CHAPTER SIX

ANALYSIS AND INTERPRETATION OF THE QUALITATIVE RESEARCH STUDY

6.1 INTRODUCTION

This study was undertaken to explore a perceived problem, namely that HIV/AIDS could have a serious impact on school management and the self-actualization potential of teachers and learners. The following question was therefore posed: Can effective school management and leadership be provided by school principals amid the HIV/AIDS pandemic, in order to realize the optimal self-actualization of teachers and learners in South Africa?

Education lies at the core of society and drives the economy of a country. It was therefore decided to investigate whether or not HIV/AIDS does have an impact on school management and/or the self-actualization potential of the role players. Factors that could influence effective school management and therefore the self-actualization potential of role players were identified, such as absenteeism, sexual abuse, increasing numbers of AIDS orphans, drug and substance abuse, and learners and teachers who are infected with or affected by HIV/AIDS.

Chapters, one, two, three and four pointed out several factors that may influence effective school management and self-actualization, which could be worsened by the impact of HIV/AIDS. These factors include:

- The role of the principal as school manager in combating the impact of HIV/AIDS on the school community;
- The impact of teacher absenteeism on school management, learning outcomes and self-actualization;
- The impact of learner absenteeism on school management, learning outcomes and self-actualization;
- The impact of AIDS and sexual abuse on school management; learning outcomes and self-actualization of teachers and learners;
- The impact of drug abuse on school management and the spread of HIV/AIDS;
• The impact of HIV/AIDS on enrolment figures and teacher provision; and
• The impact of AIDS orphans and learners affected by HIV/AIDS on school management and self-actualization.

In accordance with the problem statement in Chapter one, qualitative research was conducted. This is set out in chapter five. The most important findings and conclusions will be discussed in this chapter. In chapter seven meaningful recommendations for education and further research will be explored.

6.2 ADDITIONAL TRENDS EMERGING FROM THE LITERATURE RESEARCH THAT MAY INFLUENCE THE LEADERSHIP ROLE OF THE PRINCIPAL AS SCHOOL MANAGER

Chapter one presented an overview and orientation of the proposed research, the problem statement, the objectives, method and plan of the study and some important concepts relevant to the research.

In chapter two the prevalence of HIV/AIDS and the impact of HIV/AIDS on various structures in education and society were probed. The study showed that HIV/AIDS has increased beyond early projections. The impact on role players, such as teachers and learners, in education, school management and self-actualization, is considerable. Principals as school managers face numerous grave managerial problems.

In chapter three, school management was probed. The role of the school principal in the face of HIV/AIDS was investigated, to ascertain what strategies could be employed to address the issues surrounding the impact of HIV/AIDS in schools. The research indicated that principals face problems with several management constructs such as planning, school attendance registers, increasing dropout rates, curriculum coverage and disciplinary issues such as substance and sexual abuse and absenteeism.

Chapter four examined the self-actualization potential of teachers and learners in the face of HIV/AIDS. The study pointed to high levels of distress and depression among learners and teachers affected by or infected with HIV/AIDS.
Other sub issues that evolved from the research were set out in detail in chapter five and are briefly repeated here:

- Does the leadership role of the principal have an influence on discipline and the spread of HIV/AIDS in schools?
- Is there a link between school discipline, self-actualization, academic outcomes and the leadership role of the principal?
- Could the spread of HIV/AIDS in schools be the cause of the marked increase in the absenteeism of teachers and learners?
- Is it possible that school dropout is caused by the marked increase in HIV/AIDS in schools?
- Is drug abuse an aggravating factor in the spread of HIV/AIDS in schools?
- Is poor discipline in some schools due to the ever-rising numbers of emotionally disrupted learners and orphans in schools?
- Is there a link between abuse in schools and the spread of HIV/AIDS among female learners and teachers?
- Is gender inequality a contributory factor to the spread of HIV/AIDS?
- Is there a link between early sexual activity and poor discipline at school and at home?
- Is there a marked difference in the impact of HIV/AIDS between schools?
- Does HIV/AIDS affect school discipline, academic achievement, self-actualization, the matric pass rate, and enrolment and teacher provision?
- Do the HIV/AIDS-related deaths of peers affect self-actualization of learners and teachers?
- Does better life skill education promote responsible sexual behaviour and eliminate gender inequality?
- Does HIV/AIDS affect the performance of healthy leaders and teachers?
6.3 FINDINGS FROM THE LITERATURE STUDY

From the literature study the following became evident:

6.3.1 The prevalence of HIV/AIDS in South Africa and the impact of AIDS on education and society

HIV/AIDS is a serious issue and has a great impact on education and society at large in South Africa.

- **Society**

1. South Africa has the highest number of HIV infections in the world [6.2 million]. This figure is well beyond the limits of projections made for 2010. This fact will have a crippling effect on the economy and on all sectors of education. [See sections 2.2; 2.2.2 and 2.2.3.]

- **School management and the role of the principal**

2. Principals as school managers have the added burden of managing HIV/AIDS in schools to maintain academic standards. Should they fail, academic achievement and self-actualization could be adversely affected. [See sections 2.4 and 5.8.2.]

3. AIDS has the potential to cripple education in South Africa and the economy. AIDS is mowing down the economical core of society, that is, individuals between 15 and 50 years of age. These people pay the bulk of the taxes needed for, among other things, teacher’s salaries, school buildings and books. [See sections 2.3.1 and 5.8.2.]

4. The cost of AIDS is staggering. Training, lost productivity and recruitment of new workers, including teachers, to replace those who are ill or dead will cost South Africa an increasing percentage of its gross domestic product and consume the bulk of the country’s health budget. As an ever-increasing percentage of government spending becomes redirected to health care to combat the impact of HIV/AIDS, less money will be available for other statutory sectors such as education, thereby eradicating the dream of quality education for all. Principals will have to contend with budget cuts, fewer teaching materials and poorly maintained schools. In poor communities, parents cannot pay school fees. It is not only the financial costs that
have a negative effect on school management, but also emotional stress and absenteeism among teachers and learners, which are among the hidden costs of AIDS to education. This hidden cost can cause the principal more problems, because they prevent the effective functioning of affected individuals. This has repercussions in aspects such as curriculum coverage and academic achievement of the school. [See sections 2.3.1; 2.3.2; 2.4; 5.6.2; Addendum G and 5.8.2.]

5. Management resources in the school system become disrupted as principals and school managers have to resort to crisis management because AIDS disrupts normal long term planning in schools. [See section 2.3.2.]

6. Systemic costs include a loss of cohesion, reduction in morale and motivation among affected learners and teachers, often leading to a lack of discipline, which further disrupts school management and the self-actualization of role players in the system. [See section 2.3.2.]

- **Teachers**

7. The high levels of HIV infection among teachers at all levels of school management, from class and subject teachers to heads of department and principals, threaten to disrupt the quality and coverage of education. A much larger percentage of female teachers than male teachers are reported to be infected, with the largest proportion between 25 and 34 years of age (Caelers 2005:5). The research indicates a looming teacher shortage in South Africa within the next few years, with alarming shortfalls in scarce subjects, if measures are not taken to stem the increase of the disease more effectively. The shortage of teachers will affect the provision of education and curriculum coverage. Principals will be faced with having to provide quality education with reduced human resources. The question now arises whether effective school management and leadership can still be provided by principals, in the context of the AIDS pandemic, to help teachers and learners realize optimal self-actualization. [See sections 2.4; 2.9 and 5.8.2.]

8. The death rate among South African teachers is almost equal to the number of new teachers qualifying each year. According to Jansen (2004:1), 5000 new teachers qualify each year, and in 2004 4000
teachers were reported to have died from HIV/AIDS (Khangale 2005:1). Engela (2003:13) reports that a further 5000 teachers leave the profession annually. The death rate among South African teachers due to AIDS related illness has rocketed by 40%. 4000 teachers died of AIDS-related illness in 2004 and 45,000 are HIV-positive. The young age at which these teachers die sketches a dismal picture for the future of education in South Africa as these are the people education relies on to manage and run the system for the next 20 to 30 years. Considering the high death rate amongst teachers and the low numbers of new teaching graduates entering the profession, it seems that effective school management and leadership will be difficult to provide, for any principal, amid the HIV/AIDS pandemic. [See sections 1.1; 1.2.1; 2.2 and 2.4.]

9. Teachers affected by or infected with HIV/AIDS become increasingly absent from work, disrupting the teaching program. Increasing absenteeism among teachers disrupts planning and impacts negatively on curriculum coverage; which in turn leads to poor academic outcomes and poor self-actualization [See sections 2.4; 4.2.1.4.4; 6.3.4 and 6.3.2:20.]

10. Absent teachers and administration staff needs replacement and moral support. Morbidity on the job decreases performance standards due to stress and depression. [See sections 2.3.2; 6.3.2:4 and 6.3.2:20.]

- **Learners**

11. The impact of HIV/AIDS on learners is complex and multifaceted. There is a link between the deprivation suffered by HIV/AIDS-affected learners and their ability to respond effectively to teaching and learning in the school programme. Unless their basic needs such as the need for safety and security, food and shelter are fulfilled, they will be unable to benefit from education even if it is available. The spread of HIV/AIDS has increased poverty in affected households and turned many learners into orphans. The Department and principal need to investigate housing options such as hostels or families where learners can be safely housed close to their schools. State grants could be utilised to partly fund these support structures. The emotional distress of affected learners and teachers leads to feelings of anger, fear and despair. Many AIDS orphans are orphaned more than once as
their replacement caregivers eventually also die from AIDS. The social conditions under which these learners live are conducive to poor or absent discipline, aggression and crime, which affect school discipline, teaching and learning, creating managerial problems for the principal and staff by creating problems in the class room, such as disruptive behaviour, absenteeism, drug abuse, poor discipline and poor academic achievement. [See sections 2.5; 2.6; 4.2.1.4.2; 4.2.1.4.3; 4.2.1.5 and 5.8.2.]

12. The right of healthy learners to well structured education is affected by the disruption caused to their education by teacher absenteeism, and disruptive behaviour of AIDS-affected peers. [See sections 2.4; 2.5; 2.6 and 6.5.1:4.]

13. The HIV infection rate among secondary school learners is expected to reach 500,000. There was a 65.4% leap in HIV infections in the 15-19 year-old age group between 1997 and 1998, and HIV infection is increasing the fastest among 15 to 20 year olds. Infected learners will affect the number of learners writing matric and the matric pass rate. There has been a steady decrease in the number of matriculants since 1999. New reports in 2006 claim that almost 600,000 learners who were in grade 10 in 2003 did not write matric in 2005 (Rademeyer 2006:6). Considering the evidence found in the research, the possibility of delivering effective school management seems questionable. The role of the principal in delivering quality education to an increasingly disrupted learner society, so that they can realise their self-actualization potential seem increasingly unlikely. Learners who are infected with HIV/AIDS become increasingly ill and absent from school and eventually drop out. The conclusion here is that HIV/AIDS affects the demand for education negatively, by decreasing the numbers of learners in the system. Decreasing numbers of learners affects teacher provision at schools as the number of teachers per school is determined by the enrolment figures. [See sections 2.2; 2.3; 2.3.2; 2.5; 5.8.2 and 6.5.1:4.]

14. HIV/AIDS is reducing the number of learners in schools. HIV-positive women have fewer children, and a third of these children do not survive to school-going age. Learners who are affected by HIV/AIDS drop out of school and have to fend for themselves and siblings. Learners who drop out of school and have to head
households are a great concern. These learners not only cause problems with control of attendance registers, but also leave the principal with the dilemma of whether they should or should not be taken of the school register. [See sections 2.5 and 5.8.2.]

15. The infection rate is much higher among female learners than male learners, suggesting the existence of gender inequality. Female teachers and learners face a range of HIV risk factors, which their male counterparts do not. A 70% increase in death rate among young female teachers illustrates the level of disruption not only in education, but also in society, underscoring the alarming increase in emotionally disrupted AIDS orphans, who in themselves present managerial concerns in schools. [See sections 2.2; 2.2.3; 2.3.1; 2.4; 4.2.1.3.4; 3.6.3:11 and 5.8.2.]

16. South African learners are becoming sexually active at an increasingly young age. Research indicates that most sexually active teenage-learners indulge in risky sexual behaviour. Apart from HIV infections among learners, medical experts are also concerned with increasing levels of sexually transmitted diseases among 14-24 year olds. This finding is indicative of serious behavioural problems among South Africa’s youth, which drives the spread of HIV/AIDS. [See sections 2.5; 5.8.2 and 6.5.1:3.]

