

Effectiveness of HIV/AIDS School-based Programme Delivery on Behaviour Change for Sustainable Development among Zimbabwean ‘O’ Level Secondary School Students

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Abstract

This study was carried out to find out the effectiveness of HIV/AIDS School-based programme delivery on behavior change for sustainable development among Zimbabwean ‘O’ secondary school students. The sample consisted of one hundred and twenty students, twenty-four teachers and twelve school heads, drawn from the twelve secondary schools in Gweru Urban District of Zimbabwe. Simple random sampling technique was used to come up with a sample of students while teachers and heads were purposively sampled. Questionnaires were administered to students and teachers while school heads were interviewed. The study found out that the school based programme is effective to a reasonable extent. The majority of the respondents rated the programme as important since it helped to bring awareness to students that AIDS is a reality. Heads revealed that HIV/AIDS should be examinable for it to get the attention that it deserves. Results indicated that students were aware of the objectives of the programme. Students revealed that areas mostly emphasized in delivery were, peer pressure resistance and decision making, communication and attitudes and facts about HIV/AIDS. Students revealed that they had managed to maintain and or change their behaviour as a result of programme delivery. However teachers indicated that peer pressure remained a serious problem among the youth and rendered some aspects of the programme ineffective. Some heads indicated that behaviour change was a long term process which required a close follow-up. One of the heads indicated that students benefitted from the programme. Peer education was rated an effective strategy in programme delivery. Teachers and heads cited time constraints, some students’ negative attitudes, shortage of resources and large enrolments as some of the major challenges in programme delivery. Students cited problems of peer pressure and unavailability of literature and unruly behaviours. Students revealed that teachers tended to place too much emphasis on abstinence without dealing with real issues. Students suggested the need for more advanced teaching on HIV/AIDS. Teachers and heads pointed out the need to intensify peer education and staff development, an improvement in resource allocation and making HIV/AIDS examinable. The study recommended that government allocate a substantial amount of financial resources towards delivery of school-based HIV/AIDS programmes for sustainability. Emphasis should be placed on empowering students through life skills training to fight against the pandemic. Policy makers and implementers should place emphasis on the success of the programme to ensure sustainable development.

Keywords: effectiveness, HIV/AIDS, behaviour change, sustainable development

1. Introduction and Background

Meaningful and sustainable development cannot occur if the HIV/AIDS epidemic continues to drain human resources and institutional capacities that fuel sustainable development. The epidemic is affecting human capital and there is need for mitigation strategies. With its global reach, HIV/AIDS is blocking progress towards the Millennium Development Goals that the international community has committed to reach by 2015 (UNAIDS, 2002). In a related report, UNESCO (2009) reports that according to the UNAIDS, 2008 Global Report on the AIDS epidemic only 40% of young people aged 15 to 24 had accurate knowledge about HIV/AIDS transmission. It should come as no surprise that against this background of insufficient levels of basic knowledge, young people aged 15 to 24 account for 40% of all new infections. HIV stands for Human Immunodeficiency

Syndrome (UNICEF, 1994). The virus causes failure on the part of the human immune system. Adolescents need to be aware of threats to their immunity so that they can accept the preventive measures against the epidemic. They can only become aware of these facts through educational programs, awareness campaigns by the media and support groups for sustainable development.

