

Teachers' Views on the Implementation of HIV/AIDS in Schools: A Case Study of Four High Schools in the Fort Beaufort Education District, Eastern Cape, South Africa

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ABSTRACT The study examined teachers' views on the implementation of the HIV/AIDS policy in high schools. The study adopted a qualitative approach that utilised the interpretive paradigm and case study design. Twelve teachers, and four principals purposively selected from four schools were the participants. Data were collected through semi-structured interviews and document reviews. The study established that many teachers think that the implementation of HIV/AIDS policy in schools is flawed rendering a lack of competence as well as commitment on the part of teachers. Teachers also felt the need for a collaboration between different stakeholders as this avoid contradictions in the implementation of the policy. Major recommendations were that there should be seminars and workshops that equip teachers with the knowledge of HIV/AIDS policy. In addition, teachers need support from various stakeholders in the implementation of the HIV/AIDS policy in schools.

INTRODUCTION

This study examined teachers' views on the implementation of the HIV/AIDS policy in high schools. It is critical to conduct such a study given that the policy was put in place to minimise the prevalence of HIV/AIDS in schools. If teachers are not committed to its implementation as some literature indicates (Parag 2009), it means that the high sexual debuts often reported in literature (Mushoriwa 2013) regarding this age group continue to have a serious toll on the lives and education of these youth. A study of this nature therefore takes lofty significance if considered in the context of efforts to impart HIV/AIDS knowledge to these youth and reduce infection rates. Unchecked, HIV/AIDS may continue to reduce the hard-won returns on investment in education.

The present study partly derived its motivation from the premise that combating the spread of HIV/AIDS relies in part on the correct implementation of prevention policies at national, local and school level. From observation, it would appear that HIV/AIDS is affecting many school-children and will continue to have an enormous impact in South African schools. Given this dimension, the prevention of pandemic among the youth, and in particular the school-going age is

critical and teachers have an invaluable role to play in this.

Literature Review

After observing that the HIV/AIDS pandemic affected the supply, demand and quality of education, the South African Government responded to the HIV/AIDS challenge by introducing a policy and programs, which are implemented through the Department of Education (DoE). The DoE (2000) sees its responsibility as that of minimising the developmental effects of HIV/AIDS to the education system as well as providing leadership in the implementation of the HIV/AIDS policy. Schools are required to come up with their HIV/AIDS policy based on the South African Education Sector Policy on HIV/AIDS. In turn, teachers are expected not only to understand the policy but also to effectively implement it. This policy acts as a guideline for the prevention, care and support needed for infected and affected learners, educators and parents. In short, the policy aims to, among other things, minimise the spread of HIV/AIDS, demystify HIV/AIDS, allay fears, reduce stigma and discrimination and to develop knowledge, skills, attitudes and behaviour change necessary to protect individuals from HIV/AIDS infection.

For O'Grady (2000), HIV/AIDS awareness programs that focus on the delay of sexual activity and on behavioural change towards safe sexual practices are priorities and they remain the only means of primary prevention. The DoE (2000) says that teachers, through the HIV/AIDS policy in their schools, should make a valuable contribution in this regard. School principals are thus required to set up an HIV/AIDS policy for their schools and maintain adequate standards of health and safety in their schools.

Steyn and Mfusi (2016) have shown that many teachers lack competence and commitment to the implementation of the HIV/AIDS policy. For Besset and Swainson (2008), this is caused by lack of teacher involvement in policy formulation. Teachers should thus be seen as an important stakeholder in the crafting of policies and in the eventual implementation of the policies.

Epstein's theory of overlapping sphere of influence, a theory that underpins the present study, emphasises the co-operation, communication, collaboration and complementarity of schools and their teachers, families and all other stakeholders if policies are to be implemented successfully. HIV/AIDS is a major crisis for educators, learners, communities and the Government; hence, it requires all the role players to jointly work together to address it.

Boler (2003) conducted a study on HIV/AIDS implementation and reception in Kenya and discovered that ninety percent of the teachers were not involved in the crafting of the HIV/AIDS policies, yet they had the responsibility to teach HIV/AIDS content. This resulted in many of them lacking the necessary competence to teach the content. A similar and more recent study conducted in Zimbabwean secondary schools by Mugweni et al. (2014) focused on teachers' understanding and conceptualisation of the HIV/AIDS policy. The findings revealed that there was a gap between policy and practice, curriculum requirements and teacher understanding and conceptualising of the HIV/AIDS policy due to lack of policy documents. This affected how the policy was implemented. If the policy is not well-implemented well, then attempts to curb the spread of HIV/AIDS among the youth is compromised. This is perhaps why, Nzoka (2006) says that exposing teachers to a greater understanding of the policy adoption and implementation can help them better understand the content and why it should be taught.