17. Countless learners who are healthy are living with and caring for parents who are sick and dying. Special attention needs to be given to the plight of these learners who drop out of school because of dire financial and emotional distress. AIDS orphans because of their dismal circumstances are becoming critical areas of management in a traumatized society. Learners affected by HIV/AIDS not only face extreme poverty but are also emotionally disrupted and not able to benefit from education even if they still attend school, and increase the managerial difficulties faced by principals. The role of the principal is changing in severely affected schools with large numbers of AIDS orphans. The numbers of children orphaned due to HIV/AIDS, is steadily rising, forcing the government to plan institutionalised facilities, and foster grants (Terreblanche 2001:3). The point is now whether principals as school managers, can still deliver effective school management and leadership, so that teachers as well as learners can attain self-actualization under these
circumstances. Principals are faced with the dilemma that they have to address the problems of AIDS-affected and orphaned learners in schools in order to keep them in the system and also prevent them from resorting to misbehaviour. [See sections 2.2; 1.3.2; 2.5; 4.2.1.4.2; 4.2.1; 4.2 and 4.2.1.5.]

18. Absenteeism among learners affects academic outcomes negatively and presents management problems with curriculum coverage. This affects learner morale and academic outcomes, which impacts negatively on discipline and self-actualization. [See sections 2.3.2; 2.5 and 4.2.1.5.]

19. Higher education is particularly vulnerable to HIV/AIDS, with one in four undergraduate students and one in eight post-graduate students infected. The prevalence among technical learners and secondary school learners is one in five. This means that increasing numbers of trainees such as teacher-training students are literally lost to the system before they are qualified, adding to the ever-increasing cost of teacher provision in the face of AIDS. [See sections 2.5 and 2.9.]

20. The worst affected group [14-49 years old] includes teachers, learners, and teacher training students as well as educational managers. [See sections 2.2.2 and 2.3.1.]

21. Sexual violence is rife in South African schools. In a third of abuse cases, teachers are implicated. Female learners and teachers who are raped by classmates, teachers or colleagues often receive indifferent responses from the authorities. This finding points to poor school management and a negative school climate, which seriously decreases the self-actualization potential of the victims. [See sections 1.2.3; 1.3.1; 2.5; 2.7; 3.2.3; 4.2.1.3.1; 4.2.1.3 and 4.2.1.5.]

22. The research indicates serious levels of gender inequality and highlights the fact that many young black women, including teachers and learners, are forced into sexual relationships for financial gain. Many report their first sexual experiences as rape or forced entry during which they were injured, increasing their risk of HIV-infection. Schools with a negative school climate and poor discipline create circumstances where male colleagues subject female learners and
teachers to sexual abuse and rape. [See sections 2.5; 2.7; 4.2.1.3.4; 4.2.1.5; 4.2.1.6 and 5.8.2.]

23. Drug abuse is rife in South African schools. Substance abuse leads to risky sexual behaviour and fuels the spread of HIV/AIDS in schools. The research finds that the main reasons for the decline in black matriculants are HIV/AIDS, drug abuse and pregnancy. All these factors point to poor school management, such as a decline in discipline and a negative school climate, which affect self-actualization negatively. The research finds that in schools where there is good discipline and control of learners, which is indicative of good leadership, there are fewer problems with drug and substance abuse. [See sections 1.2.4; 1.3.2; 2.5; 2.8; 5.5.4.1 and 6.5.1:8.]

- Orphans

24. South Africa has the highest number of AIDS orphans in the world, namely 2.3 million, and the figure is expected to reach 3.2 million by 2010. The number of AIDS orphans threatens to swamp all the statutory systems in South Africa, including the education system. The orphan crisis causes children to drop out of school due to poverty and emotional distress. AIDS is increasing the number of emotionally vulnerable, malnourished and maladjusted learners in the school system. Disciplinary and managerial problems are increasing in schools. Can the principal as school manager consistently provide effective leadership in the context of AIDS, so that teachers and learner may realise their self-actualization potential? One of the strongest indicators of the need of AIDS orphans is their absence from school. Their poverty and despair prevents them from reaching their full self-actualization potential. Furthermore, AIDS orphans’ needs increase the possibility of social instability and disruptive behaviour in school. Many are not able to utilize educational opportunities, because of emotional and physical distress, and present a serious managerial challenge to the principal and teachers who have to address these needs. The research indicates a serious managerial problem in education caused by the ever-increasing numbers of AIDS-orphans in the system. These learners need emotional as well as social support, which would include the provision of housing, and basic material needs such as food and clothing (Terreblanche 2001:3). The Department and school will in future have to look at issues such
as housing in hostels in order to address the basic needs of AIDS-orphans. [See sections 2.2; 2.3.2; 2.5; 2.6; 4.2.1.5; 5.8.2; 6.3.2.2 and 6.5.1:4.]

25. Health and welfare sectors are feeling the impact of the number of children orphaned by AIDS-related illness. Increased admissions in medical wards due to AIDS will constrain health services. Education will feel the impact, as more and more resources will have to be channelled to health care for the AIDS-related illness, of teachers and learners. [See section 2.3.1.]

26. AIDS will decrease the number of both teachers and learners in the school system, and increase the number of orphans, thus creating serious problems in school management. Research shows that, because of their trauma, AIDS orphans face many emotional problems, which lead to, among other things, disruptive behaviour and substance abuse. These orphans are also not always able to benefit by education even if they remain in school, because their basic needs for food and shelter are not met. The principal as school manager will be hard pressed to deliver effective school management and leadership, which implies quality education, under these circumstances. The self-actualization potential for both teachers and learners will be negatively affected as a consequence of these factors mentioned above. Lower enrolment figures and teacher illness and death due to AIDS disrupt schooling. AIDS is threatening provision and quality of education while decreasing the demand for it. [See sections 2.2.1; 1.2.5; 2.3.2; 2.4; 2.5; 2.9 and 5.8.2.]

27. AIDS dissidents and denial of the sickness fuel the spread of the disease. The reasoning put forward by AIDS dissidents creates confusion and a false sense of security in people who are afraid. Research indicates that the dissident point of view decreases the sense of urgency with which the AIDS dilemma is faced and prevents people from seeking help or counselling. The government’s interest in the dissident viewpoint creates further confusion and sends out mixed messages on the seriousness of the impact of HIV/AIDS on communities, schools and the economy. The confusion created in this fashion has allowed the impact of HIV/AIDS to spin out of easily manageable control. In the education sector, principals are now faced with absent teachers and learners and increasing numbers of orphans,
all of which impacts negatively on school management and self-actualization. The principal and staff are now faced with the problem of dispelling incorrect beliefs, not only in the school but also in the community in which the school is situated. [See sections 2.2.1; 2.3.1; 2.3.2; 2.4; 2.5 and 5.8.2.]

6.3.2 School management and the role of the principal in combating HIV/AIDS

1. School management in South Africa is under threat due to the impact of HIV/AIDS on education. The school system is experiencing problems at all levels of management because of a lack of skilled managers, such as well-trained principals. Principals do not receive sufficient support or training to cope with the problems they are facing. [See sections 2.2.1; 2.3.1; 2.3.2; 2.4; 2.5 and 5.8.2.]

2. Educators in South African schools are stretched to the limit. They have to act as social workers to support HIV/AIDS-affected learners, in addition to their teaching and managerial functions. Many have to deal with inadequate teaching supplies, disruptive learners, limited assistance and poor salaries. The extra duties and stressful working environment in schools lead to a negative school climate, poor discipline and inadequate curriculum coverage. Teachers faced with extra duties often do not cope, and become depressed and absent due to stress-related illness, and their teaching suffers as a result. Both the teachers’ and the learners’ ability to become self-actualizers is therefore compromised, as a direct result of poor school management caused by a work overload in the face of HIV/AIDS. [See sections 3.1; 3.2.4; 5.8.2 and 6.3.1:24.]

3. Traditionally, school principals, who evolved naturally from leadership roles to management roles, are the most effective school managers. They are able to change their leadership style to suit the situation, and create a positive school morale, which is conducive to quality teaching, learner achievement and good discipline. Looking at the problem statement it seems that principals who are natural leaders may be able to provide effective school management and leadership to ensure the attainment of self-actualization by teachers and learners amidst the HIV pandemic. A positive leadership style and positive school climate supports the self-actualization of both teachers and
learners, which will play an important role in combating the impact of HIV/AIDS in schools. [See sections 3.2.1 and 4.2.1.5.]

4. Erratic attendance by learners and teachers affected by or infected with HIV/AIDS, who are ill or dying or looking after ill or dying family members, disrupts planning and so education. Principals, as school leaders may have to reorganise their planning structures to maintain effective leadership and school management in the context of HIV/AIDS, to ensure the attainment of self-actualization by teachers and learners. Many of the planning strategies that the principal and staff put into place are disrupted by absenteeism among teachers and learners, ill discipline and socially disrupted learners, turning school management into crisis management. [See sections 3.2.2; 2.3.2; 2.4; 2.5; 2.6 and 4.2.1.4.4.]

5. The large numbers of learners and teachers infected with or affected by HIV/AIDS create a serious dilemma for the school principal, who has a duty to take a firm stand and act decisively in the face of an ever increasing crisis and high levels of sexual abuse in schools. In the context of HIV/AIDS, principals will have to adjust their planning strategies, to accommodate the impact of AIDS if they are to deliver effective leadership and school management, so that teachers and learners may realize their self-actualization potential. Purposeful and effective management and planning in schools depend on effective decision-making and should include consultation with teachers, parents and learners. [See sections 2.3.1; 2.3.2; 2.4; 2.5; 2.6 and 3.2.3.]

6. Non-disclosure of HIV-infection adds to the managerial dilemma facing principals as school managers, leaving them with increasing numbers of affected and sick learners and teachers in the school, without actually knowing the extent of the problem they have to deal with. The principal and school leadership will have to adapt management strategies to provide effective leadership and school management in the face of the AIDS pandemic. This is necessary to ensure that teachers and learners are able to attain their self-actualization potential. [See sections 3.2.3; 4.2.1.5; 5.7.2.2; 5.7.9 and 6.5.9.]
7. Without proper planning, numerous academic and administrative functions in the school cannot run smoothly. HIV/AIDS impacts negatively on the planning aspect of school management. This restricts the principal’s ability to provide effective leadership and school management, and so limits the self-actualization of teachers and learners. Every time a teacher is ill and absent from school, or dies due to AIDS-related illnesses, the planning structures in the school are derailed, and the principal must alter the planning to deal with the problem. The research has found that teaching and administrative routines are disrupted by unexpected emergencies caused by the impact of HIV/AIDS. HIV/AIDS negatively affects the supply of skilled personnel, and provision of educational services, and reduces their efficiency, while increasing costs. Only with effective short and long-term planning can the ravages of HIV/AIDS on education be controlled. For this purpose effective and accurate data collection on the extent of the epidemic is essential. High rates of teacher turnover and fluctuating numbers of learners constrain planning. Disruptive and delayed enrolment patterns due to HIV/AIDS compound the problem further, leaving the principal with the dilemma of crisis management, which negatively affect school discipline, the teaching program and self-actualization. [See section 3.2.4.]

8. The principal stands in a specific relationship to people and governing bodies in various positions of authority. Constant liaison between the principal and governing bodies of the school will enhance effective leadership and school management in the face of HIV/AIDS, and support the self-actualization of teachers and learners. How the principal relates to these people and the governing bodies forms the basis of successful school management. Positive relationships with all the bodies and people involved in running the school will enable the principal to cope better with the impact of HIV/AIDS. Important persons and bodies involved in the running and management of the school include: the deputy head, heads of department, hostel and ground staff, administration personnel, parents and parent-teacher associations, as well as the governing bodies of the school, learners, parents and members of the community in which the school is situated and the relevant departmental structures. All of these people and bodies have an interest in the school, and could have a positive role in
combating HIV/AIDS in the school and community if given the opportunity. [See sections 3.2.5.1-3.2.5.11 and 3.2.7.]

9. One of the more difficult school management responsibilities of the principal in the face of HIV/AIDS is ensuring curriculum coverage by teachers. HIV/AIDS threatens to disrupt the quality and management of education. Research indicates that absenteeism among teachers disrupts the teaching program and absenteeism among learners leaves gaps in their learning which they are often not able to make up. Is it possible for the principal to provide effective leadership and school management where uncontrolled absenteeism among teachers affects the academic outcomes of learners? Can measures be put in place to alleviate this problem and improve the possible attainment of self-actualization by teachers and learners? Learners become discouraged and distressed and fail their courses. Consistent high levels of absenteeism leads to a poor school climate and ill discipline, which further undermine curriculum coverage and successful academic outcomes in affected schools. This in turn impacts negatively on the successful self-actualization of role-players in the school. [See sections 3.2.6; 4.2.1.4.4 and 4.2.1.5.]

10. Delegation of duties should be a well-planned, meaningful action in school management, which allows the principal to attend to urgent matters while delegates oversee the running of the school as a team. Can the principal delegate duties effectively in the context of AIDS, so that efficient leadership and school management will ensure the self-actualization of teachers and learners? The high incidence of HIV/AIDS among the leadership fraternity in schools makes delegation of duties difficult. In many instances young and inexperienced teachers, the group with the highest HIV-infection rate in the country have to take on responsibilities for which they are not qualified. This leads to problems with planning, organization and quality control in schools, which affects school management and academic performance. Poor academic results acts against the self-actualization of role players in the school. [See section 3.2.7.]