There are strong arguments which have been put forward for early and universal sex education, through educational programmes. Foreman (1999) argues that 60 million boys and 60 million girls who reach sexual maturity each year worldwide must have the conviction for the need to protect themselves and their partners against HIV/AIDS. Thus, young people can understand the implications of sexual activity and develop skills to refuse if they wish, through appropriate sex education. Learning about acceptable behavior, physical changes that take place and other changes, as they reach puberty is important. Equipping young people with knowledge, skills and capacity to protect themselves against HIV/AIDS is a prerequisite for turning the epidemic around (WHO, 2001). There is evidence that greater educational achievements correlate strongly to reduced risky behaviour in places where the epidemic is well entrenched. Yet as schooling deteriorates, an ideal avenue for prevention programmes that reach young people and put them at the centre of the response can be lost also. When formal education is cut short due to poverty, effects of HIV/AIDS and other factors, boys and girls have to resort to survival strategies that include sexual transactions that expose them to higher risks of HIV transmission (UNESCO, 2009). UNAIDS and WHO (2000) and SAFAIDS (2002) reports that studies which have been carried out by the World Health Organization showed that sex education programmes can actually encourage young people to postpone penetrative sexual intercourse. Young people who are not sexually active should be encouraged to abstain until they are in the right relationship. They also need to be emotionally and physically ready. In some cases where the youth are already sexually active, the programmes help the young people to reduce the number of partners or to practice safer sex (UNAIDS, 1999). Researches by WHO (2004) have shown an association between higher educational levels and increased awareness and knowledge of HIV/AIDS. Thus, teaching should help develop effective life skills, responsible decision making and self-esteem (UNICEF, 1994). Each individual is encouraged to respect his or her own body and to understand their responsibilities to others. UNESCO (2001) reported that in the early 1990s, WHO/UNESCO established and evaluated seven pilot projects for school based AIDS education in five African countries, Latin America and the Pacific. One of the important lessons learned in the projects was that as a result of AIDS education, students increased their knowledge about HIV/STIs and their prevention. Young people's views and needs, as well as their equal participation in life skills programmes were to be given priority.

Young people usually find themselves in situations where it is difficult to adhere to cultural activities and strict sexual rules even if they are willing to do so (Jackson, 2002). Numerous pressures arise for boys and girls to engage in sexual activity. Biological, social and economic pressures may encourage young people to have sex, while a sense of morality, religion, tradition and family pressures are likely to discourage girls from engaging in sex, but not necessarily boys (UNICEF, 2001). It is unfortunate that this double standard between males and females concerning sex and gender inequality in power, economic independence and status combine to make a highly dangerous mix for HIV transmission and for reproductive health as a whole.

There is need for the application of preventive approaches that are based on personal empowerment, self-esteem, opportunities for decision-making, personal responsibility and building capacity. Taking the empowerment approach does not mean absence of social controls, but the controls are not enforced, they are effectively internalized by individuals (UNESCO, 2004). Empowering young people is the best strategy to help keep them safe. UNESCO (2004) contends that in the wake of HIV/AIDS pandemic, young people now find themselves having to make decisions that would otherwise be made by adults. Young people should be involved in all activities in the plan of action as partners with real decision-making power, responsibility and accountability. Through empowerment young people develop assertiveness which is the ability to express one's views clearly. Being assertive also means to stand up for one's and other people's rights. Assertiveness is a skill, meaning that it is something which young people should learn through educational programmes. Empowerment also helps youth to fight negative pressures. Peer pressure is often negative in terms of sexual behaviour, clothing, music and drug abuse. The pressures on boys and girls overlap but they differ in crucial aspects. Girls may be driven into transactional sex because of their low socio-economic status and lack of economic options. They have greater exposure to sexual abuse which may result in unwanted pregnancies and HIV infection, through unprotected sex. Boys are driven into drug and alcohol abuse (Zimbabwe Human Development Report, 2003).

Positive peer influence is an important determinant of sexual behaviour and peer education seeks to provide a collective negotiation of sexual behaviour (Campbell et al, 2005). Young people should be supported to help themselves and others through peer education. Peer education has been used extensively in Sub-Saharan Africa

in the Southern Region. Visser (2007) contends that compared to programmes that are planned and implemented by adults, youth to youth initiatives have distinct advantages. Peer education typically involves members of a given group striving to effect change in other members of the same group (SAFAIDS, 2002). UNAIDS (2002) reports that studies have shown that young people are likely to imitate or model well liked and respected peers. Therefore, peer leaders who exhibit healthy, responsible behaviours can influence the behaviour of other peers in a positive way. According to SAFAIDS (2002) it is important for peer leaders to be trained and supported in many roles and responsibilities they will be expected to fulfill in the programme on HIV/AIDS/STIs. Through training peer leaders becomes good listeners, provide feedback and will be able to understand feelings of their peers. A peer leader will also have knowledge of sources of information and counseling procedures so that students can be referred to appropriate help. Counseling helps students to work through their difficulties (SAFAIDS, 2001).

