

# **THE ROLE OF THE PRINCIPAL AS SCHOOL MANAGER IN DEALING WITH THE IMPACT OF HIV/AIDS IN SCHOOL MANAGEMENT**

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A qualitative study based on an extensive literature study was undertaken to establish the role if any, that principals in South African schools could play in combating the impact of HIV/AIDS on the managerial structures in schools and the effect thereof on self-actualization of teachers and learners. The results of the study indicate that HIV/AIDS will have a negative impact of the provision and quality of education in South Africa, leaving principals as school managers with increasing managerial dilemmas as large numbers of learners, parents and teachers become infected with or affected by the virus.

## **Introduction**

Literature has highlighted the devastating impact that HIV/AIDS will have on the education system in South Africa. (Avert 2000:1-3; Porter 2002:1; UNICEF 2000:1) agree that the most profound affects of HIV/AIDS are concentrated in education and that the coverage and quality of education are threatened. Principals in South Africa face the daunting task of providing quality education with an increasingly ill, absent and demoralised teacher corps, to increasingly ill and disrupted learners and AIDS orphans who are often not able to benefit from education because of their dismal living conditions.

South Africa not only has the highest number of HIV-positive people in the world, between 6.29 and 6.57 million, but also the largest number of AIDS orphans, namely 2.3 million and this figure is expected to rise to 3.1 million by 2010 (Health-e News Service 2005:1; UNAIDS:2004:61). Moreover, in 2004 more than 4000 teachers died of HIV/AIDS complications and a further 45,000 (12.5% of the teacher workforce) is reported to be HIV-positive (Khangale 2005:1). A quarter of the deceased teachers were between 30 and 40 (Caelers 2005:5), pointing to a looming management disaster, because of future teacher shortages caused the impact of HIV/AIDS on teacher provision. De Bruin (2003:1) finds that the mortality rate of female teachers aged between 30 and 40 increased by 70%. The loss of these

female teachers means that not only is education losing teachers, but also South Africa is losing, teachers, mothers and daughters leaving behind young and often sick orphaned learners, who lack nurturing and care. These orphaned learners, often display disruptive behaviour and disrupt school-discipline. Moreover, the teachers dying from AIDS (males and females) are the ones who were meant to be the education leaders of the future, the ones who are supposed to form the backbone of education for the next 20 years or more, according to Dave Balt of NAPTOSA. The Medical Research Council (MRC) and the Human Sciences Research Council (HSRC) in a survey found that 10,000 South African schoolteachers (22% of HIV-positive teachers) needed anti-retroviral treatment for AIDS, which means that according to the South African criteria for the start of anti-retroviral treatment these teachers have a CD4-cell count of 200 or less, and are probably to ill to teach effectively. Should the international criteria of a CD4-cell count below 350 be implemented for treatment, 23,500 teachers will need anti-retroviral medication in the near future (Joubert 2005:4). Pela (2001:1-2) further says that 8% of school principals and heads of department are also HIV-positive pointing to an ever increasing management crisis in schools.

Considering the large numbers of people infected with HIV/AIDS in the 14-49 year age group, 5.9 million according to the latest 2004 UNAIDS update report, as well as an estimated 354,000 children between the ages of 2-14, it stands to reason that both teachers and learners as well as members of their families and support staff at schools could be infected with or affected by HIV/AIDS, thereby reducing their ability to function optimally in schools and society. Moreover, UNAIDS (2004:51) stresses that teachers and lecturers belong to the worst HIV-affected group, and Naidu (2004:2) reports that as many as 500,000 secondary school learners in South Africa would also be infected and could die before the age of 30.