11. Several support programmes exist for both teachers and learners, systems that could be adjusted to deal with the impact of HIV/AIDS-affected role players in education. Research shows that this is a very important aspect of school management as many learners indicate that
they feels gratified by support from their teachers and the school principal in the face of HIV/AIDS in the schools. [See sections 3.2.8 to 3.2.8.2 and 4.2.1.5.]

12. Principals in schools attended by HIV/AIDS-affected learners, many of whom are orphans or from child-headed households, face the difficulty of providing quality education to learners who suffer from hunger and abject poverty. These learners are unable to concentrate in class and do not benefit by schooling even if they attend. The school feeding schemes in many schools have failed and have not helped to solve the problem. Is there any way in which the leadership role and management skills of the principal can ensure that these learners and their teachers can realize their self-actualization potential? [See sections 3.2.8.3 and 4.2.1.5.]

13. Research shows that the school is an important centre for community development. The principal plays a leadership role in the community in which the school functions. Schools where the community takes pride in their ownership of the school tend to have a positive school climate and to draw pupils and parents support for the school. This creates a positive relationship between the school and community, which enhances school maintenance and academic success. For this reason zoning of schools remain important. Can the effective leadership role and school management strategies of the principal, draw the support of the community to keep children in particularly township schools, and also ensure the self-actualization of teachers and learners at the school in the context of the AIDS pandemic. Children who attend schools away from their community cause the collapse of community schools resulting in a lack of community interest in the school. So-called preferred schools suffer overcrowding, with serious management dilemmas for both under-utilized and overcrowded schools. [See sections 3.2.8.4 and 3.2.5.9.]

14. The research shows a definite correlation between good management and teaching outcomes. Successful classroom management and control form the basis of good school management and highlights the importance of the principal’s leadership role as school manager. [See sections 3.3.1; 4.2.1.5; 6.5.3.1 and 6.5.4.]
15. HIV/AIDS-affected learners and teachers are increasingly absent from school. A correlation between poorly controlled leave of absence and poor academic outcomes is found, which affects the self-actualization of all role-players. [See sections 3.3.1; 4.2.1.5; 6.3.1:18 and 6.3.2:20.]

16. The study reveals a poor culture of learning and teaching in South African schools, which is aggravated by the impact of HIV/AIDS. Teachers affected by or infected with HIV/AIDS have a low morale, and their work is constantly interrupted by periods of absentee due to the impact of HIV/AIDS on their lives. The emotional trauma suffered by AIDS-orphans is not conducive to instruction or learning and many AIDS affected learners drop out of school to care for ill family members or younger siblings. [See sections 3.3.1; 4.2.1.4.4; 4.2.1.5; 5.7.8 and 6.5.8.]

17. The study further reveals that the impact of HIV/AIDS disrupts not only the lives of affected learners, but also the management structures of schools with high incidences of HIV/AIDS in the school community. Teachers and learners who are HIV-negative, and come from healthy families are affected by the disruption caused by their ill counterparts in the school system. Their schooling and teaching programmes are disrupted by absenteeism among affected teachers and learners, and the trauma caused by illness and death of friends and colleague impacts negatively on their morale, which impedes self-actualization. How can the principal provide effective school management and leadership, if at all possible, to ensure the self-actualization of all learners and teachers in the face of HIV/AIDS? [See sections 3.3.1; 4.2.1.4 and 6.5.9.]

18. The self-actualization of both teachers and learners is undermined by constant disruptions and disturbances. Is there any way in which the principal can provide management structures and effective leadership to limit the disruptive influence of HIV/AIDS on self-actualization of teachers and learners? The emotional needs of HIV/AIDS-affected teachers and learners override all other functions and needs, creating a negative school climate that leaves the principal with the dilemma of running a school where a low morale creates a lack of the most basic structures of control and management. [See sections 3.3.1; 4.2.1.5 and 6.3.1:12.]
19. Research indicates that serious disciplinary problems exist in a large number of South African schools. Many of the problems are caused by external factors, which could aggravate the spread of HIV/AIDS in schools. Pupils lack discipline and levels of violence and sexual abuse in schools are unacceptably high. Many of the perpetrators are teachers, including principals, and victims often have no means of redress. Can effective school management and leadership be provided by the principal, in the face of HIV/AIDS and the poor discipline in many schools? The disciplinary problems in schools affect school management and self-actualization of teachers and learners negatively. Efforts by parents and teachers to curb the ill discipline in schools are undermined by the actions of COSAS and SADTU (Khumalo & Maphumilo 2002:1), limiting the ability of the Education Department and principles to deal with the lack of discipline in schools. [See section 3.3.2; 4.2.1; 5.7.8 and 6.3.1:21.]

20. Control of registers, which is important in classroom management and curriculum coverage in the school, is disrupted by the erratic attendance of both teachers and learners affected by HIV/AIDS. HIV/AIDS not only shrinks the demand for education, but also lowers the standard and quality of education. Erratic enrolment patterns of AIDS-affected learners disrupt the allocation of teaching posts at schools, which depend on enrolment figures. [See sections 3.3.3; 6.3.1:14; 6.3.1:10; 6.3.1:18 and 6.3.1:26.]

21. Erratic school attendance of affected teachers and learners disrupts the keeping of daily attendance registers in badly affected schools, leaving the principal with the problem of finding replacement teachers and deciding when to regard absent infected or affected learners as no longer enrolled in the school. Can effective school management and leadership be provided by principals in a school situation where one of the bases of schooling, namely numbers of teachers and learners, constantly varies so that crisis planning becomes the norm? Can the principal provide management structures in such a situation, to ensure the effective self-actualization of teachers and learners? The erratic attendance of both teachers and learners affects academic outcomes negatively, leading to further indiscipline in the classroom and poor self-actualization of role-players. [See sections 3.3.3; 6.5.1:4; 6.3.1:14; 6.3.1:10; 6.3.1:18 and 6.3.1:26.]
22. The research shows that South Africa is faced with serious teacher shortages, a widespread incidence of high rates of orphan and HIV-disrupted learners and poor discipline in schools. The combination of these factors could well derail education in the country completely, leaving behind scores of poorly educated individuals who are emotionally traumatised and not able to reach self-actualization. Poor and/or disrupted education leaves individuals unemployable and destitute. Can principals provide effective school management and leadership under these circumstances, so that the self-actualization potential of teachers and learners may be realized? Many of the poorly educated individuals who drop out of the school system lack self discipline and could became a possible security risk as well as a burden to the state. [See sections 2.6; 2.9; 3.3.3; 5.6.3 and 6.3.1:7.]

23. The research indicates that HIV/AIDS could be problematic when looking at requirements for the teacher as an employee (see 3.4-3.4.4). This presents problems for the Department as well as teachers infected with or affected by HIV/AIDS. Is there any way in which the principal can re-strategise planning for this to be able to deliver effective school management and leadership in the context of AIDS? Can the principal as school leader balance the needs and rights of healthy teachers and learners against those with HIV, to ensure self-actualization of all these role-players? Teachers who are unable to perform their duties effectively because of ill health and constant lengthy periods of absence, or who are guilty of misconduct, may be dismissed from duty. Teachers who suffer from mental or serious physical illness which could prevent them from carrying out their duties effectively, is not allowed to carry on teaching as this affects the quality of their teaching and is an infringement of the rights of learners to a good quality basic education and the attainment of self-actualization. Dismissal or replacement of teachers, however, is a lengthy and complicated process, leaving schools with the possibility of unplanned vacancies and disruption in the teaching program. [See sections 3.4; 3.4.2; 3.4.2; 3.4.3; 5.6.3 and 6.3.1:7.]

24. New regulations to protect HIV/AIDS-affected teachers against discrimination undermine the system of employment; appointments, transfers and termination, to the detriment of learners who need quality education and who indeed have a right to this. The human rights of infected persons are given preference over the rights of
healthy learners and teachers, whose rights are therefore ignored. Trying to consider the human rights of both groups of individuals thus represents a serious moral and managerial dilemma for the principal as school manager and indeed the entire education system. Can the principal provide effective management and leadership under these difficult circumstances, in order to support the self-actualization of teachers and learners? The research indicates that this is not possible; the self-actualization potential of all role-players is adversely affected by the skewed rights perspective on HIV/AIDS. [See sections 3.4.3 and 5.7.4.]

25. HIV/AIDS is not a notifiable disease and the principal as school manager can therefore not insist on knowing the HIV status of his/her teaching corps or learners. This leaves the principal with the dilemma of managing a problem of undetermined extent, turning normal school management into constant crisis management. This results in overall poor school management, which in turn leads to poor academic outcomes and poor self-actualization of both teachers and learners. [See sections 4.3.4; 4.2.1.5; 5.7.2; 5.7.5; 6.5.2.2 and 6.5.5.]

26. The research shows that government institutions such as education are more adversely affected by HIV/AIDS than the private sector because of their employment practices and constrained capacity to respond to adversity. It is very difficult to dismiss civil servants such as teachers, should the levels of HIV/AIDS-related illness rise, because of the extended and complicated procedures that need to be followed. This incapacity to deal with adversity leads to poor school management, poor academic results and poor self-actualization of role-players in the system. Can the principal provide effective leadership and school management in the light of this problem? Can the principal as school leader and manager ensure that teachers and learners reach maximum self-actualization in the context of HIV/AIDS, and lumbering government regulations? The principal’s ability to act and replace teachers is severely constrained and school planning and curriculum coverage becomes the victim of crisis management. [See section 3.4.3.]

27. Research indicates that because of the spread of HIV/AIDS, the regulations concerning sick leave and special leave could become a problem for principals. The generous paid and unpaid leave provisions
available to teachers can be managed only if there is controlled long term planning for leave and substitute staff. The intermittent unplanned short-term leave absenteeism that characterises the behaviour of HIV/AIDS-infected and affected individuals, however, leaves classes untaught for extended periods of time because it is difficult to find short-term replacements at short notice. Can effective leadership and school management be attained by the principal, when teachers who are ill from AIDS, have leave privileges that impacts on the rights of learners to ensure the self-actualization of these learners? This causes serious problems with school management and leads to poor quality of education and poor self-actualization. [See section 3.4.4.]

28. Normal healthy learners are equally traumatized by the events around them, and are consistently subjected to lower quality education caused by the impact of HIV/AIDS on the system. Should the principal and Department not set in place a mechanism to protect the healthy members in the system, the system itself may collapse. Considering this negative impact of HIV/AIDS on learners, the question arises of; can effective leadership and school management be provided by the principal so as to realize the optimal self-actualization of teachers and learners? Research indicates that the only way to do this is by collecting precise data on the impact of the virus on staff provision in order to plan effectively for recruitment and training of teaching personnel and staff health budgets. [See sections 3.4.4 and 6.3.1:11.]

29. Educational funding will be adversely affected by the impact of HIV/AIDS on the education budget. Cost of training will rise exponentially as more teachers who serve shorter terms due to illness will have to be replaced by new trainees of whom an estimated 25% may be HIV-positive. Financing intended for upgrading the education system will have to be redirected to defray the costs of HIV/AIDS to education, while government funding will have to be redeployed to cater for the cost of maintaining the health of affected societies. [See sections 3.5 and 6.3.1:4.]

30. School fees are often not an option for AIDS-affected households and many families withdraw their children from school for financial reasons. While learners who are not able to pay school fees may not be turned away from schools, schools in the worst affected areas that
lose the added funding provided by school fees will have to cut down on school maintenance, teaching aids and other managerial structures covered by school fees. Because government funding cannot cover all school management costs, schools in badly affected areas become less and less able to provide quality education due to financial constraints. Schools with large numbers of HIV/AIDS-affected learners who are most in need of the benefits of school funds are sadly the ones deprived of this benefit due to the impact of HIV/AIDS. Can effective leadership and school management be provided by principals in schools where little or no school funds can be collected, considering the financial strains this would place on school management? How will the principal as school leader and manager ensure the self-actualization potential of teachers and learners in these schools? This impact is not only on school management and quality teaching but also on the self-actualization of role-players in affected areas. [See sections 3.5 and 4.2.1.5.]

31. While the South African HIV/AIDS policy for schools has been described as good, it seems very one-sided in favour of the rights of people infected with and affected by HIV/AIDS. The policy negates the rights of healthy learners in the system and leaves the principal as school manager facing a school system where the demand for education changes constantly amid absenteeism and illness of learners and teachers affected by HIV/AIDS. Schools where high rates of infection are prevalent become functionally disabled, which leads to poor curriculum coverage, poor academic outcomes and poor self-actualization. [See sections 3.6; 5.7.4 and 6.5.4.]

32. Research indicates that there are not enough protection measures provided in the HIV/AIDS-policy to protect healthy learners and teachers in the education system. Several institutions and principals as well as parents of HIV-positive learners feel that confidential disclosure of HIV status to the principal may indeed benefit all role-players in managing HIV/AIDS in the school system. [See sections 3.6 and 4.2.1.5.]