For the World Bank (2002), education offered in schools is a key defence against the spread of HIV/AIDS, especially through the empowerment of youth by imparting to them, relevant knowledge, attitudes, skills and appropriate sexual behaviour. Parag (2009) points out that implementing school HIV/AIDS programs has been proven the only source of accurate information that educators, learners and communities have about HIV/AIDS.

What is observed is that the education sector, through its teachers and other educators, has a crucial role to play in terms of delivery of effective HIV/AIDS prevention and awareness education programs. To this effect, teachers' views on how HIV/AIDS policies are implemented in schools become critical given that the views teachers have may block or facilitate the implementation of the policies. It is against this backdrop that the present study set out to examine teachers' views on the implementation of HIV/AIDS in high schools with the ultimate aim of finding ways of improving the implementation of the policies for the benefit of all stakeholders.

Objectives of the Study

- ◆ The main objective of the study was to examine teachers' views on the implementation of the HIV/AIDS policy in schools with the ultimate aim of improving the implementation of the policy.

Secondary objectives were to:

- ◆ Identify, from a teacher's perspective, how the HIV/AIDS policy should be implemented.
- ◆ Examine, from a teacher's view, the challenges and constraints that teachers and schools are facing in implementing the HIV/AIDS policy and programs in schools.
- ◆ Establish what teachers think should be done to improve the implementation of the HIV/AIDS policy in schools.

METHODOLOGY

Research Paradigm

For the reason that the research is qualitative and interactive, the interpretive paradigm, which allowed the researchers to interact with the participants within their natural settings, was adopted. The paradigm gave the researchers an opportunity to probe and question the teachers

about their views and concerns regarding the implementation of the HIV/AIDS policies.

Research Approach

The study was qualitative. This approach was chosen because it allowed the researchers to collect rich and in-depth information from the participants. Participants were free to express their views which the researchers quoted verbatim. The approach thus allowed thick descriptions of the teachers' views regarding the implementation of HIV/AIDS policies in schools.

Research Design

A case study design was adopted for this study. This design was appropriate for this study because it allowed rich and thick description of the phenomena under study. Case studies are also advantageous in that they allow the researcher to quote participants verbatim (Yin 2003), as was the case in this study. This helps to increase the accuracy and therefore trustworthiness of the data collected.

Participants

Participants were 12 teachers purposively selected from the two high schools. Six teachers (3 males; 3 females) were pooled from each of the two schools. The researchers purposively selected teachers who were considered information-rich regarding the research topic.

Instruments

Semi-structured interviews and policy documents were the instruments used to source data in this study. The use of semi-structured interviews allowed the researchers to discover, through conversations, how teachers think and feel about the implementation of HIV/AIDS policies in schools in some depth. Policy documents, which were analysed by the researchers, helped them to see how teachers understand and interpret the HIV/AIDS policy and how they eventually implement it. Thus, instead of solely relying on what the teachers said, the triangulation of these two methods of data collection helped to avoid the pitfalls of one method and this helped to achieve objectivity, data credibility and trustworthiness.

RESULTS AND DISCUSSION

Data generated from the interviews and document reviews/analysis were categorised into themes and analysed accordingly. Three main themes were generated. The first theme was on whether the HIV/AIDS policy existed and/or was visible in schools. The second theme focused on what teachers felt were the successes and challenges in implementing the HIV/AIDS policy. The third theme was on what teachers felt could be done to improve the implementation of the HIV/AIDS policy.

Regarding the first theme, teachers were asked to indicate whether there was HIV/AIDS policy in their schools. The majority of the teachers indicated that they had HIV/AIDS policy in their schools. Only two teachers claimed that they did not have any knowledge about the existence of such a policy in their schools. Consultations with the principals of the two schools represented by the two teachers who professed ignorance about the existence of the HIV/AIDS policy in their schools actually revealed that the schools did have the policy but not all teachers knew the policy. This suggests that the policies in these schools were not being implemented to the fullest. Given that the National Education Policy Act (Act 27 of 1996) on HIV/AIDS says that teachers should protect the rights of learners and provide learners with care and counselling, one wonders how much learners in those two teachers' classes lose in the final analysis. If the teachers themselves do not even know that there is such a policy in their schools, it means that the pupils too know nothing about this policy. One is tempted to agree with Visser (2005) who argues that lack of information on HIV/AIDS policy is a result of, in most cases, inefficiencies in the school leadership.

Although the majority of teachers indicated that there was an HIV/AIDS policy in their schools, many of them admitted that there were challenges regarding the implementation of this policy. One teacher commented:

I am aware of the availability of an HIV/AIDS policy in my school although I am not aware of how it is being implemented. It is not clear who should implement it. Furthermore, most of us do not understand both the content and how to teach it.

