

CHAPTER 1

BACKGROUND, PROBLEM FORMULATION AND AIMS

1.1 GENERAL BACKGROUND

In the third millennium it is regrettable that humanity which has acquired such high levels of technical ability and seems in control of much of its destiny, is faced with perhaps the greatest threat ever to its survival. This threat comes in the form of HIV/AIDS. According to Evian (1993:3), HIV stands for the Human Immunodeficiency Virus. The virus survives and multiplies in body fluids and attacks the immune system, eventually weakening the body's ability to fight against illness at which point opportunistic infections occur (Norton & Dawson 2000:iv). AIDS stands for Acquired Immune-Deficiency Syndrom. According to Whiteside and Sunter 2000:1, it is a communicable disease caused by HIV and is the final stage of HIV. The origin of the virus is unknown. It was first identified among homosexuals and intravenous drug users in the United States in the mid 1980's (Shorter & Onyancha 1998:16; Evian 1993:3). Since then more and more heterosexual people throughout the world have been identified with the virus. Researchers concluded that the epidemic is spread through unsafe sexual relations, infected mother to child transmission, scarification, circumcision (using the same razor) and infected blood in blood transfusions (Whiteside & Sunter 2000:11; Louw, Edwards & Orr 2001:4). To date no cure or vaccine has been found to the virus.

According to United Nations statistics, more than 60 million people have become infected since the discovery of HIV/AIDS and more than 20 million have since died. 28,1 million of infected people are in the Sub-Saharan region of Africa (Shisana & Simbaya 2002:1). In his speech on World AIDS day, December 1, 2003, the Secretary General of the United Nations, Kofi Annan said that the United Nations would need \$10 billion a year to fight AIDS globally. Men, women and children are experiencing the disease all over the world, either because they are infected or affected (Whiteside & Sunter 2002:3).

Thus, more is being written on this topic than on any other disease in the history of mankind (Ruzindaza 2001:7). Despite advances made in knowledge about HIV/AIDS the disease continues to spread. Granite and Mermin (1991:1) postulate that while there are thousands of scientific books and articles about HIV/AIDS, their terminology is often obscure and the discussion not relevant to the developing world which is the most severely affected. The terminology used in explaining the disease is scientific and presents a problem even for the literate. Therefore, a need arises for more information about HIV/AIDS that is relevant to the lives of ordinary people. Due to these factors it is necessary to address the issue of the management of HIV/AIDS awareness programmes, particularly in secondary schools in the North West Province, South Africa.

1.2 HIV/AIDS IN SOUTH AFRICA

South Africa is experiencing the fastest growth of the HIV/AIDS epidemic in the world (Whiteside & Sunter 2002:58; Louw et al 2001:3; Sindle & Welsh 2001:25). This will invariably change every facet of our lives over the next decade. In 2002 the UN AIDS and World Health Organisation (WHO) estimated that there were 5,3 million people living with HIV/AIDS in South Africa. Most of these are women, adolescents and children. Norton and Dawson (2000:iv) add that the highest rate of infection is among people in the 20-24 age group.

HIV/AIDS presents a complex interplay of psychological, social and economic challenges to South African society. According to the HIV/AIDS government strategic plan (2000:10), the impact of the epidemic is made worse by such socio-economic factors as poverty, crime, gang violence and child and women abuse. In view of this, the disease has become a public health and education issue. Thus, health and education have become inseparably linked (The National Conference of HIV/AIDS 2002:3).

Louw et al (2001:31) aver that the main cause of death in South Africa is AIDS. Moreover, this affects the economically active sector of the population. This results in large losses in production in the labour force (Shorter & Onyanha 1998:23; Slatery 2003:17). An added

problem is that funeral costs have to be borne by many South African families which further drain family savings and raise the spectre of absolute poverty (Shorter & Onyancha 1998:23). Researchers predict that the HIV/AIDS epidemic in South Africa will increase and reach a plateau between the years 2005 and 2010 (Burger 1999:414).