33. The research also finds that while the rights of learners and teachers affected by HIV/AIDS are well provided for, there seems to be a vacuum in the legislation for the protection of the rights of healthy learners and teachers who are entitled to quality basic education as
well as a right to life. Can the principal provide effective management and leadership, in the face of HIV/AIDS, so that the rights of all teachers and learners are met, and their self-actualization potential realized? The rights of healthy teachers are impeded by extra work loads created by the absence of ill colleagues and the right of healthy learners to quality education is impeded by the absence and poor quality teaching afforded them by ill, constantly absent and non-coping teachers. [See section 3.6.]

34 The role of the school principal in a society plagued by HIV/AIDS becomes increasingly difficult due to the constant need for support that HIV/AIDS-affected teachers and learners require. Learners and teachers affected by HIV/AIDS are unable to function independently; they need support to counteract the affect of the virus on their lives and are therefore unable to become self-actualizers. [See sections 4.2.1.4.5 and 4.2.1.4.6.]

6.3.3 Impact of HIV/AIDS on self-actualization of teachers and learners in school management

- Principal

1. Principals who are open to discussion about the problems that HIV/AIDS creates in the school system will go far in supporting their subordinates and learners in coping with the ravages of HIV/AIDS in the school community. This would lead to a better potential for self-actualization among the role players. [See sections 4.2.1.4.8 and 5.5.5.2:2.]

2. Schools where the positive leadership of the principal focuses on the needs of learners from disrupted home backgrounds, teaching them confidence and trust and developing their positive self image may help them realize that they are special, and so improve academic outcomes at the school and enhance the learners’ ability to reach self actualization. [See section 4.2.1.5.]

3. Research shows that in contrast to schools with strong leadership by the principal which allow learners to function optimally, schools where indiscipline leads to criminal behaviour have learners who cannot develop mature adult roles because ill-discipline becomes the
norm for their adult lives and they are unable to attain self-actualization. [See sections 4.2.1.6; 4.3.4 and 5.7.2:2.]

4. Staying in school provides HIV/AIDS-affected learners with a safeguard against abuse and abject poverty. Strong leadership from a principal who embraces the needs of children affected by HIV/AIDS establishes discipline and self-respect among learners who would otherwise have been lost to the system and the economy. These principals give HIV/AIDS-affected learners a unique opportunity to reach self-actualization. [See sections 4.2.1.5 and 4.2.1.6.]

- Teachers

5. The research shows that HIV/AIDS affects the motivation and self-actualization of learners and teachers. Teachers affected by HIV/AIDS become demoralized and depressed while learners develop serious psychological problems related to post-traumatic stress, which gives rise to behavioural problems. [See section 4.1.]

6. Research shows that HIV/AIDS disrupts the ability of teachers to perform a meaningful role in society. The work-effectiveness of affected and infected teachers is compromised by constant periods of illness and absenteeism. Many HIV-positive teachers lose interest in professional development while HIV-negative teachers become demoralized and depressed by the affects of HIV/AIDS on their lives and profession. The unpleasant circumstances affected teachers have to deal with prevent positive professional development and contribute to poor self-actualization [See section 4.1.2.]

7. The impact of HIV/AIDS has shaken the entire education system in South Africa. Both the quality and coverage of education has declined, leaving principals to manage schools where continuous absenteeism among teachers and learners disrupts the academic program leading to poor academic outcomes and diminishing the ability of role-players to achieve self-actualization. [See sections 4.2.1.6 and 6.3.1.3.]

8. The research shows that dedicated teachers who are well prepared and sympathetic to their learners create a sense of security in the classroom, which supports discipline and learning, thereby enhancing
the self-actualization of learners. The impact of HIV/AIDS and sexual abuse in schools disrupts the instruction process and leads to disinterest and depression amongst teachers and learners, limiting their ability to attain self-actualization. [See section 4.4.1.2.]

9. Teachers affected by or infected with HIV/AIDS cannot meet the criteria for successful teaching. Their inability to cope with their daily duties creates anxiety and depression, leading to disinterest and ineffective teaching, which in turn leads to poor school management, poor academic outcomes and a lack of self-actualization potential. [See section .4.4.2.1.]

- Learners

10. HIV/AIDS impacts negatively on the learners, desire to control their world. Learners infected with or affected by HIV/AIDS have to assume adult roles and are often confronted with abject poverty, abuse and serious domestic problems. Learners affected by these negative factors are unable to benefit maximally from education and often cause disciplinary problems in school or drop out. They become demoralized and unable to reach self-actualization. [See section 4.1.1.]

11. The research finds that affected learners are increasingly absent from school and emotionally distracted. Their ability to become self-actualizers is reduced by their dismal living circumstances. As the pandemic increases, affected teachers also become increasingly absent due to the impact of HIV/AIDS on their lives. This leads to increasingly poor instruction and learners become the victims of poor quality education that limits their ability to become self-actualizing adults. [See sections 4.1.1 and 6.3.1:18.]

12. Research indicates that learners who are emotionally safe and nurtured as adolescents and who receive democratic guidance toward emotional independence from parents and other adults are able to reach self-actualization. Learners whose lives are disrupted by the ravages of HIV/AIDS and have to adopt untimely adult roles become increasingly distracted and unable to reach self-actualization. A self-actualizing principal who as an effective school manager is able to put structures in place that will help learners from dysfunctional homes to
achieve emotional maturity and independence will enable them to achieve self-actualization. [See sections 4.2.1; 4.2.1.5 and 4.3.2.]

13. Learners including AIDS orphans, who lack food and shelter due to the abject poverty caused by HIV/AIDS cannot benefit from schooling because their basic needs are not met. These learners are unable to reach self-actualization because their unfulfilled physiological needs override the need for all else. [See section 4.2.1.2.1.]

14. Learners who are able to establish successful mature relationships with peers from both sexes are able to establish a positive social identity and will function successfully within the group, which leads to successful self-actualization. Learners who are affected by HIV/AIDS and who are abused by peers and/or teachers tend to feel sad and rejected; they have a poor self image and can therefore not enter into healthy relationships with peers of either sex. The untimely adult responsibilities foisted on them before they are emotionally ready further limit their ability to develop normal social relationships and therefore limit their ability to become successful self-actualizers. [See section 4.3.3.]

15. Because their need for love and belonging is not met, learners from HIV/AIDS-disrupted societies and AIDS orphans often turn to drug and alcohol abuse to overcome the trauma caused by HIV/AIDS in their lives. Research shows that the impact of HIV/AIDS goes beyond altered patterns of school enrolment, as learners who lose their mothers receive worse care than when their mothers were alive. They are less well nourished, poorly cared for and less likely to attend school. To make up for their lost sense of belonging these learners often join gangs rather than youth groups to escape from their loneliness. Their ability to reach self-actualization is virtually non-existent. [See sections 4.2.1.2.3; 4.2.1.3.2; 4.2.1.3.2 and 4.2.1.5.]

16. Research finds that learners with a good self-image and self confidence who have hope for the future are more likely to protect themselves from abuse and disease than learners feel inferior because they are affected by HIV/AIDS. These learners and teachers are more likely to fall victim to abuse because of their need for acceptance. AIDS orphans are particularly susceptible to abuse and are unable to
become self-actualizers. [See sections 4.2.1.4.6; 4.2.1.4.7; 4.2.1.5 and 4.2.1.6.]

17. Research finds that self-actualization has a direct bearing on education and teaching. Self-actualizing learners are better listeners, self-assured and empathetic. Self-actualization can be correlated to academic success. Learners distracted by the affects of HIV/AIDS are unable to reach self-actualization, and many drop out of school due to financial constraints, orphaned or illness. [See sections 2.2; 2.3.2; 2.5; 2.6 and 4.2.1.5]

18. Establishing an acceptable life and worldview forms the basis of socially acceptable behaviour. Adolescent learners who are unable to master an acceptable social code of conduct identify themselves via asocial and/or disruptive social behaviours. Learners subjected to the disruptive impact of HIV/AIDS on their lives develop a negative attitude to society and in the absence of parental guidance or positive role models often seek solace in drug and alcohol abuse as well as risky sexual behaviour as a means to social acceptance and survival. Learners who on the other hand are able to establish a positive set of values and social code of conduct in spite of adversity are able to become successful self-actualizers. [See sections 4.3.5 and 4.3.6.]

19. From the literature survey it becomes evident that a mature emotional approach to socialization within the peer group will allow the adolescent learner to develop a positive social identity and self concept, which will enhance self-actualization. Learners affected by HIV/AIDS feel marginalized and will look for acceptance anywhere, exposing themselves to abuse by negative elements in society. [See section 4.1.2.]

20. The need of the adolescent learner to be accepted by the group forces him/her to conform to group values. If a negative attitude towards schooling or apathy exists in the group due to the ravages of HIV/AIDS, this could lead to scholastic and behavioural problems in the group. [See section 4.4.1.2.]

21. Some learners approach the learning situation and content with pronounced interest; others see them as responsibilities that they must deal with but for which they have little enthusiasm; and yet others
approach them with fear and anxiety. The last two groups will be less
effective learners who will struggle become self-actualizers. Learners
who are affected by HIV/AIDS lose interest in school and learning in
their struggle for survival in which education is no longer a priority.
[See section 4.4.2.8.]

22. Adolescent learners are not only cognitively involved in the learning
process. Affective aspects such as motivation, attitude, self-concept
and interest also play an important part. Learners affected by
HIV/AIDS are affectively distressed; they are angry, anxious,
depressed and emotionally labile. The negative emotions these
learners experience are not conducive to learning and affect their
ability to attain self-actualization. [See section 4.4.2.1.]

23. Motivation can be described as the psychological vitality that drives a
person to take action. Motivation is aim-directed. In school it could be
described as the will to learn or the will to teach. The devastating
effect of HIV/AIDS on the lives of teachers and learners undermines
their motivation and inner drive, limiting their ability to attain self-
actualization. [See section 4.4.2.7.]

24. Aptitude refers to the learner or teacher’s ability to master a given task
and is supported by other personality traits such as interest, attitude
and motivation, as well as the quality of instruction received in any
given field. Learners and teachers affected by HIV/AIDS are not able
to master their given skills optimally because of the emotional trauma
to which they are subjected. This leads to poor school management,
resulting in poor academic results and poor self-actualization. [See
section 4.4.2.7.]

25. Meaningful learning presumes that the learner manifests a meaningful
learning set. This means he/she is able to relate new material non-
arbitrarily and substantively to the cognitive structure and that this
new learning material is potentially meaningful to him/her. This
means he/she can relate to this material in a non-arbitrary and non-
verbatim fashion. In other words, is the learner understands the newly
learnt material. Learners who are affected by HIV/AIDS are often
absent from school, which causes gaps and a backlog in their learning.
The anxiety that the gaps in their learning create affects their ability to
concentrate, which in turn affects their ability to attach meaning to
their subject content, leading to poor academic results. Learners who are abused in school will attach a negative affective meaning to school, creating high levels of anxiety and an inability to concentrate or to reach self-actualization. [See section 4.4.2.5.]

26. The internal vitality that supports all becoming and learning tasks of the individual is indicated by the measure of involvement in such tasks and is a characteristic of self-actualizers. Learners affected by HIV/AIDS lack the internal vitality necessary to achieve academic success, because of the problems they face in which they focused on survival not learning. [See section 4.4.2.5.]

27. Experience is emotional in nature and refers to the quality of the meaning attached to situation in which the learner finds him/herself. The evaluation of a given situation can be either negative or positive. Learners affected by HIV/AIDS experience a plethora of negative emotions, which undermines their self-actualization. [See section 4.4.2.6.]

28. From the literature study it is evident that learners who achieve emotional independence from their parents, other adults and the environment because they feel secure in the fact they have a safe haven to return to and a good chance of attaining self-actualization. Learners whose lives are disrupted by the ravages of HIV/AIDS do not have a safety net, and their dismal living circumstances prevent them from reaching self-actualization. [See section 4.4.1.1.]

29. Parents who are too prescriptive and do not allow their children freedom of choice prevent them from becoming emotionally independent and self-reliant. Learners affected by HIV/AIDS have no choices; many have to care for sick and dying parents and leave school to help their poverty-stricken families, or in other cases try and eek out a living on the street. These disadvantaged learners cannot reach self-actualization as they struggle for survival in an attempt to meet their most basic needs. [See section 4.4.1.1.]

30. Parents’ socio-economic background plays an important role in the education of their children. Learners from families whose livelihood is threatened by the abject poverty caused by HIV/AIDS are often so traumatised that schooling is no longer a factor. These children
because of their problems are unable to concentrate in school even if they are still able to attend school. (Since many ill or dying parents do not bother to send their children to school.) These children are therefore not able to become self-actualizing adults. [See section 4.4.1.1.]

• Teachers and learners

31. HIV/AIDS has an impact on the safety and security needs of teachers and learners. Learners affected by HIV/AIDS fear for their futures and become angry and depressed; they are unable to realize their self-actualizing potential. Teachers affected by HIV/AIDS feel emotionally and financially insecure; they become demoralized and depressed. They tend to withdraw from society rather than reaching out. This leads to professional apathy, resulting in poor school management, indiscipline and poor academic outcomes, which inhibits the self-actualization of role-players. [See sections 4.2.1.2.2; 4.2.1.3.3 and 4.2.1.4.3.]