The sentiments expressed here indicate that the HIV/AIDS policy has obstacles that have to

do with the training of teachers and the content of the curriculum. While some teachers felt that they were shy to teach content to do with sexual matters, others said that they did not have proper knowledge of HIV/AIDS. One principal said:

Some of these teachers are shy to handle some topics to do with sexual matters. They are parents as well, sometimes with a child in that class. You know our culture, parents are not free to discuss such issues with their children. In most cases, the teachers leave out some topics they are not comfortable to handle. Certainly this negatively affects the implementation of the policy.

The above suggests that teachers were not capacitated to deliver HIV/AIDS education. They face snags and limitations, which are occasioned by culture. Some parents too, tend to oppose the teaching of HIV/AIDS to their children, either on religious grounds or on traditional beliefs where issues to do with sex are regarded as taboo.

The second theme focused on the successes/effectiveness of the current HIV/AIDS policy in meeting learners' needs; as seen by these secondary schools teachers. One teacher commented:

The fact that some teachers do not even know about the existence of the policy yet they are the ones to implement it suggests that it is not widely and effectively implemented.

Visser (2005) claims that all involved should know a well-implemented policy. For Visser, as already seen, lack of information on the HIV/AIDS policy is due to inefficiencies in the school leadership, which in fact, cripples the ability of the policy to make any meaningful change in the academic life of both learners and educators. This view is in line with Esau (2010) who claims that HIV/AIDS policies are on the silent mode in many schools. One of the teachers who strongly felt that the HIV/AIDS policy was not effectively implemented in schools said:

There is still a gap as far as the HIV/AIDS policy was implemented in schools. It requires those in administrative posts to strategise and bring in professionals such as school counsellors who can effectively implement the policy for the benefit of learners, educators and the community. Such an initiative will see increased participation from teachers and learners.

Such sentiments suggest that teachers generally think that currently the HIV/AIDS policy was not effectively implemented in schools. For

Kwakman (2003), many schools in South Africa will continue to lag behind in policy implementation and educators are the main reason for this lagging behind. Esau (2010) points out that there are a variety of gaps in the implementation of the HIV/AIDS policy in many South African schools. Many teachers reported a positive development regarding learners' knowledge and awareness of HIV/AIDS, but translating this knowledge into practice was very problematic for many learners and educators themselves. One teacher said:

As educators, we are failing to be exemplary in our sexual behaviour; many teachers promote unhealthy sexual behaviour by what they do and how they behave here at school and in society. Once we have such a situation, schools will hardly succeed in their efforts to implement the HIV/AIDS policy. As educators, our role is to act as role models so that everybody learns from us

Interview data also revealed that many teachers, apart from lacking the necessary knowledge and skills to implement HIV/AIDS, felt that they did not get adequate and enough support from many stakeholders such as parents, principals, DoE, sister ministries such as Health, Social Development etc. One teacher said:

Given that we are inexperienced and not trained to implement the HIV/AIDS policy, we certainly need the support of many stakeholders. Now, it seems that there is very limited support, which teachers are getting. People just make decisions and leave things to teachers to do everything. This is unfair; successful policy implementation should be a combined effort of all concerned.

Parag (2009) who argued that although HIV/AIDS education is the vehicle to changing learners' attitudes and mind-set expressed similar sentiments concerning HIV/AIDS, the external environment, which includes parents and the community, needs to be active in improving learners' understanding. For Parag, models also play a critical role in changing learners' attitudes and behaviour. Although offering support to teachers may be a complex task; principals, specialists such as psychologists and counsellors and superiors in the DoE should take a supervisory role. This is critical in stretching a hand of support to teachers in schools. A study conducted in South Africa by Ayo-Yusuf et al. (2011) indicated the need for the DoE to set rules, regula-

tions and goals for schools and their teachers in the implementation of the HIV/AIDS policy. Without setting these goals, HIV/AIDS policies may remain on the silent mode (Esau 2010) yet schools have been marked as structures and windows of hope in our fight against the pandemic (World Bank 2002) that can provide timely and effective preventive efforts to the school-going age. According to a study conducted among South African teachers by Mostert and Ocholla (2005), the majority of teachers felt much work still needs to be done to ensure optimal implementation of the HIV/AIDS policy in both primary and secondary schools. Although Mostert and Ocholla's study was conducted about ten years ago, results from the present study still point to the need for more work to be done to ensure successful implementation of the HIV/AIDS policy in our schools.