In Zimbabwe many Non- Governmental Organizations have launched HIV/AIDS programmes as intervention strategies among the youth. According to World Bank (2002), Africare, an adolescent reproductive health project, was established in year 2000 in collaboration with the District Education Office in Mashonaland Central Province. The programme target youth aged ten to twenty-four years in both primary and secondary schools and has expanded to work with sixty-one schools. The goal of the programme is to contribute toward reduction in the transmission of HIV/AIDS through effectively reaching adolescence with reproductive health information and promoting positive attitudes and behaviours. Midlands AIDS Services Organization (MASO) is a Youth Alive Initiative Project which was started in 1996 through donor funds. The target groups for the program are 10 – 24 year olds, in and out of school youth in urban and rural areas of the Midlands Province of Zimbabwe. This study covers schools in Gweru Urban District, which is within the Midlands Province and is also served by MASO. The programme aims to reduce the prevalence of HIV/AIDS in the general population and to encourage safer sexual practices among the youth and also promote positive living among the infected and affected.

Since 1992, the Ministry of Education, Sport and Culture has been implementing the HIV/AIDS and life-skills education in schools from grade 4 to A' Level through the AIDS Action Programme for Schools. This programme was compulsory for all schools and remains compulsory in the phase under evaluation (Ministry of Education Sports and Culture Director's Circular No.2 2003). The intervention was instituted out of the realization that Ministry of Education Sports and Culture is key to the fight against the pandemic because of its role in the development of children and the intensive interaction it consequently has with people and students. Issues that are important and relevant to young people are taken as a starting point.

Ministry of Education Sports and Culture Director's Circular No. 3 of 2003 states that the HIV/AIDS and Life Skills education aims at preventing and reducing prevalence of HIV/AIDS/STIs among in-school youth, teachers and the school community as a whole. The vision of the Ministry of Education, Sport and Culture is to provide HIV/AIDS education, addressing prevention and impact mitigation that nurture and promote positive values, attitudes and responsible behaviour within the education sector. The Ministry has to effectively coordinate the response of the education sector to the HIV/AIDS epidemic and to provide up-to-date and relevant information on HIV/AIDS to children, youth and adults that instill values and attitudes leading to positive behaviour change and a reduction in the incidents of HIV/AIDS and STIs.

An acceptance of AIDS education as a means of preventing the spread of AIDS is a necessity. Students should have knowledge and understanding of AIDS issues and problems through the use of participatory methods thereby ascertaining maximum participation from all students (Makawa et al, 1992). Desirable attitudes, self-assertiveness, confidence and self-esteem should be developed as students relate to their peers and adults. The programme aims at fostering a new youth identity as students' consciousness of themselves as members of a relatively uninfected group. These are viewed as the "Window of Hope" for an AIDS-free generation (Chavunduka et al, 2004). It is important to establish the effectiveness of HIV/AIDS program delivery and behaviour change for sustainable development among 'O' Level students in Zimbabwe secondary schools.

2. Statement of the Problem

Meaningful and sustainable development as stated in the millennium development goals cannot be achieved if the HIV/AIDS epidemic continues to take its toll among the youth. Reducing HIV transmission, through promoting behaviour maintenance and behaviour change is central to combating the epidemic for sustainable development. The HIV/AIDS programme was meant to enable learners to change their sexual behaviour in order to prevent and control the spread of HIV/AIDS virus among the youth. An acceptance of HIV/AIDS empowerment and life skills programmes as a means of preventing the spread of the virus among the school going- age youth ensures sustainability. Although various studies suggest high levels of awareness of HIV/AIDS

among students, there is still lack of observable behaviour change among them. The school based programmes aim at fostering a new youth identity as students acquire knowledge that empowers them to fight against the epidemic in consideration of the fact that HIV/AIDS was recognized as the cross-cutting critical issue in sustainable development. This study sought to answer the following main question:

How effective is the HIV/AIDS school based education programme delivery in bringing about behaviour change in the fight against the epidemic for sustainable development?