Research indicates that the managerial costs of HIV/AIDS for education include absenteeism, lost productivity, hospitalization and replacing administrative workers and teachers affected by AIDS. Barnett and Whiteside (2003:202) stress that not only has AIDS increased teacher deaths, but also teachers are difficult to replace, and furthermore, teachers' illness leaves classes untaught for extended periods of time, due to problems with finding suitable replacements. Caelers (2005:5) finds that teachers consistently take days off, either because they are ill or affected by others who are ill as a result of HIV/AIDS. More than one fifth of teachers reported

attending a funeral at least once a month, resulting in ever-rising rates of absenteeism, and many of the teachers reported feeling depressed by the adversity of HIV/AIDS on their lives. These factors impact negatively on school management, academic performance and self-actualization. Without proper AIDS-management education in South Africa will collapse. School principals face the daunting task to manage their schools under increasingly difficult circumstances. The HIV/AIDS pandemic will not only worsen the projected shortage of teachers and affect their ability to teach, but also the increased infection rates among learners, and changing enrolment patterns, will disrupt schooling, because of the erratic attendance of depressed teachers and emotionally disrupted learners who may be sick or dying themselves, or caring for sick or dying relatives (Pretorius 1999:1; Soul City 2003:22-29; Caelers 2005:5). Moreover, because HIV/AIDS is not a notifiable disease principals and other education managers have to manage a problem the extent of which is unknown. UNAIDS (2004:52) states clearly that without long-term planning for which accurate AIDS-data is essential it will be difficult to maintain school enrolment targets and teacher provision.

Not only teacher absenteeism and death impacts negatively on school management, but also learner absenteeism: learners who are affected by HIV/AIDS are not able to attend school regularly (Pela 2001:1), since many AIDS-affected families withdraw their children from school to compensate for labour losses, and increased care responsibilities, and also to combat increasing costs incurred by sickness in the family. A 2000 survey among 771 AIDS-affected households in three South African provinces shows that more than 40% of caregivers took time of work to tend to ill family members. Nearly 10% of households removed girls from school compared to 5% of boys (Steinberg *et al.* 2002 in UNAIDS 2004:52), pointing to a disturbing presence of gender inequality which increases the negative impact of HIV/AIDS on the self-actualization potential of female teachers and learners.

UNAIDS (2004:52-53) and Avert (2002:3) finds that AIDS reduced the number of children in school. HIV-positive mothers have fewer children, of whom a third may also be infected with HIV, and may not reach school going age. Furthermore, many AIDS orphans do not have the means to continue schooling, having to find jobs to fend for themselves and often for younger siblings as well (UNAIDS 2004:53). South African learners had the third highest HIV-infection rate in the world by 2000, and 285,000 learners were already HIV-positive by 1999 (Dispatch 2000:1; Altenroxel 1999:4).

*The Teacher* (1999:1) shows that one in five South African youths (learners) was infected with HIV/AIDS by that time and Naidu (2004:2) mentioned above, says this figure could be as high as 500, 000 among secondary school learners. Moreover, 29% of 12-17 year olds are sexually active, and of these 52% have multiple sexual partners and a staggering 51% of the sexually active learners admitted to having sex before the age of 15, while many also admit to engaging in risky sexual behaviour (Bartlett 2002:1). Besides the high rates of infection among teenage learners, 5.6% of children between the ages of 2-14 are HIV-positive (Pienaar 2002:1) indicating a future drop in school enrolment. Apart from the high incidence of HIV-infections among, teenage learners, medical experts are also concerned by the increasing rates of other sexually transmitted infections (STI's) among 14-24 year old youths. The prevalence among young males is set at 17% and among young females at a staggering 53% (Dispatch 2000:1; Oliphant 2003:8). Illustrating the extent of HIV-infections among students and learners, Kirby (2000:2) emphasizes that at the University of Durban Westville 25% of the student body was HIV-positive by 2000, which points to a negative impact of HIV/AIDS on teacher training. Pela (2001:1) states that the impact of the epidemic has shaken the entire education system, calling it an emergency that calls for a complete overhaul and re-planning of education management strategies. The high levels of infection among learners themselves and the impact of HIV/AIDS on Aids orphans and learners from AIDS-affected households will disrupt the planning structures put in place by school management and so increase the problems facing principals in delivering quality education in the context of HIV/AIDS.

