Ndamugoba, D; M. Mboya, M; Amani, K; Katabaro, J. K. 2000. The Impact of HIV/AIDS on Primary Education in Bukoba Rural and Kinondoni Districts of Tanzania.

The study sought to examine the impact of HIV/AIDS on delivery of primary school education in Tanzania. The study was conducted in Bukoba rural and Kinondoni districts. The choice of these two districts was influenced by the magnitude of the pandemic. It was felt that a rural and urban set up would provide an image that represents the impact of the pandemic in the Tanzanian primary education system. It was also important to compare the rural and urban settings in assessing the impact of HIV/AIDS on the primary education system. The impact of HIV/AIDS was examined in relation to supply of and demand for education. In doing this, it became apparent that a pre-AIDS scenario (1980-1983) and the period thereafter were important phases in assessing the extent of the impact that HIV/AIDS had on education.

The study participants included 1859 pupils, 129 teachers, 71 school committee members, 17 district council officers, 14 NGO and CBO staff and 15 religious leaders. The data collection combined several methods to allow validation and comparison with other areas. These methods included the use of questionnaires, interview schedules, documentary reviews, focus group discussion and observations. The collection instruments were pilot-tested and necessary changes were made prior to execution of the study. A few limitations were experienced in the course of conducting the study. First, it was difficult to obtain adequate data for the period covering 1980 - 1983 because there were not enough records. Secondly, it was difficult to establish whether or not persistent illnesses and deaths among teachers, pupils and parents/guardians were due to HIV/AIDS or other causes.

Regarding the demand of primary education prior to the advent of HIV/AIDS (1980-1983), the study findings revealed that school enrolment was growing, many children of school going age were enrolled in both Bukoba rural and Kinondoni Districts. Attendance was high ranging between 75 and 98 percent in Bukoba rural and 89 and 96 percent in Kinondoni District. Truancy ranged between 2 to 25 percent. The number of orphans was manageable by the remaining parents/guardians in terms of meeting school costs. Parents/guardians were able to pay fees and other school contributions.

On the impact of HIV/AIDS on the supply of education (1980-1983) it was found that the student teacher ratio was 1:40 as compared to the recommended ratio of 1:45. The teacher's attendance was above average or very good ranging between 75 and 85 percent both in Bukoba rural and Kinondoni Districts. There was an adequate supply of materials that facilitated the teaching and learning process. The primary education graduates were considered to have acquired the basic skills necessary for community life after school. The effects of HIV/AIDS from 1983 to date have caused impacted significantly on primary education, thus reversing the trend on supply and demand of the system.

The findings on the impact of HIV/AIDS on the supply of primary education indicated that the number of teachers in both districts was adequate in comparison to the number of classrooms. However, this number was not commensurate with the expected number of pupils (eligible) to be enrolled. In Kinondoni the teacher-pupil ratio was above 1:45. Teachers' average attendance was about 73 (low compared to pre AIDS era) due to teacher frequent illness, absenteeism and social obligations caused by AIDS etc. Also teachers' ill health and the increasing death rate of

qualified and experienced teachers caused psychological tension and emotional stress among both teachers and pupils. The school plant, teaching and learning facilities are limited given the pupils' academic needs. Most of the classrooms are dilapidated. Parents/guardians and the community ravaged by HIV/AIDS have difficulties in coping with the socio-economic environment.

The demand of primary education from 1983 to date was impacted by HIV/AIDS. Pupil's attendance dropped from an average 86.5 percent to 77 percent and 92.5 percent to about 84 percent in Bukoba rural and Kinondoni districts, respectively. Most of the absentees, truants and dropouts were orphans. In some schools, the number of orphans has reached the alarming level of 49 per cent of the pupil population. One of the schools in Bukoba Rural had 3.7 and 17 orphans in 1981, 1982 and 1983 respectively. The same school had 119, 125 and 125 orphans in 1998, 1999, 2000, respectively.

The findings further revealed that orphans were perceived as troublemakers because of lack of parental love, guidance and care. Orphans are stigmatised and discriminated. They are enrolled at a later age compared to non-orphans. Many of them fail to pay for their health services, fees and other school contributions. Orphanhood and poverty have increased the burden to the already over-stretched social safety nets. This has reduced the capacity of the parents/guardians and the community in general to contribute to primary education development. The government fiscal budget for primary education is limited to cater for the increasing school needs.