3. Methodology

3.1 Research Design

This research study was informed by the descriptive survey research design. The purpose of the research design is to plan, structure and execute the study in such way that validity of findings is maximized (Cohen and Minion and Morrison, 2011). The study intended to find out the effectiveness of school based HIV/AIDS programmes in terms of delivery and behaviour change among Zimbabwean secondary school students. It was felt necessary to apply both qualitative and quantitative approaches. This allowed for an in-depth discovery of students, teachers and heads' views on the social phenomenon under study.

3.2 Population and Sample

In this study the population was made up of 12 secondary schools in Gweru urban district. Population entails a well defined group of people or a set of human beings such as students (Cohen, Manion and Morrison, 2011). All Ordinary level students, teachers and heads in the 12 secondary schools made up the population of the study. The researcher focused on Gweru urban secondary schools because they had an accessible population. The sample for this study was made up of 120 Ordinary level students, 10 from each school, 24 teachers and 12 heads of schools. Simple random sampling was used and 62 girls and 58 boys were selected. Purposive sampling was used to select teachers and school heads.

3.3 Research Instruments

Three instruments were used. Separate questionnaires with closed and open-ended items were administered to teachers and students. Open ended items allowed greater freedom of expression for the respondents and provided a wide range of responses. An interview schedule was used to solicit information from school heads.

3.4 Data Collection Procedure

The research started with a pilot study. Only two schools were used. This was to test the validity of the instruments as well as the relevance of the questions. Questionnaires for this study were administered personally and collected soon after completion. This was the most convenient procedure for the researcher. The advantage of administering the questionnaires personally was that a 100% return of questionnaires was witnessed. The researcher also conducted interviews personally.

3.5 Data Analysis Plan

Both quantitative and qualitative techniques were used. Quantitative data were presented in frequency tables and percentages. Interview data were analyzed using the thematic content analysis technique. This made it possible to identify views of school heads regarding HIV/AIDS education programme delivery and behaviour changes for sustainable development among Zimbabwean 'O' Level secondary school students.

4. Results

Data are analyzed and interpreted in descriptive form. In conducting this research, the researcher wanted to establish whether the teaching of HIV/AIDS was regarded as important and useful by students, who are the target group of the programme. The importance teachers and students place on a particular programme helps in its implementation. Results in Table 1 showed that 91.7% of students regarded the programme as important whilst 8.3% regarded it as not important. Analysis and interpretation of these results revealed that most students believed that the programme is preventive in nature and it provides youth with relevant information on HIV/AIDS.

Table 1. Rating the AIDS action programme: students' responses

	N	%
Important	110	91.7
Not important	10	8.3
Total	120	100.0

The importance teachers place on a particular programme helps in its implementation. Table 2 shows the responses of teachers on the importance of the programme. Results in Table 2 showed that 91.7% of teachers regarded the programme as important whilst 8.3% regarded it as not important. Analysis and interpretation of these results revealed that teachers believed that the programme is preventive in nature and it provides youth with relevant information on HIV/AIDS. Since most teachers regarded the programme as important, they also felt an obligation to deliver.

Table 2. Rating the AIDS action programme: teachers' responses

	N	%
Important	22	91.7
Not important	2	8.3
Total	24	100.0

Answering the question where they were required to express their views about the AIDS Action Programme for Schools since its inception, all heads agreed that it was a very important programme. This was in line with the students and teachers' views on rating the programme, when the majority rated it as an important programme. Some of the ideas which came up from school heads were that the programme:

- *Brings awareness on unprotected sex.*
- *Prevented girls from indulging in sexual activities which lead to unwanted pregnancies.*
- *Brings awareness that AIDS is a reality.*

One of the heads explained that issues of talking about sex were sensitive and were taboo. So, by having sex education as part of the school curriculum, some myths surrounding the subject had been cleared. The programme has also given some teachers the chance to help teenagers to open up on physical and sexual abuse by parents and relatives. However, two of the heads indicated that the programme needed comprehensive support for it to be effective. One head said that it was difficult to give AIDS education full momentum since it was non-examinable. The explanation could be that, although the subject is important, it is difficult for it to get the attention it deserves because the Zimbabwean curriculum is examination oriented.

