are dying of HIV/AIDS. A survey carried out in South Africa has shown a devastating situation in schools where children as young as 11 are dying at alarming levels (Horizon Fall 2001). In 1991-2, the Zimbabwean government introduced AIDS Education in schools and colleges so as to combat the disease and reduce its impact. In primary schools, Aids Education starts from grade 3. According to the Curriculum Development Unit (CDU), Aids Education aims to; develop knowledge, attitude and emotional support to maximize individuals and their communities' commitment to the safest protective behaviour possible. This study therefore becomes essential in so far as trying to establish the effectiveness of the Programme in primary schools. A UNICEF report estimates that 23,7 % of all children in Zimbabwe under 15 years of age are orphans. Although the percentages of children heading households are not clear, cases of children rearing other children are becoming common. The children have to deal with adult pressures in an environment that treats them as children in spite of their adult responsibilities.

Children have fallen victims to AIDS pandemic. They are left orphans after they have suffered the long- time of declining in health of their parents or guardians. In most cases children have to start productive work and undertake extensive subsistence and holding chores for both the other siblings and ailing parents hence the need to find out on the implementation of AIDS Education Programme in schools. Many girls may enter sex work to survive and support the family. Jackson (2002:263) states that "...adult HIV prevalence is ranging up to 35% in mainland Southern Africa". The figure purports that in each and every household at least one person must be living with HIV or has died of AIDS. It is for this reason that this study seeks to establish if the current AIDS Education in schools does assist in preparing children for the challenges ahead of them.

Some orphaned children are taken in by extended family members who are not able to take care of them thus worsening the trauma of watching a loved one suffer and die. As a result most children according to The Child Advocate Vol 1, risk falling through the social safety net and ending homeless on urban streets or destitute in rural areas. Therefore Aids education is important for

ensuring that they are prepared for situations that will put them at risk as they grow older (UNESCO 2009). Acquiring knowledge and skills encourages young people to avoid behaviours that carry a risk of HIV infection (UNESCO 2009)

Methodology

In carrying out this research, the descriptive survey design was used. Babbie, (1979), supported by Bello (1993) argued that a descriptive survey design is a method of research which describes what we see or observe. The researcher opted to use the descriptive survey technique because of the nature of inquiry. It enabled the researcher to select a small group or sample of respondents as representatives of a large group. Teachers were selected as respondents who represented Zimbabwean teachers. Furthermore the research method was seen as the best method for the measurement of attitudes and orientation prevalent in a large population of teachers. A random sampling technique was used to come up with the participants. The method was chosen since it gave each member among the teachers in the population equal chances to be selected. For the purpose of collecting information for this study, the data collection instruments used were questionnaires and interviews. The major instrument was the questionnaire. Interviews were considered as a way of trying to clear some of the issues which were not fully covered by the questionnaire and also to consolidate some important aspects in the questionnaire. Labovite and Hagedorn (1981) asserted that a questionnaire is a document containing questions designed to solicit information appropriate for analysis. It is generally inquiring of information through which respondents answer questions or respond to questions in writing.

The researcher found questionnaires to be suitable for the study since respondents were made to choose one of the given alternatives which allowed answers to be recorded quickly and easy to analyse. The respondents attended to questionnaires at their own spare time and the respondents felt free to express their ideas on the questionnaires. It was further observed that questionnaires were generally economical for the researcher was able to reach a number of respondents in a short space of time.

Results and Discussion

Of all the respondents 80% were females and 20% were males probably due to the fact that women are given priority to come into urban areas to join their spouses

who might be working in urban areas. However this does not affect the results in any way. Teachers be males or females have the same obligation to impart knowledge to the learners. Resources given to male teachers are the same as those given to the female teachers.

Fifty two percent of the teachers said they give the same attention to AIDS education as they give to other subjects. Forty eight percent were not giving enough attention to the subject. Those interviewed added that teachers are assessed based on the results at the end of the term. Teachers were concentrating on examinable subjects and Aids Education was taken as any other business since it was not examinable. If time allowed them to teach that is when the subject was taught. They were suggesting that Aids Education be taught by teachers who do not teach other subjects which are examined in the end as the subject would not get enough attention. Teachers agreed that Aids Education was very important as shown by 80% of the participants. On whether Aids Education helps children change their behaviour, hundred percent of the respondents agreed that Aids Education helps children change their behaviour. The teachers and school heads who were interviewed explained that when the subject was introduced children would laugh or giggle at anything that had to do with Aids. Even pictures of AIDS victims would draw laughter. They agreed that the introduction of the subject was key to behaviour change but also cited that lack of role models at home and in the communities did not help in reinforcing HIV/AIDS prevention. What children learn at school should be complemented with that they see at home and in their communities (UNESCO). Therefore, AIDS Education should involve the community.