32. HIV/AIDS destroys affected learners and teachers’ sense of self-respect and personal dignity. They are often discriminated against by society and feel unwanted and unworthy. This is made worse by the anxiety and stress caused in their lives by the impact of HIV/AIDS. In the worst affected schools principals are faced with almost insurmountable difficulties in delivering quality education to emotionally disrupted learners with demoralized teachers. The principal as school and community leader could play an important role in creating a positive school climate in which staff and pupils could function optimally in a discrimination-free school system. [See sections 4.2.1.2.4 and 4.2.1.5.]

33. Research indicates that once the basic needs of an individual have been met, the individual will strive to develop his/her innate potential to the fullest. The desire to discover and develop one’s abilities and talents to the fullest in order to attain goal directed functioning is known as self-actualization. HIV/AIDS severely limits the ability of teachers and learners to attain complete self-actualization, because of the impact it has on the basic needs of affected and infected individuals, such as the need for food and shelter, belonging, safety
and security’ personal dignity and self respect. [See sections 4.2.1.2.1; 4.2.1.2.2; 4.2.1.2.3; 4.2.1.4; 4.2.1.2.5; 4.2.1.3.2 and 4.2.1.5.]

34. The research finds that a lack of self-knowledge and insight may be responsible for “the sex with a virgin” myth and the high levels of sexual abuse that female learners and teachers are subjected to. Not only does the high incidence of sexual abuse in schools point to poor school management and leadership by principals, but it also poses a serious health risk to victims in the face of HIV/AIDS. Learners and teachers who suffer abuse suffer high levels of emotional trauma and are not able to fulfil their innate potential and become successful self-actualizers. [See sections 4.2.1.3.2; 4.2.1.3.4; 4.2.1.5 and 4.2.1.6.]

35. Research indicates that the traditional understanding of maleness and the perceived superiority of the male together with gender inequality is one of the most devastating causes of the spread of HIV/AIDS in South Africa [See sections 5.7.4; 5.7.5 and 5.7.8]. Female learners and teachers face a wide range of HIV-related risks that their male counterpart do not. The high risk levels and gender inequality females are exposed to not only diminish their ability to realize their full potential, but also in fact pose a threat to the delivery of quality education in South Africa, as the majority of teachers are female and a large percentage of them are HIV-positive. [See section 4.2.1.4.]

- **Self-concept**

36. The acceptance of a positive self-concept supports self-actualization. Learners who develop a positive attitude to their own physique and, by implication, a positive self-concept are less likely to indulge in risky sexual behaviour. Research shows that a positive self-concept promotes self-respect, self-confidence and self-motivation, which in turn will lead to self-actualization. Learners and teachers affected by HIV/AIDS become demoralized by the dismal affects of HIV/AIDS on their lives. They become unable to cope with their daily duties and are overcome by anxiety and guilt, which lead to a poor self-concept and a lack of self-actualization. Learners who are abused or forced into unwanted sexual relationships develop a negative physical concept because of the disrespect shown to them by their abusers and are unable to reach self-actualization. [See section 4.3.1 and 4.4.2.1.]
37. Self-knowledge begins at that point where an individual (learner) perceives him or herself as a separate entity. The concept of self-identity is a multi-faceted construct. Self-identity is a combination of all the experiences of an individual in his/her life-world and the meaning he/she attaches to each experience. Learners enter the school with an established sense of identity and with a specific self-concept which may be positive or negative. This self-identity includes various identities such as body image, academic, sport family and group-identities. Each of these identities is evaluated separately according to the learner’s perceptions of his/her ability in every separate aspect of his/her identity and according to his/her self-knowledge. Each of these self-concepts differs in quality. While some concepts will be positive, others will be negative. Learners affected by or infected with HIV/AIDS or who are abused develops negative identity structures, which impact negatively on their self-concept and self-actualization. [See section 4.4.2.3.]

38. Research indicates that the adolescent learner’s positive concept of his/her self-worth and self-assurance will lead to the development of a positive gender role, which will enhance self-actualization. Learners and teachers infected with or affected by HIV, which in many instances is a disease of negative permissiveness and immoral behaviour, probably cannot establish successful gender roles. Life skills programs in the schools have not decreased risky sexual behaviour in many schools in spite of role-players being aware of the risks involved in such sexual behaviour. High levels of sexual abuse in schools further limit the development of healthy gender role, leaving victims unable to become successful self-actualizers. [See section 4.3.6.]

39. The concept self-concept is a complex, multi-faceted construct consisting of integrated concepts that the individual learner/teacher assigns to all his/her cognitive, affective and conative abilities. Because the individual learner/teacher perceives him/herself in several different situations, more than one concept develops which includes academic and non-academic self-concepts. The dynamics of the self-concept lie in the role it plays in the behaviour of the individual in any given situation. The learner/teacher forms every separate concept of him/herself in relation to how he/she perceives him/herself through the eyes of others in every given situation, whether it is pleasant or
unpleasant. Learners and teachers affected by HIV/AIDS and/or abuse suffer stigmatization, discrimination and often also social ostracism, which lead them to perceive themselves as worthless and unwanted. The perception of being worthless and unwanted leads to feelings of anxiety and depression and a lack of interest in their daily activities such as teaching and learning, which lead to a lack of self-actualization. [See section 4.4.2.2.]

- School management

40. Research shows that schools, which have good discipline and efficient management, also have learners who achieve well and are able to reach self-actualization. Schools where there is a lack of discipline and poor management, learners tend to achieve poorly; those who manage to pass matric are disabled by the poor quality of their results and unable to find employment, study further or reach self-actualization. [See section 4.2.1.6.]

41. Research shows that HIV/AIDS threatens not only the managerial tasks of school management, but by implication also the functional tasks, leading to poor academic outcomes and poor self-actualization. There is a link between academic performance and self-actualization, and also between good management and self-actualization. [See sections 4.2.1.5; 4.2.1.6 and 4.3.3.]

42. The negative impact of HIV/AIDS on school management and social structures in the community severely limits the education and career options for affected learners, thereby diminishing their ability to attain self-actualization. [See section 4.3.7.]

6.3.4 Conclusion

The literary research shows that HIV/AIDS has the potential to completely disrupt education in South Africa. A diminished and over-extended teaching force must cater for the academic needs of vast numbers of learners affected by HIV/AIDS. AIDS has orphaned many of these learners. Both teachers and learners are affected by a spiral of substance and sexual abuse, fuelled by poor discipline and ineffective school management. This abuse further aggravates the spread of HIV/AIDS, creating a cycle of disruption that will be difficult to contain. The principal as school manager has an increasingly
difficult task to provide effective leadership and school management in an effort to help teachers and learners achieve optimal self-actualization. As the epidemic progresses this task will only become increasingly difficult.

6.4 RESULTS AND CONCLUSIONS FROM THE QUESTIONNAIRE

6.4.1 Section A

1. Overall the findings of the questionnaire show that HIV/AIDS threatens the lives of many South African learners and teachers. This is in agreement with the findings of the literature study.

2. Learners who are sexually active expose themselves and others to HIV-infection. This finding is in agreement with the findings in the literature study.

3. From the response in the questionnaire it can be concluded that a large number of learners may be sexually active at a young age. Early sexual behaviour is indicative of poor discipline at home and can lead to poor discipline and learning in school. This confirms the findings of the literature study and is indicative of serious behavioural problems among South African teenage learners. [See section 6.3.1:16.]

4. A third of respondents agree that HIV/AIDS could be a contributory factor to absenteeism in schools. This is in step with the findings of the literary study, which indicate that absenteeism among teachers and learners due to the impact of AIDS on their lives is on the increase. The absenteeism of both teachers and learners affect academic outcomes at schools negatively and presents managerial problems with curriculum coverage, the management of registers and, particularly, long-term planning. Absenteeism negatively affects self-actualization of all role players, with healthy staff and learners affected as well. [See sections 6.3.1:24; 6.3.1:7; 6.3.1:12; 6.3.1:9; 6.3.2:9; 6.3.2:17; 6.3.2:27; 6.3.2:31 and 6.3.3:11.]

5. The majority of respondents agree that life-skills programs in the school help learners to cope with HIV/AIDS. Almost 17% however disagree, which is in accordance with the findings of the literature study that in spite of the life skills programmes presented in schools
and learners being aware of the risks, involved risky sexual behaviour among learners in many schools has not decreased. The disruptive impact of HIV/AIDS on the learners lives prevents them establishing positive gender roles, which also leads to risky sexual behaviour. These learners often establish general asocial behavioural patterns, leading to poor discipline in school, which in turn limits academic success and self-actualization. [See section 6.3.3:38.]

6. The majority of the respondents agreed that life skills education should include explicit sex education, while a third are unsure and 5.5% strongly disagree. The disagreement comes from city schools where both teachers and learners feel that this was inappropriate and will not promote responsible sexual behaviour. The literature study findings are that life skills programs do not decrease risky sexual behaviour and the interviews point to the fact that such education may play a role in increased sexual activity and pregnancies among learners in city schools in more conservative communities. The fact that more than 50% of the respondents in the questionnaire feel that life skills should include explicit sex education is therefore of concern. [See sections 6.3.3:18 and 6.3.3:38.]

7. Nearly 40% of the respondents feel that explicit sex education will increase sexual activity among learners, while 44% disagree. The large percentage that agree that explicit sex education will increase sexual activity among learners and indicates that this may contribute to the spread of HIV/AIDS. The literature study finds that life skills programs do not decrease risky sexual behaviour and some interviewees feel that increased learner pregnancy in the last few years may be ascribed to the inception of the program. [See sections 6.3.3:18 and 6.3.3:38.]

8. More than 60% of the respondents agree that good discipline and supervision during breaks will limit substance and sexual abuse in schools. The findings in the literature study and also the interviews show overwhelmingly that the strong leadership role of the principal supports good discipline, good school management and academic achievement. [See section 6.3.1:23.]

9. More than 80% of respondents agree that good discipline help prevents drug and sexual abuse in schools. This is in agreement with
the findings of the literature study that good discipline and supervision is schools limits abuse in schools. [See section 6.3.1:23.]

10. All the respondents agree that drug and alcohol abuse increase risky sexual behaviour. This is in line with the findings of the interviews as well as literature study. [See section 6.3.1:23 and 6.3.3:18.]

11. The majority of respondents agree that the principal and teachers play an important role in preventing drug and sexual abuse in schools. This indicates that the principal and can help staff by creating a positive school climate based on good supervision [See section 6.3.1:23.]

12. 78% of the respondents think that female learners and teachers are not to blame if they are abused at school.

13. Half of the respondents agree that teachers and principals are involved in sexual abuse at some schools, while 16% disagree. The literature study and interviews confirm that teachers and principals are involved in abuse of learners and female teachers. Interviews indicate further that there is an increase in abuse of male learners. Sexual abuse of learners or teachers constitutes serious misconduct and causes serious emotional trauma, which negatively affects the victim’s ability to function in school. Abused learners and teachers feel sad and rejected and are unable to reach self-actualization. Abuse further indicates disciplinary problems in schools where it is prevalent. The principal as school leader has the responsibility to put structures in place that will prevent such misconduct. [See sections 6.3.1:21; 6.3.1:22 and 6.3.2:19; 6.3.3:14.]

14. A third of respondents agree that female learners and teachers are pressurized into unwanted relationship by senior male staff, while another third disagree. The literature study finds that many young black females report their first sexual experiences as rape or forced entry where injuries exposed them to further risks of HIV infection. The research indicates that schools with a negative school climate and poor discipline create circumstances where their male counterparts subject female learners and teachers to sexual abuse. [See section 6.3.1:22.]
15. More than half of the respondents disagree that single sex schools can prevent the spread of HIV/AIDS, while 22% feel they may help. Given the high levels of abuse in some schools single sex schools may protect female learners from abuse during school hours. Kadar Asmal feels that “same sex schools in areas where sexual abuse and harassment is uncontrollable may be the only option to ensure that the school experience is one of academic achievement and not a battle for survival” (Lund 2002:6). Further investigation into the plausibility of this is however necessary, particularly since the South African Democratic Teachers Union, slammed the suggestion as ‘archaic’ (Lund 2002:6).

16. 55% of respondents feel that HIV/AIDS should be a notifiable disease. Disclosure is in line with the findings of UNAIDS which promotes the keeping of accurate data on HIV prevalence in order to facilitate planning. The literature study highlights the fact that non-disclosure of HIV status makes school management more difficult for principals in areas with a high incidence of HIV-prevalence. The principal has to develop a management strategy for a problem of undetermined extent. The problem is confirmed by interviews in township schools interviewees say that non-disclosure causes problems not just for school management but also with obtaining grants and help for AIDS-affected learners and staff. [See section 5.7.2:2; 5.7.9; 6.3.2:6 and 6.3.2:25.]