Respondents were asked to identify key objectives of the AIDS Action Programme for Schools, according to what they were taught at their respective schools. Results in Table 3 showed that the following were key objectives of the programme: teaching youths about HIV/AIDS, 98.3% respondents; making youths aware of the dangers of HIV/AIDS, 97.5% respondents. The other objectives which were ranked highly were, teaching students what they should not do, 91.6% respondents; Abstinence, 90.0% respondents; preventing the spread of HIV/AIDS, 83.3% respondents; preventing youths from getting AIDS, 88.3% respondents. The least objective was, teaching students how to use a condom, 17.5% respondents. An analysis and interpretation of these results showed that the majority of students believed the programme aimed at teaching them about prevention of HIV/AIDS.

Table 3. Key objectives of the AIDS action programme

	Yes		No		Rank
	N	%	N	%	
Teach youths about HIV/AIDS	118	98.3	2	1.7	1
Make youths aware of the dangers of HIV/AIDS	117	97.5	3	2.5	2
Teach students how to use a condom	21	17.5	99	82.5	7
Teach students what they should not do	110	91.6	10	8.4	3
Abstinence	108	90.0	12	10.0	4
Prevent youths from getting HIV/AIDS	100	83.3	20	16.7	6
Prevent the spread of HIV	106	88.3	14	11.7	5

Respondents were asked to indicate people who assisted students who had behavioral problems at school. Results of Table 4 showed that the majority of students, 60% indicated that students got help from school counselors. On the other hand, 21.7% were assisted by teachers whilst 15% got help from HIV/AIDS coordinators. This could mean that students were also aware of the duties of a school counselor.

Table 4. Assisting students with behavioral problems: students' responses

	N	%
School Head/Deputy	4	3.3
School counselor	72	60
Class teacher	28	21.7
HIV/AIDS Coordinator	18	15
Total	120	100.0

Areas of the AIDS Action Programme, mostly emphasized by schools also benefited students. Students were asked to identify such areas as shown in Table5. Results in Table5 showed that 87.5% of the respondents indicated that peer pressure, resistance and decision making were mostly emphasized. Furthermore 83.3% of the respondents indicated that communication and attitudes and facts about AIDS were being emphasized. Also, 79.2% of the respondents indicated that feelings about growing up were mostly emphasized. Lastly 75.0% of the respondents indicated that relationships were being emphasized.

Table 5. Areas of the programme mostly emphasized by school teachers

	Yes		No		Rank
	N	%	N	%	
Communication	100	83.3	20	16.7	2
Peer pressure resistance and decision-making	105	87.5	15	12.5	1
Attitudes and facts about AIDS	100	83.3	20	16.7	2
Feelings about growing up	95	79.2	25	20.8	4
Relationships	90	75.0	30	25.0	5

In another question, students were asked to identify areas of behavioral maintenance and change in their lives due to their exposure to the AIDS Action Programme for Schools. Reference is made to Table 6. The results in Table 6 showed that the majority of respondents, 94.2% indicated that they maintained and or changed behaviour and 86.7% respondents indicated that they understood things better. Furthermore, 83.3% of the respondents indicated that they learned to make informed decisions and 53.3% respondents indicated that they learned to listen to others more. A small percentage of 18.3% indicated that they learned to use a condom. Analysis and interpretation of these results revealed that the AIDS Action Programme for Schools benefited students in different ways. This paints a bright picture on the success of the programme since the major objective of this programme is behaviour maintenance and behaviour change.

Table 6. Behavioural maintenance and behavior change

	Yes		No		Rank
	N	%	N	%	
Make informed decisions	100	83.3	20	16.7	3
Understand things better	104	86.7	16	13.3	2
Know how to use a condom	22	18.3	98	81.7	5
Listen to others more	64	53.3	56	46.7	4
Behavior maintenance and behavior change	113	94.2	7	5.8	1

Although students indicated significant behavior changes, teachers identified some problems related to HIV/AIDS which students normally encounter. Reference is made to Table7. Results in Table 7 showed that 95.8% indicated peer pressure was a real problem whilst 4.7% indicated that it was not. Drug abuse was indicated to be a problem by 50% respondents whilst 50% respondents showed that it was not a real problem. As for stigmatization 41.7% respondents indicated that it was a problem whilst 38.3% said it was not. Also, 37.5% of respondents indicated that teenage pregnancies and stress were problems that students encountered. Lastly, 25% of the respondents indicated that students encountered sexual abuse. Figure 8 also illustrates the teacher responses to problems encountered by students. Analysis and interpretation of these results showed that peer pressure is a serious problem among youth and paints a gloomy picture of the whole situation if it is not dealt

with.