It was revealed that pupils were aware of the problems facing people affected by HIV/AIDS and of the effects of HIV/AIDS on teachers, pupils, parents/guardians and the community. Pupils' perceptions on the impact of HIV/AIDS had implications on their school performance.

The study further indicates that teachers teaching time was wasted due to absenteeism arising from the effects of HIV/AIDS or other social obligations related to AIDS. Pupils also failed to attend regularly for reasons related to the impacts HIV/AIDS. Time wasted and inconsistencies inhibited the smooth implementation of the primary school curriculum.

Furthermore, it was also noted that the MOEC introduced HIV/AIDS education in the curriculum initiated the development and printing of core and HIV/AIDS supplementary teaching and learning materials. Apart from introducing family life education which would provide the necessary life skills. HIV/AIDS education reduced the number of science subjects in the timetable from three to two. It was noted that policies to promote primary school enrolment, regular school attendance and effective teaching-learning have failed to work effectively, partly because of AIDS. HIV/AIDS orphanhood has inhibited orphans' education due to the costs involved. The new policy to exempt orphans from paying fees remains unclear and in many schools it is not operational. It is argued that the policy contradicted the cost sharing policy.

In the light of the above findings, the study puts forward the following conclusions and recommendations:

That a significant number of qualified and experienced teachers experience ill health, others have died, and that some died because of HIV/AIDS. It is recommended that the government should make deliberate efforts to extend health insurance to primary school teaches and allocate more

teachers to regions and districts seriously affected by HIV/AIDS to check the possible shortage due to death and poor health conditions.

That after the HIV/AIDS scourge, school plants and teaching facilities are inadequate and some are dilapidated. It is recommended that the government through the Ministry of Education and Culture should launch a multi-sectoral approach to rehabilitate and build primary education infrastructure.

The number of orphans is increasing rapidly in the primary education system in Tanzania, yet many are mistreated, stigmatised, conceived as troublemakers and enrolled later or not enrolled at all. It is recommended that the Ministry of Education establish education guidance and counselling to schools, CBOs and NGOs to target groups to redress the situation.

That some schools have limited capacity to enrol all eligible children in their catchment areas. This limitation was found to have implications on the admission of children affected by HIV/AIDS. It is recommended that the programme to eradicate poverty in the country should give priority to construction of primary school classes and provision of school materials and teaching-learning facilities. It should also support children in AIDS afflicted households so that they can attend school to completion.

It is further concluded that the government fiscal budget for primary education sector is still limited to cater for all the needs of school. It is recommended that the government expenditure on education should be increased. Deliberate efforts are to be made to primary schools in the HIV/AIDS affected communities.

It is also concluded that policies formulated by the government to promote school enrolment, attendance and effective teaching-learning process were found not to be functioning properly. It is suggested that the government should re-evaluate the policies so as to make informed remedies.

The exemption of orphans to pay fee and other contributions was not familiar yet with many schools and still faced some problems in some communities. The practical part of the policy was not clear and needed further clarifications. It is also not a lasting solution for children from the neediest HIV/AIDS households. It is recommended that the policy should be revised so that it is clearly formulated to address the reality of the social conditions.

On the current curriculum, it concluded that important topics on family planning and reproductive health were not adequately covered. It is also concluded that the graduates of primary schools lack requisite skills to enable them to fit into local communities. It is suggested that the relevant bodies should revise school curricula to capture the needs of the communities that have been affected by the pandemic.

This study dwelt on the impact of HIV/AIDS on the Primary School Education Delivery System. It is recommended that research be conducted to investigate the impact of HIV/AIDS on Secondary education delivery system. The study will address the adolescents who are the most risk group.

A study is also required to examine the impact of HIV/AIDS on tertiary education delivery system so as to find out informed solutions to arrest the scourge against the future work force. There is also need for a study to assess the impact of HIV/AIDS on the in schools and out of school orphans. Another area for study is to focus on the financing of education of the needy and orphans.

It is recommended that longitudinal studies be conducted to establish the impact of HIV/AIDS on education. Further areas of research can focus on the differences between girls and boys with regard to the impact of AIDS on education. Different cultural backgrounds in Tanzania also merit further research, as the impact can be different due to the cultural influences despite the fact that education is centrally co-ordinated.

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