It would appear that although most teachers in South Africa have received the HIV/AIDS policy and guidelines, a wide gap still exists between the policy and the implementation. For instance, teachers from one hundred and twenty-eight schools in the Free State were surveyed and found to have received the National HIV/AIDS policy documents; yet none of these schools has fully implemented the guidelines provided in the policy document. This suggests that generally teachers have a dearth in skills, knowledge and proper attitudes necessary to meaningfully, effectively and efficiently implement HIV/AIDS policies in schools. A study by Mosia (2011) has shown that teachers with positive attitudes made an effort to implement HIV/AIDS policies while those with negative perceptions showed reluctance to implement these policies. All this points to the fact that many teachers still need help and support if they are to fully implement HIV/AIDS policies in schools. Support mechanisms such as workshops and training seminars would go a long way in helping teachers to implement the policies successfully.

It would appear that the quality of teacher training, both pre-service and in-service, is key to any policy implementation. For any policy venture to succeed, the teachers involved must understand and accept the ideas contained in the new policy being proposed or implemented. The teachers must eventually look at the policy development and implementation as their own and not as something imposed from outside. For Angleton and Warwick (2002), it is wrong to sim-

ply assume that teachers know and are prepared to implement HIV/AIDS policies. Singh (2003) also observed that many teachers were reluctant to teach HIV/AIDS content due to lack of uniform content in schools given that in South Africa, each school is expected to come up with its own policy. Given this dimension, perhaps teacher support in the form of training workshops, as already seen, are necessary. One teacher commented:

Lack of clarity and interpretation of HIV/AIDS policies due to poor information dissemination is a serious hindrance to the successful implementation of the policy, given that teachers lack enough background in the area. If teachers are well trained, they will become sources of correct information and trusted persons with whom learners can raise sensitive and complicated issues about HIV/AIDS and sexuality in general.

The last theme concerned what teachers thought would be the best strategies for implementing HIV/AIDS policies in schools. Enayati et al. (2012) argue that lack of strategies to enhance the implementation of policies has caused many teachers to have problems not only in teaching HIV/AIDS education but also in implementing the policies. For this reason, the present study felt it important to explore what teachers in the present study thought would be the best strategies for implementing HIV/AIDS policies in schools.

Interview data revealed that many teachers felt that collaborating with private sector organisations, the government and the community can play a pivotal role in the understanding and implementation of HIV/AIDS policies. These stakeholders can assist by launching awareness campaigns and by funding HIV/AIDS programs for learners in schools. Such fostered collaboration may result in the participation of all stakeholders and this provides richer efforts to fight the pandemic. Ogina (2003) encourages networking where parents can take a leading role in addressing sex and HIV/AIDS education in schools. Ogina stressed the need for schools to partner with parents in the fight against the pandemic and in the implementation of HIV/AIDS policies, warns that failure by parents to participate and provide relevant information about sex and HIV/AIDS education to their children, the peer group will provide it in a wrong way. Ogina finally advises that the school principal should ensure

that educators who attend workshops and seminars update and share the knowledge obtained with colleagues, parents and the community so that through this collaboration, everybody takes a pro-active role in our fight against the pandemic.

One teacher commented:

Community and parental involvement is of paramount importance. Mutual effort by the home, school and the community at large will help us, not only to curb the myths and misunderstanding surrounding the pandemic, but also reduce or even eliminate, the resistance shown by some parents regarding the teaching of sex education to their children. Once we get this much needed support, implementation of policies becomes feasible.

What is noticed is that many of the teachers in this study felt that if the implementation of the HIV/AIDS policy is to succeed, there is need for collaboration of various stakeholders. While teachers and the school leadership should champion the implementation, the participation of various stakeholders and the support from these stakeholders would ensure that the implementation succeeds.

CONCLUSION

Overall, the results of this study revealed that while the HIV/AIDS policy exist in schools, not all schools effectively implement it. It was also observed that these policies vary from school to school; each school has its own policy derived from the National HIV/AIDS policy. The implementation of the policy in schools is beset by a number of challenges such as lack of knowledge and commitment on the part of the teachers, resistance from some parents to have their children learn issues to do with HIV/AIDS and sexuality, lack of support from some stakeholders etc.

The study also saw the need for various stakeholders to take part in and to support teachers in their endeavours to implement the HIV/AIDS policies in schools.

RECOMMENDATIONS

Based on the observations made in this study, the following recommendations were made:

School principals should ensure that all teachers know the HIV/AIDS policy in their schools and that all teachers should implement this policy for the benefit of the learners. For the successful implementation of this policy, teachers need the support of various stakeholders such as parents, NGOs and communities. The study also sees the need for a common policy for all schools to ensure uniformity of content taught. This would also make implementation easier since teachers from various schools can help each other.

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