1.3 GOVERNMENT STRATEGIC PLAN FOR THE HIV/AIDS PANDEMIC

1.3.1 Strategic plans

South Africa has had HIV/AIDS strategies in place since 1994 (Coombe 2000:21). These include:

1. The South African Strategy and Implementation Plan endorsed by the Cabinet in 1994. The costed plan was comprehensive and practical, designed to prevent the spread of HIV/AIDS, to reduce the impact of HIV/AIDS and to harness existing and potential resources. It viewed the epidemic as both a family-health and education issue. By 1998 administrative structures were in place at national and provincial levels. A HIV/AIDS coordinator was appointed in each province to develop, implement and monitor national HIV/AIDS programmes (Coombe 2000:26).
2. The HIV/AIDS/STD (Sexually Transmitted Diseases) Strategic plan for South Africa 2000-2005 was announced by the Minister of Health in 2000. The document is intended to be a broad national strategic plan to guide the country's responses as a whole to the epidemic.
3. National Integrated Plan for Children Infected and Affected by HIV/AIDS. This was also put on the table in 2000 (Coombe 2000:22). It is designed to strengthen the teaching of life-skills in primary and secondary schools, to develop strategies for caring of orphans and people living with HIV/AIDS and to find ways of making voluntary testing and counselling available.

In addition to the above, the government is translating publications dealing with HIV/AIDS into nearly all the official languages of South Africa, to bring the reality of the disease to all

the people. Even so, the number of infected people rises daily. Above all, it seems as if the government has thus far been unable to develop effective strategies to fight the disease (Bate 2003:x).

1.3.2 Provision of anti-retroviral drugs

The transmission of the HIV from mother to child has been reported on widely by the media. Where mothers receive no treatment, the mother to child transmission is approximately 20 percent. With anti-retroviral drugs the transmission is approximately 10 percent (Ziehl 2002:429). However, to receive anti-retroviral drugs, the pregnant mother must be willing to be tested, deal with her HIV-status, use the drugs as prescribed and may be advised not to breast-feed her baby. Many women argue that this could make her HIV-status known to the community, a consequence some women are unwilling to accept.

Anti-retroviral drugs are now also being provided to sufferers with a high viral count. Although still not available in all hospitals in the country, it has offered new hope to many infected South Africans.

In partnership with the government, Non-government Organisations (NGO), religious leaders, the media and traditional and cultural leaders are beginning to work together to combat the epidemic. However, the results of these efforts have not yet been sufficient and have yet to fully address the HIV/AIDS pandemic (South African Strategic Plan 2000:2).

1.4 THE MANAGEMENT OF HIV/AIDS IN EDUCATION

The HIV/AIDS pandemic presents a great challenge to education in South Africa. Educators are increasingly coming into contact with infected or affected learners in the classroom. Adding to this, the number of children orphaned as a result of the disease is increasing in schools. Because of this, educators need to be trained to deal with these learners whose lives are traumatised by HIV/AIDS in the classroom (Louw et al 2001:1).

HIV/AIDS also disrupts learning and teaching. The number of learners who are absent from school is increasing every day. This is due to the fact that learners are sick themselves or are looking after their younger siblings whose parents have died of AIDS (Barnett & Whiteside 2002:204). An additional problem is that many learners in South African schools are sexually active at a younger age, while some are experimenting with drugs which increase their chances of being infected (Tutorial letter 103/2000:4).

In the light of the seriousness of the problem, the South African Government has been forced to act. The Ministry of Education produced two policy documents on HIV/AIDS. The first is titled: *The National Policy on HIV/AIDS for Educators and learners in public schools and students and educators in further education and training institutions*. The second is *The HIV/AIDS emergency. Department of Education guidelines for educators*. These policy documents seek to contribute towards promoting effective HIV/AIDS awareness programmes in the context of the public education system.

The Department of Education is integrating HIV/AIDS awareness programmes into the curriculum of the national education system. This hopefully will filter down to the regional and local areas. These programmes were intended for implementation from 2000 to 2005. The topics revolve around HIV/AIDS and learners, educators, school communities and the workplace. The Department of Education has determined that HIV/AIDS awareness is to be included in the life-skills programme. Life-skills programmes were introduced in schools to empower learners to live healthy lives (Ainsa 2002:8; Norton & Dawson 2000:99). The issue of HIV/AIDS fits in well within this learning area.

Educators involved in the life-skills programmes are trained during in-service workshops so that they are knowledgeable on the issue of HIV/AIDS, can teach learners and are able to counsel and support learners affected by HIV/AIDS. Schools are also provided with two first aid kits containing latex gloves and other material to implement universal precautions in preventing contact with blood (RSA 1999:18).