Table 7. Problems encountered by students

	Yes		No		Rank
	N	%	N	%	
Peer pressure	23	95.8	1	4.7	1
Sexual abuse	6	25..	18	75.0	6
Teenage pregnancy	9	37.5	15	62.5	4
Stigmatization	10	41.7	14	58.3	3
Drug abuse	12	50.0	12	50.0	2
Stress	9	37.5	15	62.5	4

Answering the question on behaviour changes, one of the heads at girls' school stated that attitudes and behaviours of girls were being shaped due to Life Skills and AIDS education. Heads also revealed that change of behaviour was difficult to assess in some students because of a variety of reasons. Behaviour change was a long term process which needed a close follow-up by implementers of the programme. Some students are good at pretending. Some of the heads indicated that students definitely benefited from the programme in different ways. The programme provided psychosocial support to students and that helped in developing the right behaviours in students.

Students also benefited from peer leadership. Students were asked to rate the effectiveness of peer leaders in HIV/AIDS related activities. Responses which were given are shown in Table 8. Results in Table 8 showed 87.5% of the respondents indicated that peer leaders were effective whilst 12.5% said they were not. Teachers were asked to rate the effectiveness of peer leaders in lessons. Responses which were given are shown in Table 9. Results in Table 9 showed 79.2% of the respondents indicated that peer leaders were effective whilst 20.8% said they were not. Ineffectiveness of some of the peer leaders could be attributed to lack of proper training. Heads also indicated the importance of peer leadership when they were answering the question on delivery of the program. Most heads applauded AIDS Action Clubs at their schools. In some schools these clubs were vibrant and the members participated in national activities on HIV/AIDS.

Table 8. Effectiveness of peer educators: students' responses

	N	%
Effective	105	87.5
Not effective	15	12.5
Total	120	100.0

Table 9. Effectiveness of peer educators: teachers' responses

	N	%
Effective	19	79.2
Not effective	5	20.8
Total	24	100.0

The researcher made use of an open-ended question to solicit information on the major problems encountered by teachers on delivery AIDS Action Programme. Some of the responses given are as follows:

- *The time given to the program is too short.*
- *Only members of Youth Alive Club are benefiting.*
- *Staff concentrates on academic achievements.*
- *Some pupils are socially disadvantaged because they lost both parents, so they lack guidance from home.*
- *Not officially put down as another subject. Operate as a club.*
- *Students have a negative attitude towards the subject.*
- *Lack of commitment.*

- *Lack of financial and material resources.*
- *No specialist teachers.*
- *Enrolment is too large.*

Students also answered an open-ended question on challenges surrounding delivery of the AIDS Education Programme. The following sentiments were expressed:

- *Students do not care and do not understand the lessons.*
- *Too much emphasis on abstinence. Give more advice and fewer orders.*
- *Denial and resistance.*
- *Peer pressure is too much.*
- *Too much alcoholism and casual sex activity.*
- *Literature on AIDS is not easily accessible.*
- *Lack of financial and material resources.*
- *Poverty causes problems.*
- *Youth take teaching about AIDS for granted.*
- *Lack of trained counselors.*
- *Lack of confidence to disclose problems*
- *Poor relationships between staff and students.*

Responses made by students revealed some pertinent issues on views of students on the effectiveness of the AIDS Action Programme. Heads also responded to open-ended questions on problems encountered by schools in delivery of the AIDS Action Program. The following sentiments were expressed:

- *Time constraints and large enrolments.*
- *The program needs support.*
- *It is difficult to give it full momentum because it is non-examinable.*
- *AIDS education doesn't warrant an extra teacher.*
- *No specialist teachers.*
- *Teachers shy away.*
- *No follow up mechanisms.*