Sixty five percent agreed that educational programs in schools influence students to know more about HIV/AIDS. These activities included school plays, poetry and Youth Alive programs. According to those interviewed such activities teach learners to abstain from sex, the importance of HIV testing and the importance of home based care. These are critical in AIDS Education.

One of the aims of Aids Education is to help children understand the effects of HIV/Aids to the child and his environment (CDU) . Eighty five percent agreed that Aids Education helps both the child and their environments. In the interview sessions it was established that the activities prepared the students to understand themselves and their surroundings. Children to a certain extent are now able to assist the parents on HIV/AIDS issues. In other words the education they get at school is somehow benefiting the community.

Table 1a: Adequacy of teaching and learning resources in schools

Responses	Numbers of teachers
Strongly Agree	8
Agree	12
Disagree	39
Strongly Disagree	21
Total	80

N=80

Table 1b

Observed (O)	Expected (E)	O-E	(O-E) ²	(O-E) ² /E
8	20	-12	144	7.2
12	20	-8	64	3.2
39	20	19	369	18.45
21	20	1	1	1

t-crit 7.86**t-cal 29.85**

X^2 calculated (29.85) is greater than X^2 critical (7.85), the observed differences are real and not due to chance. This means that teaching and learning resources are inadequate. Further investigations revealed that only grades 5 and 6 had enough text books. Teachers said it compromised on standards as teachers will be teaching what they think was relevant to the grades. Although O'Donogue (2002) states that school syllabi on Aids Education were designed, the participants agreed that lack of syllabi in schools makes it difficult for teachers to implement Aids Education. Teachers were teaching from text books or from their own initiations. Schools do not have money to buy other materials that help teachers in their endeavour to achieve the national goals.

Table 2 Methods used in teaching Aids Education?

Teaching method	Number of teachers who use it	Percentage
Guided discovery	60	75
Lecture	59	73.75
Poetry	28	35
Games	46	57.5
Cognitive maps	5	6.25
Music	71	88.75

N=80

The study reveals that teachers were using a variety of teaching approaches when teaching Aids Education as indicated by the table 2 above. Varying methods helps learners from boredom. Most of the approaches are interactive in nature as advocated by the constructivist approaches to learning where students must be active learners (Peavy (1998) and Perry (1998)). In support of the above Kirby *et al* (1994) state that well implemented skills-based programs conducted in an atmosphere of free discussion of all the issues is likely to lead young people delaying the initiation of intercourse and reducing the frequency of intercourse and number of sexual partners. Therefore, if correct methods are used chances are very high that learners might change the behaviour. The lecture method is very popular in primary schools with 73.5%. This is to the detriment of the learners as the method is not suitable for primary school learners. Use of participatory methods such as games, role playing is more effective than the lecture method. However teachers had mixed feelings on whether AIDS Education was getting the same attention as other subjects in the curriculum as 52% of the teachers were satisfied with the teaching of AIDS Education in schools. The other teachers had mixed feelings. They revealed that teaching was only done as a routine since the subject was not examined at all levels. They said they would concentrate on the examinable subjects rather than wasting time on things that are of little importance. A study carried out in Southern and Eastern countries in 2009 showed that children had low levels of knowledge regarding HIV/Aids due to lack of training on the part of the teachers and lack of examination for students on the subject (UNESCO). It is critical for teachers to get adequate training on the subject area.

AIDS Education helps children assess their behaviour

Ninety-five percent agreed that AIDS Education assists learners assess their behaviour. Those who were interviewed highlighted that learners understand what it means to lose a parent whether through HIV/AIDS or whatever is not their fault and those who have lost their loved ones need their support. They are now aware that it is not good to tease such. Because of the lessons they do, learners are now aware of the ways that the virus is transmitted and the ways they are not, this has assisted the learners on how to treat those they think are HIV positive. In other words the lessons are really assisting in behaviour change. The dramas and role plays they do help children assess their behaviour and their personal risk. This was alluded to by those who were interviewed. The research has established that AIDS/Education has managed to change their behaviour on HIV/Aids. Students are now aware of how the virus is spread and how it is not spread. A survey carried out in Southern African schools indicated that Aids Education was a success and is giving positive results (UNAIDS 1999). In the US it was established that school based programs have demonstrated success in reducing high risk behaviours among youth (Walters and Voughan 1993). In a classroom north of Bangkok, students learned how to assess their own risk, negotiate safe sex and support people who are infected with HIV (Horizon 2001). In Nigeria, a study to evaluate behaviour change showed greater knowledge and increased tolerance (Fawole et al 1999). In other words if these programs are done well chances are very high that they produce good results.