The rapid increase of the HIV/AIDS pandemic has seen an AIDS orphan explosion in South Africa, which will impact on all aspects of society. The impact of HIV/AIDS on learners is multifaceted and complex. AIDS is increasing the number of emotionally vulnerable, malnourished, undereducated and socially maladjusted learners in the school system. UNAIDS (2004:62) says that even people who work with orphaned children have no concept of the emotional anguish these children experience when they watch their parents fall ill and die, one after the other. These orphaned, and also other AIDS-affected learners, because their basic needs are not met, have no possibility of achieving their full potential, this causes frustration and anger and increases the prospect of social instability and disruption of schooling, leaving principals with increasing problems, in their attempts to deliver quality education to these disrupted learners (Altenroxel 2002:5; Clark 2002:6;UNAIDS 2002:9). Because AIDS orphans are exceptionally

vulnerable, the impact on their emotional and physical wellbeing is devastating. Many experience depression, anger, guilt and fear for their futures. This leads to serious psychological disturbances such as post traumatic stress disorder, drug abuse, aggression and even suicide (Foster in UNAIDS 2004:62-64). Many are not able to make use of available educational opportunities; instead their emotional and physical disruption creates problems in their schooling, and presents a serious challenge to teachers and principals who have to accommodate their needs. Not only do AIDS-affected learners disrupt their own schooling, but their disruptive behaviour impacts negatively on the schooling of healthy learners whose right to quality education is disrupted not only by their disaffected peers, but also by ineffective and disrupted tutoring from AIDS-affected or infected teachers.

High levels of sexual abuse further impact negatively on the self-actualization of learners and point to poor management in affected schools, indicating a lack of positive leadership by principals of these schools. Abuse can render learners emotionally labile and unable to cope with the challenges which normal schooling presents, thus interfering with scholastic achievement and self-actualization. South Africa not only faces the ravages of AIDS in its school system, among learners and teachers, but also faces the horror of sexual abuse in schools suffered by learners (Monare 2002:1). It has been estimated that in a third of all child-abuse cases in South Africa, teachers are the perpetrators (SAPA-AFP 2002:3). Researchers were horrified by the fact that teachers and even principals may be implicated in rape of female learners, while authorities are slow to respond to these accusations, and parents often turn a blind eye to abuse for the sake of financial support (Epstein 2000:1; Dickerson 2001:2; Schmidt 2001:11; Monare 2002:1; Rice 2002:13). Female learners not only face abuse by their teachers but are also often abused by male learners at school (Rutenberg *et al.* 2001:26; Sylvester 2001:15). Many of these abused learners become HIV-affected by their abusers, some fall pregnant and a large percentage drop out of school (Terreblanche 2002:2). Abuse of learners constitutes serious misconduct and should be dealt with accordingly to protect the rights of affected learners (Buchel 1993:283-286; Van Wyk in Badenhorst *et al.* 2003: 191-192). Parents entrust their children into the care of the principal and school with the expectation that having done this, the principal and teachers will educate and protect these learners as is indeed their duty (Buchel 1992:81). Clearly in the context of HIV/AIDS this task of the principal becomes increasingly difficult, as they have an added

responsibility to ensure the health and safety of learners, particularly considering the high incidence of abuse in schools.