Responding to an open-ended question on how the program should be supported to ensure its sustainability thereby ensuring its effectiveness, students gave the following responses:

- *Explain the benefits of the program to students.*
- *More advanced teaching on AIDS.*
- *There is need for specialist teachers and trained counselors.*
- *Carry out outreach programs.*
- *Improve and increase medical centers.*
- *Banning alcohol.*
- *Source donor funding.*

Respondents were asked an open-ended question to suggest possible solutions to identified problems. The following are some of the responses made by teachers as suggestions to improve on delivery:

- *Staff development and specialist teachers.*
- *Prepare appropriate syllabus to guide teachers..*
- *Make the subject compulsory.*
- *Provide material and financial resources.*
- *Peer education*
- *Have the subject examined.*

Heads of schools also suggested some solutions to problems which were being encountered by schools in the delivery process. The following are some of the responses:

- *Provide syllabus for AIDS education.*
- *Improvement of resources.*
- *Work towards making it an examinable subject. That has more impact.*
- *Need for specialist teachers.*
- *Projects, for example soap making and gardening.*
- *Monitoring the program.*
- *Stress all preventive methods.*
- *Stress abstinence.*

5. Discussion

Since most teachers and students regarded the programme as important, they also felt an obligation to implement it. According to WHO (2001), school HIV/AIDS programmes are important in that they help young people develop confidence in themselves and reduce their risk of contracting HIV. However, some policy makers, teachers and parents are opposed to the introduction of sex education, because they believe that teaching young people about sexuality, sex and contraception encourages early sexual activity. The explanation could be that, although the subject is important, it is difficult for it to get the attention it deserves because the Zimbabwean curriculum is examination oriented. The importance placed on this program by heads is stressed by Jackson (2002) who stated that key strategies to empower children and young people are sex education and life skills development before they become sexually active. A gender issue was raised by one of the school heads who pointed out that the programme prevented girls from indulging in sexual activities result in unwanted pregnancies. But girls do not fall pregnant on their own. Girls may be driven into transactional sex because of their low socio-economic status and lack of economic options. They have greater exposure to sexual abuse which may result in unwanted pregnancies and HIV infection, through unprotected sex (ZHDR, 2003).

The majority of students believed the programme aimed at teaching them about prevention of HIV /AIDS. As the HIV/AIDS pandemic takes its toll it is imperative that youth have to be empowered with key facts about HIV/AIDS. The education sector is amongst the worst affected. However, education is the key to effective responses to curb the epidemic. Researches by WHO (2004) have shown an association between higher education levels and increased awareness and knowledge of HIV/AIDS. Life skills education is particularly important to help boys and girls learn how to make informed decisions. Three of the objectives stressed prevention and they were also ranked highly. In-school youths know that there is no cure for HIV/AIDS, hence prevention. Young people who are not sexually active should be encouraged to abstain until they are in the right relationship and also when they are physically and emotionally ready. Results on the objective about condom use revealed that most respondents indicated that it was not a key objective. A small percentage who indicated that it was a key objective could be boys because the most commonly used and accepted is a male condom. The argument is that more in-school youths than anticipated engage in sexual activities, hence the need for them to have knowledge of condom use. However, it should be made clear to them that these are not appropriate at their age and that they are not 100% preventive (Foster, 1998). Most girls opt for abstinence due to societal pressures. Biological, social and economic pressures may encourage young people to have sex, while a sense of morality, religion, tradition and family pressures are likely to discourage girls from engaging in sex, but not necessarily boys (UNICEF, 2001).

According to SAFAIDS (2001), a school counselor helps students to work through their difficulties. Students could have fears of stigmatization; as a result very few would go to HIV/AIDS coordinators. Heads and deputy heads usually refer students to school counselors and this could explain why students do not normally seek assistance from administration on issues of sexuality. However,

it should be stressed that being an administrator does not mean that one automatically becomes a good counselor. Training is vital. According to UNICEF (1994) communication is vital in the fight against HIV/AIDS. As young people grow up, they find themselves in many situations where they have to make very important decisions that will have very important consequences for their lives. Sometimes those decisions can mean the difference between life and death. Makawa et al(1992) states that participatory methods encourage maximum participation from all students through verbal and non-verbal communication in life skills development. According to UNESCO (2004) enrichment and networking facts about HIV/AIDS need to be made clear to students so that

they gain confidence in dealing with peer pressure and feelings about growing up. Good relationships with fellow students are built through being cheerful, friendly, cordial, genuine, generous, and considerate and by being alert. Thus good relationships are built on an understanding of oneself and others.