AIDS Education helps learners increase their knowledge about HIV/AIDS

Aids Education is really paying dividends in Zimbabwe primary schools as indicated by 85% who say AIDS Education helps both the learner and its environment. The community benefit from what the learners get from schools in the form of moral adjustments on the side of the learners. According UNAIDS (1999) Aids Education was a success in Southern African schools. This implies that if well planned AIDS Education will increase the learners' knowledge. Teaching and learning approaches should be varied as evidenced by the approaches by teachers in this study who use a number of teaching methods. Gatawa (1995) is in agreement when he states that students in sex education programs in many parts of the world have increased their knowledge.

Teachers have different opinions on teaching the subject. Some support the program but others feel it's a waste of time. Teachers do not see the reasons for teaching as teaching it may encourage students to experiment. Others felt it compromised their religious ethics. According to Kirby et al. (1994) the lack of support for implementation of new programs is one of the most important factors that affect its success.

Conclusion

The study revealed that to a certain extent AIDS Education was being implemented in primary schools in Gweru urban schools. Teachers and school heads who participated in the study agreed that resources in the teaching of Aids Education were in adequate. Teachers varied methods in their teaching of AIDS which has assisted learners in grasping the concepts. The study also revealed that learners' knowledge on AIDS help them assess their behaviour on Aids related issues and their social beings. Teachers cited that since the subject was not examinable teaching was not as thorough as it could be.

Recommendations

- More resources be channelled into schools to help teachers in teaching Aids Education. The government and non-governmental organisations should work together in availing resources to schools.
- The subject needs to be examined at all levels. The Ministry of Education, Sport and Culture should make sure that the subject is examined for it to get equal attention as teachers give priority to examinable subjects \
- Those who produce school books to include episodes on HIV/Aids to consolidate Aids Education teaching. A national policy be put in place for those who produce school literature to include HIV/Aids issues in all the subjects.
- The immediate community needs to take an active role in the funding and teaching of Aids Education. School Development Associations should be involved in the implementation of Aids Education in schools and also come up with activities that bring together children and parents.

References

- Babbie, E., R. (1979). *The Practice of social Research*. Belmont, Wadsworth Publishing Company.
- Bello, G. (1993). *Research Designing: A Deductive Approach*. London, Longman
- Curriculum Development Unit (1993-97). *Let us Talk: An AIDS Action Programme for schools*: Harare: Ministry of Education and Culture.

- Fawole, I., O., Asuzu, M. L., Oduntan, S. O. and Brieger, W. R. (1999). *A school based education program for secondary school students in Nigeria: A review of effectiveness. Health Education Research – Theory and Practice* 14: 675-683
- Gatawa, B. G. (1995). *Zimbabwe: AIDS Education for school Case Study*. UNICEF Harare Zimbabwe.
- Horizons Report (Fall 2001). *HIV/Aids Operations Research*. Washington DC
- Hepner, P. P., Knlighan, D.M. and Wampold, B. E. (1992). *Research Design in Counselling*. California
- Jackson, H. (2002). *AIDS Africa: Continent in Crisis*. Harare, Avondale.
- Kirby, D., Short, L Collins, J. and Ruggy, D. (1994). *School Based Programs to reduce sexual risk behaviours: A review of effectiveness. Public Health Reports*, 109 (3); 339-361
- Labovite, D. and Hagedorn, M. (1981). *Research in the Sciences*. New Dehli McGraw Hill
- McLeod, J. (1996). *The emerging narrative approach to counselling and psychotherapy: British Journal of Guidance and Counselling*. 24; 173-184
- Peavy, R.V. (1998). *Sociodynamic Counselling: A Constructivist Perspective*. Victoria Canada, Trafford.
- Perry, C. (1998). *Results of prevention Programs with adolescents. Drug Alcohol Depend* 20:13-9
- O'Donoghue, J (2002). *Zimbabwe's Aids Action Program for Schools. Eval Program Plan*. 25:387-96
- SAFAIDS (2001). *HIV/Aids Action*, Harare
- The Child Advocate No2 Volume 1 Belvedere Harare.
- UNAIDS (1997). *Impact of HIV and Sexual Health Education*

UNAIDS (1999). Peer Education and HIV/AIDS: Concepts uses and challenges

UNESCO (2009). *Strategic Approach: HIV/AIDS and Education*

UNICEF (2009). *Child Friendly Schools Manual*

Walters, H. and Vaughan R (1993). *Aids risk reduction among a multiethnic sample of urban high school students. WHO series on school students. JAMA 270(6):725-730*