In spite of what the government has begun to do, much more needs to be done and mismanagement of the awareness programmes could be contributing to the fact that many young people are still being infected by the virus (The Star 2004:7).

1.5 THE SITUATION IN THE NORTH WEST PROVINCE

The North West Province (NWP) is one of the nine provinces of South Africa and has a population of 3,4 million people. The province is completely land locked. The main languages spoken are Setswana, Afrikaans and Isixhosa (Burger 1999:12). The NWP borders are on the Republic of Botswana and there is much interaction between the province and Botswana. During the apartheid era, parts of the NWP were included in the homeland known as the Republic of Bophuthatswana.

Different kinds of settlements are found in the area, in which the study is conducted. There are the large urban areas of the big cities like Rustenburg. There are also many mine communities and the informal settlements that have grown around the mines. Then there are the rural villages and small farm communities. These villages still have effective traditional structures. They have a chief called *Kgosi*, who is assisted by the councillors *Dikgosana* and some of the elders of the villages (De Liefde 2003:55). The schools included in this study are situated in either traditional villages or mine settlements. Most of the learners come from the unstructured informal settlements.

The population of the villages around the platinum mines is impoverished. There are many single parents who work in towns and who only come home at the end of the month. The children are often left on their own for long periods or they stay with their grandparents (Kgaffe 2001:5). Profound poverty in this area often leads to the spread of HIV/AIDS as the children are forced to have sex with the miners in exchange for money to buy food for their younger siblings (Barnett & Whiteside 2002:203). There are many day care centres in these areas which were established by Church Organisations to look after orphans (Byamugisha et al 2002:97; Hampton 1999:12).

1.6 CLARIFICATION OF TERMS

1.6.1 HIV

HIV stands for Human Immunodeficiency Virus. In order to enter the body, the virus needs to bind to specific target cells with receptors called CD4 receptors. These receptors are plentiful in the lining of the genital track and the ano-rectal area (Evian 2000:13). The virus is present in the blood of an infected person. A pregnant mother, who is infected with HIV, can pass on the virus to her infant during pregnancy, childbirth and breastfeeding (Evian 2000:14-15). The HIV enters and destroys important cells which control and support the person's immune system, thus making the person susceptible to many infections and some cancers (Whiteside & Sunter 2000:1). Measuring the CD4 is currently considered the best indicator of a person's immunodeficiency and is used to monitor the immune status of a person and the stage of the infection (Evian 2000:26).

1.6.2 AIDS

AIDS stands for Acquired Immunodeficiency Syndrome. A person is described as having AIDS when the HIV-related immune-deficiency is so severe that various life-threatening opportunistic infections and/or cancers occur (Evian 2000:8). A diagnosis of AIDS is usually made if the patient is HIV positive and has a CD4 count of 200cells/mm³ or less (Evian 2000:103).

1.6.3 Anti-retroviral drugs

The purpose of anti-retroviral therapy is to inhibit and suppress HIV activity and replication, which will help to prevent immune damage. This will prevent disease progression and promote ongoing wellness and health (Evian 2000:59).

Management

The Oxford advanced learners dictionary (1991:756) describes management as control, or skills in dealing with people and things. Van der Westhuizen (1999:2) sees management as planning, organising and controlling. Bush and West-Burnham (1994:11) are of the opinion that management refers to “how” issues are controlled. Field (1993:56) argues that management is related to things, equipments and peoples. In this study, management refers to the management of HIV/AIDS awareness programmes in schools.

Awareness

Awareness can be described as a means of making people observe what is happening around them, to notice things. Awareness can also be seen as having knowledge (Oxford 1991:70).

1.7 PROBLEM FORMULATION

The education system is being used to increase the awareness of young people to the dangerous HIV/AIDS thereby decreasing the spread of the disease within this age-group. In order to fulfil this task the education system has included several programmes in the curriculum, the most important of which is the life-skills. The success of the programme is, however, inter alia, dependent on the training of the educators who are tasked with presenting the programme. Likewise, these programmes need to be managed effectively.

Against the above background a need exists to determine how HIV/AIDS awareness programmes are being managed in secondary schools in the North West Province, with a view to addressing some of the problems found in schools.