Apart from the high incidence of sexual abuse in schools the impact of drug and alcohol abuse has become an aggravating agent in the spread of HIV/AIDS in schools (Ellis 2000:8; Johns & Schronen 2001; Venter 2002:6; Berk 2003:208). Drug and alcohol abuse among teenage learners, apart from being a serious problem in its own right, is often associated with risky sexual behaviour, increasing the risk of HIV-infection. Many teenagers engage in prostitution to obtain money for drugs, putting them selves and their peers at risk of HIV-infection (Venter 2002:6). AIDS orphans in an attempt to escape their hopeless living circumstances often turn to alcohol and drugs to relieve their distress (UNAIDS 2004:62-64). Principals therefore, apart from having to deal with the serious problem of HIV-positive learners and teachers in the school system, which affects all aspects of school management, including for instance control of registers, stock and curriculum coverage, also have to face widespread drug abuse in schools. Hoberg (2001:250) confirms the seriousness of drug abuse in schools, saying that drug abuse has become the “*in thing*” among adolescent learners. Not only drugs, but also alcohol abuse have become a serious headache for many school principals and fuel the spread of HIV/AIDS (Berk 2003:208). Both teachers and learners are culprits.

The research shows further that South African principals in the context of HIV/AIDS face serious managerial and disciplinary problems at classroom and school management level (Coombe, 2000:4; Van Deventer *et al.* 2003:4). Various reports indicate that there are serious disciplinary problems in a large number of schools, with debilitating effects on school management. The reports indicate that problems are caused by a variety of factors, some of which could facilitate the spread of HIV/AIDS and impede the ability of the principal to provide quality education and ensure the self-actualization of teachers and learners. These factors include the following:

- Crime levels at schools have become a serious problem, (Rademeyer 2001:2), with many schools in the position of having “*Pupils...out of control*” Bramford (2001:5). In one incident a grade 11 learner reportedly assaulted three teachers who tried to prevent him from gambling in the classroom (Govender 2002b:2). Breakdown of discipline aggravates the possibility of abuse in schools and thus also the spread of HIV-infection.

- Many learners leave the school premises during breaks and then do not return for further lessons (Rademeyer 2002:3), a problem so prevalent that police aid has been called for in several provinces, in a bid to stop learners from playing truant (Oosterwyk 2002:7). This trend increases the possibility of sexual and substance abuse among learners and so fuel the spread of HIV/AIDS among learners.
- South African girls too often encounter violence in their schools, and continue to be raped, sexually abused, sexually harassed and assaulted at school by male classmates and teachers; while school authorities insist on dealing with sexual abuse problems internally, victims who are helpless to prevent this, have learnt to suffer in silence (Human Rights Watch 2001:1-6; Govender 2002a:2; Van der Merwe 2002b:2).
- One third of all child rapes in South Africa are committed by schoolteachers, which means that our schools are a major site of harassment and rape of children, according to Dr Rachel Jewkes of the Medical Research Council in Pretoria (Reuters 2002b:1). The high levels of abuse in schools is an indictment against the principals in whose schools this takes place, and points to a poor leadership role of these principals.
- Pretorius (2002a:9) states that the large numbers of teachers who are infected with HIV, leave serious gaps in classroom and school discipline and in teaching when they become ill and are absent or die. It is expected that more than 53,000 teachers will die by 2010 leaving behind increasing numbers of traumatized learners in ill-disciplined and unsupervised classroom situations (Coombe 2000:4; Caelers 2005:5).
- One of the crucial reasons for the rise in HIV/AIDS among 15-25 year old female learners is the number of teachers having sex with their pupils (Van der Merwe 2002b:2). Many of the perpetrators are principals, who are supposed to set an example to and oversee the behaviour of teachers on their staff (BBC News 2003:1).
- “*Some teachers played a negative role [influential to pupils] such as late coming, absenteeism, substance abuse and having affairs with pupils*” according to an Education Department report in Mpumalanga (Mtshali 2002:4). Van der Merwe (2002c:7) confirms the negative example set by some teachers, in a report on proposed measures to combat management problems in schools.

The above negative influences have a negative impact on school management and the self-actualization in troubled schools.

The literature study suggested that factors such as these mentioned above may influence the leadership role of the principal as school manager. The literature also showed these factors may have a direct impact on school management and successful self-actualization of teachers and learners in South Africa. To establish how these factors affect the role of principals in these troubled schools, a qualitative study was undertaken, to establish

1. possible measures that could be taken to limit the perceived negative impact of HIV/AIDS,
2. to ascertain which factors fuel the spread of the virus in schools and
3. what role principals can play under these adverse conditions to ensure effective school management and the self-actualization of teachers and learners?