17. 94% of the respondents agree that school guidance programs must be used to teach learners about sexually transmitted diseases. The importance of this is revealed in findings from the literature study, which show that, apart from HIV infections, increasing levels of other sexually transmitted diseases among 14-24 year-old learners and students are becoming a matter of concern for health workers. This finding suggests behavioural problems among South Africa’s youth, which drive the spread of HIV. The problems this will cause in school management relate to absenteeism of affected individuals, teacher provision and the social behaviour of learners. [See section 6.3.1:16.]

18. 78% of the respondents agree that the principal and teachers can play a role in the community to help families affected by HIV/AIDS.
19. The majority of respondents agree that the principal and teachers have a moral role in the community to combat discrimination against victims of HIV/AIDS.

20. 83% of respondents agree that teachers and community leaders who are suspected of misusing their positions of power to obtain sexual favours from subordinates must be taken out of the system.

21. 66% of respondents agree that confidential records should be kept of staff members and learners affected by HIV/AIDS, to facilitate counselling and assistance, while a third are opposed to the idea. Disclosure is in line with UNAIDS recommendations that accurate data be kept about HIV prevalence in order to provide long-term planning. Non-disclosure is a major problem for principals where HIV/AIDS-affected individuals form part of the school population, but confirmation of this is not available. [See sections 5.7.2:2 and 6.5.2.2.]

22. 89% of respondents agree that it is important for the principal to know which learners are ill, so as to organize help for them so that they can keep up to date with their learning.

23. 53% of respondents agree that it is important for the principal to know which staff members are ill, and for what lengths of time to arrange relief teachers.

24. Two thirds of respondents agree that senior staff members should know who at the school is HIV-positive, in order to manage the curriculum coverage.

25. 73% of respondents agree that there should be a support system, under supervision of the principal at all schools to help learners, teachers and administration staff with social and domestic problems, including those affected by HIV/AIDS. This finding confirms the finding of the literature study that learners are gratified by support received from principals and teachers. This is clearly an important aspect of school management that can help combat the impact of HIV/AIDS on teachers and learners. The importance of support systems for abused and emotionally disrupted learners is also highlighted during the
interviews with various members of school management teams. [See section 6.3.2.11.]

26. 50% of respondents agree that there should be a support system at the school, only for learning and teaching support, while a third of the respondents disagree.

27. 83% of respondents agree that there should be a support system at the school, under supervision of the principal, to give help and support to teachers and learners affected by HIV/AIDS.

28. Almost 40% of respondents agree that the school could be used as an after-hours clinic to assist and support learners, parents and teachers affected by HIV/AIDS. The interviews highlight the concept of mobile clinics at schools as a positive contribution to dealing with several health issues, including HIV.

29. 55% of respondents agree that parents would help with maintenance of the school if it were put to use for the community. This is in line with findings in the literature, that the school is an important centre for community development. Well-kept schools enhance discipline and academic performance because they create a feeling of pride of ownership among learners, teachers and the community. The positive role that the principal plays in achieving this will draw support from the community and so enhance the performance of the school. [See section 6.3.2:13.]

30. A third of the respondents agree that the principal could act as a convener for a social help team selected from members of staff and the parents, while a third disagree.

31. Seventy three percent of the respondents agree that the principal as community and school leader should play a leadership role in combating HIV/AIDS.

32. 73% of respondents agree that the principal should/could organize information meetings on HIV/AIDS at the school, for learners, staff and community members.
6.4.2 Section B

1. 47% of respondents agree that learners are seldom absent from school, while 27% indicate that learners are indeed often absent from school.

2. 47% of respondents say that teachers are seldom absent, and a third say teachers are often absent from school.

3. 53% of respondents agree that their schools are up-to-date with all the subjects but a third disagree.

4. A third of the respondents are unsure that substitute teachers are indeed appointed when teachers are absent for an extended period of time. Only 16% of the respondents say that this is the case while 47% state that replacement teachers are not appointed.

5. The statement, ‘Teachers are never absent from school,’ draws a strong negative comment from respondents, of whom, 60% say that teachers are absent at times.

6. The majority of the respondents agree that teachers are well prepared. Interestingly, one of the only two learners that completed a questionnaire is the only respondent to disagree.

7. Two thirds of the respondents agree that their schools have good academic results. A parent and student are the only two respondents to disagree.

8. Two thirds of the respondents, comprising mostly heads of department, say that their schools are in a good condition and well maintained. The only three people who are not in agreement are two students and a parent.

9. Most of the respondents disagree that parents help with school maintenance; as in fact, during interviews it became clear that some schools are not in favour of having parents help with maintenance. This is contrast to findings in section A and the literature study, where the general consensus is that if schools are seen as centre of development in the community parents will help with maintenance of schools, and that this can be a powerful management tool to develop
pride in the school and so support academic achievement and discipline. [See section 6.3.2:13.]

10. 73% of respondents are happy with the provision of books and teaching materials. Only a single student says that they do not have sufficient learning materials. Lack of teaching materials is an indication of poor planning and poor school management.

11. The majority of respondents agree that teachers make an effort to get textbooks back from absent learners. Three respondents, namely one teacher, a parent and a student, say that teachers do not make an effort away get teaching materials such as textbooks back from learners. Absenteeism of learners and teachers at the end of the school year makes this task difficult.

12. While two thirds of the respondents, agree that role call is taken regularly at the schools, a parent, a student and a head of department disagree, and indicating that there may well be a problem with registers.

13. The majority of the respondents are heads of department or teachers at their respective schools respond positively that control of learners’ school attendance is strict. If a learner is absent for longer than a week, the class teacher checks to find if there is a problem. The question was asked to find out whether there is any contact between the home and the school, should learners be absent. The only negative responses are from a parent and a learner.

14. Two thirds of the respondents agree that regular evaluation takes place in their schools. Only two respondents disagree, one a learner and the other a student.

15. The statement that the school has a support system for learners with learning difficulties evokes strong contradictory responses, with equal numbers of respondents agreeing and disagreeing.

16. 40% of the respondents indicate the existence of a support system for socially disaffected learners and/or teachers at the school, while 27% deny this, including two heads of department, a learner and a student.
17. The statement that the school has a support system for learners/teachers with emotional problems elicits a contradictory response; the respondents are divided in equal groups, one third agreeing, one third unsure and the other third denying the existence of such systems.

18. 53% of the respondents indicate that there are problems with drugs in the schools. A learner and a head of department agree that there are no known cases of substance abuse in their schools. The fact that more than half of the respondents imply that they are aware of drug and alcohol abuse in schools points to other disciplinary and HIV/AIDS-related problems.

19. Abuse of female learners and teachers at schools is confirmed by 8 of the 15 respondents. The only respondents to strongly disagree that such a problem exists are a grade twelve learner from an all-boy’s school and one head of department.

20. 47% of the respondents confirm that their schools have effective systems in place where victims of abuse can get sympathetic support. A parent and three students however disagree that this is the case.

21. 40% of the respondents agree that the school serves the community around it but this response comes mainly from city schools. One learner also agrees. There may have been a misunderstanding with this question, as it could possibly be interpreted as asking whether the school serves a certain feeder area with no learners from beyond this, rather than the intended purpose of asking whether the school is a community centre.

22. 49% of the respondents agree that the school has a life skills program in place which teaches the learners how to protect themselves and how to deal with money matters and matters such as drug, alcohol and sexual abuse and social and domestic violence. The program includes subjects such as how to find part-time jobs to help support themselves and where to go for help if they are subject to abuse. Three respondents, all students, disagree that such programs exist.
23. 50% of the respondents indicate that their schools have heads of department for Educational Guidance who can assist learners with problems.

24. 25% of the respondents indicate that the principal is available to help them with problems.

25. The response to the statement that the principal is very involved with the parents and community to help solve social problems is inconclusive, with equal numbers agreeing and disagreeing and a third unsure.

26. Two thirds of the respondents agree that their principal is a positive leader who sees to it that the school is well managed and everything at the school is under control.

27. Half of the respondents say that the school has disciplinary problems in spite of the leadership role of the principal. Only one respondent agrees that the school has no disciplinary problems because of the leadership role of the principal.

28. Half of the respondents agree that the school has covered the curriculum on time.

29. 58% of the respondents agree that the schools have enough textbooks. The respondents that disagree are learners.

30. Three of the respondents are unsure whether a sport injury could cause HIV/AIDS, three do not think it is possible and 45% think it is possible. Like needle-stick injuries and contact with HIV positive patients’ blood for health workers, this is one of the reasons why disclosure without discrimination is necessary.

31. Five out of 12 respondents indicate that their schools serves the community in which it is located and that learners do not come from outside the community. Two respondents, 18% say that their schools did not serve the community because children from other areas attend the school, and four is unsure.
32. The question of whether or not learners attend the schools nearest their homes is inconclusive, as equal numbers agree and disagree that this is the case.

33. The majority of respondents agree that their schools are well maintained. Admission to some of the worst looking schools could not be attained and these could only be observed from a distance. At some of these schools the premises look squalid and learners and teachers move around outside the classrooms and premises during what should be lesson time. Three such schools were observed, one in Tswane West, and two in Tswane North.

34. The heads of departments at four city schools say that they have no serious problems with teacher absenteeism in their schools. The statement is in direct contrast to reports from NAPTOSA and SADTU and a number of media reports that say there are serious problems with teacher absenteeism due to HIV/AIDS in several schools.

35. In answer to questions about teacher illness, two city school respondents both indicated that their schools have no problems with teachers who are ill or have died at recently. The finding is in contrast with findings in the literature study, which point to high levels of illness among teachers and 4000 teacher deaths due to AIDS-related illness in 2004.

36. Most of the respondents agree that there is good management at their schools. This is in contrast to findings in the literature study that indicate high levels of mismanagement at a number of schools.

37. A few respondents indicate problems with teachers and principals abusing learners at the schools, but the response is lower that that suggested by the literature studies. The respondents who say there is abuse in their schools are students.

38. Students and parents are not sure whether or not the principal is ever absent from school, but most respondents agree that their schools have senior staff who can take over management if the principal is not there. Most respondents agree that the staff are in proper control of the school, and that there are teachers for every subject. The majority agree that they have covered the curriculum in most subjects. The
general agreement among the respondents is that their schools do well in national examinations. The findings from these statements are in contrast to the general findings in the literature study, from media reports and reports from UNAIDS. This could be because most of the respondents come from city schools or tertiary institutions.

39. The majority of the respondents say that their schools have feeding schemes.

40. Most of the schools have disciplinary problems; the reasons are not clear, as the general impression at the schools is one of good order.

41. While the majority of the respondents say that learners are not late for school, observations at some township schools suggest that learners still loiter about in the streets after eight in the morning and even during lesson time later in the morning.

42. Most of the respondents say teachers do not come late, and most say they have had sufficient time for schoolwork. This is also in contrast to findings in the literature study, which say that many teachers are not coping and many learners have to many chores at home, which interferes with their schoolwork.

43. Most of the respondents claim to be happy at school and only two say they are worried about their schoolwork.

44. Only one respondent admits to having been abused at school, and another to having been abused by a family member. The findings are in stark contrast to what is evident from the literature study and media reports.

45. All the respondents deny being sexually active by the age of fourteen. None of the students or learners has children. This is in contrast with the findings of the literature study, which suggest high levels of sexual activity among young learners and of teenage dropout due to pregnancy.

46. None of the respondents state poverty, or AIDS-related illness as a problem to their schooling. The sample came from predominately better-off schools and tertiary institutions. The findings in the
literature study and interviews, however, indicate large numbers of learners who can no longer attend school because of AIDS-related problems.

47. The respondents give a mixed response to premarital sex, with some for and some against.

48. The respondents all agree that having sex with a teacher is no safeguard against HIV infection. They agree that not everybody has a boy- or girlfriend, and the majority say that if you have a boy/girlfriend this does not mean that you have to have sex.

49. The majority of respondents say they do not know their boy/girlfriend’s HIV status and most are not worried about it. Half of the respondents state that they have unprotected sex, and a smaller percentage say they used a condom.

50. Almost half of the respondents feel that they could not be HIV-infected if they had only one lover. Most say they know the HIV status of their lovers while the majority think their lovers have not had previous sexual partners. All say they have not had previous sexual partners.

51. Half of the respondents feel that there is discrimination against HIV-positive people in the schools. The majority are willing to help HIV-affected people, and all say they know how AIDS is spread.

52. The majority of the respondents feel that even if they are healthy their work will be affected by HIV/AIDS.

53. The majority of the respondents indicate that they have no HIV/AIDS-related family illness or caring duties to worry about.

54. Most of the respondents say that their school has an extended life skills program and AIDS-support system.

55. Equal numbers of respondents feel that the state and family members respectively must look after AIDS orphans.
6.5 RESULTS AND CONCLUSIONS FROM THE INTERVIEWS

6.5.1.1 Interview with a township school principal

HIV/AIDS infection has a negative impact on schools but this varies among schools, depending on the area where the schools are situated. HIV/AIDS has a negative impact on school discipline, and increased numbers of emotionally disrupted learners causes disciplinary problems at home and at school.