The AIDS Action Programme for Schools benefited students in terms of behaviour maintenance and behaviour change. This paints a bright picture on the success of the programme since the major objective of this programme is behaviour change. Further analysis showed that lessons on HIV/AIDS helped students to acquire knowledge and understanding on HIV/AIDS. UNICEF (1994), states that young people grow up and find themselves in many situations where they have to make decisions that will have very important consequences for their lives and future. Therefore, they need to be empowered with life skills through school based programmes. By citing peer pressure and too much emphasis on abstinence as challenges students brought up some of the most pertinent issues in HIV/AIDS programme delivery. It means there is need for proper planning on intervention strategies. There is need for the application of preventive approaches that are based on personal empowerment, self-esteem, opportunities for decision-making, personal responsibility and building capacity. Taking the empowerment approach does not mean absence of social controls, but the controls are not enforced, they are effectively internalized by individuals (UNESCO 2004).

Results revealed that peer leaders enhanced the success of the programme. Ineffectiveness of some of the peer leaders could be attributed to lack of proper training. According to UNAIDS (2002) many successful programmes have involved peer leaders. World Bank (2002) states that Midlands AIDS Services Organization (MASO) a non-governmental organization has set up Youth Alive Clubs in schools. All schools that make up the sample for this study work hand in hand with MASO. The organization facilitates training of leaders who are volunteer teachers in peer education and they in turn train peer educators on how to run clubs. Peer education also covers knowledge of HIV/AIDS, its transmission, signs and symptoms and the cultural aspect of the disease. Peer educators are also trained in counseling. Visser (2007) contends that compared with programmes that are planned and implemented by the older generation only, youth to youth initiatives have distinct advantages. To begin with, there is need for change of attitudes on the part of students so that they can view AIDS education more seriously than they are doing. Some major problems which were cited as impediments to proper delivery of the programme and behaviour change are peer pressure, alcoholism and casual sex. It has to be accepted that youths indulge in casual sex more than anticipated. Results also revealed that sometimes implementers miss the point by emphasizing abstinence to people who are already sexually active. More health care services need to be put in place for in-school youth. Unavailability of literature on HIV/AIDS makes it difficult for students to understand some of the issues on HIV/AIDS. There is need for change of attitudes on the part of students so that they can view AIDS education more seriously than they are doing. Students stressed the need to intensify AIDS education among in-school adolescents as a solution to curb the pandemic. SAFAIDS (2002) state that sexual health and AIDS education will provide relevant content which when presented in a suitable way will effect positive change thereby ensuring sustainability.

6. Conclusions

All respondents regarded the AIDS Action Programme for Schools as a very important programme. Respondents were also aware of the major objectives of the programme. It was noted that the programme equips students with knowledge and skills necessary for survival. However there are challenges which need to be addressed so that the objectives of the programme are achieved. One can therefore conclude that schools are playing an important role in the delivery of the AIDS Action Programme for sustainable development. According to WHO (2003) school HIV/AIDS programmes are important in that they help young people develop confidence and reduce the risk of contracting HIV. However, students cited some problems which were being encountered and rendered some aspects of the programme ineffective.

7. Recommendations

Government should consider channeling a percentage of AIDS levy towards the education system to support programme delivery. Sustainability of the AIDS Action Programme needs consistent funding, hence the need to channel these funds to the teaching of HIV/AIDS in schools. There is also need for re-injection of funds from other sources.

HIV/AIDS should be allocated a teacher in the staff complement, which is not the case at the moment. Teachers who have full time loads are allocated additional lessons on HIV/AIDS and the load becomes heavy for the teachers.

Policy makers and implementers should place emphasis on the success of the program to ensure sustainable development.

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