## **Methodology**

Data for this study were gathered using Multimethod data collection strategies. The following qualitative data-selection methods were used in this multi-method study:

- Preliminary interviews (1994-2005);
- In-depth-interviews, qualitative interviews and structured interviews;
- Informal conversation interviews;
- Personal documents;
- Field observation;
- Case study and longitudinal observation;
- Survey questionnaire; and
- Artefact collection.

- The preliminary interviews conducted between 1994 and 2005 were included in this study. They form the background and motivation for this study. The interviewees include two school teachers, a bread winner, a learner and a parent.

- In-depth qualitative interviews using open-response questions (McMillan & Schumacher 2001:42, 443; Johnson & Christensen 2004:183) as well as an interview guide approach and structured interviews were used (Johnson & Christensen 2004:183-184).

- Informal conversation interviews were conducted where respondents did not have a great deal of background knowledge of the topic, but were

directly or indirectly affected by the impact of HIV/AIDS (McMillan & Schumacher 2001: 443; Johnson & Christensen 2004:183).

- Personal documents were collected from two respondents (McMillan & Schumacher 2001:451; Johnson & Christensen 2004:192).

The interviews were conducted to ascertain the views and feelings of the respondents on the situation. The interviews were conducted using a set of questions, based on the problem statement and aimed at gauging the extent of the problem faced by the respondents. Two respondents included a written paper as well explaining how they experienced the problem emotionally.

A survey questionnaire (McMillan & Schumacher 2001: 455) was handed out to willing respondents who were not interviewed in-depth. This survey questionnaire was also handed to those respondents prepared to complete it in addition to an in-depth interview. No quantitative or statistical instruments were used to evaluate results. Answers were evaluated as a survey instrument only and used to investigate the broader extent of the research problem.

Five schools in the Tswane area, two in Ekuruleni and one in the East Cape areas were used for interviews. Learners were only interviewed with parental consent. Two learners were interviewed, one in a preliminary interview in Tswane and one in Ekuruleni. Nine university students were asked to participate; they asked to complete questionnaires rather than have personal interviews, and only four questionnaires were returned. One post-graduate student from the East Cape participated in the study. Of the five Tswane schools, one secondary school fell out of the study. These in-depth personal interviews were conducted with fourteen different role players namely:

1. Interviews with two school principals:
  - Township school, and
  - Farm school.
2. Interviews with two deputy principals:
  - City school, and
  - Rural school.
3. Interviews with four heads of department:
  - City school,
  - City school,
  - Township school, and
  - City school.

4. Interview with a school psychologist.
5. Interview with a school health-care worker.
6. Informal interviews:
  - Caregiver to AIDS orphan, and
  - Grandparent and caregiver to two AIDS orphans.
7. Interview with a HIV-positive mother of three dependent children.
8. Interviews with a post graduate student.
9. Interview with a learner

Schools included in the survey serve communities from lower, average and high-income groups. The schools comprised:

- One special school (combined primary and secondary),
- Three secondary schools,
- Two primary schools and
- One farm school.

These schools are representative of a wide spectrum of the South African population.

- Field observations were done at all the schools where interviews were conducted and also at schools for which access could not be obtained (McMillan & Schumacher 2001: 454; Bogden & Biklen 1994:79). An intrinsic case study and longitudinal observation (McMillan & Schumacher 2001:36-37; Johnson & Christensen 2004:344, 376-378) of an HIV/AIDS-affected family and the emotional disruption experienced by different family members, namely the mother, of an elder daughter who is HIV-positive and her three children was undertaken. Observations were also done of the secondary impact of HIV/AIDS on the younger daughter (the HIV-positive daughter's younger sister) and her two children.