This principal agrees that substance abuse is an aggravating factor in the spread of HIV/AIDS, but says that sexual abuse of female learners is not a contributory factor to the spread of HIV/AIDS. This statement is in contradiction to other findings in this study.

Good discipline and a positive leadership role of the principal promote good academic achievement and self-actualization. However, HIV/AIDS has a negative impact on education provision and the matric pass rate. The principal says that death often causes emotional trauma and affects the normal functioning of affected persons.

The overall perception from this interview is that HIV/AIDS has a negative impact on school management because it affects discipline and academic outcomes. It therefore has a negative influence on the self-actualization potential of role-players. There are, however, differences in the impact of HIV/AIDS between schools, and different schools will be affected differently. Schools where there is a strong leadership team and good discipline have better structures in place to manage the impact of HIV/AIDS in the school. The leadership role of the principal has a deciding influence on the tone of the school, and depending on whether this is a positive or negative role will set the stage for effective management of HIV/AIDS in the school or not.

6.5.1.2 Interview with a farm school principal

The respondent is the principal of a farm school in the North East Cape. The school is well run and draws learners from far a field, because of its good academic performance and discipline.
The principal says that, as far as she knew, none of the children she has in the school have lost parents to HIV/AIDS. She says that the parents, the majority of whom are farm labourers, never leave the district and none of them or their children therefore gets exposed to the virus. Young people, who often have children, leave the area to look for work in the Cape and Gauteng, however, and come back ill to die on the farms or in the township where their elderly parents live. When they die the orphans remain with the grandparents on the farms. More often than not they drop out of school due to poverty.

The principal checks up on all absent learners, and if necessary fetches them from the farms. She is convinced that, although HIV/AIDS is not a factor in her school yet, it has a largely negative impact on schooling in general, and will be a matter for concern for the school principal as school manager in affected areas. She said AIDS would have a huge negative impact on the whole country, not just on education.

6.5.2.1 Interview with a city school deputy principal

This deputy principal concludes that HIV/AIDS-related problems do exist in some schools, and that AIDS-awareness programs help learners to understand HIV/AIDS better, but feels that some material in the life skills program is too explicit and inappropriate for use in schools, since it increases rather than decreases irresponsible sexual behaviour and leads to school-girl pregnancies.

He ascribes increasing absenteeism in schools to the impact of HIV/AIDS, with increasing numbers of affected individuals taking time off to attend funerals. The emotional impact of HIV/AIDS has led to emotional blunting in some cases where people have been overcome by the rising death rate in their communities.

Drug and alcohol abuse is a contributory factor to risky sexual behaviour and therefore a contributory factor to the spread of HIV/AIDS. Emotionally disrupted learners cause disciplinary problems in the school, but schools with good discipline and a strong management team have fewer problems with discipline in general and also with substance and other abuse. Learners in these schools achieve better academically and have a greater chance of becoming self-actualizing adults.
In contrast to the respondents from some township schools, this deputy principal sees no role for the principal in combating HIV/AIDS. He feels that while HIV/AIDS may have an impact on the overall matric pass rate this has no impact on former model C city schools.

The conclusion from this interview is that HIV/AIDS does have a negative impact on school management, but that different schools in different areas are affected differently. The impact of HIV/AIDS leads to higher levels of absenteeism and emotional distress, which impacts negatively on teaching outcomes and self-actualization. Differences of opinion exist about the effectiveness and wisdom of some of the content of the life skill programs, which is culturally based. More conservative white parents and schools find the content offensive and inappropriate for the learners, and claim that some of the content fuels risky sexual behaviour, while township schools and learners find it informative, and encouraging of more responsible sexual behaviour.

6.5.2.2 Interview with a rural school deputy principal

This rural deputy principal points to HIV/AIDS as a risk to pre-primary and primary school learners who lose their mothers to the virus. He says that several of the learners at his school are ill, but even though the school is aware of this it can not enforce testing or disclosure. Non-disclosure leads to serious problems with grants for affected learners and treatment of ill learners and personnel.

Non-disclosure is perceived to be a big problem for management of HIV/AIDS; even if the school suspects a HIV/AIDS-related problem it cannot confirm that this is the case. This creates problems with management.

Drug and alcohol abuse are a problem of mostly day scholars and promotes risky sexual behaviour. Schools with a strong management team and proper support systems for learners with problems have fewer problems with abuse and ill discipline. Several township schools, however, have divided and weak management teams and this leads to poor discipline, poor academic achievement and limited self-actualization of role-players.

Sexual abuse of both female and male learners, which increases their risk of HIV infection, is prevalent in the community and the school has a support system to assist abused learners. These learners are severely traumatized and
struggle to learn. Emotionally traumatized learners cause disciplinary problems in the school.

Early sexual activity among learners causes disciplinary problems in the school. Some cultures initiate learners as young as twelve years old and these learners then have parental consent to cohabit. Good discipline and proper life skills programs do promote responsible sexual behaviour among learners and helps to combat HIV/AIDS due to a better understanding of the epidemic.

HIV/AIDS causes increased levels of absenteeism among learners and teachers and school dropout can be linked both to HIV/AIDS and to poor discipline in the home. There is a marked difference in the impact of HIV/AIDS in different schools and the leadership role and management structure of the school can play a positive role in managing the impact of HIV/AIDS in schools. Well-managed schools have good discipline and good academic results, which enhance the self-actualization potential of role-players.

6.5.3 Interviews with four heads of department

6.5.3.1 Interview with a head of department at a city school, Tswane district

This city school has no HIV/AIDS-related problems. Problems are however perceived at the township schools where the city school is involved in outreach programmes. The conclusion from this interview is that the impact of HIV/AIDS varies from school to school.

Absenteeism among learners and teachers at some of these schools could be linked to the impact of HIV/AIDS, as affected people take time off for funerals. There are also increased numbers of emotionally disrupted learners in the schools, and this leads to disciplinary problems. Early sexual activity, which exposes learners to HIV infection, is due to a lack of discipline in the home rather than the school.

There is a definite link between good school management and good discipline, and this supports academic achievement of learners and the self-actualization of learners and teachers. In contrast to most other respondents, this respondent feels that HIV/AIDS does not really affect school discipline.
or achievement but may have a negative impact on the national matric results.

The cultural difference in perceptions regarding HIV/AIDS is apparent in this interview, where the interviewee has serious reserves about the effectiveness of life skills programs in combating HIV/AIDS. She feels these programmes promote early sexual experimentation rather that responsible sexual behaviour. In contrast to township respondents, respondents from former model C schools feel that the principal beyond setting the tone for good school management and discipline does not have a specific role in the combating of HIV/AIDS. This may be due to the limited impact the pandemic has on these school populations in contrast to other schools.

6.5.3.2 Interview with a head of department at a city school, Ekuruleni district

Although the school has a varied school population, problems at the school are mainly due to poverty. No perceived problems with the impact of HIV/AIDS are apparent at the school. The school has a well-structured life skills program, and the consensus is that, beyond assuring the implementation of the life skills program, the principal does not have a role in combating the impact of HIV/AIDS in schools. The respondent, in contrast to respondents from the township schools, feels that sections of the life skills curriculum are inappropriate for presentation in schools, again highlighting the difference in cultural perceptions on sex education between communities.

6.5.3.3 Interview with a head of department at a township school

The conclusions drawn from the interview at this school are that there are definitely learners and teachers affected by HIV/AIDS in the school system. In order to manage the problem, the school promotes a voluntary disclosure system and keeps detailed records of affected persons. This is done confidentially and aims to promote help for affected persons. In spite of this progressive management system for HIV/AIDS it is felt that absenteeism in schools is not that high and is not necessarily ascribable to HIV/AIDS. This is in contrast to the perceptions common at city schools, which experience minimal AIDS impact themselves but believe that high rates of absenteeism in township schools are related to HIV/AIDS.
The consensus is once more that good school leadership and discipline forms the basis of good academic performance and self-actualization. Drug and substance abuse fuel the spread of HIV/AIDS because it promotes risky sexual behaviour. Such abuse can be limited by good school discipline.

**6.5.3.4 Interview with a head of department at a city school, Ekuruleni district**

The conclusions drawn from this interview are that HIV/AIDS threatens the lives of many South African learners and teachers. Learners who are sexually active expose themselves and others to HIV infection.

While the life skills programme in schools provides learners with a better understanding of HIV/AIDS, explicit sex education increases teenage sexual activity and so increases the spread of HIV/AIDS. The conclusion is once more that drug abuse is an aggravating factor in the spread of HIV/AIDS but good school management and discipline limits this effect in well-run schools. Schools can play an active role in preventing discrimination against HIV/AIDS victims. This respondent is against confidential records at the school on HIV-positive learners and/or teachers, as he does not think these will help the school manage the impact of HIV/AIDS on school management; he concedes they might help with replacement of absent teaching staff. This view is in contrast to that of the previous respondent at whose school records are already in use as a management tool, and also with the UNAIDS recommendation that precise records be kept on HIV statistics to help with combating the impact of the pandemic. [See section 3.2.4.]

There are considerable differences of opinion regarding who should be responsible for the ever-increasing numbers of AIDS orphans by the state or family members. The difference in impact of HIV/AIDS between schools is highlighted again. The impact on management in rural and township schools is greater than in city schools.

**6.5.4 Interview with a school psychologist at a city school Tswane North**

The interviewee states that school dropout may be due to the impact of HIV/AIDS. She is not sure whether the increase in absenteeism among teachers and learners is HIV/AIDS related. Drug and substance abuse are definitely aggravating factors in the spread of HIV infection, but schools
with good discipline and management structures have fewer problems with drug abuse among the learners.

Good discipline and school management and positive leadership how the principal have a positive influence on discipline and academic outcomes. There are differences in the impact of HIV/AIDS on school management between schools, and the interviewee says that rural schools are the worst affected; by implication, HIV/AIDS incidence is higher in the rural areas, with higher levels of absenteeism and management problems.

The respondent feels that early sexual activity among learners is due to poor discipline in the home and agrees that it fuels the spread of HIV/AIDS among learners. Explicit sex and violence on television lead to irresponsible sexual behaviour and the spread of HIV/AIDS among teenage learners. Also many female learners see sexual advances from and relationships with a male teacher as a privilege or achievement and not as abuse. Sexual relationships between teachers and learners constitute misconduct and give rise to disciplinary problems at the school, apart from exposing the learners to HIV infection and/or pregnancy. The principal as school manager is responsible for reporting such incidences and the teachers involved should be severely dealt with. This is not always the case and even school leaders such as principals are involved.

Gender inequality leaves female learners and teachers open to abuse, and many find themselves in abusive relationships. Abuse fuels the spread of HIV/AIDS in school and abused learners do not cope in school. Female learners and teachers must be emotionally and financially empowered to be able to be assertive about their rights. She states that gender inequality fuels the spread of HIV/AIDS in schools and unacceptably high pregnancy rates among teenage learners cause many learners to drop out of school. Underlying poverty and the R170-00 monthly grant to unmarried mothers may be contributing factors. Not only does pregnancy among learners cause problems with school discipline and management, but it also eliminates the chances of a proper education for these young mothers and thereby their ability to become self-actualizers.

Abuse and sodomy of male learners is on the rise. Both female and male perpetrators are involved. Many perpetrators are involved with the learners as teachers, coaches and pastors, making this a school matter, which needs attention from the principal as school leader. Investigation into this type of
abuse is severely neglected. Male learners tend to be reluctant to report the abuse, which compounds the problem. All forms of abuse expose learners to possible HIV infection.

Abused learners do not cope in school and suffer serious emotional problems, which disrupt their learning. Emotionally disrupted learners often cause disciplinary problems in school, which disrupts learning for other learners as well. Abused learners became emotional during life skills lessons when certain subjects are discussed. Life skills education does promote responsible sexual behaviour among learners but some aspects upset abused learners.

Death always has a negative impact and causes depression and a lack of commitment in affected individuals. HIV/AIDS-related deaths have the same impact on affected learners and teachers, creating problems with curriculum coverage and school discipline. None of the township interviewees links the increase in absenteeism to the spread of HIV/AIDS. This was in contrast to the findings of NAPTOSA and several media reports.

Human Rights issues are skewed in favour of abuse perpetrators and the slow response of the legal system has a further negative emotional influence on abuse victims. They feel unworthy and unwanted, which leads to emotional problems, which in turn have an impact on their schooling and often lead to disruptive behaviour. The respondent is in favour of a mobile clinic at the school, with links to healthcare services.

6.5.5 Interview with a school healthcare worker

Non-disclosure of HIV/AIDS-status makes obtaining help for affected individuals difficult. Learners are interested in HIV/AIDS and keen to learn more about the virus. Information pamphlets on the spread of HIV/AIDS and provision of anti-retroviral drugs to promote voluntary disclosure are however ignored. Teachers show a lack of interest in healthcare education. They do not attend lectures or help learners with the content.