The following questions facilitate the demarcation of the problem more clearly.

1. What is the extent and effect of HIV/AIDS in South Africa, particularly as this relates to education?

2. What are the policies of the Department of Education regarding HIV/AIDS awareness programmes?
3. How are HIV/AIDS awareness programmes managed in secondary schools in the North West Province?
4. How can the results of the research be used to improve the management of HIV/AIDS awareness programmes in secondary schools in the North West Province?

1.8 AIMS OF RESEARCH

In view of the above research problem the following objectives for the research may be identified:

1. To present a thorough investigation of the extent and effects of HIV/AIDS in South Africa, particularly as this relates to schools.
2. To investigate the strategies devised by the Department of Education to make learners more aware of the HIV/AIDS problem.
3. To determine how the HIV/AIDS awareness programmes are being managed in secondary schools in the North West Province.
4. To recommend ways in which the findings can contribute towards improving the management of HIV/AIDS awareness programmes in secondary schools in the North West Province.

1.9 RESEARCH METHODOLOGY

In order to determine the extent of HIV/AIDS in South Africa and the effect thereof on education, a literature study of overseas and local sources will be undertaken. Journals, articles and government policy documents are used to determine the ways in which the Department of Education is dealing with the problem.

A qualitative methodology is used to determine the experiences and perceptions of educators and learners of the HIV/AIDS awareness programmes and how these are being managed in secondary schools in the North West Province.

1.9.1 The use of qualitative approach

The methodology to be used in this research is qualitative research. Qualitative research studies events in their own natural settings (McMillan & Schumacher 1993:15). Qualitative research therefore aims to produce ideas and theories from data collected from participants in an effort to avoid imposing the previous frame of reference on the researcher's study (Vulliamy, Lewin & Stephens 1990:11). The research methodology and research design will be discussed in detail in Chapter 3.

The research was conducted in three secondary schools in the North West Province. The schools were chosen using purposive sampling. This means that the researcher uses his/her own judgement about which respondents to choose and picks only those who best meet the purpose of the study (Baily 1982:94).

The principals from the three different schools were interviewed using semi-structured interviews which Bailey (1982:188) describes as questions written in advance and the interviewer assign only the topic. The principals were able to inform the researcher about the management of HIV/AIDS programmes during these interviews. In addition three educators from each of the three schools were interviewed and asked to discuss how HIV/AIDS awareness programmes are being offered at their schools. In this case, focus group interviews were used. Thus, a total of nine educators were included in this study.

In order to determine the experiences and perceptions of learners, Grade ten learners in one school were asked to write an essay on their understanding of HIV/AIDS. This allowed learners to express their feelings on HIV/AIDS in a manner which protects their identities. Sixty four Grade ten learners participated in this part of the research.

All interviews with principals and those with educators were audio-taped and later transcribed for closer examination. The content of the essays reflected the views expressed by learners and formed part of the data. The data were analysed by coding it and sorting it into categories (McMillan & Schumacher 1993:481).

1.10 CHAPTER DIVISION

The study can be divided into five distinctive components.

Chapter 2. This chapter deals with HIV/AIDS in South Africa and the impact thereof on education. It also looks at the management role of the principal and educators as this relates to informing learners on this pandemic.

Chapter 3. This chapter features a further discussion of the methodology used to investigate the management of HIV/AIDS in secondary schools in the North West Province. Both the reasons for and the choice and use of qualitative methodology are included. Data collecting strategies and the analysis of the data are described.

Chapter 4. This chapter discusses the findings of the research and includes the perceptions and experiences of principals, educators and learners of the HIV/AIDS awareness programmes in secondary schools in the North West Province.

Chapter 5. This chapter provides a summary of the study as well as conclusion and recommendations on how the data can be used to improve the management of HIV/AIDS awareness programmes.

1.11 SUMMARY

HIV/AIDS is increasing at an alarming rate especially among the youth of South Africa. Educators are coming in contact with infected and affected learners in their classrooms. A need has arisen to train educators to cope with this situation. Likewise, learners need to be

informed about the pandemic. In response to this, the Department of Education is introducing HIV/AIDS awareness programmes in the schools' curriculum to educate learners. However, many problems prevent these programmes from being fully effective. Thus, it is vital that an effective way be provided to manage the HIV/AIDS awareness programmes in schools.