- A number of artefacts (McMillan & Schumacher 2001:451) were included to substantiate findings of the study. These comprise two personal documents and five relevant recent newspaper reports.

### **Selection of participants**

The selection of respondents for in-depth and structured interviews were done after deciding what attributes or profile of persons would have the necessary knowledge or experience of the research topic. Five schools in the

Tswane area, two in Ekuruleni and one in the East Cape areas were selected for interviews. The schools were chosen on the presumption that they may provide information rich interviewees (purposeful sampling, in McMillan & Schumacher 2001:401). Having established the initial sites for interviews the researcher elected to use network (snowball) sampling, (McMillan & Schumacher 2001:403; Johnson & Christensen 2004:216). Each respondent referred the researcher to the next possible respondent, who was followed up and interviewed if suitable until the research was completed. Where the opportunity arose to obtain valuable information the researcher resorted to opportunistic sampling (Johnson & Christensen 2004:222).

### **Data analysis**

Interviews were taken down verbatim, and notes checked with interviewees to ensure accuracy. Questionnaires were carefully analysed and findings noted and collated on Excel-spreadsheets, no quantitative instruments were applied to the questionnaires. All findings from the literature study, questionnaires and interviews were carefully analysed and compared to look for emerging trends from these.

Analyses of the data revealed the following trends:

### **Findings from the literature study:**

#### **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**

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.

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

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

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 serious problems, because they prevent the effective functioning of affected individuals and has repercussions in aspects such as curriculum coverage and academic achievement of the school.

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.

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.

- **Teachers**

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. Moreover, 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%.. 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. Also, 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.

Absent teachers and administration staff needs replacement and moral support. Morbidity on the job decreases performance standards due to stress and depression.

- **Learners**

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 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. 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.

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. 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.

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.

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. 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.

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. The worst affected group [14-49 years old] includes teachers, learners, and teacher

training students as well as educational managers. 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. 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.

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.

## **Orphans**

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. 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.

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

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. 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.

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 positive school morale, which is conducive to quality teaching, learner achievement and good discipline. 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.

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.

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. 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.

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. Learners become discouraged and distressed and fail their courses. The research shows a definite correlation between good management and teaching outcomes. Successful classroom and management and control form the basis of good school management and highlight the importance of the principal's leadership role as school manager. 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 absenteeism 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.

The self-actualization of both teachers and learners is undermined by constant disruptions and disturbances. 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. Moreover, 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. The disciplinary problems in schools affect school management and self-actualization of teachers and learners negatively.

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. 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.

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.

### **Emerging trends found in the results of the questionnaire and interviews and artefacts:**

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

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. Respondents from the questionnaire and interviews were in agreement on this.

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.

According to the findings of the questionnaire and also some interviews, the life skills program helped teach learners responsible sexual behaviour and have made them aware of the dangers of substance abuse. This finding in the questionnaire contrasts to findings in the literature and other 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. The negative findings regarding life skills programmes were predominantly from more conservative city schools, in contrast to the general consensus found in township schools.

A number of the schools visited reported that they have good support systems available for teachers and learners with social and other problems. Some students and learners however dispute this.

Indications are that increased rates of school dropout could be related to HIV/AIDS, and that emotionally disrupted learners increase disciplinary problems in schools. Even schools with overall good management and strict supervision have problems with discipline. However, 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. Respondents also felt that good discipline invoked by strong leadership of the principal improved the academic achievement of schools, this was confirmed in the findings of the literature study.

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.

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.

There is a marked difference in the impact of HIV/AIDS on different schools, depending on the community where each school is situated. 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. 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. This confirms the findings in the literature study.

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, particularly from township schools. More conservative city schools felt that explicit sex education is not suitable for classroom instruction. A good number of the respondents indicate that they would rather not engage in premarital sex, this is in contrast to the findings of the literature study which pointed to risky sexual practices, particularly among younger teenage learners.

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. And a number 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. 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.

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

## **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.

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