The school has an extensive life skills program which is available to learners and teachers. The respondent feels that a mobile clinic in conjunction with healthcare services would be beneficial. Previous school clinics in the area have been discontinued.
Gender inequality fuels the spread of HIV/AIDS. Traditional beliefs that women are inferior are a root cause of this. Empowering girls emotionally and economically will help to curb the spread of HIV/AIDS in schools. Many women find themselves in abusive relationships and cannot protect themselves. Women should be empowered to be able to dictate condom use without fear of violence from their spouses or partners.

Abused learners have problems with learning and several cause disciplinary problems in the school. Sodomy and other forms of abuse of male learners are on the rise but are largely ignored. Abusers are both male and female and are often people known to the learners, such as teachers and sport coaches.

School dropout can be linked to HIV/AIDS. Drug and substance abuse is an aggravating factor in the spread of HIV/AIDS. Early sexual activity is due to poor discipline at home and fuels the spread of HIV/AIDS. The impact of HIV/AIDS on school management is related to the community in which the school is situated.

6.5.6 Informal interviews

6.5.6.1 Caregiver to AIDS orphan

The incident underlines the plight of families affected by HIV/AIDS. Poverty worsens when the breadwinner becomes ill and family members distressed by their loss of a loved one have to step in to care for the remaining dependants

6.5.6.2 Grandfather and caregiver to two AIDS orphans

The distress of a parent who is unaware of his child’s illness and so is shocked by her death is illustrated by this incident. The father is convinced that his daughter could not have had AIDS as she was married, highlighting the general ignorance about AIDS. The daughter leaves behind two orphans that the two elderly grandparents have to care for, because the father has no work. Problems are encountered with fostering and grants, as the father is their legal guardian. The youngest orphan, a girl of two, died in January 2006.
6.5.7 HIV-positive mother of three dependent children

The interview highlights the anguish of parents who are HIV positive and no longer able to support their children. As her poverty deepens, this mother has less access to her children; she experiences severe discrimination and is eaten by remorse and fear of dying as well as fear for her children’s futures. Her struggle to find help highlights the plight of many HIV-affected families who struggle to get grants for their children and treatment for themselves. She is angry and disgusted at the attitude she encounters at social services and at healthcare institutions.

6.5.8 Interviews with a postgraduate student

This respondent confirms risky sexual behaviour among teenage learners and students. The interviewee terms this behaviour ‘reckless’ and maintains that risky sexual behaviour and immorality lies at the core of the rapidly spreading pandemic. Life skills programmes, if presented properly will promote responsible sexual behaviour. Only individual moral change can stem the spread of the virus.

The interview confirms that drug and alcohol abuse are aggravating factors in the spread of HIV/AIDS because they fuel risky sexual behaviour and also cause disciplinary problems in schools. Multiple sexual partners and the practice of point scoring for exaggerated conquests further fuel the spread of HIV/AIDS in schools and tertiary institutions.

Sexual abuse and abuse of learners by teachers and even principals is a problem in some schools, and exposes learners to HIV infection. Abuse in schools is the result of poor school management and poor leadership by the principal; it causes disciplinary problems in the school, emotional stress that leads to poor academic achievement and a lack of self-actualization.

A rise in deaths among young adults is apparent in the community where the respondent lives but no one actually knows the causes of death. This confirms the problems that non-disclosure creates in the management of the pandemic.

Where poor discipline exists in schools, learning becomes difficult and higher levels of abuse are prevalent. Schools where there is good discipline have fewer problems with sexual and substance abuse and academic
outcomes are better, giving learners and teachers the opportunity to become self-actualizers.

Learners drop out of school due to poverty and the ill health of their parents. This may be ascribed to HIV/AIDS and makes management of registers difficult in schools where problems exist. It also limits the self-actualization of affected learners because of their limited education.

Principals can only play a positive role in combating HIV/AIDS and abuse in schools if they themselves set good examples; in actual fact many teachers and principals are poor role models. The impact of HIV/AIDS on school management and the self-actualization of role players is a phenomenon, with many contributory factors making the management of the pandemic extremely difficult. The result of this is the undermining of the education system in South Africa with a debilitating effect on the self-actualization of role-players, creating a crippled work force and economy.

6.5.9 Interview with a learner

The learner feels that HIV/AIDS poses a serious threat to teachers and learners in South Africa. Learners who are sexually active expose themselves and others to HIV infection.

The learner agrees that life skills programs improve learner’s ability to cope with AIDS issues, but does not think that explicit sex education should be part of the program. She does not know any one at her school who is sexually active. The learner feels that schools with good discipline have fewer problems with drug abuse. This form of abuse where it exists leads to other forms of risky behaviour, including risky sexually behaviour that aids the spread of HIV/AIDS in school.

The learner feels that the principal and teachers do not play a role in combating the impact of HIV/AIDS in schools. She is not aware of abuse in her school. She feels that HIV/AIDS should be a notifiable disease because this will help in the management of the impact of the disease.

She says that disciplinary problems do exist in schools, and is against premarital sex. She has no idea of the general impact of HIV/AIDS and feels that family members should care for AIDS orphans. This interview again shows that the possible impact of HIV/AIDS varies among schools and that
in more conservative schools there may be a lack of knowledge and insight into the widespread disruption that HIV/AIDS causes in education due to the impact it has on structures in the community and also in schools.

6.6 RESULTS AND CONCLUSIONS FROM NEWSPAPER CLIPPINGS

These results from the latest newspaper reports are included in the study as part of the artefact collection because they poignantly illustrate the findings of the research.

HIV/AIDS is having a serious impact on teacher provision. 10,000 teachers with CD4 counts of less that 200 need anti-retroviral drugs to sustain their health. The large number of seriously ill teachers underscores the problem facing principals in maintaining good school management and curriculum coverage. Only 5000 new teachers are trained annually to replace the ill and retiring teachers.

Sexual abuse and coercion by older men seeking relationships with young girls fuel the pandemic. Sexually active girls expose themselves to HIV infection, pregnancy and school dropout. This creates managerial problems for the principal with control of registers and discipline in the school. These learners cannot reach self-actualization because of their poor education.

The high death rates in the worst affected areas create many AIDS orphans. Principals of these schools have the added burden of managing affected learners’ home situations to help them stay in school as long as possible.

Abused and orphaned learners struggle to survive. This distracts them from their studies, and the result is poor discipline, poor academic achievement and a lack of self-actualization.

The principal as school manager and the teachers at the school can play a positive role in providing the learners and community with scientific information on HIV/AIDS and so dispel the misinformation and AIDS myths that fuel the pandemic.
6.7 EMERGING TRENDS FOUND IN THE RESULTS OF THE LITERATURE STUDY, QUESTIONNAIRE INTERVIEWS AND ARTEFACTS

1. The leadership of the principal has a limited positive role in maintaining discipline in the schools. Not all the respondents feel that this is extensive.

2. Respondents vary in opinion as to whether or not the principal can play a role in controlling the spread of HIV/AIDS in schools.

3. The responses to the questionnaire indicate that HIV/AIDS is indeed a problem for school management. There is a strong possibility that increased absenteeism in schools is linked to HIV/AIDS.

4. The majority of the respondents agree that poor discipline and drug and alcohol abuse contributes to risky sexual behaviour. There is a very strong indication that drug and substance abuse is rife in some schools. This does not only cause problems with discipline but also increases risky sexual behaviour and other forms of abuse. Drug and alcohol abuse is an aggravating factor in the spread of HIV/AIDS.

5. Several respondents agree that sexual abuse is a problem in schools and that senior male personnel misuse their position to coax learners and female teachers into unwanted relationships. The research indicates that there are definitely instances of abuse in South African schools and that teachers are implicated in this.

6. The life skills program helped teach learners responsible sexual behaviour and has made them aware of the dangers of substance abuse. This finding in the questionnaire contrasts to findings in the literature and some interviews, which suggest that life skills education, does not necessarily decrease risky sexual behaviour and in some instances may even increase sexual activity among learners.

7. A number of the schools visited have good support systems available for teachers and learners with social and other problems.

8. Indications are that increased rates of school dropout could be related to HIV/AIDS.
9. Indications are that emotionally disrupted learners increase disciplinary problems in schools. Even schools with overall good management and strict supervision have problems with discipline.

10. Most respondents believe that a strong management team under the leadership of the principal plays a positive role in establishing good discipline and developing a positive culture of learning in schools.

11. There are varied opinions as to whether or not there is a relationship between early sexual activity and discipline in schools. Several respondents feel that the disciplinary problems in this regard come from the home and fuel ill discipline in the school, rather than the other way around.

12. Most of the respondents agree that a good leadership team at the school under the supervision of the principal is conducive to better discipline, better academic achievement and therefore better self-actualization.

13. There is a marked difference in the impact of HIV/AIDS on different schools, depending on the community where each school is situated.

14. HIV/AIDS disrupts schooling and therefore affects discipline. A number of respondents indicate that some of their friends are ill, and that they have to attend to the classes of those sick colleagues.

15. A number of respondents say they have lost friends and people at their school. There is an increase in funerals and therefore also of leave taken to attend these.

16. The promotion of life skill programs has a definite positive effect in combating HIV/AIDS.

17. A difference of opinion exists on the incorporation of explicit sex education as part of the HIV/AIDS program, but the general consensus is that it does encourage more responsible sexual behaviour. A good number of the respondents indicate that they would rather not engage in premarital sex.
18. Gender inequality has a big impact on the self-actualization of female learners. Learners tend to believe that it is compulsory to have sex if you have a relationship with someone.

19. Some of the respondents say they have been sexually abused both at home and at school. Family members and teachers seem to be among the perpetrators.

20. There are marked differences in opinion amongst learners and teachers regarding subjects such as discipline, absenteeism, abuse and curriculum coverage. The teachers tend to paint a much rosier picture that do the learners.

21. Abused learners do not cope in school and suffer serious emotional problems, which disrupt their learning. Emotionally disrupted learners often cause disciplinary problems in school, which disrupts learning for other learners as well. Abused learners became emotional during life skills lessons when certain subjects are discussed.

6.8 CONCLUSION

Research findings indicate that HIV/AIDS will have a negative impact on the provision and quality of education. The South African school system is under siege, leaving principals as school managers with increasing managerial dilemmas as the pandemic increases and large numbers of learners, parents and teachers become infected with the virus.

The work of teachers who are infected with or affected by HIV/AIDS is compromised by increased periods of absence and illness. Healthy educators become demoralized by the work overload and extra administration that they are faced with as well as the trauma of losing colleagues, friends and family members to the virus. Many principals lack support and training to deal with the ravages of HIV/AIDS in their schools, leading to an increasing lack of cohesion and discipline. Principals in these schools affected by the impact of HIV/AIDS where high levels of absenteeism exist among teachers and/or learners devote their time to crisis management. Increased absenteeism among teachers and learners leads to disruption of the curriculum and dysfunctional management structures in HIV/AIDS-affected schools. Because of this disruption discipline and teaching suffers and this leads to a negative school climate and poor academic results. Learners and teachers in
these schools feel insecure and lack self-confidence; they can therefore not attain self-actualization.

However, schools where the principals play a positive leadership role and have managed to create a positive school climate produced positive academic outcomes, and a positive school community. Teachers in these schools are goal-directed and fulfil their duties with enthusiasm. Discipline and management in these schools are of a high standard. Learners feel secure and self-confident and take pride in their school. Role-players in schools where good discipline, good school management and a positive school climate exist are able to reach positive self-actualization.

HIV/AIDS has a traumatic impact on learners. Many are abused or, orphaned and have to take on untimely adult responsibilities. Many are homeless or have to move in which relatives or friends who are willing to house them. Learners are further faced with disrupted schooling as they and their teachers become frequently more absent from school. Learners affected by HIV/AIDS become increasingly absent from school and many drop out. Many learners become increasingly sexually active at an increasingly younger age and indulge in risky sexual behaviour, while others attempt to escape their dismal living circumstances by indulging in substance abuse. Learners and teachers who are abused develop a negative self-concept and are unable to concentrate of any given task, which leads to a lack of discipline and academic failure, and limits self-actualization.

There seems to be a positive correlation between effective school management and those structures in the learner’s life world and personality that influence his/her self-actualization. Furthermore, research points to a negative impact caused by the stress created by HIV/AIDS in the lives of teachers and learners affected by the virus. HIV/AIDS impacts negatively on effective school management, leading to low morale and a negative school climate, which leads to a lack of discipline, low motivation and poor academic standards, which limit the self-actualization of all the role players in the school system.

Therefore it can be concluded that HIV/AIDS has a negative impact on effective school management and self-actualization of role players. Not only those learners and teachers directly affected by or infected with HIV/AIDS experience the negative impact of the virus on education, but also healthy participants in the education and economic structures of the country. South
Africa cannot afford to lose the gains it has made in providing quality education for all. Serious attention must be given to all possible solutions to combat the impact of HIV/AIDS on the school system. In chapter seven recommendations for possible action will be made, in the hope that positive outcomes for school management and self-actualization can be achieved through these. Specific attention will be given to the leadership role of the principal in this situation.